

California

1994

Nonresident or Part-Year Resident

Forms & Instructions

Personal Income Tax Booklet

This booklet contains two copies of:

[Form 540NR](#), California Nonresident or Part-Year Resident Income Tax Return, page 13

[Schedule CA \(540NR\)](#), California Adjustments - Nonresident or Part-Year Resident, page 17

[FTB 3519](#), Payment Voucher For Automatic Extension for Individuals, page 27

Do you need help?

1-800-338-0505



F.A.S.T.

Most of your questions can be answered by reading the instructions in this booklet. But if you find that you need help, use our [F.A.S.T. \(Fast Answers about State Taxes\) toll-free phone service](#) available 24 hours a day. If you cannot get the answer you need, call our [regular toll-free phone service](#) listed on page 31. The best times to call are between 7:00 and 10:00 in the morning and between 6:00 and 8:00 in the evening. If you need in-person assistance, visit one of our [district offices](#). Addresses are shown on page 31.

Members of the
Franchise Tax Board

Gray Davis, Chairman
Brad Sherman, Member
Russell Gould, Member



State of California
Franchise Tax Board

How Nonresidents and Part-Year Residents are Taxed

If you were a nonresident of California and received income in 1994 which had its source in California, or if you moved into or out of California in 1994, you must file Form 540NR, Nonresident or Part-Year Resident Income Tax Return. California taxes all income you received while you were a resident of California and the income you received from California sources while a nonresident. Use Schedule CA (540NR), California Adjustments – Nonresidents or Part-Year Residents, column A through column D to compute your total income as if you were a resident of California for the entire year. Then divide your California adjusted gross income (Schedule CA (540NR), column E) by your adjusted gross income from all sources (Schedule CA (540NR), column D) to determine the percentage of tax due from the California tax table or tax rate schedule. You may also qualify for some of the tax credits provided under California law. These credits may reduce any California tax you may owe. If you were a resident of California for all of 1994, you should get a California Resident Income Tax Booklet and file Form 540, California Resident Income Tax Return, Form 540A, California Resident Income Tax Return, or Form 540EZ, California Resident Income Tax Return For Single and Joint Filers With No Dependents.

Important News About Your 1994 California Income Tax Return

Differences Between California and Federal Law

In general, California did not conform its law to changes made to the Internal Revenue Code (IRC) by the federal Revenue Reconciliation Act of 1993 (Public Law 103-66). California legislation during 1994 did adopt specific provisions of the 1993 federal changes and the provisions are specifically identified when appropriate. All other references in these instructions are to the IRC as it existed on January 1, 1993.

Temporary and Transitory Absences from California

If you were domiciled in California and worked outside of California for an uninterrupted period of at least 546 consecutive days under an employment contract, you are considered a nonresident. This also applies to the spouse who accompanies the employed individual during those 546 consecutive days. However, you will not qualify under this provision if you are in California for a total of more than 45 days during any taxable year covered by the contract; or if you have income from stocks, bonds, notes or other intangible property in excess of \$200,000 for any taxable year covered by the contract. For more information, get FTB Pub. 1031, Guidelines for Determining Resident Status.

New California Moving Expense Form

If you have moving expenses in 1994, use Form FTB 3596, California Moving Expense, to figure the amount you may deduct on your California return. Beginning with tax year 1994, California and federal law are no longer the same for the moving expense deduction.

New Voluntary Contributions

Recent California legislation allows you to make a voluntary contribution to the California Olympic Training Fund.

New Credit and Expired Credit

See page 7 for information about the new credit for child adoption costs. The young infant credit has expired. Any carryover credit from prior years may be used in 1994 to the extent allowable until the excess credit is exhausted.

Renter's Credit

Due to a tax law change, renter's credit has been eliminated for 1994 and 1995. For these years you may not claim the credit on your personal income tax return.

Who Must File A California Income Tax Return

Requirements for Most People

You must file a California income tax return if you were a California resident for any part of the year or if you had income from California sources and:

If you were single or unmarried in 1994 and your:

- gross income from all sources was more than \$8,000; or
- adjusted gross income from all sources was more than \$6,000.

If you were married in 1994, and you and your spouse had a combined:

- gross income from all sources of more than \$16,000; or
- adjusted gross income from all sources of more than \$12,000.

If you owe \$1 or more of tax.

Note: Gross income means all income you received in the form of money, goods, property and services that is not exempt from tax.

Even if you do not have to file a California income tax return, you should file for a refund if:

- California state income tax was withheld from your pay; or
- you made estimated tax payments.

California Alternative Minimum Tax and Credit Limitations

You may owe alternative minimum tax or have to limit your credits if your California adjusted gross income plus items such as accelerated depreciation, charitable contributions of appreciated capital gain property and passive activity losses total more than:

- \$40,000 if you are married filing joint or qualifying widow(er); or
- \$30,000 if you are single or head of household; or
- \$20,000 if you are married filing separate.

Get Schedule P (540NR), Alternative Minimum Tax and Credit Limitations – Nonresidents and Part-Year Residents, to see if you owe alternative minimum tax. See Form 540NR, "Step 5" to see if you need to limit your credits.

Requirements for Children and Other Dependents

California law is the same as federal law for the income of children under age 14. For each child under age 14 who was a resident for any part of the year or who had income from California sources and received more than \$1,200 of investment income in 1994, you may file Form 540NR for the child. Be sure to complete and attach form FTB 3800, Tax Computation for Children with Investment Income, which you must use to figure the tax reported on the child's California income tax return or you may include the child's interest and dividend income on the parent's return. Use form FTB 3803, Parent's Election to Report Child's Interest and Dividends, if the child's interest and dividend income was \$5,000 or less (but not less than \$500) for 1994. If the child's interest and dividend income was more than \$5,000, you may not include the child's income on the parent's California income tax return. Instead, you must file Form 540NR and form FTB 3800 for the child.

Requirements for Retirees Who Move to Another State

If you retire to a state other than California, and receive a pension based on services performed in California, you may be required to file Form 540NR. For more information, get FTB Pub. 1005, Pension and Annuity Guidelines.

When Should You File Your Return?

File your Form 540NR by April 17, 1995. The earlier you file your return, the earlier you will get your refund. But, if it is April 17, 1995, and you know you will not be able to file your return by midnight that night, the following information will help you decide what to do next.

These are the return filing rules:

1. There is an automatic six-month extension to **file** until October 16, 1995.
 - To get the extension, you must file by October 16, 1995.
 - You do not need to write to the Franchise Tax Board to request the extension to file.
2. There is no extension for the time to **pay** the tax you owe.
 - If you do not pay by April 17, 1995, you may owe late payment penalties and interest.

Here is what to do:

1. Use the worksheet for form FTB 3519, Payment Voucher for Automatic Extension for Individuals, on page 27, to determine as accurately as possible whether you owe any tax based on the information you have.
2. If you do not owe tax, you do not need to send anything to the FTB now. But make sure to file your return by October 16, 1995.
3. If you owe tax, complete form FTB 3519 and make out a check or money order payable to the Franchise Tax Board for the full amount you owe.
4. To avoid late payment penalties and interest, mail your check or money order and form FTB 3519 by April 17, 1995 to:

Franchise Tax Board
P.O. Box 942867
Sacramento, CA 94267-0051

If you are living or traveling outside the United States on April 17, 1995, the deadline for filing your return and paying your tax is June 15, 1995. Interest will accrue from the original due date (April 15th) until the date of payment. See form FTB 3519 for more information.

Instructions for Form 540NR California Nonresident or Part-Year Resident Income Tax Return

These instructions are based on the Internal Revenue Code (IRC) as of **January 1, 1993**, and the California Revenue and Taxation Code (R&TC).

Before You Begin You must complete your federal income tax return (Form 1040, Form 1040A, Form 1040EZ or Form 1040NR) before you begin your Form 540NR. You will use the information you entered on your federal income tax return to complete your Form 540NR.

Important: You must attach a copy of your federal income tax return, and all supporting federal forms and schedules to Form 540NR.

Step 1 If there is a label on the front of your booklet:

Name and Address

1. Complete your Form 540NR **before** you remove the label from the front of your booklet.
2. Check your math and the amounts entered to make sure that they are correct.
3. Remove your label from the front of your booklet and attach it on the front of your Form 540NR in the space provided at the top.
4. Make sure the information on the label is correct. If you need to make any changes, draw a line in ink through the incorrect information and clearly print the new information.

If there is no label, print or type your name, social security number and address in the spaces provided at the top of Form 540NR.

If you file a joint return, show your social security numbers in the same order as you show your names.

Step 2 Check only one of the boxes on line 1 through line 5. Be sure to enter the required information if you check a box on line 3, line 4 or line 5.

If you file federal Form 1040EZ, Form 1040A or Form 1040, your filing status for California must be the same as the filing status you used on your federal income tax return.

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

- an active member of the United States armed forces or any auxiliary military branch during 1994; or
- a nonresident for the entire year and had no income from California sources during 1994.

If you filed federal Form 1040NR, use the California filing status that applies to you.

If You Are Married And File A Separate Return If you check the box on line 3, you must enter your spouse's name on line 3 and your spouse's social security number in the space provided in "Step 1" on Form 540NR.

Note: Community property rules apply to the separation of income when you use the married filing separate status. For more information, get FTB Publication 1031, Guidelines for Determining Residency Status.

If You File As Head Of Household If you check the box on line 4 and if the qualifying person is a child but not your dependent, enter that child's name on line 4. Do not claim yourself or a nonrelative as the qualifying person. Get FTB Publication 1540, Tax Information for Head of Household, for more information.

Step 3 Exemptions An exemption credit is an amount that reduces your tax. However, your exemption credit is not refundable.

Line 6 – Dependent Check Box Check the box on line 6 **only** if your parent(s), or someone else, can claim you (or your spouse, if married) as a dependent on their tax return even if that person chooses not to; and

- if single or married filing separate, skip line 7 through line 10 and enter -0- on line 11.
- if married filing joint and both you and your spouse can be claimed as dependents, skip line 7 through line 10 and enter -0- on line 11.
- if married filing joint and only one spouse can be claimed as a dependent, ignore the instructions for line 7 and enter 1 on line 7.

When you get to "Step 4" you must use the "Standard Deduction Worksheet for Dependents" in the instructions for line 18.

Line 8 – Blind Exemptions The first year you claim this exemption credit, you must attach a doctor's statement to the back of Form 540NR indicating that 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.

Line 9 – Senior Exemptions If either you or your spouse is 65 years of age or older, you should claim an additional exemption credit on line 9.

Line 10 – 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. **Do not** list the same person you listed on line 4. Enter on line 10 the total number of dependents listed.

The persons you list as dependents on your Form 540NR must be the same persons you listed as dependents on your federal income tax return.

Step 4 Taxable Income Refer to your completed federal income tax return and your Schedule CA (540NR), California Adjustments — Nonresidents or Part-Year Residents, to complete "Step 4."

Line 12 – California Wages Enter the total amount of your California wages from your Form(s) W-2. This amount should be shown in box 17 of Form W-2.

Line 14 – California Adjustments — Subtractions (from Schedule CA (540NR), line 31, column B) You must complete Schedule CA (540NR) to find the amount to enter on Form 540NR, line 14. Follow the instructions for Schedule CA (540NR) included in this booklet. Enter the amount from Schedule CA (540NR), line 31, column B on Form 540NR, line 14.



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 amount in parentheses. For example: “(12,325).”

Line 16 – California Adjustments — Additions (from Schedule CA (540NR), line 31, column C)

You must complete Schedule CA (540NR), to find the amount to enter on Form 540NR, line 16. Follow the instructions for Schedule CA (540NR) beginning on page 21. Enter the amount from Schedule CA (540NR), line 31, column C.



Line 17 – Adjusted Gross Income From All Sources

Combine line 15 and line 16. This amount should be the same as the amount on Schedule CA (540NR), line 31, column D.

Line 18 – Standard Deduction OR Itemized Deductions

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

- your standard deduction (see either the “Standard Deduction Chart For Most People” below or the “Standard Deduction Worksheet For Dependents” to the right); or
- your total itemized deductions (see the instructions for Schedule CA (540NR), Part III).

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

If you take the standard deduction, find the correct amount from the “Standard Deduction Chart For Most People” or complete the “Standard Deduction Worksheet For Dependents.” Enter your standard deduction on Form 540NR, line 18.

If you itemize your deductions, first complete Schedule CA (540NR), Part III. Then enter on Form 540NR, line 18, your California itemized deductions from Schedule CA (540NR), line 38.

Note: If you itemize your deductions on your Form 540NR but not on your federal income tax return, first complete federal Schedule A, Itemized Deductions. Then see the instructions for Schedule CA (540NR), Part III, for state and federal differences in figuring itemized deductions. If your California itemized deductions on Schedule CA (540NR), line 38, are larger than your allowable California standard deduction, enter your total California itemized deductions on Form 540NR, line 18. Also attach a copy of your completed federal Schedule A to your Form 540NR.

Standard Deduction Chart For Most People

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

Your Filing Status	Enter On Line 18
1 – Single	\$2,431
2 – Married filing joint return.	\$4,862
3 – Married filing separate return.	\$2,431
4 – Head of household.	\$4,862
5 – Qualifying widow(er)	\$4,862

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

Standard Deduction Worksheet For Dependents

Use this worksheet only if your parent(s), or someone else, can claim you as a dependent on their tax return.

1. Enter your earned income from line 1 of the federal “Standard Deduction Worksheet for Dependents” found in the instructions for federal Form 1040A or Form 1040, or line A of the worksheet found in the instructions for federal Form 1040EZ
2. Minimum standard deduction **\$600.00**
3. Compare the amounts on line 1 and line 2. Enter the **larger** of the two amounts here
4. Enter the amount shown below for your filing status.
 - Single or married filing separate, enter \$2,431
 - Married filing joint, head of household or qualifying widow(er), enter \$4,862
5. **Standard deduction.** Compare the amounts on line 3 and line 4. Enter the **smaller** of the two amounts here and on your Form 540NR, line 18

Step 5

Tax

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 20 – California Adjusted Gross Income

You must complete Schedule CA (540NR), column E to determine your California adjusted gross income. Follow the instructions for Schedule CA (540NR) beginning on page 21. Enter on Form 540NR, line 20 the amount from Schedule CA (540NR), line 31, column E.

Line 22 – Tax

To figure your tax on the amount on line 19, use one of the following methods:

- **Tax Table.** If your taxable income is \$50,000 or less, you must use the tax table on pages 28 through 30. Check the box labeled “Tax Table” and enter the tax on Form 540NR, line 22.
- **Tax Rate Schedules.** If your taxable income is over \$50,000, you must use the tax rate schedules on page 30. Check the box labeled “Tax Rate Schedule” and enter the tax on Form 540NR, line 22.
- **FTB 3800.** Generally, you must use form FTB 3800, Tax Computation for Children With Investment Income, to figure the tax on the separate Form 540NR of your child who was under age 14 on January 1, 1995, and who had more than \$1,200 of investment income. Attach form FTB 3800 to the child’s Form 540NR. Check the box labeled “FTB 3800” and enter the tax on Form 540NR, line 22.
- **FTB 3803.** If, as a parent, you elect to report your child’s interest and dividend income of \$5,000 or less (but not less than \$500) on your return, complete form FTB 3803, Parent’s 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 540NR. Add the amount of tax, if any, from each form FTB 3803, line 8, to the amount of your tax from the tax table or tax rate schedules. Enter your total tax on Form 540NR, line 22. Check the box labeled “FTB 3803.” Attach form(s) FTB 3803 to your return.

Line 23 – Exemption Credits

There are two limitations on exemption credits: a federal adjusted gross income (AGI) limitation and a California limitation computed on Schedule P (540NR), Alternative Minimum Tax and Credit Limitations — Nonresidents or Part-Year Residents. To find out if your exemption credits are affected by one or both of these limitations, you may need to complete one or more worksheets or Schedule P (540NR). Answer the following questions to figure the amount to enter on line 23.

1. Is your federal AGI, Form 540NR, line 13 more than:
 - \$214,929 if married filing joint;
 - \$161,196 if head of household; or
 - \$107,464 if single or married filing separate?

No. Go to question 2
Yes. Go to Worksheet I.

2. Did you complete federal schedule C, D, E, or F?

No. Go to question 3
Yes. Get and complete Schedule P (540NR) through Part V, line 1f to figure the amount of your exemption credits.

3. Is your AGI from all sources, Form 540NR, line 17, more than:
 - \$40,000 if married filing joint;
 - \$30,000 if single or head of household; or
 - \$20,000 if married filing separate?

No. Multiply the amount on Form 540NR, line 11 by \$65. Enter the result on Form 540NR, line 23 and check the box labeled "line 23 instructions."
Yes. Go to question 4.

4. Is your AGI from all sources, Form 540NR, line 17, more than:
 - \$150,000 if married filing joint;
 - \$112,000 if single or head of household; or
 - \$75,000 if married filing separate?

No. Complete Worksheet II.
Yes. Get and complete Schedule P (540NR) through Part V, line 1f to figure the amount of your exemption credits.

Worksheet I — Exemption Credit Limitation

- a. Multiply the total number of exemptions on Form 540NR, line 11 by \$65 _____
- b. Enter the federal AGI from Form 540NR, line 13 _____
- c. Enter the amount shown below for your filing status:
 - \$107,464 if single or married filing separate
 - \$161,196 if head of household;
 - \$214,929 if married filing joint or qualifying widow(er) _____

If line c is equal to or more than line b, **stop**. The federal AGI limitation does not affect your exemption credits. Go back to the line 23 instructions and continue with Question 2.

- d. Subtract line c from line b _____

Note: If line d is more than \$25,000 (more than \$12,500 if married filing separate), **stop**. You may not claim any exemption credits. Enter -0- on Form 540NR, line 23 and check the box labeled "line 23 worksheet."

- e. Divide line d by \$2,500 (\$1,250 if married filing separate). If the result is not a whole number, round it up to the next higher whole number _____
 - f. Multiply line e by \$6 _____
 - g. Multiply line f by the total number of exemptions on Form 540NR, line 11 _____
 - h. Subtract line g from line a _____
- If more than zero, enter the result. Then go back to the line 23 instructions and continue with Question 2.
 If zero or less than zero, enter -0-. Also enter -0- on Form 540NR, line 23 and check the box labeled "line 23 worksheet."

Worksheet II — Schedule P Credit Limitation

- A. Enter the amount from Form 540NR, line 17 _____
- B. Enter \$40,000 (\$30,000 if single or head of household; \$20,000 if married filing separate). _____
- C. Subtract line B from line A. _____
Note: If line B is equal to or more than line A, **stop**. Your exemption credits are not limited. Multiply the amount on Form 540NR, line 11 by \$65. Enter the result on Form 540NR, line 23 and check the box labeled "line 23 instructions."
- D. Multiply the tax on Form 540NR, line 22 by the ratio on Form 540NR, line 25a and enter the result here _____
- E. Enter the amount from Form 540NR, line 26 _____
- F. Add line D and line E. _____
- G. Multiply line C by 8.5% (.085). _____
- H. Subtract line G from line F. If less than zero, enter -0-. If line H equals zero, **stop**. Get and complete Schedule P (540NR) through Part V, line 1f to figure the amount of your exemption credits. _____
- I. Multiply the amount from Form 540NR, line 11 by \$65 _____
- J. Subtract line I from line H _____
 If the result is zero or a positive number, enter the amount from line I on Form 540NR, line 23 and check the box labeled "line 23 instructions." (Or, if you had to complete Worksheet I, enter the amount from line h of Worksheet I on Form 540NR, line 23 and check the box labeled "line 23 worksheet.".)
 If the result is less than zero, you must complete Schedule P (540NR) through Part V, line 1f to figure the amount of your exemption credits.

Line 26 – Tax From Schedule G-1 and Form FTB 5870A

Check the applicable box(es) 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
Credits**

A variety of California tax credits are available to reduce your tax if you qualify. For most credits, you must attach a separate form or schedule to your Form 540NR. To claim your credits, follow the specific instructions for each credit. In addition to any limitation specific to a credit, there is also an overall limitation on the total credit amount you can claim. First, figure the amount of that credit using the appropriate form, schedule or worksheet. Then, to see if this overall limitation affects your credits, answer the following question(s):

1. Were you instructed to complete Worksheet II in Step 5?
 - No.** The overall limitation does not affect your credits. Go to the instructions for Form 540NR, line 31. (However, if you were instructed in "Step 5", Worksheet I to enter -0- on Form 540NR, line 23, get and complete Schedule P (540NR) to see if your credits are affected by the overall limitation.)
 - Yes.** Go to Question 2.
2. Were you instructed in Step 5 to complete Schedule P (540NR)?
 - No.** Go to Question 3.
 - Yes.** Complete Schedule P (540NR), Part V to see if your credits are affected by the overall limitation.
3. Are your total credits (not including exemption credits) more than the amount on Worksheet II, line J?
 - No.** The overall limitation does not affect your credits. Go to the instructions for Form 540NR, line 31.
 - Yes.** Get the complete Schedule P (540NR) through Part V to determine if your credits are affected by the overall limitation.

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.

If you need to complete Schedule P (540NR) and if you claim any of the credits on line 31 through line 33, do not enter an amount on line 31 through line 33. Instead, enter the total amount of these credits from Schedule P (540NR), Part V, Section B, line 5 through line 7, on Form 540NR, line 36. Do not follow the instructions for line 36. Write "Schedule P (540NR)" to the left of the amount entered on line 36.

Line 31 – Credit for Joint Custody Head of Household

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

You may claim a credit if you were unmarried at the end of 1994; (or if married, you lived apart from your spouse for all of 1994; and you used the married filing separate filing status); and if you furnished more than one-half the household expenses for your home which also served as the home of your child, step-child or grand-child for at least 146 days but not more than 219 days of your taxable year. If the child is married, the child must be your dependent.

Also, the custody arrangement for the child must be part of a dissolution or separate maintenance settlement or must be part of a written agreement initiated by the parents prior to divorce proceedings.

Use the worksheet below to figure this credit.

1. Enter the amount from Form 540NR, line 24 _____
2. Enter the Schedule G-1 tax, if any, included on Form 540NR, line 26. _____
3. Add line 1 and line 2 _____
4. Credit percentage — 30% x .30 _____
5. Credit amount. Multiply line 3 by line 4. Enter the result or \$259, whichever is less _____

Line 32 – Credit for Dependent Parent

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

You may claim this credit only if:

- you were married at the end of 1994 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 he or she lived in your home.

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

Line 33 – Credit for Senior Head of Household

You may claim this credit if you:

- were 65 years of age or older on December 31, 1994;
- qualified as a head of household in 1992 or 1993 by providing a household for a qualifying individual who died during 1992 or 1993; and
- did not have adjusted gross income over \$42,032 for 1994.

Note: If you meet all the conditions listed above, you do not need to qualify to use the head of household filing status for 1994 in order to claim this credit.

Use the worksheet below to figure this credit.

1. Enter the amount from Form 540NR, line 19 _____
2. Credit percentage — 2% x .02 _____
3. Credit amount. Multiply line 1 by line 2. Enter the result or \$792, whichever is less. _____

Line 36 – Add the amounts on line 31 through line 33. Multiply the total by the ratio on Side 1, line 25a. Enter the result on line 36. If you completed Schedule P (540NR), see the paragraph above line 31.

**Line 37
through
Line 40 –**

Additional Credits

Each credit is identified by a code number. To claim only one, two or three credits, enter the credit name, code number and amount of the credit on line 37, line 38 and line 39. To claim more than three credits, get Schedule P (540NR). List three of the credits on line 37, line 38 and line 39. Enter on line 40 the total of any remaining credits from Schedule P (540NR).

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

Prison Inmate Labor Credit – Code 162

Employers who paid wages to prison inmates employed under an approved joint venture agreement may claim a credit for wages paid. Get form FTB 3507, Prison Inmate Labor Credit, to figure this credit.

Jobs Credit – Code 166

Employers who paid wages to employees certified to meet the requirements of Section 328 of the Unemployment Insurance Code may claim this credit for a portion of wages paid. Get form FTB 3524, Jobs Credit, to figure this credit.

Low-Emission Vehicles Credit – Code 160

You may claim this credit for the amount that was authorized by the California Energy Commission. The credit is only allowed on vehicles registered in California. To apply for certification, write to:

**California Energy Commission
1516 Ninth Street, MS 41
Sacramento, CA 95814**

Enterprise Zone Employee Credit – Code 169

If you earned wages for work in an enterprise zone, you may be able to claim this credit. Get form FTB 3553, Enterprise Zone Employee Credit, to figure this credit.

Political Contributions Credit Carryover – Code 184

You may claim this credit only if a carryover is available from prior years. If the amount of this credit is larger than your tax, you may carry over any excess credit to future years until the credit is used. You must apply the carryover credit to the earliest year possible. Get form FTB 3540, Credit Carryover Summary, unless you are required to complete Schedule P (540NR).

Note: Do not carry over the unused portion of the contribution. You may only carry over the excess credit.

Young Infant Credit Carryover – Code 161

You may claim this credit for maintaining a household for at least one dependent child under the age of 13 months only if a carryover is available from prior years. Get form FTB 3540, Credit Carryover Summary, to figure this credit unless you are required to complete Schedule P (540NR).

Employer Ridesharing Credits – Codes 171, 191, 192 and 193

Employers who sponsor a ridesharing incentive program or provide subsidized public transit passes to their employees may claim these credits. Get form FTB 3518, Employer Ridesharing Credits, to figure these credits. If you are not required to complete Schedule P (540NR), get form FTB 3540, Credit Carryover Summary, to claim a carryover from prior years for the cost of sponsoring a ridesharing program for your employees, or for operating a private, third-party ridesharing program (under former R&TC Sections 17053 and 17053.1).

Employee Ridesharing Credit – Code 194

Employees in a nonemployer-sponsored vanpool program may claim this credit. Get form FTB 3572, Employee Ridesharing Credit, to figure this credit.

Energy Conservation Credit Carryover – Code 182

You may claim this credit for the cost of installing energy conservation measures only if a carryover is available from prior years. Get form FTB 3540, Credit Carryover Summary, to figure this credit unless you are required to complete Schedule P (540NR).

Residential Rental And Farm Sales Credit Carryover – Code 186

You may claim this credit for the sale of residential rental or farm property located in California only if a carryover is available from prior years. Get form FTB 3540, Credit Carryover Summary, to figure this credit unless you are required to complete Schedule P (540NR).

Employer Child Care Contribution Credit – Code 190

Employers may claim a credit for their contributions to a qualified care plan made on behalf of any dependent under the age of 15 of the employer's California employee. Get form FTB 3501, Employer Child Care Program/Contribution Credit, to figure this credit.

Recycling Equipment Credit – Code 174

You may claim a credit for purchasing qualified property used to manufacture products composed of secondary waste material. Get form FTB 3527, Recycling Equipment Credit, to figure this credit.

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. Qualifying costs include the adoption-related:

- 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 for each qualified adoption.

1. Enter qualifying costs for each child _____
2. Credit percentage, 50% x .50 _____
3. Credit amount. Multiply line 1 by line 2 _____

If line 3 is more than \$2,500, your allowable credit is \$2,500. You may carry over the excess credit to future years until the credit is used.

Water Conservation Credit Carryover – Code 178

You may claim this credit for the cost of installing water conservation measures only if a carryover is available from prior years. Get form FTB 3540, Credit Carryover Summary, to figure this credit unless you are required to complete Schedule P (540NR).

Solar Pump Credit Carryover (Farmers Only) – Code 179

You may claim this credit for the cost of installing a solar pump system only if a carryover is available from prior years. Get form FTB 3540, Credit Carryover Summary, to figure this credit unless you are required to complete Schedule P (540NR).

Employer Child Care Program Credit – Code 189

Employers may claim this credit for establishing a child care program or constructing a child care facility in California for use primarily by their employees. The credit is also available to building owners that establish a child care program for their tenant's employees. Get form FTB 3501, Employer Child Care Program/Contribution Credit, to figure this credit.

Instructions: Form 540NR

Agricultural Products Credit Carryover – Code 175

You may claim this credit for the cost of agricultural products donated to a nonprofit organization only if a carryover is available from prior years. Get form FTB 3540, Credit Carryover Summary, to figure this credit unless you are required to complete Schedule P (540NR).

Enterprise Zone Hiring and Sales and Use Tax Credit – Code 176

Employers may claim a credit equal to a percentage of wages paid to qualified individuals hired to work in an enterprise zone. Business operators may claim a credit equal to the sales or use tax paid on the purchase of machinery or machinery parts for use in an enterprise zone. Get form FTB 3805Z, Enterprise Zone/Program Area Deduction and Credit Summary, to figure this credit.

Program Area Hiring and Sales and Use Tax Credit – Code 177

Employers who paid wages to employees who were formerly unemployed residents of high density unemployment areas (program areas) may claim this credit. Business operators who paid sales or use tax on the purchase of machinery or machinery parts for use in a program area may also claim this credit. Get form FTB 3805Z, Enterprise Zone/Program Area Deduction and Credit Summary, to figure this credit.

Los Angeles Revitalization Zone (LARZ) Hiring and Sales and Use Tax Credit – Code 159

Employers may claim a credit equal to a percentage of wages paid to qualified individuals hired to work in the Los Angeles Revitalization Zone (LARZ). Business operators may claim a credit equal to the sales or use tax paid on the purchase of machinery and equipment for use in the LARZ. Get form FTB 3806, Los Angeles Revitalization Zone (LARZ) Deduction and Credit Summary, to figure this credit.

Solar Energy Credit Carryover – Code 180

You may claim this credit for the cost of installing solar energy systems only if a carryover is available from prior years. Get form FTB 3540, Credit Carryover Summary, to figure this credit unless you are required to complete Schedule P (540NR).

Commercial Solar Energy Credit Carryover – Code 181

You may claim this credit for the cost of installing commercial solar energy systems only if a carryover is available from prior years. Get form FTB 3540, Credit Carryover Summary, to figure this credit unless you are required to complete Schedule P (540NR).

Commercial Solar Electric System Credit Carryover – Code 196

You may claim a credit for a solar electric system installed on commercial premises located in California only if a carryover is available from prior years. Get form FTB 3540, Credit Carryover Summary, to figure this credit unless you are required to complete Schedule P (540NR).

Research Credit – Code 183

This credit is similar to the federal credit but is limited to costs for increasing the research activities in California. Get form FTB 3523, Research Credit, to figure this credit.

Orphan Drug Credit Carryover– Code 185

You may claim this credit for the cost of conducting orphan drug research in California only if a carryover is available from prior years. Get form FTB 3540, Credit Carryover Summary, to figure this credit unless you are required to complete Schedule P (540NR).

Low-Income Housing Credit – Code 172

You may claim this credit if you undertake the development of low-income housing in California. Get form FTB 3521, Low-Income Housing Credit, to figure this credit.

Credit for Prior Year Alternative Minimum Tax – Code 188

You may claim this credit if you paid alternative minimum tax in a prior year but have no alternative minimum tax liability for 1994. Get form FTB 3510, Credit for Prior Year Minimum Tax Individuals or Fiduciaries, to figure this credit.

Other State Tax Credit – Code 187

You may claim this credit, in certain cases, for net income tax paid to another state or U.S. possession on income also taxed by California. Get Schedule S, Other State Tax Credit, to figure this credit.

Note: No credit is allowed for income taxes paid to any city, the federal government or a foreign country.

Line 43 – Subtract the amount on line 42 from the amount on line 28. Enter the result on line 43. If the amount on line 42 is more than the amount on line 28, 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 43. 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 43.

Step 7

Other Taxes

Attach the specific form or statement required for each item in this section.

Line 44 – Alternative Minimum Tax (AMT)

If you claim certain types of deductions, exclusions and credits, you may be subject to California's AMT. Generally, you may owe AMT if your total income is more than:

- \$40,000 if you are married filing joint or qualifying widow(er); or
- \$30,000 if you are single or head of household; or
- \$20,000 if you are married filing separate.

Get Schedule P (540NR), Alternative Minimum Tax and Credit Limitations — Nonresidents or Part-Year Residents, to figure the amount of tax to enter on line 44.

Note: 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 (540NR) and included on the return is more than the sum of \$1,000 plus the child's earned income. Get Schedule P (540NR) and its instructions to see if the child owes this tax.

Line 45 – Other Taxes and Credit Recapture

If you used form(s) FTB 3501, Employer Child Care Program/Contribution Credit; FTB 3518, Employer Ridesharing Credits; FTB 3805P, Additional Taxes Attributable to Qualified Retirement Plans (Including IRAs), Annuities and Modified Endowment Contracts; FTB 3805Z, Enterprise Zone/Program Area Deduction and Credit Summary; or FTB 3806, Los Angeles Revitalization Zone (LARZ), Deduction and Credit Summary, include the additional tax, if any, on line 45. Write the form number on the dotted line to the left of the amount on line 45.

Step 8

Payments

Make sure you have your Form(s) W-2, W-2G, 1099-MISC, 1099-R, 592-B, 594 and 597 before you begin this step.

If you received wages and do not have a Form W-2, see the instructions for "Sign Your Return" on page 11.

Line 47 – California Income Tax Withheld

Enter the total California income tax withheld from your:

- Form(s) W-2, box 18;
- Form(s) W-2G, box 14;
- Form(s) 1099-MISC, box 11;
- Form(s) 1099-R, box 10; or
- form(s) FTB 592-B, 594 or 597.

Caution: Do not include local tax withheld or tax withheld by other states.

If you 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 47.

Line 48 – 1994 California Estimated Tax Payments and Amount Applied from 1993 Return (and Payment Made with Extension Payment Voucher)

Enter the total of any:

- California estimated tax payments you made (Form 540-ES) for 1994;
- overpayment from your 1993 California income tax return that you applied to your 1994 estimated tax;
- payment you sent with form FTB 3519, Payment Voucher for Automatic Extension for Individuals;
- California estimated tax payments made on your behalf by an estate or trust on Schedule K-1 (541); and
- Schedule K-1 NR (568), line 13a.

Note: If you are including an amount from Schedule K-1 NR (568), write "LLC" on the dotted line to the left of the amount on line 48.

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 the separate returns. If you or your spouse paid separate estimated tax, but you are now filing a joint income tax return, add the amounts you each paid. Attach a statement to the front of Form 540NR explaining that payments have been made under both social security numbers.

Line 50 – Excess California SDI (or VPDI) Withheld

If more than \$412.97 of California State Disability Insurance (SDI) or Voluntary Plan Disability Insurance (VPDI) was withheld from your wages by a single employer, or if an employer withheld SDI (or VPDI) at a rate of more than 1.30% of your gross wages, you may not claim excess SDI (or VPDI) on your Form 540NR, line 50. Contact the employer for a refund.

You may claim a credit for excess California SDI (or VPDI) only if:

- you had **two or more** employers during 1994;
- you received more than \$31,767 in wages during 1994 from these employers;
- your employers withheld more than \$412.97 of SDI (or VPDI) from your 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 540NR.

Complete the worksheet below to figure the amount to enter on line 50. 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 Form(s) W-2. Enter the result here		
2. 1994 SDI (or VPDI) limit . .	- \$412.97	- \$412.97
3. Excess SDI (or VPDI) withheld. Subtract line 2 from line 1. Enter the result here and on Form 540NR, line 50 . . .		

Note: If zero or less, enter -0- on line 50.

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 52 through line 55.

Line 52 – Overpaid Tax

If the amount on line 51 is more than the amount on line 46, subtract the amount on line 46 from the amount on line 51. Enter the result on line 52. Your payments and credits are more than your tax.

Line 53 – Amount You Want Applied to Your 1995 Estimated Tax

You may apply all or part of the amount on line 52 to your 1995 estimated tax. Enter on line 53 the amount of line 52 you want applied to 1995.

Line 54 – Amount of Overpaid Tax Available This Year

If you entered an amount on line 53, subtract it from the amount on line 52. Enter the result on line 54. You may 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 make a contribution, skip line 55 and go to the instructions for "Step 10."

Line 55 – Tax Due

If the amount on line 51 is less than the amount on line 46, subtract the amount on line 51 from the amount on line 46. Enter the result on line 55. 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 55 is \$100 or more; and
- the amount of state income tax withheld on line 47 is less than 80% of the amount of your total tax on line 46.

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

You may make contributions to the California Seniors Special Fund or make voluntary contributions by adding them to the tax due. You must pay the full amount of tax due, including contributions, when you file your Form 540NR.

Step 10
Contri-
butions

You may make contributions in whole-dollar amounts only. If you make one or more contributions, you must complete "Step 10." You may contribute only to the following funds and cannot change the amount you contributed after the return is filed.

If you have overpaid tax available on line 54, the amount you contribute must be subtracted from your overpaid tax available. If you have tax due on line 55, your total contributions must be added to your tax due.

Line 56 – Contribution to California Seniors Special Fund

If you or your spouse claim the senior exemption credit on line 9, you may each make a contribution of up to \$65 to the California Seniors Special Fund. Your contribution will be used to provide direct services to seniors such as meals, adult day care and transportation. The actual use of the funds will be determined at the local level by the Area Agency on Aging, its Advisory Council of Seniors and the senior community.

Use the worksheet below to figure your contribution.

1. If you contribute, enter \$65; if you and your spouse contribute, enter \$130 _____
2. Enter the ratio from Form 540NR, line 25a. -----
3. Contribution amount. Multiply line 1 by line 2. Enter the result (rounded to the nearest whole dollar) here. _____

You may contribute any amount up to the amount on line 3. Enter your contribution on line 56.

Voluntary Contributions

You may make voluntary contributions of \$1 or more in whole dollar amounts.

Line 57 – Alzheimer’s Disease/Related Disorders Fund

Contributions entered on line 57 will be used to conduct a systematic 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.

Line 58 – California Fund for Senior Citizens

Contributions entered on line 58 will be used by the California Fund for Senior Citizens which supports the work of the California Senior Legislature and direct services to seniors. The California Senior Legislature is non-partisan, volunteer, grass roots body of seniors 60 years of age or older, elected by their peers. The California Senior Legislature has been instrumental in creating and steering senior legislation through the regular legislature; legislation, such as: Alzheimer Studies and Research; Adult Day Health Care Centers; nutrition centers; respite care; long term care; the funding and broadening of In Home Support Services; programs to abolish abuse of seniors; skilled nursing facility reforms; and many more. All donations over those needed to carry out the California Senior Legislature’s work, will be distributed for direct services to needy seniors.

Line 59 – Rare and Endangered Species Preservation Program

Contributions entered on line 59 will help to protect and conserve California’s many threatened and endangered species and the wild lands that they need to survive, for the enjoyment of you and future generations of Californians.

Line 60 – State Children’s Trust Fund for the Prevention of Child Abuse

Contributions entered on line 60 will be used to fund programs for the prevention, intervention and treatment of child abuse and neglect.

Line 61 – California Breast Cancer Research Fund

Contributions entered on line 61 will be used to conduct research relating to the prevention, screening, cure and treatment of breast cancer.

Line 62 – Veterans Memorial Account

Contributions entered on line 62 will be used to pay for the construction, improvement, maintenance or repair of a veterans memorial and an information program about the memorial.

Line 63 – California Firefighters’ Memorial Fund

Contributions entered on line 63 will be used for the construction of a memorial to California firefighters on the grounds of the State Capitol.

Line 64 – California Public School Library Protection Fund

Contributions entered on line 64 will be expended for the purchase of books and library media technology through grants awarded to schools.

Line 65 – California Olympic Training Fund

Contributions entered on line 65 will be used by the United States Olympic Committee for Olympic activities in California.

Line 66 & Line 67 – California Election Campaign Fund

A contribution of \$1, \$5, \$10 or \$25 may be made to these political parties: American Independent, Democratic, Green, Libertarian, Peace and Freedom or Republican. If you contribute, enter the party name and contribution amount on line 66.

If your spouse contributes to the California Election Campaign Fund, enter the name of the political party and contribution amount on line 67. You and your spouse may each contribute a maximum of \$25.

Line 68 – Total Contributions

Add line 56 through line 67. Enter the result on line 68. If you show an amount on line 54, you must subtract the amount you contribute from the amount of overpaid tax. If you show an amount on line 55, you must add your total contributions to your tax due.

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 69 – Refund or No Amount Due

If you did not enter an amount on line 68, enter the amount from line 54 on line 69. This is the amount that will be refunded to you. If this amount is less than \$1, you must attach a written request to your Form 540NR requesting the refund.

If you entered an amount on line 68, subtract it from the amount on line 54. If the result is zero or more, enter it on line 69. Then skip to the instructions for line 71.

If the result is less than zero, your contributions are more than your overpaid tax available on line 54. In this

case, do not enter an amount on line 69. Instead, enter the result on line 69 and see the instructions for line 70.

Line 70 – Amount You Owe

If you did not enter an amount on line 68, enter the amount from line 55 on line 70. This is the amount you owe with your Form 540NR.

If you entered an amount on line 68, add that amount to the amount on line 55. Enter the result on line 70. This is the amount you owe with your Form 540NR.

- Make your check or money order payable to the "Franchise Tax Board" for the full amount you owe. Do not send cash. Be sure to write your social security number and "1994 Form 540NR" on your check or money order.
- Attach the check or money order to the front of your Form 540NR in the area below the words "Step 3, Exemptions."
- Make sure the check or money order is not covered up by your Form(s) W-2 or any other items.

A penalty may be imposed for a check returned by your bank for insufficient funds. To avoid a late filing penalty, file your return by the due date even if you cannot pay the amount you owe.

Do not include any estimated tax payment in your check or money order. Mail any estimated tax payment in a separate envelope from the one you use to pay the amount you owe with Form 540NR.

**Step 12
Interest &
Penalties**

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

Note: Do not reduce the amount on line 52 or increase the amount on line 55 by any penalty or interest amounts.

Line 71 – Interest and Penalties

Enter on line 71 the amount of interest and penalties included in your payment.

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 10 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 16, 1995. The minimum penalty for filing a return more than 60 days late is \$100 or 100% of the balance of tax 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 72 – Underpayment of Estimated Tax

If line 55 is \$100 or more and more than 20% of the tax shown on line 43 (excluding the tax on lump-sum distributions on line 26), or you underpaid your 1994 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 any 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, enter the amount of the penalty on line 72 and check the box at line 72. You must complete and attach the form if you claim a waiver or use the annualized income installment method or pay tax according to the schedule for farmers and fishermen.

Line 73 – 1995 Tax Forms

If your Form 540NR is prepared by someone else, or if you do not need forms mailed to you next year, check the box at line 73.

**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.

Paid Preparer's Information

If you pay a person to prepare your Form 540NR, that person must sign and complete the area at the bottom of Side 2. A paid preparer must give you two copies of your return: one to file with the Franchise Tax Board, and one to keep for your records.

Attach Your Form(s) W-2 to Your Form 540NR

You must attach Copy 2 of all Form(s) W-2, W2-G, 1099-R, 592-B, 594 and 597 to the front of your Form 540NR.

If you do not receive your Form(s) W-2 by January 31, 1995, contact your employer. Only your employer can give you or correct a Form W-2. If you cannot get a copy of your Form(s) 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 the back cover for information about how to order form FTB 3525.

If you forget to send your Form(s) W-2 with your Form 540NR, do not send it until the Franchise Tax Board requests the Form(s) W-2 from you.

Mailing Addresses

To get a refund, or if you have no amount due, mail your return to:

**Franchise Tax Board
P.O. Box 942840
Sacramento, CA 94240-0000**

If you owe money, mail your return to:

**Franchise Tax Board
P.O. Box 942867
Sacramento, CA 94267-0001**

Keep a Copy of Your California Income Tax Return

The Franchise Tax Board 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 the date the return is filed. Keep a copy of your return and the records which 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 original or replacement property.

Additional Information

Volunteer Income Tax Assistance

At more than 1,500 sites throughout California, trained volunteers provide free assistance to low-income, senior, disabled and non-English speaking 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. Call the Franchise Tax Board at 1-800-852-5711 to find the volunteer assistance location nearest you.

Deceased Taxpayers

A final return must be filed for a person who died in 1994 if a return normally would be required. The administrator or executor, if one is appointed, or beneficiary must file the return. Please print or type "deceased" and the date of death next to the taxpayer's name at the top of the Form 540NR.

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 1994. Indicate next to your signature that you are the surviving spouse.

You may also file a joint return with an administrator or executor acting in 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.

Amended Returns

If you discover that you made an error on your California income tax return after it was filed, use Form 540X, Amended Individual Income Tax Return, to correct and make any changes to your return.

Changes To Federal Returns

If your federal income tax return is examined and changed by the Internal Revenue Service (IRS) and you owe additional tax, you must report these changes to the Franchise Tax Board 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 make any changes to your California income tax return already filed, or you may send copies of the federal changes to: Franchise Tax Board, Audit Section, P.O. Box 1998, Rancho Cordova, CA 95741-1998, Attn: RAR/VOL.

Regardless of which method you use to notify the Franchise Tax Board, you must include a copy of the final federal determination along with all underlying data and schedules that the federal adjustment was based on. Get FTB Pub. 1008, Federal Tax Adjustments and Your Notification Responsibilities to California, for more information.

Note: You do not have to file Form 540X if the changes do not affect your California tax liability.

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.

Change of Address?

If you move during the year, notify the Franchise Tax Board of your new address by calling 1-800-852-5711.

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.

California Sales And Use Tax

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 had purchased the goods in California, you owe use tax on your purchase if the out-of-state retailer did not collect the tax.

Your tax liability may be calculated by multiplying the sales tax rate in your area times the cost of the goods purchased. You may pay your tax liability by sending payment to the State Board of Equalization, P.O. Box 942879, Sacramento, CA 94279-0001, with a brief letter listing your name, address, a description and cost of the goods purchased, and the name and address of the out-of-state retailer.

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 a question as to which goods are taxable, or want information about obtaining a seller's permit, you should contact the nearest office of the State Board of Equalization. You can find the address and telephone number in the State Government section of your telephone directory.

Rounding to Whole Dollars

Please round cents to the nearest whole dollar on your return and schedules. To do so, drop amounts under 50 cents and increase amounts from 50 to 99 cents to the next whole dollar. For example, \$123.49 becomes \$123 and \$725.50 becomes \$726.

If you do round, do so for all amounts. However, if you have to add two or more amounts to figure the amount to enter on a line, include cents when adding and only round the total. Example: You want to add \$5,000.55 and \$18,500.73. On the appropriate line you would enter \$23,501 (\$5,000.55 + \$18,500.73 = \$23,501.28).

Requesting a Copy of Your Tax Return

The Franchise Tax Board 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 Return from Taxpayer. In most cases, there is a \$5 fee for each copy 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 district office that assisted you in completing your return. To order form FTB 3516, see the paragraph on ordering forms on page 31 of this booklet.

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 Divisions 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—Director, Document Processing Bureau; 2) Auditing of returns—Director, General Tax Audit Bureau; and 3) Collection of monies—Director, Collection Bureau. The address is:

**Franchise Tax Board
P.O. Box 942840
Sacramento, CA 94240-1040.**

Telephone:
Within the United States . . . 1-800-852-5711
Outside the United States . . . 1-916-845-6500

California Nonresident or Part-Year Resident Income Tax Return 1994

FORM

540NR

Step 1 Name and Address	Use the California mailing label. Otherwise, please print or type. Fiscal year beginning _____, 1994, ending _____, 19		Do Not Use These Spaces	
	Your first name and initial _____	Last name _____		Your social security number _____
	If joint return, also give spouse's name and initial _____	Last name _____		Spouse's social security number _____
	Present home address — number and street including P.O. Box or rural route _____			Apt. no. _____
City, town or post office, state and ZIP code _____			P	
			AC	
			A	
			R	
			RP	

Step 2
Filing Status

Check 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). If the qualifying person is a child but not your dependent, enter child's name here. _____

5 Qualifying widow(er) with dependent child. Enter year spouse died 19____.

Step 3
Exemptions

Do not enter dollar amounts in the boxes.

Attach check or money order here.

6 If your parent(s), or someone else, can claim you (or your spouse, if married) as a dependent on their return, check the box here. If no one can claim you as a dependent, go to line 7. If you checked the box on line 6 and the box on line 1, skip line 7 through line 10 and enter -0- on line 11. If you checked the box on line 6 and a box on line 2, line 3, line 4 or line 5, see page 3 ● 6

7 Personal: If you checked box 1, 3 or 4 above, enter 1. If you checked box 2 or 5, enter 2 7

8 Blind: If you or your spouse is visually impaired, enter 1. If both are visually impaired, enter 2 8

9 Senior: If you or your spouse is 65 or older, enter 1. If both are 65 or older, enter 2 ● 9

10 Dependents: Enter name and relationship. Do not include yourself, your spouse or the person you listed on line 4. _____
 _____ Enter the total number of dependents 10

11 Add line 7 through line 10. These are your total exemptions 11

Step 4
Taxable Income

Attach copy of your Form(s) W-2, W-2G, 1099-R, 592-B, 594 and 597 here.

12 Total California wages from all your Form(s) W-2, box 17 ● 12

13 Federal adjusted gross income (AGI) from your Form 1040, line 31, your Form 1040A, line 16, your Form 1040EZ, line 3 or your Form 1040NR, line 31 13

14 California adjustments – subtractions. Enter the amount from Schedule CA (540NR), line 31, column B ● 14
Caution: If the amount on Schedule CA (540NR), line 31, column B is a negative number, see page 26.

15 Subtract line 14 from line 13. If less than zero, enter the result in parentheses. See page 4 15

16 California adjustments – additions. Enter the amount from Schedule CA (540NR), line 31, column C ● 16
Caution: If the amount on Schedule CA (540NR), line 31, column C is a negative number, see page 26.

17 Adjusted gross income from all sources. Combine line 15 and line 16 ● 17

18 Enter the **larger of:** { • Your **standard deduction** (see page 4), **OR** • Your **itemized deductions** (from Schedule CA (540NR), line 38). } ● 18

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

Step 5
Tax

20 California adjusted gross income from Schedule CA (540NR), line 31, column E ● 20

22 Tax on the amount shown on line 19. Check if from:
 Tax Table Tax Rate Schedule FTB 3800 or FTB 3803 ● 22
Caution: If under age 14 and you have more than \$1,200 of investment income, read the line 22 instructions on page 4 to see if you must attach form FTB 3800.

23 Exemption credits.
Caution: See the line 23 instructions before making an entry on this line.
 Check if from: line 23 instructions line 23 worksheet or Schedule P (540NR) ● 23

24 Subtract line 23 from line 22. If less than zero, enter -0- 24

25a Ratio. Enter the ratio from Schedule CA (540NR), line 32 25a

25b Multiply line 24 by the ratio on line 25a. 25b

26 Tax. Check if from Schedule G-1 and from form FTB 5870A ● 26

27 Add line 25b and line 26. Continue to Side 2 ● 27

Step 6 Credits	28	Amount from Side 1, line 27		28
	31	Credit for joint custody head of household. See page 6	● 31	
	32	Credit for dependent parent. See page 6	● 32	
	33	Credit for senior head of household. See page 6	● 33	
	36	Add line 31 through line 33. Multiply the total by the ratio on Side 1, line 25a	● 36	
	37	Enter credit name _____ code no. _____ and amount	▶ 37	
	38	Enter credit name _____ code no. _____ and amount	▶ 38	
	39	Enter credit name _____ code no. _____ and amount	▶ 39	
	40	To claim more than three credits, see page 6	● 40	
	42	Add line 36 through line 40. These are your total credits	42	
43	Subtract line 42 from line 28. If less than zero, enter -0-	43		

Step 7 Other Taxes	44	Alternative minimum tax. Attach Schedule P (540NR)	● 44	
	45	Other taxes and credit recapture from forms FTB 3518, FTB 3501, FTB 3805P, FTB 3805Z or FTB 3806. See page 8	● 45	
	46	Add line 43 through line 45. This is your total tax	● 46	

Step 8 Payments	47	California income tax withheld. Enter the total from your 1994 Form(s) W-2, W-2G, 1099-MISC, 1099-R, 592-B, 594 or 597	■ 47	
	48	1994 California estimated tax and amount applied from your 1993 return. Include the amount from form FTB 3519 or Schedule(s) K-1 (541) and K-1 NR (568)	■ 48	
	50	Excess California SDI (or VPD) withheld. See page 9	■ 50	
	51	Add line 47 through line 50. These are your total payments	51	
	52	If line 51 is more than line 46, subtract line 46 from line 51. This is your overpaid tax	52	

Step 9 Overpaid Tax or Tax Due	53	Amount of line 52 you want applied to your 1995 estimated tax	■ 53	
	54	Subtract line 53 from line 52. This is the amount of overpaid tax available this year	■ 54	
	55	If line 51 is less than line 46, subtract line 51 from line 46. This is your tax due	55	
	56	Contribution to California Seniors Special Fund. See page 10	● 56	

Step 10 Contributions	You may make a contribution of \$1 or more to:			
	57	Alzheimer's Disease/Related Disorders Fund	● 57	00
	58	California Fund for Senior Citizens	● 58	00
	59	Rare and Endangered Species Preservation Program	● 59	00
	60	State Children's Trust Fund for the Prevention of Child Abuse	● 60	00
	61	California Breast Cancer Research Fund	● 61	00
	62	Veterans Memorial Account	● 62	00
	63	California Firefighters' Memorial Fund	● 63	00
	64	California Public School Library Protection Fund	● 64	00
	65	California Olympic Training Fund	● 65	00
	California Election		} 66 Your political party _____ amount (\$25 max) ▶ 66	00
	Campaign Fund			67 Spouse's political party _____ amount (\$25 max) ▶ 67
	68	Add line 56 through line 67. These are your total contributions	● 68	

Step 11 Refund or Amount You Owe	69	Subtract line 68 from line 54. You have a REFUND or NO AMOUNT DUE . Mail your return to: Franchise Tax Board, P.O. Box 942840, Sacramento, CA 94240-0000	■ 69	
	70	Add line 55 and line 68. This is the AMOUNT YOU OWE . Make a check or money order payable to "Franchise Tax Board" for the full amount you owe. Write your social security number and "1994 Form 540NR" on it. Attach it to the front of your Form 540NR and mail to: Franchise Tax Board, P.O. Box 942867, Sacramento, CA 94267-0001	■ 70	

Step 12 Interest and Penalties	71	Interest, late return penalties and late payment penalties	71	
	72	Underpayment of estimated tax. If form FTB 5805 or 5805F is attached, check here	<input type="checkbox"/> ■ 72	
	73	If you do not need California income tax forms mailed to you next year, check here	● 73 <input type="checkbox"/>	

Sign Here 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

Important: You must attach a copy of your federal return to this return. It is unlawful to forge a spouse's signature.	Your signature	Spouse's signature (if filing joint, both must sign)	Date
	X	X	
	Signature of paid preparer (declaration of preparer is based on all information of which preparer has any knowledge)		Preparer's SSN/FEIN
	Firm's name (or yours if self-employed)	Firm's address	

California Nonresident or Part-Year Resident Income Tax Return 1994

FORM

540NR

Step 1 Name and Address	Use the California mailing label. Otherwise, please print or type. Fiscal year beginning _____, 1994, ending _____, 19		Do Not Use These Spaces	
	Your first name and initial _____	Last name _____		Your social security number _____
	If joint return, also give spouse's name and initial _____	Last name _____		Spouse's social security number _____
	Present home address — number and street including P.O. Box or rural route _____			Apt. no. _____
City, town or post office, state and ZIP code _____			<input type="checkbox"/> P <input type="checkbox"/> AC <input type="checkbox"/> A <input type="checkbox"/> R <input type="checkbox"/> RP	

Step 2
Filing Status

Check 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). If the qualifying person is a child but not your dependent, enter child's name here. _____

5 Qualifying widow(er) with dependent child. Enter year spouse died 19____.

Step 3
Exemptions

Do not enter dollar amounts in the boxes.

Attach check or money order here.

6 If your parent(s), or someone else, can claim you (or your spouse, if married) as a dependent on their return, check the box here. If no one can claim you as a dependent, go to line 7. If you checked the box on line 6 and the box on line 1, skip line 7 through line 10 and enter -0- on line 11. If you checked the box on line 6 and a box on line 2, line 3, line 4 or line 5, see page 3 ● 6

7 Personal: If you checked box 1, 3 or 4 above, enter 1. If you checked box 2 or 5, enter 2 7

8 Blind: If you or your spouse is visually impaired, enter 1. If both are visually impaired, enter 2 8

9 Senior: If you or your spouse is 65 or older, enter 1. If both are 65 or older, enter 2 ● 9

10 Dependents: Enter name and relationship. Do not include yourself, your spouse or the person you listed on line 4. _____
 _____ Enter the total number of dependents 10

11 Add line 7 through line 10. These are your total exemptions 11

Step 4
Taxable Income

Attach copy of your Form(s) W-2, W-2G, 1099-R, 592-B, 594 and 597 here.

12 Total California wages from all your Form(s) W-2, box 17 ● 12

13 Federal adjusted gross income (AGI) from your Form 1040, line 31, your Form 1040A, line 16, your Form 1040EZ, line 3 or your Form 1040NR, line 31 13

14 California adjustments – subtractions. Enter the amount from Schedule CA (540NR), line 31, column B ● 14
Caution: If the amount on Schedule CA (540NR), line 31, column B is a negative number, see page 26.

15 Subtract line 14 from line 13. If less than zero, enter the result in parentheses. See page 4 15

16 California adjustments – additions. Enter the amount from Schedule CA (540NR), line 31, column C ● 16
Caution: If the amount on Schedule CA (540NR), line 31, column C is a negative number, see page 26.

17 Adjusted gross income from all sources. Combine line 15 and line 16 ● 17

18 Enter the $\left\{ \begin{array}{l} \bullet \text{ Your standard deduction (see page 4), OR} \\ \bullet \text{ Your itemized deductions (from Schedule CA (540NR), line 38).} \end{array} \right\}$ ● 18

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

Step 5
Tax

20 California adjusted gross income from Schedule CA (540NR), line 31, column E ● 20

22 Tax on the amount shown on line 19. Check if from:
 Tax Table Tax Rate Schedule FTB 3800 or FTB 3803 ● 22
Caution: If under age 14 and you have more than \$1,200 of investment income, read the line 22 instructions on page 4 to see if you must attach form FTB 3800.

23 Exemption credits.
Caution: See the line 23 instructions before making an entry on this line.
 Check if from: line 23 instructions line 23 worksheet or Schedule P (540NR) ● 23

24 Subtract line 23 from line 22. If less than zero, enter -0- 24

25a Ratio. Enter the ratio from Schedule CA (540NR), line 32 25a

25b Multiply line 24 by the ratio on line 25a. 25b

26 Tax. Check if from Schedule G-1 and from form FTB 5870A ● 26

27 Add line 25b and line 26. Continue to Side 2 ● 27

Step 6 Credits	28	Amount from Side 1, line 27		28
	31	Credit for joint custody head of household. See page 6	● 31	
	32	Credit for dependent parent. See page 6	● 32	
	33	Credit for senior head of household. See page 6	● 33	
	36	Add line 31 through line 33. Multiply the total by the ratio on Side 1, line 25a	● 36	
	37	Enter credit name _____ code no. _____ and amount	▶ 37	
	38	Enter credit name _____ code no. _____ and amount	▶ 38	
	39	Enter credit name _____ code no. _____ and amount	▶ 39	
	40	To claim more than three credits, see page 6	● 40	
	42	Add line 36 through line 40. These are your total credits	42	
43	Subtract line 42 from line 28. If less than zero, enter -0-	43		

Step 7 Other Taxes	44	Alternative minimum tax. Attach Schedule P (540NR)	● 44	
	45	Other taxes and credit recapture from forms FTB 3518, FTB 3501, FTB 3805P, FTB 3805Z or FTB 3806. See page 8	● 45	
	46	Add line 43 through line 45. This is your total tax	● 46	

Step 8 Payments	47	California income tax withheld. Enter the total from your 1994 Form(s) W-2, W-2G, 1099-MISC, 1099-R, 592-B, 594 or 597	■ 47	
	48	1994 California estimated tax and amount applied from your 1993 return. Include the amount from form FTB 3519 or Schedule(s) K-1 (541) and K-1 NR (568)	■ 48	
	50	Excess California SDI (or VPD) withheld. See page 9	■ 50	
	51	Add line 47 through line 50. These are your total payments	51	
	52	If line 51 is more than line 46, subtract line 46 from line 51. This is your overpaid tax	52	

Step 9 Overpaid Tax or Tax Due	53	Amount of line 52 you want applied to your 1995 estimated tax	■ 53	
	54	Subtract line 53 from line 52. This is the amount of overpaid tax available this year	■ 54	
	55	If line 51 is less than line 46, subtract line 51 from line 46. This is your tax due	55	

Step 10 Contributions	56	Contribution to California Seniors Special Fund. See page 10 You may make a contribution of \$1 or more to:	● 56	
	57	Alzheimer's Disease/Related Disorders Fund	● 57	00
	58	California Fund for Senior Citizens	● 58	00
	59	Rare and Endangered Species Preservation Program	● 59	00
	60	State Children's Trust Fund for the Prevention of Child Abuse	● 60	00
	61	California Breast Cancer Research Fund	● 61	00
	62	Veterans Memorial Account	● 62	00
	63	California Firefighters' Memorial Fund	● 63	00
	64	California Public School Library Protection Fund	● 64	00
	65	California Olympic Training Fund	● 65	00
		California Election } 66 Your political party _____ amount (\$25 max) ▶ 66		00
		Campaign Fund } 67 Spouse's political party _____ amount (\$25 max) ▶ 67		00
	68	Add line 56 through line 67. These are your total contributions	● 68	

Step 11 Refund or Amount You Owe	69	Subtract line 68 from line 54. You have a REFUND or NO AMOUNT DUE . Mail your return to: Franchise Tax Board, P.O. Box 942840, Sacramento, CA 94240-0000	■ 69	
	70	Add line 55 and line 68. This is the AMOUNT YOU OWE . Make a check or money order payable to "Franchise Tax Board" for the full amount you owe. Write your social security number and "1994 Form 540NR" on it. Attach it to the front of your Form 540NR and mail to: Franchise Tax Board, P.O. Box 942867, Sacramento, CA 94267-0001	■ 70	

Step 12 Interest and Penalties	71	Interest, late return penalties and late payment penalties	71	
	72	Underpayment of estimated tax. If form FTB 5805 or 5805F is attached, check here	<input type="checkbox"/> ■ 72	
	73	If you do not need California income tax forms mailed to you next year, check here	● 73 <input type="checkbox"/>	

Sign Here 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

Important: You must attach a copy of your federal return to this return. It is unlawful to forge a spouse's signature.	Your signature	Spouse's signature (if filing joint, both must sign)	Date
	X	X	
	Signature of paid preparer (declaration of preparer is based on all information of which preparer has any knowledge)		Preparer's SSN/FEIN
	Firm's name (or yours if self-employed)	Firm's address	

California Adjustments —
Nonresidents or Part-Year Residents

1994

CA (540NR)

Important: Attach this schedule directly behind Form 540NR.

Name(s) as shown on return Social security number

Part I Residency Information. You must complete all lines that apply to you and your spouse.

During 1994: 1 I was in the military and I was: domiciled in (enter state) ... stationed in (enter state or country) ...
Before 1994: 7 I was a California resident for the period of (enter dates) ... 8 I entered California on (enter date) ... 9 I left California on (enter date) ...

Part II Income Adjustment Schedule

Table with 5 columns: A Federal Amounts, B Subtractions, C Additions, D Total Amounts Using CA Law, E CA Amounts. Rows include 7 Wages, salaries, tips, etc.; 8 Taxable interest income; 9 Dividend income; 10 State tax refund; 11 Alimony received; 12 Business income or (loss); 13 Capital gain or (loss); 14 Other gains or (losses); 15 IRA distribution (a); 16 Pensions and annuities (a); 17 Rents, royalties, partnerships, estates, trusts, etc.; 18 Farm income or (loss); 19 Unemployment compensation; 20 Social security benefits (a); 21 Other income (a-f); 22a Total.

Income Adjustment Schedule		A	B	C	D	E
Section B — Adjustments to Income		Federal Amounts (taxable amounts from your federal return)	Subtractions See instructions	Additions See instructions	Total Amounts Using CA Law (subtract column B from column A; add column C to the result)	CA Amounts (income earned or received as CA resident and income earned or received from CA sources as a nonresident)
22b	Enter totals from Schedule CA (540NR), Side 1, line 22a, column A through column E	22b				
23a	Your IRA deduction	a				
b	Spouse's IRA deduction	b				
24	Moving expenses. Complete form FTB 3596	24				
25	One-half of self-employment tax	25				
26	Self-employed health insurance deduction	26				
27	Keogh or SEP deduction	27				
28	Penalty on early withdrawal of savings	28				
29	Alimony paid. Enter recipient's: SSN _____ - _____ Last name _____	29				
30	Add line 23a through line 29 in each column, A through E	30				
31	Total. Subtract line 30 from line 22b in each column, A through E	31				
32	Ratio. Divide line 31, column E by line 31, column D. Enter the result as a decimal carried to four places here and on Form 540NR, line 25a. Note: This number may be greater than 1.0000					

Part III Adjustments to Federal Itemized Deductions

33	Federal itemized deductions. Add the amounts on federal Schedule A (Form 1040), lines 4, 9, 14, 18, 19, 26, 27 and 28 (or Schedule A (Form 1040NR), lines 3, 7, 8, 15 and 17)	33	_____
34	State and local income taxes from federal Schedule A (Form 1040), line 5 (or Schedule A (Form 1040NR), line 3)	34	_____
35	Subtract line 34 from line 33	35	_____
36	Other adjustments including moving expenses. See instructions. Specify _____	36	_____
37	Combine line 35 and line 36	37	_____
38	California itemized deductions Is your federal AGI (Form 540NR, line 13) more than the amount shown below for your filing status? \$107,464 if single or married filing separate \$161,196 if head of household \$214,929 if married filing joint or qualifying widow(er) NO. Transfer the amount on line 37 to line 38. YES. Complete the Itemized Deduction Worksheet in the instructions to figure the amount to enter on line 38.		
	Is the amount you entered on line 38 more than your standard deduction below? \$2,431 if single or married filing separate \$4,862 if married filing joint, head of household or qualifying widow(er). YES. Transfer the amount on line 38 to Form 540NR, line 18. NO. Enter your standard deduction on Form 540NR, line 18	38	_____

California Adjustments —
Nonresidents or Part-Year Residents

1994

CA (540NR)

Important: Attach this schedule directly behind Form 540NR.

Name(s) as shown on return Social security number

Part I Residency Information. You must complete all lines that apply to you and your spouse.

During 1994:
1 I was in the military and I was: domiciled in (enter state)
stationed in (enter state or country)
2 I became a California resident (enter state of prior residence and date of move)
3 I became a nonresident (enter new state of residence and date of move)
4 I was a nonresident of California the entire year (enter state or country of residence)
5 The number of days I spent in California (for any purpose) is:
6 I owned a home/property in California (enter "yes" or "no")
Before 1994:
7 I was a California resident for the period of (enter dates)
8 I entered California on (enter date)
9 I left California on (enter date)

Part II Income Adjustment Schedule

Table with 5 columns: A Federal Amounts, B Subtractions, C Additions, D Total Amounts Using CA Law, E CA Amounts. Rows include wages, interest, dividends, state tax refund, alimony, business income, capital gain, IRA distribution, pensions, rents, farm income, unemployment, social security, and other income.

Income Adjustment Schedule		A	B	C	D	E
Section B — Adjustments to Income		Federal Amounts (taxable amounts from your federal return)	Subtractions See instructions	Additions See instructions	Total Amounts Using CA Law (subtract column B from column A; add column C to the result)	CA Amounts (income earned or received as CA resident and income earned or received from CA sources as a nonresident)
22b	Enter totals from Schedule CA (540NR), Side 1, line 22a, column A through column E	22b				
23a	Your IRA deduction	a				
b	Spouse's IRA deduction	b				
24	Moving expenses. Complete form FTB 3596	24				
25	One-half of self-employment tax	25				
26	Self-employed health insurance deduction	26				
27	Keogh or SEP deduction	27				
28	Penalty on early withdrawal of savings	28				
29	Alimony paid. Enter recipient's: SSN _____ Last name _____	29				
30	Add line 23a through line 29 in each column, A through E	30				
31	Total. Subtract line 30 from line 22b in each column, A through E	31				
32	Ratio. Divide line 31, column E by line 31, column D. Enter the result as a decimal carried to four places here and on Form 540NR, line 25a. Note: This number may be greater than 1.0000					

Part III Adjustments to Federal Itemized Deductions

33	Federal itemized deductions. Add the amounts on federal Schedule A (Form 1040), lines 4, 9, 14, 18, 19, 26, 27 and 28 (or Schedule A (Form 1040NR), lines 3, 7, 8, 15 and 17)	33	
34	State and local income taxes from federal Schedule A (Form 1040), line 5 (or Schedule A (Form 1040NR), line 3)	34	
35	Subtract line 34 from line 33	35	
36	Other adjustments including moving expenses. See instructions. Specify _____	36	
37	Combine line 35 and line 36	37	
38	California itemized deductions Is your federal AGI (Form 540NR, line 13) more than the amount shown below for your filing status? \$107,464 if single or married filing separate \$161,196 if head of household \$214,929 if married filing joint or qualifying widow(er) NO. Transfer the amount on line 37 to line 38. YES. Complete the Itemized Deduction Worksheet in the instructions to figure the amount to enter on line 38.	38	Is the amount you entered on line 38 more than your standard deduction below? \$2,431 if single or married filing separate \$4,862 if married filing joint, head of household or qualifying widow(er). YES. Transfer the amount on line 38 to Form 540NR, line 18. NO. Enter your standard deduction on Form 540NR, line 18

Instructions for Schedule CA (540NR)

These instructions are based on the Internal Revenue Code (IRC) as of **January 1, 1993**, and the California Revenue and Taxation Code (R&TC).

General Information

Differences Between California and Federal Law

In general, California did not conform its law to changes made to the Internal Revenue Code (IRC) by the federal Revenue Reconciliation Act of 1993 (Public Law 103-66). California legislation during 1994 did adopt specific provisions of the 1993 federal changes and the provisions are specifically identified when appropriate. All other references in these instructions are to the IRC as it existed on January 1, 1993.

Purpose of This Form

The purpose of this form is to compute the ratio of your **California adjusted gross income (AGI) to total AGI from all sources using California law**; and to adjust your federal itemized deductions for California law. The parts of the ratio are defined as follows:

- **Total AGI from all sources using California law** is all of your income from all sources, including income from inside and outside California. You compute it by adjusting federal AGI for the differences between federal and California law.
- **California AGI** is the portion of total AGI from all sources which is subject to California tax. It includes:
 - all income from all sources (inside and outside California) for any part of the year during which you were a California resident; and
 - all income from California sources while you were a nonresident of California.

Once you have computed the ratio, you will transfer it to the Form 540NR to determine your California nonresident or part-year resident tax liability.

Specific Line Instructions for PART I Residency Information

Answer all the questions in this part for you and your spouse. If a question does not apply, please enter N/A on the line for the answer. It may be helpful to get FTB Pub. 1031, Guidelines for Determining Resident Status, for more information.

Line 1 – I was in the military

If either spouse was in the military, your state of domicile is generally the state where you were living when you first entered the military.

Line 5 – The number of days I spent in CA

The total number of days in California should include all days in California for any purpose including residency, business and vacation.

Specific Line Instructions for PART II Income Adjustment Schedule

Column A – Federal Amounts

Enter all taxable amounts shown on your federal return on the corresponding lines in column A.

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 (or on your Form 1040A, line 7 through line 13b; your Form 1040EZ, line 1 and line 2; or your Form 1040NR, line 8 through line 21 for the same types of income).

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).

If you used Form 1040A, refer to line 11a and line 13a. If you used Form 1040NR, refer to line 16a and line 17a.

Line 22a – Total

Add the amounts on line 7 through line 21. Enter the total on this line. This number should be the same as the amount on your federal Form 1040, line 22 (or your Form 1040A, line 14; or your Form 1040EZ, line 3; or your Form 1040NR, line 23).

Line 22b – Balance Carried Forward

Enter on line 22b the total from Side 1, line 22a, column A.

Line 23a through Line 29

Enter the same amounts you entered on your federal Form 1040, line 23a through line 29 (or your Form 1040A, line 15a and line 15b; or your Form 1040NR, line 24 through line 29).

Line 30 – Add line 23a through line 29. This amount should be the same as the amount on your federal Form 1040, line 30 (or your Form 1040A, line 15c; or your Form 1040NR, line 30). However, if you made any of the adjustments described in the instructions for federal Form 1040, line 30, enter the amount from Form 1040, line 30 on this line.

Line 31 – Total

Subtract line 30 from line 22b. This amount should be the same as the amount on your federal Form 1040, line 31 (or your Form 1040A, line 16; or your Form 1040EZ, line 3; or your Form 1040NR, line 31).

Column B and Column C – Subtractions and Additions

Use these columns to enter subtractions and additions to federal amounts in column A that are necessary because of the differences between California and federal law. Enter all amounts as positive numbers unless instructed otherwise.

Do not use these columns to make adjustments for income earned outside of California during periods of nonresidency. Make those adjustments in column E.

Note: If you are a nonresident alien, use column B and column C to include income from all sources, even if you were not required to report it on your federal return. California does not have special rules limiting total AGI from all sources to U.S. source or effectively connected income of nonresident aliens.

You may need to get one of the following publications in order to complete column B and column C:

- 1001, Supplemental Guidelines to California Adjustments;
- 1005, Pension and Annuity Guidelines; or
- 1032, Tax Information for Military Personnel.

If you want to order a publication or form mentioned in these instructions, 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 kinds of income listed below, make no entry on this line in either column B or column C.

Moving expense reimbursement — California includes in income the amount of reimbursement for moving expense from your employer. Enter the reimbursement amount in column C. The reimbursement amount should be shown on Form W-2, box 13 (code P). Get and complete form FTB 3596, California Moving Expense, to figure the California moving expense deduction.

Active duty military pay — Special rules apply to active duty military taxpayers. Get FTB Pub. 1032 for more information.

Ride-sharing benefits or sick pay received under the Federal Insurance Contributions Railroad and Retirement Act — California excludes from income the ridesharing benefits and the sick pay received under Federal Insurance Contributions Railroad and Retirement Act. 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.

Line 8 – Taxable Interest Income

If you did not receive any of the kinds of income listed below, make no entry on this line in either column B or column C. Otherwise, follow the instructions below.

Enter in column B, the interest that you received from:

- United States saving bonds;
- United States treasury bills;
- any other bonds or obligations of the United States and its territories;

Get FTB Pub. 1001 if you received interest income from sources listed below.

- loans made in an enterprise zone, program area or the Los Angeles Revitalization Zone (LARZ);
- merchant marine construction fund deposits by ship contractors;
- original issue discount (OID) for debt instruments issued in 1985 and 1986;
- original issue discount (OID) for bonds issued by Poland;
- distributions of pre-1987 earnings from S corporations; and
- items listed above passed through to you from S corporations, trusts, partnerships or limited liability companies.

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. California law is the same as federal law for these types of interest income.

Enter in column C, the interest you identified as tax-exempt interest on your federal Form 1040 (or 1040A), line 8b; or Form 1040NR, line 9b 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
- bonds listed above if the interest was passed through to you from S corporations, trusts, partnerships or limited liability companies.

Line 9 – Dividend Income

In most cases there will be no difference between the amount of dividends you reported in column A and the amount to report using California law. However, certain mutual funds are qualified to pay "exempt-interest dividends" if more than 50% of their assets consist of tax-exempt government obligations. The portion of the dividend income that is tax-exempt will be shown on your annual statement.

If the California exempt-interest amount is more than the federal exempt-interest amount, enter the difference in column B.

Get FTB Pub. 1001 if you received dividend income from:

- noncash patronage dividends from farmers' cooperatives or mutual associations;
- a federal S corporation that is a California C corporation; or
- a controlled foreign corporation.

Line 10 – State Tax Refund

California does not tax the state income tax refund you received in 1994.

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 which was not included in your federal income, enter the alimony on this line in column C. Otherwise, make no adjustment on this line.

Line 12 – Business Income or (Loss)

Any differences between the amount of business income or loss you reported in column A and the amount you report under California law generally result from the difference between California and federal law relating to depreciation. Use form FTB 3885A, Depreciation and Amortization Adjustments — Individuals, to figure the depreciation adjustment. If any of your business activities is a passive activity which produces a loss, complete form FTB 3801, Passive Activity Loss Limitations (PALS), to compute the passive activity loss allowable under California law.

If any of the assets used in your business activities were placed into service **after** 1/1/87 and none of them are affected by PALS or by any other adjustments, make no entry on this line in column B or column C.

If any of the assets used in your business activities were placed into service **before** 1/1/87 and none of them are affected by PALS or by any other adjustments, use form FTB 3885A to compute any depreciation or amortization difference.

If you are engaged in more than one business activity, use a separate form FTB 3885A to report the adjustments for each activity. If your calculations on form FTB 3885A result in:

- an entry on line 6a or line 10a, enter that amount on line 12, column B; or
- an entry on line 6b or line 10b, enter that amount on line 12, column C.

Get FTB Pub. 1001 if you reported any of the following:

- income from a business, trade or profession carried on within California that is an integral part of a unitary business carried on both within and without the state;
- basis adjustment to business property resulting from moves into California;
- basis adjustments for sales and use tax credit for property used in an enterprise zone, program area, or (LARZ);

- basis adjustments for reduced recovery periods for fruitbearing grapevines replaced in a California vineyard on or after 1/1/92 as a result of phylloxera infestation;
- expenditures for tertiary injectants;
- business expense deduction related to a business located in an enterprise zone, program area or LARZ;
- business expense deduction for payments made to a club which restricts membership or use of its services or facilities on the basis of age, sex, race, religion, color, ancestry or national origin;
- employer wage expense deduction for federal Jobs Credit;
- research expense deduction;
- accounting for long-term contracts entered into after 10/13/87 and after 6/20/88; or
- pro rata share of income received from a controlled foreign corporation by a U.S. shareholder.

Line 13 – Capital Gain or (Loss)

Generally, there are no differences between the amount of capital gain or loss in column A and the amount to report using California law.

If you do not have any of the items listed below, make no entry on this line in either column B or column C.

Use Schedule D, California Gain or Loss Adjustment, if you have differences from:

- basis differences 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 limited liability companies;
- distributed capital gain dividends;
- capital gain election for lump-sum distributions;
- gain from involuntary conversion of capital assets not held for business profit; and
- capital loss carryover from your 1993 California Schedule D.

For more information about the following, get FTB Pub. 1001:

- 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 specified entities maintaining housing for low income residents;
- gain on certain vessels transferred to and exchanged with the Maritime Administration or realized in connection with construction of new vessels;
- gain on the sale of personal residence where depreciation was allowable;
- undistributed capital gain for regulated investment company (RIC) shareholders;

- gain or loss on the sale property inherited before January, 1987;
- capital loss carrybacks; and
- rollover gain from the sale of publicly traded securities into specialized small business investment companies.

Line 14 – Other Gains or (Losses)

Generally, there are no differences between the amount of other gains or losses reported in column A and the amount to report using California law.

If there is no difference, make no entry on this line in column B or column C.

However, the California basis of your other assets may be different than 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, to figure the difference between the amount to report using California law and the amount you reported in column A.

Line 15 – IRA Distribution

Generally, the amount of income taxed for IRA distributions is the same using both California and federal law. If there is no difference, make no entry on this line in column B or column C.

However, there may be significant differences in the taxable amount 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 contributions were different from your federal contributions 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.

Line 16 – Pensions and Annuities

Generally, the amount of income taxed for fully taxable pension or annuity distributions is the same using both California and federal law. If there is no difference, make no entry on this line in column B or column C.

However, if you received certain railroad retirement benefits or partially taxable distributions from a pension plan, you may need to make the adjustments described below.

California does not tax railroad retirement benefits. 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 the dates 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.

Get FTB Pub. 1001 if you received income from a living benefit contract.

For more information, get FTB Pub. 1005 if you elected to use the three-year rule for reporting an employer-sponsored pension or annuity (for annuity starting dates after 7/1/86 and before 1/1/87).

Line 17 – Rents, Royalties, Partnerships, Estates, Trusts, etc.

Any differences between the amount of income or loss you reported in column A and the amount you report under California law generally result from the difference between California and federal law relating to depreciation. Use form FTB 3885A, Depreciation and Amortization Adjustments — Individuals, to figure the depreciation adjustment. If any of your business activities is a passive activity which produced a loss, complete form FTB 3801, Passive Activity Loss Limitations (PALS), to compute the passive activity loss allowable under California law.

Note: Limited liability companies (LLCs) that are classified as partnerships for California purposes are subject to the same rules as other partnerships. LLCs report distributions to their members on Schedule K-1 (568), Member's Share of Income, Deductions, Credits, etc.; or Schedule K-1 NR (568), Nonresident Member's Share of Income, Deductions, Credits, etc.

If any of the assets used in your business activities were placed into service after 1/1/87 and none of them are affected by PALS or by any other adjustments, make no entry on this line in column B or column C.

If any of the assets used in your business activities were placed into service before 1/1/87, and none of them are affected by PALS or by any other adjustments, use form FTB 3885A to compute any depreciation or amortization difference.

If your calculations on form FTB 3885A result in:

- an entry on line 6a or line 10a, enter that amount on line 17, column B; or
- an entry on line 6b or line 10b, enter that amount on line 17, column C.

Get FTB Pub. 1001 if you reported any of the following items on your federal return:

- accumulation distribution to beneficiaries for which the trust was not required to pay California tax because the beneficiary's interest was contingent; or
- accumulation distribution to beneficiaries for which the required California taxes have not been paid by the trust.

Line 18 – Farm Income or Loss

Any differences between the amount of income or loss you report in column A and the amount you report under California law generally result from the difference between Califor-

nia and federal law relating to depreciation. Use form FTB 3885A, Depreciation and Amortization Adjustments — Individuals, to figure the depreciation adjustment. If any of your farm business activities is a passive activity which produced a loss, complete form FTB 3801, Passive Activity Loss Limitations (PALS), to compute the passive activity loss and adjustments allowable under California law.

If any of the assets used in your farm business activities were placed into service after 1/1/87 and none of them are affected by PALS or by any other adjustments, make no entry on this line in column B or column C.

If any of the assets used in your farm business activities were placed into service before 1/1/87, or are affected by any other adjustments, use form FTB 3885A to compute any depreciation or amortization difference.

If your calculations on form FTB 3885A result in:

- an entry on line 6a or line 10a, enter that amount on line 18, column B; or
- an entry on line 6b or line 10b, enter that amount on line 18, column C.

Get FTB Pub. 1001 for more information about the following items:

- basis adjustments to business property resulting from moves into California;
- basis adjustments for sales and use tax credit for property used in an enterprise zone, program area, or LARZ;
- basis adjustments for reduced recovery periods for fruitbearing grapevines replaced in a California vineyard on or after 1/1/92 as a result of phylloxera infestation;
- expenditures for tertiary injectants;
- business expense deduction related to a business located in an enterprise zone, program area or LARZ;
- business expense deduction for payments made to a club which restricts membership or use of its services or facilities on the basis of age, sex, race, religion, color, ancestry or national origin;
- employer wage expense deduction for federal Jobs Credit;
- research expense deduction;
- percentage depletion for oil and gas wells and geothermal deposits;
- accounting for long-term contracts entered into after 10/13/87 and after 6/20/88; and
- pro rata share of income received from a controlled foreign corporation by a U.S. shareholder.

Line 19 – Unemployment Compensation

California does not tax unemployment compensation. Enter on line 19, column B, the amount of unemployment compensation shown on line 19, column A.

Line 20 – Social Security Benefits

California does not tax social security benefits. Enter in column B the amount of these benefits shown on this line in column A.

Line 21 – Other Income

a. California Lottery Winnings

California does not tax winnings from the California Lottery. 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 in this amount. They are taxable to California.

b. Disaster Loss Carryover from FTB 3805V

If you have a California disaster loss carryover from your 1993 form FTB 3805V, Net Operating Loss Carryovers and Disaster Loss Deductions, enter that amount as a positive number in column B.

c. Federal NOL from Form 1040, line 21

If the amount on line 21 in column A includes a federal net operating loss (NOL), enter the amount of the federal NOL as a positive number in column C. Get form FTB 3805V to figure the NOL amount allowable under California law.

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 NOL for California and enter it as a positive number in column B.

Note: If your 1993 form FTB 3805V has both disaster loss carryovers and NOL carryovers, you will need to separately state these two amounts. See line 21b, above, for disaster loss carryovers.

e. NOL from FTB 3805Z or FTB 3806

If you have an NOL on form:

- FTB 3805Z, Enterprise Zone/Program Area Deduction and Credit Summary, line 8b; or
- FTB 3806, Los Angeles Revitalization Zone Deduction and Credit Summary, line 4b;

enter in column B the total NOL figured on these forms.

f. Other (describe)

Reward from a crime hotline. Enter in column B the amount of a reward authorized by a government agency which 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. Enter in column B the amount you received from your employer, other than salaries or wages, for participating in an alternative transportation method and that is included in the amount on line 21 in

column A. For more information refer to R&TC Section 17149.

Federal foreign income or housing exclusion. Enter in column C the amount deducted from federal income on Form 1040, line 21.

Lump sum payment from a living benefit contract. Enter in column B the income from such a contract that you included in the amount on line 21 in column A.

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.

Cost Share Payments (forest landowners). Enter in column B the amount of cost share payments received from the Department of Forestry and Fire Protection or from the Department of Agriculture only if these payments were included in federal Schedule F (Form 1040), line 6b.

Line 22a – Total

Add line 7 through line 21f in column B and column C. Enter the totals on this line.

Line 22b – Balance Carried Forward

Enter the totals from Side 1, line 22a, column B and column C.

Line 23a, line 23b and line 27 — IRA, Keogh, or SEP Deduction

Generally, the IRA, Keogh or SEP deduction allowable under California law and federal law are the same.

If there is no difference, make no entry on this line in column B or column C. Go to the next line.

Differences in the amount of IRA, Keogh or SEP deduction you can claim may occur if there is a difference between your federal self-employment income and your California self-employment income.

If the allowable deductible amount for California is less than the amount you reported in column A, enter the difference on the appropriate line (23a, 23b or 27), column B.

If the allowable deductible amount for California is more than the amount you reported in column A, enter the difference on the appropriate line (23a, 23b or 27) in column C.

Line 24 – Moving Expense

California law is not the same as federal law for figuring your moving expense deduction. Enter in column B the amount shown in column A, if any. Get form FTB 3596, California Moving Expense, to figure the amount to deduct under California law in Part III.

Line 29 – 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 you did not deduct alimony on your federal return, enter the amount you paid on this line in column C.

Line 30 – Add line 23a through line 29 in column B and column C. Enter the totals on this line in the appropriate columns.

Line 31 – Total

Subtract line 30 from line 22b in column B and column C. Enter the totals on this line in the appropriate column.

Column D – Total Amounts Using California Law

Use this column to show the amount remaining after adjustments (subtractions or additions).

For each line, 7 through 31:

1. Subtract the amounts in column B from the amounts in column A.
2. Add the amounts in column C to the result of the calculation made in 1 above.
3. Enter the total in column D.

Note: If you made any adjustments on line 21 in column B or column C:

- Step 1 Add the adjustments in column B, lines a, b, d, e and f.
- Step 2 Subtract that total from line 21, column A.
- Step 3 Add the adjustments in column C, lines c and f.
- Step 4 Add the that total to the result of Step 2; then continue as instructed above for all other lines.

Column E – California Amounts

In this column, identify the portion of the amounts in column D that you earned from all sources while you were a California resident and that you received from sources within California while you were a nonresident.

At the end of this column you will compute the ratio of the California adjusted gross income (line 31, column E) to the adjusted gross income from all sources (line 31, column D). You will use the resulting decimal amount to determine your tax.

Refer to instructions for each line below to be sure you are including the right amounts.

Line 7 – Wages, Salaries, Tips, Etc.

Enter all wages, salaries, tips and other compensation you earned while you were a California resident. And, if you performed work in California while you were a nonresident, include the portion of wages or other compensation earned in California. Include moving expense reimbursement for moves into California.

Line 8 – Taxable Interest Income

Enter the portion of interest reported in column D which you received while you were a California resident. For more information, refer to the instructions for column B and column C, line 8.

Line 9 – Dividend Income

Enter all dividends you received while you were a California resident. Include dividends you received from federal S corporations that have elected to be treated as C corporations for California tax purposes.

Line 11 – Alimony Received

Enter that part of the alimony shown in column A that you received while you were a California resident.

Line 12 – Business Income or (Loss)

Enter the total amount of profits or losses (computed using California law) from all businesses you conducted while you were a California resident **and** from all businesses you conducted in California while you were a nonresident of California. If you reported PALS activities in column D, and only some of them must be included in column E, complete a second form FTB 3801 to compute the California portion of any PALS.

If, as a nonresident you derived income from a business, trade or profession conducted partly within California and partly outside California, only income from the part conducted within California is considered California source income which you must report on this line in column E. If, there is any business relationship between the parts within and outside California (flow of goods, etc.), you must apportion the gross income or loss from the entire business. To determine the portion of income or loss from businesses engaged in multistate activities that you must report in column E, use the apportionment formula described in Schedule R, Apportionment and Allocation of Income.

Line 13 – Capital Gain or (Loss)

Complete Schedule D, California Capital Gain or Loss Adjustment, to report all transactions that occurred while you were a California resident **and** those transactions that were related to property located in California while you were a nonresident. Complete Schedule D through line 8 only. Enter the gain from line 7 or the loss from line 8, whichever applies, on this line in column E.

Line 15 – IRA Distributions (Taxable Amount)

Enter the taxable portion of individual retirement arrangement (IRA) distributions you received while you were a California resident **and** the amount you received while you were a nonresident of California that was derived from contributions made and earnings accrued while you were a California resident. This includes regular distributions, premature distributions and any other money or property you received from your IRA account or annuity. Get FTB Pub. 1005 for more information.

Line 16 – Pensions and Annuities (Taxable Amount)

Enter the portion of your taxable pension and annuity income you received while you were a resident of California **and** the amount you

received while you were a nonresident of California that was derived from services performed in California. Get FTB Pub. 1005 for more information.

Line 17 – Rents, Royalties, Partnerships, S Corporations, Estates, Trusts, Etc.

Enter the portion of your 1994 profit or loss (shown in column D) from rents, royalties, partnerships, S corporations, LLCs, estates and trusts. Include all profits and losses that occurred while you were a California resident **and** profits or losses related to property or business located in California while you were a nonresident of California. If you reported PALS activities in column D, and only some of them must be included in column E, complete a second form FTB 3801 to compute the California portion of any PALS.

If you owned an interest in a partnership, an LLC or an S corporation and you were a California resident on the last day of the partnership's or LLC's taxable year or S corporation's income year, you must include your entire share of the partnership, LLC or S corporation profit or loss.

If you were a nonresident of California on the last day of the partnership's or LLC's taxable year or S corporation's income year, include the portion of your share of the profit or loss derived from California sources.

Your Schedule K-1 (565, 100S or 541) or Schedule K-1 NR (568 or 565) will indicate the amount of partnership, S corporation, estate, LLC or trust profit or loss that you must include on this line in column E.

Line 18 – Farm Income or (Loss)

Enter the portion of your profit or loss (shown in column D) from all farming activity while you were a California resident **and** for farming activity conducted in California while you were a nonresident of California. If you have PALS activities in column D, and only some of them must be included in column E, complete a second form FTB 3801 to figure the California portion of any PALS.

Line 21 – Other Income

Enter the portion of the amount shown in column D derived from California sources or which you accrued, earned or received while you were a California resident that is not included in line 7 through line 18 of column E.

Line 22a – Total

Add line 7 through line 21 in column E. Enter the result on this line.

Line 22b – Balance Carried Forward

Enter the total from Side 1, line 22a, column E on this line.

Line 23a, line 23b and line 27 – IRA, Keogh and SEP Deduction

The amount of the California deduction for IRA, Keogh and SEP deductions is the same as the federal deduction. However, the deduction may be limited by your California com-

penation or by your California self-employment income.

Example: A taxpayer moved into California on December 1. She made contributions to her IRA and claimed a deduction of \$2,000 on her federal return. Her California wages were \$500. Her allowable deduction is the lesser of:

- the federal deduction of \$2,000; or
- the California compensation of \$500.

Therefore, she must enter \$500 on line 23a of column E. She will have made no entry in column B or column C.

Keogh and SEP deductions are limited to a percentage of the federal deduction. That percentage is the ratio of:

Self-employment income reported in column E

_____ = California ratio
Total self-employment income reported in column D

Get FTB Pub. 1005 for further information.

Line 25 – One-half of Self-Employment Income

If you claimed a deduction in column A for self-employment tax paid, your California deduction is limited to a percentage of the federal deduction. That percentage is the ratio of:

Self-employment income reported in column A from all sources while a CA resident	+	Self-employment income reported in column A from CA sources while a nonresident
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_____ = California ratio
Total self-employment income reported in column A

Line 26 – Self-employed Health Insurance Deduction

If you claimed a deduction in column A for payments you made to a health insurance plan while you were self-employed, your California deduction is limited to a percentage of the federal deduction. That percentage is the ratio of:

Total self-employment income reported in column E

_____ = California ratio
Total self-employment income reported in column D

Line 28 – Penalty on Early Withdrawal of Savings

Enter the interest penalties charged to you while you were a California resident.

Line 29 – Alimony Paid

Enter alimony or separate maintenance payments that you made while you were a California resident.

Line 30 – Add line 23a through line 29 in column E. Enter the result on this line.

Line 31 – Total

Subtract line 30 from line 22b in column E. This is your California adjusted gross income (AGI). Enter the result on this line. Also enter this amount on Form 540NR, Side 1, line 20.

Line 32 – Ratio

Ratio = $\frac{\text{California AGI}}{\text{Total AGI from all sources}}$

Divide the amount on line 31, column E by the amount on line 31, column D. Enter the result on this line and on Form 540NR, Side 1, line 25a.

Also, transfer the amounts from:

- line 31, column B to Form 540NR, Side 1, line 14;
- line 31, column C to Form 540NR, Side 1, line 16; and
- line 31, column E to Form 540NR, Side 1, line 20.

Caution: If the amount on Schedule CA (540NR) line 31:

- column B is a negative number, do not transfer it to Form 540NR, line 14. Instead, transfer the amount as a positive number to Form 540NR, line 16; or
- column C is a negative number, do not transfer it to Form 540NR, line 16. Instead, transfer the amount as a positive number to Form 540NR, line 14.

Specific Line Instructions for PART III Adjustments to Federal Itemized Deductions

Line 33 – Federal Itemized Deductions

Enter the total amount of itemized deductions from your federal Schedule A, line 4, 9, 14, 18, 19, 26, 27 and 28 or Schedule A (Form 1040NR), line 3, 7, 8, 15 and 17.

Important: If you did not itemize deductions on your federal tax return, and if you want to itemize on your California tax return, you must first complete federal Schedule A even though you did not file it with your federal tax return. You must also attach a copy of the federal Schedule A to your California tax return.

Line 34 – Local, State and Foreign Income Taxes

Enter the amount from federal Schedule A, line 5 and only the portion relating to foreign income taxes from line 8, or Schedule A (Form 1040NR), line 3. Be sure to include state disability insurance (SDI), limited partnership tax and income or franchise tax paid by S corporations.

Line 36 – Other Adjustments

Moving Expenses

If you had moving expenses in 1994, get and complete form FTB 3596, California Moving Expense, to figure the amount to enter on line 36.

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 540NR, enter the amount of the adoption cost credit claimed as a negative number on line 36.

Mortgage Interest Credit

If you reduced your federal miscellaneous itemized deductions by the amount of your mortgage interest credit (from federal Form 8396, Mortgage Interest Credit), be sure to increase your California itemized deductions by the same amount. Enter the amount of your federal mortgage interest credit as a positive number on line 36.

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 36.

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 36.

Employee Business Expense

If you had assets placed in service before January 1, 1987, and if you completed federal Form 2106, Employee Business Expenses, also complete Form 2106 using California amounts. Compare line 10 on both Forms 2106. If the federal amount is larger, enter the difference as a negative number on line 36. If the California amount is larger, enter the difference as a positive number on line 36.

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 36.

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 36.

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 36.

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, line 23, as a negative number on line 36.

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 36.

Line 38 – California Itemized Deductions

If your federal adjusted gross income on Form 540NR, line 13 is more than the amounts shown for your filing status below, use the worksheet below to figure the amount you may deduct:

- \$107,464 if single or married filing separate;
- \$161,196 if head of household; or
- \$214,929 if married filing joint or qualifying widow(er).

Itemized Deductions Worksheet

1. Enter the amount from Schedule CA (540NR), line 37 _____
2. Using California amounts, add the amounts on federal Schedule A (Form 1040), line 4, line 13 and line 19 plus any gambling losses included on line 28 (or on Schedule A (Form 1040NR), line 8 plus any investment interest expense included on line 11 and any gambling losses included on line 17). _____
3. Subtract line 2 from line 1. **Note:** If the result is zero or less, **stop.** Enter the amount from line 1 above on Schedule CA (540NR), line 38 _____
4. Multiply line 3 by 80% (.80) _____
5. Enter the amount from Form 540NR, line 13 _____
6. Enter the amount shown above for your filing status. _____
7. Subtract line 6 from line 5. **Note:** If the result is zero or less, **stop.** Enter the amount from line 1 above on Schedule CA (540NR), line 38 _____
8. Multiply line 7 by 6% (.06) _____
9. Compare the amounts on line 4 and line 8 above. Enter the smaller of the two amounts here _____
10. Total itemized deductions. Subtract line 9 from line 1. Enter the result here and on Schedule CA (540NR), line 38 _____

1994

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General Information

If you cannot file your California tax return by April 17, 1995, you will be allowed an automatic six month extension without filing a written request. To qualify for the automatic extension, you must file your tax return by October 16, 1995. However, to avoid late payment penalties and interest, you must pay 100% of your tax liability by April 17.

Complete the tax payment worksheet below to see if you owe additional tax. If you owe additional tax but cannot file by April 17, use the payment voucher below to mail in your payment. Your payment must be made by April 17. Do not send in the voucher if no payment is due.

Save your completed worksheet along with the copy of your return for your tax records.

If the amount on line 1 is more than the amount on line 3, then your tax is more than your payments and credits. You have tax due. Subtract the amount on line 3 from the amount on line 1. Enter the tax due on line 4 and on the form FTB 3519 voucher below and mail only the voucher portion with your payment to:

Franchise Tax Board
P.O. Box 942867
Sacramento, CA 94267-0051

Penalties and Interest

Remember, an extension of time to file your return is not an extension of time to pay your tax. If you fail to pay your total tax liability by April 17, a late payment penalty plus interest will be added to your tax due. If after April 17, 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 estimated tax with another form FTB 3519 voucher. If you do not file your return by October 16, you will be assessed a late filing penalty plus interest.

How to Complete the Tax Payment Worksheet

Line 1 - Enter the total tax you expect to owe. This is the amount you expect to enter on Form 540EZ, line 23; Form 540A, line 23; Form 540, line 37; or Form 540NR, line 46.

Line 2 - Enter your total payments and credits on the following lines:

- 2a - California income tax withheld
2b - California estimated tax payments and amount applied from your 1993 return
2c - Other payments and credits including any tax payments made with any previous 1994 form FTB 3519 voucher.

Line 3 - Add line 2a through line 2c. Enter the result on line 3.

Line 4 - Tax due. If the amount on line 3 is more than the amount on line 1, then your payments and credits are more than your tax. You have no tax due. DO NOT SEND THE PAYMENT VOUCHER. You will automatically qualify for an extension. Your return when filed by October 16, will verify that you qualified for the extension.

Taxpayers Residing or Traveling Abroad

If you are living or traveling outside the United States on April 17, the deadline to file your return and pay the tax is June 15, 1995. Interest will accrue from the original due date (April 15) 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 15, 1995. To avoid any late payment penalties, you must pay 100% of your tax liability by June 15. When filing your return, be sure to attach a statement to the front indicating that you were "abroad on April 17, 1995."

TAX PAYMENT WORKSHEET FOR YOUR RECORDS

Table with 4 main rows for tax calculations (Total tax, Payments and credits, Total tax payments, Tax due) and sub-rows for credits (2a, 2b, 2c). Includes a shaded area for payments and credits.

CUT HERE

TAXABLE YEAR

Payment Voucher for Automatic Extension for Individuals

CALIFORNIA FORM

1994

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Form with fields for: Your first name and initial, Last name, Your social security number, Spouse's social security number, Present home address, Apt. no., City, town or post office, state and ZIP code.

IF NO PAYMENT IS DUE, DO NOT FILE THIS FORM

Amount of payment

MAIL TO: Franchise Tax Board
P.O. Box 942867
Sacramento, CA 94267-0051

(Calendar year - Due April 17, 1995)

Payment amount field: \$ [] 00

Payment Voucher 5

For Privacy Act Notice, see form FTB 1131

1994 California Tax Table

Use the Tax Table below if your taxable income on Form 540NR, line 19 is \$50,000 or less.
 Use the Tax Rate Schedule on page 30 if your taxable income on Form 540NR, line 19 is more than \$50,000.

To Find Your Tax:

- Read down the column labeled "If Your Taxable Income Is . . ." to find the range that includes your taxable income.
 - 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 Separately) 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	83	65	65	12,951	13,050	249	166	166
51	150	1	1	1	6,551	6,650	85	66	66	13,051	13,150	253	168	168
151	250	2	2	2	6,651	6,750	87	67	67	13,151	13,250	257	170	170
251	350	3	3	3	6,751	6,850	89	68	68	13,251	13,350	261	172	172
351	450	4	4	4	6,851	6,950	91	69	69	13,351	13,450	265	174	174
451	550	5	5	5	6,951	7,050	93	70	70	13,451	13,550	269	176	176
551	650	6	6	6	7,051	7,150	95	71	71	13,551	13,650	273	178	178
651	750	7	7	7	7,151	7,250	97	72	72	13,651	13,750	277	180	180
751	850	8	8	8	7,251	7,350	99	73	73	13,751	13,850	281	182	182
851	950	9	9	9	7,351	7,450	101	74	74	13,851	13,950	285	184	184
951	1,050	10	10	10	7,451	7,550	103	75	75	13,951	14,050	289	186	186
1,051	1,150	11	11	11	7,551	7,650	105	76	76	14,051	14,150	293	188	188
1,151	1,250	12	12	12	7,651	7,750	107	77	77	14,151	14,250	297	190	190
1,251	1,350	13	13	13	7,751	7,850	109	78	78	14,251	14,350	301	192	192
1,351	1,450	14	14	14	7,851	7,950	111	79	79	14,351	14,450	305	194	194
1,451	1,550	15	15	15	7,951	8,050	113	80	80	14,451	14,550	309	196	196
1,551	1,650	16	16	16	8,051	8,150	115	81	81	14,551	14,650	313	198	198
1,651	1,750	17	17	17	8,151	8,250	117	82	82	14,651	14,750	317	200	200
1,751	1,850	18	18	18	8,251	8,350	119	83	83	14,751	14,850	321	202	202
1,851	1,950	19	19	19	8,351	8,450	121	84	84	14,851	14,950	325	204	204
1,951	2,050	20	20	20	8,451	8,550	123	85	85	14,951	15,050	329	206	206
2,051	2,150	21	21	21	8,551	8,650	125	86	86	15,051	15,150	333	208	208
2,151	2,250	22	22	22	8,651	8,750	127	87	87	15,151	15,250	337	210	210
2,251	2,350	23	23	23	8,751	8,850	129	88	88	15,251	15,350	341	212	212
2,351	2,450	24	24	24	8,851	8,950	131	89	89	15,351	15,450	345	214	214
2,451	2,550	25	25	25	8,951	9,050	133	90	90	15,451	15,550	349	216	216
2,551	2,650	26	26	26	9,051	9,150	135	91	91	15,551	15,650	353	218	218
2,651	2,750	27	27	27	9,151	9,250	137	92	92	15,651	15,750	357	220	220
2,751	2,850	28	28	28	9,251	9,350	139	93	93	15,751	15,850	361	222	222
2,851	2,950	29	29	29	9,351	9,450	141	94	94	15,851	15,950	365	224	224
2,951	3,050	30	30	30	9,451	9,550	143	96	96	15,951	16,050	369	226	226
3,051	3,150	31	31	31	9,551	9,650	145	98	98	16,051	16,150	373	228	228
3,151	3,250	32	32	32	9,651	9,750	147	100	100	16,151	16,250	377	230	230
3,251	3,350	33	33	33	9,751	9,850	149	102	102	16,251	16,350	381	232	232
3,351	3,450	34	34	34	9,851	9,950	151	104	104	16,351	16,450	385	234	234
3,451	3,550	35	35	35	9,951	10,050	153	106	106	16,451	16,550	389	236	236
3,551	3,650	36	36	36	10,051	10,150	155	108	108	16,551	16,650	393	238	238
3,651	3,750	37	37	37	10,151	10,250	157	110	110	16,651	16,750	397	240	240
3,751	3,850	38	38	38	10,251	10,350	159	112	112	16,751	16,850	401	242	242
3,851	3,950	39	39	39	10,351	10,450	161	114	114	16,851	16,950	405	244	244
3,951	4,050	40	40	40	10,451	10,550	163	116	116	16,951	17,050	409	246	246
4,051	4,150	41	41	41	10,551	10,650	165	118	118	17,051	17,150	413	248	248
4,151	4,250	42	42	42	10,651	10,750	167	120	120	17,151	17,250	417	250	250
4,251	4,350	43	43	43	10,751	10,850	169	122	122	17,251	17,350	421	252	252
4,351	4,450	44	44	44	10,851	10,950	171	124	124	17,351	17,450	425	254	254
4,451	4,550	45	45	45	10,951	11,050	173	126	126	17,451	17,550	429	256	256
4,551	4,650	46	46	46	11,051	11,150	175	128	128	17,551	17,650	433	258	258
4,651	4,750	47	47	47	11,151	11,250	177	130	130	17,651	17,750	438	260	260
4,751	4,850	49	48	48	11,251	11,350	181	132	132	17,751	17,850	444	262	262
4,851	4,950	51	49	49	11,351	11,450	185	134	134	17,851	17,950	450	264	264
4,951	5,050	53	50	50	11,451	11,550	189	136	136	17,951	18,050	456	266	266
5,051	5,150	55	51	51	11,551	11,650	193	138	138	18,051	18,150	462	268	268
5,151	5,250	57	52	52	11,651	11,750	197	140	140	18,151	18,250	468	270	270
5,251	5,350	59	53	53	11,751	11,850	201	142	142	18,251	18,350	474	272	272
5,351	5,450	61	54	54	11,851	11,950	205	144	144	18,351	18,450	480	274	274
5,451	5,550	63	55	55	11,951	12,050	209	146	146	18,451	18,550	486	276	276
5,551	5,650	65	56	56	12,051	12,150	213	148	148	18,551	18,650	492	278	278
5,651	5,750	67	57	57	12,151	12,250	217	150	150	18,651	18,750	498	280	280
5,751	5,850	69	58	58	12,251	12,350	221	152	152	18,751	18,850	504	282	282
5,851	5,950	71	59	59	12,351	12,450	225	154	154	18,851	18,950	510	284	284
5,951	6,050	73	60	60	12,451	12,550	229	156	156	18,951	19,050	516	286	286
6,051	6,150	75	61	61	12,551	12,650	233	158	158	19,051	19,150	522	288	288
6,151	6,250	77	62	62	12,651	12,750	237	160	160	19,151	19,250	528	290	290
6,251	6,350	79	63	63	12,751	12,850	241	162	162	19,251	19,350	534	292	292
6,351	6,450	81	64	64	12,851	12,950	245	164	164	19,351	19,450	540	294	294

The tax table is continued on page 29.

1994 California Tax Table — Continued

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	546	296	296	26,451	26,550	1,005	518	518	33,451	33,550	1,598	798	891
19,551	19,650	552	298	298	26,551	26,650	1,013	522	522	33,551	33,650	1,607	802	897
19,651	19,750	558	300	300	26,651	26,750	1,021	526	526	33,651	33,750	1,617	806	903
19,751	19,850	564	302	302	26,751	26,850	1,029	530	530	33,751	33,850	1,626	810	909
19,851	19,950	570	304	304	26,851	26,950	1,037	534	534	33,851	33,950	1,635	814	915
19,951	20,050	576	306	306	26,951	27,050	1,045	538	538	33,951	34,050	1,644	818	921
20,051	20,150	582	308	308	27,051	27,150	1,053	542	542	34,051	34,150	1,654	822	927
20,151	20,250	588	310	310	27,151	27,250	1,061	546	546	34,151	34,250	1,663	826	933
20,251	20,350	594	312	312	27,251	27,350	1,069	550	550	34,251	34,350	1,672	830	939
20,351	20,450	600	314	314	27,351	27,450	1,077	554	554	34,351	34,450	1,682	834	945
20,451	20,550	606	316	316	27,451	27,550	1,085	558	558	34,451	34,550	1,691	838	951
20,551	20,650	612	318	318	27,551	27,650	1,093	562	562	34,551	34,650	1,700	842	957
20,651	20,750	618	320	320	27,651	27,750	1,101	566	566	34,651	34,750	1,710	846	963
20,751	20,850	624	322	322	27,751	27,850	1,109	570	570	34,751	34,850	1,719	850	969
20,851	20,950	630	324	324	27,851	27,950	1,117	574	574	34,851	34,950	1,728	854	975
20,951	21,050	636	326	326	27,951	28,050	1,125	578	578	34,951	35,050	1,737	858	981
21,051	21,150	642	328	328	28,051	28,150	1,133	582	582	35,051	35,150	1,747	862	987
21,151	21,250	648	330	330	28,151	28,250	1,141	586	586	35,151	35,250	1,756	866	993
21,251	21,350	654	332	332	28,251	28,350	1,149	590	590	35,251	35,350	1,765	870	999
21,351	21,450	660	334	334	28,351	28,450	1,157	594	594	35,351	35,450	1,775	875	1,005
21,451	21,550	666	336	336	28,451	28,550	1,165	598	598	35,451	35,550	1,784	881	1,011
21,551	21,650	672	338	338	28,551	28,650	1,173	602	602	35,551	35,650	1,793	887	1,017
21,651	21,750	678	340	340	28,651	28,750	1,181	606	606	35,651	35,750	1,803	893	1,023
21,751	21,850	684	342	342	28,751	28,850	1,189	610	610	35,751	35,850	1,812	899	1,031
21,851	21,950	690	344	344	28,851	28,950	1,197	614	615	35,851	35,950	1,821	905	1,039
21,951	22,050	696	346	346	28,951	29,050	1,205	618	621	35,951	36,050	1,830	911	1,047
22,051	22,150	702	348	348	29,051	29,150	1,213	622	627	36,051	36,150	1,840	917	1,055
22,151	22,250	708	350	350	29,151	29,250	1,221	626	633	36,151	36,250	1,849	923	1,063
22,251	22,350	714	352	352	29,251	29,350	1,229	630	639	36,251	36,350	1,858	929	1,071
22,351	22,450	720	354	354	29,351	29,450	1,237	634	645	36,351	36,450	1,868	935	1,079
22,451	22,550	726	358	358	29,451	29,550	1,245	638	651	36,451	36,550	1,877	941	1,087
22,551	22,650	732	362	362	29,551	29,650	1,253	642	657	36,551	36,650	1,886	947	1,095
22,651	22,750	738	366	366	29,651	29,750	1,261	646	663	36,651	36,750	1,896	953	1,103
22,751	22,850	744	370	370	29,751	29,850	1,269	650	669	36,751	36,850	1,905	959	1,111
22,851	22,950	750	374	374	29,851	29,950	1,277	654	675	36,851	36,950	1,914	965	1,119
22,951	23,050	756	378	378	29,951	30,050	1,285	658	681	36,951	37,050	1,923	971	1,127
23,051	23,150	762	382	382	30,051	30,150	1,293	662	687	37,051	37,150	1,933	977	1,135
23,151	23,250	768	386	386	30,151	30,250	1,301	666	693	37,151	37,250	1,942	983	1,143
23,251	23,350	774	390	390	30,251	30,350	1,309	670	699	37,251	37,350	1,951	989	1,151
23,351	23,450	780	394	394	30,351	30,450	1,317	674	705	37,351	37,450	1,961	995	1,159
23,451	23,550	786	398	398	30,451	30,550	1,325	678	711	37,451	37,550	1,970	1,001	1,167
23,551	23,650	792	402	402	30,551	30,650	1,333	682	717	37,551	37,650	1,979	1,007	1,175
23,651	23,750	798	406	406	30,651	30,750	1,341	686	723	37,651	37,750	1,989	1,013	1,183
23,751	23,850	804	410	410	30,751	30,850	1,349	690	729	37,751	37,850	1,998	1,019	1,191
23,851	23,950	810	414	414	30,851	30,950	1,357	694	735	37,851	37,950	2,007	1,025	1,199
23,951	24,050	816	418	418	30,951	31,050	1,365	698	741	37,951	38,050	2,016	1,031	1,207
24,051	24,150	822	422	422	31,051	31,150	1,375	702	747	38,051	38,150	2,026	1,037	1,215
24,151	24,250	828	426	426	31,151	31,250	1,384	706	753	38,151	38,250	2,035	1,043	1,223
24,251	24,350	834	430	430	31,251	31,350	1,393	710	759	38,251	38,350	2,044	1,049	1,231
24,351	24,450	840	434	434	31,351	31,450	1,403	714	765	38,351	38,450	2,054	1,055	1,239
24,451	24,550	846	438	438	31,451	31,550	1,412	718	771	38,451	38,550	2,063	1,061	1,247
24,551	24,650	853	442	442	31,551	31,650	1,421	722	777	38,551	38,650	2,072	1,067	1,255
24,651	24,750	861	446	446	31,651	31,750	1,431	726	783	38,651	38,750	2,082	1,073	1,263
24,751	24,850	869	450	450	31,751	31,850	1,440	730	789	38,751	38,850	2,091	1,079	1,271
24,851	24,950	877	454	454	31,851	31,950	1,449	734	795	38,851	38,950	2,100	1,085	1,279
24,951	25,050	885	458	458	31,951	32,050	1,458	738	801	38,951	39,050	2,109	1,091	1,287
25,051	25,150	893	462	462	32,051	32,150	1,468	742	807	39,051	39,150	2,119	1,097	1,295
25,151	25,250	901	466	466	32,151	32,250	1,477	746	813	39,151	39,250	2,128	1,103	1,303
25,251	25,350	909	470	470	32,251	32,350	1,486	750	819	39,251	39,350	2,137	1,109	1,311
25,351	25,450	917	474	474	32,351	32,450	1,496	754	825	39,351	39,450	2,147	1,115	1,319
25,451	25,550	925	478	478	32,451	32,550	1,505	758	831	39,451	39,550	2,156	1,121	1,327
25,551	25,650	933	482	482	32,551	32,650	1,514	762	837	39,551	39,650	2,165	1,127	1,335
25,651	25,750	941	486	486	32,651	32,750	1,524	766	843	39,651	39,750	2,175	1,133	1,343
25,751	25,850	949	490	490	32,751	32,850	1,533	770	849	39,751	39,850	2,184	1,139	1,351
25,851	25,950	957	494	494	32,851	32,950	1,542	774	855	39,851	39,950	2,193	1,145	1,359
25,951	26,050	965	498	498	32,951	33,050	1,551	778	861	39,951	40,050	2,202	1,151	1,367
26,051	26,150	973	502	502	33,051	33,150	1,561	782	867	40,051	40,150	2,212	1,157	1,375
26,151	26,250	981	506	506	33,151	33,250	1,570	786	873	40,151	40,250	2,221	1,163	1,383
26,251	26,350	989	510	510	33,251	33,350	1,579	790	879	40,251	40,350	2,230	1,169	1,391
26,351	26,450	997	514	514	33,351	33,450	1,589	794	885	40,351	40,450	2,240	1,175	1,399

The tax table is continued on page 30.

1994 California Tax Table — Continued

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	2,249	1,181	1,407	43,951	44,050	2,574	1,391	1,710	47,451	47,550	2,900	1,601	2,036
40,551	40,650	2,258	1,187	1,415	44,051	44,150	2,584	1,397	1,720	47,551	47,650	2,909	1,607	2,045
40,651	40,750	2,268	1,193	1,423	44,151	44,250	2,593	1,403	1,729	47,651	47,750	2,919	1,613	2,054
40,751	40,850	2,277	1,199	1,431	44,251	44,350	2,602	1,409	1,738	47,751	47,850	2,928	1,619	2,064
40,851	40,950	2,286	1,205	1,439	44,351	44,450	2,612	1,415	1,748	47,851	47,950	2,937	1,625	2,073
40,951	41,050	2,295	1,211	1,447	44,451	44,550	2,621	1,421	1,757	47,951	48,050	2,946	1,631	2,082
41,051	41,150	2,305	1,217	1,455	44,551	44,650	2,630	1,427	1,766	48,051	48,150	2,956	1,637	2,092
41,151	41,250	2,314	1,223	1,463	44,651	44,750	2,640	1,433	1,775	48,151	48,250	2,965	1,643	2,101
41,251	41,350	2,323	1,229	1,471	44,751	44,850	2,649	1,439	1,785	48,251	48,350	2,974	1,649	2,110
41,351	41,450	2,333	1,235	1,479	44,851	44,950	2,658	1,445	1,794	48,351	48,450	2,984	1,655	2,120
41,451	41,550	2,342	1,241	1,487	44,951	45,050	2,667	1,451	1,803	48,451	48,550	2,993	1,661	2,129
41,551	41,650	2,351	1,247	1,495	45,051	45,150	2,677	1,457	1,813	48,551	48,650	3,002	1,667	2,138
41,651	41,750	2,361	1,253	1,503	45,151	45,250	2,686	1,463	1,822	48,651	48,750	3,012	1,673	2,147
41,751	41,850	2,370	1,259	1,511	45,251	45,350	2,695	1,469	1,831	48,751	48,850	3,021	1,679	2,157
41,851	41,950	2,379	1,265	1,519	45,351	45,450	2,705	1,475	1,841	48,851	48,950	3,030	1,685	2,166
41,951	42,050	2,388	1,271	1,527	45,451	45,550	2,714	1,481	1,850	48,951	49,050	3,039	1,691	2,175
42,051	42,150	2,398	1,277	1,535	45,551	45,650	2,723	1,487	1,859	49,051	49,150	3,049	1,699	2,185
42,151	42,250	2,407	1,283	1,543	45,651	45,750	2,733	1,493	1,868	49,151	49,250	3,058	1,707	2,194
42,251	42,350	2,416	1,289	1,552	45,751	45,850	2,742	1,499	1,878	49,251	49,350	3,067	1,715	2,203
42,351	42,450	2,426	1,295	1,562	45,851	45,950	2,751	1,505	1,887	49,351	49,450	3,077	1,723	2,213
42,451	42,550	2,435	1,301	1,571	45,951	46,050	2,760	1,511	1,896	49,451	49,550	3,086	1,731	2,222
42,551	42,650	2,444	1,307	1,580	46,051	46,150	2,770	1,517	1,906	49,551	49,650	3,095	1,739	2,231
42,651	42,750	2,454	1,313	1,589	46,151	46,250	2,779	1,523	1,915	49,651	49,750	3,105	1,747	2,240
42,751	42,850	2,463	1,319	1,599	46,251	46,350	2,788	1,529	1,924	49,751	49,850	3,114	1,755	2,250
42,851	42,950	2,472	1,325	1,608	46,351	46,450	2,798	1,535	1,934	49,851	49,950	3,123	1,763	2,259
42,951	43,050	2,481	1,331	1,617	46,451	46,550	2,807	1,541	1,943	49,951	50,000	3,130	1,769	2,266
43,051	43,150	2,491	1,337	1,627	46,551	46,650	2,816	1,547	1,952	OVER \$50,000 YOU MUST COMPUTE YOUR TAX USING THE TAX RATE SCHEDULES BELOW.				
43,151	43,250	2,500	1,343	1,636	46,651	46,750	2,826	1,553	1,961					
43,251	43,350	2,509	1,349	1,645	46,751	46,850	2,835	1,559	1,971					
43,351	43,450	2,519	1,355	1,655	46,851	46,950	2,844	1,565	1,980					
43,451	43,550	2,528	1,361	1,664	46,951	47,050	2,853	1,571	1,989					
43,551	43,650	2,537	1,367	1,673	47,051	47,150	2,863	1,577	1,999					
43,651	43,750	2,547	1,373	1,682	47,151	47,250	2,872	1,583	2,008					
43,751	43,850	2,556	1,379	1,692	47,251	47,350	2,881	1,589	2,017					
43,851	43,950	2,565	1,385	1,701	47,351	47,450	2,891	1,595	2,027					

Caution: Use only if your taxable income (Form 540NR, line 19) is more than **\$50,000**. If **\$50,000** or less, use the **Tax Table**.

1994 Tax Rate Schedules

Schedule X - Use if your filing status is Single or Married Filing Separate	If the amount on Form 540NR, line 19, is:		Enter on Form 540NR, line 22		of the amount over—
	over—	But not over—			
	\$ 0	\$ 4,722	\$ 0.00	+ 1.0%	\$ 0
	4,722	11,192	47.22	+ 2.0%	4,722
	11,192	17,662	176.62	+ 4.0%	11,192
	17,662	24,519	435.42	+ 6.0%	17,662
	24,519	30,987	846.84	+ 8.0%	24,519
	30,987	107,464	1,364.28	+ 9.3%	30,987
	107,464	214,929	8,476.64	+ 10.0%	107,464
	214,929	AND OVER	19,223.14	+ 11.0%	214,929
	\$ 0	\$ 9,444	\$ 0.00	+ 1.0%	\$ 0
	9,444	22,384	94.44	+ 2.0%	9,444
	22,384	35,324	353.24	+ 4.0%	22,384
	35,324	49,038	870.84	+ 6.0%	35,324
	49,038	61,974	1,693.68	+ 8.0%	49,038
	61,974	214,928	2,728.56	+ 9.3%	61,974
	214,928	429,858	16,953.28	+ 10.0%	214,928
	429,858	AND OVER	38,446.28	+ 11.0%	429,858
	\$ 0	\$ 9,445	\$ 0	+ 1.0%	\$ 0
	9,445	22,383	94.45	+ 2.0%	9,445
	22,383	28,852	353.21	+ 4.0%	22,383
	28,852	35,709	611.97	+ 6.0%	28,852
	35,709	42,179	1,023.39	+ 8.0%	35,709
	42,179	146,274	1,540.99	+ 9.3%	42,179
	146,274	292,550	11,221.83	+ 10.0%	146,274
	292,550	AND OVER	25,849.43	+ 11.0%	292,550

In Person Addresses of Franchise Tax Board (FTB) district offices are shown below. You can get information, California tax forms, and you can resolve problems on your account. Our district offices are open Monday through Friday from 8:00 a.m. to 5:00 p.m.

District Offices	Address
Bakersfield	1430 Truxtun Avenue
Burbank	333 N. Glenoaks Blvd.
Fresno	2550 Mariposa Street
Long Beach	245 West Broadway
Los Angeles	300 South Spring Street
Oakland	1970 Broadway
Sacramento	8745 Folsom Boulevard
San Bernardino	215 North D Street
San Diego	5353 Mission Center Road
San Francisco	50 Fremont Street, Suite 900
San Jose	96 North Third Street
Santa Ana	600 West Santa Ana Blvd.
Santa Barbara	360 South Hope Avenue
Santa Rosa	50 D Street
Stockton	31 East Channel Street
West Covina	100 North Barranca Street

Where To Get Income Tax Forms

In person – You can get California tax forms at the FTB district offices listed at left. Most libraries, post offices and banks also provide free California tax booklets during the filing season. Many libraries and some quick print businesses have forms and schedules for you to photocopy (you may have to pay a nominal fee). Note that employees at libraries, post offices, banks and quick print businesses cannot provide tax information or assistance.

By phone – For 1994 California tax forms, call our toll-free number listed under "F.A.S.T. Toll-Free Phone Service" on the back cover. For prior year California tax forms, call our toll-free number listed below.

By mail – Use the order blank below to request forms. Print or type your name and address on the lines below. On the back of the order blank, check the boxes for those forms you need. We will send you two copies of each tax form and one copy of each set of instructions you order. Please allow two weeks to receive your order. Address your envelope to: **Franchise Tax Board, Tax Forms Request Unit, P.O. Box 307, Rancho Cordova, CA 95741-0307.**

Letters We can serve you quickly if you call us or visit a district office for information to complete your California income tax return, or to find out about your tax refund. However, you may want to write to us if you are replying to a notice we sent you, or to get a reply in writing. If you write to us, be sure to include your social security number, your daytime and evening telephone numbers and a copy of the notice in your letter. Send your letter to:

**Franchise Tax Board
P.O. Box 942840
Sacramento, CA 94240-0040**

We will acknowledge receipt of your letter within six to eight weeks. In some cases, we may need to call you for additional information.

Regular Toll-Free Phone Service

Our regular toll-free phone service is available from 7:00 a.m. until 8:00 p.m. Monday through Friday from January 3 through April 17, 1995. The best times to call are between 7:00 and 10:00 in the morning and between 6:00 and 8:00 in the evening. Service is also available on Saturday, April 8 and April 15, from 8:00 a.m. until 5:00 p.m. After April 17, service is available Monday through Friday, between 8:00 a.m. and 5:00 p.m.

- From within the United States. 1-800-852-5711
- From outside the United States. 1-916-845-6500 (not toll-free)
- For hearing impaired with TDD 1-800-822-6268
- For federal tax questions, call the IRS at 1-800-829-1040

Bilingual Assistance

Para obtener servicio bilingüe de información sobre impuestos o 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. You can order FTB Pub. 4058 by calling or writing the FTB using the address to the left for letters.

Franchise Tax Board
Tax Forms Request
P.O. Box 307
Rancho Cordova, CA 95741-0307

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Name _____

Number and street _____

City or town, State and ZIP code _____



FORMS REQUEST

Enter your name and address on this label. It will be used to speed your order for forms to you.



Call Fast Answers about State Taxes, the F.A.S.T. toll-free phone service you can use to:

- get recorded answers to many of your questions about California taxes;
- order California or federal tax forms; and
- find out about your tax refund.

F.A.S.T. is available in English and Spanish to callers with touch-tone or rotary dial telephones.

When Is F.A.S.T. Available?

To answer your questions, F.A.S.T. is available 24 hours a day, seven days a week. To order forms or to find out about your tax refund, F.A.S.T. is available from 6:00 a.m. to 10:00 p.m., seven days a week, except state holidays.

How To Use F.A.S.T.

Have paper and pencil handy to take notes.

Call from within the United States. 1-800-338-0505
Call from outside the United States (not toll-free) 1-916-845-6600

To Order Forms

Use F.A.S.T. to order forms listed on the order blank below. To order a listed form, press the form's entry code (shown in parentheses on the order blank below) in response to recorded instructions. If you have moved in the last year, you must call 1-800-852-5711 to get forms.

You may also order the following 1994 federal forms:

- (902) 1040 Booklet (includes Schedule A, B, D, & E; Forms EIC & 2441)
- (904) 1040A Booklet (includes Schedule 1 & 2; Form EIC)
- (915) 1040EZ Booklet
- (906) Form 1040X
- (932) Form 4562
- (935) Publication 17
- (931) Form 1040-ES
- (916) Schedule C
- (933) Form 2119
- (912) Form 2106
- (905) Schedule SE

To Find Out About Your Tax Refund

You should wait at least eight weeks after you file your tax return before you call to find out about your refund. To use F.A.S.T., you must know the first social security number shown on your tax return and the exact dollar amount of your refund.

To Get Information

If you need an answer to any of the following questions, enter the correct code after you reach the F.A.S.T. number.

Code-Filing Assistance:

- 100 – Do I need to file a return?
- 111 – Which form should I use?
- 112 – How do I file electronically and get a fast refund?
- 200 – Where can I pick up a form today?
- 201 – How can I get an extension to file?
- 202 – There is no envelope in the booklet. Where do I send my return?
- 203 – How much do I get for renter's credit? (see page 3 first)
- 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. Why do I have to file a return?
- 211 – How do I figure my IRA deduction?
- 212 – How do I claim my disaster related loss?
- 213 – How do I file using Form 540-ADS?
- 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?

Refunds:

- 300 – My spouse has 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?
- 503 – I don't have a homeowner's exemption. Why did you deny my renter's credit?
- 504 – I'm head of my house. Why was I denied head of household filing status?
- 505 – Why was my IRA deduction denied?
- 506 – How can I get information about my Form 1099-G?
- 507 – Why did I receive a questionnaire?
- 508 – I received a notice that didn't show all payments made. How do I get credit for them?

Tax For Children Under 14:

- 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 or changed by the IRS?
- 617 – What are the current interest rates?

To Order 1994 Tax Forms By Mail — Cut along the dotted line and write or type your name and address on the other side. Mail to: **Franchise Tax Board, Tax Forms Request Unit, P.O. Box 307, Rancho Cordova, California 95741-0307.** Please allow two weeks for a reply. To order forms for taxable years prior to 1994, call the telephone assistance number or visit a district office.

<input type="checkbox"/> (900) California Resident Income Tax Forms and Instructions. This booklet contains: Form 540 Resident Income Tax Return Form 540A Resident Income Tax Return Form 540EZ Resident Income Tax Return For Single and Joint Filers With No Dependents	<input type="checkbox"/> (913) Schedule S, Other State Tax Credit	<input type="checkbox"/> (924) FTB 3800, Tax Computation for Children with Investment Income
<input type="checkbox"/> (903) Schedule CA(540), California Adjustments (Including FTB 3885A, Depreciation & Amortization Adjustments, and Schedule D, California Capital Gain or Loss Adjustment)	<input type="checkbox"/> (914) California Nonresident Income Tax Forms and Instructions. This booklet contains: Form 540NR Nonresident or Part-Year Resident Income Tax Return	<input type="checkbox"/> (929) FTB 3801, Passive Activity Loss Limitations
<input type="checkbox"/> (907) 540-ES, Estimated Tax for Individuals	<input type="checkbox"/> (917) Schedule CA(540NR), California Adjustments — Nonresidents or Part-Year Residents	<input type="checkbox"/> (930) FTB 3803, Parent's Election to Report Child's Interest and Dividends
<input type="checkbox"/> (908) 540X, Amended Income Tax Return	<input type="checkbox"/> (918) Schedule P (540NR), Alternative Minimum Tax and Credit Limitations	<input type="checkbox"/> (925) FTB 3805E, Installment Sales
<input type="checkbox"/> (909) Schedule D-1, Sales of Business Property	<input type="checkbox"/> (919) FTB Pub. 1001, Supplemental Guidelines to California Adjustments	<input type="checkbox"/> (928) FTB 3805P, Additional Tax from Qualified Retirement Plans
<input type="checkbox"/> (910) Schedule G-1, Tax on Lump-Sum Dist.	<input type="checkbox"/> (920) FTB Pub. 1005, Pension and Annuity	<input type="checkbox"/> (926) FTB 3805V, Net Operating Loss
<input type="checkbox"/> (911) Schedule P (540), Alternative Minimum Tax and Credit Limitations	<input type="checkbox"/> (921) FTB 3519, Payment Voucher for Automatic Extension for Individuals	<input type="checkbox"/> (901) FTB 3805Z, Enterprise Zone and Program Area Business Booklet
	<input type="checkbox"/> (922) FTB 3525, Substitute W-2 Statement	<input type="checkbox"/> (927) FTB 5805, Underpayment of Estimated Tax
	<input type="checkbox"/> (923) FTB 3526, Investment Interest Expense	<input type="checkbox"/> Other _____

Important Information!

The following supplements information in the 1994 California Nonresident or Part-Year Resident Personal Income Tax Booklet.

Page 2: “**Who Must File a California Income Tax Return, Requirements for Most People**” should include the following information:

If you can be claimed as someone’s dependent, you must file a return if your gross income from all sources is greater than your standard deduction. Use the Standard Deduction Worksheet For Dependents on page 4 to compute your standard deduction.

Page 3: “**Line 14 – California Adjustments – Subtractions**” should include the following information:

Caution: If the amount on Schedule CA (540NR), line 31, column B is a negative number, do not enter an amount on line 14. Instead, enter that amount as a positive number on Form 540NR, line 16.

Page 4: “**Line 16 – California Adjustments – Additions**” should include the following information:

Caution: If the amount on Schedule CA (540NR), line 31, column C is a negative number, do not enter an amount on line 16. Instead, enter that amount as a positive number on Form 540NR, line 14.