

# Change of Address

## Part I Complete This Part To Change Your Home Mailing Address

Complete this part if the address change affects individual income tax returns (Forms 540, 540A, 540EZ, 540NR, etc.).

▶ If your last return was a joint return and you are now establishing a residence separate from the spouse with whom you filed that return, check here

<b>1a Your name</b> (first name, middle initial and last name)	<b>1b Your social security number</b>
<b>2a Spouse's name</b> (first name, middle initial and last name)	<b>2b Spouse's social security number</b>
<b>3 Prior name(s)</b> See instructions.	
<b>4a Old address</b> (no., street, city or town, state and ZIP Code). If a PO box or foreign address, see instructions.	Apt. no.
<b>4b Spouse's old address</b> , if different from line 4a (no., street, city or town, state and ZIP Code). If a PO box or foreign address, see instructions.	Apt. no.
<b>5a New address</b> (no., street, city or town, state and ZIP Code). If a PO box or foreign address, see instructions.	Apt. no.

## Part II Complete This Part To Change Your Business Mailing Address or Business Location

Check ALL boxes this change affects:

**6**  Business, Estate or Trust returns (Forms 541, 565, 568, 100, 100S, 109, 199 etc.)

**7a**  Business, Estate or Trust location

**8a Business, Estate or Trust name**

<b>9 Old mailing address.</b> If a PO box or foreign address, see instructions. No. Street City or Town State ZIP Code	<b>7b California corporation number</b>
<b>10 New mailing address.</b> If a PO box or foreign address, see instructions. No. Street City or Town State ZIP Code	Room or suite no.
<b>11 New business address.</b> If a PO box or foreign address, see instructions. No. Street City or Town State ZIP Code	Room or suite no.

## Part III Signature

Daytime telephone number of person to contact (optional) ▶ ( )

<p><b>Please Sign Here</b></p> <p>▶ Your signature _____ Date _____</p> <p>▶ If joint return, spouse's signature _____ Date _____</p>	<p>▶ If Part II completed, signature of owner, officer or representative _____ Date _____</p> <p>▶ Title _____</p>
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For Privacy Act Notice, get form FTB 1131.

### A Purpose

You may use form FTB 3533 to notify the Franchise Tax Board (FTB) if you changed your home or business mailing address or your business location. Generally, complete only one form FTB 3533 to change your home and business addresses. If this change also affects the mailing address for your children who filed separate tax returns, complete a separate form FTB 3533 for each child. If you are a representative filing for the taxpayer, attach to form FTB 3533 a copy of your power of attorney.

**Note:** You may also notify the FTB of a change of address by calling (800) 852-5711. If you have called FTB and reported a change of address, you do not need to file this form.

### B Prior Name(s)

If you or your spouse changed your name because of marriage, divorce, etc., complete line 3.

### C Addresses

Be sure to include any apartment, room or suite number in the space provided.

### D PO Box

If your post office does not deliver mail to your street address, show your PO box number instead of your street address.

### E Foreign Address

If your address is outside the United States or its possessions or territories, enter the information in the following order: city, province or state and country. Follow the country's practice for entering the postal code. Please do not abbreviate the country name.

### F Signature

If you are completing Part II, the owner, officer, or a representative must sign. An officer is the president, vice president, treasurer, chief accounting officer, etc. A representative is a person who has a valid power of attorney to handle tax matters.

### G Where to File

Send this form to:

FRANCHISE TAX BOARD  
PO BOX 942840  
SACRAMENTO CA 94240-0000

**Note:** If you moved after you filed your return and you are expecting a refund, also notify the post office serving your old address. This will help forward your check to your new address.