IT-203-GR-ATT-B (2003)

Legal name of partnership _____

Special New York State identification number _____

Schedule B - Nonresident partners qualifying and participating in a Yonkers group return *(attach as many Schedule B forms as needed).* Enter negative amounts in parentheses. List partners in alphabetical or social security number order.

A Name *(in either alphabetical or social security number order)* and address of nonresident partner	**B** Partner's social security number	**C** Federal net earnings from self employment	**D** Amount of column C allocated to Yonkers *(see instructions)*	**E** Exclusion amount *(see instructions)*

Totals *(If you are filing more than one attachment, enter the grand totals from all attachments on the last attachment sheet; leave the other total boxes blank.)*

Enter on appropriate line on Form IT-203-GR _____ ▶

Legal name of partnership _____

Special New York State identification number _____

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F Yonkers taxable earnings *(subtract column E from column D)*	G Yonkers nonresident earnings tax *(multiply column F by .0025)*	H Yonkers estimated tax paid/amount paid with Form IT-370	I Balance due *(subtract column H from column G)*	J Overpayment *(subtract column G from column H)*	K Other group returns *(see instructions)*