540-ES Form 1 at bottom of page

2023	Estimated Tax for Individuals	File and Pay by April 18, 2023	540-ES
TAXABLE YEAR	CAUTION: You may be required to pay electronically. See instructions.	_	CALIFORNIA FORM
DETACH	HERE IF NO PAYMENT IS DUE, DO I	NOT MAIL THIS FORM	. DETACH HERE

payments up to one year in advance.

Do not mail this form if you use Web Pay.

Use Web Pay and enjoy the ease of our free online payment service. Go to **ftb.ca.gov/pay** for more information. You can schedule your

Fiscal year filers, enter year ending month: Year 2024 Your first name Your SSN or ITIN Last name Spouse's/RDP's SSN or ITIN If joint payment, spouse's/RDP's first name Initial Last name Address (number and street, PO box or PMB no.) Apt no./ste. no. **Payment Form** City (If you have a foreign address, see instructions) ZIP code 1 Do not combine this payment with payment of your tax due for 2022. Using black or blue ink, make your check or money order payable to the "Franchise Tax Board." Write your social security number or individual taxpayer identification number and "2023 Form 540-ES" on it. Mail this form and your check or money order to: FRANCHISE TAX BOARD, PO BOX 942867, SACRAMENTO CA 94267-0008. Amount of payment If no payment is due, do not mail this form. 00 See Section A of the instructions for an alternative to using this form.

ONLINE SERVICES:

2023 Estimated Tax for Individuals File and Pay by June 15, 2023 540-ES

iscal year file our first name	ore enter year anding											
our first name	ers, eriter year eridirig	month	:	Year 2	2024							
		Initia	Last name	•						Your SSN or ITIN		
f joint payment, s	spouse's/RDP's first name	Initia	Last name	.						Spouse's/RDP's	SSN or ITIN	
Address (number and street, PO box or PMB no.)										Apt no./ste. no.	Payment	
City (If you have	a foreign address, see instru	ctions)					State	ZIP cod	е	1	Form 2	
the "Franchise Ta	is payment with payment of you ax Board." Write your social secu	rity numbe	er or individual t	taxpayer ide	ntification nui	mbér and "2023 l	orm 540-ES"		Amoi	unt of payment	I	
no payment is du	our check or money order to: FRA ue, do not mail this form. ne instructions for an alternative			O BOX 9420	507, SACHAII	IENTO CA 9420	7-0006.				_ 00	
For Pri	vacy Notice, get FTB 1131 E	:N-SP.		٦	1201	233				Form 540	-ES 2022	
				_			_					
DETACH	HHERE	"	NO PAY	MENT IS	S DUE, C	O NOT MA	AL THIS F	ORM _		DE	ETACH HERE	
ΓAXABLE YEAR	CAUTION: You may be re	equired t	o pay electro	onically. Se	e instructio	ins.				C.A	ALIFORNIA FORM	
2023	Estimated '	Tax	for In	divid	uals	File ar	nd Pav	bv Se	pt. 15			
	ers, enter year ending	month		Year 2				- ,	1			
our first name		Initia	Last name)						Your SSN or ITIN		
f joint payment, spouse's/RDP's first name Initial Last name								Spouse's/RDP's SSN or ITIN				
Address (number and street, PO box or PMB no.)									Apt no./ste. no.	Payment		
City (If you have a foreign address, see instructions)							State	ZIP cod	le	Form 3		
	is payment with payment of you ax Board." Write your social secu								Amo	unt of payment		
ine Franchise i a		NCHISE 1	AX BOARD, P	O BÓX 9428	867, SACRAN	MENTO CA 9426	7-0008.				_ 00	
ail this form and yo no payment is du	our check or money order to: FRA ue, do not mail this form.											
lail this form and yo no payment is du	our check or money order to: FRA	e to using	this form.									
lail this form and you no payment is du see Section A of the	our check or money order to: FRA ue, do not mail this form.		this form.	7	1201	233				Form 540		
lail this form and you no payment is du see Section A of the	our check or money order to: FRA ue, do not mail this form. ue instructions for an alternative	:N-SP.		٦				-			-ES 2022	
lail this form and yo no payment is du ee Section A of th	our check or money order to: FRA ue, do not mail this form. ue instructions for an alternative	:N-SP.] MENT IS			AIL THIS F	ORM _		Form 540	-ES 2022	
lail this form and yo no payment is duee Section A of the	our check or money order to: FRA ue, do not mail this form. ne instructions for an alternative vacy Notice, get FTB 1131 E	:N-SP. 	- NO PAYI		S DUE, C	OO NOT MA	AIL THIS F	FORM _		DE	-ES 2022	
lail this form and yo no payment is duee Section A of the	our check or money order to: FRA ue, do not mail this form. ne instructions for an alternative vacy Notice, get FTB 1131 E	i N-SP. II	NO PAYI	onically. Se	S DUE, D	OO NOT MA				DE	-ES 2022	
rop payment is du iee Section A of th For Pri DETACH TAXABLE YEAR 2023 Fiscal year file	our check or money order to: FRA Le, do not mail this form. Le instructions for an alternative Vacy Notice, get FTB 1131 E HHERE	in-sp. II equired t Tax month	NO PAYIO PAY	onically. Se divid Year 2	S DUE, D e instruction	OO NOT MA				DE 	ETACH HERE	
raxable year file and year file	caucheck or money order to: FRA Le, do not mail this form. Le instructions for an alternative Le vacy Notice, get FTB 1131 E HHERE CAUTION: You may be re-	in-sp. II equired t	NO PAYIO PAY	onically. Se divid Year 2	S DUE, D e instruction	OO NOT MA				DE	ETACH HERE	
rail this form and you no payment is due ee Section A of the For Prival DETACH TAXABLE YEAR 2023 Fiscal year fill four first name	caucheck or money order to: FRA Le, do not mail this form. Le instructions for an alternative Le vacy Notice, get FTB 1131 E HHERE CAUTION: You may be re-	in-sp. II equired t Tax month	F NO PAYI	divid	S DUE, D e instruction	OO NOT MA				DE 	ETACH HERE ALIFORNIA FORM 540-ES	
raxable year fill four first name	cour check or money order to: FRA ue, do not mail this form. The instructions for an alternative vacy Notice, get FTB 1131 E HHERE CAUTION: You may be re- Estimated ers, enter year ending	equired t Tax month Initia	F NO PAYI	divid	S DUE, D e instruction	OO NOT MA				DE	ETACH HERE ALIFORNIA FORM 540-ES SSN or ITIN Payment	
ropayment is du ine Section A of the For Priv DETACH TAXABLE YEAR 2023 Fiscal year fill four first name f joint payment, s Address (number	cour check or money order to: FRA Le, do not mail this form. Le instructions for an alternative Vacy Notice, get FTB 1131 E HHERE CAUTION: You may be reconstructed. Estimated Lers, enter year ending Espouse's/RDP's first name	EN-SP. Illequired to the transfer of the tran	F NO PAYI	divid	S DUE, D e instruction	OO NOT MA			ın. 16	DE	ETACH HERE ALIFORNIA FORM 540-ES	
rail this form and you no payment is due ee Section A of the For Prival DETACH TAXABLE YEAR 2023 Tiscal year fill four first name fi joint payment, saddress (number city (If you have also not combine this point payment).	caucheck or money order to: FRA Le, do not mail this form. Le instructions for an alternative Levacy Notice, get FTB 1131 E HHERE CAUTION: You may be resulted to the company of the company	equired t Tax month Initia Initia Inc.)	F NO PAYI	divid Year 2	S DUE, Due instruction	PO NOT MA	nd Pay State money order g	by Ja	n. 16	DE	ETACH HERE ALIFORNIA FORM 540-ES SSN or ITIN Payment Form 4	
For Print Payment is due ee Section A of the Print Payment is due ee Section A of the Print Payment is due ee Section A of the Print Payment is due to not combine the "Franchise Talail this form and you not combine the "Franch	caucheck or money order to: FRA Le, do not mail this form. The instructions for an alternative Levacy Notice, get FTB 1131 E HHERE CAUTION: You may be resulted the company of the company o	equired t Tax month Initia Initia Ino.) ctions)	For 2022. Using or or individual	divid Year 2	S DUE, Due instruction uals 2024	PO NOT MA	State money order rorm 540-ES"	by Ja	n. 16	CAS, 2024 Your SSN or ITIN Spouse's/RDP's : Apt no./ste. no.	ETACH HERE ALIFORNIA FORM 540-ES SSN or ITIN Payment Form 4	

Form 540-ES 2022