

2022

Alternative Minimum Tax and Credit Limitations — Nonresidents or Part-Year Residents

P (540NR)

Attach this schedule to Form 540NR.

Name(s) as shown on Form 540NR

Your SSN or ITIN

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

1	If you itemized deductions, go to line 2. If you did not itemize deductions, enter your standard deduction from Form 540NR, line 18, and go to line 6.	<input type="radio"/> 1	_____	00
2	Medical and dental expenses. Enter the smaller of federal Schedule A (Form 1040), line 4, or 2½% (.025) of federal Form 1040 or 1040-SR, line 11. See instructions.	<input type="radio"/> 2	_____	00
3	Personal property taxes and real property taxes. See instructions.	<input type="radio"/> 3	_____	00
4	Certain interest on a home mortgage not used to buy, build, or improve your home. See instructions	<input type="radio"/> 4	_____	00
5	Miscellaneous itemized deductions. See instructions	<input type="radio"/> 5	_____	00
6	Refund of personal property taxes and real property taxes. See instructions.	<input type="radio"/> 6	(_____)	00
Do not include your state income tax refund on this line.				
7	Investment interest expense adjustment. See instructions.	<input type="radio"/> 7	_____	00
8	Post-1986 depreciation. See instructions.	<input type="radio"/> 8	_____	00
9	Adjusted gain or loss. See instructions	<input type="radio"/> 9	_____	00
10	Incentive stock options (ISOs) and California qualified stock options (CQSOs). See instructions	<input type="radio"/> 10	_____	00
11	Passive activities adjustment. See instructions	<input type="radio"/> 11	_____	00
12	Beneficiaries of estates and trusts. Enter the amount from Schedule K-1 (541), line 12a	<input type="radio"/> 12	_____	00
13	Other adjustments and preferences. Enter the amount, if any, for each item, a through l. See instructions.			
a	Circulation expenditures.	<input type="radio"/> a	_____	00
b	Depletion	<input type="radio"/> b	_____	00
c	Installment sales	<input type="radio"/> c	_____	00
d	Intangible drilling costs	<input type="radio"/> d	_____	00
e	Long-term contracts.	<input type="radio"/> e	_____	00
f	Loss limitations	<input type="radio"/> f	_____	00
g	Mining costs.	<input type="radio"/> g	_____	00
h	Patron's adjustment	<input type="radio"/> h	_____	00
i	Pollution control facilities.	<input type="radio"/> i	_____	00
j	Research and experimental costs	<input type="radio"/> j	_____	00
k	Tax shelter farm activities.	<input type="radio"/> k	_____	00
l	Related adjustments.	<input type="radio"/> l	_____	00
	Add amounts on line a through line l, and enter total here.	<input type="radio"/> 13	_____	00
14	Total Adjustments and Preferences. Combine line 1 through line 13	<input type="radio"/> 14	_____	00
15	Enter taxable income from Form 540NR, line 19. See instructions	<input type="radio"/> 15	_____	00
16	Net operating loss (NOL) deduction from Schedule CA (540NR), Part II, Section B, line 9b1, line 9b2, and line 9b3, column B. Enter as a positive amount	<input type="radio"/> 16	_____	00
17	AMTI exclusion. See instructions.	<input type="radio"/> 17	(_____)	00
18	If your federal adjusted gross income (AGI) is less than the amount for your filing status (listed below), skip this line and go to line 19. If you itemized deductions and your federal AGI is more than the amount for your filing status, see instructions	<input type="radio"/> 18	(_____)	00
	Single or married/RDP filing separately \$229,908			
	Married/RDP filing jointly or qualifying surviving spouse/RDP . . \$459,821			
	Head of household. \$344,867			
19	Combine line 14 through line 18	<input type="radio"/> 19	_____	00
20	Alternative minimum tax NOL deduction. See instructions	<input type="radio"/> 20	_____	00
21	Alternative Minimum Taxable Income. Subtract line 20 from line 19 (if married/RDP filing separately and line 21 is more than \$436,827, see instructions).	<input type="radio"/> 21	_____	00

Part II Alternative Minimum Tax (AMT)**22 Exemption Amount.** (If this schedule is for certain children under age 24, see instructions.)**If your filing status is:****And line 21 is not over:****Enter on line 22:**

Single or head of household	\$317,062	\$84,550	}.....● 22	00
Married/RDP filing jointly or qualifying surviving spouse/RDP	\$422,750	\$112,734		
Married/RDP filing separately	\$211,371	\$56,364		

If Part I, line 21 is more than the amount shown above for your filing status, see instructions.

- 23** Subtract line 22 from Part I, line 21. If zero or less, enter -0-. See instructions.● 23 00
- 24** Total Tentative Minimum Tax (TMT). Multiply line 23 by 7% (.07)● 24 00
- 25** California adjusted gross income (AGI) from Schedule CA (540NR), Part IV, line 1.● 25 00
- 26** NOL adjustment, if any, included on Schedule CA (540NR), Part II, Section B, line 9b1, line 9b2, and line 9b3, column E.
Enter as a positive number.● 26 00
- 27** Alternative Minimum Tax Income (AMTI) exclusion. See instructions● 27 (00)
- 28** Combine line 25 through line 27● 28 00

29 Adjustments and Preferences. See instructions before completing.

a Investment interest expense●	00	j Intangible drilling costs●	00
b Post-1986 depreciation●	00	k Long-term contracts●	00
c Adjusted gain or loss●	00	l Loss limitations●	00
d Incentive stock options and QSOs●	00	m Mining costs●	00
e Passive activities●	00	n Patron's adjustment●	00
f Beneficiaries of estates & trusts●	00	o Pollution control facilities●	00
g Circulation expenditures●	00	p Research and experimental costs ...●	00
h Depletion●	00	q Tax shelter farm activities●	00
i Installment sales●	00	r Related adjustments●	00

Add amounts on line a through line r, and enter total here.● 29 00

- 30** Combine line 28 and line 29● 30 00
- 31** California Alternative Minimum Tax (AMT) net operating loss (NOL) deduction. See instructions.● 31 00
- 32 California AMT AGI.** Subtract line 31 from line 30. If you did not itemize deductions, enter the result here and on line 40 and skip line 33 through line 39. If you itemized deductions, enter the result here and continue to line 33.● 32 00
- 33** Itemized deductions (before federal AGI limitation and proration). Enter the amount from Schedule CA (540NR), Part III, line 28● 33 00

34 Itemized deductions included in Part I.

a Medical and dental expense, enter amount from Part I, line 2●	00	a	00
b Personal property taxes and real property taxes, enter amount from Part I, line 3.●	00	b	00
c Interest on home mortgage, enter amount from Part I, line 4●	00	c	00
d Miscellaneous itemized deductions, enter amount from Part I, line 5●	00	d	00
e Investment interest expense adjustment, enter amount from Part I, line 7●	00	e	00

Combine amounts on line a through line e, and enter total here● 34 (00)

- 35** Total AMT Itemized Deductions. Combine line 33 and line 34● 35 00
- 36** Total AMTI. Enter the amount from Part I, line 21● 36 00
- 37 Total AMT AGI.** Add line 35 and line 36● 37 00
- 38** AMT Itemized Deduction Percentage. Divide line 32 by line 37. Do not enter more than 1.0000● 38
- 39** Prorated AMT Itemized Deductions. Multiply line 35 by line 38● 39 00
- 40 California AMTI.** Subtract line 39 from line 32● 40 00
- 41** Total TMT. Enter the amount from line 24● 41 00
- 42** California AMT Rate. Divide line 41 by amount from Part I, line 21● 42
- 43** California TMT. Multiply line 40 by line 42● 43 00
- 44** Regular Tax. Enter the amount from Form 540NR, line 37● 44 00
- 45 Alternative Minimum Tax.** Subtract line 44 from line 43. If zero or less, enter -0- here and on Form 540NR, line 71.
Continue to Part III to figure your allowable credits. (If you have a carryover credit for solar energy or commercial solar energy, also enter the result on Side 3, Part III, Section C, line 23 or 24). If you make estimated tax payments for taxable year 2023, enter amount from line 45 on the 2023 Form 540-ES, California Estimated Tax Worksheet, line 16● 45 00

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

1	Enter the amount from Form 540NR, line 42	1	00
2	Enter the tentative minimum tax from Side 2, Part II, line 43	2	00

	(a) Credit amount	(b) Credit used this year	(c) Tax balance that may be offset by credits	(d) Credit carryover
Section A – Credits that reduce excess regular 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			
3				
A1 Credits that reduce excess tax and have no carryover provisions.				
4	Code: 162 Prison inmate labor credit (FTB 3507)	4		
5	Code: 232 Child and dependent care expenses credit (FTB 3506)	5		
A2 Credits that reduce excess tax and have carryover provisions. See instructions.				
6	Code: Credit Name:	6		
7	Code: Credit Name:	7		
8	Code: Credit Name:	8		
9	Code: Credit Name:	9		
10	Code: 188 Credit for prior year alternative minimum tax	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)			
11				
B1 Credits that reduce net tax and have no carryover provisions.				
12	Code: 170 Credit for joint custody head of household Credit from Form 540NR, X Percentage =	12		
13	Code: 173 Credit for dependent parent Credit from Form 540NR, X Percentage =	13		
14	Code: 163 Credit for senior head of household Credit from Form 540NR, X Percentage =	14		
15	Code: 159 Nonrefundable renter's credit	15		
B2 Credits that reduce net tax and have carryover provisions. See instructions.				
16	Code: Credit Name:	16		
17	Code: Credit Name:	17		
18	Code: Credit Name:	18		
19	Code: Credit Name:	19		
B3 Other state tax credit				
20	Code: 187 Other state tax credit	20		
B4 Pass-through entity elective tax credit. See instructions.				
21	Code: 242 Pass-through entity elective tax credit	21		
Section C – Credits that may reduce alternative minimum tax.				
22	Enter your alternative minimum tax from Side 2, Part II, line 45			
22				
23	Code: 180 Solar energy credit carryover from Section B2, column (d)	23		
24	Code: 181 Commercial solar energy credit carryover from Section B2, column (d)	24		
25	Adjusted AMT. Enter the balance from line 24, column (c) here and on Form 540NR, line 71			
25				