



IT-203-ATT

Summary of Other Credits and Taxes

Schedule A, Allocation of Wage and Salary Income to New York State
Schedule B, Living Quarters Maintained in New York State by a Nonresident
Attachment to Form IT-203

| | |
|---------------------------------|-----------------------------|
| Name(s) as shown on Form IT-203 | Your social security number |
| | |

- Complete all parts that apply.
- Complete Schedule A on the back if your wage and salary income is subject to allocation.
- Complete Schedule B on the back if you were a nonresident and maintained living quarters in New York State.

Part I — Other New York State Credits *(see instructions, page 22)*

| | | | |
|--|----------|--|--|
| 1 Resident credit <i>(from Form IT-112-R; attach form and copy of return filed with other state or province of Canada)</i> | 1 | | |
| 2 Accumulation distribution credit <i>(attach computation)</i> | 2 | | |
| 3 Investment credit <i>(from Form IT-212; attach form)</i> | 3 | | |
| 4 Special additional mortgage recording tax credit <i>(see instructions)</i> | 4 | | |
| 5 Solar and wind energy credit carryover from 1988 <i>(from Form IT-218.1; attach form)</i> | 5 | | |
| 6 Economic development zone credit <i>(total from Forms DTF-601, DTF-602, and DTF-603; attach forms that apply)</i> | 6 | | |
| 7 Total <i>(add lines 1 through 6; enter here and on Form IT-203, line 59)</i> | 7 | | |

Part II — Other New York State Taxes *(see instructions, page 22)*

| | | | |
|--|-----------|--|--|
| 8 New York State separate tax on lump-sum distributions <i>(from Form IT-230; attach form)</i> | 8 | | |
| 9 Resident credit against separate tax on lump-sum distributions <i>(from Form IT-112.1; attach form and copy of return filed with other state or province of Canada)</i> | 9 | | |
| 10 Subtract line 9 from line 8 | 10 | | |
| 11 New York State minimum income tax <i>(from Form IT-220; attach form)</i> | 11 | | |
| 12 Add-back of investment credit on early dispositions <i>(from Form IT-212; attach form)</i> | 12 | | |
| 13 Add-back of economic development zone investment tax credit on early dispositions <i>(from Form DTF-603; attach form)</i> | 13 | | |
| 14 Add-back of resident credit for taxes paid to a province of Canada <i>(from Form IT-112-R; attach form)</i> | 14 | | |
| 15 Total <i>(add lines 10 through 14; enter here and on Form IT-203, line 61)</i> | 15 | | |

Part III — Other City of New York Taxes *(see instructions, page 23)*

| | | | |
|--|-----------|--|--|
| 16 Part-year city of New York resident tax <i>(from Form IT-360.1; attach form)</i> | 16 | | |
| 17 City of New York minimum income tax <i>(from Form IT-220; attach form)</i> | 17 | | |
| 18 City of New York separate tax on lump-sum distributions <i>(from Form IT-230; attach form)</i> | 18 | | |
| 19 Total <i>(add lines 16 through 18; enter here and on Form IT-203, line 64)</i> | 19 | | |
| 20 Investment credit refund for new businesses <i>(enter here and include on Form IT-203, line 70; see instructions)</i> | 20 | | |
| 21 Net investment credit available for carryover to 1990 <i>(from Form IT-212; attach form)</i> | 21 | | |
| 22 Net economic development zone credit available for carryover to 1990 <i>(from Form DTF-601 or DTF-603, or both; attach forms that apply)</i> | 22 | | |

Attach this form to your Form IT-203

Schedule A

Allocation of Wage and Salary Income to New York State

| | | | | | | | | |
|-----------------------------|---|---|--------------|----------------------|----------------|------------------|----------------|-----------------------------|
| a | Wages, salaries, tips, etc. (to be allocated) | <input type="text"/> | a | | | | | |
| b | Total days in year | <input type="text"/> | b | | | | | |
| c | Nonworking days: | | | | | | | |
| | Saturdays and Sundays | <table border="1"> <tr> <td>Do not count</td> <td rowspan="5"><input type="text"/></td> </tr> <tr> <td>holidays</td> </tr> <tr> <td>sick leave</td> </tr> <tr> <td>vacation</td> </tr> <tr> <td>other nonworking days</td> </tr> </table> | Do not count | <input type="text"/> | holidays | sick leave | vacation | other nonworking days |
| Do not count | <input type="text"/> | | | | | | | |
| holidays | | | | | | | | |
| sick leave | | | | | | | | |
| vacation | | | | | | | | |
| other nonworking days | | | | | | | | |
| | total nonworking days | c | | | | | | |
| d | Total days worked in year (subtract line c from line b) | <input type="text"/> | d | | | | | |
| e | Total days worked outside New York State | <input type="text"/> | e | | | | | |
| f | Days worked in New York State (subtract line e from line d) | <input type="text"/> | f | | | | | |
| g | New York State amount: | | | | | | | |

| | | | | |
|----------|---|----------|---|----------|
| f | x | a | = | g |
| d | | | | |

Include line g amount on Form IT-203, line 1, New York State Amount column.

h Days worked at home included in line e

| |
|----------|
| h |
|----------|

Schedule B

**Living Quarters Maintained
in New York State by a Nonresident**

If you or your spouse maintained living quarters in New York State during any part of the year, give address(es) below.

Address(es)

Check the box next to any living quarters still maintained for or by you.

Enter the number of days spent in New York State in 1989: _____ days

Telephone Assistance

For forms and publications, call toll free (from New York State only) 1 800 462-8100. From areas outside New York State, call (518) 438-1073.

For information, call toll free (from New York State only) 1 800 CALL TAX (1 800 225-5829). From areas outside New York State, call (518) 438-8581.

For refund information only, please wait until after April 17 to call toll free (from New York State only) 1 800 443-3200. From areas outside New York State, call (518) 438-6777.

Telephone assistance is available from 8 a.m. to 5 p.m., Monday through Friday.

If you need to write, please address your letter to:
 NYS Tax Department
 Taxpayer Assistance Bureau
 W.A. Harriman Campus
 Albany, NY 12227

Mail Your Return

Mail your return and attachments in the preaddressed envelope that came with your tax packet. If you do not have one, address your envelope —

For refund returns:
 NYS Income Tax
 W. A. Harriman Campus
 REFUND '89
 Albany, NY 12227-0125

For all other returns:
 NYS Income Tax
 W. A. Harriman Campus
 Albany, NY 12227-0125