

Legal name of team

▼ Special NY State identification number

Schedule B — Nonresident members qualifying and participating in a Yonkers group return (attach as many Schedule B forms as needed)

A Name (in either alphabetical or social security number order) and address of nonresident member	B Member's social security number	C Total duty days (see instructions)	D Yonkers duty days (see instructions)	E Yonkers allocation percentage (divide column D by column C)	F Total wages (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. Attach all Forms IT-203-TM-ATT-B to Form IT-203-TM.)
 Enter on the appropriate line on Form IT-203-TM _____



