IT-203-GR-ATT-A (2004)

Legal name of partnership _____

Special New York State identification number _____

Schedule A - Nonresident partners qualifying and participating in New York State group return *(attach 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)*

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.)*

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

Legal name of partnership _____

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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 .077)*	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)*