

# Instructions for Long 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, 2001**, and the California Revenue and Taxation Code (R&TC).

## What's Changed?

The California legislature enacted SB 615 (Stats. 2004 CH. 388), which makes California law compatible with the Servicemembers Civil Relief Act (Public Law 108-189). This means that servicemembers domiciled outside of California, and their spouses, may exclude the member's military compensation from gross income when computing the tax rate on nonmilitary income.

Requirements for military servicemembers domiciled in California remain unchanged. Military servicemembers domiciled in California must include their military pay in total income. In addition, they must include their military pay in California source income when stationed in California. However, military pay is not California source income when a servicemember is permanently stationed outside of California.

**Amended Returns** – If you are an active duty military member domiciled outside California and you included your military compensation in income from all sources, you may file an amended return for tax years with an open statute of limitations. Get FTB Publication 1032, Tax Information for Military Personnel and Form 540X, Amended Individual Income Tax Return, for additional information.

## Before You Begin

You must complete your federal income tax return (Form 1040, Form 1040A, Form 1040EZ, federal TeleFile Tax Record, Form 1040NR, or Form 1040NR-EZ) before you begin your Long Form 540NR. You will use information from your federal income tax return to complete your Long Form 540NR. Be sure to complete and mail Long Form 540NR by April 15, 2003. If you cannot mail your return by the due date, see page 49 for information.

To get forms and publications referred to in these instructions go to our Website at: [www.ftb.ca.gov](http://www.ftb.ca.gov) or see "Order Forms and Publications" on page 60.

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

e-file! No math, fast refund, accurate return and more! See page 7 for details.



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

## Step 1 – Name and Address

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

**If there is no label**, print your first name, middle initial and last name and address in the spaces provided at the top of Long Form 540NR. See "Filing in your return" on page 5.

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

### Principal Business Activity Code

For Schedule C business filers, please enter the numeric Principal Business Activities Code from federal Schedule C, line B.

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

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

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

## Step 2 – Filing Status

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

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



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

- An active member of the United States Armed Forces or any auxiliary military branch during 2002; or
- A nonresident for the entire year and had no income from California sources during 2002.

If you filed federal Form 1040NR or Form 1040NR-EZ, you do not qualify to use the head of household or married filing jointly filing statuses. Instead, use single, married filing separately, or qualifying widow(er) filing status, whichever applies to you.

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

**Note:** Community property rules may apply to the division of income if you are married and file a separate return. For more information, get FTB Pub. 1031, Guidelines for Determining Resident Status, and FTB Pub. 1051A, Guidelines For Married Filing Separate Returns.

**If You File as Head of Household**, do not claim yourself or a nonrelative as the qualifying individual for head of household. Get FTB Pub. 1540, Tax Information for Head of Household Filing Status, for more information. See "Order Forms and Publications" on page 60.



**e-file and you can close this book now!** The software you use to e-file will help you find out if you qualify to claim head of household. Most software also provides a questionnaire, 4803e, which will help verify your eligibility to the FTB. Go to [www.ftb.ca.gov](http://www.ftb.ca.gov)

## Step 3 – Exemptions

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

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

### Line 7 – Personal Exemptions

Did you fill in the circle on line 6?

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

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

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

**Line 8 – Blind Exemptions**

The first year you claim this exemption credit, you must attach a doctor's statement to the back of Long 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.

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

**Line 9 – Senior Exemptions**

If you were 65 years of age or older by December 31, 2002\*, you should claim an additional exemption credit on line 9. If you are married, each spouse 65 years of age or older should claim an additional credit. You may contribute all or part of this credit to the California Seniors Special Fund. See page 23 for information about this fund.

\*If your 65th birthday is on January 1, 2003, you are considered to be age 65 on December 31, 2002.

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

**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. If you have more than five dependents, attach a schedule. The persons you list as dependents must be the same persons you listed as dependents on your federal income tax return. Count the number of dependents listed and enter the total in the box on line 10. Multiply the number you entered by the pre-printed dollar amount and enter the result.

**Line 11 – Total Exemptions**

Enter the total dollar amount of all exemptions, personal, blind and dependents.

**Step 4 – Taxable Income**

Refer to your completed federal income tax return 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 16 of Form W-2.

**Line 14 – California Adjustments — Subtractions (from Schedule CA (540NR), line 35, column B)**

You must complete Schedule CA (540NR) to find the amount to enter on Long Form 540NR, line 14. Follow the instructions for Schedule CA (540NR) beginning on page 33. Enter the amount from Schedule CA (540NR), line 35, column B on Long Form 540NR, line 14.

**Caution:** If the amount on Schedule CA (540NR) line 35, column B is a negative number, do not transfer it to Long Form 540NR, line 14 as a negative number. Instead, transfer the number as a positive number to Long Form 540NR, line 16.

**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 35, column C)**

You must complete Schedule CA (540NR), to find the amount to enter on Long Form 540NR, line 16. Follow the instructions for Schedule CA (540NR) beginning on page 33. Enter the amount from Schedule CA (540NR), line 35, column C on Long Form 540NR, line 16.

**Caution:** If the amount on Schedule CA (540NR) line 35, column C is a negative number, do not transfer it to Long Form 540NR, line 16 as a

negative number. Instead, transfer the number as a positive number to Long Form 540NR, line 14.

**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 35, column D.

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

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

- Itemized deductions (total itemized deductions allowed under California law); or
- Standard deduction.

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

**Itemized deductions.** Figure your California itemized deductions by completing Schedule CA (540NR), Part III, line 36 through line 42. Enter the result on Long Form 540NR, line 18.

**Note:** If you did not itemize deductions on your federal income tax return but will itemize deductions for your California Long Form 540NR, first complete federal Schedule A, Itemized Deductions. Then complete Schedule CA (540NR), Part III, line 36 through line 42.

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

<b>California Standard Deduction Chart for Most People</b>	
Do not use this chart if your parent, or someone else, can claim you (or your spouse, if married) as a dependent on his or her tax return.	
<b>Your Filing Status</b>	<b>Enter On Line 18</b>
1 – Single	\$3,004
2 – Married filing jointly	\$6,008
3 – Married filing separately	\$3,004
4 – Head of household	\$6,008
5 – Qualifying widow(er)	\$6,008
<b>Note:</b> The California standard deduction amounts are less than the federal standard deduction amounts.	

<b>California Standard Deduction Worksheet for Dependents</b>	
Use this worksheet only if your parent, or someone else, can claim you (or your spouse if married) as a dependent on his or her tax return.	
1. Enter your earned income from: line 1 of the "Standard Deduction Worksheet for Dependents" in the instructions for federal Form 1040; Form 1040A; or from line A of the worksheet on the back of Form 1040EZ. If you used federal TeleFile, add \$250 to the total of your wages from all Form(s) W-2, box 1 and enter the result here	1 _____
2. Minimum standard deduction	2     \$750.00
3. Enter the <b>larger</b> of line 1 or line 2 here	3     _____
4. Enter the amount shown for your filing status:	4     _____
• Single or married filing separately, enter \$3,004	} . . . . .
• Married filing jointly, head of household, or qualifying widow(er), enter \$6,008	
5. <b>Standard deduction.</b> Enter the <b>smaller</b> of line 3 or line 4 here and on Long Form 540NR, line 18	5     _____

## Step 5 – California Taxable Income

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

### Line 20 – Tax

Figure your tax on the amount on line 19. Use one of the following methods and fill in the matching circle on line 20:

- **Tax Table.** If your taxable income is \$100,000 or less, you must use the tax table beginning on page 51. Be sure you use the correct filing status column.
- **Tax Rate Schedules.** If your taxable income is over \$100,000, you must use the tax rate schedules on page 56.
- **FTB 3800.** Generally, you must use form FTB 3800, Tax Computation for Children Under Age 14 with Investment Income, to figure the tax on the separate Long Form 540NR of your child who was under age 14 on January 1, 2003, and who had more than \$1,500 of investment income. Attach form FTB 3800 to the child's Long Form 540NR.
- **FTB 3803.** If, as a parent, you elect to report your child's interest and dividend income of \$7,500 or less (but not less than \$750) on your return, complete form FTB 3803, Parents' Election to Report Child's Interest and Dividends. You must file a separate form FTB 3803 for each child whose income you elect to include on your Long Form 540NR. Add the amount of tax, if any, from each form FTB 3803, line 9, to the amount of your tax from the tax table or tax rate schedules and enter the result on Long Form 540NR, line 20. Attach form(s) FTB 3803 to your return.

### Line 21 – California Adjusted Gross Income

You must complete Schedule CA (540NR), line 43 to determine your California adjusted gross income. Follow the instructions for Schedule CA (540NR) beginning on page 33. Enter on Long Form 540NR, line 21 the amount from Schedule CA (540NR), line 43.

### Line 22 - CA Taxable Income

Enter the amount from Schedule CA 540NR, line 47.

### Line 23 - CA Tax Rate

Divide the tax on total taxable income (line 20) by total taxable income (line 19).

### Line 24 - CA Tax Before Exemption Credits

Multiply CA Taxable Income (line 22) by the CA Tax Rate (line 23).

### Line 25a - CA Exemption Credit Percentage

Divide the California Taxable Income (line 22) by Total Taxable Income (line 19). This percentage does not apply to the Nonrefundable Renter's Credit, Other State Tax Credit, or credits that are conditional upon a transaction occurring wholly within California. **If more than 1, enter 1.0000.**

### Line 25b - CA Prorated Exemption Credits

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

If your filing status is:	Is Long Form 540NR, line 13 more than:
Single or married filing separately .....	\$132,793
Married filing jointly or qualifying widow(er) .....	\$265,589
Head of household .....	\$199,192

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

**No** Multiply line 11 by line 25a.

#### AGI Limitation Worksheet

<b>a</b> Enter the amount from Long Form 540NR, line 13	<b>a</b> _____
<b>b</b> Enter the amount for your filing status on line b: Single or married filing separately ..... \$132,793 Married filing jointly or qualifying widow(er) ..... \$265,589 Head of household ..... \$199,192	<b>b</b> _____
<b>c</b> Subtract line b from line a .....	<b>c</b> _____
<b>d</b> Divide line c by \$2,500 (\$1,250 if married filing separately). <b>Note:</b> If the result is not a whole number, round it to the next higher whole number ....	<b>d</b> _____
<b>e</b> Multiply line d by \$6 .....	<b>e</b> _____
<b>f</b> Add the numbers from the <b>boxes</b> on Long Form 540NR, line 7, line 8, and line 9 (not dollar amounts) .....	<b>f</b> _____
<b>g</b> Multiply line e by line f .....	<b>g</b> _____
<b>h</b> Enter the total dollar amount for line 7, line 8 and line 9 .....	<b>h</b> _____
<b>i</b> Subtract line g from line h. If zero or less enter -0- ....	<b>i</b> _____
<b>j</b> Enter the number from the box on Long Form 540NR, line 10 (not the dollar amount) .....	<b>j</b> _____
<b>k</b> Multiply line e by line j .....	<b>k</b> _____
<b>l</b> Enter the dollar amount (that you filled in) from Long Form 540NR, line 10 .....	<b>l</b> _____
<b>m</b> Subtract line k from line l. If zero or less, enter -0- ....	<b>m</b> _____
<b>n</b> Add line i and line m. Enter the result here .....	<b>n</b> _____
<b>o</b> Multiply the amount on line n by the CA Exemption Credit Percentage on Form 540NR, line 25a. Enter the result here and on Form 540NR, line 25b .....	<b>o</b> _____

### Line 26 – Tax from Schedule G-1 and form FTB 5870A

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

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

## Step 6 – Special Credits and Nonrefundable Renter's Credit

A variety of California tax credits are available to reduce your tax if you qualify.

To figure and claim most credits, you must complete a separate form or schedule and attach it to your Long Form 540NR. The Credit Chart on page 22 describes the credits and provides the name, credit code, and number of the required form or schedule. Many credits are limited to a certain percentage or a certain dollar amount. In addition, the total amount you may claim for all credits is limited by tentative minimum tax (TMT). Answer the following questions before you claim credits on your tax return.

1. Do you qualify to claim the nonrefundable renter's credit? (See page 8.)  
Check  **Yes** or  **No**, then go to Question 2.
2. Are you claiming any other special credit listed in the Credit Chart on page 22?  
**No** If you checked "Yes" for Question 1 and entered an amount on Long Form 540NR, line 40, go to line 42. If you checked "No" for Question 1, skip to the instructions for line 43.  
**Yes** Figure your credit using the form, schedule, worksheet, or certificate identified in the Credit Chart. Then go to Box A, below to see if the total amount you may claim for all credits is limited by TMT. If you checked "Yes" for Question 1, be sure that you entered your nonrefundable renter's credit on line 40.

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

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

**Yes** Get and complete Schedule P (540NR).  
**No** Go to Box B.

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

- Investment interest expense; ☎ **226**
- Income from incentive stock options in excess of the amount reported on your return; ☎ **225**
- Income from installment sales of certain property; or

**Yes** Get and complete Schedule P (540NR).  
**No** Go to Box C.

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

Single or head of household	\$183,132
Married filing jointly or qualifying widow(er)	\$244,176
Married filing separately	\$122,087

**Yes** Get and complete Schedule P (540NR).  
**No** Your credits are not limited. Go to the instructions for the Long Form 540NR, line 37.

**Carryovers:** If you claim a credit with carryover provisions and the amount of the credit available this year exceeds your tax, you may carry over any excess credit to future years until the credit is used (unless the carryover period is a fixed number of years). If you claim a credit carryover from an expired credit, use form FTB 3540, Credit Carryover Summary, to figure the amount of the credit.

If you need to complete Schedule P (540NR) and if you claim any of the credits on line 31 through line 34, do not enter an amount on line 31 through line 34. Instead, enter the total amount of these credits from Schedule P (540NR), Part IV, Section A1, line 4 through line 11, on Long 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 — Code 170**

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

You may claim a credit if you were unmarried at the end of 2002 (or if married, you lived apart from your spouse for all of 2002 and you used the married filing separately filing status); and if you furnished more than one-half the household expenses for your home that also served as the main home of your child, step-child, or grandchild for at least 146 days but not more than 219 days of your taxable year. If the child is married, you must be entitled to claim a dependent exemption for the child.

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

Use the worksheet below to figure this credit.

1. Subtract line 11 from line 20 on Long form 540NR and enter result here ..... **1** \_\_\_\_\_
2. Enter the Schedule G-1 tax, if any, included on Long Form 540NR, line 26 ..... **2** \_\_\_\_\_
3. Add line 1 and line 2 ..... **3** \_\_\_\_\_
4. Credit percentage — 30% ..... **4** x .30
5. Credit amount. Multiply line 3 by line 4.  
Enter on this line the result or \$320, whichever is less. Enter this amount on line 31 of the Long Form 540NR, Side 2 ..... **5** \_\_\_\_\_

**NOTE:** If your filing status is: **Federal AGI is more than:**  
 Single or married filing separately \$132,793

**If your AGI is greater than the Federal AGI based on your filing status above, subtract line n from the AGI Limitation Worksheet on the prior page from line 20 of the Long Form 540NR and enter this amount on line 1 of the worksheet above to calculate your credit.**

**Line 32 – Credit for Dependent Parent — Code 173**

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

You may claim this credit only if:

- You were married at the end of 2002 and you used the married filing separately 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 or father, whether or not she or he lived in your home.

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

Enter on this line the result or \$320, whichever is less. Enter this amount on line 32 of the Long Form 540NR, Side 2.

**Line 33 – Credit for Senior Head of Household — Code 163**

You may claim this credit if you:

- Were 65 years of age or older on December 31, 2002\*;
- Qualified as a head of household in 2000 or 2001 by providing a household for a qualifying individual who died during 2000 or 2001; and
- Did not have adjusted gross income over \$51,941 for 2002.

\*If your 65th birthday is on January 1, 2003, you are considered to be age 65 on December 31, 2002.

**Note:** If you meet all the conditions listed, you do not need to qualify to use the head of household filing status for 2002 in order to claim this credit.

Use the worksheet below to figure this credit.

1. Enter the amount from Long Form 540NR, line 19 .. **1** \_\_\_\_\_
2. Credit percentage — 2% ..... **2** x .02
3. Credit amount. Multiply line 1 by line 2.  
Enter on this line the result or \$979, whichever is less. Enter this amount on line 33 of the Long Form 540NR, Side 2 ..... **3** \_\_\_\_\_

**Line 34 – Credit for Long-Term Care — Code 214**

Enter the amount from form FTB 3504, Part II, line 4.

To get form FTB 3504, Long-Term Care Credit, see "Order Forms and Publications" on page 60.

**Line 36 – Credit Percentage and Credit Amount**

Complete the worksheet below to compute your credit percentage and the allowable prorated credit to enter on line 36. If you completed Schedule P (540NR), see this page for the instructions right above the Line 31 instructions.

**Automated Toll-free Phone Service (800) 338-0505**

**Part I – Credit Percentage**

1. Divide Long Form 540NR, line 22 by line 19. Enter the result here and on Long Form 540NR, line 36a . . . 1\_ . . . . .

**Part II – Credit Amount**

**Credit for Joint Custody Head of Household**

1. Enter the amount from Long Form 540NR, line 31 . 1 \_\_\_\_\_  
2. Credit Percentage from Part I, line 1 . . . . . 2 x \_\_\_\_\_  
3. Multiply line 1 by line 2 . . . . . 3 \_\_\_\_\_  
4. Enter the lesser of the amount from line 3 or \$320 . . . 4 \_\_\_\_\_

**Credit for Dependent Parent**

5. Enter the amount from Long Form 540NR, line 32 . 5 \_\_\_\_\_  
6. Credit Percentage from Part I, line 1 . . . . . 6 x \_\_\_\_\_  
7. Multiply line 5 by line 6 . . . . . 7 \_\_\_\_\_  
8. Enter the lesser of the amount on line 7 or \$320 . . . . 8 \_\_\_\_\_

**Credit for Senior Head of Household**

9. Enter the amount from Long Form 540NR, line 33 . 9 \_\_\_\_\_  
10. Credit Percentage from Part I, line 1 . . . . . 10 x \_\_\_\_\_  
11. Multiply line 9 by line 10 . . . . . 11 \_\_\_\_\_  
12. Enter the lesser of the amount on line 11 or \$979 . . . 12 \_\_\_\_\_

**Credit for Long-Term Care**

13. Enter the amount from Long Form 540NR, line 34 13 \_\_\_\_\_  
14. Credit Percentage from Part I, line 1 . . . . . 14 x \_\_\_\_\_  
15. Multiply line 13 by line 14 . . . . . 15 \_\_\_\_\_  
16. Enter the lesser of line 13 or line 15 . . . . . 16 \_\_\_\_\_

**Total Prorated Credits**

17. Add line 4, line 8, line 12 and line 16. Enter the result here and on Long Form 540NR, line 36. . . . . 17 \_\_\_\_\_

**Line 37 through Line 39 – Additional Special Credits**

Each credit has a code number. To claim only one or two credits, enter the credit name, code number, and amount of the credit on line 37 and line 38. To claim more than two credits, get Schedule P (540NR). See "Order Forms and Publications" on page 60. List two of the credits on line 37 and line 38. Enter on line 39 the total of any remaining credits from Schedule P (540NR).

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

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

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

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

**Note:** Any deduction for the expenses upon which this credit is based must be reduced by the amount of the child adoption costs credit claimed.

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

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

Your allowable credit is limited to \$2,500 for 2002. You may carry over the excess credit to future years until the credit is used.

**Line 40 – Nonrefundable renter's credit**

Go to the instructions for "Step 6" on page 19.

**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 step.

**Line 44 – Alternative Minimum Tax (AMT)**

If you claim certain types of deductions, exclusions, and credits, you may owe AMT if your total income is more than:

- \$65,114 married filing jointly or qualifying widow(er); or
- \$48,836 single or head of household; or
- \$32,556 married filing separately.

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 \$5,500 plus the child's earned income.

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

Get Schedule P (540NR) for more information. See "Order Forms and Publications" on page 60.

**Line 45 – Other Taxes and Credit Recapture**

If you used form(s) FTB 3501, Employer Child Care Program/Contribution Credit; FTB 3535, Manufacturers' Investment Credit; FTB 3805P, Additional Taxes on Qualified Plans (Including IRAs) and Other Tax-Favored Accounts; FTB 3805Z, Enterprise Zone Deduction and Credit Summary; FTB 3806, Los Angeles Revitalization Zone (LARZ) Deduction and Credit Summary; FTB 3807, Local Agency Military Base Recovery Area Deduction and Credit Summary; FTB 3808, Manufacturing Enhancement Area Credit Summary; or FTB 3809, Targeted Tax Area Deduction and Credit Summary; include the additional tax, if any, on line 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 page 27, Question 2.

**Line 47 – California Income Tax Withheld**

Enter the total California income tax withheld from your Form(s):

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

**Caution:** Do not include city or county tax withheld or tax withheld by other states. Do not include nonresident withholding on this line. See line 48. If you had California tax withheld and did not receive a Form W-2 or 1099, contact the entity that paid the income.

If you received Form(s) 1099 showing California income tax withheld ("backup withholding") on dividend and interest income, real estate sales, and partnership distributions, include the amount(s) withheld in the total on line 47 and attach a copy of the Form(s) 1099 to your return.

**CREDIT CHART**

<b>Credit Name &amp; Credit Form/Worksheet</b>	<b>Code</b>	<b>Description</b>
Child Adoption – Worksheet on page 21	197	50% of qualified costs in the year an adoption is ordered
Child and Dependent Care Expenses – FTB 3506 See the instructions on page 23	None	Similar to the federal credit except that the California credit amount is based on a specified percentage of the federal credit and is refundable
Community Development Financial Institution Deposits – Certification Required	209	20% of each qualified deposit made to a community development financial institution Obtain certification from: California Organized Investment Network (COIN), Department of Insurance, 300 Capitol Mall, Suite 1460, Sacramento CA 95814
Dependent Parent – Worksheet on page 20	173	Must use married filing separately filing status and have a dependent parent
Disabled Access for Eligible Small Businesses – FTB 3548	205	Similar to the federal credit but limited to \$125 based on 50% of qualified expenditures that do not exceed \$250
Donated Agricultural Products Transportation – FTB 3547	204	50% of the costs paid or incurred for the transportation of agricultural products donated to nonprofit charitable organizations
Employer Child Care Contribution – FTB 3501	190	Employer: 30% of contributions to a qualified plan
Employer Child Care Program – FTB 3501	189	Employer: Cost of establishing a child care program or constructing a child care facility
Enhanced Oil Recovery – FTB 3546	203	One third of the similar federal credit and limited to qualified enhanced oil recovery projects located within California
Enterprise Zone Employee – FTB 3553	169	5% of wages from work in an enterprise zone
Enterprise Zone Hiring & Sales or Use Tax – FTB 3805Z	176	Business incentives for enterprise zone businesses
Farmworker Housing – Certification required	207	50% of new construction or rehabilitation costs for farmworker housing Obtain certification from: Farmworker Housing Assistance Program, California Tax Credit Allocation Committee, 915 Capitol Mall, Room 485, Sacramento CA 95814
Joint Custody Head of Household – Worksheet on page 20	170	30% of tax up to \$320 for single or married filing separately taxpayers who have a child and meet support test
Joint Strike Fighter Wages – FTB 3534	215	50% of qualified wages paid or incurred in taxable years beginning in 2001, not to exceed \$10,000 for each qualified employee, or a proportional amount for an employee who is employed by the taxpayer for only part of the taxable year
Joint Strike Fighter Property – FTB 3534	216	10% of the cost of property placed in service in California for ultimate use in a joint strike fighter.
Local Agency Military Base Recovery Area (LAMBRA) Hiring & Sales or Use Tax – FTB 3807	198	Business incentives for LAMBRA
Long-Term Care – FTB 3504	214	\$500 multiplied by the number of qualifying individuals for whom you provide long-term care
Low-Income Housing – FTB 3521	172	Similar to the federal credit but limited to low-income housing in California
Manufacturers' Investment – FTB 3535	199	6% of the cost of qualified property
Manufacturing Enhancement Area (MEA) Hiring – FTB 3808	211	Percentage of qualified wages paid to qualified disadvantaged individuals
Natural Heritage Preservation – FTB 3503	213	55% of the fair market value of any qualified contribution. This credit is suspended for fiscal year 7/1/02 through 6/30/03.
Nonrefundable Renter's — See page 19	None	For California residents who paid rent for their principal residence for at least 6 months in 2002 and whose AGI does not exceed a certain limit
Other State Tax – Schedule S	187	Net income tax paid to another state or a U.S. possession on income also taxed by California
Prior Year Alternative Minimum Tax – FTB 3510	188	Must have paid alternative minimum tax in a prior year and have no alternative minimum tax liability in 2002
Prison Inmate Labor – FTB 3507	162	10% of wages paid to prison inmates
Research – FTB 3523	183	Similar to the federal credit but limited to costs for research activities in California
Rice Straw – Certification required	206	\$15 per ton of purchased rice straw grown in California Obtain certification from: Rice Straw Tax Credit Program, Department of Food and Agriculture, 1220 N Street, Room 409, Sacramento, CA 95814
Senior Head of Household – Worksheet on page 20	163	2% of taxable income up to \$979 for seniors who qualified for head of household in 2000 or 2001 and whose qualifying individual died during 2000 or 2001.
Solar Energy System Credit – FTB 3508	217	The lesser of 15% of the cost paid or incurred for the purchase and installation of a Solar Energy System or the dollar amount per rated watt of the Solar Energy System
Targeted Tax Area (TTA) Hiring & Sales or Use Tax – FTB 3809	210	Business incentives for TTA businesses
Teacher Retention Credit – FTB 3505	212	This credit is suspended for 2002.

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

Agricultural Products	175	Los Angeles Revitalization Zone (LARZ)	Ridesharing	171
Commercial Solar Electric System	196	Hiring & Sales or Use Tax – get form FTB 3806	Salmon & Steelhead Trout Habitat Restoration	200
Commercial Solar Energy	181	Low-Emission Vehicles	Solar Energy	180
Employee Ridesharing	194	Orphan Drug	Solar Pump	179
Employer Ridesharing: Large employer	191	Political Contributions	Water Conservation	178
Small employer	192	Recycling Equipment	Young Infant	161
Transit passes	193	Residential Rental & Farm Sales		
Energy Conservation	182			

**Automated Toll-free Phone Service (800) 338-0505**

The Franchise Tax Board verifies all withholding claimed from Forms W-2, W-2G, 1099-MISC and 1099R with the Employment Development Department (EDD).

**Line 48 – Nonresident Withholding**

Enter the total California tax withheld from your form(s): 592-B, 594, and 597.

**Caution:** Do not include withholding from other form(s) on this line. If you had California income tax withheld and did not receive Form 592-B, 594, or 597, contact the entity that paid the income.

**Line 49 – 2002 CA Estimated Tax**

Enter the total of any:

- California estimated tax payments you made (Form 540-ES) for 2002;
- Overpayment from your 2001 California income tax return that you applied to your 2002 estimated tax;
- Payment you sent with form FTB 3519, Payment Voucher for Automatic Extension for Individuals; and
- California estimated tax payments made on your behalf by an estate or trust on Schedule K-1 (541).

**Note:** If you are including an amount from Schedule K-1 (568), write “LLC” on the dotted line to the left of the amount on line 49.

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

**Line 50 – Excess California SDI (or VPD) Withheld**

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

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

- You had **two or more** employers during 2002;
- You received more than \$46,327 in wages; and
- The amounts of SDI (or VPD) withheld appear on your Forms W-2. Be sure to attach your Forms W-2 to your Long Form 540NR.

Follow the instructions below to figure the amount to enter on line 50.

<b>Excess SDI (or VPD) Worksheet</b>	
Follow the instructions below to figure the amount to enter on Long Form 540NR, line 50. If you are married and file a joint return, you must figure the amount of excess SDI (or VPD) separately for each spouse.	
	<b>You                      Your Spouse</b>
1. Add amounts of SDI (or VPD) withheld shown on your Form(s) W-2. Enter the total here . . . . . 1	
2. 2002 SDI (or VPD) limit . . . . . 2	\$416.94    \$416.94
3. Excess SDI (or VPD) withheld. Subtract line 2 from line 1. Enter the result here and on Long form 540NR, line 50 . . . . . 3	

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

**Line 51 through line 54 – Child and Dependent Care Expenses Credit**

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

**Line 51 and line 52**

Enter the qualifying person's social security number. Do not enter more than one qualifying person's social security number on line 51 or line 52 from form FTB 3506, Part III, line 2. If you have more than two qualifying persons, see the instructions for form FTB 3506, Part III, line 2.

**Line 53**

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

**Line 54**

Enter the credit allowed from form FTB 3506, Part IV, line 16 (do not round this amount). See “Order Forms and Publications” on page 60.

**Step 9 – Overpaid Tax or Tax Due**

**Note:** If you received a refund for 2001, you may receive a Form 1099-G, Certain Government and Qualified State Tuition Program Payments. The refund amount reported on your Form 1099-G will be different from the amount shown on your tax return if you claimed the Child and Dependent Care Expenses Credit. This is because the credit is not part of the refund from withholdings or estimated tax payments.

To avoid a delay in the processing of your return, be sure you enter the correct amounts on line 56 through line 59.

**Line 56 – Overpaid Tax**

If the amount on line 55 is more than the amount on line 46, subtract the amount on line 46 from the amount on line 55. Enter the result on line 56. Your payments and credits are more than your tax.

**Line 57 – Amount You Want Applied to Your 2003 Estimated Tax**

You may apply all or part of the amount on line 56 to your estimated tax for 2003. Enter on line 57 the amount of line 56 you want applied to 2003.

**Line 58 – Overpaid Tax Available This Year**

If you entered an amount on line 57, subtract it from the amount on line 56. Enter the result on line 58. You may have this entire amount refunded to you or you may make contributions to the California Seniors Special Fund or make other voluntary contributions from this amount. If you make a contribution, skip line 59 and go to the instructions for “Step 10.”

**Line 59 – Tax Due**

If the amount on line 55 is less than the amount on line 46, subtract the amount on line 55 from the amount on line 46. Enter the result on line 59. 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 59 is \$200 or more (\$100 or more if married filing separately); and
- The amount of state income tax withheld on line 47 is less than 90% of the amount of your total tax on line 46.

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

## Step 10 – Contributions

You may contribute to only the following funds and cannot change the amount you contributed after the return is filed.

If you have overpaid tax available on line 58, the amount you contribute must be subtracted from your overpaid tax available. If you have tax due on line 59, your total contributions must be added to your tax due.

### Line 60 – Contribution to California Seniors Special Fund

If you and/or your spouse are 65 years of age or older and claim the Senior Exemption Credit on line 9, you may make a combined total contribution of up to \$160 or \$80 per spouse. Contributions entered on line 60 will be distributed to the Area Agency of Aging Councils (TACC) to provide advice on and sponsorship of Senior Citizen issues. Any excess contributions not required by TACC will be distributed to senior citizen service organizations throughout California for meals, adult day care, and transportation.

Use the worksheet below to figure your contribution.

1. If you contribute, enter \$80; if you and your spouse contribute, enter \$160 ..... **1** \_\_\_\_\_
2. Enter the ratio from Long Form 540NR, line 25a ..... **2** \_\_\_\_\_
3. Contribution amount. Multiply line 1 by line 2. Enter the result (rounded to the nearest whole dollar) here ..... **3** \_\_\_\_\_

You may contribute any amount up to the amount on line 3. Enter your contribution on line 60.

### Voluntary Contributions

You may make voluntary contributions of \$1 or more in whole dollar amounts for line 60 to line 70. The amount you contribute either reduces your overpaid tax or increases your tax due. You may contribute only to the funds listed and cannot change the amount you contributed after you file your return.

### Line 61 – Alzheimer’s Disease/Related Disorders Fund

Contributions entered on line 61 will be used to conduct a program for researching the cause and cure of Alzheimer’s disease and related disorders and research into the care and treatment of persons suffering from dementing illnesses.

### Line 62 – California Fund for Senior Citizens

California Fund for Senior Citizens. Contributions entered on line 62 will provide support for the California Senior Legislature (CSL). The CSL are volunteers who prioritize statewide senior related legislative proposals in areas of health, housing, transportation, and community services. Any excess contributions not required by the CSL will be distributed to senior citizen service organizations throughout California.

### Line 63 – Rare and Endangered Species Preservation Program

Contributions entered on line 63 will be used to help protect and conserve California’s many threatened and endangered species and the wild lands that they need to survive, for the enjoyment and benefit of you and future generations of Californians.

### Line 64 – State Children’s Trust Fund for the Prevention of Child Abuse

Contributions entered on line 64 will be used to fund programs for the prevention, intervention, and treatment of child abuse and neglect.

### Line 65 – California Breast Cancer Research Fund

Contributions entered on line 65 will fund research toward preventing and curing breast cancer. Breast cancer is the most common cancer to strike women in California. It kills 4,000 California women each year.

Contributions also fund research on prevention and better treatment, and keep doctors up to date on research progress. For more about the research your contributions support, please see our Website: [www.ucop.edu/srphome/bcrp/](http://www.ucop.edu/srphome/bcrp/). Your contribution can help make breast cancer a disease of the past.

### Line 66 – California Firefighters’ Memorial Fund

Contributions entered on line 66 will be used to construct a memorial on the grounds of the State Capitol honoring hundreds of firefighters who have died protecting our communities, our families and our dreams. When the alarm sounded, these brave men and women answered the call with their lives. Their sacrifices, and the sacrifices of their families, deserve to be remembered.

### Line 67 – Emergency Food Assistance Program Fund

Contributions entered on line 67 will help local food banks feed California’s hungry. Your contribution will fund the purchase of much-needed food for delivery to food banks, pantries, and soup kitchens throughout the state. The State Department of Social Services will monitor its distribution to ensure the food is given to those most in need.

### Line 68 – California Peace Officer Memorial Foundation Fund

Contributions entered on line 68 will permit the Foundation to preserve the memory of our fallen comrades by maintaining a Memorial on State Capitol grounds, and updating it annually to memorialize officers killed in the line of duty each year. Beginning with California statehood, peace officers have laid their lives on the line to protect law-abiding citizens. Since then over 1,300 courageous peace officers have fallen in the line of duty. The California Peace Officer Memorial Foundation is a non-profit charitable organization committed to honoring those heroes by assisting their survivors by offering moral support, counseling, and financial support, including academic scholarships for the children of those officers who have made the supreme sacrifice. On behalf of all of us and the law-abiding citizens of California we thank you for your participation.

### Line 69 – Lupus Foundation of America, California Chapters Fund

Contributions entered on line 69 will provide financial assistance to the California-based operating chapters of the Lupus Foundation of America. Funding will go for public education and research grants to find ways of combating and hopefully finding a cure for Lupus. Lupus itself is a chronic, autoimmune disease that causes the immune system to become hyperactive. The immune system loses its ability to distinguish between foreign substances and its own cells and tissues. The immune system directs antibodies against a lupus sufferer’s own body. This causes debilitating pain, organ failure, extreme exhaustion, skin rashes, fevers, hair loss, and even death. Approximately 200,000 Californians suffer from the disease; 90% of them are women.

### Line 70 – Asthma and Lung Disease Research Fund

Contributions entered on line 70 will support the American Lung Association of California’s scientific peer-reviewed research program that provide grants to develop and advance the understanding and causes of lung disease, the third leading cause of death. Find out more at: [www.californialung.org](http://www.californialung.org).

### Line 73 – Total Contributions

Add line 60 through line 70. Enter the result on line 73. If you show an amount on line 58, you must subtract the amount you contribute from the amount of overpaid tax. If you show an amount on line 59, 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 74 – Refund or No Amount Due

If you did not enter an amount on line 73, enter the amount from line 58 on line 74. This is the amount that will be refunded to you. If it is less than \$1, you must attach a written statement to your Long Form 540NR requesting the refund. To have your refund directly deposited into your bank account, see Step 13, Direct Deposit (Refund Only) on page 26.

If you entered an amount on line 73, subtract it from the amount on line 58. If the result is zero or more, enter it on line 74. Then skip to the instructions for line 76.



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If the result is less than zero, your contributions are more than your overpaid tax available on line 58. In this case, do not enter an amount on line 74. Instead, enter the result on line 75 and see the instructions for line 75.

**Want a fast refund?** Get your refund in 10 days or less when you e-file your return!

### Line 75 – Amount You Owe

If you did not enter an amount on line 73, enter the amount from line 59 on line 75. This is the amount you owe with your Long Form 540NR.

If you entered an amount on line 73, add that amount to the amount on line 59. Enter the result on line 75. This is the amount you owe with your Long Form 540NR.

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

Do not combine your 2002 tax payment and any 2003 estimated tax payment in the same check. You must prepare two separate checks and mail each in a separate envelope.

**Paying by Check or Money Order** – 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 “2002 Long Form 540NR” on your check or money order. Attach your check or money order to your return. See page 5, Helpful Hints, “Assembling your return.” A penalty may be imposed if your check is returned by your bank for insufficient funds.

**Note:** If you enter an amount on line 76 or line 77, see the instructions for line 78 for information about how to prepare your check.

#### Other Payment Options

- **Electronic Funds Withdrawal** – Instead of paying by check you can use this convenient option if you e-file. Simply provide your bank information, amount you want to pay, and the date you want the balance due to be withdrawn from your account. Your tax preparation software will offer this option.
- **Credit Card** – You may use your Discover/NOVUS, Mastercard, Visa, or American Express card to pay your tax. If you pay by credit card, do not mail this voucher to us. Call (800) 272-9829 or visit our Website at [www.officialpayments.com](http://www.officialpayments.com), and use the jurisdiction code 1555. Official Payments Corp. charges a convenience fee for using this service.

**Paying by Credit Card** – Whether you e-file or file by mail, you can use your Discover/Novus, Mastercard, Visa, or American Express card to pay your personal income taxes (tax return balance due, extension payment, estimated tax payment, or tax due with bill notice). **There is a convenience fee for this service.** This fee is paid directly to Official Payments Corp. based on the amount of your tax payment.

#### Convenience Fee

- 2.5% of the tax amount charged (rounded to the nearest cent)
- Minimum fee: \$1

**Example:** Tax Payment = \$753.56 Convenience Fee = \$18.84

#### When will my payments be effective?

Your payment is effective on the date you charge it.

#### What if I change my mind?

If you pay your tax liability by credit card and later reverse the credit card transaction, you may be subject to penalties, interest, and other fees imposed by the Franchise Tax Board for nonpayment or late payment of your tax liability.

#### How do I use my credit card to pay my income tax bill?

Once you have determined the type of payment and how much you owe, you should have the following information ready:

- Your Discover/Novus, Mastercard, Visa, or American Express card
- Credit card number
- Expiration date
- Amount you are paying
- Your and your spouses' SSN
- First 4 letters of your and your spouses' last name
- Tax year
- Home phone number
- ZIP Code for address where your monthly credit card bill is sent
- FTB Jurisdiction Code: 1555

Go to the Official Payments Corp. Website

([www.officialpayments.com](http://www.officialpayments.com)) and select Payment Center, or use the toll free number at (800) 2PAY-TAX or (800) 272-9829. Follow the recorded instructions. Official Payments Corp. will tell you the convenience fee before you complete your transaction. You can decide whether to complete the transaction at that time.

Payment Date : \_\_\_\_\_ Confirmation Number: \_\_\_\_\_

If you cannot pay the full amount shown on line 75 with your return, you may request monthly payments. See page 27, Question 4.

## 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 56 or increase the amount on line 59 by any penalty or interest amounts.

### Line 76 – Interest and Penalties

Enter on line 76 the amount of interest and penalties.

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

**Late Filing of Return.** The maximum total penalty is 25% of the tax not paid if the return is filed after October 15, 2003. 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.** Other penalties can be imposed for a check returned for insufficient funds, negligence, substantial understatement of tax, and fraud.

### Line 77 – Underpayment of Estimated Tax

If line 59 is \$200 (\$100 if married filing separately) 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 2002 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 77 and fill in the correct circle on line 77. You must complete and attach the form if you claim a waiver, use the annualized income installment method, or pay tax according to the schedule for farmers and fishermen, even if you do not owe a penalty.

See "Important due dates" on page 6 for more information on how to avoid the penalty.

**Note:** There will be a waiver of penalties imposed for the underpayment of tax with respect to any law enacted during the 2002 tax year. To request a waiver of underpayment of estimated tax penalty, see form FTB 5805, Underpayment of Estimated tax by individuals.

### Line 78 – Total Amount Due

Is there an amount on line 75?

**Yes** Add line 75, line 76, and line 77. Enter the result here and make your check or money order for this amount.

**No** Go to the next question.

Is there an amount on line 74?

**Yes** Add line 76 and line 77. If the result is:

- Less than line 74, your refund will be reduced by this amount when your return is processed. Do not enter an amount on line 78.
- More than line 74, subtract line 74 from it and enter the result. Make your check or money order for this amount.

**No** Add line 76 and line 77, enter the result, and make your check or money order for this amount.

### Line 79 – 2003 Tax Forms

If your Long Form 540NR is prepared by someone else, or if you do not need forms mailed to you next year, fill in the circle on line 79.

## Step 13 — Direct Deposit (Refund Only)

It's fast, safe, and convenient to have your refund directly deposited into your bank account.

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



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

**Caution:** Do not attach a voided check or deposit slip to your return.

John Doe  
Mary Doe  
1234 Main Street  
Anytown, CA 99999

PAY TO THE ORDER OF \_\_\_\_\_ \$ \_\_\_\_\_

ANYTOWN BANK  
Anytown, CA 99999

For \_\_\_\_\_

Routing number: 250250025  
Account number: 202020

Do not include the check number

1234

**Note:** The Franchise Tax Board is not responsible when a financial institution rejects a direct deposit. If the bank or financial institution rejects the direct deposit due to an error in the routing number, the Franchise Tax Board will issue a paper check.

## 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.

**Joint Return.** If you file a joint return, both you and your spouse are generally responsible for the tax and any interest or penalties due on the return. This means that if one spouse does not pay the tax due, the other spouse may have to pay the tax due. See Innocent Spouse Relief, on page 57.

**Paid Preparer's Information.** If you pay a person to prepare your Long Form 540NR, that person must sign and complete the area at the bottom of Side 2 including an identification number (social security number, FEIN, or PTIN). 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.

**Power of Attorney.** Although another person may have prepared your return, he or she is not automatically granted access to your tax information in future dealings with us. At some point, you may wish to designate someone to act on your behalf in matters related or unrelated to this tax return (e.g., an audit examination). To protect your privacy, you must submit to us a legal document called a "Power of Attorney" authorizing another person to discuss or receive personal information about your income tax records.

For more information, get form FTB 1144 (pamphlet) and FTB 3520 (POA form), available at [www.ftb.ca.gov](http://www.ftb.ca.gov).

**Check Your Social Security Number(s).** Make sure that you have written your social security number(s) in the spaces provided at the top of Long Form 540NR in "Step 1a." Make sure they are entered in the same order as both names.

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

If you cannot get a copy of your Form W-2, you must complete form FTB 3525, Substitute for Form W-2, Wage and Tax Statement, or Form 1099-R, Distributions from Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc. See "Order Forms and Publications" on page 60.

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

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

See page 5, Helpful Hints, "Assembling your return" for more information.

### Mailing Addresses

**If you have a refund,** or if you have no amount due, mail your return to:

FRANCHISE TAX BOARD  
PO BOX 942840  
SACRAMENTO CA 94240-0002

**If you owe,** mail your return to:

FRANCHISE TAX BOARD  
PO BOX 942867  
SACRAMENTO CA 94267-0001