

2015

Alternative Minimum Tax and Credit Limitations — Residents

P (540)

Attach this schedule to Form 540.

Name(s) as shown on Form 540

Your SSN or ITIN

Part I Alternative Minimum Taxable Income (AMTI) Important: See instructions for information regarding California/federal differences.

Form with 21 numbered lines for Alternative Minimum Taxable Income (AMTI) calculations, including deductions for medical expenses, taxes, and other adjustments.

Part II Alternative Minimum Tax (AMT)

Form with 6 numbered lines for Alternative Minimum Tax (AMT) calculations, including exemption amount and final tax calculation.

Part III Credits that Reduce Tax Note: Be sure to attach your credit forms to Form 540.

1	Enter the amount from Form 540, line 35.	<input checked="" type="radio"/>	1	_____	00
2	Enter the tentative minimum tax from Side 1, Part II, line 24.	<input checked="" type="radio"/>	2	_____	00
		(a)	(b)	(c)	(d)
		Credit amount	Credit used this year	Tax balance that may be offset by credits	Credit carryover
Section A – Credits that reduce excess tax.					
3	Subtract line 2 from line 1. If zero or less enter -0- and see instructions. This is your excess tax which may be offset by credits.			<input checked="" type="radio"/>	
3					
A1 Credits that reduce excess tax and have no carryover provisions.					
4	Code: 162 Prison inmate labor credit (FTB 3507)		<input checked="" type="radio"/>		
4					
5	Code: 232 Child and dependent care expenses credit (FTB 3506)		<input checked="" type="radio"/>		
5					
A2 Credits that reduce excess tax and have carryover provisions. See instructions.					
6	Code: <input type="radio"/> _____ Credit Name: _____		<input checked="" type="radio"/>		<input checked="" type="radio"/>
6					
7	Code: <input type="radio"/> _____ Credit Name: _____		<input checked="" type="radio"/>		<input checked="" type="radio"/>
7					
8	Code: <input type="radio"/> _____ Credit Name: _____		<input checked="" type="radio"/>		<input checked="" type="radio"/>
8					
9	Code: <input type="radio"/> _____ Credit Name: _____		<input checked="" type="radio"/>		<input checked="" type="radio"/>
9					
10	Code: 188 Credit for prior year alternative minimum tax.	<input checked="" type="radio"/>	<input checked="" type="radio"/>		<input checked="" type="radio"/>
10					
Section B – Credits that may reduce tax below tentative minimum tax.					
11	If Part III, line 3 is zero, enter the amount from line 1. If line 3 is more than zero, enter the total of line 2 and the last entry in column (c).			<input checked="" type="radio"/>	
11					
B1 Credits that reduce net tax and have no carryover provisions.					
12	Code: 170 Credit for joint custody head of household.		<input checked="" type="radio"/>		
12					
13	Code: 173 Credit for dependent parent		<input checked="" type="radio"/>		
13					
14	Code: 163 Credit for senior head of household		<input checked="" type="radio"/>		
14					
15	Nonrefundable renter's credit		<input checked="" type="radio"/>		
15					
B2 Credits that reduce net tax and have carryover provisions. See instructions.					
16	Code: <input type="radio"/> _____ Credit Name: _____		<input checked="" type="radio"/>		<input checked="" type="radio"/>
16					
17	Code: <input type="radio"/> _____ Credit Name: _____		<input checked="" type="radio"/>		<input checked="" type="radio"/>
17					
18	Code: <input type="radio"/> _____ Credit Name: _____		<input checked="" type="radio"/>		<input checked="" type="radio"/>
18					
19	Code: <input type="radio"/> _____ Credit Name: _____		<input checked="" type="radio"/>		<input checked="" type="radio"/>
19					
B3 Other state tax credit.					
20	Code: 187 Other state tax credit		<input checked="" type="radio"/>		
20					
Section C – Credits that may reduce alternative minimum tax.					
21	Enter your alternative minimum tax from Side 1, Part II, line 26.			<input checked="" type="radio"/>	
21					
22	Code: 180 Solar energy credit carryover from Section B2, column (d)		<input checked="" type="radio"/>		<input checked="" type="radio"/>
22					
23	Code: 181 Commercial solar energy credit carryover from Section B2, column (d)		<input checked="" type="radio"/>		<input checked="" type="radio"/>
23					
24	Adjusted AMT. Enter the balance from line 23, column (c) here and on Form 540, line 61			<input checked="" type="radio"/>	
24					

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