

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 <i>(see instructions)</i>	D Amount of column C allocated to New York State <i>(see instructions)</i>	E Shareholder's pro rata share of federal investment income <i>(see instructions)</i>



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

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. Attach all Forms IT-203-S-ATT to Form IT-203-S.)*
Enter on the appropriate line on Form IT-203-S  

Please file this original scannable attachment with the Tax Department.



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L New York State tax (multiply column K by .0685)	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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