

Legal name of S corporation	Special NY State identification number
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Nonresident shareholders qualifying and participating in New York State group return (use 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 (enter here and in columns B2 and B3 on pages 2 and 3)	C Shareholder's pro rata share of federal income (see instructions)	D Amount of column C allocated to New York State (see instructions)	E Shareholder's pro rata share of federal S corporation 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



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B2 Shareholder's Social Security number	F Amount of column E allocated to New York State (see instructions)	G Net amount of New York 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)
	.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
Totals (If you are filing more than one Form IT-203-S-ATT, enter the grand totals from all of them on only one sheet; leave the other total boxes blank. Submit all Forms IT-203-S-ATT with Form IT-203-S.)				
Enter on the appropriate line on Form IT-203-S →		.00	.00	.00

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B3 Shareholder's Social Security number	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 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	
	.00	.00	.00	

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