

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)

<b>A</b> Name (in either alphabetical or social security number order) and address of nonresident member	<b>B</b> Member's social security number	<b>C</b> Total duty days <i>(see instructions)</i>	<b>D</b> Yonkers duty days <i>(see instructions)</i>	<b>E</b> Yonkers allocation percentage <i>(divide column D by column C)</i>	<b>F</b> Total wages <i>(see instructions)</i>

**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 →



