

Forms & Instructions

# California 540 & 540A

## 2001 Personal Income Tax Booklet

**Members of the  
Franchise Tax Board**

Kathleen Connell, Chair  
Claude Parrish, Member  
B. Timothy Gage, Member

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## www.ftb.ca.gov

Great information just a click away!

- How to e-file
- Options for paying your tax
- Check the status of your refund
- Contact the FTB and more

## Automated Toll-free Phone Service: (800) 338-0505



A phone symbol in the instructions means that you may get more information about the paragraph or line next to it. Call (800) 338-0505, select personal income tax, then select general information, follow the recorded instructions, and enter the three-digit number by the phone symbol.

For other services, see page 68.

## \$\$\$ for You

**Earned Income Credit (EIC)** – If you earned less than \$32,121 (less than \$10,700 if you do not have any qualifying children), you may be eligible to get the EIC to reduce the federal tax you owe, or get a refund if you do not owe any federal tax. Call the IRS at (800) 829-4477 and enter topic 601 when instructed, or see your federal income tax booklet.

**Refund of Excess State Disability Insurance (SDI)** – You may be eligible for a refund of excess SDI if you had at least two employers during 2001 who together paid you more than \$46,327 in wages. See the instructions on page 13 (Form 540A) or on page 21 (Form 540).

**Homeowner and Renter Assistance (HRA)** – This California program reimburses qualifying homeowners and renters for a portion of the property tax they paid in the prior year. See page 60.

## Important Due Dates

April 15, 2002	Last day to pay the 2001 amount you owe to avoid penalties and interest.* See form FTB 3519 on page 41 for more information. <small>*If you are living or traveling outside the United States on April 15, 2002, the due dates for filing your return and paying your tax are different. See form FTB 3519 on page 41 for more information.</small>
October 15, 2002	Last day to file your 2001 return to avoid penalties and interest computed from the original due date of April 15, 2002.
April 15, 2002 June 17, 2002 September 16, 2002 January 15, 2003	Due dates for 2002 estimated tax payments. Generally, you do not have to make estimated tax payments if your California withholding in each payment period is at least 1/4 of your required annual payment. Also, you do not have to make estimated tax payments if you will pay enough through withholding to keep the amount you owe with your return under \$200 (\$100 if married filing separate). However, if you do not pay enough tax either through withholding or by making estimated tax payments, you may have an underpayment penalty. See Form 540-ES instructions on page 51 for more information.



Having all the  
right forms on hand!



No math!



No midnight trip to  
the post office!

## What Would Make Filing Your Taxes Easier?



No watching the mailbox  
for your refund check!



Having your refund  
in 5-7 days!

***Sound good? Then you are ready to e-file!***



With Internet access you can e-file...

it's easy, fast and secure!

And there are many free options!

*See the next page for details.*

## A Paper Tax Return Is Not Your Only Choice...

# Check Out These Quick and Easy Filing Options

FILING CHOICES	WHAT IS THIS?	FORM TYPES
 <p>Use Commercial Software</p>	<ul style="list-style-type: none"> <li>• Purchase software at the store or visit our Website at <a href="http://www.ftb.ca.gov">www.ftb.ca.gov</a> to download commercial software.</li> <li>• Use a computer to prepare your return.</li> <li>• Use the computer to e-file (electronically transmit) the return to the FTB.</li> </ul>	<p>540 540 2EZ 540A 540NR</p>
 <p>Use the Direct Filing Portal</p>	<ul style="list-style-type: none"> <li>• Visit our Website at <a href="http://www.ftb.ca.gov">www.ftb.ca.gov</a></li> <li>• Check out the commercial software that offers Direct Filing Portal.</li> <li>• Many FREE options available.</li> <li>• Choose your e-file software.</li> <li>• Use the computer to e-file (electronically transmit) the return on the Internet to the FTB.</li> </ul>	<p>540 540 2EZ 540A 540NR</p>
 <p>Use fillable Form 540 2EZ found on the FTB Website</p>	<ul style="list-style-type: none"> <li>• Visit our Website at <a href="http://www.ftb.ca.gov">www.ftb.ca.gov</a></li> <li>• Follow the directions to complete your fillable form.</li> <li>• Print your return and mail it to the FTB.</li> </ul>	<p>540 2EZ</p>

## Are you looking for the quickest, easiest way to file your tax return?

You know that you can file your return using one of the paper forms in this booklet. Or, you may decide to visit a tax professional who will handle your tax preparation for you. But, if you're looking for the quickest, easiest way to prepare your own return, check out the chart below. Then, log on to our Website at [www.ftb.ca.gov](http://www.ftb.ca.gov) and get ready to e-file this year!

BENEFITS	TIPS	COSTS
<p><b><u>Fast Refund</u></b> Get your refund in about 5-7 days if you request Direct Deposit.</p> <p><b><u>Easy to Pay</u></b> If you owe money, you can have your payment automatically withdrawn from your account or use your credit card to pay.</p> <p><b><u>Easy to Use</u></b> Software does the math.</p> <p><b><u>Confirmation</u></b> The software you use will notify you that the FTB received your return.</p>	<p>A few commercial software companies offer free state e-file.</p> <p>Make sure your software provides e-file for your state return!</p> <p>Commercial software varies in cost. Be sure to do some comparison shopping.</p>	<p><b>Free?</b></p> <p>Costs vary based on the product and where you purchase it.</p> <p>Some commercial software is free for your state return, but still costs for your federal return. Some companies charge for both.</p> <p>Costs range from about \$9.95 to \$24.95.</p>
<p><b><u>Fast Refund</u></b> Get your refund in about 5-7 days, if you request Direct Deposit.</p> <p><b><u>Easy to Pay</u></b> If you owe money, you can have your payment automatically withdrawn from your account or use your credit card to pay.</p> <p><b><u>Easy to Use</u></b> Software does the math.</p> <p><b><u>Confirmation</u></b> Know that the FTB received your return: Find out by visiting our Website at <a href="http://www.ftb.ca.gov">www.ftb.ca.gov</a></p>	<p>There are three commercial products available through the Direct Filing Portal. One company offers free state e-file for all California forms. The other two offer free e-file to certain taxpayers based on income.</p> <p>Commercial software varies in cost. Be sure to do some comparison shopping.</p>	<p><b>Free?</b></p> <p>Some commercial software is free for your state return, but still costs for your federal return. Some companies charge for both.</p> <p>Costs range from about \$9.95 to \$24.95.</p>
<p><b><u>Safe Refund</u></b> Use Direct Deposit and get your refund deposited in your bank account in about 6 weeks.</p> <p><b><u>Convenient</u></b> Available on our Website: <a href="http://www.ftb.ca.gov">www.ftb.ca.gov</a></p>	<p>Interested in a fillable form? Then this is the choice for you!</p>	<p><b>Free!</b></p> <p>The FTB imposes no fee using the fillable form. The 540 2EZ is found on FTB's Website.</p>

# What's New for 2001?

## Differences Between California and Federal Law

In general, California law conforms to the Internal Revenue Code (IRC) as of January 1, 1998. However, there are continuing differences between California and federal law. California has not conformed to most of the changes made to the IRC by the Internal Revenue Service Restructuring and Reform Act of 1998 (Public Law 105-206) and the Ticket to Work and Work Incentives Improvement Act of 1999 (Public Law 106-170). California has not conformed to any of the changes made by the Tax and Trade Relief Extension Act of 1998 (Public Law 105-277), the Miscellaneous Trade and Technical Corrections Act of 1999 (Public Law 106-36), the FSC Repeal and Extraterritorial Income Exclusion Act of 2000 (Public Law 106-519), the Consolidated Appropriations Act of 2001 (Public Law 106-554), and the Economic Growth and Tax Relief Reconciliation Act of 2001 (Public Law 107-16).

## 2001 Tax Law Changes

**Solar Energy System Credit** – A new credit is available for the purchase and installation of a solar energy system. For taxable years beginning on or after January 1, 2001, and before January 1, 2006, there will be allowed a credit equal to the lesser of 15% for tax years 2001 through 2003 or 7 1/2% for the tax years 2004 and 2005 of the net cost paid to purchase and install a solar energy system for the production of electricity, or \$4.50 per rated watt of generating capacity of that system.

**Homeowners' and Renter's Assistance (HRA)** – The HRA refund amounts allowable have increased by 45%.

**Joint Strike Fighter Wage Credit** – California allows a 50% credit for wages paid or incurred for each qualified employee for duties related to a joint strike fighter.

**Joint Strike Fighter Property Credit** – California allows a credit for 10% of the cost of property placed in service in California for ultimate use in a joint strike fighter.

### Amended/Extended Credits

- The Employer Child Care Program Credit and the Employer Child Care Contribution Credit are extended to taxable years beginning before January 1, 2007.
- The Community Development Financial Institution Investments Credit was amended to do all of the following:
  - Extend the repeal date to January 1, 2007,
  - Rename "qualified deposits" to "qualified investments" and define "qualified investments,"
  - Limit the amount of the investments eligible for the credit, and
  - Require FTB to advise and assist in the administration of the credit.

**New Deduction** – A deduction is allowed for interest paid on any loan or financed indebtedness from a utility company to purchase energy efficient equipment and products for California residences.

### Net Operating Losses (NOLs) and Disaster Losses

Taxpayers are allowed special treatment for losses sustained as a result of the 2000 Napa valley earthquake. These disaster losses can be:

- Carried back to the 1999 tax year (if an election is filed by the extended due date for the taxable year in which the disaster actually occurred) and carried forward at 100% for five years, then carried forward an additional 10 years at 50%, or
- Claimed in the 2000 taxable year and carried forward at 100% for five years, then carried forward an additional 10 years at 55%.
- For taxable years beginning on or after January 1, 2001, and before January 1, 2003, farmers are allowed a deduction for losses sustained due to Pierce's disease and its vectors. This loss may create an NOL, which is allowed to be carried forward for 9 years at 100%. The NOL may be deducted only from income apportioned to the area affected by Pierce's disease using a two-factor formula.

### New California Income Exclusions

- The excludable gain on the sale of a principle residence will no longer be included in the gross income threshold amount triggering a California tax return filing requirement.
- Amounts received as rebates or vouchers from a local water agency, energy agency, or energy supplier for the purchase and installation of water conservation appliances and devices are excludable from income.

- Compensation for erroneous convictions is excludable from California income.

**Electronic Postmarks** – California law will now conform to the federal law that permits electronic postmarks to be proof of the date of an e-filed return.

**Innocent Investors** – Taxpayers can notify the FTB of their innocent investor status in an abusive tax shelter. If substantiated, FTB will be prohibited from seizing and selling their principal residence.

**Principal Business Activity (PBA) Code** – The Franchise Tax Board will now require individuals to include their PBA code on the face of their tax return. FTB is authorized to disclose a taxpayer's name, address, social security number or taxpayer identification number, and PBA code to city tax officials under specific limited circumstances.

**New Voluntary Contributions Fund** – You may make voluntary contributions to the Lupus Foundation of America, California Chapters Fund. See page 23.

## Head of Household Filing Status

The Proposition 22 Legal Defense and Education Fund recently filed a cause of action in Sacramento Superior Court challenging the Board of Equalization's decision in the Hisserich case. The court issued a writ of mandate ordering FTB not to follow the Hisserich decision for purposes of determining head of household filing status. The final outcome of this court action is unknown at this time.

## Tax Form Changes

- Form FTB 3506, Child and Dependent Care Expenses Credit form has been developed for taxpayers claiming this credit.
- Schedule P (540) and instructions are not included in the resident booklet but will instead be mailed separately to taxpayers who filed one last year.

## Tax Tools for You

### Tax Tools at [www.ftb.ca.gov](http://www.ftb.ca.gov)

- Request electronic funds withdrawal to pay tax.
- Look up your account balance or estimated tax payments.
- Check on the status of your refund
- Get your CSN (customer service number)
- Request an installment agreement when you cannot pay the tax you owe.
- E-mail tax questions.
- Use fillable forms or download and print tax forms and publications.

## We Welcome Your Comments

We at the Franchise Tax Board want to make doing business with us as easy, convenient and efficient as possible for you. Moreover, we are always looking for ways to better meet your needs. To find out what taxpayers want, we conduct surveys and seek feedback.

To ensure that we provide the products and services you need, we are working to increase the options available to you. Over the past several years, we have begun to offer you new ways of getting information and help, filing your return, and paying your taxes. We will continue to work to provide new service delivery options to better serve you.

Because we are also mindful of the need for government to spend tax dollars wisely, we also are working to reduce costs while improving results. We appreciate the trust that you place in us to keep your tax information safe and private, and pledge to continue to safeguard the information that you send to us both on paper and electronically.

Your comments and suggestions provide valuable input. We want you to tell us what you think we are doing well, as well as what we can do to improve our products and services to better suit your needs. You can help us by sending me your comments and suggestions. Please write to me at:

**Email:** Go to [www.ftb.ca.gov](http://www.ftb.ca.gov) and select "Send email to the Executive Officer"

**Mail:** GERALD GOLDBERG, EXECUTIVE OFFICER  
FRANCHISE TAX BOARD  
PO BOX 942840  
SACRAMENTO CA 94240-0040

# Which Form Should I Use?



e-file and you won't have to decide which form to use! The software will select the correct form for you.

## Were you a resident of California during the entire year 2001?

**Yes.** Check the chart below to see which form to use.

**No.** You must use the Long or Short Form 540NR. To download or order the California Nonresident or Part-Year Resident Income Tax Booklet, see page 67, "Where to Get Income Tax Forms and Publications."

	<b>Form 540 2EZ</b> Form not included in booklet. *See the note at the bottom of this column.	<b>Form 540A</b>	<b>Form 540</b>
<b>Filing Status</b>	Single, married filing joint, head of household, qualifying widow(er), under 65 and not blind	Any filing status	Any filing status
<b>Dependents</b>	0-3 allowed	All dependents you are entitled to claim	All dependents you are entitled to claim
<b>Amount of Income</b>	Total income of: • \$50,000 or less if single or head of household • \$100,000 or less if married filing joint or qualifying widow(er)	Any amount of income	Any amount of income
<b>Sources of Income</b>	Only income from: • Wages, salaries, tips • Taxable interest of \$400 or less • Taxable scholarship and fellowship grants (only if reported on Form W-2) • Unemployment compensation <b>Note:</b> If you can be claimed as a dependent by another taxpayer, (or your spouse if married) and your TOTAL income is less than or equal to \$9,810 if single; \$19,570 if married filing joint or qualifying widow(er); or \$13,870 if head of household, you cannot use Form 540 2EZ.	Only income from: • Wages, salaries, tips • Taxable scholarship and fellowship grants • Interest and dividends • Unemployment compensation reported on Form 1099-G • Social security benefits • Tier 1 and tier 2 railroad retirement payments • Fully and partially taxable IRA distributions, pensions, and annuities • Alimony	All sources of income
<b>Adjustment to Income</b>	No adjustments to income	Allowed if the amount is the same as your federal adjustments to income	All adjustments to income
<b>Standard Deduction</b>	Allowed	Allowed	Allowed
<b>Itemized Deductions</b>	No itemized deductions	Allowed if the amount is the same as your federal itemized deductions (except for state, local, and foreign taxes paid)	All itemized deductions
<b>Payments</b>	Only withholding shown on Form(s) W-2	• Withholding shown on Form(s) W-2, W-2G, and 1099-R • Estimated tax payments • Payments made with extension voucher • Excess State Disability Insurance (SDI) or Voluntary Plan Disability Insurance (VPDI)	• Withholding from all sources • Estimated tax payments • Payments made with extension voucher • Excess State Disability Insurance (SDI) or Voluntary Plan Disability Insurance (VPDI)
<b>Tax Credits</b>	• Personal exemption credit • Up to 3 dependent exemption credits • Nonrefundable renter's credit	• Personal exemption credit • Senior exemption credit • Blind exemption credit • Dependent exemption credit • Nonrefundable renter's credit • Child and Dependent Care Expenses Credit	All tax credits
<b>Other Taxes</b>	Only tax computed using the 540 2EZ Table  <b>*Note:</b> If you qualify to use Form 540 2EZ, go to <a href="http://www.ftb.ca.gov">www.ftb.ca.gov</a> to e-file or to download this form, or see "Order Forms and Publications" on page 68.	Tax computed using the tax table or tax rate schedules	All taxes: • Tax computed using the tax table or tax rate schedules • Alternative minimum tax • Tax on early distributions from IRAs or other qualified retirement plans • Tax on distributions from MSAs and education IRAs • Tax for children under age 14 who have investment income of more than \$1,500 • Tax on lump-sum distributions • Recapture taxes • Deferred tax on certain installment obligations • Tax on accumulation distributions of trusts

# Do I Have to File?

## Requirements for Most People

Read down the first column to find your filing status at the end of 2001. Read across to find your age at the end of 2001, and number of dependents you are entitled to claim for 2001. You must file a return if **either** your California gross income or your California adjusted gross income was more than the amount shown for your filing status, age, and number of dependents.



Even if you do not have a filing requirement based on the chart below, you should file a return in order to get a refund if California state income tax was withheld from your pay, or if you made California estimated tax payments. Try e-file! It's fast, easy and convenient and there are several free options. Go to [www.ftb.ca.gov](http://www.ftb.ca.gov) for the details.

On 12/31/01, my filing status was:	and on 12/31/01, my age was <sup>6</sup> :	California Gross Income <sup>1</sup>			California Adjusted Gross Income <sup>2</sup>		
		Dependents			Dependents		
		0	1	2 or more	0	1	2 or more
Single or Head of household <sup>3</sup>	Under 65	11,901	20,134	26,309	9,521	17,754	23,929
	65 or older	15,851	22,026	26,966	13,471	19,646	24,586
Married filing joint or Married filing separate <sup>4</sup>	Under 65 (both spouses)	23,803	32,036	38,211	19,042	27,275	33,450
	65 or older (one spouse)	27,753	33,928	38,868	22,992	29,167	34,107
	65 or older (both spouses)	31,703	37,878	42,818	26,942	33,117	38,057
Qualifying widow(er)	Under 65		20,134	26,309		17,754	23,929
	65 or older		22,026	26,966		19,646	24,586
<b>Dependent of another person</b> Any filing status	Any age	More than your standard deduction <sup>5</sup>					

<sup>1</sup> **California gross income** is all income you received in the form of money, goods, property, and services from all sources that are not exempt from tax. Gross income does not include any adjustments or deductions.

<sup>2</sup> **California adjusted gross income** is your federal adjusted gross income from all sources reduced or increased by all California income adjustments.

<sup>3</sup> See page 24.

<sup>4</sup> The income of both spouses must be combined; both spouses may be required to file a return even if only one spouse had income over the amounts listed.

<sup>5</sup> Use the California Standard Deduction Worksheet for Dependents on page 12 or page 17 to figure your standard deduction.

<sup>6</sup> If your 65th birthday is on January 1, 2002, you are considered to be age 65 on December 31, 2001.

## Requirements for Children With Investment Income

California law is the same as federal law for the income of children under age 14. For each child under age 14 who received more than \$1,500 of investment income in 2001, complete Form 540 and form FTB 3800, Tax Computation for Children Under Age 14 with Investment Income, to figure the tax on a separate Form 540 for your child.

**Note:** If you qualify, you may elect to report your child's income of \$7,500 or less (but not less than \$750) on your return by completing form FTB 3803, Parents' Election to Report Child's Interest and Dividends. To make this election, your child's income must be **only** from interest and/or dividends. See "Order Forms and Publications" on page 68.

## Other Situations When You Must File

If you owe any of the following taxes for 2001, you must file Form 540.

- Tax on a lump-sum distribution;
- Tax on a qualified retirement plan, including an individual retirement arrangement (IRA) or on an Archer medical savings account (MSA);
- Tax for children under age 14 who have investment income greater than \$1,500 (see paragraph above);
- Alternative minimum tax;
- Recapture taxes;
- Deferred tax on certain installment obligations; or
- Tax on an accumulation distribution from a trust.

# Helpful Hints (e-file and skip this page! See [www.ftb.ca.gov](http://www.ftb.ca.gov))

## Filing in your return.

Tips on how you should fill in Form 540A or Form 540:

- Use only black or blue ballpoint pen on the copy you send us.
- Enter your social security number(s) at the top of Form 540A or Form 540, Side 1, Step 1a.
- Print numbers and CAPITAL LETTERS inside boxes. Be sure to line up dollar amounts.
- Round cents to the nearest whole dollar. For example, round \$50.50 up to \$51 or round \$25.49 down to \$25.
- If you do not have an entry for a line, leave it blank unless the instructions for a line specifically tell you to enter zero. Do not enter a dash.
- Attach your label. If you don't have a label, please print your name(s) and address in CAPITAL LETTERS in Step 1.

## Verify Step 1, Step 1a, Step 2, and Step 3.

**Step 1:** Use your full legal name and complete address including ZIP Code.

If you lease a private mailbox (PMB) from a private business rather than a PO box from the United States Postal Service, include the box number in the field labeled "PMB no." in the address area.

**Step 1a:** Make sure that you entered your social security number and that it agrees with your social security card. If you file a joint return, make sure that you enter the social security numbers in the same order that your names are shown.

**Step 2:** Make sure that you meet all the requirements for your filing status. See page 10 for more information. If you believe that you qualify for the head of household filing status, please review the requirements on page 24 through page 28.

**Step 3:** Take your personal exemption credit to reduce your tax. See the instructions for Form 540A, line 18 or Form 540, line 21.

## Check other areas.

**Federal Adjusted Gross Income:** Double-check that you correctly transferred your federal adjusted gross income from your federal TeleFile Tax Record, line 1; or Form 1040EZ, line 4; or Form 1040A, line 19; or Form 1040, line 33.

**California Standard Deduction:** Make sure that you entered the California standard deduction amount and not the federal amount.

**Itemized Deductions:** Be sure that you reduced your federal itemized deductions by the amount of state and local income taxes you claimed on your federal Schedule A. Form 540 filers, use Schedule CA (540), Part II, on page 37. Form 540A filers, see page 12.

**Double-check your math:** Double-check each subtraction, addition, and any other calculation.

**Paid Preparer's Information:** If you pay a person to prepare your California income tax return, that person must sign and complete the area at the bottom of Side 2, including an identification number (social security number, PTIN or FEIN). A paid preparer must give you two copies of your return, one copy to file with FTB, and one copy to keep for your records.

## Attachments to your return.

**Check or money order:** Make your check or money order payable to the Franchise Tax Board. Do not send cash. Write your social security number and "2001 Form 540A" or "2001 Form 540" on the check or money order, then see "Assembling your return" in the next column. A penalty may be imposed if your check is returned by your bank for insufficient funds.

**Form(s) W-2, W-2G, and 1099:** Make sure to staple all the Form(s) W-2 and W-2G you received to the front of your return where it says "Attach copy of your Form(s) W-2 and W-2G." Also, attach any Form(s) 1099 showing California income tax withheld such as "backup withholding" on dividends and interest income.

If you do not receive your Form (s) W-2 by January 31, 2002, contact your employer. Only your employer can issue or correct a Form W-2. If you cannot get a copy of your Form W-2, you must complete form FTB 3525, Substitute for Form W-2, Wage and Tax Statement, or Form 1099-R, Distributions from Pensions, Annuities, Retirement or Profit Sharing Plans, IRAs, Insurance Contracts, etc. See "Order Forms and Publications" on page 68 or go to our Website at: [www.ftb.ca.gov](http://www.ftb.ca.gov).

If you forget to send your Form(s) W-2 with your income tax return, do not send it separately, or with another copy of your return. Wait until the Franchise Tax Board requests it from you.

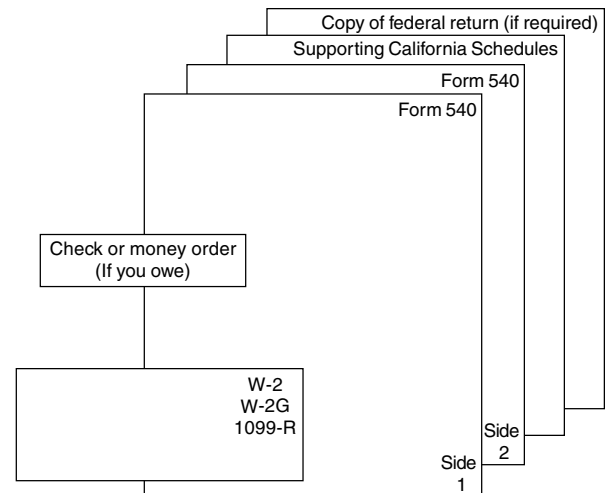
**Federal Form 1040:** Do not attach your federal return if you file Form 540A. If you file Form 540, did you attach any federal forms or schedules, other than Schedule A or Schedule B, to your federal Form 1040?

**No.** Do not attach Form 1040 to Form 540.

**Yes.** Attach a copy of Form 1040 and all supporting federal forms and schedules to Form 540.

## Assembling your return.

Assemble your return in the order shown below.



## Mailing your return.

Mail your return using the envelope provided in this booklet. If your return shows a **refund or no amount due**, be sure to attach the green label to the front of the envelope. The address is:


FRANCHISE TAX BOARD  
PO BOX 942840  
SACRAMENTO CA 94240-0000

If your return has an **amount due**, be sure to attach the white label to the front of the envelope. The address is:

FRANCHISE TAX BOARD  
PO BOX 942867  
SACRAMENTO CA 94267-0001


# Instructions for Form 540A — California Resident Income Tax Return

These instructions are based on the Internal Revenue Code (IRC) as of January 1, 1998, and the California Revenue and Taxation Code (R&TC).

 **Tip** e-file! No math, fast refund, accurate return, and more! See the e-file insert in the middle of this booklet for details.

## Before You Begin

You must complete your federal income tax return (Form 1040, Form 1040A, Form 1040EZ, or federal TeleFile Tax Record) before you begin your Form 540A. You will use the information you entered on your federal income tax return to complete your Form 540A. See "Order Forms and Publications" on page 68 for information on how to get the forms and publications referred to in these instructions.

 **Tip** You may qualify for the federal earned income credit. See page 2 of this booklet for more information. There is no comparable state credit.

## Step 1 — Name and Address

If there is a label on the front of your booklet, attach the label to your completed return. Make sure that the information on your label is correct. Cross out any errors and print the correct information.

If there is no label on the front of your booklet, print your name(s) and address in the space provided at the top of Form 540A. See page 9, Helpful Hints, "Filling in your return."

If you lease a private mailbox (PMB) from a private business rather than a PO box from the United States Postal Service, include the box number in the field labeled "PMB no." in the address area.

### Step 1a — Social Security Number(s)

Enter your social security number(s) in the spaces provided. To protect your privacy, your social security number(s) are not printed on your label. If you file a joint return, show the social security numbers in the same order that you show both names.

**Note:** If you do not have a social security number because you are a nonresident or resident alien for federal tax purposes, and the IRS issued you an Individual Taxpayer Identification Number (ITIN), enter the ITIN in the spaces for the social security number.

## Step 2 — Filing Status

Fill in only one of the circles for line 1 through line 5. Be sure to enter the required additional information if you filled in the circle for line 3 or line 5.

Your filing status for California must be the same as the filing status you used on your federal income tax return. If you did not file a federal return because you did not have a federal filing requirement, use the filing status you would have used had you been required to file.

**Exception:** Married taxpayers who file a joint federal income tax return may file separate California returns if either spouse was:

- An active member of the United States armed forces or any auxiliary military branch during 2001; or
- A nonresident for the entire year and had no income from California sources during 2001.

However, if you file a joint return and if either you or your spouse was a nonresident in 2001, you must file the Long or Short Form 540NR, California Nonresident or Part-Year Resident Income Tax Return.

### Line 1 — Single

You may fill in the circle on line 1 if **any** of the following was true on December 31, 2001:

- You were never married;
- You were legally separated under a decree of divorce or of separate maintenance; or
- You were widowed before January 1, 2001, and did not remarry in 2001.

### Line 2 — Married Filing Joint Return

You may fill in the circle on line 2 if **any** of the following is true:

- You were married as of December 31, 2001, even if you did not live with your spouse at the end of 2001;
- Your spouse died in 2001 and you did not remarry in 2001; or
- Your spouse died in 2002 before you filed a 2001 return.

### Line 3 — Married Filing Separate Return

If you fill in the circle on line 3, be sure to enter your spouse's full name on line 3 and social security number in Step 1a.


**Note:** You cannot claim a personal exemption credit for your spouse even if your spouse had no income, is not filing a return, and is not claimed as a dependent on another person's return.

**Note:** You may be able to file as head of household if you had a child living with you and you lived apart from your spouse during the entire last 6 months of 2001. See page 24 for more information.

For reporting separate income and deductions, get FTB Pub. 1051A, Guidelines for Married Filing Separate Returns. See "Order Forms and Publications" on page 68.

### Line 4 — Head of Household

This filing status is for unmarried individuals who provide a home for a qualifying relative. Before you select this filing status, see the head of household requirements and self-test beginning on page 24.

 **Tip** **e-file and you can close this book now!** The software you use to e-file will help you find out if you qualify to claim head of household filing status. Most software also provides a questionnaire, 1540e, which will help verify your eligibility to the FTB. See [www.ftb.ca.gov](http://www.ftb.ca.gov)

### Line 5 — Qualifying Widow(er) with Dependent Child

You may fill in the circle on line 5 and use the joint return tax rates for 2001 if **all five** of the following apply:

1. Your spouse died in 1999 or 2000 and you did not remarry in 2001; and
2. You have a child, stepchild, adopted child, or foster child whom you can claim as a dependent; and
3. This child lived in your home for all of 2001. Temporary absences, such as for vacation or school, count as time lived in the home; and
4. You paid over half the cost of keeping up your home for this child; and
5. You could have filed a joint return with your spouse the year he or she died, even if you actually did not do so.

**Note:** If your spouse died in 2001, see the instructions for line 2.

## Step 3 — Exemptions

### Line 6 — Can be Claimed as Dependent



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Fill in the circle on line 6 if your parent (or someone else) can claim you as a dependent on his or her tax return, even if he or she chooses not to.

### Line 7 — Personal Exemptions

Did you fill in the circle on line 6?

**No** Follow the instructions on Form 540A, line 7.

**Yes** Ignore the instructions on Form 540A, line 7. Instead, enter in the box on line 7 the amount shown below for your filing status:

- Single or married filing separate, enter -0-;
- Head of household, enter -0-;
- Married filing joint and both you and your spouse can be claimed as dependents, enter -0-; or
- Married filing joint and only one spouse can be claimed as a dependent, enter 1.

**Line 8 – Blind Exemptions**

The first year you claim this exemption credit, you must attach a doctor's statement to the back of Form 540A indicating you or your spouse are visually impaired. Visually impaired means you cannot see better than 20/200 while wearing glasses or contact lenses, or that your field of vision is not more than 20 degrees.

**Caution:** An individual who is someone else's dependent may not claim this credit.

**Line 9 – Senior Exemptions**

If you were 65 years of age or older by December 31, 2001\*, you should claim an additional exemption credit on line 9. If you are married, each spouse 65 years of age or older should claim an additional credit. You may contribute all or part of this credit to the California Seniors Special Fund. See page 23 for information about these funds.

\*If your 65th birthday is on January 1, 2002, you are considered to be age 65 on December 31, 2001.

**Caution:** An individual who is someone else's dependent may not claim this credit.

**Line 10 – Total Personal, Blind, and Senior Exemptions**

Add the dollar amounts on line 7 through line 9. Enter the result on line 10.

**Line 11 – Dependent Exemptions**

To claim an exemption credit for each of your dependents, write each dependent's name and relationship to you in the space provided. If additional space is needed, attach a schedule. The persons you list as dependents must be the same persons you listed as dependents on your federal income tax return. Count the number of dependents listed and enter the total in the box on line 11. Multiply the total by the pre-printed dollar amount and enter the result.

**Step 4 — Taxable Income and California Income Adjustments**

Refer to your completed federal income tax return to complete Step 4.

**Line 12a – State Wages**

Enter the total amount of your state wages from all states from each of your Form(s) W-2. This amount should be on Form W-2, box 16.

**Line 13 – California Income Adjustments**

California does not tax certain types of income that are taxable on your federal return. In addition, there may be differences between the taxable amounts of federal and California IRA distributions, pensions, and annuities.

**Line 13a – State Income Tax Refund**

Enter the amount of any state income tax refund shown on your federal Form 1040, line 10. If you filed Form 1040A or Form 1040EZ, enter -0-.

**Line 13b – Unemployment Compensation**

Enter the amount of any unemployment compensation shown on your federal TeleFile Tax Record, line D; Form 1040EZ, line 3; Form 1040A, line 13; or Form 1040, line 19.

**Note:** Do not include qualified state tuition program earnings.

**Line 13c – Social Security Benefits (and tier 1 or tier 2 railroad retirement benefits)**

Enter the total of any of these amounts shown on your federal return: Social security benefits and equivalent tier 1 railroad retirement benefits reported on federal Form 1040A, line 14b or Form 1040, line 20b;

**Note:** Do not include any other pension amounts on this line.

If you filed Form 1040EZ, enter -0- .

**Line 13d – California Nontaxable Interest or Dividend Income**

**California does not tax interest earned from:**

- United States savings bonds;
- United States Treasury bills, notes, and bonds; and
- Bonds or obligations of United States territories, and government agency obligations specifically exempted by federal law.

Enter only the amount of interest that you received from these sources and that you included in the amount reported on your federal Form 1040A, line 8a; Form 1040, line 8a; or Form 1040EZ, line 2.

**Interest from municipal or state bonds from a state other than California:** This interest is taxed by California. You may not use Form 540A. Use Form 540 or e-file.

**Interest from Federal National Mortgage Association (Fannie Mae) Bonds, Government National Mortgage Association (Ginnie Mae) Bonds, and Federal Home Loan Mortgage Corporation (FHLMC) securities:** This interest is taxed by California. Do not enter it on line 13d.

**Exempt-interest dividends from mutual funds:** Certain mutual funds are qualified to pay "exempt-interest dividends" if at least 50% of their assets consist of tax-exempt government obligations. The portion of the dividends that is tax-exempt will be shown on your annual statement from the mutual fund. If the amount of California tax-exempt interest is more than the amount of federal tax-exempt interest, enter the difference on line 13d. If the amount of California tax-exempt interest is less than the amount of federal tax-exempt interest, you may not use Form 540A. Use Form 540 or e-file.

**Line 13e – California Individual Retirement Account (IRA) Distributions**

**Note:** You cannot use Form 540A if you have Roth IRA conversions or distributions. Use Form 540 or e-file.

The method of taxing IRA distributions is generally the same for California and federal purposes. However, there may be significant differences in the taxable amount depending on when you made your contributions. Before 1987, the maximum IRA contribution you were allowed to deduct from California income was less than the maximum amount you were allowed to deduct from federal income. For this reason, the amount of your IRA distribution taxed by California may be different from the amount taxed under federal law.

Report the difference between your California and your federal taxable IRA distributions on line 13e. Be sure to attach Form 1099-R to your Form 540A if tax was withheld. Get FTB Pub. 1005, Pension and Annuity Guidelines, for more information. See "Order Forms and Publications" on page 68.

**Line 13f – California Pensions and Annuities**

Generally, you will not make any adjustments on this line. However, if you received tier 2 railroad retirement benefits, tier 1 (non-social security equivalent) (included in the amount on federal Form 1040A, line 12b or Form 1040, line 16b), or partially taxable distributions from a pension plan, you may need to make the adjustment described below.

If you received a federal Form RRB 1099 – R for railroad retirement benefits and included all or part of these benefits in federal adjusted gross income on line 12b, enter the taxable benefit amount on line 13.

If you began receiving a retirement annuity between July 1, 1986 and January 1, 1987, and you elected to use the 3-year recovery rule for California, you must make an adjustment because your federal taxable amount is less than your California taxable amount. Figure the difference between the gross distribution shown on your Form 1099-R, box 1 and the taxable amount shown in box 2a. Enter the difference in parentheses on line 13f. For example: "(12,325)."

If you received a lump-sum distribution from a profit sharing or retirement plan, you may pay less tax on the distribution if you choose the 10-year averaging method. However, you must file Form 540 to use this method. See the instructions for Form 540 and get Schedule G-1, Tax on Lump-Sum Distributions (not in this booklet), for more information. See "Order Form and Publications" on page 68.

**Line 13g – Total California Adjustments**

Combine line 13a through line 13f. If the result is less than zero, enter the amount in parentheses on Form 540A, Side 1, line 13g. In this case only, treat the amount on line 13g as a positive number and add it to the amount on line 12b.

**Line 14 – California Adjusted Gross Income**

Subtract line 13g from line 12b. Enter the result on line 14. If the result is less than zero, enter the amount in parentheses. For example: "(12,325)."

**Line 15 – CA Itemized Deductions or CA Standard Deduction**

You must decide whether to itemize your actual charitable contributions, medical expenses, interest paid, taxes, etc. or take the standard deduction. Your California income tax will be less if you take the **larger** of:

- Your California itemized deductions; or
- Your California standard deduction.

If you are married and file a separate return, you and your spouse must either both itemize your deductions, or both take the standard deduction.

**Itemized deductions.** Figure your California itemized deductions by completing the California Itemized Deductions Worksheet on this page. Enter the result on Form 540A, line 15.

**Note:** If you did not itemize deductions on your federal income tax return but will itemize deductions for your California Form 540A, first complete a federal Schedule A, Itemized Deductions. Then complete the California Itemized Deductions Worksheet on this page. Do not attach federal Schedule A to this return.

**Standard deduction.** Find your standard deduction on the California Standard Deduction Chart for Most People on this page unless you filled in the circle on Form 540A, line 6. In that case, use the California Standard Deduction Worksheet for Dependents on this page.

**California Standard Deduction Chart for Most People**

Do not use this chart if your parent, or someone else, can claim you (or your spouse, if married) as a dependent on his or her tax return.

Your Filing Status	Enter On Line 15
1 – Single	\$2,960
2 – Married filing joint return	\$5,920
3 – Married filing separate return	\$2,960
4 – Head of household	\$5,920
5 – Qualifying widow(er)	\$5,920

**Note:** The California standard deduction amounts are less than the federal standard deduction amounts.

**California Standard Deduction Worksheet for Dependents**

Use this worksheet only if your parent, or someone else, can claim you (or your spouse if married) as a dependent on his or her tax return.

1. Enter your total wages, salaries, and tips from all your Form(s) W-2, box 1. (You may also refer to federal Form 1040EZ, line 1; Form 1040A, line 7; or Form 1040, line 7.) . . . . 1 \_\_\_\_\_
2. . . . . 2 \$250.00
3. Add line 1 and line 2. Enter total here . . . . . 3 \_\_\_\_\_
4. Minimum standard deduction . . . . . 4 \$750.00
5. Enter the **larger** of line 3 or line 4 here . . . . . 5 \_\_\_\_\_
6. Enter the amount shown for your filing status:
  - Single or married filing separate, enter \$2,960
  - Married filing joint, head of household, or qualifying widow(er) enter \$5,920
 } . . . . 6 \_\_\_\_\_
7. **Standard deduction.** Enter the **smaller** of line 5 or line 6 here and on Form 540A, line 15 . 7 \_\_\_\_\_

**California Itemized Deductions Worksheet**

1. Federal itemized deductions: Add the amounts on federal Schedule A (Form 1040), lines 4, 9, 14, 18, 19, 26, and 27 . . . . . 1 \_\_\_\_\_
2. Add the following amounts from federal Schedule A and enter on line 2:
  - Line 5, state and local income tax: \_\_\_\_\_
  - State Disability Insurance (SDI): \_\_\_\_\_
  - Line 8, foreign income taxes: \_\_\_\_\_
 2 \_\_\_\_\_
3. Subtract line 2 from line 1. This amount is your total California **itemized deductions** . . . . . 3 \_\_\_\_\_
4. Is the amount on Form 540A, line 12b, more than the amount shown below for your filing status?
  - Single or married filing separate . . . . . \$130,831
  - Married filing joint or qualifying widow(er) . . . . . \$261,664
  - Head of household . . . . . \$196,248**Yes** Continue to line 5 of this worksheet  
**No** Enter on Form 540A, line 15, the larger of:
  - The amount on line 3; or
  - Your standard deduction\* shown below:
    - Single or married filing separate . . . . . \$2,960
    - Married filing joint, head of household, or qualifying widow(er) . . . . . \$5,920**Do not complete the rest of this worksheet.**
5. Using California amounts, add the amounts on federal Schedule A, line 4, line 13, line 19 and any gambling losses included on line 27 . . . . . 5 \_\_\_\_\_
6. Subtract line 5 from line 3 . . . . . 6 \_\_\_\_\_
 

**Note:** If -0-, skip line 7 through line 12, enter the amount from line 3 on line 13 and continue to line 14.
7. Multiply line 6 by 80% (.80) . . . . . 7 \_\_\_\_\_
8. Amount from Form 540A, line 12b . . . . . 8 \_\_\_\_\_

Worksheet continued on next page

9. Enter the amount shown below for your filing status . . . . . 9 \_\_\_\_\_  
 Single or married filing separate . . . \$130,831  
 Married filing joint or qualifying widow(er) . . . . . \$261,664  
 Head of household . . . . . \$196,248

10. Subtract line 9 from line 8 . . . . . 10 \_\_\_\_\_  
**Note:** If -0- or less, skip line 11 and line 12, enter the amount from line 3 on line 13 and continue to line 14.

11. Multiply line 10 by 6% (.06) . . . . . 11 \_\_\_\_\_

12. Compare line 7 and line 11. Enter the smaller amount here . . . . . 12 \_\_\_\_\_

13. Total itemized deductions. Subtract line 12 from line 3 . . . . . 13 \_\_\_\_\_

14. Enter on Form 540A, line 15, the larger of:  
 The amount on line 13; or,  
 Your standard deduction\* shown below:  
 Single or married filing separate . . . . . \$2,960  
 Married filing joint, head of household, or qualifying widow(er) . . . . . \$5,920

**\*Standard Deduction for Dependents.**  
 If your parent, or someone else, can claim you as a dependent, use the standard deduction amount from line 7 of the "California Standard Deduction Worksheet for Dependents" on page 12 instead of the standard deduction amount shown above.

**Step 5 — Tax and Credits**

First figure your tax. Be sure to use the correct filing status and taxable income amount. Then make sure you qualify to claim your credits.

**Line 17 – Tax**

If your taxable income on line 16 is:

- \$100,000 or less, you must use the tax table beginning on page 61. Be sure to use the correct column for your filing status.
- Over \$100,000, you must use the tax rate schedules on page 66.

**Line 18 – Exemption Credits**

Use your exemption credits to reduce your tax. If your federal adjusted gross income (AGI) on line 12b is more than the amounts shown below for your filing status, your credits will be limited.

If your filing status is: . . . . . Is Form 540A, line 12b more than:

Single or married filing separate . . . . .	\$130,831
Married filing joint or qualifying widow(er) . . . . .	\$261,664
Head of household . . . . .	\$196,248

**Yes** Complete the AGI Limitation Worksheet below.

**No** Follow the instructions shown on Form 540A, line 18.

**AGI Limitation Worksheet**

a. Enter the amount from Form 540A, line 12b . . . . . a \_\_\_\_\_  
 b. Enter the amount for your filing status on line b . . . b \_\_\_\_\_  
 Single or married filing separate . . . . . \$130,831  
 Married filing joint or qualifying widow(er) . . . . . \$261,664  
 Head of household . . . . . \$196,248

c. Subtract line b from line a . . . . . c \_\_\_\_\_

d. Divide line c by \$2,500 (\$1,250 if married filing separate) . . . . . d \_\_\_\_\_  
**Note:** If the result is not a whole number, round it to the next higher whole number

e. Multiply line d by \$6 . . . . . e \_\_\_\_\_

f. Add the numbers from the **boxes** on Form 540A, line 7, line 8, and line 9 (not the dollar amounts) . . . f \_\_\_\_\_

g. Multiply line e by line f . . . . . g \_\_\_\_\_

h. Enter the dollar amount (that you filled in) from Form 540A, line 10 . . . . . h \_\_\_\_\_

i. Subtract line g from line h. If zero or less, enter -0- . . . . . i \_\_\_\_\_

j. Enter the number from the box on Form 540A, line 11 (not the dollar amount) . . . . . j \_\_\_\_\_

k. Multiply line e by line j . . . . . k \_\_\_\_\_

l. Enter the dollar amount (that you filled in) from Form 540A, line 11 . . . . . l \_\_\_\_\_

m. Subtract line k from line l. If zero or less, enter -0- . . . . . m \_\_\_\_\_

n. Add line i and line m. Enter the result here and on Form 540A, line 18. If zero or less enter -0- . . . n \_\_\_\_\_

**Line 19 – Nonrefundable Renter’s Credit**

Did you pay rent for at least 6 months in 2001 on your principal residence located in California?

**Yes** You may qualify to claim this credit which may reduce your tax. Complete the qualification record on page 58.

**No** Go to line 20.

**Step 6 — Overpaid Tax or Tax Due**

To avoid a delay in the processing of your return, be sure you enter the correct amounts on line 25 through line 36.

**Line 25 – California Income Tax Withheld**

Enter on line 25 the total amount shown as California income tax withheld on your Form(s) W-2 in box 17; Form(s) W-2G in box 14; or Form(s) 1099-R in box 10.



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**Caution:** Do not include city or county tax withheld or tax withheld by other states.

If you received a Form 1099 showing California income tax withheld ("backup withholding") on dividends and interest income, include the amount withheld in the total on line 25 and attach a copy of the Form 1099 to your return.

If you do not have a Form W-2, see "Attachments to your return" on page 9.

**Line 26 – 2001 California Estimated Tax and Payment with form FTB 3519**

Enter the total of any:

- California estimated tax payments you made using 2001 Form 540-ES;
- Overpayment from your 2000 California income tax return applied to your 2001 estimated tax; and
- Payment you sent with form FTB 3519, Payment Voucher for Automatic Extension for Individuals.

If you and your spouse paid joint estimated tax but are now filing separate returns, either of you may claim all of the amount paid, or you may each claim part of it. Attach a statement, signed by you and your spouse, explaining how you want your payments divided. Be sure to show both social security numbers on your separate returns. If you or your spouse made separate estimated tax payments, but you are now filing a joint income tax return, add the amounts you each paid. Attach a statement to the front of Form 540A explaining that payments have been made under both social security numbers.

**Line 27 – Excess California SDI (or VPDI) Withheld**

If California State Disability Insurance (SDI) or Voluntary Plan Disability Insurance (VPDI) was withheld from your wages by a single employer at more than .9% of your gross wages, you may not claim excess SDI (or VPDI) on your Form 540A. Contact the employer for a refund.

You may be entitled to claim a credit for excess SDI (or VPDI) only if you meet **all** of the following conditions:

*Worksheet continued in next column*

- You had **two or more** employers during 2001;
- You received more than \$46,327 in wages; and
- The amounts of SDI (or VPDI) withheld appear on your Forms W-2. Be sure to attach your Forms W-2 to your Form 540A.

Complete the Excess SDI (or VPDI) Worksheet below to figure the amount to enter on line 27.

<b>Excess SDI (or VPDI) Worksheet</b>		
Follow the instructions below to figure the amount to enter on Form 540A, line 27. If you are married and file a joint return, you must figure the amount of excess SDI (or VPDI) separately for each spouse.		
	<b>You</b>	<b>Your Spouse</b>
1. Add amounts of SDI (or VPDI) withheld shown on your Forms W-2. Enter the total here . . . . . 1		
2. 2001 SDI (or VPDI) limit . . . . . 2	\$416.94	\$416.94
3. Excess SDI (or VPDI) withheld. Subtract line 2 from line 1. Enter the result here and on Form 540A, line 27. . . . . 3		
<b>Note:</b> If zero or less, enter -0- on line 27.		

**Line 28 through line 31 – Child and Dependent Care Expenses Credit**

You may be able to claim this credit if you paid someone to care for your child under the age of 13, other dependent who is physically or mentally incapable of caring for him or herself, or spouse if physically or mentally incapable of caring for him or herself. To claim this credit, your adjusted gross income must be less than \$100,000. Attach form FTB 3506, Child and Dependent Expenses Credit, included in this booklet.

**Line 28 and Line 29**

Enter the qualifying person's social security number. Do not enter more than one qualifying persons' social security number on line 28 or line 29 from form FTB 3506, Part III. If you have more than two qualifying persons, see instructions for form FTB 3506, Part III, line 2.

**Line 30**

Enter the credit allowed from form FTB 3506, Part III, line 8 (do not round this amount).

**Line 31**

Enter the credit allowed from form FTB 3506, Part III, line 12 (do not round this amount).

**Note:** If you received a refund for 2000, you may receive a Form 1099-G, Certain Government and Qualified State Tuition Program Payments. The refund amount reported on your Form 1099-G will be different from the amount shown on your tax return if you claimed the Child and Dependent Care Expenses Credit. This is because the credit is not a refund from withholdings or estimated tax payments.

**Line 33 – Overpaid Tax**

If the amount on line 32 is more than the amount on line 24, your payments and credits are more than your tax. Subtract the amount on line 24 from the amount on line 32. Enter the result on line 33. This is the amount of your overpaid tax. If the amount on line 32 is less than the amount on line 24, go to line 36.

**Line 34 – Amount You Want Applied To Your 2002 Estimated Tax**

If you pay estimated tax, you may apply all or part of the amount on line 33 to your 2002 estimated tax. Enter on line 34 the amount of line 33 you want applied to your 2002 estimated tax.

**Line 35 – Overpaid Tax Available This Year**

If you entered an amount on line 34, subtract that amount from line 33. Enter the result on line 35. You may choose to have this entire amount refunded to you or you may make contributions to the California Seniors Special Fund or make voluntary contributions from this amount. If you choose to make contributions, skip line 36 and go to Step 7.

**Line 36 – Tax Due**

If the amount on line 32 is less than the amount on line 24, your tax is more than your payments and credits. Subtract the amount on line 32 from the amount on line 24. Enter the result on line 36. This is the amount of your tax due.

There is a penalty for not paying enough tax during the year. You may have to pay a penalty if the:

- Tax due on line 36 is \$200 (\$100 if married filing separate) or more; and
- California income tax withheld on line 25 is less than 80% of the amount of your total tax on line 24.

If you owe a penalty, the Franchise Tax Board will figure the penalty and send you a bill.

**Step 7 — Contributions**

You may make contributions to the funds listed on Form 540A, Side 2, Step 7. See page 23 for a description of the funds.

**Line 37 – Total Contributions**

Enter the amount of your total contributions on line 37. If you did not make any contributions, do not enter an amount on line 37. If you show an amount on line 35, you must subtract the amount you contribute from the amount of overpaid tax. If you show an amount on line 36, you must add the amount you contribute to your tax due.

**Step 8 — Refund or Amount You Owe and Direct Deposit (Refund Only)**

**Line 38 – Refund Or No Amount Due**

If you did not enter an amount on line 37, enter the amount from line 35 on line 38. This is the amount that will be refunded to you. If the amount is less than \$1, attach a written request to your Form 540A to receive the refund.

If you entered an amount on line 37, subtract that amount from the amount on line 35. If the result is zero or more, enter the result on line 38.

**Direct Deposit of Refund**

Direct deposit is fast, safe, and convenient. To have your refund directly deposited into your bank account, fill in the account information on Form 540A, Side 2, Step 8. Please be sure to fill in all three boxes. **Do not** attach a voided check or deposit slip. See the illustration on the next page.

The illustration on page 15 shows which bank numbers to transfer to the preprinted boxes on Form 540A, Side 2, Step 8 or Form 540, Side 2, Step 13.



Do not use a deposit slip to find the bank numbers. Contact your financial institution for assistance in getting the correct routing number.

<b>John Doe</b> <b>Mary Doe</b> 1234 Main Street Anytown, CA 99999		1234
PAY TO THE ORDER OF		15-00000000
ANYTOWN BANK Anytown, CA 99999		19
Routing number (250250025)	Account number (202020)	Do not include the check number 1234
For		DOLLARS

If an amount was entered on line 37, and when subtracted from the amount on line 35 the result is less than zero, your contributions are more than your overpaid tax available on line 35. In this case, do not enter an amount on line 38. Instead, subtract the amount on line 35 from the amount on line 37. Enter the result on line 39 and see the instructions for line 39.

### Line 39 – Amount You Owe

If you did not enter an amount on line 37, enter the amount from line 36 on line 39. This is the amount you owe with your Form 540A.

If you entered an amount on line 37, add that amount to the amount on line 36. Enter the result on line 39. This is the amount you owe with your Form 540A.

To avoid a late filing penalty, file your Form 540A by the extended due date even if you cannot pay the amount you owe. See payment options in the insert in the middle of the booklet and page 59, question 4.

Do not combine your 2001 tax payment and any 2002 estimated tax payment in the same check. You must prepare two separate checks and mail each in a separate envelope.

**Paying by Check or Money Order** – See page 9, Helpful Hints, "Attachments to Your Return." Write your social security number and 2001 tax year on your payment.

**Paying by Credit Card** – For information about using your Discover/NOVUS, MasterCard, or American Express card, see the insert in the middle of this booklet.

If you cannot pay the full amount shown on line 39 with your return, you may request monthly payments. See payment options in the insert in the middle of this booklet and page 59, question 4.

### Line 40 – Underpayment of Estimated Tax

You may owe a penalty if:

- Line 36 is \$200 (\$100 if married filing separate) or more and more than 20% of the tax shown on line 24; or
- You underpaid your 2001 estimated tax liability for any payment period. The Franchise Tax Board can figure the penalty for you when you file your return and send you a bill. Or you can get form FTB 5805, Underpayment of Estimated Tax by Individuals and Fiduciaries, to see if you owe a penalty and to figure the amount. If you complete form FTB 5805, enter the amount of the penalty on line 40 and fill in the circle on line 40. You must complete and attach form FTB 5805 if you claim a waiver of the penalty or use the annualized income installment method.

**Note:** Do not reduce the amount on line 33 or increase the amount on line 36 by any penalty or interest amounts.

See page 2, "Important Due Dates," for information on estimated tax payments and how to avoid the underpayment penalty.

### Line 41 – 2002 Tax Forms

If your Form 540A is prepared by someone else or if you do not need tax forms mailed to you next year, fill in the circle on line 41.

### Step 9 — Sign Your Return

You must sign your return in the space provided on Side 2. If you file a joint return, your spouse must sign it also. See page 9 "Helpful Hints" for information on verifying and checking information on your return, attachments to your return, and assembling and mailing your return.

**Joint Return.** If you file a joint return, both you and your spouse are generally responsible for the tax and any interest or penalties due on the return. This means that if one spouse does not pay the tax due, the other may have to. See "Innocent Spouse Relief" on page 60.

### Mailing Your Return

Mail your return in the envelope provided in this booklet. If your return shows **a refund or no amount due**, be sure to attach the green label to the front of the envelope. If your return has an **amount you owe**, be sure to attach the white label to the front of the envelope.


If you have misplaced your envelope, see page 9, "Mailing your return" for the correct address.

# Instructions for Form 540 — California Resident Income Tax Return

These instructions are based on the Internal Revenue Code (IRC) as of January 1, 1998, and the California Revenue and Taxation Code (R&TC).

## Before You Begin

You must complete your federal income tax return (Form 1040, 1040A, 1040EZ, or federal TeleFile Tax Record) before you begin your California Form 540. You will use information from your federal income tax return to complete your Form 540. Be sure to complete and mail Form 540 by April 15, 2002. If you cannot mail your return by the due date, see page 41.

 You may qualify for the federal earned income credit. See page 2 for more information. There is no comparable state credit.

## Step 1 — Name and Address

If there is a label on the front of your booklet, attach the label to your completed return. Make sure that the information on your label is correct. Cross out any errors and print the correct information.

**If there is no label**, print your name(s) and address in the spaces provided at the top of Form 540. See page 9, Helpful Hints, "Filling in your return."

If you lease a private mailbox (PMB) from a private business rather than a PO box from the United States Postal Service, include the box number in the field labeled "PMB no." in the address area.

### Principal Business Activity Code

Enter the numeric principal business activity code from federal Schedule C, line B.

## Step 1a — Social Security Number(s)

Enter your social security number(s) in the spaces provided. To protect your privacy, your social security number(s) are not printed on your label. If you file a joint return, show the social security numbers in the same order that you show both names.

**Note:** If you do not have a social security number because you are a nonresident or resident alien for federal tax purposes, and the IRS issued you an Individual Taxpayer Identification Number (ITIN), enter the ITIN in the spaces for the social security number.

## Step 2 — Filing Status

Fill in only one of the circles for line 1 through line 5. Be sure to enter the required additional information if you filled in the circle for line 3 or line 5.

Your filing status for California must be the same as the filing status you used on your federal income tax return. If you did not file a federal return because you did not have a federal filing requirement, use the filing status you would have used had you been required to file.

**Exception for married taxpayers who file a joint federal income tax return** — You may file separate California returns if either spouse was:

- An active member of the United States Armed Forces (or any auxiliary military branch) during 2001; or
- A nonresident for the entire year and had no income from California sources during 2001.


However, if you file a joint return and if either spouse was a nonresident in 2001, you must file the Long or Short Form 540NR, California Nonresident or Part-Year Resident Income Tax Return.

**You Are Married and File a Separate Return:** Enter your spouse's full name on line 3 and social security number in the space provided in "Step 1a."

**Note:** Community property rules apply to the division of income if you use the married filing separate status. For more information, get FTB Pub. 1031, Guidelines for Determining Resident Status and FTB Pub. 1051A, Guidelines for Married Filing Separate Returns. See "Order Forms and Publications" on page 68.

## Head of Household

This filing status is for unmarried individuals who provide a home for a qualifying relative. Before you select this filing status, see the requirements and self-test for head of household beginning on page 24.

 **e-file and you can close this book now!** The software you use to e-file will help you find out if you qualify to claim head of household filing status. Most software also provides a questionnaire, 1540e, which will help verify your eligibility to the FTB. See [www.ftb.ca.gov](http://www.ftb.ca.gov)

## Step 3 — Exemptions

### Line 6 — Can be Claimed as a Dependent



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Fill in the circle on line 6 if your parent (or someone else) can claim you as a dependent on his or her tax return, even if he or she chooses not to.

### Line 7 — Personal Exemptions

Did you fill in the circle on line 6?

**No** Follow the instructions on Form 540, line 7.

**Yes** Ignore the instructions on Form 540, line 7. Instead, enter in the box on line 7 the amount shown below for your filing status:

- Single or married filing separate, enter -0-;
- Head of household, enter -0-;
- Married filing joint and both you and your spouse can be claimed as dependents, enter -0-; or
- Married filing joint and only one spouse can be claimed as a dependent, enter 1.

### Line 8 — Blind Exemptions

The first year you claim this exemption credit, you must attach a doctor's statement to the back of Form 540 indicating you or your spouse are visually impaired. You are visually impaired if you cannot see better than 20/200 while wearing glasses or contact lenses, or if your field of vision is not more than 20 degrees.

**Caution:** An individual who is someone else's dependent may not claim this credit.

### Line 9 — Senior Exemptions

If you were 65 years of age or older by December 31, 2001\*, you should claim an additional exemption credit on line 9. If you are married, each spouse 65 years of age or older should claim an additional credit. You may contribute all or part of this credit to the California Seniors Special Fund. See page 23 for information about these funds.

\*If your 65th birthday is on January 1, 2002, you are considered to be age 65 on December 31, 2001.

**Caution:** An individual who is someone else's dependent may not claim this credit.

### Line 11 — Dependent Exemptions

To claim an exemption credit for each of your dependents, write each dependent's name and relationship to you in the space provided. If additional space is needed, attach a schedule. The persons you list as dependents must be the same persons you listed as dependents on your federal income tax return. Count the number of dependents listed and enter the total in the box on line 11. Multiply the number you entered by the pre-printed dollar amount and enter the result.

## Step 4 — Taxable Income

Refer to your completed federal income tax return to complete "Step 4."

### Line 12 — State Wages



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Enter the total amount of your state wages from all states from each of your Form(s) W-2. This amount should be on Form W-2, box 16.

If you received wages and do not have a Form W-2, see "Attachments to your return" on page 9.

**Line 14 – California Adjustments — Subtractions (from Schedule CA (540), line 33, column B)**

If there are differences between your federal and California income or deductions, you must complete Schedule CA (540), California Adjustments — Residents. Follow the instructions for Schedule CA (540) beginning on page 45. Enter on this line the amount from Schedule CA (540), line 33, column B. If a negative amount, see Schedule CA (540), line 33 instructions, page 48.

**Line 15 – Subtotal**

Subtract the amount on line 14 from the amount on line 13. Enter the result on line 15. If the amount on line 13 is less than zero, combine the amounts on line 13 and line 14 and enter the result in parentheses. For example: "(12,325)."

**Line 16 – California Adjustments — Additions (from Schedule CA (540), line 33, column C)**

If there are differences between your federal and California income or deductions, you must complete Schedule CA (540), California Adjustments — Residents. Follow the instructions for Schedule CA (540) beginning on page 45. Enter on this line the amount from Schedule CA (540), line 33, column C. If a negative amount, see Schedule CA (540), line 33 instructions, page 48.

**Line 18 – California Itemized Deductions or California Standard Deduction**

You must decide whether to itemize your charitable contributions, medical expenses, interest paid, taxes, etc. or take the standard deduction. Your California income tax will be less if you take the **larger** of:

- Your California itemized deductions; or
- Your California standard deduction.

If you are married and file a separate return, you and your spouse must either both itemize your deductions or both take the standard deduction.

**Itemized deductions.** Figure your California itemized deductions by completing Schedule CA (540), Part II, line 35 through line 40. Enter the result on Form 540, line 18.

**Note:** If you did not itemize deductions on your federal income tax return but will itemize deductions for your California Form 540, first complete a federal Schedule A, Itemized Deductions. Then complete Schedule CA (540), Part II, line 35 through line 40.

**Standard deduction.** Find your standard deduction on the California Standard Deduction Chart For Most People, below. If you filled in the circle on Form 540, line 6, use the California Standard Deduction Worksheet For Dependents, on this page, instead.

<b>California Standard Deduction Chart for Most People</b>	
Do not use this chart if your parent, or someone else, can claim you (or your spouse, if married) as a dependent on his or her tax return.	
<b>Your Filing Status</b>	<b>Enter On Line 18</b>
1 – Single	\$2,960
2 – Married filing joint return	\$5,920
3 – Married filing separate return	\$2,960
4 – Head of household	\$5,920
5 – Qualifying widow(er)	\$5,920

**Note:** The California standard deduction amounts are less than the federal standard deduction amounts.

**California Standard Deduction Worksheet for Dependents**  
Use this worksheet only if your parent, or someone else, can claim you (or your spouse if married) as a dependent on his or her tax return.

1. Enter your earned income from: line 1 of the "Standard Deduction Worksheet for Dependents" in the instructions for federal Form 1040; Form 1040A; or from line A of the worksheet on the back of Form 1040EZ. If you used federal TeleFile, add \$250 to the total of your wages from all Form(s) W-2, box 1 and enter the result here	1	_____
2. Minimum standard deduction	2	\$750.00
3. Enter the <b>larger</b> of line 1 or line 2 here	3	_____
4. Enter the amount shown for your filing status:		
• Single or married filing separate, enter \$2,960	} . . . . . 4	_____
• Married filing joint, head of household, or qualifying widow(er), enter \$5,920		
5. <b>Standard deduction.</b> Enter the <b>smaller</b> of line 3 or line 4 here and on Form 540, line 18	5	_____

**Step 5 — Tax**

When you figure your tax, be sure to use the correct filing status and taxable income amount.

**Line 20 – Tax**

To figure your tax, use one of the following methods and fill in the matching circle on line 20:

- **Tax Table.** If your taxable income on line 19 is \$100,000 or less, you must use the tax table beginning on page 61. Be sure you use the correct filing status column in the tax table.
- **Tax Rate Schedules.** If your taxable income on line 19 is over \$100,000, you must use the tax rate schedules on page 66.
- **FTB 3800.** Generally, you must use form FTB 3800, Tax Computation for Children Under Age 14 with Investment Income, to figure the tax on a separate Form 540 for your child who was under age 14 on January 1, 2002, and who had more than \$1,500 of investment income. Attach form FTB 3800 to the child's Form 540.
- **FTB 3803.** If, as a parent, you elect to report your child's interest and dividend income of \$7,500 or less (but not less than \$750) on your return, complete form FTB 3803, Parents' Election to Report Child's Interest and Dividends. You must file a separate form FTB 3803 for each child whose income you elect to include on your Form 540. Add the amount of tax, if any, from each form FTB 3803, line 9, to the amount of your tax from the tax table or tax rate schedules and enter the result on Form 540, line 20. Attach form(s) FTB 3803 to your return.

**Line 21 – Exemption Credits**

Use your exemption credits to reduce your tax. If your federal adjusted gross income (AGI) on line 13 is more than the amount shown below for your filing status, your credits will be limited.

If your filing status is:	Is Form 540, line 13 more than:
Single or married filing separate	\$130,831
Married filing joint or qualifying widow(er)	\$261,664
Head of household	\$196,248

**Yes** Complete the AGI Limitation Worksheet on the next page.

**No** Follow the instructions on Form 540, line 21.

**AGI Limitation Worksheet**

<b>a</b> Enter the amount from Form 540, line 13	<b>a</b> _____
<b>b</b> Enter the amount for your filing status on line b: Single or married filing separate ..... \$130,831 Married filing joint or qualifying widow(er) ..... \$261,664 Head of household ..... \$196,248	<b>b</b> _____
<b>c</b> Subtract line b from line a	<b>c</b> _____
<b>d</b> Divide line c by \$2,500 (\$1,250 if married filing separate). <b>Note:</b> If the result is not a whole number, round it to the next higher whole number	<b>d</b> _____
<b>e</b> Multiply line d by \$6	<b>e</b> _____
<b>f</b> Add the numbers from the <b>boxes</b> on Form 540, line 7, line 8, and line 9 (not dollar amounts)	<b>f</b> _____
<b>g</b> Multiply line e by line f	<b>g</b> _____
<b>h</b> Enter the dollar amount (that you filled in) from Form 540, line 10	<b>h</b> _____
<b>i</b> Subtract line g from line h. If zero or less, enter -0-	<b>i</b> _____
<b>j</b> Enter the number from the box on Form 540, line 11 (not the dollar amount)	<b>j</b> _____
<b>k</b> Multiply line e by line j	<b>k</b> _____
<b>l</b> Enter the dollar amount (that you filled in) from Form 540, line 11	<b>l</b> _____
<b>m</b> Subtract line k from line l. If zero or less, enter -0-	<b>m</b> _____
<b>n</b> Add line i and line m. Enter the result here and on Form 540, line 21. If zero or less, enter -0-	<b>n</b> _____

**Line 23 – Tax from Schedule G-1 and form FTB 5870A**

Fill in the circle for and enter the amount of taxes from:

- Schedule G-1, Tax on Lump-Sum Distributions; and
- Form FTB 5870A, Tax on Accumulation Distribution of Trusts.

**Step 6 — Special Credits and Nonrefundable Renter’s Credit**

A variety of California tax credits are available to reduce your tax if you qualify. To figure and claim most special credits, you must complete a separate form or schedule and attach it to your Form 540. The Credit Chart on the next page describes the credits and provides the name, credit code, and number of the required form or schedule. Many credits are limited to a certain percentage or a certain dollar amount. In addition, the total amount you may claim for all credits is limited by tentative minimum tax (TMT). Answer the following questions before you claim credits on your tax return.

1. Do you qualify to claim the nonrefundable renter’s credit? Complete the qualification record on page 58.  
Check  **Yes** or  **No**, then go to Question 2.

2. Are you claiming any other special credit listed on the Credit Chart on the next page?

**No** If you checked “Yes” for Question 1 and entered an amount on Form 540, line 31, go to line 33. If you checked “No” for Question 1, skip to the instructions for line 34.

**Yes** Figure your credit using the form, schedule, worksheet, or certificate identified in the Credit Chart. Then go to Box A to see if the total amount you may claim for all credits is limited by TMT. If you checked “Yes” for Question 1, be sure that you entered your nonrefundable renter’s credit on line 31.

**Box A –** Did you complete federal Schedule C, D, E, or F and claim or receive any of the following:

- Accelerated depreciation in excess of straight-line;
- Intangible drilling costs;
- Depletion;
- Circulation expenditures;
- Research and experimental expenditures;
- Mining exploration/development costs;
- Amortization of pollution control facilities;
- Income/loss from tax shelter farm activities;
- Income/loss from passive activities;
- Income from long-term contracts using the percentage of completion method;
- Pass-through AMT adjustment from an estate or trust reported on Schedule K-1 (541); or
- Excluded gain on the sale of qualified small business stock

**Yes** You must complete Schedule P (540). See “Order Forms and Publications” on page 68.

**No** Go to Box B.

**Box B –** Did you claim or receive any of the following:

- Investment interest expense 226;
- Income from incentive stock options in excess of the amount reported on your return 225;
- Charitable contribution deduction for appreciated property 224;
- Income from installment sales of certain property; or
- Net operating loss deduction or disaster loss carryover reported on form(s) FTB 3805V, 3805Z, 3806, or 3807.

**Yes** You must complete Schedule P (540). See “Order Forms and Publications” on page 68.

**No** Go to Box C.

**Box C –** If your filing status is: \_\_\_\_\_ Is Form 540, line 17 more than:

Single or head of household .....	\$180,426
Married filing joint or qualifying widow(er) .....	\$240,567
Married filing separate .....	\$120,283

**Yes** You must complete Schedule P (540). See “Order Forms and Publications” on page 68.

**No** Your credits are not limited. Go to the instructions for Form 540, line 28.

**Line 28 through Line 30 – Additional Special Credits**

Each credit has a code number. To claim only one or two credits, enter the credit name, code number, and amount of the credit on lines 28 and 29. To claim more than two credits, use Schedule P (540). See “Order Forms and Publications” on page 68. List two of the credits on lines 28 and 29. Enter the total of any remaining credits from Schedule P (540) on line 30.

**Important:** Attach Schedule P (540) and any supporting schedules or statements to your Form 540.

**Carryovers:** If you claim a credit with carryover provisions and the amount of the credit available this year exceeds your tax, you may carry over any excess credit to future years until the credit is used (unless the carryover period is a fixed number of years). If you claim a credit carryover for an expired credit, use form FTB 3540, Credit Carryover Summary, to figure the amount of the credit. Otherwise, enter the amount of the credit on Schedule P (540), Part III, and do not attach form FTB 3540.

**Credit for Joint Custody Head of Household — Code 170**

**Note:** You may not claim this credit if you used either the head of household or qualifying widow(er) filing status.

You may claim a credit if you were unmarried at the end of 2001 (or if married, you lived apart from your spouse for all of 2001 and you used the married filing separate filing status); and if you furnished more than one-half the household expenses for your home that also served as the home of your child, step-child, or grandchild for at least 146 days but not more than 219 days of the taxable year. If the child is

(Continued on page 20.)

**CREDIT CHART**

<b>Credit Name</b>	<b>Code</b>	<b>Description</b>
Child Adoption – Worksheet on page 20	197	50% of qualified costs in the year an adoption is ordered
Child and Dependent Care Expenses – FTB 3506 See the instructions on page 21	None	Similar to the federal credit except that the California credit amount is based on a specified percentage of the federal credit and is refundable
Community Development Financial Institution Deposits – Certification Required	209	20% of each qualified deposit made to a community development financial institution Obtain certification from: California Organized Investment Network (COIN), Department of Insurance, 300 Capitol Mall, Suite 1460, Sacramento CA 95814
Dependent Parent – Worksheet on page 20	173	Must use married filing separate filing status and have a dependent parent
Disabled Access for Eligible Small Businesses – FTB 3548	205	Similar to the federal credit but limited to \$125 based on 50% of qualified expenditures that do not exceed \$250
Donated Agricultural Products Transportation – FTB 3547	204	50% of the costs paid or incurred for the transportation of agricultural products donated to nonprofit charitable organizations
Employer Child Care Contribution – FTB 3501	190	Employer: 30% of contributions to a qualified plan
Employer Child Care Program – FTB 3501	189	Employer: Cost of establishing a child care program or constructing a child care facility
Enhanced Oil Recovery – FTB 3546	203	One third of the similar federal credit and limited to qualified enhanced oil recovery projects located within California
Enterprise Zone Employee – FTB 3553	169	5% of wages from work in an enterprise zone
Enterprise Zone Hiring & Sales or Use Tax – FTB 3805Z	176	Business incentives for enterprise zone businesses
Farmworker Housing – Certification required	207	50% of new construction or rehabilitation costs for farmworker housing Obtain certification from: Farmworker Housing Assistance Program, California Tax Credit Allocation Committee, 915 Capitol Mall, Room 485, Sacramento CA 95814
Joint Custody Head of Household – Worksheet on page 20	170	30% of tax up to \$315 for single or married filing separate taxpayers who have a child and meet support test
Joint Strike Fighter Wages – FTB 3534	215	50% of qualified wages paid or incurred in taxable years beginning in 2001, not to exceed \$10,000 for each qualified employee, or a proportional amount for an employee who is employed by the taxpayer for only part of the taxable year
Joint Strike Fighter Property Costs – FTB 3534	216	10% of the cost of property placed in service in California for ultimate use in a joint strike fighter
Local Agency Military Base Recovery Area (LAMBRA) Hiring & Sales or Use Tax – FTB 3807	198	Business incentives for LAMBRAs
Long-Term Care – FTB 3504	214	\$500 multiplied by the number of qualifying individuals
Low-Income Housing – FTB 3521	172	Similar to the federal credit but limited to low-income housing in California
Manufacturers' Investment – FTB 3535	199	6% of the cost of qualified property
Manufacturing Enhancement Area (MEA) Hiring – FTB 3808	211	Percentage of qualified wages paid to qualified disadvantaged individuals
Natural Heritage Preservation – FTB 3503	213	55% of the fair market value of any qualified contribution
Nonrefundable Renter's — See page 58	None	For California residents who paid rent for their principal residence for at least 6 months in 2001 and whose AGI does not exceed a certain limit
Other State Tax – Schedule S	187	Net income tax paid to another state or a U.S. possession on income also taxed by California
Prior Year Alternative Minimum Tax – FTB 3510	188	Must have paid alternative minimum tax in a prior year and have no alternative minimum tax liability in 2001
Prison Inmate Labor – FTB 3507	162	10% of wages paid to prison inmates
Research – FTB 3523	183	Similar to the federal credit but limited to costs for research activities in California
Rice Straw – Certification required	206	\$15 per ton of purchased rice straw grown in California Obtain certification from: Rice Straw Tax Credit Program, Department of Food and Agriculture, 1220 N Street, Room 409, Sacramento, CA 95814
Senior Head of Household – Worksheet on page 20	163	2% of taxable income up to \$964 for seniors who qualified for head of household and the qualifying individual died during 1999 or 2000
Solar Energy System Credit – FTB 3508	217	The lesser of 15% of the cost paid or incurred for the purchase and installation of a Solar Energy System or the dollar amount per rated watt of the solar Energy System
Targeted Tax Area (TTA) Hiring & Sales or Use Tax – FTB 3809	210	Business incentives for TTA businesses
Teacher Retention Credit – FTB 3505	212	Credentialed teachers may be able to claim a credit of up to \$1,500 (per individual) based on years of service and the limitation based on income

**Repealed Credits:** The expiration dates for these credits have passed. However, these credits had carryover provisions. You may claim these credits only if there is a carryover available from prior years. If you are not required to complete Schedule P (540), get form FTB 3540, Credit Carryover Summary, to figure your credit carryover to future years.

Agricultural Products	175	Los Angeles Revitalization Zone (LARZ)		Salmon & Steelhead Trout Habitat	
Commercial Solar Electric System	196	Hiring & Sales or Use Tax	159	Restoration	200
Commercial Solar Energy	181	Low-Emission Vehicles	160	Solar Energy	180
Employee Ridesharing	194	Orphan Drug	185	Solar Pump	179
Employer Ridesharing: Large employer	191	Political Contributions	184	Water Conservation	178
Small employer	192	Recycling Equipment	174	Young Infant	161
Transit passes	193	Residential Rental & Farm Sales	186		
Energy Conservation	182	Ridesharing	171		

married, you must be entitled to claim a dependent exemption credit for the child.

Also, the custody arrangement for the child must be part of a decree of dissolution or separate maintenance or must be part of a written agreement between the parents where the proceedings have been initiated, but a decree of dissolution or separate maintenance has not yet been issued.

Use the worksheet below to figure the Joint Custody Head of Household credit.

1. Enter the amount from Form 540, line 24	1	_____
2. Enter the form FTB 5870A tax, if any, included on Form 540, line 23	2	_____
3. Subtract line 2 from line 1	3	_____
4. Credit percentage — 30%	4	x .30
5. Credit amount. Multiply line 3 by line 4. Enter the result or \$315, whichever is less	5	_____

**Credit for Dependent Parent — Code 173**

**Note:** You may not claim the credit for dependent parent if you used the single, head of household, qualifying widow(er) or married filing joint filing status.

You may claim this credit only if:

- You were married at the end of 2001 and you used the married filing separate filing status;
- Your spouse was not a member of your household during the last six months of the year; and
- You furnished over one-half the household expenses for your dependent mother's or father's home, whether or not she or he lived in your home.

To figure the amount of this credit, use the worksheet above for the credit for joint custody head of household.

**Credit for Senior Head of Household — Code 163**

You may claim this credit if you:

- Were 65 years of age or older on December 31, 2001\*;
- Qualified as a head of household in 1999 or 2000 by providing a household for a qualifying individual who died during 1999 or 2000; and
- Did not have adjusted gross income over \$51,173 for 2001.

\*If your 65th birthday is on January 1, 2002, you are considered to be age 65 on December 31, 2001.

**Note:** If you meet all the conditions listed above, you do not need to qualify to use the head of household filing status for 2001 in order to claim this credit.

Use this worksheet to figure this credit.

1. Enter the amount from Form 540, line 19	1	_____
2. Credit percentage — 2%	2	x .02
3. Credit amount. Multiply line 1 by line 2. Enter the result or \$964, whichever is less	3	_____

**Credit for Child Adoption Costs — Code 197**

For the year in which an order of adoption is entered, you may claim a credit for 50% of the cost of adopting a child who is a citizen or legal resident of the United States and who was in the custody of a California public agency or a California political subdivision. You may include the following costs if directly related to the adoption process:

- Fees of the Department of Social Services or a licensed adoption agency;
- Medical expenses not reimbursed by insurance; and
- Travel expenses for the adoptive family.

**Note:** Any deduction for the expenses used to claim this credit must be reduced by the amount of the child adoption costs credit claimed.

Use the worksheet below to figure this credit. If more than one adoption qualifies for this credit, complete a separate worksheet for each adoption. The maximum credit is limited to \$2,500 per minor child.

1. Enter qualifying costs for the child	1	_____
2. Credit percentage — 50%	2	x .50
3. Credit amount. Multiply line 1 by line 2. Do not enter more than \$2,500	3	_____

Your allowable credit is limited to \$2,500 for 2001. You may carry over the excess credit to future years until the credit is used.

**Line 31 – Nonrefundable renter's credit**

Go to the instructions for "Step 6" on page 18.

**Line 34 – Subtract the amount on line 33 from the amount on line 25.**

Enter the result on line 34. If the amount on line 33 is more than the amount on line 25, enter -0-. If you owe interest on deferred tax from installment obligations, include the additional tax, if any, in the amount you enter on line 34. Write "IRC Section 453 interest" or "IRC Section 453A interest" and the amount on the dotted line to the left of the amount on line 34.

**Step 7 — Other Taxes**

Attach the specific form or statement required for each entry in this step.

**Line 35 – Alternative Minimum Tax (AMT)**

If you claim certain types of deductions, exclusions, and credits, you may owe AMT if your total income is more than: \$64,152 if married filing joint or qualifying widow(er); \$48,114 if single or head of household; or \$32,075 if married filing separate.

A child under age 14 may owe AMT if the sum of the amount on line 19 (taxable income) and any preference items listed on Schedule P (540) and included on the return is more than the sum of \$5,350 and the child's earned income.

AMT income does not include income, adjustments and items of tax preference related to any trade or business of a qualified taxpayer who has gross receipts, less returns and allowances, during the taxable year of less than \$1,000,000 from all trades or businesses.

Get Schedule P (540) for more information. See "Order Forms and Publications" on page 68.

**Line 36 – Other Taxes and Credit Recapture**

If you used form(s) FTB 3501, Employer Child Care Program/Contribution Credit; FTB 3535, Manufacturers' Investment Credit; FTB 3805P, Additional Taxes on Qualified Plans (Including IRAs) and Other Tax-Favored Accounts; FTB 3805Z, Enterprise Zone Deduction and Credit Summary; FTB 3806, Los Angeles Revitalization Zone (LARZ) Deduction and Credit Summary; FTB 3807, Local Agency Military Base Recovery Area Deduction and Credit Summary; FTB 3808, Manufacturing Enhancement Area Credit Summary; or FTB 3809, Targeted Tax Area Deduction and Credit Summary; include the additional tax, if any, on line 36. Write the form number on the dotted line to the left of the amount on line 36.

**Step 8 — Payments**

Make sure you have your Form(s) W-2, W-2G, 1099-MISC, and 1099-R, and any other Form(s) 1099 showing California income tax withheld.

**Line 38 – California Income Tax Withheld**

Enter the total California income tax withheld from your:

- Form(s) W-2, box 17;
- Form(s) W-2G, box 14;
- Form(s) 1099-MISC, box 16; or
- Form(s) 1099-R, box 10.

**Caution:** Do not include city or county tax withheld or tax withheld by other states.

If you also received Form(s) 1099 showing California income tax withheld ("backup withholding") on dividends and interest income, real estate sales and partnership distributions, include the amount(s) withheld in the total on line 38 and attach a copy of the Form(s) 1099 to your return.

**Line 39 – 2001 CA Estimated Tax**

Enter the total of any:

- California estimated tax payments you made using 2001 Form 540-ES;
- Overpayment from your 2000 California income tax return that you applied to your 2001 estimated tax;
- Payment you sent with form FTB 3519, Payment Voucher for Automatic Extension for Individuals; and
- California estimated tax payments made on your behalf by an estate or trust on Schedule K-1 (541).

If you and your spouse paid joint estimated tax but are now filing separate returns, either of you may claim all of the amount paid or you may each claim a part of it. Attach a statement, signed by you and your spouse, explaining how you want your payments divided. Show both social security numbers on your separate returns. If you or your spouse made separate estimated tax payments, but are now filing a joint income tax return, add the amounts you each paid. Attach a statement to the front of Form 540 explaining that payments were made under both social security numbers.

**Line 41 – Excess California SDI (or VPDI) Withheld**

If California State Disability Insurance (SDI) or Voluntary Plan Disability Insurance (VPDI) was withheld from your wages by a single employer, at more than 0.9% of your gross wages, you may not claim excess SDI (or VPDI) on your Form 540. Contact the employer for a refund.

You may be entitled to claim a credit for excess SDI (or VPDI) only if you meet **all** of the following conditions:

- You had **two or more** employers during 2001;
- You received more than \$46,327 in wages; and
- The amounts of SDI (or VPDI) withheld appear on your Forms W-2. Be sure to attach your Forms W-2 to your Form 540.

Follow the instructions below to figure the amount to enter on line 41.

Excess SDI (or VPDI) Worksheet		
Follow the instructions below to figure the amount to enter on Form 540, line 41. If you are married and file a joint return, you must figure the amount of excess SDI (or VPDI) separately for each spouse.		
	You	Your Spouse
1. Add amounts of SDI (or VPDI) withheld shown on your Forms W-2. Enter the total here . . . . . 1		
2. 2001 SDI (or VPDI) limit . . . . . 2	\$416.94	\$416.94
3. Excess SDI (or VPDI) withheld. Subtract line 2 from line 1. Enter the result here and enter on Form 540, line 41 . . . . . 3		

**Note:** If zero or less, enter -0- on line 41.

**Line 42 through line 45 – Child and Dependent Care Expenses Credit**

You may be able to claim this credit if you paid someone to care for your child under the age of 13, other dependent who is physically or mentally incapable of caring for him or herself, or spouse if physically or mentally incapable of caring for him or herself. To claim this credit, your adjusted gross income must be less than \$100,000 and you must complete and attach form FTB 3506, Child and Dependent Expense Credit, included in this booklet.

**Line 42 and Line 43**

Enter the qualifying person's social security number. Do not enter more than one qualifying persons' social security numbers on line 42 or line 43 from form FTB 3506, Part III, line 2. If you have more than two qualifying persons, see the instructions for Form FTB 3506, Part III, line 2.

**Line 44**

Enter the credit allowed from form FTB 3506, Part III, line 8 (do not round this amount).

**Line 45**

Enter the credit allowed from form FTB 3506, Part III, line 12 (do not round this amount).

**Note:** If you received a refund for 2000, you may receive a Form 1099-G (Certain Government and Qualified State Tuition Program Payments). The refund amount reported on your Form 1099-G will be different from the amount shown on your tax return if you claimed the Child and Dependent Care Expenses Credit. This is because the credit is not a refund from withholdings or estimated tax payments.

**Step 9 — Overpaid Tax or Tax Due**

To avoid a delay in the processing of your return, be sure you enter the correct amounts on line 47 through line 50.

**Line 47 – Overpaid Tax**

If the amount on line 46 is more than the amount on line 37, your payments and credits are more than your tax. Subtract the amount on line 37 from the amount on line 46. Enter the result on line 47.

**Line 48 – Amount You Want Applied to Your 2002 Estimated Tax**

You may apply all or part of the amount on line 47 to your estimated tax for 2002. Enter on line 48 the amount of line 47 that you want applied to 2002.

**Line 49 – Overpaid Tax Available This Year**

If you entered an amount on line 48, subtract it from the amount on line 47. Enter the result on line 49. You may choose to have this entire amount refunded to you or you may make contributions to the California Seniors Special Fund or make other voluntary contributions from this amount. If you make a contribution, skip line 50 and go to Step 10.

**Line 50 – Tax Due**

If the amount on line 46 is less than the amount on line 37, subtract the amount on line 46 from the amount on line 37. Enter the result on line 50. Your tax is more than your payments and credits.

There is a penalty for not paying enough tax during the year. You may have to pay a penalty if:

- The tax due on line 50 is \$200 or more (\$100 or more if married filing separate); and
- The amount of state income tax withheld on line 38 is less than 80% of the amount of your total tax on line 37.

If you owe a penalty, the Franchise Tax Board will figure the penalty and send you a bill.

**Step 10 — Contributions**

You may make contributions to the funds listed on Form 540, Side 2, Step 10. See page 23 for a description of the funds.

**Step 11 — Refund or Amount You Owe**

Be sure to add or subtract correctly to figure the amount of your refund or the amount you owe.

**Line 65 – Refund or No Amount Due**

If you did not enter an amount on line 64, enter the amount from line 49 on line 65. This is the amount that will be refunded to you. If it is less than \$1, you must attach a written statement to your Form 540 requesting the refund.

If you entered an amount on line 64, subtract the amount on line 64 from the amount on line 49. If the result is zero or more, enter it on line 65.

To have your refund directly deposited into your bank account, fill in the account information on the tax return. See the illustration on page 15 for the correct numbers to transfer to your return.

If the result is less than zero, your contributions are more than your overpaid tax available on line 49. In this case, do not enter an amount on line 65. Instead, subtract the amount on line 49 from the amount on line 64. Enter the result on line 66 and see the instructions for line 66.

**Want a fast refund?** Get your refund in 10 days or less when you e-file your return. See the e-file insert in the middle of this booklet for more information.

### Line 66 – Amount You Owe

If you did not enter an amount on line 64, enter the amount from line 50 on line 66. This is the amount you owe with your Form 540, before interest and penalties.

If you entered an amount on line 64, add that amount to the amount on line 50. Enter the result on line 66. This is the amount you owe with your Form 540, before interest and penalties.

To avoid a late filing penalty, file your Form 540 by the extended due date even if you cannot pay the amount you owe.

Do not combine your 2001 tax payment and any 2002 estimated tax payment in the same check. Prepare two separate checks and mail each in a separate envelope.

**Paying by Check or Money Order** – See page 9, Helpful Hints, "Attachments to your return."

**Paying by Credit Card** – For information about paying using your Discover/NOVUS, MasterCard, or American Express card, see the insert in the middle of this booklet for more information.

If you cannot pay the full amount shown on line 69 with your return, you may request approval to make monthly payments. See "Payment Options" in the insert in the middle of this booklet, and page 59, question 4.

## Step 12 — Interest and Penalties

If you file your return or pay your tax after the due date, you may owe interest and penalties on the tax due.

**Note:** Do not reduce the amount on line 47 or increase the amount on line 50 by any penalty or interest amounts. Enter on line 67 the amount of interest and penalties.

### Line 67 – Interest and Penalties

**Interest.** Interest will be charged on any late filing or late payment penalty from the original due date of the return to the date paid. In addition, if other penalties are not paid within 15 days, interest will be charged from the date of the billing notice until the date of payment. Interest compounds daily and the interest rate is adjusted twice a year.

**Late Filing of Return.** The maximum total penalty is 25% of the tax not paid if the return is filed after October 15, 2002. The minimum penalty for filing a return more than 60 days late is \$100 or 100% of the balance due, whichever is less.

**Late Payment of Tax.** The penalty is 5% of the tax not paid when due plus 1/2% for each month, or part of a month, the tax remains unpaid.

**Other Penalties.** There are also other penalties that can be imposed for a check returned for insufficient funds, negligence, substantial understatement of tax and fraud.

### Line 68 – Underpayment of Estimated Tax

If line 50 is \$200 (\$100 if married filing separate) or more **and** more than 20% of the tax shown on line 34 (excluding the tax on lump-sum distributions on line 23), **or** you underpaid your 2001 estimated tax liability for any payment period, you may owe a penalty. The Franchise Tax Board can figure the penalty for you when you file your return and send you a bill. Or to see if you owe a penalty and to figure the amount of the penalty, get form FTB 5805, Underpayment of Estimated Tax by Individuals and Fiduciaries (or form FTB 5805F, Underpayment of

Estimated Tax by Farmers and Fishermen). If you complete one of these forms, be sure to attach it to the front of your Form 540 on top of any check, money order, Form(s) W-2, Form(s) 1099, or special documentation. Enter the amount of the penalty on line 68 and fill in the correct circle on line 68. You must complete and attach the form if you claim a waiver, use the annualized income installment method, or pay tax according to the schedule for farmers and fishermen, even if you do not owe a penalty.

See page 2, "Important Due Dates," for more information on estimated tax payments and how to avoid the underpayment penalty.

See the instructions for line 69 for information about figuring your payment, if any.

### Line 69 – Total Amount Due

Is there an amount on line 66?

**Yes** Add line 66, line 67, and line 68. Enter the result and make your check or money order for this amount.

**No** Go to the next question.

Is there an amount on line 65?

**Yes** Add line 67 and line 68. If the result is:

- Less than line 65, your refund will be reduced by this amount when your return is processed. Do not enter an amount on line 69.
- More than line 65, subtract line 65 from the sum of line 67 and line 68 and enter the result. Make your check or money order for this amount.

**No** Add line 67 and line 68 and enter the result.

### Line 70 – 2002 Tax Forms

If your Form 540 is prepared by someone else, or if you do not need forms mailed to you next year, fill in the circle on line 70.

## Step 13 — Direct Deposit (Refund Only)

It's fast, safe, and convenient to have your refund directly deposited into your bank account. For further information, see page 14, Step 8.

### Direct Deposit of Refund

Direct deposit is fast, safe, and convenient. To have your refund directly deposited into your bank account, fill in the account information on Form 540, Side 2, Step 13. Please be sure to fill all three boxes. **Do not** attach a voided check or deposit slip. See the illustration on page 15.

The illustration on page 15 shows which bank numbers to transfer to the preprinted boxes on Form 540, Side 2, Step 13.



**Tip** Do not use a deposit slip to find the bank numbers. Contact your financial institution for assistance in getting the correct routing number.

## Sign Your Return

You must sign your return in the space provided on Side 2. If you file a joint return, your spouse must sign it also. See page 9 "Helpful Hints," for more information on verifying and checking information on your return, attachments to your return, and assembling and mailing your return.

**Joint Return.** If you file a joint return, both you and your spouse are generally responsible for the tax and any interest or penalties due on the return. This means that if one spouse does not pay the tax due, the other may have to. See "Innocent Spouse Relief," on page 60.

For information about Power of Attorney, visit our Website at:

[www.ftb.ca.gov](http://www.ftb.ca.gov)

# Voluntary Contribution Fund Descriptions

You may make contributions to the California Seniors Special Fund or make other voluntary contributions of \$1 or more in whole dollar amounts. The amount you contribute either reduces your overpaid tax or increases your tax due. You may contribute only to the funds listed and cannot change the amount you contributed after you file your return.

If you are using:

- Form 540A, enter the amounts you want to contribute on the line for the fund on Side 2, Step 7. Enter the total contributions on line 37.
- Form 540, enter the amounts you want to contribute on the line for the fund on Side 2, Step 10. Enter the total contributions on line 64.

<b>Code</b>	<b>Fund Name and Description</b>	<b>Code</b>	<b>Fund Name and Description</b>
◀ 51 ▶	<p><b>California Seniors Special Fund.</b> If you and/or your spouse are 65 years of age* or older and claim the Senior Exemption Credit on line 9, you may make a combined total contribution of up to \$158 or \$79 per spouse. Contributions entered to this fund will be distributed to the Area Agency of Aging Councils (TACC) to provide advice on and sponsorship of Senior Citizens issues. Any excess contributions not required by TACC will be distributed to senior citizen service organizations throughout California for meals, adult day care, and transportation.</p> <p>*If your 65th birthday is on January 1, 2002, you are considered to be age 65 on December 31, 2001.</p>	◀ 57 ▶	<p><b>California Firefighters' Memorial Fund.</b> Contributions will be used to construct a memorial on the grounds of the State Capitol honoring hundreds of firefighters who have died protecting our communities, our families and our dreams. When the alarm sounded, these brave men and women answered the call with their lives. Their sacrifices, and the sacrifices of their families, deserve to be remembered.</p>
◀ 52 ▶	<p><b>Alzheimer's Disease/Related Disorders Fund.</b> Contributions will be used to conduct a program for researching the cause and cure of Alzheimer's disease and related disorders and research into the care and treatment of persons suffering from dementing illnesses.</p>	◀ 58 ▶	<p><b>Emergency Food Assistance Program Fund.</b> Contributions will be used to help local food banks feed California's hungry. Your contribution will fund the purchase of much-needed food for delivery to food banks, pantries, and soup kitchens throughout the state. The State Department of Social Services will monitor its distribution to ensure the food is given to those most in need.</p>
◀ 53 ▶	<p><b>California Fund for Senior Citizens.</b> Contributions will provide support for the California Senior Legislature (CSL). The CSL are volunteers who prioritize statewide senior related legislative proposals in areas of health, housing, transportation, and community services. Any excess contributions not required by the CSL will be distributed to senior citizen service organizations throughout California.</p>	◀ 59 ▶	<p><b>California Peace Officer Memorial Foundation Fund.</b> Contributions will be used to preserve the memory of California's fallen peace officers and assist the families they left behind. Since statehood, over 1,300 courageous California peace officers have made the ultimate sacrifice while protecting law-abiding citizens. The non-profit charitable organization, California Peace Officers' Memorial Foundation, has accepted the privilege and responsibility of maintaining a memorial for fallen officers on the State Capitol grounds. Each May, the Memorial Foundation conducts a dignified ceremony honoring fallen officers and their surviving families by offering moral support, crisis counseling, and financial support that includes academic scholarships for the children of those officers who have made the supreme sacrifice. On behalf of all of us and the law-abiding citizens of California, thank you for your participation.</p>
◀ 54 ▶	<p><b>Rare and Endangered Species Preservation Program.</b> Contributions will be used to help protect and conserve California's many threatened and endangered species and the wild lands that they need to survive, for the enjoyment and benefit of you and future generations of Californians.</p>	◀ 60 ▶	<p><b>Lupus Foundation of America, California Chapters Fund.</b> Contributions will provide financial assistance to the California-based operating chapters of the Lupus Foundation of America. Funding will go for public education and research grants to find ways of combating and hopefully finding a cure for Lupus. Lupus itself is a chronic, autoimmune disease that causes the immune system to become hyperactive. The immune system loses its ability to distinguish between foreign substances and its own cells and tissues. The immune system directs antibodies against a lupus sufferer's own body. This causes debilitating pain, organ failure, extreme exhaustion, skin rashes, fevers, hair loss, and even death. Of the approximately 200,000 Californians who suffer from the disease, 90% of them are women.</p>
◀ 55 ▶	<p><b>State Children's Trust Fund for the Prevention of Child Abuse.</b> Contributions will be used to fund programs for the prevention, intervention, and treatment of child abuse and neglect.</p>		
◀ 56 ▶	<p><b>California Breast Cancer Research Fund.</b> Contributions will fund research toward preventing and curing breast cancer. Breast cancer is the most common cancer to strike women in California. It kills 4,000 California women each year. Contributions also fund research on prevention and better treatment, and keep doctors up-to-date on research progress. For more about the research your contributions support, please see our Website: <a href="http://www.ucop.edu/srphome/bcrp/">www.ucop.edu/srphome/bcrp/</a>. Your contribution can help make breast cancer a disease of the past.</p>		

# Tax Information for Head of Household Filing Status

## Introduction

You may think of yourself as the head of your house, but you may not qualify for the head of household filing status under state and federal tax laws. The legal requirements for the filing status are more complicated than simply being the head of the house.

The head of household filing status provides a lower tax rate and a higher standard deduction than either single or married filing separate statuses. If you are married, the married filing joint status normally provides the lowest tax rate and highest standard deduction. If you use the head of household filing status and are not qualified to do so, you may be subject to additional tax, interest, and any penalties that may apply. By using the appropriate self-test provided in this publication, you should know if you qualify.

To find out if you qualify, read the General Rules below, then read the Self-Test Instructions in the next column. As you read the General Rules and the Self-Test, you will see that certain terms are underlined. For each underlined term, there is a **definition** in the section following the self-test. Even if you think you know the meaning of a term, you should read the **legal definition** as it applies to the head of household filing status.

## General Rules

You are entitled to the head of household filing status only if **ALL** the following apply:

- ◇ You were unmarried or considered unmarried on the last day of the year, and
- ◇ You paid more than one-half the costs of keeping up your home for the year, and
- ◇ Your home was the main home for you and another person who lived with you for more than half the year, and
 

**Note:** If you, your spouse, or your qualifying person who lived with you was absent from your home during the year, see temporary absence. Also, see Parent (Father or Mother).
- ◇ The other person was your qualifying relative, and
- ◇ You were not a nonresident alien at any time during the year.

If any of the following applied, please refer to the definitions beginning on page 25.

- Annulment
- Death/birth
- Joint custody
- Multiple support agreement
- Parent (Father or Mother)
- Widow or Widower

Please note that if you use the head of household filing status on your federal tax return, you must also use it on your California tax return. However, if you incorrectly claimed the head of household filing status on your federal tax return, you should amend your federal return to claim your correct filing status. You should then file your California tax return using your correct filing status.

## Self-Test Instructions

Complete the self-test to see if you qualify to use the head of household filing status. Although there are three self-tests, only one will apply to you.

- Complete Self-Test 1, below, if you were **single and had never been married** as of the last day of the year.
- Complete Self-Test 2, below if you were **married as of the last day of the year**.
- Complete Self-Test 3, below if you were **divorced or legally separated as of the last day of the year**.

Terms that are underlined are defined beginning on page 25 of this publication.

## Self-Test 1 —

If you were SINGLE and had never been married as of the last day of the year, answer the questions below to see if you qualify.

1. Did your child (other than your foster child), grandchild, or adopted child live with you more than half the year?
  - Yes. Go to question 8.
  - No. Go to question 2.
2. Did you have a dependent foster child living with you for the entire year?
  - Yes. Go to question 3.
  - No. Go to question 4.
3. Did the child's parent live with you and the child during the year?
  - Yes. Go to question 4.
  - No. Go to question 8.
4. Other than your child, grandchild or dependent foster child, did you have a qualifying relative who was your dependent?
  - Yes. Go to question 5.
  - No. STOP; you do not qualify.
5. Was this person your parent (father or mother)?
  - Yes. Go to question 6.
  - No. Go to question 7.
6. Was your dependent parent a citizen or national of the U.S. or a resident of the U.S., Canada, or Mexico?
  - Yes. Go to question 8.
  - No. STOP; you do not qualify.
7. Did your qualifying relative live with you for more than half the year?
  - Yes. Go to question 8.
  - No. STOP; you do not qualify.
8. Did you pay more than half the cost of keeping up your home or the home of your dependent parent (father or mother) during the year?
  - Yes. You qualify to use the head of household filing status.
  - No. STOP; you do not qualify.

## Self-Test 2 —

If you were MARRIED as of the last day of the year, answer the questions below to see if you qualify.

1. Are you filing a tax return separate from your spouse?
  - Yes. Go to question 2.
  - No. STOP; you do not qualify.
2. Did you live with your spouse at ANY time during the last six months of the year?
  - Yes. STOP; you do not qualify.
  - No. Go to question 3.
3. Did you pay more than half the cost of keeping up your home during the year?
  - Yes. Go to question 4.
  - No. STOP; you do not qualify.
4. Did you have a dependent foster child living with you all year?
  - Yes. Go to question 6.
  - No. Go to question 5.
5. Did your dependent stepchild, adopted child, or natural child live with you during the year?
  - Yes. Go to question 7.
  - No. STOP; you do not qualify.
6. Did the child's parent live with you and the child during the year?
  - Yes. STOP; you do not qualify.
  - No. You qualify to use the head of household filing status.
7. Did you, your spouse, and your child live together for any part of the first six months of the year?
  - Yes. Go to question 8.
  - No. Go to question 9.
8. Did your child live with you for more than half the year? You may include half the time that you, your spouse, and your child lived together, and all of the time you and your child lived together without your spouse.
  - Yes. You qualify to use the head of household filing status.
  - No. STOP; you do not qualify.
9. Did your child live with you for more than half the year?
  - Yes. You qualify to use the head of household filing status.
  - No. STOP; you do not qualify.

## Self-Test 3 -

If you were DIVORCED or LEGALLY SEPARATED by the last day of the year, answer the questions below to see if you qualify.

1. Did your child (other than your foster child), adopted child, stepchild, or grandchild live with you more than half the year?
  - Yes. Go to question 7.
  - No. Go to question 2.

2. Did you have a dependent foster child living with you for the entire year?
  - Yes. Go to question 3.
  - No. Go to question 4.
3. Did the child's parent live with you and the child during the year?
  - Yes. Go to question 4.
  - No. Go to question 7.
4. Other than your child, adopted child, stepchild, grandchild, or dependent foster child, did you have a qualifying relative who was your dependent?
  - Yes. Go to question 5.
  - No. STOP; you do not qualify.
5. Was this person your parent (father or mother)?
  - Yes. Go to question 6.
  - No. Go to question 7.
6. Was your dependent parent (father or mother) a citizen or national of the U.S. or a resident of the U.S., Canada, or Mexico?
  - Yes. Go to question 10.
  - No. STOP; you do not qualify.
7. Did you, your spouse (ex-spouse), and the person who may qualify you for the head of household filing status live together during the year?
  - Yes. Go to question 8.
  - No. Go to question 9.
8. Did the person who may qualify you live with you for more than half the year? You may include half the time that you, your spouse (ex-spouse), and the qualifying person lived together, and all of the time you and the qualifying person lived together without your spouse.
  - Yes. Go to question 10.
  - No. STOP; you do not qualify.
9. Did the person who may qualify you live with you for more than half the year?
  - Yes. Go to question 10.
  - No. STOP; you do not qualify.
10. Did you pay more than half the cost of keeping up your home or the home of your dependent parent (father or mother) during the year?
  - Yes. You qualify to use the head of household filing status.
  - No. STOP; you do not qualify.

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## Definition of Terms

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### Adopted Child

An adopted child is a child you have legally adopted. After legal adoption, the child is considered your child by blood. Before legal adoption, a child is considered your child for head of household purposes if, during the tax year, he or she was placed with you for adoption by an authorized agency and was a member of your household. If the child was not placed with you by such an authorized agency, the child can be considered your child for head of household purposes if he or she was a member of your household for the entire year.

### Annulment

If you were married in the tax year but the marriage was later annulled, you are treated as having been unmarried during the year.

### Child

A child qualifying you for the head of household filing status must be your child, grandchild (a grandchild does not qualify you if you are married), stepchild, adopted child, or foster child who is:

- Single as of the last day of the year, and whom you can claim as your dependent. If you are unmarried, you do not have to be able to claim the child as your dependent unless the child is your foster child. If the child is your foster child, you must be able to claim this child as your dependent and the child must have lived with you for the entire year.
- Married as of the last day of the year. You must be able to claim the child as your dependent. However, if your married child's other parent claims the child under rules for noncustodial parent, you do not have to be able to claim the child as your dependent.

### Considered Unmarried

If you were married as of the last day of the tax year or if your spouse died during the tax year, you may be considered unmarried for head of household purposes if you meet **all** of the following requirements:

- You filed a tax return separate from your spouse's tax return.
- You paid more than half the cost of keeping up your home for the year.
- Your spouse did not live in your home at any time during the last six months of the year (see Temporary Absence).
- Your home was the main home of your dependent child, stepchild, or adopted child for more than half the year, or the main home of your dependent foster child for the entire year.

You can still meet this requirement if the only reason you cannot claim your child as your dependent is because:

- You, as the child's custodial parent, stated in writing to the noncustodial parent that the noncustodial parent may claim the dependent exemption credit to which you were entitled, or
- The noncustodial parent provided at least \$600 of support for the child and claimed an exemption for the child under a pre-1985 decree of divorce or separation, or a pre-1985 written agreement.

### Death or Birth

If the person who you believe qualifies you to file as head of household is born or dies during the year, you may be able to claim the head of household filing status. You must have provided more than half the cost of keeping up a home that was the person's main home for more than half the year. However, the requirement that the home must have been the person's main home for more than half the year does not apply if the

person was not alive for more than half the year. In that case, the home must have been the person's main home for the period that the person was alive during the year.

### Dependent

For you to claim another person as your dependent, **all** the following five tests must be met:

1. Relationship or Member of Household Test
2. Citizenship Test
3. Joint Return Test
4. Gross Income Test
5. Support Test

**Relationship or Member of Household Test.** To meet this test, the person must be related to you **or** live with you for the entire year as a member of your household. If at any time during the year the person was your spouse, you cannot claim that person as a dependent. Please note: A person is not considered your relative simply because the person is a member of your household. See Qualifying Relative for a list of relatives who can meet this test.

**Citizenship Test.** To meet this test, for some part of the calendar year in which your tax year begins, the person must be a U.S. citizen or national, or a resident of the U.S., Canada, or Mexico.

**Joint Return Test.** Even if the other dependency tests are met, you are generally not allowed an exemption for your dependent if he or she files a joint federal tax return. You may take an exemption for a married dependent who files a joint federal tax return if **all** the following apply:

- Neither your dependent nor your dependent's spouse is required to file a federal tax return, and
- Neither your dependent nor your dependent's spouse would have a federal tax liability if they filed separate returns, and
- Your dependent and your dependent's spouse only file a joint federal tax return to get a refund of tax withheld.

**Gross Income Test.** Generally, you may not take an exemption for a dependent if that person had gross income equal to or more than the federal allowable dependent exemption amount for that particular year. For the federal allowable amount, see the federal instruction booklet for that particular year. For more information about gross income, see IRS Publication 17, *Your Personal Income Tax*.

This test does not apply if the person is your child and is under 19 years old or a full-time student under 24 years old.

For purposes of the Gross Income Test,

- A child is your son, stepson, daughter, stepdaughter, a legally adopted child or a child placed with you by an authorized placement agency for your legal adoption. A foster child who was a member of your household for the entire year is also considered your child.
- Your child was a student if, during some part of each of five calendar months during the calendar year (not necessarily consecutive), he or she was:

- A full-time student at a school that has a regular teaching staff, course of study, and a regularly enrolled student body in attendance, or
- A student taking a full-time, on-farm training course given by a school described in the preceding paragraph, or by a state, county, or local government.

**Support Test.** You must provide more than half of a person's total support during the calendar year to meet the support test. To figure whether you have provided more than half the support, you must compare the amount you contributed for the person's support to the entire amount of support the person received from all sources. All sources include tax-exempt income such as social security benefits and Temporary Assistance for Needy Families (formerly Aid to Families with Dependent Children), and the person's own funds used for support. Your contribution may not include any part of the person's support that was paid by the person with the person's own wages, even if you paid the wages. The person's own funds are not support unless they are actually spent for support.

Also, see [Multiple Support Agreement](#). For more information regarding the dependent exemption, see IRS Publication 501, *Exemptions, Standard Deduction, and Filing Information*.

## Divorced

To be divorced, you must have a final judgment for dissolution of marriage that is effective by the last day of the tax year. Living apart from your spouse or filing a petition for divorce is not the same as having a final decree of divorce.

## Foster Child

A foster child is a child who is in the care of a person or persons (other than the parents or adopted parents of the child) who care for the child as their own child. The foster relationship with the individual must have begun while the individual was a minor (i.e., under the age of 18). The circumstances under which the child became a member of the household does not affect his or her status as a foster child. A foster child is considered your child by blood if you are entitled to a [dependent](#) exemption for the child, your home was the main home of the child for the entire year, and the child's parent did not live in your home. However, if a government or a tax-exempt child placement agency makes payments to you as a foster parent, the child cannot be claimed as your dependent and you will not qualify for the head of household filing status on the basis of this child.

If a child who was not your own child lived with you, and at the same time the child's parent lived with you, the child cannot be considered your foster child. Such a child cannot qualify you for the head of household filing status, even if the child lived with you during the entire year, you paid all of the household expenses, and you paid all of the child's support.

## Joint Custody

If you have joint custody of your child, to qualify for the head of household filing status you must still meet all the requirements for the filing status. (See the General Rules on page 24.) These requirements include the following:

1. Your child must have lived with you for [more than half the year](#).
2. You must have paid more than half the cost of [keeping up your home](#).

## Keeping Up Your Home

You are keeping up your home only if you pay more than half the cost of keeping up the home for the year. Generally, if two or more people keep up the same home, only one of the people could pay more than half the costs and qualify for the head of household filing status. If two or more families occupy the same dwelling but maintain separate finances, and each family does not contribute to the support of the other family, each family may be treated as keeping up a separate home. The taxpayer who provides more than half the cost of maintaining that separate home is treated as keeping up that separate home. To determine whether you paid more than half the cost of keeping up your home, complete the following worksheet.

Do not include costs of clothing, education, medical treatment, vacations, life insurance, transportation, rental value of a home you own, or value of your services or those of the person qualifying you as head of household. Temporary Assistance for Needy Families (formerly Aid to Families with Dependent Children) payments you use to keep up your home DO NOT count as amounts you paid.

### Cost of Keeping Up Your Home

	Amount You Paid	Total Cost
Rent	\$ _____	\$ _____
Mortgage interest	\$ _____	\$ _____
Property taxes	\$ _____	\$ _____
Property insurance	\$ _____	\$ _____
Utilities	\$ _____	\$ _____
Upkeep/repairs	\$ _____	\$ _____
Food consumed on the premises	\$ _____	\$ _____
Other household expenses	\$ _____	\$ _____
Totals	\$ _____	\$ _____
Minus total amount you paid		\$( _____ )
Amount others paid		\$ _____

If the above results show that you paid more than half the total cost, you meet the requirement of keeping up your home.

## Legally Separated

To be legally separated, you must be separated from your spouse under a final decree of legal separation that is effective by the last day of the tax year. A final decree of legal separation is not the same as an informal separation agreement, a petition for divorce or separation, or an interlocutory judgment for dissolution of marriage. Simply living apart from a spouse is not the same as being legally separated under a final decree of legal separation.

## Main Home

Your home must be your main home and the main home of the person who you believe qualifies you for head of household filing status for [more than half the year](#). Generally, the location of your and the other person's main home is determined by where you and the other person actually live. You and the other person must have lived together in your home for more than half the year, except for temporary absences. (See [Parent \(Father or Mother\)](#) and [Temporary Absence](#).)

## Married

If you are not unmarried under the situations shown under [Unmarried](#), you are married.

## More Than Half the Year

Just because someone lived with you for six months does not mean that the person lived with you for more than half the year. A year has 365 days, and more than half the year is 183 days. (A leap year has 366 days, and more than half a leap year is 184 days.)

To determine how many days your home was a person's [main home](#), follow these guidelines:

- If you were not married at any time during the year, count all of the days that the person lived with you in your home.
- If you were married at any time during the year and were divorced or legally separated as of the last day of the year, add together
  - Half the number of days that you, your spouse, and the person lived together and
  - All of the days that you and the person lived together in your home without your spouse (ex-spouse).
- If you were married as of the last day of the year, and you did not live with your spouse at any time during the last six months of the year, add together
  - Half the number of days that you, your spouse, and the person lived together and
  - All of the days that you and the person lived together in your home without your spouse.
- If you were married as of the last day of the year, and you lived with your spouse at any time during the last six months of the year, you cannot qualify for the head of household filing status.

DO NOT include any time the person was in the custody of another person under either a formal or informal custody agreement.

## Multiple Support Agreement

Sometimes no one person provides more than half the support for an individual. Instead, two or more persons together provide more than half the individual's support. Each of these persons would be able to take the dependent exemption except for the support test (see [Dependent](#)). When this happens, those providing the support can agree that one of them, who individually provides more than 10% of the individual's support, can take the exemption for that individual.

If you can take a dependent exemption for an individual only because of a multiple support agreement, that individual **cannot** qualify you for the head of household filing status.

## National

A U.S. national is an individual who, although not a U.S. citizen, owes allegiance to the U.S. This includes American Samoans and Northern Mariana Islanders who chose to become U.S. nationals instead of U.S. citizens. For more information, refer to IRS Publication 519, *U.S. Tax Guide for Aliens*, or contact your local Immigration and Naturalization Service.

## Noncustodial Parent

The parent who has custody of a child for the greater part of the year is the child's custodial parent. The custodial parent is generally treated as the parent who provides more than half the child's support.

The noncustodial parent will be treated as providing more than half the child's support if:

1. The custodial parent signs a written declaration (or IRS form 8332) that he or she will not claim the exemption for the child and the noncustodial parent attaches this written declaration to his or her return; or
2. A decree or agreement went into effect after 1984 and it unconditionally states that the noncustodial parent can claim the child as a dependent; or
3. A decree or agreement executed before 1985 provides that the noncustodial parent is entitled to the exemption, and he or she provides at least \$600 for the child's support during the year, unless the pre-1985 decree or agreement is modified after 1984 to specify that this provision will not apply.

## Nonresident Alien

If you were a nonresident alien during any part of the year, you may not qualify for the head of household filing status even though you may meet all of the other rules for the filing status.

## Nonresident Alien Spouse

You are unmarried for head of household purposes if your spouse was a nonresident alien at any time during the year and you do not choose to treat your nonresident alien spouse as a resident alien. Under these circumstances, your spouse is not your relative and cannot qualify you for the head of household filing status. However, you are married for head of household purposes if you have chosen to treat your spouse as a resident alien. For more information, refer to IRS Publication 519, *U.S. Tax Guide for Aliens*.

## Parent (Father or Mother)

If you were unmarried, you may be eligible for the head of household filing status even if your father or mother did not live with you. However, your parent must have been a citizen or national of the United States, or a resident of the United States, Canada, or Mexico. You must be able to

claim your parent as a dependent and you must have paid more than half the cost of keeping up a home that was your parent's main home for the entire year. Your parent's main home could have been his or her own home, such as a house or apartment, or could have been any other living accommodation.

## Qualifying Relative

Whether a relative may be your qualifying relative for the head of household filing status is determined by your marital status on the last day of the year.

If you were married on the last day of the year, only your child, stepchild, adopted child, or foster child for whom you are entitled to a dependent exemption credit may qualify you for the head of household filing status. (Also see Unmarried and Considered Unmarried.)

If you were unmarried on the last day of the year, any person who had the following relationship with you may qualify you for head of household filing status:

1. Your child, grandchild, stepchild, adopted child or dependent foster child who is:
  - a. Single as of the last day of the year, or
  - b. Married as of the last day of the year, if you are entitled to a dependent exemption credit for the child. If the only reason you are not entitled to a dependent exemption credit for your married child is because the child's other parent took a dependent exemption credit for the child under the special rules for a noncustodial parent, your married child may still qualify you for head of household filing status, or
2. Any relative listed below for whom you may claim a dependent exemption credit.

Parent	Son-in-law
Grandparent	Daughter-in-law
Brother	Brother-in-law
Sister	Sister-in-law
Half Sister	Half Brother
Stepbrother	Stepsister
Stepmother	Stepfather
Mother-in-law	Father-in-law
Uncle*	Nephew+
Aunt*	Niece+

\*An uncle or aunt may qualify only if he or she is the brother or sister of your father or mother.

+A nephew or niece may qualify only if he or she is the child of your brother or sister.

Any of the relationships listed above that were established by marriage are not ended by death or divorce.

A person who is not one of the relatives listed above cannot qualify you for the head of household filing status. Cousins are descendants of a brother or sister of your parents and **Do NOT** qualify under the relationship test as relatives.

Under no circumstances shall the same person be used to qualify more than one taxpayer for the head of household filing status for the same year.

## Stepchild

A stepchild is not your natural child but is the natural or adopted child of your spouse. To have a stepchild, you must have at some time been married to the child's parent.

## Temporary Absence

Even if you, your spouse, or your qualifying individual was temporarily absent from your home, you are considered to have occupied the same household. Temporary absences include those due to illness, education, business, vacations, military service, and, in some cases, incarceration. If you or the qualifying individual were absent, it must have been reasonable to assume that you or your qualifying individual would return to the household after the temporary absence, and you must have continued to maintain a household in anticipation of the return. The time your qualifying individual was in the custody of another person under either a formal or informal custody agreement cannot be considered a temporary absence.

## Unmarried

You were unmarried if one of the following applied on the last day of the year:

- You had never married, or
- Your marriage was annulled and you did not marry after the annulment, or
- Your spouse died in a prior year and you did not remarry.
- You were legally divorced from your spouse under a final decree of divorce. Neither a petition for divorce nor an interlocutory decree of divorce is the same as a final decree of divorce. Until the final decree of divorce is issued, a married taxpayer remains married.
- You were legally separated from your spouse under a final decree of legal separation. A final decree of legal separation is not the same as an informal separation agreement, a petition for divorce or separation, or an interlocutory judgment for dissolution of marriage. Just living apart from your spouse is not the same as being legally separated under a final decree of legal separation.

You are unmarried for head of household purposes, if your spouse was a nonresident alien at any time during the year and you do not choose to treat your nonresident alien spouse as a resident alien.

## Widow or Widower

The date of your spouse's death determines whether you were married or unmarried for tax purposes.

If your spouse died during the year, you *are* considered as married at the end of the year, unless your spouse was a nonresident alien spouse at some time during the year.

If your spouse died in a prior year and you have not remarried, you were unmarried.

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## ASSISTANCE

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Telephone assistance is available from 7 a.m. until 8 p.m. Monday through Friday and from 8 a.m. until 5 p.m. on Saturdays. We may modify these hours without notice to meet operational needs.

From within the United States,  
call ..... (800) 852-5711

From outside the United States,  
call (not toll free) ..... (916) 845-6500

Website at: [www.ftb.ca.gov](http://www.ftb.ca.gov)

Assistance for persons with disabilities: We comply with the Americans with Disabilities Act. Persons with hearing or speech impairments, call: from voice phone (800) 735-2922, or from TTY/TDD (800) 822-6268.

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## ASISTENCIA EN ESPAÑOL

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Nuestro servicio telefónico gratuito está disponible de lunes a viernes de 7 a.m. a 8 p.m. y los sábados de 8 a.m. a 5 p.m. Estas horas pueden ser cambiadas sin previo aviso.

Dentro de los Estados Unidos  
llame al ..... (800) 852-5711

Fuera de los Estados Unidos  
llame al ..... (916) 845-6500  
(este número no es gratuito).

Asistencia para personas incapacitadas: Nosotros cumplimos con las reglas del Acto de Americanos con incapacidades. Personas con impedimentos de oído o de habla: de teléfono de voz lláme a (800) 735-2922, o personas con una aparato de telecomunicación TTY/TTD lláme a (800) 822-6268.

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## Some Common Questions About Head of Household Status

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Here are some questions that taxpayers have asked about whether they can qualify for head of household filing status and the answers to those questions. Remember to read the definitions of all of the underlined terms. The definitions start on page 25.

**Question:** I was married at the end of the year. Can someone other than my child qualify me for head of household filing status?

**Answer:** No. Because you were married, you must meet certain requirements to be considered unmarried. One of those requirements is that only your child, stepchild, or adopted child, who lived with you for more than half the year, or your dependent foster child who lived with you for the entire year can qualify you for head of household filing status.

**Question:** Can I qualify for head of household filing status if the person I think qualifies me did not live with me during the year?

**Answer:** The general rule is that your home must have been the main home of the person you think qualifies you for more than half the year. But if you are unmarried and you think your parent (father or mother) is the person who qualifies you, your home did not need to be your parent's home. Also, if the person you think qualifies you did not live with you because of a temporary absence, you may still qualify for the status.

**Question:** I was married at the end of the year. Can I qualify for head of household filing status if I lived with my spouse during a part of the last six months of the year?

**Answer:** No. Because you were married, you must meet certain requirements to be considered unmarried. One of those requirements is that you and your spouse did not live together at any time during the last six months of the year. If you and your spouse lived together during the last six months of the year, you cannot be considered unmarried and cannot qualify for head of household filing status.

**Question:** Can I qualify for the head of household filing status even though the person I think qualifies me for the status is not my relative?

**Answer:** No. Only a qualifying relative can qualify you for the head of household filing status. Please note that a foster child, who is not your child by birth, can still qualify you for head of household filing status. A foster child is considered your child by blood if he or she meets the qualifications to be your foster child. To qualify as a foster child, the child must be your dependent, your home must be the main home of the child for the entire year, and the child's parent must not have lived in the home.

# California Resident Income Tax Return 2001

FORM  
540A

## Step 1

Place label here or print

Name and Address

Your first name	Initial	Last name		
If joint return, spouse's first name	Initial	Last name		
Present home address — number and street, PO Box, or rural route			Apt. no.	PMB no.
City, town, or post office			State	ZIP Code

P  
AC  
A  
R  
RP

## Step 1a SSN

Your social security number	Spouse's social security number
<input type="text"/>	<input type="text"/>

**IMPORTANT:**  
Your social security number is required.

## Step 2

### Filing Status

Fill in only one.

- 1  Single
- 2  Married filing joint return (even if only one spouse had income)
- 3  Married filing separate return. Enter spouse's social security number above and full name here
- 4  Head of household (with qualifying person). STOP. See page 10.
- 5  Qualifying widow(er) with dependent child. Enter year spouse died .

## Step 3

### Exemptions

- 6 If your parent, (or someone else) can claim you (or your spouse, if married) as a dependent on his or her tax return, even if he or she chooses not to, fill in this circle  6
- 7 **Personal:** If you filled in 1, 3, or 4 above, enter 1 in the box. If you filled in 2 or 5, enter 2 in the box. If you filled in the circle on line 6, see page 10  7  X \$79 = \$
- 8 **Blind:** If you (or if married, your spouse) are visually impaired, enter 1; if both, enter 2  8  X \$79 = \$
- 9 **Senior:** If you (or if married, your spouse) are 65 or older, enter 1; if both, enter 2  9  X \$79 = \$
- 10 Add line 7 through line 9. These are your total exemptions before dependent exemptions  10 **Total** \$
- 11 **Dependents:** Enter name and relationship. **Do not include yourself or your spouse.**  
  
 Total dependent exemptions  11  X \$247 = \$

## Step 4

### Taxable Income and California Income Adjustments

Attach check or money order here.

#### Standard Deduction

Single or Married filing separate, \$2,960.

Married filing joint, Head of household, or Qualifying widow(er), \$5,920.

- 12 a State wages from your Form(s) W-2, box 16  12a
- 12 b Enter federal adjusted gross income from your TeleFile Tax Record, line I; Form 1040EZ, line 4; Form 1040A, line 19; or Form 1040, line 33  12b
- 13 **California Income Adjustments.** See page 11 for line 13a through line 13f.
 

a State income tax refund	13a	<input type="text"/>
b Unemployment compensation	13b	<input type="text"/>
c Social security or railroad retirement	13c	<input type="text"/>
d California nontaxable interest or dividend income	13d	<input type="text"/>
e California IRA distributions	13e	<input type="text"/>
f California pensions and annuities	13f	<input type="text"/>
g Total California income adjustments. Add line 13a through line 13f	13g	<input type="text"/>
- 14 Subtract line 13g from line 12b. This is your California adjusted gross income. See page 12  14
- 15 Enter the larger of your California **Itemized deductions** or **Standard deduction** (see instructions). If line 6 is filled in, see page 12  15
- 16 Subtract line 15 from line 14. This is your taxable income. If less than zero, enter -0-  16

## Step 5

### Tax and Credits

Attach copy of your Form(s) W-2, and W-2G.  
Also, attach any Form(s) 1099 showing California tax withheld.

- 17 Tax. Fill in the circle if from:  Tax Table  Tax Rate Schedule  17
- 18 Exemption credits. If line 12b is more than \$130,831 see page 13. Otherwise, add line 10 and line 11  18
- 19 Nonrefundable renter's credit. See page 13  19
- 20 Total credits. Add line 18 and line 19  20
- 23 Subtract line 20 from line 17. This is your total tax. If less than zero, enter -0-  23

### Step 6 Overpaid Tax or Tax Due

24 Enter the amount from Side 1, line 23 ..... 24

25 California income tax withheld. See page 13 .....  25

26 2001 California estimated tax and payment with  
form FTB 3519 and amount applied from 2000 return .....  26

27 Excess SDI. See page 13 .....  27

**Child and Dependent Care Expenses Credit.** See page 14.  
Attach form FTB 3506.

28

29

30   31

32 Total payments and credits. Add line 25, line 26, line 27, and line 31 ..... 32

33 Overpaid tax. If line 32 is more than line 24, subtract line 24 from line 32 ..... 33

34 Enter the amount of line 33 you want applied to your **2002** estimated tax .....  34

35 Overpaid tax available this year. Subtract line 34 from line 33 .....  35

36 Tax due. If line 32 is less than line 24, subtract line 32 from line 24 ..... 36

### Step 7 Contributions

CA Seniors Special Fund. See page 23 ..... ● 51 _____ 00	CA Breast Cancer Research Fund .. ● 56 _____ 00
Alzheimer's Disease/Related Disorders Fund ..... ● 52 _____ 00	CA Firefighters' Memorial Fund ... ● 57 _____ 00
CA Fund for Senior Citizens ..... ● 53 _____ 00	Emergency Food Assistance Program Fund ..... ● 58 _____ 00
Rare and Endangered Species Preservation Program ..... ● 54 _____ 00	CA Peace Officer Memorial Foundation Fund ..... ● 59 _____ 00
State Children's Trust Fund for the Prevention of Child Abuse ..... ● 55 _____ 00	Lupus Foundation of America, California Chapters Fund ..... ● 60 _____ 00

37 Total contributions. Add all contributions shown above, enter the total here ..... ● 37

### Step 8 Refund or Amount You Owe

38 **REFUND** or **NO AMOUNT DUE.** Subtract line 37 from line 35.  
Enter the result here. See page 14. Mail to: **FRANCHISE TAX BOARD,  
PO BOX 942840, SACRAMENTO CA 94240-0000** .....  38

39 **AMOUNT YOU OWE** Add line 36 and line 37. See page 15. Mail to:  
**FRANCHISE TAX BOARD, PO BOX 942867, SACRAMENTO CA 94267-0001** .....  39

40 Underpayment of estimated tax. If form FTB 5805 is attached, fill in this circle .....   40

41 If you **do not** need California income tax forms mailed to you next year, fill in this circle ..  41

### Direct Deposit (Refund Only)

Do not attach a voided check or a deposit slip.  
Fill in the boxes to have your refund directly deposited. Routing number \_\_\_\_\_ ●

Account type:  
Checking ●  Savings ●  Account number \_\_\_\_\_ ●

### Step 9

Under penalties of perjury, I declare that I have examined this return and to the best of my knowledge and belief, it is true, correct, and complete. **9**

Your signature \_\_\_\_\_ Spouse's signature (if filing joint, both must sign) \_\_\_\_\_ Daytime phone number  
(\_\_\_\_) \_\_\_\_\_

X \_\_\_\_\_ X \_\_\_\_\_ Date \_\_\_\_\_

Paid preparer's signature (*declaration of preparer is based on all information of which preparer has any knowledge*) \_\_\_\_\_ Paid Preparer's SSN/PTIN  
● \_\_\_\_\_

Firm's name (or yours if self-employed) \_\_\_\_\_ Firm's address \_\_\_\_\_ FEIN  
\_\_\_\_\_

Joint return? \_\_\_\_\_  
See page 15.

# California Resident Income Tax Return 2001

FORM  
540A

## Step 1

Place label here or print

Name and Address

Your first name	Initial	Last name		
If joint return, spouse's first name	Initial	Last name		
Present home address — number and street, PO Box, or rural route			Apt. no.	PMB no.
City, town, or post office			State	ZIP Code

P  
AC  
A  
R  
RP

## Step 1a SSN

Your social security number	Spouse's social security number
<input type="text"/>	<input type="text"/>

**IMPORTANT:**  
Your social security number is required.

## Step 2

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Fill in only one.

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### Exemptions

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- 9 **Senior:** If you (or if married, your spouse) are 65 or older, enter 1; if both, enter 2  9 X \$79 = \$
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- 11 **Dependents:** Enter name and relationship. **Do not include yourself or your spouse.**  
  
 Total dependent exemptions  11 X \$247 = \$

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#### Standard Deduction

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Married filing joint, Head of household, or Qualifying widow(er), \$5,920.

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- 12 b Enter federal adjusted gross income from your TeleFile Tax Record, line I; Form 1040EZ, line 4; Form 1040A, line 19; or Form 1040, line 33  12b
- 13 **California Income Adjustments.** See page 11 for line 13a through line 13f.
 

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b Unemployment compensation	13b	<input type="text"/>
c Social security or railroad retirement	13c	<input type="text"/>
d California nontaxable interest or dividend income	13d	<input type="text"/>
e California IRA distributions	13e	<input type="text"/>
f California pensions and annuities	13f	<input type="text"/>
g Total California income adjustments. Add line 13a through line 13f	13g	<input type="text"/>
- 14 Subtract line 13g from line 12b. This is your California adjusted gross income. See page 12  14
- 15 Enter the larger of your California **Itemized deductions** or **Standard deduction** (see instructions). If line 6 is filled in, see page 12  15
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## Step 5

### Tax and Credits

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- 17 Tax. Fill in the circle if from:  Tax Table  Tax Rate Schedule  17
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- 19 Nonrefundable renter's credit. See page 13  19
- 20 Total credits. Add line 18 and line 19  20
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25 California income tax withheld. See page 13 ..... ■ 25

26 2001 California estimated tax and payment with  
form FTB 3519 and amount applied from 2000 return ..... ■ 26

27 Excess SDI. See page 13 ..... ■ 27

**Child and Dependent Care Expenses Credit.** See page 14.  
Attach form FTB 3506.

● 28

● 29

■ 30  ■ 31

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34 Enter the amount of line 33 you want applied to your **2002** estimated tax ..... ■ 34

35 Overpaid tax available this year. Subtract line 34 from line 33 ..... ■ 35

36 Tax due. If line 32 is less than line 24, subtract line 32 from line 24 ..... 36

### Step 7 Contributions

CA Seniors Special Fund. See page 23 ..... ● 51 _____ 00	CA Breast Cancer Research Fund .. ● 56 _____ 00
Alzheimer's Disease/Related Disorders Fund ..... ● 52 _____ 00	CA Firefighters' Memorial Fund ... ● 57 _____ 00
CA Fund for Senior Citizens ..... ● 53 _____ 00	Emergency Food Assistance Program Fund ..... ● 58 _____ 00
Rare and Endangered Species Preservation Program ..... ● 54 _____ 00	CA Peace Officer Memorial Foundation Fund ..... ● 59 _____ 00
State Children's Trust Fund for the Prevention of Child Abuse ..... ● 55 _____ 00	Lupus Foundation of America, California Chapters Fund ..... ● 60 _____ 00

37 Total contributions. Add all contributions shown above, enter the total here ..... ● 37

### Step 8 Refund or Amount You Owe

38 **REFUND** or **NO AMOUNT DUE.** Subtract line 37 from line 35.  
Enter the result here. See page 14. Mail to: **FRANCHISE TAX BOARD,  
PO BOX 942840, SACRAMENTO CA 94240-0000** ..... ■ 38

39 **AMOUNT YOU OWE** Add line 36 and line 37. See page 15. Mail to:  
**FRANCHISE TAX BOARD, PO BOX 942867, SACRAMENTO CA 94267-0001** ..... ■ 39

40 Underpayment of estimated tax. If form FTB 5805 is attached, fill in this circle ..... ○ ■ 40

41 If you **do not** need California income tax forms mailed to you next year, fill in this circle .. ● 41

### Direct Deposit (Refund Only)

Do not attach a voided check or a deposit slip.  
Fill in the boxes to have your refund directly deposited. Routing number

Account type:  
Checking ●  Savings ●  Account number

### Step 9

Under penalties of perjury, I declare that I have examined this return and to the best of my knowledge and belief, it is true, correct, and complete. **9**

Your signature \_\_\_\_\_ Spouse's signature (if filing joint, both must sign) \_\_\_\_\_ Daytime phone number \_\_\_\_\_

### Sign Here

It is unlawful to forge a spouse's signature.

X \_\_\_\_\_ X \_\_\_\_\_ Date

Paid preparer's signature (*declaration of preparer is based on all information of which preparer has any knowledge*) \_\_\_\_\_ Paid Preparer's SSN/PTIN

Firm's name (or yours if self-employed) \_\_\_\_\_ Firm's address \_\_\_\_\_ FEIN

Joint return?  
See page 15.

# California Resident Income Tax Return 2001

FORM

540

Fiscal year filers only: Enter month of year end: month \_\_\_\_\_ year 2002.

**Step 1**

**Name and Address**

Your first name \_\_\_\_\_ Initial \_\_\_\_\_ Last name \_\_\_\_\_ PBA Code \_\_\_\_\_

If joint return, spouse's first name \_\_\_\_\_ Initial \_\_\_\_\_ Last name \_\_\_\_\_

Present home address — number and street, PO Box, or rural route \_\_\_\_\_ Apt. no. \_\_\_\_\_ PMB no. \_\_\_\_\_

City, town, or post office \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Place label here or print

P  
AC  
A  
R  
RP

**Step 1a**

**SSN**

Your social security number \_\_\_\_\_ Spouse's social security number \_\_\_\_\_

**IMPORTANT:**  
Your social security number is required.

**Step 2**

**Filing Status**

Fill in only one.

1  Single  
 2  Married filing joint return (even if only one spouse had income)  
 3  Married filing separate return. Enter spouse's social security number above and full name here \_\_\_\_\_  
 4  Head of household (with qualifying person). STOP. See page 16.  
 5  Qualifying widow(er) with dependent child. Enter year spouse died \_\_\_\_\_

**Step 3**

**Exemptions**

6 If your parent (or someone else) can claim you (or your spouse, if married) as a dependent on his or her tax return, even if he or she chooses not to, fill in this circle  6

► For line 7, line 8, line 9, and line 11: Multiply the amount you enter in the box by the pre-printed dollar amount for that line.

7 **Personal:** If you filled in 1, 3, or 4 above, enter 1 in the box. If you filled in 2 or 5, enter 2 in the box. If you filled in the circle on line 6, see page 16 ..... 7  X \$79 = \$ \_\_\_\_\_

8 **Blind:** If you (or if married, your spouse) are visually impaired, enter 1; if both, enter 2 ..... 8  X \$79 = \$ \_\_\_\_\_

9 **Senior:** If you (or if married, your spouse) are 65 or older, enter 1; if both, enter 2 ..... ● 9  X \$79 = \$ \_\_\_\_\_

10 Add line 7 through line 9. This is your total exemption credit before the dependent exemption credit ..... 10 **Total** \$ \_\_\_\_\_

11 **Dependents:** Enter name and relationship. **Do not include yourself or your spouse.** \_\_\_\_\_ Total dependent exemption credit ..... ● 11  X \$247 = \$ \_\_\_\_\_

**Step 4**

**Taxable Income**

Attach check or money order here.

12 State wages from your Form(s) W-2, box 16 ..... ● 12 \_\_\_\_\_

13 Enter federal adjusted gross income from Form 1040, line 33; Form 1040A, line 19; Form 1040EZ, line 4; or TeleFile Tax Record, line 1 ..... 13 \_\_\_\_\_

14 California adjustments – subtractions. Enter the amount from Schedule CA (540), line 33, column B ..... ● 14 \_\_\_\_\_  
**Caution:** If line 33, column B is a negative amount, see Schedule CA (540), line 33 instructions.

15 Subtract line 14 from line 13. If less than zero, enter the result in parentheses. See page 48 ..... 15 \_\_\_\_\_

16 California adjustments – additions. Enter the amount from Schedule CA (540), line 33, column C ..... ● 16 \_\_\_\_\_  
**Caution:** If line 33, column C is a negative amount, see Schedule CA (540), line 33 instructions.

17 California adjusted gross income. Combine line 15 and line 16 ..... ● 17 \_\_\_\_\_

18 Enter the **larger** of:   
 Your California **itemized deductions** from Schedule CA (540), line 40; **OR**  
 Your California **standard deduction** shown below for your filing status:  
 • Single or Married filing separate ..... \$2,960  
 • Married filing joint, Head of household, or Qualifying widow(er) ..... \$5,920  
 (Dependent of someone else and filled in the circle on line 6 ..... See page 17) ..... ● 18 \_\_\_\_\_

19 Subtract line 18 from line 17. This is your taxable income. If less than zero, enter -0- ..... 19 \_\_\_\_\_

**Step 5**

**Tax**

Attach copy of your Form(s) W-2, and W-2G. Also, attach any Form(s) 1099 showing California tax withheld.

20 Tax. Fill in circle if from:  Tax Table  Tax Rate Schedule  FTB 3800 or  FTB 3803 ..... ● 20 \_\_\_\_\_  
**Caution:** If under age 14 and you have more than \$1,500 of investment income, read the line 20 instructions to see if you must attach form FTB 3800.

21 Exemption credits. If your federal AGI is more than \$130,831, see page 17. Otherwise, add line 10 and line 11 and enter the result here ..... 21 \_\_\_\_\_

22 Subtract line 21 from line 20. If less than zero, enter -0- ..... 22 \_\_\_\_\_

23 Tax. Fill in circle if from:  Schedule G-1, Tax on Lump-Sum Distributions  form FTB 5870A, Tax on Accumulation Distribution of Trusts ..... ● 23 \_\_\_\_\_

24 Add line 22 and line 23. Continue to Side 2 ..... 24 \_\_\_\_\_

Your name \_\_\_\_\_ Your SSN: \_\_\_\_\_

**Step 6**

**Special Credits and Nonrefundable Renter's Credit**

25 Amount from Side 1, line 24 ..... 25

28 Enter credit name \_\_\_\_\_ code no \_\_\_\_\_ and amount ..... ▶ 28

29 Enter credit name \_\_\_\_\_ code no \_\_\_\_\_ and amount ..... ▶ 29

30 To claim more than two credits, see page 18 ..... ● 30

31 Nonrefundable renter's credit. See page 18 for "Step 6" ..... ● 31

33 Add line 28 through line 31. These are your total credits ..... 33

34 Subtract line 33 from line 25. If less than zero, enter -0- ..... 34

**Step 7**

**Other Taxes**

35 Alternative minimum tax. Attach Schedule P (540) ..... ● 35

36 Other taxes and credit recapture. See page 20 ..... ● 36

37 Add line 34 through line 36. This is your total tax ..... ● 37

**Step 8**

**Payments**

38 California income tax withheld. See page 20 ..... ■ 38

39 2001 CA estimated tax and other payments. See page 21 ..... ■ 39

41 Excess SDI. See page 21 ..... ■ 41

**Child and Dependent Care Expenses Credit.** See page 21; attach form FTB 3506

● 42 \_\_\_\_\_ ■ 43 \_\_\_\_\_

■ 44 \_\_\_\_\_ ■ 45 \_\_\_\_\_

46 Add line 38, line 39, line 41, and line 45. These are your total payments ..... 46

**Step 9**

**Overpaid Tax or Tax Due**

47 Overpaid tax. If line 46 is more than line 37, subtract line 37 from line 46 ..... 47

48 Amount of line 47 you want applied to your 2002 estimated tax ..... ■ 48

49 Overpaid tax available this year. Subtract line 48 from line 47 ..... ■ 49

50 Tax due. If line 46 is less than line 37, subtract line 46 from line 37 ..... 50

**Step 10**

**Contributions**

CA Seniors Special Fund. See page 23 ..... ● 51	00	CA Breast Cancer Research Fund ... ● 56	00
Alzheimer's Disease/Related Disorders Fund ..... ● 52	00	CA Firefighters' Memorial Fund ... ● 57	00
CA Fund for Senior Citizens ..... ● 53	00	Emergency Food Assistance Program Fund ..... ● 58	00
Rare and Endangered Species Preservation Program ..... ● 54	00	CA Peace Officer Memorial Foundation Fund ..... ● 59	00
State Children's Trust Fund for the Prevention of Child Abuse ..... ● 55	00	Lupus Foundation of America, California Chapters Fund ..... ● 60	00

64 Add line 51 through line 60. These are your total contributions ..... ● 64

**Step 11**

**Refund or Amount You Owe**

65 **REFUND OR NO AMOUNT DUE.** Subtract line 64 from line 49. Mail to:  
**FRANCHISE TAX BOARD, PO BOX 942840, SACRAMENTO CA 94240-0000** ..... ■ 65

66 **AMOUNT YOU OWE.** Add line 50 and line 64. See page 22. Mail to:  
**FRANCHISE TAX BOARD, PO BOX 942867, SACRAMENTO CA 94267-0001** ..... ■ 66

**Step 12**

**Interest and Penalties**

67 Interest, late return penalties, and late payment penalties ..... 67

68 Underpayment of estimated tax. Fill in circle: ○ FTB 5805 attached ○ FTB 5805F attached ..... ■ 68

69 Total amount due. See page 22 ..... 69

70 If you **do not** need California income tax forms mailed to you next year, fill in the circle ..... ● 70 ○

**Step 13**

**Direct Deposit (Refund Only)**

Do not attach a voided check or a deposit slip.  
Fill in the boxes to have your refund directly deposited. Routing number \_\_\_\_\_ ▶ ●

Account Type:  
Checking ●  Savings ●  Account number \_\_\_\_\_ ▶ ●

**IMPORTANT:** See "Attachments to your return" on page 9 in the Form 540 instructions to find out if you should attach a copy of your complete federal return. Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. 9

**Sign Here**

It is unlawful to forge a spouse's signature.

Joint return? See page 22.

Your signature \_\_\_\_\_ Daytime phone number \_\_\_\_\_

X \_\_\_\_\_ ( ) \_\_\_\_\_

Spouse's signature (if filing joint, both must sign) \_\_\_\_\_

X \_\_\_\_\_ Date \_\_\_\_\_

Paid preparer's signature (declaration of preparer is based on all information of which preparer has any knowledge) \_\_\_\_\_ Paid preparer's SSN/PTIN \_\_\_\_\_

Firm's name (or yours if self-employed) \_\_\_\_\_ Firm's address \_\_\_\_\_ FEIN \_\_\_\_\_

# California Resident Income Tax Return 2001

FORM

540

Fiscal year filers only: Enter month of year end: month \_\_\_\_\_ year 2002.

**Step 1**

Your first name: \_\_\_\_\_ Initial: \_\_\_\_\_ Last name: \_\_\_\_\_ PBA Code: \_\_\_\_\_

If joint return, spouse's first name: \_\_\_\_\_ Initial: \_\_\_\_\_ Last name: \_\_\_\_\_

Present home address — number and street, PO Box, or rural route: \_\_\_\_\_ Apt. no.: \_\_\_\_\_ PMB no.: \_\_\_\_\_

City, town, or post office: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

**Name and Address**

**Step 1a**

Your social security number: \_\_\_\_\_ Spouse's social security number: \_\_\_\_\_

**SSN**

**IMPORTANT:**  
Your social security number is required.

**Step 2**

**Filing Status**

Fill in only one.

1  Single  
 2  Married filing joint return (even if only one spouse had income)  
 3  Married filing separate return. Enter spouse's social security number above and full name here \_\_\_\_\_  
 4  Head of household (with qualifying person). STOP. See page 16.  
 5  Qualifying widow(er) with dependent child. Enter year spouse died \_\_\_\_\_

**Step 3**

**Exemptions**

6 If your parent (or someone else) can claim you (or your spouse, if married) as a dependent on his or her tax return, even if he or she chooses not to, fill in this circle  6

7 **Personal:** If you filled in 1, 3, or 4 above, enter 1 in the box. If you filled in 2 or 5, enter 2 in the box. If you filled in the circle on line 6, see page 16  7 X \$79 = \$ \_\_\_\_\_

8 **Blind:** If you (or if married, your spouse) are visually impaired, enter 1; if both, enter 2  8 X \$79 = \$ \_\_\_\_\_

9 **Senior:** If you (or if married, your spouse) are 65 or older, enter 1; if both, enter 2  9 X \$79 = \$ \_\_\_\_\_

10 Add line 7 through line 9. This is your total exemption credit before the dependent exemption credit  10 **Total** \$ \_\_\_\_\_

11 **Dependents:** Enter name and relationship. **Do not include yourself or your spouse.**

**Dependent Exemptions**

\_\_\_\_\_ Total dependent exemption credit  11 X \$247 = \$ \_\_\_\_\_

**Step 4**

**Taxable Income**

Attach check or money order here.

12 State wages from your Form(s) W-2, box 14  12 \_\_\_\_\_

13 Enter federal adjusted gross income from Form 1040, line 33; Form 1040A, line 19; Form 1040EZ, line 4; or TeleFile Tax Record, line 1  13 \_\_\_\_\_

14 California adjustments – subtractions. Enter the amount from Schedule CA (540), line 33, column B  14 \_\_\_\_\_  
**Caution:** If line 33, column B is a negative amount, see Schedule CA (540), line 33 instructions.

15 Subtract line 14 from line 13. If less than zero, enter the result in parentheses. See page 48  15 \_\_\_\_\_

16 California adjustments – additions. Enter the amount from Schedule CA (540), line 33, column C  16 \_\_\_\_\_  
**Caution:** If line 33, column C is a negative amount, see Schedule CA (540), line 33 instructions.

17 California adjusted gross income. Combine line 15 and line 16  17 \_\_\_\_\_

18 Enter the **larger** of:   
 Your California **itemized deductions** from Schedule CA (540), line 40; **OR**  
 Your California **standard deduction** shown below for your filing status:  
 • Single or Married filing separate ..... \$2,960  
 • Married filing joint, Head of household, or Qualifying widow(er) ..... \$5,920  
 (Dependent of someone else and filled in the circle on line 6 ..... See page 17)  18 \_\_\_\_\_

19 Subtract line 18 from line 17. This is your taxable income. If less than zero, enter -0-  19 \_\_\_\_\_

**Step 5**

**Tax**

Attach copy of your Form(s) W-2, and W-2G. Also, attach any Form(s) 1099 showing California tax withheld.

20 Tax. Fill in circle if from:  Tax Table  Tax Rate Schedule  FTB 3800 or  FTB 3803  20 \_\_\_\_\_  
**Caution:** If under age 14 and you have more than \$1,500 of investment income, read the line 20 instructions to see if you must attach form FTB 3800.

21 Exemption credits. If your federal AGI is more than \$130,831, see page 17. Otherwise, add line 10 and line 11 and enter the result here  21 \_\_\_\_\_

22 Subtract line 21 from line 20. If less than zero, enter -0-  22 \_\_\_\_\_

23 Tax. Fill in circle if from:  Schedule G-1, Tax on Lump-Sum Distributions  form FTB 5870A, Tax on Accumulation Distribution of Trusts  23 \_\_\_\_\_

24 Add line 22 and line 23. Continue to Side 2  24 \_\_\_\_\_

Your name \_\_\_\_\_ Your SSN: \_\_\_\_\_

**Step 6**

**Special Credits and Nonrefundable Renter's Credit**

25 Amount from Side 1, line 24 ..... 25

28 Enter credit name \_\_\_\_\_ code no \_\_\_\_\_ and amount ..... ▶ 28

29 Enter credit name \_\_\_\_\_ code no \_\_\_\_\_ and amount ..... ▶ 29

30 To claim more than two credits, see page 18 ..... ● 30

31 Nonrefundable renter's credit. See page 18 for "Step 6" ..... ● 31

33 Add line 28 through line 31. These are your total credits ..... 33

34 Subtract line 33 from line 25. If less than zero, enter -0- ..... 34

**Step 7**

**Other Taxes**

35 Alternative minimum tax. Attach Schedule P (540) ..... ● 35

36 Other taxes and credit recapture. See page 20 ..... ● 36

37 Add line 34 through line 36. This is your total tax ..... ● 37

**Step 8**

**Payments**

38 California income tax withheld. See page 20 ..... ■ 38

39 2001 CA estimated tax and other payments. See page 21 ..... ■ 39

41 Excess SDI. See page 21 ..... ■ 41

**Child and Dependent Care Expenses Credit.** See page 21; attach form FTB 3506

● 42 \_\_\_\_\_ ■ 43 \_\_\_\_\_

■ 44 \_\_\_\_\_ ■ 45 \_\_\_\_\_

46 Add line 38, line 39, line 41, and line 45. These are your total payments ..... 46

**Step 9**

**Overpaid Tax or Tax Due**

47 Overpaid tax. If line 46 is more than line 37, subtract line 37 from line 46 ..... 47

48 Amount of line 47 you want applied to your 2002 estimated tax ..... ■ 48

49 Overpaid tax available this year. Subtract line 48 from line 47 ..... ■ 49

50 Tax due. If line 46 is less than line 37, subtract line 46 from line 37 ..... 50

**Step 10**

**Contributions**

CA Seniors Special Fund. See page 23 ..... ● 51	00	CA Breast Cancer Research Fund ... ● 56	00
Alzheimer's Disease/Related Disorders Fund ..... ● 52	00	CA Firefighters' Memorial Fund ... ● 57	00
CA Fund for Senior Citizens ..... ● 53	00	Emergency Food Assistance Program Fund ..... ● 58	00
Rare and Endangered Species Preservation Program ..... ● 54	00	CA Peace Officer Memorial Foundation Fund ..... ● 59	00
State Children's Trust Fund for the Prevention of Child Abuse ..... ● 55	00	Lupus Foundation of America, California Chapters Fund ..... ● 60	00

64 Add line 51 through line 60. These are your total contributions ..... ● 64

**Step 11**

**Refund or Amount You Owe**

65 **REFUND OR NO AMOUNT DUE.** Subtract line 64 from line 49. Mail to:  
**FRANCHISE TAX BOARD, PO BOX 942840, SACRAMENTO CA 94240-0000** ..... ■ 65

66 **AMOUNT YOU OWE.** Add line 50 and line 64. See page 22. Mail to:  
**FRANCHISE TAX BOARD, PO BOX 942867, SACRAMENTO CA 94267-0001** ..... ■ 66

**Step 12**

**Interest and Penalties**

67 Interest, late return penalties, and late payment penalties ..... 67

68 Underpayment of estimated tax. Fill in circle: ○ FTB 5805 attached ○ FTB 5805F attached ..... ■ 68

69 Total amount due. See page 22 ..... 69

70 If you **do not** need California income tax forms mailed to you next year, fill in the circle ..... ● 70 ○

**Step 13**

**Direct Deposit (Refund Only)**

Do not attach a voided check or a deposit slip.  
Fill in the boxes to have your refund directly deposited. Routing number \_\_\_\_\_ ▶ ●

Account Type:  
Checking ●  Savings ●  Account number \_\_\_\_\_ ▶ ●

**IMPORTANT:** See "Attachments to your return" on page 9 in the Form 540 instructions to find out if you should attach a copy of your complete federal return. Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. 9

**Sign Here**

It is unlawful to forge a spouse's signature.

Joint return? See page 22.

Your signature \_\_\_\_\_ Daytime phone number \_\_\_\_\_

X \_\_\_\_\_ ( ) \_\_\_\_\_

Spouse's signature (if filing joint, both must sign) \_\_\_\_\_

X \_\_\_\_\_ Date \_\_\_\_\_

Paid preparer's signature (declaration of preparer is based on all information of which preparer has any knowledge) \_\_\_\_\_ Paid preparer's SSN/PTIN \_\_\_\_\_

Firm's name (or yours if self-employed) \_\_\_\_\_ Firm's address \_\_\_\_\_ FEIN \_\_\_\_\_

2001 California Adjustments – Residents

CA (540)

Important: Attach this schedule directly behind Form 540, Side 2.

Name(s) as shown on return

Social security number

Part I Income Adjustment Schedule

Table with columns A (Federal Amounts), B (Subtractions), and C (Additions). Rows include Section A - Income items like Wages, salaries, tips, etc. (7), Taxable interest income (8), Ordinary dividends (9), State tax refund (10), Alimony received (11), Business income or (loss) (12), Capital gain or (loss) (13), Other gains or (losses) (14), Total IRA distributions (15), Total pensions and annuities (16), Rental real estate, royalties, partnerships, S corporations, trusts, etc. (17), Farm income or (loss) (18), Unemployment compensation (19), Social security benefits (20), Other income (21), and Total (22).

Section B - Adjustments to Income

Table with columns A, B, and C. Rows include IRA deduction (23), Student loan interest deduction (24), Medical savings account deduction (25), Moving expenses (26), One-half of self-employment tax (27), Self-employed health insurance deduction (28), Keogh and self-employed SEP and SIMPLE plans (29), Penalty on early withdrawal of savings (30), Alimony paid (31a), Add line 23 through line 31a (32), and Total (33).

Part II Adjustments to Federal Itemized Deductions

Table with rows 35-39 for federal itemized deductions and row 40 for standard deduction comparison. Row 40 includes instructions for single or married filing separate, married filing joint, head of household, or qualifying widow(er).

2001

Depreciation and Amortization Adjustments

Do not complete this form if your California depreciation amounts are the same as federal amounts.

3885A

Name(s) as shown on return Business or activity to which Form FTB 3885A relates Social security number

Part I Identify the activity as passive or nonpassive. (See instructions.)

1 This form is being completed for a passive activity. This form is being completed for a nonpassive activity.

Part II Election to Expense Certain Tangible Property (IRC Section 179).

2 Enter the amount from line 12 of the worksheet in the instructions 2

Table with 6 columns: (a) Description of property placed in service, (b) Date placed in service, (c) California basis for depreciation, (d) Method, (e) Life or rate, (f) California depreciation deduction. Row 3 is the first data row.

4 Add the amounts on line 3, column (f) 4

5 California depreciation for assets placed in service prior to 2001 5

6 Total California depreciation from this activity. Add the amounts on line 2, line 4, and line 5 6

7 Total federal depreciation from this activity. Enter depreciation from your federal Form 4562, line 21 7

8 a If line 6 is more than line 7, enter the difference here and see instructions 8a

b If line 6 is less than line 7, enter the difference here and see instructions 8b

Table with 6 columns: (a) Description of cost amortizable, (b) Date placed in service, (c) California basis for amortization, (d) Code section, (e) Period or percentage, (f) California amortization deduction. Row 9 is the first data row.

10 Total California amortization from this activity. Add the amounts on line 9, column (f) 10

11 California amortization of costs that began before 2001 11

12 Total California amortization from this activity. Add the amounts on line 10 and line 11 12

13 Total federal amortization from this activity. Enter amortization from your federal Form 4562, line 42 13

14 a If line 12 is more than line 13, enter the difference here and see instructions 14a

b If line 12 is less than line 13, enter the difference here and see instructions 14b

2001

California Capital Gain or Loss Adjustment

Do not complete this schedule if all of your California gains (losses) are the same as your federal gains (losses).

D

Table with 5 columns: (a) Description of property, (b) Sales price, (c) Cost or other basis, (d) Loss, (e) Gain. Row 1a is the first data row.

2 Net gain or (loss) shown on California Schedule(s) K-1 (541, 565, 568, and 100S) 2

3 Capital gain distributions (federal Form 1099-DIV, box 2a minus box 2e) 3

4 Total 2001 gains from all sources. Add column (e) amounts of line 1a, line 1b, line 2, and line 3 4

5 2001 loss. Add column (d) amounts of line 1 and line 2 5

6 California capital loss carryover from 2000, if any. See instructions 6

7 Total 2001 loss. Add line 5 and line 6 7

8 Combine line 4 and line 7. If a loss, go to line 9. If a gain, go to line 10 8

9 If line 8 is a loss, enter the smaller of: (a) the loss on line 8; or (b) \$3,000 (\$1,500 if married filing a separate return). See instructions 9

10 Enter the amount from federal Form 1040, line 13 10

11 Enter the California gain from line 8 or loss from line 9 11

12 a If line 10 is more than line 11, enter the difference here and on Schedule CA (540 or 540NR) line 13, col. B 12a

b If line 10 is less than line 11, enter the difference here and on Schedule CA (540 or 540NR), line 13, col. C 12b

2001 California Adjustments – Residents

CA (540)

Important: Attach this schedule directly behind Form 540, Side 2.

Name(s) as shown on return

Social security number

Part I Income Adjustment Schedule

Table with columns A (Federal Amounts), B (Subtractions), and C (Additions). Rows include Section A - Income items like Wages, salaries, tips, etc. (7), Taxable interest income (8), Ordinary dividends (9), State tax refund (10), Alimony received (11), Business income or (loss) (12), Capital gain or (loss) (13), Other gains or (losses) (14), Total IRA distributions (15), Total pensions and annuities (16), Rental real estate, royalties, partnerships, S corporations, trusts, etc. (17), Farm income or (loss) (18), Unemployment compensation (19), Social security benefits (20), and Other income (21) with sub-items a-f. Total line 22.

Section B - Adjustments to Income

Table with columns A, B, and C. Rows include IRA deduction (23), Student loan interest deduction (24), Medical savings account deduction (25), Moving expenses (26), One-half of self-employment tax (27), Self-employed health insurance deduction (28), Keogh and self-employed SEP and SIMPLE plans (29), Penalty on early withdrawal of savings (30), Alimony paid (31a), and Total (33).

Part II Adjustments to Federal Itemized Deductions

Table with rows 35-39 for federal itemized deductions and row 40 for standard deduction comparison. Row 40 includes instructions for filing status and transfer amounts.

2001

Depreciation and Amortization Adjustments

Do not complete this form if your California depreciation amounts are the same as federal amounts.

3885A

Name(s) as shown on return Business or activity to which Form FTB 3885A relates Social security number

Part I Identify the activity as passive or nonpassive. (See instructions.)

1 This form is being completed for a passive activity. This form is being completed for a nonpassive activity.

Part II Election to Expense Certain Tangible Property (IRC Section 179).

2 Enter the amount from line 12 of the worksheet in the instructions 2

Table with 6 columns: (a) Description of property placed in service, (b) Date placed in service, (c) California basis for depreciation, (d) Method, (e) Life or rate, (f) California depreciation deduction. Row 3 is the first data row.

4 Add the amounts on line 3, column (f) 4

5 California depreciation for assets placed in service prior to 2001 5

6 Total California depreciation from this activity. Add the amounts on line 2, line 4, and line 5 6

7 Total federal depreciation from this activity. Enter depreciation from your federal Form 4562, line 21 7

8 a If line 6 is more than line 7, enter the difference here and see instructions 8a

b If line 6 is less than line 7, enter the difference here and see instructions 8b

Table with 6 columns: (a) Description of cost amortizable, (b) Date placed in service, (c) California basis for amortization, (d) Code section, (e) Period or percentage, (f) California amortization deduction. Row 9 is the first data row.

10 Total California amortization from this activity. Add the amounts on line 9, column (f) 10

11 California amortization of costs that began before 2001 11

12 Total California amortization from this activity. Add the amounts on line 10 and line 11 12

13 Total federal amortization from this activity. Enter amortization from your federal Form 4562, line 42 13

14 a If line 12 is more than line 13, enter the difference here and see instructions 14a

b If line 12 is less than line 13, enter the difference here and see instructions 14b

2001

California Capital Gain or Loss Adjustment

Do not complete this schedule if all of your California gains (losses) are the same as your federal gains (losses).

D

Table with 5 columns: (a) Description of property, (b) Sales price, (c) Cost or other basis, (d) Loss, (e) Gain. Row 1a is the first data row.

2 Net gain or (loss) shown on California Schedule(s) K-1 (541, 565, 568, and 100S) 2

3 Capital gain distributions (federal Form 1099-DIV, box 2a minus box 2e) 3

4 Total 2001 gains from all sources. Add column (e) amounts of line 1a, line 1b, line 2, and line 3 4

5 2001 loss. Add column (d) amounts of line 1 and line 2 5

6 California capital loss carryover from 2000, if any. See instructions 6

7 Total 2001 loss. Add line 5 and line 6 7

8 Combine line 4 and line 7. If a loss, go to line 9. If a gain, go to line 10 8

9 If line 8 is a loss, enter the smaller of: (a) the loss on line 8; or (b) \$3,000 (\$1,500 if married filing a separate return). See instructions 9

10 Enter the amount from federal Form 1040, line 13 10

11 Enter the California gain from line 8 or loss from line 9 11

12 a If line 10 is more than line 11, enter the difference here and on Schedule CA (540 or 540NR) line 13, col. B 12a

b If line 10 is less than line 11, enter the difference here and on Schedule CA (540 or 540NR), line 13, col. C 12b

# Instructions for Form FTB 3519

## Payment Voucher for Automatic Extension for Individuals

### General Information

Use form FTB 3519 **only** if:

- You cannot file your 2001 return\* by April 15, 2002; **and**
- You owe tax for 2001.

**Note:** This form is not an application for an installment agreement. If you are not able to fully pay your income tax, get form FTB 3567, Installment Agreement Request Booklet.

Use the worksheet below to determine if you owe tax.

- If you **do not** owe tax, there is nothing to file at this time. Do not complete or mail this voucher. But, you must file your return by October 15, 2002.
- If you owe tax, complete the voucher at the bottom of this page. Then mail it and your check or money order to the Franchise Tax Board (FTB) by April 15, 2002, to avoid late-payment penalties. See Penalties and Interest for more information.

**Note:** You may also pay your tax by credit card. You will be charged a fee for this service. If you pay by credit card, do not mail the payment voucher to the FTB. Call (800) 272-9829 and enter jurisdiction code 1555 or visit the website: [www.officialpayments.com](http://www.officialpayments.com)

\* When you do file your 2001 return, you can e-file. Go to our Website at: [www.ftb.ca.gov](http://www.ftb.ca.gov). Otherwise, you must use Form 540A, Form 540, or Long Form 540NR. **Note:** If you use form FTB 3519, you may not file Form 540 2EZ or Short Form 540NR.

**Name and Address.** Be sure to fill in your complete name(s), address, and social security number(s) on the voucher. If you lease a private mailbox (PMB) from a

private business rather than a PO box from the United States Postal Service, include the box number in the field labeled "PMB no." in the address area.

### Penalties and Interest

If you fail to pay your total tax liability by April 15, 2002, a late-payment penalty plus interest will be added to your tax due. If after April 15, 2002, you find that your estimate of tax due was too low, you should pay the additional tax as soon as possible to avoid further accumulation of penalties and interest. Pay your additional tax with another form FTB 3519 voucher. If you do not file your return by October 15, 2002, you will be assessed a late-filing penalty plus interest from the original due date of the return.

### Taxpayers Residing or Traveling Abroad

If you are living or traveling outside the United States on April 15, 2002, the deadline to file your return and pay the tax is June 17, 2002. Interest will accrue from the original due date (April 15, 2002) until the date of payment. If you need additional time to file your tax return, you will be allowed an automatic six-month extension without filing a written request. To qualify for the extension, you must file your tax return by December 16, 2002. To avoid any late-payment penalties, you must pay 100% of your tax liability by June 17, 2002. When filing your return, be sure to attach a statement to the front indicating that you were "abroad on April 15, 2002."

### TAX PAYMENT WORKSHEET FOR YOUR RECORDS

1	Total tax you expect to owe. This is the amount you expect to enter on Form 540A, line 23; Form 540, line 37; or Long Form 540NR, line 46	1	
2	Payments and credits:		
a	California income tax withheld (including nonresident withholding)	2a	
b	California estimated tax payments and amount applied from your 2000 return	2b	
c	Other payments and credits, including any tax payments made with any previous form FTB 3519 voucher	2c	
3	Total tax payments and credits. Add line 2a, line 2b, and line 2c	3	
4	Tax due. Is line 1 more than line 3?	4	

- No. Stop here.** You have no tax due. **DO NOT MAIL THE PAYMENT VOUCHER.** Your return, when filed by October 15, 2002, will verify that you qualified for the extension.
- Yes.** Subtract line 3 from line 1. This is your tax due. Enter the tax due amount from line 4 as the "Amount of payment" on the form FTB 3519 voucher below. Fill in your name(s), address, and social security number(s), and separate the voucher from this page where it says "DETACH HERE." Make a check or money order payable to "Franchise Tax Board." Also write your social security number and "2001 FTB 3519" on the check or money order. Mail both the check or money order and the voucher to: **FRANCHISE TAX BOARD, PO BOX 942867, SACRAMENTO CA 94267-0051**

✓ Keep this completed worksheet with your tax records.

✂ DETACH HERE — — — — — IF NO PAYMENT IS DUE, DO NOT MAIL — — — — — DETACH HERE ✂

TAXABLE YEAR **2001** Payment Voucher for Automatic Extension for Individuals Calendar year – **Due April 15, 2002** CALIFORNIA FORM **3519 (PIT)**

Your first name	Initial	Last name	Your social security number
If joint payment, spouse's first name	Initial	Last name	Spouse's social security number
Present home address – number and street, PO Box, or rural route			Apt. no.
			PMB no.
City, town, or post office			State
			ZIP Code

**IF PAYMENT IS DUE, MAIL TO:**  
 FRANCHISE TAX BOARD  
 PO BOX 942867  
 SACRAMENTO CA 94267-0051

If amount of payment is zero, do not mail form } Amount of payment





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visit our website:

[www.ftb.ca.gov](http://www.ftb.ca.gov)

# Instructions for Schedule CA (540)

These instructions are based on the Internal Revenue Code (IRC) as of January 1, 1998 and the California Revenue and Taxation Code (R&TC).

## General Information

In general, California law conforms to the Internal Revenue Code (IRC) as of January 1, 1998. However, there are continuing differences between California and federal tax law. California has not conformed to most of the changes made to the IRC by the federal Internal Revenue Service Restructuring and Reform Act of 1998 (Public Law 105-206) and the Ticket to Work and Work Incentives Improvement Act of 1999 (Public Law 106-170). California has not conformed to any of the changes made by the Tax and Trade Relief Extension Act of 1998 (Public Law 105-277), the Miscellaneous Trade and Technical Corrections Act of 1999 (Public Law 106-36), the FSC Repeal and Extraterritorial Income Exclusion Act of 2000 (Public Law 106-519), the Consolidated Appropriations Act of 2001 (Public Law 106-554), and the Economic Growth and Tax Relief Reconciliation Act of 2001 (Public Law 107-16).

### New Differences Between California and Federal Law for 2001:

- Grants paid to low-income individuals. See the instructions for line 21f.
- Rebates or vouchers from a local water agency, energy agency, or energy supplier. See the instructions for line 21f.
- Interest deduction allowed for interest paid on any loan or indebtedness from a utility company to purchase energy efficient equipment and products for California residents. See the instructions for line 38.
- Net operating Loss – Pierce's Disease. See the instructions for line 21f.

### California law is the same as federal law in the following areas:

**IRC Section 179 expense deduction.** The maximum deduction amount is now \$24,000.

**Roth IRAs.** The contribution rules and distribution rules are the same.

**Self-employed health insurance deduction.** The percentage for 2001 is 60%.

## Purpose

Use this schedule to make adjustments to your federal adjusted gross income and to your federal itemized deductions using California law.

## Part I – Specific Line Instructions

### Column A – Federal Amounts

**Line 7 through Line 21** – Enter on line 7 through line 21 the same amounts you entered on your federal Form 1040, line 7 through line 21, Form 1040A, line 7 through line 14b; or Form 1040EZ line 1, line 2, and line 3). Also enter the following if applicable:

- The total IRA distribution received on line 15(a);
- The total pension or annuity distribution received on line 16(a); and
- The total social security retirement benefit received on line 20(a).

### Line 22 – Total

Combine the amounts on line 7 through line 21.

**Line 23 through Line 30** – Enter the same amounts you entered on your federal Form 1040, line 23 through line 30 or Form 1040A, line 16 and line 17.

**Line 31a and Line 31b** – Enter on line 31a the same amount you entered on your federal Form 1040, line 31a. Enter on line 31b the social security number and last name of the person to whom you paid alimony.

**Line 32** – Add line 23 through line 31a. However, if you made any of the adjustments described in the instructions for federal Form 1040, line 32 or if you claimed the foreign housing deduction from federal Form 2555, Foreign Earned Income, or Form 2555-EZ, Foreign Earned Income Exclusion, enter the amount from Form 1040, line 32 on this line.

### Line 33 – Total

Subtract line 32 from line 22.

### Column B and Column C – Subtractions and Additions

Use these columns to enter subtractions and additions to the federal amounts in column A that are necessary because of differences between California and federal law. Enter all amounts as positive numbers unless instructed otherwise.

You may need one of the following FTB publications to complete column B and column C:

- 1001, Supplemental Guidelines to California Adjustments;
- 1005, Pension and Annuity Guidelines;
- 1031, Guidelines for Determining Resident Status; or
- 1032, Tax Information for Military Personnel.

Go to our Website at: [www.ftb.ca.gov](http://www.ftb.ca.gov) to order a publication or form, or see the back cover of your tax booklet.

### Line 7 – Wages, Salaries, Tips, etc.

Generally, you will not make any adjustments on this line. If you did not receive any of the following types of income, make no entry on this line in either column B or column C.

**Active duty military pay.** If a military member is domiciled in a community property state other than California, the resident spouse's community half of military pay is not included in total AGI or California AGI. In this case only, enter the resident spouse's community half of military income on line 7, column B. Get FTB Pub. 1032 for more information.

**Ride-sharing benefits or sick pay received under the Federal Insurance Contributions Act and Railroad Retirement Act.** California excludes these items from income. Enter in column B the amount of these benefits included in the amount in column A.

**Income exempted by U.S. tax treaties (unless specifically exempt for state purposes also).** If you excluded this income from your federal return, enter the excluded amount in column C. If you claimed foreign earned income or housing cost exclusion under IRC Section 911, see the instructions for line 21. Get FTB Pub. 1001 for more information.

**Exercising a California Qualified Stock Option (CQSO) does not result in compensation.** To qualify: your earned income from the corporation granting the CQSO must be \$40,000 or less; the market value of the options granted to you must be \$100,000 or less; the total number of shares must be 1,000 or less; and, the corporation issuing the option must designate that the stock qualifies as a California qualified stock option at the time the option is granted. If you included in federal income an amount qualifying for this exclusion, enter that amount in column B.

**Employer-provided meals.** California law has not conformed to the federal provision that allows employees to exclude (and employers to deduct) the value of meals solely because the meals were provided to more than 50% of the employees. Check with your employer if you think that this might apply to you. If it does, enter in column C the amount of these benefits that were excluded for federal tax purposes.

**Education assistance.** Generally, California and federal law are the same regarding the exclusion from wages, up to \$5,250, for employer-provided education assistance. However, California allows an exclusion for certain graduate level courses.

Enter in column B the qualified expenses paid or incurred by your employer for you to take such graduate level courses.

### Line 8 – Taxable Interest Income

If you did not receive any of the kinds of income listed below, do not make an entry on this line in either column B or column C.

Enter in column B the interest you received from:

- U.S. saving bonds (except for interest from series EE U.S. savings bonds issued after 1989 that qualified for the Education Savings Bond Program exclusion);
- U.S. Treasury bills, notes, and bonds;
- Any other bonds or obligations of the United States and its territories; or
- The state of California in conjunction with the refund of the smog impact fee if you were not allowed to deduct the smog impact fee when it was paid.

Get FTB Pub. 1001 if you received interest income from the following sources:

- Loans made in an enterprise zone (EZ); or
- Items listed above passed through to you from S corporations, trusts, partnerships, or limited liability companies (LLCs).

**Do not** make entries in either column B or column C for interest you earned on Federal National Mortgage Association (Fannie Mae) Bonds, Government National Mortgage Association (Ginnie Mae) Bonds, and Federal Home Loan Mortgage Corporations (FHLMC) securities.

Enter in column C the interest you identified as tax-exempt interest on your federal Form 1040 (or Form 1040A), line 8b **and** which you received from:

- Non-California state bonds;
- Non-California municipal bonds issued by a county, city, town, or other local government unit;
- Obligations of the District of Columbia issued after December 27, 1973; and
- Non-California bonds if the interest was passed through to you from S corporations, trusts, partnerships, or LLCs.

### Line 9 – Ordinary dividends

Generally, you will not make an adjustment on this line. However, certain mutual funds are qualified to pay "exempt-interest dividends" if at least 50% of their assets consist of tax-exempt government obligations. The portion of the exempt-interest dividend that is tax-exempt for federal purposes will be shown on your

annual statement from the mutual fund. The federal information will be correct for California if the exempt-interest dividends are from California state or local obligations. If the California exempt-interest dividend amount is more than the federal exempt-interest dividend amount, enter the difference in column B.

Get FTB Pub. 1001 if you received dividends from:

- Noncash patronage dividends from farmers' cooperatives or mutual associations;
- A federal S corporation that is a California C corporation;
- A controlled foreign corporation;
- Distributions of pre-1987 earnings from S corporations; or
- Undistributed capital gains from regulated investment company (RIC) shareholders.

#### Line 10 – State Tax Refund

California does not tax the state income tax refund you received in 2001. Enter in column B the amount of state tax refund you entered in column A.

#### Line 11 – Alimony Received

If you are a nonresident alien and received alimony that was not included in your federal income, enter the alimony on this line in column C. Otherwise, make no entry on this line.

#### Line 12 – Business Income or (Loss)

Adjustments to federal business income or loss you reported in column A generally are necessary because of the difference between California and federal law relating to depreciation methods, special credits, and accelerated write-offs. As a result, the recovery period or basis you use to figure California depreciation may be different from the amount used for federal purposes, and you may need to make an adjustment to your business income or loss.

Adjustments are figured on form FTB 3885A, Depreciation and Amortization Adjustments, and are most commonly necessary because of the following:

- **Before January 1, 1987**, California did not allow depreciation under the federal accelerated cost recovery system. You must continue to figure California depreciation for those assets in the same manner as prior years.
- **On or after January 1, 1987**, California provides special credits and accelerated write-offs that affect the California basis of qualifying assets. Refer to the bulleted list below.

Use form FTB 3801, Passive Activity Loss Limitation, to figure the total adjustment for line 12 if you have:

- One or more passive activities that produce a loss; or
- One or more passive activities that produce a loss **and** any nonpassive activity reported on federal Schedule C.

Use form FTB 3885A to figure the total adjustment for line 12 if you have:

- Only nonpassive activities which produce either gains or losses (or combination of gains and losses); or
- Passive activities that produce gains.

Get FTB Pub. 1001 for more information about:

#### Income related to:

- Business, trade, or profession carried on within California that is an integral part of a unitary business carried on both within and outside California; or
- Pro-rata share of income received from a controlled foreign corporation by a U.S. shareholder.

#### Basis adjustments related to:

- Property acquired prior to becoming a California resident;
- Sales or use tax credit for property used in an EZ, Local Agency Military Base Recovery Area (LAMBRA), or Targeted Tax Area (TTA), or former LARZ;
- Reduced recovery periods for fruit-bearing grapevines replaced in a California vineyard on or after 1/1/92 as a result of phylloxera infestation; or on or after 1/1/97 as a result of Pierce's disease;
- Expenditures for tertiary injectants;
- Property placed in service on an Indian reservation after 1/1/94 and before 12/31/03;
- Amortization of pollution control facilities;
- Discharge of real property business indebtedness;
- Employer-paid child care program;
- Employer-paid child care plan;
- Vehicles used in an employer-sponsored ridesharing program;
- An enhanced oil recovery system;
- Joint Strike Fighter property costs;
- The cost of making a business accessible to disabled individuals;
- Property for which you received an energy conservation subsidy from a public utility on or after 1/1/95 and before 1/1/97; or
- Research and experimental expenditures.

#### Business expense deductions related to:

- Wages paid in an EZ, LAMBRA, Manufacturing Enhancement Area (MEA), or TTA;

- Certain employer costs for employees who are also enrolled members of Indian tribes;
- Abandonment or tax recoupment fees for open-space easements and timberland preserves;
- Club dues or payments made to a club that restricts membership or the use of its services or facilities on the basis of age, sex, race, religion, color, ancestry, or national origin;
- Lobbying expenses denied under IRC Section 162;
- Business located in an EZ, LAMBRA, or TTA;
- Research expense;
- Employer wage expense for the Work Opportunity Credit and Welfare-to-Work Credit;
- Pro-rata share of deductions received from a controlled foreign corporation by a U.S. shareholder;
- Interest paid on indebtedness in connection with company-owned life insurance policies;
- Premiums paid on life insurance policies, annuities or endowment contracts issued after 6/8/97 where the owner of the business is directly or indirectly a policy beneficiary; or
- Meals provided to more than 50% (but less than 100%) of employees on the employment premises for the employer's convenience.

#### Line 13 – Capital Gain or (Loss)

Generally, you will not make any adjustments on this line if you do not have any of the items listed below. Use Schedule D, California Capital Gain or Loss Adjustment, only if you have differences from:

- Gain on the sale of qualified small business stock which qualifies for the gain exclusion under IRC Section 1202;
- Basis amounts resulting from differences between California and federal law in prior years;
- Gain or loss on stock and bond transactions;
- Installment sale gain reported on form FTB 3805E, Installment Sale Income;
- Gain on the sale of personal residence where depreciation was allowable;
- Flow-through gain or loss from partnerships, fiduciaries, S corporations, or LLCs; or
- Capital loss carryover from your 2000 California Schedule D.

Get FTB Pub. 1001 for more information about:

- Disposition of S corporation stock acquired before 1987;
- Gain on sale or disposition of qualified assisted housing development to low-income residents or to specified entities maintaining housing for low-income residents;
- Undistributed capital gain for RIC shareholders;
- Gain or loss on the sale of property inherited before 1/1/87; or
- Capital loss carrybacks.

#### Line 14 – Other Gains or (Losses)

Generally, you will not make any adjustments on this line. However, the California basis of your other assets may be different from the federal basis due to differences between California and federal law. Therefore, you may have to adjust the amount of other gains or losses. Get Schedule D-1, Sales of Business Property.

#### Line 15 – Total IRA Distributions

Generally, you will not make any adjustments on this line. However, there may be significant differences in the taxable amount of a distribution (including a distribution from conversion of a traditional IRA to a Roth IRA), depending on when you made your contributions to the IRA. Differences may also occur if you changed your residency status after you first began making contributions to your IRA or if your California IRA deductions were different from your federal deductions because of differences between California and federal self-employment income.

If the taxable amount using California law is:

- Less than the amount taxable under federal law, enter the difference in column B; or
- More than the amount taxable under federal law, enter the difference in column C.

Get FTB Pub. 1005 for more information and worksheets for figuring the adjustment to enter on this line, if any.

**Education (Ed) IRA** – If column A includes a taxable distribution from an Ed IRA, you may owe additional tax on that amount. Get form FTB 3805P, Additional Taxes on Qualified Plans (Including IRAs) and Other Tax-Favored Accounts.

#### Line 16 – Total Pensions and Annuities

Generally, you will not make any adjustments on this line. However, if you received tier 2 railroad retirement benefits or partially taxable distributions from a pension plan, you may need to make the adjustments described on the next page.

If you received a federal Form RRB 1099-R for railroad retirement benefits and included all or part of these benefits in taxable income in column A, enter the taxable benefit amount in column B.

If you began receiving a retirement annuity between 7/1/86 and 1/1/87 and elected to use the three-year rule for California purposes and the annuity rules for federal purposes, enter in column C the amount of the annuity payments you excluded for federal purposes.

**Line 17 – Rental Real Estate, Royalties, Partnerships, S Corporations, and Trusts, etc.**

Adjustments to federal income or loss you reported in column A generally are necessary because of the difference between California and federal law relating to depreciation methods, special credits, and accelerated write-offs. As a result, the recovery period or basis you use to figure California depreciation may be different from the recovery period or amount used for federal purposes, and you may need to make an adjustment to your income or loss. For more information, see the instructions for Column B and Column C, line 12.

Use form FTB 3801, Passive Activity Loss Limitation, to figure the total adjustment for line 17 if you have:

- One or more passive activities that produce a loss; or
- One or more passive activities that produce a loss **and** any nonpassive activity reported on federal Schedule E.

Use form FTB 3885A, Depreciation and Amortization Adjustments, to figure the total adjustment for line 17 if you have:

- Only nonpassive activities which produce either gains or losses (or combination of gains and losses); or
- Passive activities that produce gains.

Get FTB Pub. 1001 for more information about accumulation distributions to beneficiaries for which the trust was not required to pay California tax because the beneficiary's interest was contingent.

**Line 18 – Farm Income or (Loss)**

Adjustments to federal income or loss you report in column A generally are necessary because of the difference between California and federal law relating to depreciation methods, special credits, and accelerated write-offs. As a result, the recovery period or basis you use to figure California depreciation may be different from the amount used for federal purposes, and you may need to make an adjustment to your farm income or loss.

Use form FTB 3801, Passive Activity Loss Limitation, to figure the total adjustment for line 18 if you have:

- One or more passive activities that produce a loss; or
- One or more passive activities that produce a loss **and** any nonpassive activity reported on federal Schedule F.

Use form FTB 3885A, Depreciation and Amortization Adjustments, to figure the total adjustment for line 18 if you have:

- Only nonpassive activities which produce either gains or losses (or combination of gains and losses); or
- Passive activities that produce gains.

**Line 19 – Unemployment Compensation**

California does not tax unemployment compensation. Enter on line 19, column B the amount of unemployment compensation shown in column A. **Note:** Do not include qualified state tuition program earnings.

**Line 20 – Social Security Benefits**

California does not tax social security benefits or equivalent Tier 1 railroad retirement benefits. Enter in column B the amount of social security benefits or equivalent tier 1 railroad retirement benefits shown in column A.

**Line 21 – Other Income**

**a. California Lottery Winnings.** California does not tax California lottery winnings. Enter in column B the amount of California lottery winnings included in the federal amount on line 21 in column A. **Note:** Do not include lottery winnings from other states. They are taxable to California.

**b. Disaster Loss Carryover from FTB 3805V.** If you have a California disaster loss carryover from your 2000 form FTB 3805V, Net Operating Loss (NOL) Computation and NOL and Disaster Loss Limitations, enter that amount as a positive number in column B.

**c. Federal NOL deduction from Form 1040, line 21.** If the amount on line 21 in column A includes a federal NOL, enter the amount of the federal NOL deduction as a positive number in column C. Get form FTB 3805V to figure the allowable California NOL deduction.

**d. NOL Carryover from FTB 3805V.** The allowable NOL carryover under California law is different from the allowable NOL carryover under federal law. Use form FTB 3805V to figure the allowable California NOL deduction, and enter it as a positive number in column B.

**Note:** If your 2000 form FTB 3805V has both disaster loss carryovers and NOL carryovers, you will need to separately state these two amounts. See line 21b for disaster loss carryovers.

**e. NOL deduction from FTB 3805D, FTB 3805Z, FTB 3806, FTB 3807, or FTB 3809.** Enter in column B the total NOL deduction figured on the following forms.

- FTB 3805D, Net Operating Loss (NOL) Computation and Limitation – Pierce's Disease;
- FTB 3805Z, Enterprise Zone Deduction and Credit Summary, line 4b;
- FTB 3806, Los Angeles Revitalization Zone Deduction and Credit Summary, line 2b;
- FTB 3807, Local Agency Military Base Recovery Area Deduction and Credit Summary, line 4b; or
- FTB 3809, Targeted Tax Area Deduction and Credit Summary, line 3b.

**f. Other (describe).**

**Reward from a crime hotline.** Enter in column B the amount of a reward authorized by a government agency, that you received from a crime hotline established by a government agency or nonprofit organization and that is included in the amount on line 21 in column A. **Note:** You may not make this adjustment if you are an employee of the hotline or someone who sponsors rewards for the hotline.

**Payments for alternative transportation (free or subsidized parking, alternative commute methods, monthly transit passes, etc.).** Enter in column B the amount that you received from your employer, other than wages or salaries, for participating in an alternative transportation method and that is included in the amount on line 21 in column A. For more information, get FTB Pub. 1001.

**Federal foreign earned income or housing exclusion.** Enter in column C the amount deducted from federal income on Form 1040, line 21.

**Beverage container recycling income.** Enter in column B the amount of this type of income that you included in the amount on line 21 in column A.

**Rebates from water agencies or suppliers.** Enter in column B the amount of this type of income that you included in the amount on line 21 in column A.

**Original issue discount (OID) for debt instruments issued in 1985 and 1986.**

In the year of sale or other disposition, you must recognize the difference between the amount reported on your federal return and the amount reported for California purposes. **Issuers:** Enter the difference between the federal deductible amount and the California deductible amount on line 21f in column B. **Holders:** Enter the difference between the amount included in federal gross income and the amount included for California purposes on line 21f in column C.

**Foreign income of nonresident aliens.** Adjust federal income to reflect worldwide income computed under California law. Enter losses from foreign sources in column B. Enter foreign source income in column C.

**Cost-share payments received by forest landowners.** Enter in column B the cost-share payments received from the Department of Forestry and Fire Protection under the California Forest Improvement Act of 1978 or from the United States Department of Agriculture, Forest Service, under the Forest Stewardship Program and the Stewardship Incentives Program, pursuant to the Cooperative Forestry Assistance Act.

**Qualified prizes with cash options.** Enter in column C the lump-sum award or the value of an annuity awarded that was not included in federal gross income due to the special rule for cash options for receipt of qualified prizes.

**Archer Medical Savings Accounts or a Medicare + Choice MSA –** If column A includes a taxable distribution from an MSA, you may owe additional tax on that amount. Get form FTB 3805P, Additional Taxes on Qualified Plans (Including IRAs) and Other Tax-Favored Accounts.

**Reparation payments for individuals who were required to perform forced or slave labor during World War II.** California law provides an income exclusion for any amounts received as reparation payments paid by the German Foundation known as Remembrance, Responsibility, and the Future, or any other source of humanitarian reparations made for purposes of redressing the injustice done to persons who were required to perform slave or forced labor during World War II. Enter in column B the amount of reparation payments included in the amount on line 21.

**Grants paid to low-income individuals.** California law allows an income exclusion for grants paid to low income individuals to construct or retrofit buildings to be more energy efficient.

**Rebates or vouchers from a local water agency, energy agency or energy supplier.** California law allows an income exclusion for rebates or vouchers from a local water agency, energy agency or energy supplier for the purchase and installation of water conservation appliances and devices.

**Line 22 – Total**

Add line 7 through line 21f in column B and column C. Enter the totals on line 22.

**Line 23 through Line 30** – Do not enter adjustments on these lines. California law is the same as federal law.

**Line 31a – Alimony Paid**

Enter the social security number and last name of the person to whom you paid alimony. **Note:** If you are a nonresident alien and did not deduct alimony on your federal return, enter the amount you paid in column C.

**Line 32** – Add line 23 through line 31a in column B and column C.

If you claimed the foreign housing deduction, include that amount in the total you enter in column B, line 32. Enter the amount and "Form 2555" or "Form 2555-EZ" on the dotted line next to line 32.

**Line 33 – Total**

Subtract line 32 from line 22 in column B and column C.

Transfer the amount from line 33:

- Column B to Form 540, Side 1, line 14; and
- Column C to Form 540, Side 1, line 16.

If you plan to itemize deductions, go to Part II.

**Caution:** If Schedule CA (540), line 33:

**Column B** is a negative number, do not transfer it to Form 540, line 14. Instead, transfer the amount as a positive number to Form 540, line 16; or

**Column C** is a negative number, do not transfer it to Form 540, line 16. Instead, transfer the amount as a positive number to Form 540, line 14.

**Part II – Specific Line Instructions**

**Line 35 – Federal Itemized Deductions**

Enter the total amount of itemized deductions from your federal Schedule A, lines 4, 9, 14, 18, 19, 26, and 27. **Important:** If you did not itemize deductions on your federal tax return but will itemize deductions on your California tax return, first complete federal Schedule A. Then complete Schedule CA (540), Part II, line 35 through line 40.

**Line 36 – State, Local, and Foreign Income Taxes**

Enter the state and local income tax from federal Schedule A, line 5 and only the portion relating to foreign income taxes from line 8. Include state disability insurance (SDI), limited partnership tax, and income or franchise tax paid by S corporations.

**Line 38 – Other Adjustments**

**Adoption-Related Expenses.** If you deducted adoption-related expenses on your federal Schedule A and are claiming the adoption cost credit for the same amounts on your Form 540, enter the amount of the adoption cost credit claimed as a negative number on line 38.

**Mortgage Interest Credit.** If you reduced your federal mortgage interest deduction by the amount of your mortgage interest credit (from federal Form 8396, Mortgage Interest Credit), increase your California itemized deductions by the same amount. Enter the amount of your federal mortgage interest credit as a positive number on line 38.

**Nontaxable Income Expenses.** If, on federal Schedule A, you claim expenses related to producing income taxed under federal law but not taxed by California, enter the amount as a negative number on line 38. You may claim expenses related to producing income taxed by California law but not taxed under federal law by entering the amount as a positive number on line 38.

**Employee Business Expenses.** If you completed federal Form 2106, Employee Business Expense (or Form 2106-EZ), also complete Form 2106 (or Form 2106-EZ, Unreimbursed Employee Business Expenses) using California amounts. Specific differences between California and federal law are shown below.

- **Assets placed in service before 1/1/87:** Figure expenses based on California law; and
- **Federal employees on temporary duty status:** California does not conform to the federal provision that expanded temporary duties to include prosecutive duties, in addition to investigative duties. Therefore, travel expenses paid or incurred in connection with temporary duty status (exceeding one year), involving the prosecution (or support of the prosecution) of a federal crime, should not be included when completing Form 2106 (or Form 2106-EZ) using California amounts.

Compare line 10 on both Forms 2106 (or line 6 if using Forms 2106-EZ). If the federal amount is larger, enter the difference as a negative number on line 38. If the California amount is larger, enter the difference as a positive number on line 38.

**Investment Interest Expense.** Your California deduction for investment interest expense may be different from your federal deduction. You must use form

FTB 3526, Investment Interest Expense Deduction, to figure the amount to enter on line 38.

**Interest Expense Deduction.** Your California interest expense deduction may be different from your federal deduction. A deduction is allowed for interest paid on any loan or financed indebtedness from a utility company to purchase energy efficient equipment and products for California residences.

**Gambling Losses.** California Lottery losses are not deductible for California. Enter the amount of California Lottery losses shown on federal Schedule A as a negative number on line 38.

**Federal Estate Tax.** Federal estate tax paid on income in respect of a decedent is not deductible for California. Enter the amount of federal estate tax shown on federal Schedule A as a negative number on line 38.

**Generation Skipping Transfer Tax.** Tax paid on generation skipping transfers is not deductible under California law. Enter the amount of expenses shown on federal Schedule A as a negative number on line 38.

**Contribution of Appreciated Stock to a Private Foundation.** For contributions made during 2001, enter the difference between the fair market value of the stock and the California basis as a negative number on line 38.

**State Legislator's Travel Expenses.** Under California law, deductible travel expenses for state legislators include only those incurred while away from their place of residence overnight. Figure the difference between the amount allowed using federal law and the amount allowed using California law. Enter the difference as a negative number on line 38.

**Charitable Contribution Carryover Deduction.** If you are deducting a prior year charitable contribution carryover, and the California carryover is larger than the federal carryover, enter the additional amount as a positive number on line 38.

**Casualty and Theft Losses for Income-producing Property.** California law does not conform to the federal provision that allows taking the full deduction if a casualty or a theft loss occurs for income-producing property. For California purposes, the deduction is considered to be a miscellaneous itemized deduction and is subject to the 2% of AGI floor.

If you included a casualty or theft loss from income-producing property on federal Schedule A, line 27, and if:

- Schedule A, line 26 is more than zero, then no adjustment is necessary; or
- Schedule A, line 26 is zero, then;

1. Enter the total of the amounts on your federal Schedule A, line 26 and line 27 here . . . . . 1 \_\_\_\_\_
2. Reduce Schedule A, line 27 by the amount of the casualty and theft loss deduction and enter the result here . . . . . 2 \_\_\_\_\_
3. Recalculate Schedule A, line 20 through line 26 by including the casualty and theft loss deduction and enter here . . . . . 3 \_\_\_\_\_
4. Add line 2 and line 3. Enter the result here . . . . . 4 \_\_\_\_\_
5. Subtract line 4 from line 1 and include it as a negative number on line 38.

**Line 40 – California Itemized Deductions**

Is the amount on Form 540, line 13 more than the amount shown below for your filing status?

Single or married filing separate . . . . .	\$130,831
Married filing joint or qualifying widow(er) . . . . .	\$261,664
Head of household . . . . .	\$196,248

**NO** Transfer the amount from line 39 to line 40. Do not complete the worksheet.

**YES** Complete the Itemized Deductions Worksheet.

Itemized Deductions Worksheet	
1. Amount from Schedule CA (540), line 39 . . . . .	1 _____
2. Using California amounts, add the amounts on federal Schedule A, line 4, line 13, and line 19 plus any gambling losses included on line 27 . . . . .	2 _____
3. Subtract line 2 from line 1 . . . . .	3 _____
<b>Note:</b> If -0-, stop. Enter the amount from line 1 on Schedule CA (540), line 40.	
4. Multiply line 3 by 80% . . . . .	4 _____
5. Amount from Form 540, line 13 . . . . .	5 _____
6. Enter the amount shown above for your filing status . . . . .	6 _____
7. Subtract line 6 from line 5 . . . . .	7 _____
<b>Note:</b> If -0- or less, stop. Enter the amount from line 1 on Schedule CA (540), line 40.	
8. Multiply line 7 by 6% (.06) . . . . .	8 _____
9. Compare line 4 and line 8. Enter the smaller amount here . . . . .	9 _____
10. Total itemized deductions. Subtract line 9 from line 1. Enter here and on Schedule CA (540), line 40 . . . . .	10 _____

# Instructions for Form FTB 3885A

## Depreciation and Amortization Adjustments

### General Information

In general, California law conforms to the Internal Revenue Code (IRC) as of January 1, 1998. However, there are continuing differences between California and federal tax law. California has not conformed to most of the changes made to the IRC by the federal Internal Revenue Service Restructuring and Reform Act of 1998 (Public Law 105-206) and the Ticket to Work and Work Incentives Improvement Act of 1999 (Public Law 106-170). California has not conformed to any of the changes made by the Tax and Trade Relief Extension Act of 1998 (Public Law 105-277), the Miscellaneous Trade and Technical Corrections Act of 1999 (Public Law 106-36), the FSC Repeal and Extraterritorial Income Exclusion Act of 2000 (Public Law 106-519), the Consolidated Appropriations Act of 2001 (Public Law 106-554), and the Economic Growth and Tax Relief Reconciliation Act of 2001 (Public Law 107-16). Get FTB Pub. 1001, Supplemental Guidelines to California Adjustments, for more information on differences between California and federal law for the following items:

- **Amortization of certain intangibles (IRC Section 197);**
- **Qualified Indian reservation property; and**
- **Grapevines subject to Phylloxera or Pierce's disease.**

### Purpose

Use form FTB 3885A **only** if there is a difference between the amount of depreciation and amortization allowed as a deduction using California law and the amount allowed using federal law. California law and federal law have not always allowed the same depreciation methods, special credits, or accelerated write-offs. As a result, the recovery periods or the basis on which the depreciation is figured for California may be different from the amounts used for federal purposes. You will probably have reportable differences if all or part of your assets were placed in service:

- **Before 1/1/87.** California did not allow depreciation under the federal accelerated cost recovery system (ACRS), and you must continue to figure California depreciation for those assets in the same manner as in prior years.
- **On or after 1/1/87.** California provides special credits and accelerated write-offs that affect the California basis of qualifying assets. California did not conform to all changes to federal law enacted in 1993, and this causes the California basis or recovery periods to be different for some assets.

Differences may also occur for other less common reasons, and the instructions for Schedule CA (540 or 540NR) list them on the line for the type of income likely to be affected. You may also get FTB Pub. 1001 for more information about figuring and reporting these adjustments.

If you are reporting differences for assets related to a passive activity, get form FTB 3801, Passive Activity Loss Limitations, for more information about passive activities.

Do not use form FTB 3885A to report depreciation expense from federal Form 2106, Employee Business Expenses. Instead, see the instructions for Schedule CA (540 or 540NR), line 38.

### Specific Line Instructions

**Note:** Prepare and file a separate form FTB 3885A for each business or activity on your return that has a difference between California and federal depreciation or amortization. Enter the name of the business or activity in the space provided at the top of the form. If you need more space, attach additional sheets. However, complete Part II, Election to Expense Certain Tangible Property (IRC Section 179), only once.

#### Part I Identify the Activity as Passive or Nonpassive

**Line 1** – Check the box to identify the activity as passive or nonpassive. A passive activity is any activity involving the conduct of any trade or business in which you did not materially participate. Get form FTB 3801 for more information.

If the activity is passive, use this form as a worksheet to figure the depreciation adjustment to carry to form FTB 3801. **Caution:** Beginning in 1994, and for federal purposes only, rental real estate activities of persons in real property business are not automatically treated as passive activities. California did not conform to this provision.

#### Part II Election To Expense Certain Tangible Property

You may elect to expense part of the cost of depreciable personal property used in your trade or business and certain other property described in federal Pub. 946, How to Depreciate Property. To do so, you must have purchased property, as defined in the IRC Section 179(d)(2), and placed it in service during 2001, or have a carryover of unused cost from 2000. If you elect this deduction,

you must reduce your California depreciable basis by the IRC Section 179 expense. The maximum Section 179 expense allowed for 2001 is \$24,000.

Complete the worksheet below to figure IRC Section 179 expense for California. Include all assets qualifying for the deduction because the limit applies to all qualifying assets as a group rather than to each asset individually. **Refer to federal Form 4562 for information.**

<b>1</b>	Maximum dollar limitation for California .....	<b>1</b>	\$ 24,000
<b>2</b>	Total cost of Section 179 property placed in service .....	<b>2</b>	
<b>3</b>	Threshold cost of Section 179 property before reduction in limitation .....	<b>3</b>	\$200,000
<b>4</b>	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0- .....	<b>4</b>	
<b>5</b>	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0- .....	<b>5</b>	
<b>(a) Description of property</b>		<b>(b) Cost</b>	<b>(c) Elected cost</b>
<b>6</b>			
<b>7</b>	Listed property (elected Section 179 cost) .....	<b>7</b>	
<b>8</b>	Total elected cost of Section 179 property. Add column (c), line 6 and line 7 .....	<b>8</b>	
<b>9</b>	Tentative deduction. Enter the smaller of line 5 or line 8 .....	<b>9</b>	
<b>10</b>	Carryover of disallowed deduction from 2000 .....	<b>10</b>	
<b>11</b>	Enter the smaller of business income (not less than -0-) or line 5 .....	<b>11</b>	
<b>12</b>	Section 179 expense deduction for California. Add line 9 and line 10, but do not enter more than line 11. Also enter the result on FTB 3885A, line 2 .....	<b>12</b>	
<b>13</b>	Carryover of disallowed deduction to 2002. Add line 9 and line 10. Subtract line 12 from the result .....	<b>13</b>	

#### Part III Depreciation

**Line 3** – Complete column (a) through column (f) for each tangible asset or group of assets placed in service during the tax year. Be sure to use the California basis for assets on which you elected to take the Section 179 deduction. It will be the difference between line 6, column (b) and line 6, column (c) of the worksheet in Part II.

**Line 8a and Line 8b** – Are you using this form as a worksheet in connection with form FTB 3801?

**Yes** Enter the amount from line 8a or line 8b on form FTB 3801, Side 2, California Passive Activity Worksheet, column (e).

**No** Include the amount from line 8a on Schedule CA (540 or 540NR) in column B on line 12 for federal Schedule C activities; on line 17 for federal Schedule E activities; and on line 18 for federal Schedule F activities.

Include the amount from line 8b on Schedule CA (540 or 540NR) in column C on line 12 for federal Schedule C activities; on line 17 for federal Schedule E activities; and on line 18 for federal Schedule F activities.

#### Part IV Amortization

**Line 9** – Complete column (a) through column (f) for intangible assets placed in service during the tax year. Be sure to use the California basis and the California recovery period.

**Line 14a and Line 14b** – Are you using this form as a worksheet in connection with form FTB 3801?

**Yes** Enter the amount from line 14a or line 14b on form FTB 3801, Side 2, California Passive Activity Worksheet, column (e).

**No** Include the amount from line 14a on Schedule CA (540 or 540NR) in column B on line 12 for federal Schedule C activities; on line 17 for federal Schedule E activities; and on line 18 for federal Schedule F activities.

Include the amount from line 14b on Schedule CA (540 or 540NR) in column C on line 12 for federal Schedule C activities; on line 17 for federal Schedule E activities; and on line 18 for federal Schedule F activities.

# Instructions for California Schedule D

## California Capital Gain or Loss Adjustment

### General Information

In general, California law conforms to the Internal Revenue Code (IRC) as of January 1, 1998. However, there are continuing differences between California and federal tax law. California has not conformed to most of the changes made to the IRC by the federal Internal Revenue Service Restructuring and Reform Act of 1998 (Public Law 105-206) and the Ticket to Work and Work Incentives Improvement Act of 1999 (Public Law 106-170). California has not conformed to any of the changes made by the Tax and Trade Relief Extension Act of 1998 (Public Law 105-277), the Miscellaneous Trade and Technical Corrections Act of 1999 (Public Law 106-36), the FSC Repeal and Extraterritorial Income Exclusion Act of 2000 (Public Law 106-519), the Consolidated Appropriations Act of 2001 (Public Law 106-554), and the Economic Growth and Tax Relief Reconciliation Act of 2001 (Public Law 107-16). For example, California does not conform to the federal reduced capital gains tax rates. California taxes capital gains at the same tax rate as other types of income.

**Note:** California law conforms to federal law for the Section 179 expense deduction. For 2001, the maximum amount is \$24,000.

### Purpose

Use California Schedule D **only** if there is a difference between your federal capital gains and losses and your California capital gains and losses associated with the following:

- Gain on the sale of qualified small business stock which qualifies for the gain exclusion under IRC Section 1202;
- Disposition of property that was expensed or depreciated at some time during the period you owned it; California and federal depreciation and property expensing methods were different before 1987 and after 1/1/93, and caused a difference between the California and federal basis;
- Gain or loss on stock and bond transactions;
- Installment sale gain reported on form FTB 3805E, Installment Sale Income;
- Gain on the sale of personal residence where depreciation was allowable;
- Flow-through gain or loss from partnerships, fiduciaries, S corporations, or LLCs;
- Distributed and undistributed capital gain dividends;
- Gain from involuntary conversion of capital assets not held for business profit; or
- Capital loss carryover from your 2000 California Schedule D.

For more information about the following, get FTB Pub. 1001:

- Disposition of property inherited before 1987;
- Disposition of S corporation stock acquired before 1987;
- Gain on the sale or disposition of a qualified assisted housing development to low-income residents or to specific entities maintaining housing for low-income residents; or
- Capital loss carryback.

**Exclusion of Gain on Qualified Small Business Stock.** California law (R&TC Section 18152.5) provides an exclusion (similar to the federal exclusion under IRC Section 1202) of 50% of the gain on the sale of qualifying small business stock originally issued after 8/10/93 that was held for more than 5 years. However, for California purposes, 80% of the issuing corporation's payroll must be attributable to employment located within California, and at least 80% of the value of the corporation's assets must be used by the corporation to actively conduct one or more qualified trades or businesses in California. See the Specific Line Instruction for Line 1b.

**Installment Sales.** If you sold property at a gain (other than publicly traded stocks or securities) and you will receive a payment in a tax year after the year of sale, you must report the sale on the installment method unless you elect not to do so. Get form FTB 3805E. Also, use that form if you received a payment in 2001, for an installment sale made in an earlier year. **Note:** You may elect not to use the installment sale method for California by reporting the entire gain on Schedule D (or Schedule D-1 for business assets) in the year of the sale and filing your return on or before the due date.

**At-Risk Rules and Passive Activity Limitations.** If you dispose of (1) an asset used in an activity to which the at-risk rules apply, or (2) any part of your interest in an activity to which the at-risk rules apply, and you have amounts in the activity for which you are not at risk, get and complete federal Form 6198, At-Risk Limitations, using California amounts to figure your California deductible loss under the at-risk rules. Once a loss becomes allowable under the at-risk rules, it becomes subject to the passive activity rules. Get form FTB 3801, Passive Activity Loss Limitations.

### Specific Line Instructions

**Note:** If you have gain on the sale of qualified small business stock that qualifies for the federal Section 1202 exclusion, go to the instructions for line 1b.

**Line 1a – List each capital asset transaction.**

**Column (a) – Description of Property.** Describe the asset you sold or exchanged.

**Column (b) – Sales Price.** Enter in this column either the gross sales price or the net sales price. If you received a Form 1099-B, 1099-S, or similar statement showing the gross sales price, enter that amount in column (b). However, if box 2 of Form 1099-B indicates that gross proceeds less commissions and option premiums were reported to IRS, enter that net amount in column (b). If you entered the net amount in column (b), do not include the commissions and option premiums in column (c).

**Column (c) – Cost or Other Basis.** In general, the cost or other basis is the cost of the property plus purchase commissions and improvements minus depreciation, amortization and depletion. Enter the cost or adjusted basis of the asset for California purposes. Use your records and California tax returns for years before 1987 to determine the California amount to enter in column (c). If you used an amount other than cost as the original basis, your federal basis may be different from your California basis. Other reasons for differences are:

#### Depreciation Methods and Property Expensing

Before 1987, California law did not allow the use of ACRS and did not allow the use of an asset depreciation range 20% above or below the standard rate. Before 1999, California had different limits on the expensing of property under IRC Section 179. California law permits rapid write-off of certain property such as solar energy systems, pollution control devices, and property used in an Enterprise Zone, LAMBRA, Targeted Tax Area, or LARZ.

**Inherited Property** – The California basis of property inherited from a decedent is generally fair market value (FMV) at the time of death. If you acquired community property as a surviving spouse, get FTB Pub. 1039, Basis of Property – Decedent/Surviving Spouse, for more information.

**S Corporation Stock** – Prior to 1987, California law did not recognize S corporations and your California basis in S corporation stock may differ from your federal basis. In general, your California basis will be cost-adjusted for income, loss, and distributions received after 1986, while your stock was California S corporation stock. Your federal basis will be cost-adjusted for income, loss, and distributions received during the time your stock qualified for federal S corporation treatment.

**Special Credits** – California law authorizes special tax credits not allowed under federal law or computed differently under federal law. In many instances if you claimed special credits related to capital assets, you must reduce your basis in the assets by the amount of credit.

Other adjustments may apply differently to the federal and California basis of your capital assets. Figure the original basis of your asset using the California law in effect when the asset was acquired, and adjust it according to provisions of California law in effect during the period of your ownership.

**Line 1b – Section 18152.5 Exclusion.** If the gain qualifying for the IRC Section 1202 exclusion also qualifies for the California exclusion under R&TC Section 18152.5: Enter in column (a) "Section 18152.5 Exclusion." Complete column (b) and column (c) according to the instructions for line 1a. Enter in column (d) the amount of gain that qualifies for the California exclusion. Enter in column (e) the entire gain realized. **If the gain qualifying for the IRC Section 1202 exclusion does not qualify for the California exclusion:** Complete column (a), column (b), and column (c) according to the instructions for line 1a. Enter -0- in column (d) and enter the entire gain realized in column (e).

**Line 3 – Capital Gain Distributions.** If you receive federal Form 2439, Notice to Shareholder of Undistributed Long-Term Capital Gains, from a mutual fund, do not include the **undistributed** capital gain dividends on Schedule D. If you receive federal Form 1099-DIV, Dividends and Distributions, enter the amount of **distributed** capital gain dividends.

**Line 6 – 2000 California Capital Loss Carryover.** Enter the amount of your 2000 California net capital loss that was more than the loss limitation.

**Line 8 – Net Gain or Loss.** If the amount on line 4 is more than the amount on line 7, subtract line 7 from line 4. Enter the difference as a gain on line 8.

If the amount on line 7 is more than the amount on line 4, subtract line 4 from line 7 and enter the difference as a loss on line 8.

Use the worksheet on this page to figure your capital loss carryover to 2002.

**Line 9** – If line 8 is a net capital loss, enter the smaller of the loss on line 8 or \$3,000 (\$1,500 if you are married filing a separate return).

**Line 12a** – Enter the difference on line 12a and on Schedule CA (540 or 540NR), line 13, column B.

**For example:**

**Loss on line 10 is less than loss on line 11.**

Federal loss on line 10 is	\$1,000
California loss on line 11 is	\$2,000
Subtract line 10 from line 11	\$1,000

**Gain on line 10 and loss on line 11.**

Federal gain on line 10 is	\$3,000
California loss on line 11 is	\$3,000
Add line 10 and line 11	\$6,000

**Line 12b** – Enter the difference on line 12b and on Schedule CA (540 or 540NR), line 13, column C.

**For example:**

**Loss on line 10 is more than loss on line 11.**

Federal loss on line 10 is	\$2,000
California loss on line 11 is	\$1,000
Subtract line 11 from line 10	\$1,000

**Loss on line 10 and gain on line 11.**

Federal loss on line 10 is	\$2,000
California gain on line 11 is	\$5,000
Add line 10 and line 11	\$7,000

#### California Capital Loss Carryover Worksheet

1. Loss from Schedule D, line 11, stated as a positive number	1
2. Amount from Form 540 or Form 540NR, line 17	2
3. Amount from Form 540 or Form 540NR, line 18	3
4. Subtract line 3 from line 2. If less than zero, enter as a negative amount	4
5. Combine line 1 and line 4. If less than zero, enter -0-	5
6. Loss from Schedule D, line 8	6
7. Enter the smaller of line 1 or line 5	7
8. Subtract line 7 from line 6. This is your capital loss carryover to 2002	8

# 2002 Instructions for Form 540-ES

## Estimated Tax For Individuals

### A Purpose

Use this form to figure and pay your estimated tax. **Estimated tax is the tax you expect to owe for 2002 after subtracting the tax you expect to have withheld and any credits you plan to take.** These estimated tax payments do not apply to your 2001 tax liability. Use these instructions and the 2002 Estimated Tax Worksheet to determine if you owe estimated tax for 2002 and to figure the required amount. If you need to make a payment for your 2001 tax liability, use form FTB 3519, Payment Voucher for Automatic Extension for Individuals, or form FTB 3567, Installment Agreement Request, or call (800) 338-0505.

Generally, the required estimated tax amount is based on the lesser of 80% of the current year's tax or 100% of the prior year's tax. **Note:** Certain taxpayers are limited in their use of the prior year's tax as a basis for figuring their estimated tax. See paragraph C, Limit on the Use of Prior Year's Tax, for more information.

### B Who Must Make Estimated Tax Payments

**Important note: California and federal estimated tax payment requirements are different.**

Generally, you must make 2002 estimated tax payments unless:

- 80% or more of your 2001 tax was paid by withholding; or
- 80% or more of your 2002 California adjusted gross income (AGI) will be wages or other income subject to withholding; or
- 80% or more of your 2002 tax will be paid by withholding; or
- Your tax for 2001 (after subtracting withholding and credits) was less than \$200 (\$100 if married filing separate); or
- Your tax for 2002 (after subtracting withholding and credits) will be less than \$200 (\$100 if married filing separate).

If you and your spouse paid joint estimated tax payments, but are now filing separate returns, either of you may claim all of the amount paid, or you may each claim part of the joint estimated payment(s). If you want the estimated tax payments to be divided, notify the FTB before the end of the tax year in which you wish to file separate returns so that the payments can be applied to the proper account. The FTB will accept in writing, any divorce agreement (or court ordered settlement) or a statement showing the allocation of the payments along with a notarized signature of both taxpayers. The statements should be sent to:

JOINT ESTIMATE CREDIT ALLOCATION M/S F-225  
TAXPAYER SERVICES CENTER  
FRANCHISE TAX BOARD  
PO BOX 942840  
SACRAMENTO CA 94240-0040

### C Limit on the Use of Prior Year's Tax

Individuals who are required to make estimated payments, and whose 2001 adjusted gross income is more than \$150,000 (or \$75,000 if married filing separate), must figure estimated tax based on the lesser of 80% of their tax for 2002 or 112% of their tax for 2001. This rule does not apply to farmers or fishermen.

### D When To Make Your Estimated Tax Payments

For estimated tax purposes, the year is divided into four payment periods. Each period has a specific payment due date. If you do not pay enough tax by the due date of each of the payment periods, you may be charged a penalty even if you are due a refund when you file your income tax return. The payment periods and due dates are:

**For the payment period:**  
January 1 through March 31, 2002  
April 1 through May 31, 2002  
June 1 through August 31, 2002  
Sept. 1 through Dec. 31, 2002

**Due date:**  
April 15, 2002  
June 17, 2002  
September 16, 2002  
January 15, 2003

**Filing An Early Return In Place of the 4th Installment.** If you file your 2002 tax return by January 31, 2003, and pay the entire balance due, you do not have to make your last estimated tax payment.

**Annualization Option.** If you do not receive your taxable income evenly during the year, it may be to your advantage to annualize your income. This method allows you to match your estimated tax payments to the actual period when you earned the income. You may use the annualization schedule included with the 2001 form FTB 5805, Underpayment of Estimated Tax by Individuals and Fiduciaries.

**Farmers and Fishermen.** You are a farmer or fisherman when at least two-thirds of your 2001 or 2002 gross income is from farming or fishing. If you qualify as a farmer or fisherman, you may:

- Pay all of your estimated tax by January 15, 2003; or
- File your tax return for 2002 on or before March 3, 2003, and pay the total tax due. In this case, you need not make estimated tax payments for 2002. Use form FTB 5805F, Underpayment of Estimated Tax by Farmers and Fishermen, to determine if you paid the required estimated tax. If the estimated tax is underpaid, attach the completed form FTB 5805F to the front of your return.

**Fiscal Year.** If you file your return on a fiscal-year basis, your due dates will be the 15th day of the 4th, 6th, and 9th months of your fiscal year and the 1st month of the following fiscal year. If a due date falls on a Saturday, Sunday, or legal holiday, use the next business day.

### E How To Use Form 540-ES Payment Voucher

Use the Estimated Tax Worksheet and your 2001 California income tax return as a guide for figuring your 2002 estimated tax. **Caution:** If you filed Form 540 2EZ for 2001, do not use the Form 540 2EZ instructions for figuring amounts on this worksheet. Instead, get the 2001 California Resident Income Tax Booklet or the 2001 California Nonresident or Part-Year Resident Income Tax Booklet.

**Note:** This form is not an application for an installment agreement. If you are not able to pay your income tax, get the FTB 3567, Installment Agreement Request Booklet.

There is a separate payment voucher for each due date. Please be sure you use the voucher with the correct due date shown in the top margin of the voucher. Complete Form 540-ES using black or blue ink:

1. Print your name, address, and social security number in the space provided on Form 540-ES.
2. Complete the payment box of the voucher by entering the amount of the payment that you are sending. Your entry must match the amount you are sending. Be sure that the amount shown on line 19 of the Estimated Tax Worksheet has been reduced by any overpaid tax on your 2001 return that you chose to apply toward your 2002 estimated tax payment.
3. Paying your tax:  
Check or money order – make your check or money order payable to “**Franchise Tax Board.**” Write your social security number and “Form 540-ES 2002” on it and mail to the address on the voucher.  
Credit card – Call (800) 272-9829 or visit the website: **www.officialpayments.com.** You will be charged a fee for this service. **Do not mail** the voucher if you pay by credit card.
4. Complete the Record of Estimated Tax Payments for your files.
5. **Fiscal-year filers:** Enter the month of your fiscal-year end.

### F Failure To Make Estimated Tax Payments

If you are required to make estimated tax payments and do not, or if you underpay any installment, a penalty may be assessed on the portion of estimated tax that was underpaid from the due date of the installment to the date of payment or the due date of your tax return, whichever is earlier. Refer to the 2001 form FTB 5805 for more information.

2002 Estimated Tax Worksheet Keep this worksheet for your records.

**Caution:** • If you filed Form 540 2EZ for 2001, do not use the Form 540 2EZ instructions for figuring amounts on this worksheet. Instead, get the 2001 California Resident Income Tax Booklet or the 2001 California Nonresident or Part-Year Resident Income Tax Booklet; or  
 • If your adjusted gross income (AGI) is over \$130,831, your itemized deductions and your exemption credits may be limited. See the instructions for Form 540 or Long Form 540NR for more information.

- 1 Residents:** Enter your estimated 2002 California AGI. **Nonresidents and part-year residents:** Enter your estimated 2002 total AGI from all sources . . . . . **1** \_\_\_\_\_
- 2 a** If you plan to itemize deductions, enter the estimated total of your itemized deductions . . . . . **2a** \_\_\_\_\_  
**b** If you do not plan to itemize deductions, enter the standard deduction for your filing status:  
 \$2,960 if you are single or married filing a separate return  
 \$5,920 if you are married filing a joint return, head of household, or a qualifying widow(er) . . . . . **2b** \_\_\_\_\_  
**c** Enter the amount from line 2a or line 2b, whichever applies . . . . . **2c** \_\_\_\_\_
- 3** Subtract line 2c from line 1 . . . . . **3** \_\_\_\_\_
- 4** Tax. Figure your tax on the amount on line 3 using the 2001 tax table or tax rate schedule in the instructions for Form 540, Form 540A, or Long Form 540NR. Also include any tax from form FTB 3800, Tax Computation for Children with Investment Income; or form FTB 3803, Parents' Election to Report Child's Interest and Dividends . . . . . **4** \_\_\_\_\_
- 5 Residents:** Skip to line 6. **Nonresidents and part-year residents:**  
**a** Compute this ratio:  $\frac{\text{Estimated 2002 California AGI (using Long Form 540NR)}}{\text{Estimated 2002 AGI from all sources (using Long Form 540NR)}}$  = . . . . . **5a** \_\_\_\_\_  
**b** Multiply the amount on line 4 by the ratio on line 5a. Enter the result on line 5b . . . . . **5b** \_\_\_\_\_
- 6 Residents:** Enter the exemption credit amount from the 2001 instructions for Form 540 or Form 540A . . . . . **6** \_\_\_\_\_  
**Nonresidents or part-year residents:** Multiply the total exemption credit from the 2001 instructions for Long Form 540NR by line 5a.
- 7 Residents:** Subtract line 6 from line 4. **Nonresidents or part-year residents:** Subtract line 6 from line 5b . . . . . **7** \_\_\_\_\_
- 8** Tax on accumulation distribution of trusts. See instructions for form FTB 5870A . . . . . **8** \_\_\_\_\_
- 9** Add line 7 and line 8 . . . . . **9** \_\_\_\_\_
- 10** Credits for joint custody head of household, dependent parent, senior head of household, child and dependent care expenses, and long-term care . . . . . **10** \_\_\_\_\_  
**Nonresidents and part-year residents:** For the child and dependent care expenses credit, use the amount from your 2001 Long Form 540NR, line 54. For the other credits listed on line 10, multiply the total 2001 credit amount by the ratio on line 5a.
- 11** Subtract line 10 from line 9 . . . . . **11** \_\_\_\_\_
- 12** Other credits (such as other state tax credit). See the 2001 instructions for Form 540, Form 540A, or Long Form 540NR . . . . . **12** \_\_\_\_\_
- 13** Subtract line 12 from line 11 . . . . . **13** \_\_\_\_\_
- 14** Interest on deferred tax from installment obligations under IRC Section 453 or 453A . . . . . **14** \_\_\_\_\_
- 15** 2002 Estimated Tax. Add line 13 and line 14. Enter the result, but not less than zero . . . . . **15** \_\_\_\_\_
- 16 a** Multiply line 15 by 80% (.80). Farmers and fishermen multiply line 15 by 66 2/3% (.6667) . . . . . **16a** \_\_\_\_\_  
**b** Enter 100% of the tax shown on your 2001 Form 540, line 34; Form 540A, line 23; or Long Form 540NR, line 43 . . . . . **16b** \_\_\_\_\_  
**c** Enter the amount from your 2001 Form 540, line 17; Form 540A, line 14; or Long Form 540NR, line 20 . . . . . **16c** \_\_\_\_\_  
**d** Is the amount on line 16c more than \$150,000 (\$75,000 if married filing a separate return)?  
**Yes.** Go to line 16e. **No.** Enter the lesser of line 16a or line 16b. Skip line 16e and 16f and go to line 17 . . . . . **16d** \_\_\_\_\_  
**e** Multiply 112% (1.12) by the tax shown on your 2001 Form 540, line 34; Form 540A, line 23; or Long Form 540NR, line 43. Go to line 16f . . . . . **16e** \_\_\_\_\_  
**f** Enter the lesser of line 16a or line 16e and go to line 17 . . . . . **16f** \_\_\_\_\_
- Caution:** Generally, if you do not prepay at least the amount on line 16d (or 16f if no amount on line 16d), you may owe a penalty for not paying enough estimated tax. To avoid a penalty, make sure your estimated tax on line 15 is as accurate as possible. If you prefer, you may pay 100% of your 2002 estimated tax (line 15).
- 17** California income tax withheld and estimated to be withheld during 2002 (include withholding on pensions, annuities, etc) . . . . . **17** \_\_\_\_\_
- 18 Balance.** Subtract line 17 from line 16d (or line 16f if no amount on line 16d). If less than \$200 (or less than \$100, if married filing separate), you do not have to make a payment at this time . . . . . **18** \_\_\_\_\_
- 19 Installment amount.** Divide the amount on line 18 by 4. Enter the result here and on each of your Forms 540-ES. If you will earn your income at an uneven rate during the year, see Annualization Option in the instructions under paragraph D . . . . . **19** \_\_\_\_\_

Record of Estimated Tax Payments

Payment voucher number	(a) Date	(b) Amount paid	(c) 2001 overpayment applied	(d) Total amount paid and credited (add (b) and (c))
<b>1</b>		\$	\$	\$
<b>2</b>				
<b>3</b>				
<b>4</b>				
<b>Total</b>		\$	\$	\$

# 2001 Child and Dependent Care Expenses Credit

# 3506

Attach to your California Form 540, 540A, or Long Form 540NR.

Name(s) as shown on return	Social Security Number

**Part I Unearned Income and Other Funds Received in 2001.** See instructions

SOURCE OF INCOME/FUNDS	AMOUNT	SOURCE OF INCOME/FUNDS	AMOUNT

**Part II Persons or Organizations Who Provided the Care – You must complete this part.** (If you need more space, attach a schedule.)

1 (a) Care provider's name	(b) Address (number, street, apt. no., city, state, and ZIP Code)	(c) Identifying number (SSN or EIN)	(d) Telephone number	(e) Amount paid (See instructions)
	-----		( )	
	-----		( )	

Did you receive dependent care benefits?  No Complete Part III below.  
 Yes Complete Part V before Part III.

**Part III Credit for Child and Dependent Care Expenses**

**2 Information about your qualifying person(s).** See instructions

(a) Qualifying person's name		(b) Qualifying person's social security number (see instructions)	(c) Qualifying person's year of birth or if disabled, enter the letter D	(d) Percentage of time spent in your California home	(e) Qualified expenses you incurred and paid in 2001 for the qualifying person listed in column (a)
First	Last				

3 Add the amounts in column (e) of line 2. <b>Do not</b> enter more than \$2,400 for one qualifying person or \$4,800 for two or more persons. If you completed Part V, enter the amount from line 31	<b>3</b>	
4 Enter YOUR <b>earned income</b> .	<b>4</b>	
5 If married filing a joint return, enter YOUR SPOUSE'S earned income (if your spouse was a student or was disabled, see the instructions); <b>all others</b> , enter the amount from line 4	<b>5</b>	
6 Enter the <b>smallest</b> of line 3, line 4, or line 5	<b>6</b>	
7 Enter the decimal amount shown in the chart on page 3 of the instructions for line 7	<b>7</b>	X
8 Multiply line 6 by the decimal amount on line 7. This is your allowable federal child and dependent care credit. Enter the result here and on Form 540A, line 30; Form 540, line 44; or Long Form 540NR, line 53	<b>8</b>	
9 Enter the decimal amount listed on the chart on page 3 of the instructions for line 9	<b>9</b>	X
10 Multiply the amount on line 8 by the decimal amount on line 9	<b>10</b>	
11 Credit for prior year expenses paid in 2001. See instructions for line 11	<b>11</b>	
12 Add line 10 and line 11. Enter the result here and on Form 540A, line 31 or Form 540, line 45. Long Form 540NR filers enter amount here and continue to Part IV	<b>12</b>	

**Part IV Nonresident and Part-Year Residents**

13 Did you maintain your primary home in California for yourself and the qualifying person(s) during 2001? (See instructions) If "Yes," continue. If "No," <b>stop</b> . You <b>do not</b> qualify for the credit	<b>13</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No
14 Enter the amount from Part III, line 12	<b>14</b>	
15 Enter the ratio from Long Form 540NR, line 25a. (If your ratio is more than 1.00, enter 1.00)	<b>15</b>	X _____
16 Multiply line 14 by the ratio on line 15. Enter here and on Long Form 540NR, line 54	<b>16</b>	

**Part V Dependent Care Benefits**

<b>17</b> Enter the total amount of dependent care benefits you received for 2001. This amount should be shown in box 10 of your Form(s) W-2. <b>Do not</b> include amounts that were reported to you as wages in box 1 of Form(s) W-2 . . . . .	<b>17</b>		
<b>18</b> Enter the amount forfeited, if any. See instructions . . . . .	<b>18</b>		
<b>19</b> Subtract line 18 from line 17 . . . . .	<b>19</b>		
<b>20</b> Enter the total amount of <b>qualified expenses</b> incurred in 2001 for the care of the <b>qualifying person(s)</b> . See instructions . . . . .	<b>20</b>		[Hatched Area]
<b>21</b> Enter the <b>smaller</b> of line 19 or line 20 . . . . .	<b>21</b>		
<b>22</b> Enter YOUR <b>earned income</b> . . . . .	<b>22</b>		
<b>23</b> If married filing a joint return, enter YOUR SPOUSE'S earned income (if your spouse was a student or was disabled, see the instructions for line 5); <b>all others</b> , enter the amount from line 22 . . . . .	<b>23</b>		
<b>24</b> Enter the <b>smallest</b> of line 21, line 22, or line 23 . . . . .	<b>24</b>		
<b>25</b> Excluded benefits. Enter here the <b>smaller</b> of the following: • The amount from line 24; or • \$5,000 (\$2,500 if married filing a separate return <b>and</b> you were required to enter your spouse's earned income on line 23) . . . . .	<b>25</b>		
<b>26</b> Taxable benefits. Subtract line 25 from line 19 . . . . .	<b>26</b>		
<b>27</b> Enter \$2,400 (\$4,800 if two or more qualifying persons) . . . . .	<b>27</b>		
<b>28</b> Enter the amount from line 25 . . . . .	<b>28</b>		
<b>29</b> Subtract the amount on line 28 from the amount on line 27. If zero or less, <b>stop</b> . You <b>do not qualify</b> for the credit. <b>Exception</b> – If you paid 2000 expenses in 2001, see instructions for line 11 . . . . .	<b>29</b>		
<b>30</b> Complete Part III, line 2. <b>Do not</b> include in column (e) any benefits shown on line 25 above. Add the amounts in column (e) and enter the total here . . . . .	<b>30</b>		
<b>31</b> Enter the <b>smaller</b> of line 29 or line 30. Also, enter this amount on Side 1, line 3 on the front of this form and complete line 4 through line 12 . . . . .	<b>31</b>		

**Worksheet – Credit for 2000 Expenses Paid in 2001**

- 1) Enter your 2000 qualified expenses paid in 2000 . . . . . \_\_\_\_\_
- 2) Enter your 2000 qualified expenses paid in 2001 . . . . . \_\_\_\_\_
- 3) Add the amounts on line 1 and line 2 . . . . . \_\_\_\_\_
- 4) Enter \$2,400 if care was for one qualifying person (\$4,800 for two or more) . . . . . \_\_\_\_\_
- 5) Enter any dependent care benefits received for 2000 and excluded from your income (from line 18 of 2000 federal Form 2441 or Schedule 2, Form 1040A) . . . . . \_\_\_\_\_
- 6) Subtract amount on line 5 from amount on line 4 and enter the result . . . . . \_\_\_\_\_
- 7) Compare your earned income for 2000 and your spouse's earned income for 2000 and enter the smaller amount . . . . . \_\_\_\_\_
- 8) Compare the amounts on line 3, line 6, and line 7 and enter the smallest amount . . . . . \_\_\_\_\_
- 9) Enter the amount on which you figured the credit for 2000 (from line 6 of 2000 federal Form 2441 or Schedule 2, Form 1040A) . . . . . \_\_\_\_\_
- 10) Subtract amount on line 9 from amount on line 8 and enter the result. If zero or less, stop here. You cannot increase your credit by any previous year's expenses . . . . . \_\_\_\_\_
- 11) Enter your 2000 federal adjusted gross income (AGI) (from your 2000 Form 540, line 13; 540A, line 12b; or Long Form 540NR, line 13) . . . . . \_\_\_\_\_
- 12) Find your 2000 federal AGI in the table of percentages (on page 3 of the instructions for line 7) and enter the corresponding decimal here . . . . . \_\_\_\_\_ X. \_\_\_\_\_
- 13) Multiply line 10 by line 12 . . . . . \_\_\_\_\_
- 14) Enter the percentage from form FTB 3506, line 9 based on your 2000 California AGI . . . . . \_\_\_\_\_ X. \_\_\_\_\_
- 15) Multiply line 13 by line 14. Enter the result here and on line 11 of your 2001 form FTB 3506. . . . . \_\_\_\_\_

# Instructions for Form FTB 3506

## Child and Dependent Care Expenses Credit

### General Information

You must attach the completed form FTB 3506 to your return.

### A Purpose

If you paid someone to care for your child or other qualifying person so you (and your spouse if filing a joint return) could work or look for work in 2001, you may be able to take the credit for child and dependent care expenses. However, you must have had **earned income** to do so. If you qualify to claim the credit, use form FTB 3506 to figure the amount of your credit.

If you (or your spouse if filing a joint return) received any **dependent care benefits** for 2001 that you excluded from your federal adjusted gross income, you must complete Part V of form FTB 3506 before you can figure the credit you may be entitled to in Part III. You do not have to claim the federal Child and Dependent Care Expenses Credit to claim the credit for California, but you must figure your **allowable** federal credit to complete this form. This is because the California credit is calculated as a percentage of the federal credit.

For additional definitions, requirements, and instructions, get federal Form 2441 or Publication 503, Child and Dependent Care Expenses.

### B Qualifications

You may take the credit if **all nine** of the following apply.

1. Your filing status is single, head of household, qualifying widow(er) with dependent child, or married filing joint. See "Married Persons Filing Separate Returns" on this page.
2. Care must be provided for one or more qualifying persons. A qualifying person is:
  - Any child under age 13 who you can claim as your dependent and for whom you can claim a dependent exemption (If the child turned 13 during the year, the child is a qualifying person for the part of the year he or she was under age 13),
  - Your spouse who was physically or mentally not able to care for himself or herself, or
  - Your dependent who was physically or mentally not able to care for himself or herself and for whom you can claim a dependent exemption (or could claim a dependent exemption except that the person had gross income of \$2,900 or more). If this person is your child, see "Which Parent Can Claim the Child as the Qualifying Person?" on this page.See federal Form 2441 or Publication 503 for more information.
3. The care was provided so you (and your spouse if you were married) could work or look for work. However, if you did not find a job and have no earned income for the year, you do not qualify for the credit. But if your spouse was a student or disabled, see the instructions for Part III, line 5.
4. You (and your spouse if you were married) paid over half the cost of keeping up your home for the qualifying person(s). The cost includes rent, mortgage interest, real estate taxes, utilities, home repairs, and food eaten at home.
5. You and the qualifying person(s) lived in the same home.
6. Your primary home (where you and your qualifying person(s) lived) must have been in California.
7. The person who provided the care was not your spouse, a parent of the individual for whom care was provided, or a person for whom you can claim a dependent exemption. If your child provided the care, he or she must have been age 19 or older by the end of 2001.

8. You report the required information about the care provider on line 1 and, if claiming the credit, the information about the qualifying person(s) on line 2.
9. Your California adjusted gross income is \$100,000 or less.

### Which Parent Can Claim the Child as the Qualifying Person?

The child can **only** be the qualifying person of one parent when the parents are filing separate returns. Even if both parents pay for childcare for the same child, both parents will **not** qualify for the credit. Use the information in this part to determine if you can claim the child as the qualifying person.

### Divorced or Separated from the Child's Other Parent

For purposes of determining whether your child is your qualifying person, you are considered divorced or separated if **either** of the following applies:

- You are divorced or separated under a decree of divorce, decree of separate maintenance, judgment of legal separation, or decree of separation; or
- You lived apart from your spouse for the entire last 6 months of 2001.

If you and the child's other parent were never married, see "Never Married to the Child's Other Parent" discussed on this page.

**Custodial Parent** – If you are the custodial parent and can claim the dependent exemption credit for your child, the child is your qualifying person. You are the custodial parent if you had physical custody of your child longer than your child's other parent during the calendar year.

If you cannot claim the dependent exemption credit for your child, you can still treat your child as your qualifying person if **all** of the following apply:

1. One or both parents had custody of the child for more than half the year.
2. One or both parents provided more than half the child's support for the year.
3. Either:
  - a. You stated in writing that the noncustodial parent may claim the dependent exemption that you were entitled to, or
  - b. The noncustodial parent provided at least \$600 of support for the child and claimed the dependent exemption credit for the child under a pre-1985 written agreement.

**Noncustodial Parent** – If you are the noncustodial parent, the child cannot be your qualifying person. The child is not your qualifying person even if you are able to claim the dependent exemption credit.

### Never Married to the Child's Other Parent

For your child to be your qualifying person, you must be able to claim the dependent exemption for your child. This includes the requirement that you provided more than half of the child's total support for the calendar year. To decide if you provided more than half the support, the amount you provided for the child's support must be compared to the entire amount of support the child received from all sources. All sources include (but are not limited to) the amount provided by others such as the other parent, other members living in the home, the child's own funds, food stamps, and Temporary Assistance for Needy Families provided by the state of California.

### Married Persons Filing Separate Returns

If your filing status is married filing separate and all of the following apply, you are considered unmarried for purposes of figuring the credit on form FTB 3506.

- You lived apart from your spouse during the last 6 months of 2001,

- The qualifying person(s) lived in your home more than half of 2001, and
- You provided over half the cost of keeping up your home.

If you meet all the requirements to be treated as unmarried and meet items 2 through 9 listed earlier, you may take the credit. If you do not meet all the requirements to be treated as unmarried, you do not qualify for the credit.

The child can only be the qualifying person of one parent when the parents are filing separate returns. Even if both parents pay for childcare for the same child, both parents will not qualify for the credit. For more information on which parent can claim the child, see federal Form 2441 or Publication 503.

## C Specific Line Instructions

### Part I

#### Unearned Income and Other Funds

List the source and amount of **any** money you received in 2001 that is not included in your earned income (line 4 and line 5) but that was used to support your household. Include child support, property settlements, public assistance benefits, court awards, inheritances, insurance proceeds, pensions and annuities, social security payments, workers compensation, unemployment compensation, interest, or dividends.

### Part II

#### Line 1

Complete column (a) through column (e) for each person or organization that provided the care. You can use federal Form W-10, Dependent Care Provider's Identification and Certification, or any other source listed in the instructions for Form W-10 to get the information from your care provider. If your provider does not give you the information, complete as much of the information as possible and explain that your provider did not give you the information you requested.

If you do not give correct or complete information, your credit may be disallowed unless you can show you used due diligence in trying to get the required information.

#### Columns (a) and (b)

Enter your care provider's complete name (or business name) and address. If you were covered by your employer's dependent care plan and your employer furnished the care (either at your workplace or by hiring a care provider), enter your employer's name in column (a). Next, enter "See W-2" in column (b). Enter your employer's telephone number in column (d). Leave column (c) and column (e) blank. If your employer paid a third party (not hired by your employer) on your behalf to provide the care, you must give information about the third party in column (a) through column (e).

#### Column (c)

If your care provider is an individual, enter his or her social security number. Otherwise, enter the provider's employer identification number. If your provider is a tax-exempt organization, enter "Tax-Exempt" in column (c).

#### Column (d)

Enter the telephone number of your care provider, including area code. We may call to verify the provider information.

#### Column (e)

Enter the total amount you **actually paid** in 2001 to your care provider. Also include amounts your employer paid to a third party on your behalf. It does not matter when the expenses were incurred. Do not reduce this amount by any reimbursement you received.

### Part III

#### Line 2

Complete column (a) through column (e) for each qualifying person. If you have more than five qualifying persons, attach a statement to your return with the required information and write "see attached." Be sure to put your name and social security number (SSN) on the statement.

#### Column (a)

Enter each qualifying person's name.

#### Column (b)

Enter the first two qualifying persons' social security numbers on Form 540, line 42 and line 43; Form 540A, line 28 and line 29; or Long Form 540NR, line 51 and line 52.

You **must** enter the qualifying person's SSN unless he or she was born and died in 2001. Be sure the name and SSN entered agree with the person's social security card. Otherwise, at the time we process your return, we may reduce or disallow your credit. If the person was born and died in 2001, and did not have an SSN, enter "Died" in column (b) and attach a copy of the person's birth certificate.

#### Column (c)

If the qualifying person is under 13 years old, enter the year of birth. If the qualifying person is disabled, enter "D."

#### Column (d)

If you shared custody of the qualifying person(s), enter the percentage of time you had physical custody.

#### Column (e)

Enter the qualified expenses you incurred and paid in 2001 for the person(s) listed in column (a). Do not include in column (e) qualified expenses:

- You incurred in 2001 but did not pay until 2002. You may be able to use these expenses to increase your 2002 credit.
- You incurred in 2000 but did not pay until 2001. Instead, see instructions for line 11.
- You prepaid in 2001 for care to be provided in 2002. These expenses may only be used to figure your 2002 credit.

#### Line 4

Earned income includes wages, salaries, tips, other employee compensation, and net earnings from self-employment. A net loss from self-employment reduces earned income. Earned income also includes strike benefits and any disability pay you report as wages. Certain nontaxable earned income should be included, such as, parsonage allowances, meals and lodging furnished for the convenience of the employer, voluntary salary deferrals, military basic quarters and subsistence allowances and in-kind quarters and subsistence, and military pay earned in a combat zone. **Earned income** does not include pensions and annuities, social security payments, workers' compensation, interest, dividends, public assistance, capital gains, or unemployment compensation.

#### Line 5

##### Spouse Who Was a Student or Disabled

Your spouse was a **student** if he or she was enrolled as a full-time student at a school during any 5 months of 2001. A school does not include a night school or correspondence school. Your spouse was **disabled** if he or she was not capable of self-care. Figure your spouse's earned income on a monthly basis.

For each month or part of a month your spouse was a student or was disabled, he or she is considered to have worked and earned income. His or her earned income for each month is considered to be at least \$200 (\$400 if more than one qualifying person was cared for in 2001). If your spouse also worked during that month, use the higher of \$200 (or \$400 if more than one qualifying person) or his or her actual earned income for that month. If, in the same month, both you and your spouse were either students or disabled, only one of you can be treated as having earned income in that month. For any month that your spouse was not a student or disabled, use your spouse's actual earned income if he or she worked during the month.

### Line 7

Determine your federal adjusted gross income (AGI) from Form 540A, line 12b; Form 540, line 13; or Long Form 540NR, line 13. Then use the chart below to determine the decimal amount to enter on line 7.

If your Federal AGI is:		The decimal amount
Over	But not over	on Line 7 is:
\$0	\$10,000	.30
10,000	12,000	.29
12,000	14,000	.28
14,000	16,000	.27
16,000	18,000	.26
18,000	20,000	.25
20,000	22,000	.24
22,000	24,000	.23
24,000	26,000	.22
26,000	28,000	.21
28,000	No limit	.20

### Line 9

Use the chart below to determine the percentage of the federal credit that is allowed as a California credit and enter the decimal amount on line 9.

If your California AGI from Form 540A, line 14; Form 540, line 17; or Long Form 540NR, line 25 is:	The decimal amount on Line 9 is:
\$40,000 or less	.63
Over \$40,000 but not over \$70,000	.53
Over \$70,000 but not over \$100,000	.42
Over \$100,000	<b>Stop. You do not qualify for this credit.</b>

### Line 11

If you had work-related expenses for care that was provided in 2000, but that you paid for in 2001, you may be able to increase the amount of your Child and Dependent Care Expenses Credit for 2001. Use the worksheet on Side 2 of form FTB 3506 to calculate the amount of additional credit you may be entitled to claim. See federal Publication 503 under "How to Figure the Credit" and "Amount of Credit" for guidance on completing line 1 through line 10 of the worksheet. If you claimed the California Child and Dependent Care Expenses Credit for the year 2000, you will need a copy of your 2000 California income tax return, including federal Form 2441 (or Schedule 2, Form 1040A), in order to properly complete this worksheet.

On form FTB 3506, Part II, line 1, column (e), include all the payments you made to a qualified care provider(s) during 2001, regardless of whether the care was actually provided in 2001. This includes

expenses you paid in 2001 for care that was provided in 2000 and expenses you paid in 2001 for care that was provided in 2002. Identify the work-related care expenses that you are entitled to claim in Part III, line 2, column (e) by comparing your cancelled checks/credit card statements for 2001 to your monthly care service invoices or bills (pay particular attention to the months of January and December). These are the expenses you paid in 2001 for care that was provided in 2001. Lastly, use the worksheet on Side 2 to determine whether you are entitled to increase the amount of your credit for 2001 based on work-related expenses for care that was provided in 2000 but that you paid in 2001.

**Note:** Keep a record of payments you made in 2001 for care that was provided in 2002. You will use these amounts when you calculate your 2002 credit.

## Part IV

### Line 13 – Line 16

Nonresidents and part-year residents must complete and attach Schedule CA (540NR), California Adjustments - Nonresidents or Part-Year Residents, to their Long Form 540NR tax return. If Part I of Schedule CA (540NR) is not fully completed, your credit may be disallowed.

You must maintain your primary home in California for yourself and your qualifying person(s) during the year or portion of the year to qualify for the credit. Full-year nonresidents of California who retained their main home in another state do not qualify for this credit.

Nonresidents and part-year residents must calculate the percentage of the child and dependent expenses credit that they may be qualified to take. It is based on the ratio from Long Form 540NR, line 25a.

## Part V

### Line 17

Dependent care benefits include amounts your employer paid directly to you or your care provider for the care of your qualifying person(s) while you worked. These benefits also include the fair market value of care in a day-care facility provided or sponsored by your employer. Your salary may have been reduced to pay for these benefits. If you received dependent care benefits, they should be shown in box 10 of your 2001 Form(s) W-2.

### Line 18

If you had a flexible spending account, any amount included on line 17 that you did not receive because you did not incur the expense is considered forfeited. Do not include amounts you expect to receive at a future date.

### Line 20

Enter the total of all qualified expenses incurred in 2001 for the care of your qualifying person(s). It does not matter when the expenses were paid.

**Example:** You received \$2,000 cash under your employer's dependent care plan for 2001. The \$2,000 is shown in box 10 of your Form W-2. You incurred \$900 of qualified expenses in 2001 for the care of your 5-year-old dependent child. You would enter \$900 on line 20, but would report the entire \$2,000 on line 17.

For all other lines, follow specific line instructions on the form. For additional information, see federal Form 2441 or Publication 503.

# Nonrefundable Renter's Credit Qualification Record



**e-file and skip this page!** The software you use to e-file will help you find out if you qualify for this credit and will figure the correct amount of the credit automatically. Go to [www.ftb.ca.gov](http://www.ftb.ca.gov)

If you were a resident of California and paid rent on property in California which was your principal residence, you may qualify for a credit that you can use to reduce your tax. Answer the questions below to see if you qualify.

**1. Were you a resident<sup>1</sup> of California for the entire year in 2001?**

- YES.** Go to the next question.
- NO.** Stop. File the Long or Short Form 540NR, California Nonresident or Part-Year Resident Income Tax Return. See "Order Forms and Publications" on page 68.

**2. Is the amount on Form 540A, line 14; or Form 540, line 17:**

- \$28,009 or less if single or married filing separate; or
- \$56,018 or less if married filing joint, head of household, or qualifying widow(er)?
- YES.** Go to the next question.
- NO.** Stop here. You do not qualify for this credit.

**3. Did you pay rent, for at least half of 2001, on property (including a mobile home that you owned on rented land) in California which was your principal residence?**

- YES.** Go to the next question.
- NO.** Stop here. You do not qualify for this credit.

**4. Can you be claimed as a dependent by a parent, foster parent, or legal guardian in 2001?**

- NO.** Go to question 6.
- YES.** Go to question 5.

**5. For more than half the year, did you live in the home of a parent, foster parent, or legal guardian in 2001?**

- NO.** Go to question 6.
- YES.** Stop here. You do not qualify for this credit.

**6. Was the property you rented exempt<sup>2</sup> from property tax in 2001?**

- NO.** Go to the next question.
- YES.** Stop here. You do not qualify for this credit.

**7. Did you or your spouse claim the homeowner's property tax exemption<sup>3</sup> anytime during 2001?**

- NO.** Skip question 8 and answer question 9.
- YES.** Go to question 8.

**8. Did you and your spouse maintain separate residences for the entire year in 2001?**

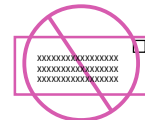
- YES.** The spouse that answered "Yes" to question 7 may not claim this credit. If the other spouse alone could have answered "No" to question 7, that person qualifies for the credit. Enter \$60 on line 9 below and on Form 540A, line 19, or on Form 540, line 31.
- NO.** Stop here. You do not qualify for this credit.

**9. If you are:**

- Single or married filing separate,<sup>4</sup> enter \$60 below.
  - Married filing joint, head of household, or qualifying widow(er), enter \$120 below and on Form 540A, line 19 or Form 540, line 31.
- \$ \_\_\_\_\_

Fill in the street address(es) and landlord information below for the residence(s) you rented in California during 2001 which qualified you for this credit.

**Do Not Mail This Record**



<b>Street Address</b>	<b>City, State, and ZIP Code</b>	<b>Dates Rented in 2001 (From _____ to _____)</b>
-----------------------	----------------------------------	---

**a** \_\_\_\_\_

**b** \_\_\_\_\_

Enter the name, address, and telephone number of your landlord(s) or the person(s) to whom you paid rent for the residence(s) listed above.

<b>Name</b>	<b>Street Address</b>	<b>City, State, ZIP Code, and Telephone Number</b>
-------------	-----------------------	--

**a** \_\_\_\_\_

**b** \_\_\_\_\_

<sup>1</sup> Military personnel. If you are not a legal resident of California, you do not qualify for this credit. However, your spouse may claim this credit if he or she was a resident, did not live in military housing during 2001, and is otherwise qualified.

<sup>2</sup> Property exempt from property taxes. You do not qualify for this credit if, for more than half of the year, you rented property that was exempt from property taxes. Exempt property includes most government-owned buildings, church-owned parsonages, college dormitories, and military barracks. However, if you or your landlord paid possessory interest taxes for the property you rented, then you may claim this credit.

<sup>3</sup> Homeowner's property tax exemption. You do not qualify for this credit if you or your spouse received a homeowner's property tax exemption at any time during the year. However, if you lived apart from your spouse for the entire year and your spouse received a homeowner's property tax exemption for a separate residence, then you may claim this credit if you are otherwise qualified.

<sup>4</sup> Married filing separate returns. If you and your spouse file separate returns, lived in the same rental property and both qualify for this credit, one spouse may claim the full amount of this credit (\$120), or each spouse may claim half of the amount (\$60 each).

# Frequently Asked Questions

(Go to [www.ftb.ca.gov](http://www.ftb.ca.gov) for more frequently asked questions)

## 1. What if I can't file by April 15, 2002, and I think I owe tax?

You must pay 100% of the amount you owe by April 15, 2002, to avoid interest and penalties. If you cannot file because you have not received all your Form(s) W-2, estimate the amount of tax you owe by completing form FTB 3519, Payment Voucher for Automatic Extension for Individuals on page 41. Mail it to the FTB with your payment by April 15, 2002. Then, when you receive all your Form(s) W-2, complete and mail your return by October 15, 2002 (you must use Form 540A or Form 540).

## 2. I did not get my Form W-2. What should I do?



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If you do not receive all your Forms W-2 by January 31, 2002, contact your employer. Only your employer can issue or correct a Form W-2. For more information, call (800) 338-0505, select personal income tax, then general tax information, and enter code 204 when instructed.

## 3. How can I get help?

There are more than 1,500 sites throughout California where trained volunteers provide free help during the tax filing season to persons who need to file simple federal and state income tax returns. Many military bases also provide this service for members of the U.S. Armed Forces. From January 2 through April 15, a list of locations is available on our Website at: [www.ftb.ca.gov](http://www.ftb.ca.gov) or you may call the FTB at (800) 852-5711 to find a location near you.

## 4. What do I do if I can't pay what I owe with my 2001 return?



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Pay as much as you can when you file your return. If you cannot pay your tax in full with your return, you can request to make monthly payments. However, you will be charged interest and may be charged an underpayment penalty on the tax not paid by April 15, 2002, even if your request to pay in installments is approved. To make monthly payments, complete form FTB 3567, Installment Agreement Request, and mail it to the address on the form. Do not mail it with your return.

The Installment Agreement Request might not be processed and approved until after your return is processed, and you may receive a bill before you receive approval of your request.

To order this form by phone, call (800) 338-0505, select personal income tax, then select order forms, and enter code 949. Or, go to our Website at: [www.ftb.ca.gov](http://www.ftb.ca.gov)



610

**Note:** You can also pay by credit card. See the insert in the middle of this booklet. For more information, go to our Website at [www.ftb.ca.gov](http://www.ftb.ca.gov), or call (800) 338-0505, select personal income tax, then select general tax information, and enter code 610.

## 5. How long will it take to get my refund?



112

If you file electronically, you will get the fastest possible refund. Your refund check will be in the mail within 7 to 10 calendar days (or if you request direct deposit, the refund will post to your bank account within 5 to 7 banking days) from the time the FTB receives your electronic return. For more information about electronic filing, go to our Website at: [www.ftb.ca.gov](http://www.ftb.ca.gov) or call (800) 338-0505, select personal income tax, then select general tax information, and enter code 112 when instructed.

If you do not electronically file your return, you should receive your refund check, or if you request direct deposit the refund should post to your account, within 6 to 8 weeks after you file your return.

## 6. I expected my refund by now. How can I check on the status?

You can check on the status of your refund over the Internet. Go to our Website at: [www.ftb.ca.gov](http://www.ftb.ca.gov)

You can also call our automated phone service. See the back cover for more information.

## 7. I discovered an error on my tax return. What should I do?

If you discover that you made an error on your California income tax return after you filed it, use Form 540X, Amended Individual Income Tax Return, to correct your return. See "Order Forms and Publications" on page 68.

## 8. The Internal Revenue Service (IRS) made changes to my federal return. What should I do?

If your federal income tax return is examined and changed by the IRS and you owe additional tax, you must report these changes to the FTB within six months of the date of the final federal determination. If the changes made by IRS result in a refund due for California, you must claim a refund within two years of the date of the final federal determination. You may either use Form 540X to correct the California income tax return you already filed, or you may send a copy of the federal changes to:

ATTN RAR/VOL, AUDIT SECTION  
FRANCHISE TAX BOARD  
PO BOX 1998  
RANCHO CORDOVA CA 95741-1998

Regardless of which method you use to notify the FTB, you must include a copy of the final federal determination along with all data and schedules on which the federal adjustment was based. Get FTB Pub. 1008, Federal Tax Adjustments and Your Notification Responsibilities to California, for more information. See "Order Forms and Publications" on page 68.

**Note:** You do not have to file Form 540X if the changes do not affect your California tax liability.

## 9. How long should I keep my tax information?

We may request information from you regarding your California income tax return within the California statute of limitations period, which is usually the later of four years from the due date of the return or four years from the date the return is filed. (Exception: An extended statute of limitations period may apply for California or federal tax returns that are related to or subject to a federal audit.)

Keep a copy of your return and the records that verify the income, deductions, adjustments, or credits reported on your return. Some records should be kept longer. For example, keep property records as long as they are needed to figure the basis of the property.

## 10. I will be moving after I file my return. How do I notify the FTB of my new address?

You can notify the FTB of your new address by using form FTB 3533, Change of Address. This form is available on our Website ([www.ftb.ca.gov](http://www.ftb.ca.gov)) as a fillable form or you may call (800) 852-5711 and select option 5 to report a change of address.

After filing your return, you should report a change of address to us for up to 4 years, especially if you leave the state and no longer have a requirement to file a California return.

# Additional Information

## California Sales And Use Tax

In general, the purchase of goods outside California that are brought into the state for storage, use, or other consumption may be subject to use tax. The use tax rate is the same as the sales tax rate in effect where the goods will be stored, used or consumed; usually your residence address. The tax is based on the purchase price of the goods.

- **If you purchased goods from an out-of-state retailer** (such as a mail order firm) and sales tax would have been charged if you purchased the goods in California, you may owe the use tax on your purchase if the out-of-state retailer did not collect the California tax.
- **If you traveled to a foreign country and brought goods home with you**, the use tax will be based on the purchase price of the goods you listed on your U.S. Customs Declaration after deduction of the \$400 per individual exemption allowable by law within any 30-day period. This deduction does not apply to goods sent or shipped to California by common carrier.

Your tax liability may be calculated by multiplying the sales tax rate at your residence times the cost of the goods purchased. Send your payment to the **STATE BOARD OF EQUALIZATION, PO BOX 942879, SACRAMENTO CA 94279-0001**, with a brief statement listing your name, address, daytime telephone number, cost and description of the goods purchased. Board of Equalization Pamphlet 79-B contains additional information and a form you may use to report the tax. An electronic version of this pamphlet may be found in the Board of Equalization's internet Website at: [www.boe.ca.gov/pdf/pub79b.pdf](http://www.boe.ca.gov/pdf/pub79b.pdf).

If you file a Schedule C (Form 1040), Profit or Loss From Business, with your federal income tax return and are in the business of selling tangible personal property, you may be required to obtain a seller's permit with the State Board of Equalization.

If you have any questions concerning the taxability of a purchase, or want information about obtaining a seller's permit, please contact the State Board of Equalization's toll-free number at (800) 400-7115, to talk to a Customer Service Representative. Representatives are available from 8 a.m. to 5 p.m., Monday - Friday, excluding state holidays.

## Collection Fees

The FTB is required to assess collection and filing enforcement cost recovery fees on delinquent accounts.

## Deceased Taxpayers

A final return must be filed for a person who died in 2001 if a return normally would be required. The administrator or executor, if one is appointed, or beneficiary must file the return. Please print "deceased" and the date of death next to the taxpayer's name at the top of the return.

If you are a surviving spouse and no administrator or executor has been appointed, you may file a joint return if you did not remarry during 2001. Indicate next to your signature that you are the surviving spouse.

You may also file a joint return with an administrator or executor acting on behalf of the deceased taxpayer.

If you file a return and claim a refund due to a deceased taxpayer, you are certifying under penalty of perjury either that you are the legal representative of the deceased taxpayer's estate (in this case, you must attach certified copies of the letters of administration or letters testamentary) or that you are entitled to the refund as the deceased's surviving relative or sole beneficiary under the provisions of the California Probate Code. You must also attach a copy of federal Form 1310, Statement of Person Claiming Refund Due a Deceased Taxpayer, or a copy of the death certificate when you file a return and claim a refund due.

## Homeowner and Renter Assistance

**Homeowner assistance** is a once-a-year payment from the State of California based on part of the property taxes assessed and paid on your home. If eligible, you could receive up to 96% of the property taxes you paid in the prior year. In 2001, you would have qualified for this assistance if you:

- Were one of the following on December 31, 2000: 62 years of age\* or older, blind, or disabled; and

- Owned your home and lived in it on December 31, 2000, had total household income of \$35,251 or less, and are a U.S. citizen, designated alien, or qualified alien, when you file your claim.

\*If your 62nd birthday is on January 1, 2001, you are considered to be age 62 on December 31, 2000.

**Renter assistance** is a once-a-year payment from the State of California based on part of the property taxes that you pay indirectly when you pay your rent. In 2001, you would have qualified for this assistance if you:

- Were one of the following on December 31, 2000: 62 years of age\* or older, blind, or disabled; and
- Paid \$50 or more rent per month in the prior year, had total household income of \$35,251 or less, and are a U.S. citizen, designated alien, or qualified alien when you file your claim.

\*If your 62nd birthday is on January 1, 2001, you are considered to be age 62 on December 31, 2000.

The 2002 filing season for these programs begins July 1, 2002. For more information, call (800) 852-5711.

## Innocent Spouse Relief

You may qualify for relief from liability for tax on a joint return if (1) there is an understatement of tax because your spouse omitted income or claimed false deductions or credits, (2) you are divorced, separated, or no longer living with your spouse, **or** (3) given all the facts and circumstances, it would be unfair to hold you liable for the tax. In addition, you may qualify for relief pursuant to a divorce decree. If any of the circumstances fit you, you may apply by writing a letter to the Franchise Tax Board requesting relief. Your request should include your name, your social security number, the year or years in question, a statement explaining why you believe you qualify for relief, and if applicable, a copy of your court order. Mail your request to the ANALYSIS & LEGAL SECTION MS G-8, FRANCHISE TAX BOARD, PO BOX 2952, SACRAMENTO CA 95812-2952.

## Military Personnel

If you are a member of the U.S. Armed Forces and need additional information on how to file your return, get FTB Pub. 1032, Tax Information for Military Personnel. See "Order Forms and Publications" on page 68.

## Requesting a Copy of Your Tax Return

The FTB keeps personal income tax returns for three and one-half years from the original due date. If you need to get a copy of a return from those years, you must request it by writing a letter or by completing form FTB 3516, Request for Copy of Personal Income Tax or Fiduciary Return. In most cases, there is a \$10 fee for each tax year you request. However, there is no charge if: you are requesting a return and any audit reports attached in connection with an audit or collection activity; you were the victim of a designated California or federal disaster; or you request copies from a field office that assisted you in completing your return. See "Order Forms and Publications" on page 68.

## Vehicle License Fees for Federal Schedule A

On your federal Schedule A, you may deduct the California motor vehicle license fee listed on your Vehicle Registration Billing Notice from the Department of Motor Vehicles. The other fees listed on your billing notice such as registration fee, weight fee, and county fees are not deductible.

## Voting Is Everybody's Business

You may register to vote if you meet these requirements:

- You are a United States citizen;
- You are a resident of California;
- You will be 18 years old by the date of the next election; and
- You are not in prison or on parole for the conviction of a felony.

You need to re-register every time you move, change your name, or wish to change political parties. In order to vote in an election, you must be registered to vote at least 15 days before that election. To obtain a Voter Registration Card, call the California Secretary of State's office toll-free voter hotline at (800) 345-VOTE or visit their Website at [www.ss.ca.gov](http://www.ss.ca.gov)

**It's Your Right . . . Register and Vote**

# 2001 California Tax Table

## To Find Your Tax:

- Read down the column labeled "If Your Taxable Income Is . . ." to find the range that includes your taxable income from Form 540, line 19 or Form 540A, line 16.
- Read across the columns labeled "The Tax For Filing Status" until you find the tax that applies for your taxable income and filing status.

Filing status: 1 or 3 (Single; Married Filing Separate)			2 or 5 (Married Filing Joint; Qualifying Widow(er))			4 (Head of Household)								
If Your Taxable Income Is . . .		The Tax For Filing Status			If Your Taxable Income Is . . .		The Tax For Filing Status			If Your Taxable Income Is . . .		The Tax For Filing Status		
At Least	But Not Over	1 Or 3 Is	2 Or 5 Is	4 Is	At Least	But Not Over	1 Or 3 Is	2 Or 5 Is	4 Is	At Least	But Not Over	1 Or 3 Is	2 Or 5 Is	4 Is
1	50	0	0	0	6,451	6,550	73	65	65	12,951	13,050	203	145	145
51	150	1	1	1	6,551	6,650	75	66	66	13,051	13,150	205	147	147
151	250	2	2	2	6,651	6,750	77	67	67	13,151	13,250	207	149	149
251	350	3	3	3	6,751	6,850	79	68	68	13,251	13,350	209	151	151
351	450	4	4	4	6,851	6,950	81	69	69	13,351	13,450	211	153	153
451	550	5	5	5	6,951	7,050	83	70	70	13,451	13,550	213	155	155
551	650	6	6	6	7,051	7,150	85	71	71	13,551	13,650	215	157	157
651	750	7	7	7	7,151	7,250	87	72	72	13,651	13,750	218	159	159
751	850	8	8	8	7,251	7,350	89	73	73	13,751	13,850	222	161	161
851	950	9	9	9	7,351	7,450	91	74	74	13,851	13,950	226	163	163
951	1,050	10	10	10	7,451	7,550	93	75	75	13,951	14,050	230	165	165
1,051	1,150	11	11	11	7,551	7,650	95	76	76	14,051	14,150	234	167	167
1,151	1,250	12	12	12	7,651	7,750	97	77	77	14,151	14,250	238	169	169
1,251	1,350	13	13	13	7,751	7,850	99	78	78	14,251	14,350	242	171	171
1,351	1,450	14	14	14	7,851	7,950	101	79	79	14,351	14,450	246	173	173
1,451	1,550	15	15	15	7,951	8,050	103	80	80	14,451	14,550	250	175	175
1,551	1,650	16	16	16	8,051	8,150	105	81	81	14,551	14,650	254	177	177
1,651	1,750	17	17	17	8,151	8,250	107	82	82	14,651	14,750	258	179	179
1,751	1,850	18	18	18	8,251	8,350	109	83	83	14,751	14,850	262	181	181
1,851	1,950	19	19	19	8,351	8,450	111	84	84	14,851	14,950	266	183	183
1,951	2,050	20	20	20	8,451	8,550	113	85	85	14,951	15,050	270	185	185
2,051	2,150	21	21	21	8,551	8,650	115	86	86	15,051	15,150	274	187	187
2,151	2,250	22	22	22	8,651	8,750	117	87	87	15,151	15,250	278	189	189
2,251	2,350	23	23	23	8,751	8,850	119	88	88	15,251	15,350	282	191	191
2,351	2,450	24	24	24	8,851	8,950	121	89	89	15,351	15,450	286	193	193
2,451	2,550	25	25	25	8,951	9,050	123	90	90	15,451	15,550	290	195	195
2,551	2,650	26	26	26	9,051	9,150	125	91	91	15,551	15,650	294	197	197
2,651	2,750	27	27	27	9,151	9,250	127	92	92	15,651	15,750	298	199	199
2,751	2,850	28	28	28	9,251	9,350	129	93	93	15,751	15,850	302	201	201
2,851	2,950	29	29	29	9,351	9,450	131	94	94	15,851	15,950	306	203	203
2,951	3,050	30	30	30	9,451	9,550	133	95	95	15,951	16,050	310	205	205
3,051	3,150	31	31	31	9,551	9,650	135	96	96	16,051	16,150	314	207	207
3,151	3,250	32	32	32	9,651	9,750	137	97	97	16,151	16,250	318	209	209
3,251	3,350	33	33	33	9,751	9,850	139	98	98	16,251	16,350	322	211	211
3,351	3,450	34	34	34	9,851	9,950	141	99	99	16,351	16,450	326	213	213
3,451	3,550	35	35	35	9,951	10,050	143	100	100	16,451	16,550	330	215	215
3,551	3,650	36	36	36	10,051	10,150	145	101	101	16,551	16,650	334	217	217
3,651	3,750	37	37	37	10,151	10,250	147	102	102	16,651	16,750	338	219	219
3,751	3,850	38	38	38	10,251	10,350	149	103	103	16,751	16,850	342	221	221
3,851	3,950	39	39	39	10,351	10,450	151	104	104	16,851	16,950	346	223	223
3,951	4,050	40	40	40	10,451	10,550	153	105	105	16,951	17,050	350	225	225
4,051	4,150	41	41	41	10,551	10,650	155	106	106	17,051	17,150	354	227	227
4,151	4,250	42	42	42	10,651	10,750	157	107	107	17,151	17,250	358	229	229
4,251	4,350	43	43	43	10,751	10,850	159	108	108	17,251	17,350	362	231	231
4,351	4,450	44	44	44	10,851	10,950	161	109	109	17,351	17,450	366	233	233
4,451	4,550	45	45	45	10,951	11,050	163	110	110	17,451	17,550	370	235	235
4,551	4,650	46	46	46	11,051	11,150	165	111	111	17,551	17,650	374	237	237
4,651	4,750	47	47	47	11,151	11,250	167	112	112	17,651	17,750	378	239	239
4,751	4,850	48	48	48	11,251	11,350	169	113	113	17,751	17,850	382	241	241
4,851	4,950	49	49	49	11,351	11,450	171	114	114	17,851	17,950	386	243	243
4,951	5,050	50	50	50	11,451	11,550	173	115	115	17,951	18,050	390	245	245
5,051	5,150	51	51	51	11,551	11,650	175	117	117	18,051	18,150	394	247	247
5,151	5,250	52	52	52	11,651	11,750	177	119	119	18,151	18,250	398	249	249
5,251	5,350	53	53	53	11,751	11,850	179	121	121	18,251	18,350	402	251	251
5,351	5,450	54	54	54	11,851	11,950	181	123	123	18,351	18,450	406	253	253
5,451	5,550	55	55	55	11,951	12,050	183	125	125	18,451	18,550	410	255	255
5,551	5,650	56	56	56	12,051	12,150	185	127	127	18,551	18,650	414	257	257
5,651	5,750	57	57	57	12,151	12,250	187	129	129	18,651	18,750	418	259	259
5,751	5,850	59	58	58	12,251	12,350	189	131	131	18,751	18,850	422	261	261
5,851	5,950	61	59	59	12,351	12,450	191	133	133	18,851	18,950	426	263	263
5,951	6,050	63	60	60	12,451	12,550	193	135	135	18,951	19,050	430	265	265
6,051	6,150	65	61	61	12,551	12,650	195	137	137	19,051	19,150	434	267	267
6,151	6,250	67	62	62	12,651	12,750	197	139	139	19,151	19,250	438	269	269
6,251	6,350	69	63	63	12,751	12,850	199	141	141	19,251	19,350	442	271	271
6,351	6,450	71	64	64	12,851	12,950	201	143	143	19,351	19,450	446	273	273

Continued on next page.

# 2001 California Tax Table - Continued

Filing status: 1 or 3 (Single; Married Filing Separate)		2 or 5 (Married Filing Joint; Qualifying Widow(er))			4 (Head of Household)									
If Your Taxable Income Is . . .		The Tax For Filing Status			If Your Taxable Income Is . . .		The Tax For Filing Status			If Your Taxable Income Is . . .		The Tax For Filing Status		
At Least	But Not Over	1 Or 3 Is	2 Or 5 Is	4 Is	At Least	But Not Over	1 Or 3 Is	2 Or 5 Is	4 Is	At Least	But Not Over	1 Or 3 Is	2 Or 5 Is	4 Is
19,451	19,550	450	275	275	26,451	26,550	830	415	415	33,451	33,550	1,323	680	680
19,551	19,650	454	277	277	26,551	26,650	836	417	417	33,551	33,650	1,331	684	684
19,651	19,750	458	279	279	26,651	26,750	842	419	419	33,651	33,750	1,339	688	688
19,751	19,850	462	281	281	26,751	26,850	848	421	421	33,751	33,850	1,347	692	692
19,851	19,950	466	283	283	26,851	26,950	854	423	423	33,851	33,950	1,355	696	696
19,951	20,050	470	285	285	26,951	27,050	860	425	425	33,951	34,050	1,363	700	700
20,051	20,150	474	287	287	27,051	27,150	866	427	427	34,051	34,150	1,371	704	704
20,151	20,250	478	289	289	27,151	27,250	872	429	429	34,151	34,250	1,379	708	708
20,251	20,350	482	291	291	27,251	27,350	878	432	432	34,251	34,350	1,387	712	712
20,351	20,450	486	293	293	27,351	27,450	884	436	436	34,351	34,450	1,395	716	716
20,451	20,550	490	295	295	27,451	27,550	890	440	440	34,451	34,550	1,403	720	720
20,551	20,650	494	297	297	27,551	27,650	896	444	444	34,551	34,650	1,411	724	724
20,651	20,750	498	299	299	27,651	27,750	902	448	448	34,651	34,750	1,419	728	728
20,751	20,850	502	301	301	27,751	27,850	908	452	452	34,751	34,850	1,427	732	732
20,851	20,950	506	303	303	27,851	27,950	914	456	456	34,851	34,950	1,435	736	736
20,951	21,050	510	305	305	27,951	28,050	920	460	460	34,951	35,050	1,443	740	740
21,051	21,150	514	307	307	28,051	28,150	926	464	464	35,051	35,150	1,451	744	744
21,151	21,250	518	309	309	28,151	28,250	932	468	468	35,151	35,250	1,459	748	749
21,251	21,350	522	311	311	28,251	28,350	938	472	472	35,251	35,350	1,467	752	755
21,351	21,450	526	313	313	28,351	28,450	944	476	476	35,351	35,450	1,475	756	761
21,451	21,550	530	315	315	28,451	28,550	950	480	480	35,451	35,550	1,483	760	767
21,551	21,650	536	317	317	28,551	28,650	956	484	484	35,551	35,650	1,491	764	773
21,651	21,750	542	319	319	28,651	28,750	962	488	488	35,651	35,750	1,499	768	779
21,751	21,850	548	321	321	28,751	28,850	968	492	492	35,751	35,850	1,507	772	785
21,851	21,950	554	323	323	28,851	28,950	974	496	496	35,851	35,950	1,515	776	791
21,951	22,050	560	325	325	28,951	29,050	980	500	500	35,951	36,050	1,523	780	797
22,051	22,150	566	327	327	29,051	29,150	986	504	504	36,051	36,150	1,531	784	803
22,151	22,250	572	329	329	29,151	29,250	992	508	508	36,151	36,250	1,539	788	809
22,251	22,350	578	331	331	29,251	29,350	998	512	512	36,251	36,350	1,547	792	815
22,351	22,450	584	333	333	29,351	29,450	1,004	516	516	36,351	36,450	1,555	796	821
22,451	22,550	590	335	335	29,451	29,550	1,010	520	520	36,451	36,550	1,563	800	827
22,551	22,650	596	337	337	29,551	29,650	1,016	524	524	36,551	36,650	1,571	804	833
22,651	22,750	602	339	339	29,651	29,750	1,022	528	528	36,651	36,750	1,579	808	839
22,751	22,850	608	341	341	29,751	29,850	1,028	532	532	36,751	36,850	1,587	812	845
22,851	22,950	614	343	343	29,851	29,950	1,035	536	536	36,851	36,950	1,595	816	851
22,951	23,050	620	345	345	29,951	30,050	1,043	540	540	36,951	37,050	1,603	820	857
23,051	23,150	626	347	347	30,051	30,150	1,051	544	544	37,051	37,150	1,611	824	863
23,151	23,250	632	349	349	30,151	30,250	1,059	548	548	37,151	37,250	1,619	828	869
23,251	23,350	638	351	351	30,251	30,350	1,067	552	552	37,251	37,350	1,627	832	875
23,351	23,450	644	353	353	30,351	30,450	1,075	556	556	37,351	37,450	1,635	836	881
23,451	23,550	650	355	355	30,451	30,550	1,083	560	560	37,451	37,550	1,643	840	887
23,551	23,650	656	357	357	30,551	30,650	1,091	564	564	37,551	37,650	1,651	844	893
23,651	23,750	662	359	359	30,651	30,750	1,099	568	568	37,651	37,750	1,659	848	899
23,751	23,850	668	361	361	30,751	30,850	1,107	572	572	37,751	37,850	1,668	852	905
23,851	23,950	674	363	363	30,851	30,950	1,115	576	576	37,851	37,950	1,677	856	911
23,951	24,050	680	365	365	30,951	31,050	1,123	580	580	37,951	38,050	1,687	860	917
24,051	24,150	686	367	367	31,051	31,150	1,131	584	584	38,051	38,150	1,696	864	923
24,151	24,250	692	369	369	31,151	31,250	1,139	588	588	38,151	38,250	1,705	868	929
24,251	24,350	698	371	371	31,251	31,350	1,147	592	592	38,251	38,350	1,714	872	935
24,351	24,450	704	373	373	31,351	31,450	1,155	596	596	38,351	38,450	1,724	876	941
24,451	24,550	710	375	375	31,451	31,550	1,163	600	600	38,451	38,550	1,733	880	947
24,551	24,650	716	377	377	31,551	31,650	1,171	604	604	38,551	38,650	1,742	884	953
24,651	24,750	722	379	379	31,651	31,750	1,179	608	608	38,651	38,750	1,752	888	959
24,751	24,850	728	381	381	31,751	31,850	1,187	612	612	38,751	38,850	1,761	892	965
24,851	24,950	734	383	383	31,851	31,950	1,195	616	616	38,851	38,950	1,770	896	971
24,951	25,050	740	385	385	31,951	32,050	1,203	620	620	38,951	39,050	1,780	900	977
25,051	25,150	746	387	387	32,051	32,150	1,211	624	624	39,051	39,150	1,789	904	983
25,151	25,250	752	389	389	32,151	32,250	1,219	628	628	39,151	39,250	1,798	908	989
25,251	25,350	758	391	391	32,251	32,350	1,227	632	632	39,251	39,350	1,807	912	995
25,351	25,450	764	393	393	32,351	32,450	1,235	636	636	39,351	39,450	1,817	916	1,001
25,451	25,550	770	395	395	32,451	32,550	1,243	640	640	39,451	39,550	1,826	920	1,007
25,551	25,650	776	397	397	32,551	32,650	1,251	644	644	39,551	39,650	1,835	924	1,013
25,651	25,750	782	399	399	32,651	32,750	1,259	648	648	39,651	39,750	1,845	928	1,019
25,751	25,850	788	401	401	32,751	32,850	1,267	652	652	39,751	39,850	1,854	932	1,025
25,851	25,950	794	403	403	32,851	32,950	1,275	656	656	39,851	39,950	1,863	936	1,031
25,951	26,050	800	405	405	32,951	33,050	1,283	660	660	39,951	40,050	1,873	940	1,037
26,051	26,150	806	407	407	33,051	33,150	1,291	664	664	40,051	40,150	1,882	944	1,043
26,151	26,250	812	409	409	33,151	33,250	1,299	668	668	40,151	40,250	1,891	948	1,049
26,251	26,350	818	411	411	33,251	33,350	1,307	672	672	40,251	40,350	1,900	952	1,055
26,351	26,450	824	413	413	33,351	33,450	1,315	676	676	40,351	40,450	1,910	956	1,061

Continued on next page.

# 2001 California Tax Table - Continued

Filing status: 1 or 3 (Single; Married Filing Separate)		2 or 5 (Married Filing Joint; Qualifying Widow(er))			4 (Head of Household)									
If Your Taxable Income Is . . .		The Tax For Filing Status			If Your Taxable Income Is . . .		The Tax For Filing Status			If Your Taxable Income Is . . .		The Tax For Filing Status		
At Least	But Not Over	1 Or 3 Is	2 Or 5 Is	4 Is	At Least	But Not Over	1 Or 3 Is	2 Or 5 Is	4 Is	At Least	But Not Over	1 Or 3 Is	2 Or 5 Is	4 Is
40,451	40,550	1,919	960	1,067	47,451	47,550	2,570	1,330	1,568	54,451	54,550	3,221	1,750	2,169
40,551	40,650	1,928	964	1,073	47,551	47,650	2,579	1,336	1,576	54,551	54,650	3,230	1,756	2,178
40,651	40,750	1,938	968	1,079	47,651	47,750	2,589	1,342	1,584	54,651	54,750	3,240	1,762	2,188
40,751	40,850	1,947	972	1,085	47,751	47,850	2,598	1,348	1,592	54,751	54,850	3,249	1,768	2,197
40,851	40,950	1,956	976	1,091	47,851	47,950	2,607	1,354	1,600	54,851	54,950	3,258	1,774	2,206
40,951	41,050	1,966	980	1,097	47,951	48,050	2,617	1,360	1,608	54,951	55,050	3,268	1,780	2,215
41,051	41,150	1,975	984	1,103	48,051	48,150	2,626	1,366	1,616	55,051	55,150	3,277	1,786	2,225
41,151	41,250	1,984	988	1,109	48,151	48,250	2,635	1,372	1,624	55,151	55,250	3,286	1,792	2,234
41,251	41,350	1,993	992	1,115	48,251	48,350	2,644	1,378	1,632	55,251	55,350	3,295	1,798	2,243
41,351	41,450	2,003	996	1,121	48,351	48,450	2,654	1,384	1,640	55,351	55,450	3,305	1,804	2,253
41,451	41,550	2,012	1,000	1,127	48,451	48,550	2,663	1,390	1,648	55,451	55,550	3,314	1,810	2,262
41,551	41,650	2,021	1,004	1,133	48,551	48,650	2,672	1,396	1,656	55,551	55,650	3,323	1,816	2,271
41,651	41,750	2,031	1,008	1,139	48,651	48,750	2,682	1,402	1,664	55,651	55,750	3,333	1,822	2,281
41,751	41,850	2,040	1,012	1,145	48,751	48,850	2,691	1,408	1,672	55,751	55,850	3,342	1,828	2,290
41,851	41,950	2,049	1,016	1,151	48,851	48,950	2,700	1,414	1,680	55,851	55,950	3,351	1,834	2,299
41,951	42,050	2,059	1,020	1,157	48,951	49,050	2,710	1,420	1,688	55,951	56,050	3,361	1,840	2,308
42,051	42,150	2,068	1,024	1,163	49,051	49,150	2,719	1,426	1,696	56,051	56,150	3,370	1,846	2,318
42,151	42,250	2,077	1,028	1,169	49,151	49,250	2,728	1,432	1,704	56,151	56,250	3,379	1,852	2,327
42,251	42,350	2,086	1,032	1,175	49,251	49,350	2,737	1,438	1,712	56,251	56,350	3,388	1,858	2,336
42,351	42,450	2,096	1,036	1,181	49,351	49,450	2,747	1,444	1,720	56,351	56,450	3,398	1,864	2,346
42,451	42,550	2,105	1,040	1,187	49,451	49,550	2,756	1,450	1,728	56,451	56,550	3,407	1,870	2,355
42,551	42,650	2,114	1,044	1,193	49,551	49,650	2,765	1,456	1,736	56,551	56,650	3,416	1,876	2,364
42,651	42,750	2,124	1,048	1,199	49,651	49,750	2,775	1,462	1,744	56,651	56,750	3,426	1,882	2,374
42,751	42,850	2,133	1,052	1,205	49,751	49,850	2,784	1,468	1,752	56,751	56,850	3,435	1,888	2,383
42,851	42,950	2,142	1,056	1,211	49,851	49,950	2,793	1,474	1,760	56,851	56,950	3,444	1,894	2,392
42,951	43,050	2,152	1,060	1,217	49,951	50,050	2,803	1,480	1,768	56,951	57,050	3,454	1,900	2,401
43,051	43,150	2,161	1,066	1,223	50,051	50,150	2,812	1,486	1,776	57,051	57,150	3,463	1,906	2,411
43,151	43,250	2,170	1,072	1,229	50,151	50,250	2,821	1,492	1,784	57,151	57,250	3,472	1,912	2,420
43,251	43,350	2,179	1,078	1,235	50,251	50,350	2,830	1,498	1,792	57,251	57,350	3,481	1,918	2,429
43,351	43,450	2,189	1,084	1,241	50,351	50,450	2,840	1,504	1,800	57,351	57,450	3,491	1,924	2,439
43,451	43,550	2,198	1,090	1,248	50,451	50,550	2,849	1,510	1,808	57,451	57,550	3,500	1,930	2,448
43,551	43,650	2,207	1,096	1,256	50,551	50,650	2,858	1,516	1,816	57,551	57,650	3,509	1,936	2,457
43,651	43,750	2,217	1,102	1,264	50,651	50,750	2,868	1,522	1,824	57,651	57,750	3,519	1,942	2,467
43,751	43,850	2,226	1,108	1,272	50,751	50,850	2,877	1,528	1,832	57,751	57,850	3,528	1,948	2,476
43,851	43,950	2,235	1,114	1,280	50,851	50,950	2,886	1,534	1,840	57,851	57,950	3,537	1,954	2,485
43,951	44,050	2,245	1,120	1,288	50,951	51,050	2,896	1,540	1,848	57,951	58,050	3,547	1,960	2,494
44,051	44,150	2,254	1,126	1,296	51,051	51,150	2,905	1,546	1,856	58,051	58,150	3,556	1,966	2,504
44,151	44,250	2,263	1,132	1,304	51,151	51,250	2,914	1,552	1,864	58,151	58,250	3,565	1,972	2,513
44,251	44,350	2,272	1,138	1,312	51,251	51,350	2,923	1,558	1,872	58,251	58,350	3,574	1,978	2,522
44,351	44,450	2,282	1,144	1,320	51,351	51,450	2,933	1,564	1,881	58,351	58,450	3,584	1,984	2,532
44,451	44,550	2,291	1,150	1,328	51,451	51,550	2,942	1,570	1,890	58,451	58,550	3,593	1,990	2,541
44,551	44,650	2,300	1,156	1,336	51,551	51,650	2,951	1,576	1,899	58,551	58,650	3,602	1,996	2,550
44,651	44,750	2,310	1,162	1,344	51,651	51,750	2,961	1,582	1,909	58,651	58,750	3,612	2,002	2,560
44,751	44,850	2,319	1,168	1,352	51,751	51,850	2,970	1,588	1,918	58,751	58,850	3,621	2,008	2,569
44,851	44,950	2,328	1,174	1,360	51,851	51,950	2,979	1,594	1,927	58,851	58,950	3,630	2,014	2,578
44,951	45,050	2,338	1,180	1,368	51,951	52,050	2,989	1,600	1,936	58,951	59,050	3,640	2,020	2,587
45,051	45,150	2,347	1,186	1,376	52,051	52,150	2,998	1,606	1,946	59,051	59,150	3,649	2,026	2,597
45,151	45,250	2,356	1,192	1,384	52,151	52,250	3,007	1,612	1,955	59,151	59,250	3,658	2,032	2,606
45,251	45,350	2,365	1,198	1,392	52,251	52,350	3,016	1,618	1,964	59,251	59,350	3,667	2,038	2,615
45,351	45,450	2,375	1,204	1,400	52,351	52,450	3,026	1,624	1,974	59,351	59,450	3,677	2,044	2,625
45,451	45,550	2,384	1,210	1,408	52,451	52,550	3,035	1,630	1,983	59,451	59,550	3,686	2,050	2,634
45,551	45,650	2,393	1,216	1,416	52,551	52,650	3,044	1,636	1,992	59,551	59,650	3,695	2,056	2,643
45,651	45,750	2,403	1,222	1,424	52,651	52,750	3,054	1,642	2,002	59,651	59,750	3,705	2,062	2,653
45,751	45,850	2,412	1,228	1,432	52,751	52,850	3,063	1,648	2,011	59,751	59,850	3,714	2,070	2,662
45,851	45,950	2,421	1,234	1,440	52,851	52,950	3,072	1,654	2,020	59,851	59,950	3,723	2,078	2,671
45,951	46,050	2,431	1,240	1,448	52,951	53,050	3,082	1,660	2,029	59,951	60,050	3,733	2,086	2,680
46,051	46,150	2,440	1,246	1,456	53,051	53,150	3,091	1,666	2,039	60,051	60,150	3,742	2,094	2,690
46,151	46,250	2,449	1,252	1,464	53,151	53,250	3,100	1,672	2,048	60,151	60,250	3,751	2,102	2,699
46,251	46,350	2,458	1,258	1,472	53,251	53,350	3,109	1,678	2,057	60,251	60,350	3,760	2,110	2,708
46,351	46,450	2,468	1,264	1,480	53,351	53,450	3,119	1,684	2,067	60,351	60,450	3,770	2,118	2,718
46,451	46,550	2,477	1,270	1,488	53,451	53,550	3,128	1,690	2,076	60,451	60,550	3,779	2,126	2,727
46,551	46,650	2,486	1,276	1,496	53,551	53,650	3,137	1,696	2,085	60,551	60,650	3,788	2,134	2,736
46,651	46,750	2,496	1,282	1,504	53,651	53,750	3,147	1,702	2,095	60,651	60,750	3,798	2,142	2,746
46,751	46,850	2,505	1,288	1,512	53,751	53,850	3,156	1,708	2,104	60,751	60,850	3,807	2,150	2,755
46,851	46,950	2,514	1,294	1,520	53,851	53,950	3,165	1,714	2,113	60,851	60,950	3,816	2,158	2,764
46,951	47,050	2,524	1,300	1,528	53,951	54,050	3,175	1,720	2,122	60,951	61,050	3,826	2,166	2,773
47,051	47,150	2,533	1,306	1,536	54,051	54,150	3,184	1,726	2,132	61,051	61,150	3,835	2,174	2,783
47,151	47,250	2,542	1,312	1,544	54,151	54,250	3,193	1,732	2,141	61,151	61,250	3,844	2,182	2,792
47,251	47,350	2,551	1,318	1,552	54,251	54,350	3,202	1,738	2,150	61,251	61,350	3,853	2,190	2,801
47,351	47,450	2,561	1,324	1,560	54,351	54,450	3,212	1,744	2,160	61,351	61,450	3,863	2,198	2,811

Continued on next page.

# 2001 California Tax Table - Continued

Filing status: 1 or 3 (Single; Married Filing Separate)    2 or 5 (Married Filing Joint; Qualifying Widow(er))    4 (Head of Household)														
If Your Taxable Income Is . . .		The Tax For Filing Status			If Your Taxable Income Is . . .		The Tax For Filing Status			If Your Taxable Income Is . . .		The Tax For Filing Status		
At Least	But Not Over	1 Or 3 Is	2 Or 5 Is	4 Is	At Least	But Not Over	1 Or 3 Is	2 Or 5 Is	4 Is	At Least	But Not Over	1 Or 3 Is	2 Or 5 Is	4 Is
61,451	61,550	3,872	2,206	2,820	68,451	68,550	4,523	2,766	3,471	75,451	75,550	5,174	3,327	4,122
61,551	61,650	3,881	2,214	2,829	68,551	68,650	4,532	2,774	3,480	75,551	75,650	5,183	3,336	4,131
61,651	61,750	3,891	2,222	2,839	68,651	68,750	4,542	2,782	3,490	75,651	75,750	5,193	3,345	4,141
61,751	61,850	3,900	2,230	2,848	68,751	68,850	4,551	2,790	3,499	75,751	75,850	5,202	3,354	4,150
61,851	61,950	3,909	2,238	2,857	68,851	68,950	4,560	2,798	3,508	75,851	75,950	5,211	3,364	4,159
61,951	62,050	3,919	2,246	2,866	68,951	69,050	4,570	2,806	3,517	75,951	76,050	5,221	3,373	4,168
62,051	62,150	3,928	2,254	2,876	69,051	69,150	4,579	2,814	3,527	76,051	76,150	5,230	3,382	4,178
62,151	62,250	3,937	2,262	2,885	69,151	69,250	4,588	2,822	3,536	76,151	76,250	5,239	3,392	4,187
62,251	62,350	3,946	2,270	2,894	69,251	69,350	4,597	2,830	3,545	76,251	76,350	5,248	3,401	4,196
62,351	62,450	3,956	2,278	2,904	69,351	69,450	4,607	2,838	3,555	76,351	76,450	5,258	3,410	4,206
62,451	62,550	3,965	2,286	2,913	69,451	69,550	4,616	2,846	3,564	76,451	76,550	5,267	3,420	4,215
62,551	62,650	3,974	2,294	2,922	69,551	69,650	4,625	2,854	3,573	76,551	76,650	5,276	3,429	4,224
62,651	62,750	3,984	2,302	2,932	69,651	69,750	4,635	2,862	3,583	76,651	76,750	5,286	3,438	4,234
62,751	62,850	3,993	2,310	2,941	69,751	69,850	4,644	2,870	3,592	76,751	76,850	5,295	3,447	4,243
62,851	62,950	4,002	2,318	2,950	69,851	69,950	4,653	2,878	3,601	76,851	76,950	5,304	3,457	4,252
62,951	63,050	4,012	2,326	2,959	69,951	70,050	4,663	2,886	3,610	76,951	77,050	5,314	3,466	4,261
63,051	63,150	4,021	2,334	2,969	70,051	70,150	4,672	2,894	3,620	77,051	77,150	5,323	3,475	4,271
63,151	63,250	4,030	2,342	2,978	70,151	70,250	4,681	2,902	3,629	77,151	77,250	5,332	3,485	4,280
63,251	63,350	4,039	2,350	2,987	70,251	70,350	4,690	2,910	3,638	77,251	77,350	5,341	3,494	4,289
63,351	63,450	4,049	2,358	2,997	70,351	70,450	4,700	2,918	3,648	77,351	77,450	5,351	3,503	4,299
63,451	63,550	4,058	2,366	3,006	70,451	70,550	4,709	2,926	3,657	77,451	77,550	5,360	3,513	4,308
63,551	63,650	4,067	2,374	3,015	70,551	70,650	4,718	2,934	3,666	77,551	77,650	5,369	3,522	4,317
63,651	63,750	4,077	2,382	3,025	70,651	70,750	4,728	2,942	3,676	77,651	77,750	5,379	3,531	4,327
63,751	63,850	4,086	2,390	3,034	70,751	70,850	4,737	2,950	3,685	77,751	77,850	5,388	3,540	4,336
63,851	63,950	4,095	2,398	3,043	70,851	70,950	4,746	2,958	3,694	77,851	77,950	5,397	3,550	4,345
63,951	64,050	4,105	2,406	3,052	70,951	71,050	4,756	2,966	3,703	77,951	78,050	5,407	3,559	4,354
64,051	64,150	4,114	2,414	3,062	71,051	71,150	4,765	2,974	3,713	78,051	78,150	5,416	3,568	4,364
64,151	64,250	4,123	2,422	3,071	71,151	71,250	4,774	2,982	3,722	78,151	78,250	5,425	3,578	4,373
64,251	64,350	4,132	2,430	3,080	71,251	71,350	4,783	2,990	3,731	78,251	78,350	5,434	3,587	4,382
64,351	64,450	4,142	2,438	3,090	71,351	71,450	4,793	2,998	3,741	78,351	78,450	5,444	3,596	4,392
64,451	64,550	4,151	2,446	3,099	71,451	71,550	4,802	3,006	3,750	78,451	78,550	5,453	3,606	4,401
64,551	64,650	4,160	2,454	3,108	71,551	71,650	4,811	3,014	3,759	78,551	78,650	5,462	3,615	4,410
64,651	64,750	4,170	2,462	3,118	71,651	71,750	4,821	3,022	3,769	78,651	78,750	5,472	3,624	4,420
64,751	64,850	4,179	2,470	3,127	71,751	71,850	4,830	3,030	3,778	78,751	78,850	5,481	3,633	4,429
64,851	64,950	4,188	2,478	3,136	71,851	71,950	4,839	3,038	3,787	78,851	78,950	5,490	3,643	4,438
64,951	65,050	4,198	2,486	3,145	71,951	72,050	4,849	3,046	3,796	78,951	79,050	5,500	3,652	4,447
65,051	65,150	4,207	2,494	3,155	72,051	72,150	4,858	3,054	3,806	79,051	79,150	5,509	3,661	4,457
65,151	65,250	4,216	2,502	3,164	72,151	72,250	4,867	3,062	3,815	79,151	79,250	5,518	3,671	4,466
65,251	65,350	4,225	2,510	3,173	72,251	72,350	4,876	3,070	3,824	79,251	79,350	5,527	3,680	4,475
65,351	65,450	4,235	2,518	3,183	72,351	72,450	4,886	3,078	3,834	79,351	79,450	5,537	3,689	4,485
65,451	65,550	4,244	2,526	3,192	72,451	72,550	4,895	3,086	3,843	79,451	79,550	5,546	3,699	4,494
65,551	65,650	4,253	2,534	3,201	72,551	72,650	4,904	3,094	3,852	79,551	79,650	5,555	3,708	4,503
65,651	65,750	4,263	2,542	3,211	72,651	72,750	4,914	3,102	3,862	79,651	79,750	5,565	3,717	4,513
65,751	65,850	4,272	2,550	3,220	72,751	72,850	4,923	3,110	3,871	79,751	79,850	5,574	3,726	4,522
65,851	65,950	4,281	2,558	3,229	72,851	72,950	4,932	3,118	3,880	79,851	79,950	5,583	3,736	4,531
65,951	66,050	4,291	2,566	3,238	72,951	73,050	4,942	3,126	3,889	79,951	80,050	5,593	3,745	4,540
66,051	66,150	4,300	2,574	3,248	73,051	73,150	4,951	3,134	3,899	80,051	80,150	5,602	3,754	4,550
66,151	66,250	4,309	2,582	3,257	73,151	73,250	4,960	3,142	3,908	80,151	80,250	5,611	3,764	4,559
66,251	66,350	4,318	2,590	3,266	73,251	73,350	4,969	3,150	3,917	80,251	80,350	5,620	3,773	4,568
66,351	66,450	4,328	2,598	3,276	73,351	73,450	4,979	3,158	3,927	80,351	80,450	5,630	3,782	4,578
66,451	66,550	4,337	2,606	3,285	73,451	73,550	4,988	3,166	3,936	80,451	80,550	5,639	3,792	4,587
66,551	66,650	4,346	2,614	3,294	73,551	73,650	4,997	3,174	3,945	80,551	80,650	5,648	3,801	4,596
66,651	66,750	4,356	2,622	3,304	73,651	73,750	5,007	3,182	3,955	80,651	80,750	5,658	3,810	4,606
66,751	66,850	4,365	2,630	3,313	73,751	73,850	5,016	3,190	3,964	80,751	80,850	5,667	3,819	4,615
66,851	66,950	4,374	2,638	3,322	73,851	73,950	5,025	3,198	3,973	80,851	80,950	5,676	3,829	4,624
66,951	67,050	4,384	2,646	3,331	73,951	74,050	5,035	3,206	3,982	80,951	81,050	5,686	3,838	4,633
67,051	67,150	4,393	2,654	3,341	74,051	74,150	5,044	3,214	3,992	81,051	81,150	5,695	3,847	4,643
67,151	67,250	4,402	2,662	3,350	74,151	74,250	5,053	3,222	4,001	81,151	81,250	5,704	3,857	4,652
67,251	67,350	4,411	2,670	3,359	74,251	74,350	5,062	3,230	4,010	81,251	81,350	5,713	3,866	4,661
67,351	67,450	4,421	2,678	3,369	74,351	74,450	5,072	3,238	4,020	81,351	81,450	5,723	3,875	4,671
67,451	67,550	4,430	2,686	3,378	74,451	74,550	5,081	3,246	4,029	81,451	81,550	5,732	3,885	4,680
67,551	67,650	4,439	2,694	3,387	74,551	74,650	5,090	3,254	4,038	81,551	81,650	5,741	3,894	4,689
67,651	67,750	4,449	2,702	3,397	74,651	74,750	5,100	3,262	4,048	81,651	81,750	5,751	3,903	4,699
67,751	67,850	4,458	2,710	3,406	74,751	74,850	5,109	3,270	4,057	81,751	81,850	5,760	3,912	4,708
67,851	67,950	4,467	2,718	3,415	74,851	74,950	5,118	3,278	4,066	81,851	81,950	5,769	3,922	4,717
67,951	68,050	4,477	2,726	3,424	74,951	75,050	5,128	3,286	4,075	81,951	82,050	5,779	3,931	4,726
68,051	68,150	4,486	2,734	3,434	75,051	75,150	5,137	3,294	4,085	82,051	82,150	5,788	3,940	4,736
68,151	68,250	4,495	2,742	3,443	75,151	75,250	5,146	3,302	4,094	82,151	82,250	5,797	3,950	4,745
68,251	68,350	4,504	2,750	3,452	75,251	75,350	5,155	3,310	4,103	82,251	82,350	5,806	3,959	4,754
68,351	68,450	4,514	2,758	3,462	75,351	75,450	5,165	3,318	4,113	82,351	82,450	5,816	3,968	4,764

Continued on next page.

# 2001 California Tax Table - Continued

Filing status: 1 or 3 (Single; Married Filing Separate)      2 or 5 (Married Filing Joint; Qualifying Widow(er))      4 (Head of Household)														
If Your Taxable Income Is ...		The Tax For Filing Status			If Your Taxable Income Is ...		The Tax For Filing Status			If Your Taxable Income Is ...		The Tax For Filing Status		
At Least	But Not Over	1 Or 3 Is	2 Or 5 Is	4 Is	At Least	But Not Over	1 Or 3 Is	2 Or 5 Is	4 Is	At Least	But Not Over	1 Or 3 Is	2 Or 5 Is	4 Is
82,451	82,550	5,825	3,978	4,773	88,451	88,550	6,383	4,536	5,331	94,451	94,550	6,941	5,094	5,889
82,551	82,650	5,834	3,987	4,782	88,551	88,650	6,392	4,545	5,340	94,551	94,650	6,950	5,103	5,898
82,651	82,750	5,844	3,996	4,792	88,651	88,750	6,402	4,554	5,350	94,651	94,750	6,960	5,112	5,908
82,751	82,850	5,853	4,005	4,801	88,751	88,850	6,411	4,563	5,359	94,751	94,850	6,969	5,121	5,917
82,851	82,950	5,862	4,015	4,810	88,851	88,950	6,420	4,573	5,368	94,851	94,950	6,978	5,131	5,926
82,951	83,050	5,872	4,024	4,819	88,951	89,050	6,430	4,582	5,377	94,951	95,050	6,988	5,140	5,935
83,051	83,150	5,881	4,033	4,829	89,051	89,150	6,439	4,591	5,387	95,051	95,150	6,997	5,149	5,945
83,151	83,250	5,890	4,043	4,838	89,151	89,250	6,448	4,601	5,396	95,151	95,250	7,006	5,159	5,954
83,251	83,350	5,899	4,052	4,847	89,251	89,350	6,457	4,610	5,405	95,251	95,350	7,015	5,168	5,963
83,351	83,450	5,909	4,061	4,857	89,351	89,450	6,467	4,619	5,415	95,351	95,450	7,025	5,177	5,973
83,451	83,550	5,918	4,071	4,866	89,451	89,550	6,476	4,629	5,424	95,451	95,550	7,034	5,187	5,982
83,551	83,650	5,927	4,080	4,875	89,551	89,650	6,485	4,638	5,433	95,551	95,650	7,043	5,196	5,991
83,651	83,750	5,937	4,089	4,885	89,651	89,750	6,495	4,647	5,443	95,651	95,750	7,053	5,205	6,001
83,751	83,850	5,946	4,098	4,894	89,751	89,850	6,504	4,656	5,452	95,751	95,850	7,062	5,214	6,010
83,851	83,950	5,955	4,108	4,903	89,851	89,950	6,513	4,666	5,461	95,851	95,950	7,071	5,224	6,019
83,951	84,050	5,965	4,117	4,912	89,951	90,050	6,523	4,675	5,470	95,951	96,050	7,081	5,233	6,028
84,051	84,150	5,974	4,126	4,922	90,051	90,150	6,532	4,684	5,480	96,051	96,150	7,090	5,242	6,038
84,151	84,250	5,983	4,136	4,931	90,151	90,250	6,541	4,694	5,489	96,151	96,250	7,099	5,252	6,047
84,251	84,350	5,992	4,145	4,940	90,251	90,350	6,550	4,703	5,498	96,251	96,350	7,108	5,261	6,056
84,351	84,450	6,002	4,154	4,950	90,351	90,450	6,560	4,712	5,508	96,351	96,450	7,118	5,270	6,066
84,451	84,550	6,011	4,164	4,959	90,451	90,550	6,569	4,722	5,517	96,451	96,550	7,127	5,280	6,075
84,551	84,650	6,020	4,173	4,968	90,551	90,650	6,578	4,731	5,526	96,551	96,650	7,136	5,289	6,084
84,651	84,750	6,030	4,182	4,978	90,651	90,750	6,588	4,740	5,536	96,651	96,750	7,146	5,298	6,094
84,751	84,850	6,039	4,191	4,987	90,751	90,850	6,597	4,749	5,545	96,751	96,850	7,155	5,307	6,103
84,851	84,950	6,048	4,201	4,996	90,851	90,950	6,606	4,759	5,554	96,851	96,950	7,164	5,317	6,112
84,951	85,050	6,058	4,210	5,005	90,951	91,050	6,616	4,768	5,563	96,951	97,050	7,174	5,326	6,121
85,051	85,150	6,067	4,219	5,015	91,051	91,150	6,625	4,777	5,573	97,051	97,150	7,183	5,335	6,131
85,151	85,250	6,076	4,229	5,024	91,151	91,250	6,634	4,787	5,582	97,151	97,250	7,192	5,345	6,140
85,251	85,350	6,085	4,238	5,033	91,251	91,350	6,643	4,796	5,591	97,251	97,350	7,201	5,354	6,149
85,351	85,450	6,095	4,247	5,043	91,351	91,450	6,653	4,805	5,601	97,351	97,450	7,211	5,363	6,159
85,451	85,550	6,104	4,257	5,052	91,451	91,550	6,662	4,815	5,610	97,451	97,550	7,220	5,373	6,168
85,551	85,650	6,113	4,266	5,061	91,551	91,650	6,671	4,824	5,619	97,551	97,650	7,229	5,382	6,177
85,651	85,750	6,123	4,275	5,071	91,651	91,750	6,681	4,833	5,629	97,651	97,750	7,239	5,391	6,187
85,751	85,850	6,132	4,284	5,080	91,751	91,850	6,690	4,842	5,638	97,751	97,850	7,248	5,400	6,196
85,851	85,950	6,141	4,294	5,089	91,851	91,950	6,699	4,852	5,647	97,851	97,950	7,257	5,410	6,205
85,951	86,050	6,151	4,303	5,098	91,951	92,050	6,709	4,861	5,656	97,951	98,050	7,267	5,419	6,214
86,051	86,150	6,160	4,312	5,108	92,051	92,150	6,718	4,870	5,666	98,051	98,150	7,276	5,428	6,224
86,151	86,250	6,169	4,322	5,117	92,151	92,250	6,727	4,880	5,675	98,151	98,250	7,285	5,438	6,233
86,251	86,350	6,178	4,331	5,126	92,251	92,350	6,736	4,889	5,684	98,251	98,350	7,294	5,447	6,242
86,351	86,450	6,188	4,340	5,136	92,351	92,450	6,746	4,898	5,694	98,351	98,450	7,304	5,456	6,252
86,451	86,550	6,197	4,350	5,145	92,451	92,550	6,755	4,908	5,703	98,451	98,550	7,313	5,466	6,261
86,551	86,650	6,206	4,359	5,154	92,551	92,650	6,764	4,917	5,712	98,551	98,650	7,322	5,475	6,270
86,651	86,750	6,216	4,368	5,164	92,651	92,750	6,774	4,926	5,722	98,651	98,750	7,332	5,484	6,280
86,751	86,850	6,225	4,377	5,173	92,751	92,850	6,783	4,935	5,731	98,751	98,850	7,341	5,493	6,289
86,851	86,950	6,234	4,387	5,182	92,851	92,950	6,792	4,945	5,740	98,851	98,950	7,350	5,503	6,298
86,951	87,050	6,244	4,396	5,191	92,951	93,050	6,802	4,954	5,749	98,951	99,050	7,360	5,512	6,307
87,051	87,150	6,253	4,405	5,201	93,051	93,150	6,811	4,963	5,759	99,051	99,150	7,369	5,521	6,317
87,151	87,250	6,262	4,415	5,210	93,151	93,250	6,820	4,973	5,768	99,151	99,250	7,378	5,531	6,326
87,251	87,350	6,271	4,424	5,219	93,251	93,350	6,829	4,982	5,777	99,251	99,350	7,387	5,540	6,335
87,351	87,450	6,281	4,433	5,229	93,351	93,450	6,839	4,991	5,787	99,351	99,450	7,397	5,549	6,345
87,451	87,550	6,290	4,443	5,238	93,451	93,550	6,848	5,001	5,796	99,451	99,550	7,406	5,559	6,354
87,551	87,650	6,299	4,452	5,247	93,551	93,650	6,857	5,010	5,805	99,551	99,650	7,415	5,568	6,363
87,651	87,750	6,309	4,461	5,257	93,651	93,750	6,867	5,019	5,815	99,651	99,750	7,425	5,577	6,373
87,751	87,850	6,318	4,470	5,266	93,751	93,850	6,876	5,028	5,824	99,751	99,850	7,434	5,586	6,382
87,851	87,950	6,327	4,480	5,275	93,851	93,950	6,885	5,038	5,833	99,851	99,950	7,443	5,596	6,391
87,951	88,050	6,337	4,489	5,284	93,951	94,050	6,895	5,047	5,842	99,951	100,000	7,450	5,603	6,398
88,051	88,150	6,346	4,498	5,294	94,051	94,150	6,904	5,056	5,852	OVER \$100,000 YOU MUST USE THE TAX RATE SCHEDULES on page 66.				
88,151	88,250	6,355	4,508	5,303	94,151	94,250	6,913	5,066	5,861					
88,251	88,350	6,364	4,517	5,312	94,251	94,350	6,922	5,075	5,870					
88,351	88,450	6,374	4,526	5,322	94,351	94,450	6,932	5,084	5,880					

# 2001 California Tax Rate Schedules


**Caution:** Use only if your taxable income on Form 540, line 19 or Form 540A, line 16 is more than \$100,000. If \$100,000 or less, use the Tax Table.

	If the amount on Form 540, line 19 or Form 540A, line 16 is:		Enter on Form 540, line 20 or Form 540A, line 17		of the amount over –
	over –	But not over –			
<b>Schedule X –</b> Use if your filing status is <b>Single or Married Filing Separate</b>	\$ 0	\$ 5,748	\$ 0.00	+ 1.0%	\$ 0
	5,748	13,625	57.48	+ 2.0%	5,748
	13,625	21,503	215.02	+ 4.0%	13,625
	21,503	29,850	530.14	+ 6.0%	21,503
	29,850	37,725	1,030.96	+ 8.0%	29,850
	37,725	AND OVER	1,660.96	+ 9.3%	37,725

	If the amount on Form 540, line 19 or Form 540A, line 16 is:		Enter on Form 540, line 20 or Form 540A, line 17		of the amount over –
	over –	But not over –			
<b>Schedule Y –</b> Use if your filing status is <b>Married Filing Joint or Qualifying Widow(er) with Dependent Child</b>	\$ 0	\$ 11,496	\$ 0.00	+ 1.0%	\$ 0
	11,496	27,250	114.96	+ 2.0%	11,496
	27,250	43,006	430.04	+ 4.0%	27,250
	43,006	59,700	1,060.28	+ 6.0%	43,006
	59,700	75,450	2,061.92	+ 8.0%	59,700
	75,450	AND OVER	3,321.92	+ 9.3%	75,450

	If the amount on Form 540, line 19 or Form 540A, line 16 is:		Enter on Form 540, line 20 or Form 540A, line 17		of the amount over –
	over –	But not over –			
<b>Schedule Z –</b> Use if your filing status is <b>Head of Household</b>	\$ 0	\$ 11,500	\$ 0.00	+ 1.0%	\$ 0
	11,500	27,250	115.00	+ 2.0%	11,500
	27,250	35,126	430.00	+ 4.0%	27,250
	35,126	43,473	745.04	+ 6.0%	35,126
	43,473	51,350	1,245.86	+ 8.0%	43,473
	51,350	AND OVER	1,876.02	+ 9.3%	51,350

## How to Figure Tax Using the 2001 California Tax Rate Schedules

 **Tip** Go to [www.ftb.ca.gov](http://www.ftb.ca.gov) to e-file and eliminate the math. Or select "Forms and Publications" and use the online tax calculator to figure your tax.

**Example:** Richard and Valerie Green are filing a joint return using Form 540. Their taxable income on Form 540, line 19 is \$125,000.

**Step 1:** Using Schedule Y, they find the taxable income range that includes their taxable income of \$125,000. See the boxed range in the sample below.

	If the amount on Form 540, line 19 is:		Enter on Form 540, line 20		of the amount over –
	over –	But not over –			
<b>Schedule Y –</b> Use if your filing status is <b>Married Filing Joint or Qualifying Widow(er) with Dependent Child</b>	\$ 0	\$ 11,496	\$ 0.00	+ 1.0%	\$ 0
	11,496	27,250	114.96	+ 2.0%	11,496
	27,250	43,006	430.04	+ 4.0%	27,250
	43,006	59,700	1,060.28	+ 6.0%	43,006
	59,700	75,450	2,061.92	+ 8.0%	59,700
	75,450	AND OVER	3,321.92	+ 9.3%	75,450

<b>Step 2:</b> They subtract the amount at the beginning of their range from their taxable income.	<b>Example</b>	<b>Your Income</b>
	\$125,000 - 75,450 \$ 49,550	\$ - \$
<b>Step 3:</b> They multiply the result from Step 2 by the percentage for their range.	\$49,550 x .093 \$ 4,608.15	\$ x \$
	\$3,321.92 + 4,608.15 \$7,930.07	\$ + \$
<b>Step 4:</b> They round the amount from Step 3 to two decimals (if necessary) and add it to the tax amount for their income range. After rounding the result, they will enter \$7,930 on Form 540, line 20. For information on rounding, see "Filling in your Return" on page 9.		

# How To Get California Tax Information

(Keep This Booklet For Future Use)

## Where To Get Income Tax Forms and Publications

**By Internet** – You can download, view, and print California income tax forms and publications; or, you may have these forms and publications mailed to you. Many of our most frequently used forms may be filed electronically, printed out for submission, and saved for record keeping. Go to our Website at: [www.ftb.ca.gov](http://www.ftb.ca.gov)

**By phone** – To order 1999 – 2001 California tax forms and publications and 2001 federal booklets:

- Refer to the list on the next page and find the code number for the form you want to order.
- Call (800) 338-0505.
- Select "Personal Income Tax."
- Select "To Order Forms and Publications."
- Enter the three-digit form code when you are instructed.

Please allow two weeks to receive your order. If you live outside California, please allow three weeks to receive your order.

**In person** – Many post offices and banks provide free California tax booklets during the filing season. Most libraries and some quick print businesses have forms and schedules for you to photocopy (a nominal fee may apply). **Note:** Employees at libraries, post offices, banks, and quick print businesses cannot provide tax information or assistance.

**By mail** – Write to: TAX FORMS REQUEST UNIT, FRANCHISE TAX BOARD, PO BOX 307, RANCHO CORDOVA CA 95741-0307.

## Letters

If you write to us, be sure your letter includes your social security number, and your daytime and evening telephone numbers. Send your letter to:

FRANCHISE TAX BOARD  
PO BOX 942840  
SACRAMENTO CA 94240-0040

We will respond to your letter within six weeks. In some cases, we may call you to respond to your inquiry, or ask you for additional information. Do not attach correspondence to your tax return unless the correspondence relates to an item on the return.

## General Toll-Free Phone Service

**Our general toll-free service is available:**

- Monday – Friday, 7 a.m. until 8 p.m.
- Saturdays, 8 a.m. until 5 p.m.

We may modify these hours without notice to meet operational needs.

From within the United States . . . . . (800) 852-5711  
From outside the United States (not toll-free) . . . . . (916) 845-6500  
For federal tax questions, call the IRS at . . . . . (800) 829-1040

### Assistance for persons with disabilities

We comply with the Americans with Disabilities Act. Persons with a hearing or speech impairment call:

From voice phone (California Relay Service) . . . . . (800) 735-2922  
From TTY/TDD (Direct line to FTB customer service) . . (800) 822-6268  
For all other assistance or special accommodations . . (800) 852-5711

**Large-print forms and instructions** – The Resident Booklet is available in large print upon request and is also available on cassette tape. See "Where To Get Income Tax Forms and Publications" on this page.

### Asistencia bilingüe en español

Para obtener servicios en español y asistencia para completar su declaración de impuestos/formularios, llame al número de teléfono (anotado arriba) que le corresponde.

## Your Rights As A Taxpayer

Our goal at the FTB is to make certain that your rights are protected so that you will have the highest confidence in the integrity, efficiency, and fairness of our state tax system. FTB Pub. 4058, California Taxpayers' Bill of Rights, includes information on your rights as a California taxpayer, the Taxpayers' Rights Advocate Program, and how you can request written advice from the FTB on whether a particular transaction is taxable. See "Where To Get Income Tax Forms and Publications," on this page.

## Privacy Act Notice

The Information Practices Act of 1977 and the federal Privacy Act require the Franchise Tax Board to tell you why we ask you for information. The Operations and Compliance Branches ask for tax return information to carry out the Personal Income Tax Law of the State of California. We may request additional information if we audit your return or take collection action.

If you meet the income requirements, the Revenue and Taxation Code requires you to file a return on the form we prescribe (Sections 18501 and 18621). When you file this or other documents, you must include your social security number for identification and return processing (Section 18624).

It is mandatory to furnish all information requested when you are required to file any documents prescribed by the Franchise Tax Board. If you do not file a return, or do not provide the information we ask for, or provide fraudulent information, the law states you may be charged penalties and interest and, in certain cases, you may be subject to criminal prosecution. We also may disallow claimed exemptions, exclusions, credits, deductions, or adjustments. This could make the tax higher or delay or reduce any refund.

We may give the information you furnish us to the United States Internal Revenue Service, the proper official of any state imposing an income tax or a tax measured by income, the Multistate Tax Commission, and California government agencies and officials, as provided by law. If you owe any monies, we may disclose the amount due to employers, financial institutions, county recorders, vacation trust funds, process agents, and other payers.

You have a right to access records containing your personal information maintained by the Franchise Tax Board. The officials responsible for maintaining the information are: 1) Filing of returns – Chief, Filing Division; 2) Auditing of returns – Chief, Audit Division; and 3) Collection of monies – Chief, Accounts Receivable Management Division. The address is:

FRANCHISE TAX BOARD  
PO BOX 942840  
SACRAMENTO CA 94240-1040

Telephone: Within the United States . . . . . (800) 852-5711  
Outside the United States (not toll-free) . . . (916) 845-6500

Our automated toll-free phone service is available 24 hours a day, 7 days a week, in English and Spanish to callers with touch-tone telephones. You can:

- Order California and federal tax forms and publications;
- Get current year tax refund information;
- Get balance due and payment information; and
- Hear recorded answers to many of your questions about California taxes.

Have paper and pencil ready to take notes.

Call from within the

United States . . . . . (800) 338-0505

Call from outside the

United States (not toll-free) . . . . (916) 845-6500

### Order Forms and Publications

If your current address is on file, you can order California tax forms for the current and prior years. You can also order current year federal tax booklets between January 2 and April 15. See the following list of forms and follow the instructions for ordering forms on the previous page.

#### Code California Tax Forms and Publications

- 900 California Resident Income Tax Booklet: Form 540, Resident Income Tax Return Form 540A, Resident Income Tax Return
- 965 Form 540 2EZ Tax Booklet
- 903 Schedule CA (540), California Adjustments: FTB 3885A, Depreciation & Amortization Adjustments
- Schedule D, California Capital Gain or Loss Adjustment
- 969 Large print Resident Booklet (current year only)
- 970 Resident Booklet on cassette (current and prior year only)
- 907 540-ES, Estimated Tax for Individuals
- 908 540X, Amended Individual Income Tax Return
- 909 Schedule D-1, Sales of Business Property
- 910 Schedule G-1, Tax on Lump-Sum Distribution
- 911 Schedule P (540), Alternative Minimum Tax and Credit Limitations – Residents
- 913 Schedule S, Other State Tax Credit
- 914 California Nonresident Income Tax Booklet: Long and Short Form 540NR, Nonresident or Part-Year Resident Income Tax Return
- 917 Schedule CA (540NR), California Adjustments — Nonresidents or Part-Year Residents
- 918 Schedule P (540NR), Alternative Minimum Tax and Credit Limitations – Nonresident or Part-Year Residents
- 956 FTB 3503, Natural Heritage Preservation Credit
- 933 FTB 3504, Long-Term Care Credit
- 947 FTB 3505, Teacher Retention Credit
- 977 FTB 801, Teacher Retention Credit Brochure
- 978 FTB 801a, Teacher Retention Credit – Frequently Asked Questions
- 932 FTB 3506, Child and Dependent Care Expenses Credit
- 937 FTB 3516, Request for Copy of Personal Income Tax or Fiduciary Return
- 921 FTB 3519, Payment Voucher for Automatic Extension for Individuals
- 972 FTB 3520, Power of Attorney Form and FTB Pub. 1144
- 922 FTB 3525, Substitute for W-2 Wage and Tax Statement
- 923 FTB 3526, Investment Interest Expense Deduction
- 931 FTB 3534, Joint Strike Fighter Credit
- 940 FTB 3540, Credit Carryover Summary
- 949 FTB 3567, Installment Agreement Request
- 924 FTB 3800, Tax Computation for Children with Investment Income
- 929 FTB 3801, Passive Activity Loss Limitations

- 930 FTB 3803, Parents' Election to Report Child's Interest and Dividends
- 935 FTB 3805D, Net Operating Loss (NOL) Computation and Limitations – Pierce's disease
- 925 FTB 3805E, Installment Sale Income
- 928 FTB 3805P, Additional Taxes from Qualified Retirement Plans
- 926 FTB 3805V, Net Operating Loss (NOL) — Individuals
- 901 FTB 3805Z, Enterprise Zone Businesses
- 927 FTB 5805, Underpayment of Estimated Tax
- 919 FTB Pub. 1001, Supplemental Guidelines to California Adjustments
- 920 FTB Pub. 1005, Pension and Annuity Guidelines
- 945 FTB Pub. 1006, California Tax Forms and Related Federal Forms
- 946 FTB Pub. 1008, Federal Tax Adjustments and Your Notification Responsibilities
- 943 FTB Pub. 4058, California Taxpayers' Bill of Rights
- 941 FTB Pub. 1031, Guidelines for Determining Resident Status
- 942 FTB Pub. 1032, Tax Information for Military Personnel
- 951 FTB Pub. 1051A, Guidelines for Married Filing Separate Returns
- 934 FTB Pub. 1540, California Head of Household Filing Status Information

#### Code Federal Tax Forms

- 902 1040 Booklet (with Schedules A, B, D, & E; Forms 1040V, EIC, and 2441)
- 904 1040A Booklet (with Schedule 1; Form EIC)
- 915 1040EZ Booklet

### Current Year Refund Information

If you file by mail, you should wait at least 8 weeks after you file your tax return before you call to find out about your refund. You will need your social security number, the numbers in your street address, box number, or route number, and your ZIP Code to use this service.

### Balance Due And Payment Information

You should wait at least 45 days from the date you mailed your payment before you call to verify receipt of your payment. You will need your social security number, the numbers in your street address, box number, or route number, and your ZIP Code to use this service.

### Answers To Tax Questions

Call our automated phone service, select personal income tax information, then general tax information, and enter the 3-digit question code.

#### Code Filing Assistance:

- 100 Do I need to file a return?
- 103 What is and how do I qualify for the Child and Dependent Care Expenses Credit?
- 108 What is a qualifying individual for the Child and Dependent Expenses Care Credit?
- 111 Which form should I use?
- 112 How do I file electronically and get a fast refund?
- 113 What is the Teacher Retention Credit?
- 200 Where can I pick up a form or publication today?
- 201 How can I get an extension to file?
- 203 What is and how do I qualify for the nonrefundable renter's credit?
- 204 I never received a Form W-2. What do I do?
- 205 I have no withholding taken out. What do I do?
- 206 Do I have to attach a copy of my federal return?

- 207 Should I file my return even though I do not have the money to pay?
- 208 How do I figure my estimated tax payments?
- 209 I lived in California for part of the year. Do I have to file a return?
- 210 I do not live in California. Do I have to file a return?
- 211 How do I figure my IRA deduction?
- 212 How do I claim my disaster related loss?
- 215 Who qualifies me to use the head of household filing status?
- 216 I'm due a refund. Do I still need to file a return?
- 217 I am currently/was in the military. Do I have to file a California return?
- 218 I'm in the military. Do I have to use the same filing status as federal?
- 219 I sold my personal residence. How do I report the sale to California?
- 220 There is no difference in my state and federal depreciation, business income, and capital gain income. What do I do?
- 221 What is community property?
- 222 How much can I deduct for vehicle license fees?
- 227 How do I get a refund of excess SDI?
- 239 Where can I get help with preparing and filing my income tax return?
- 240 Does a tax return have to be filed for a deceased taxpayer?

#### Refunds

- 300 My spouse passed away. You sent a refund with both our names on it. What do I do?
- 301 I got a letter saying you sent my refund to another agency. Why?

#### Penalties

- 400 I have an extension of time to file my return. Why did I get a penalty?
- 401 I filed my return on time. Why did I get a penalty?
- 402 How can I protest a penalty?
- 403 What is the estimate penalty rate?

#### Notices And Bills

- 500 I received a bill and I cannot pay it in full. What do I do?
- 501 Why didn't you give me credit for my withholding?
- 502 You didn't give me credit for my dependent. What do I do?
- 504 I'm head of my house. Why was I denied head of household filing status?
- 506 How can I get information about my Form 1099-G?
- 508 I received a notice that didn't show all payments made. How do I get credit for them?

#### Tax For Children

- 601 Can my child take a personal exemption credit when I claim her or him as a dependent on my return?
- 602 Federal law limits the standard deduction. Is the state law the same?

#### Miscellaneous

- 610 Can I pay my taxes with a credit card?
- 611 What address do I send my payment to?
- 612 I mailed my return and haven't heard anything. Should I send a copy of my return?
- 613 I forgot to attach my Form(s) W-2 when I mailed my return. What do I do?
- 614 I forgot to attach a copy of my federal return. What do I do?
- 615 How do I get a copy of my state tax return?
- 616 What should I do if my federal tax return was examined and changed by the IRS?
- 617 What are the current interest rates?
- 619 How do I report a change of address?

