Legal name of S corporation

▼ Special NY State identification number

Nonresident shareholders qualifying and participating in **New York State group return** *(attach as many Forms IT-203-S-ATT as needed).* Show negative amounts with a minus (-) sign. List shareholders in alphabetical or social security number order.

A Name and address of nonresident shareholder	B Shareholder's social security number	C Shareholder's pro rata share of federal business income *(see instructions)*	D Amount of column C allocated to New York State *(see instructions)*	E Shareholder's pro rata share of federal investment income *(see instructions)*

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F Amount of column E allocated to New York State *(see instructions)*	G Total of column D and column F *(D + F)*	H Shareholder's pro rata share of federal S corporation deductions *(see instructions)*	I Amount of column H allocated to New York State *(see instructions)*	J Net amount of New York additions and subtractions allocated to New York State *(see instructions)*	K New York taxable income *(subtract column I from column G and add or subtract column J)*

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

Enter on the appropriate line on Form IT-203-S ⟶

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L New York State tax *(multiply column K by .077)*	M New York State estimated income tax paid/amount paid with Form IT-370	N Balance due *(subtract column M from column L)*	O Overpayment *(subtract column L from column M)*	P Other group returns *(see instructions)*

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