

2014 Nonresident Group Return Schedule

1067A

Attach this schedule to your California group Form 540NR.

S Corporation/Partnership/Limited Liability Company name

FEIN

DBA

CA corporation or CA Secretary of State file no.

Part I Electing Nonresident Individuals (Shareholders/Partners/Members) Included in the Group Nonresident Return (Use additional sheet(s) if necessary)

Note: Column (a) and (b) - If the nonresident individual has a spouse/RDP, include the spouse's/RDP's information in both columns.

Column (c) - Enter the individual's distributive share of California source income from the business entity's taxable year ending in 2014.

Column (d) - Amount of deferred compensation deduction. See FTB Pub. 1067, Section H, for more information.

Column (g) - Tax credit allowable. See FTB Pub. 1067, Section H, for more information.

Column (h) - If the nonresident individual's CA total taxable income from all sources is more than \$1 million, then enter "Y" for yes or "N" for no.

Column (i) - See Schedule 1067A Instructions, Part I, for more information.

Table with 11 columns: (a) SSN or ITIN, (b) First name, MI, Last name, (c) Total CA source income, (d) Deferred compensation, (e) CA source income less deferred compensation, (f) Col. (e) x 12.3%, (g) Credit, (h) Enter "Y" or "N", (i) Mental Health Services Tax, (j) Total tax col. (f) - col. (g) + col. (i). Includes a total row at the bottom.

Corporation name			FEIN		CA corporation or CA Secretary of State file number					
DBA										
Part II – Electing Nonresident Directors Included in the Group Nonresident Return (Use additional sheets if necessary.) Note: Column (h) – If the nonresident director's CA total taxable income from all sources is more than \$1 million, then enter "Y" for yes or "N" for no. Column (i) – Mental Health Services Tax. See General Information, for more information.										
(a) Director's SSN or ITIN	(b) Director's Name	(c) Director's Form 1099 income	(d) Director's Form W-2 Income	(e) Total (c) + (d)	(f) Net tax col. (e) x 12.3%	(g) No credits allowed	(h) Enter "Y" or "N"	(i) Mental Health Services Tax If "Yes" in column (h), then multiply col. (e) x 1%	(j) Total tax col. (f) + col. (i)	(k) CA Wage Withholding Reported on Form W-2 (or CA SCH W-2)
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2. Total of Part II				<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. Grand Total (Part I plus Part 2)				<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>