

## New York State Department of Taxation and Finance Nonresident and Part-Year Resident Income Allocation And College Tuition Itemized Deduction Worksheet Attachment to Form IT-203

Name(s) and occupation(s) as shown on Form IT-203

▼ Your social security number

IT-203-B

Complete all parts that apply to you; see instructions. Attach this form to your Form IT-203.

## Schedule A — Allocation of wage and salary income to New York State

Complete a separate Schedule A for each job for which your wage and salary income is subject to allocation.

An additional Schedule A section is provided on the back of this form. If you are required to complete more than one Schedule A, total the amounts from line p on all schedules and include this total on Form IT-203, line 1, in the *New York State amount* column.

Do not use this schedule for income based on the volume of business transacted. See the Schedule A instructions if:

- You had more than one job;
- You had a job for only part of the year; or

• You and your spouse each had a job that requires allocation.

1a	Total days (see instructions)					
		1b Saturdays and Sundays (not worked)				
	Nonworking	1c Holidays (not worked)	1c.			
	days included	1d Sick leave	1d.			
	in line 1a:	1e Vacation	1e.			
		1f Other nonworking days	1f.			
1g	Total nonworking days (add lines 1b through 1f)					
1h	Total days worked	in year at this job (subtract line 1g from line 1a)			1h.	
	Total days included in line 1h worked outside New York State					
1j	Enter number of days worked at home included in line 1i amount					
1k	Subtract line 1j from line 1i					
11	Days worked in New York State (subtract line 1k from line 1h)					
1m	1 Enter number of days from line 1h above				1m.	
1n	Divide line 11 by lin	e 1m; round the result to the fourth decimal place		1n.	•	
10	Wages, salaries, ti	os, etc. (to be allocated) 10.				_•
1p	New York State all	ocated wage and salary income (multiply line 1n by line 1o)				•

Include the line 1p amount on Form IT-203, line 1, in the New York State amount column.

## Schedule B - Living quarters maintained in New York State by a nonresident

Mark an X in the box if NYS living quarters were maintained for you or by you for the entire tax year .....

If you or your spouse maintained living quarters in NYS during any part of the year, give address(es) below. Attach additional sheets if necessary. For column E, mark an X in the box if the living quarters are still maintained for or by you.

A – Street address	B — City, village, or post office	С	<b>D</b> – ZIP code	E
		NY		

Enter the number of days spent in New York State in this tax year ....

Any part of a day spent in New York State is considered a day spent in New York State.



Please file this original scannable attachment with your return.

Enter your social security number

Schedule C — College tuition itemized ded	<b>Iction worksheet</b> (See the instructions for Schedule C.)

1 Are you claimed as a dependent on another taxpayer's New York State tax return for this tax year? ... 1.

• If Yes, stop; you do not qualify for the college tuition itemized deduction.

• If **No**, continue. Complete lines A through H below for each eligible student for whom you paid qualified college tuition expenses. Attach additional sheets if necessary.

		<b>1</b> — Student 1		<b>2 —</b> Student 2		<b>3 —</b> Student 3		
Α	Eligible student's name							
в	Eligible student's social security number (SSN)							
С	Is the student claimed as a dependent on your NYS return? (see instructions)	Yes	No	Yes	No	Yes	No	
D	EIN of college or university (see instr.)							
Е	Name of college or university (see instr.)							
F	Were expenses for <b>undergraduate</b> tuition? (see instructions)	Yes		Yes	No	Yes	No	
G	Amount of qualified college tuition expenses (see instructions)		•		•		•	
н	Enter the lesser of line G or 10,000		•		•		•	

**2** College tuition itemized deduction (add line H, columns 1, 2, and 3; include amounts from any additional sheets). Also enter this amount on Form IT-203, page 2, New York State itemized deduction worksheet, line k.....

Scl	hedule A — Alloo	cation of wage and salary income to New York State				
2a	a Total days (see instructions)					
	Nonworking days included	2b Saturdays and Sundays (not worked)   2c Holidays (not worked)	2b. 2c.			
	in line 2a:	2d Sick leave   2e Vacation   2f Other nonworking days	2e.			
2g	Total nonworking days (add lines 2b through 2f)					
2h	Total days worked in year at this job (subtract line 2g from line 2a)					
	Total days include					
<b>2</b> j	Enter number of days worked at home included in line 2i amount 2i.					
		Subtract line 2j from line 2i		2k.		
21	Days worked in N		21.			
		lays from line 2h above				
2n	Divide line 2I by lir	ne 2m; round the result to the fourth decimal place	2n.	•		
20	Wages, salaries, ti	ips, etc. (to be allocated)			•	
2р	New York State al	located wage and salary income (multiply line 2n by line 2o)			•	
Incl	lude the line 2p am	nount on Form IT-203, line 1, in the New York State amount column.				

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Yes

2.

No

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