Legal name of partnership	Special NY State identification number

Schedule A – Nonresident partners qualifying and participating in a New York State group return *(complete as many Schedule A forms as needed).* Show any negative amounts with a minus (-) sign. 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** Partner's share of federal items of income, gain, loss, and guaranteed payment *(see instructions)*	**D** Amount of column C allocated to New York State *(see instructions)*	**E** Partner's share of federal partnership deductions *(see instructions)*
		.00	.00	.00
		.00	.00	.00
		.00	.00	.00
		.00	.00	.00
		.00	.00	.00
		.00	.00	.00
		.00	.00	.00
		.00	.00	.00
		.00	.00	.00
		.00	.00	.00

Totals *(If you are filing more than one Schedule A, enter the grand totals from all Schedules A on the last sheet; leave the other total boxes blank. Submit all Forms IT-203-GR-ATT-A with Form IT-203-GR.)*

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

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Legal name of partnership	Special NY State identification number

F Amount of column E allocated to New York State *(see instructions)*	**G** Net amount of NY additions and subtractions allocated to New York State *(see instructions)*	**H** New York taxable income *(subtract column F from column D, and add or subtract column G)*	**I** New York State tax *(multiply column H by .0882)*	**J** New York State estimated income tax paid/amount paid with Form IT-370	**K** Balance due *(subtract column J from column I)*	**L** Overpayment *(subtract column I from column J)*	**M** Other group returns *(see instr.)*
.00	.00	.00	.00	.00	.00	.00	
.00	.00	.00	.00	.00	.00	.00	
.00	.00	.00	.00	.00	.00	.00	
.00	.00	.00	.00	.00	.00	.00	
.00	.00	.00	.00	.00	.00	.00	
.00	.00	.00	.00	.00	.00	.00	
.00	.00	.00	.00	.00	.00	.00	
.00	.00	.00	.00	.00	.00	.00	
.00	.00	.00	1.00	.00	.00	.00	
.00	.00	.00	.00	.00	.00	.00	
		1.00	.00	.00			

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