

California Resident Income Tax Return 1999

FORM

540

Fiscal year filers only: Enter month of year end: month _____ year 2000.

Step 1 **Name and Address**

Your first name _____ Initial _____ Last name _____

If joint return, spouse's first name _____ Initial _____ Last name _____

Present home address — number and street including PO Box or rural route _____

Apt. no. _____ PMB no. _____

City, town, or post office _____ State _____ ZIP Code _____

P
AC
A
R
RP

Step 1a **SSN**

Your social security number _____

Spouse's social security number _____

IMPORTANT: Your social security number is required.

Step 2 **Filing Status**

1 Single 2 Married filing joint return (even if only one spouse had income)

3 Married filing separate return. Enter spouse's social security number above and full name here _____

4 Head of household (with qualifying person). STOP. See instructions.

5 Qualifying widow(er) with dependent child. Enter year spouse died 19 _____

Fill in only one.

Step 3 **Exemptions**

6 If your parent (or someone else) can claim you (or your spouse, if married) as a dependent on his or her tax return, even if he or she chooses not to, fill in this circle 6

► For line 7, line 8, line 9, and line 11: Multiply the amount you enter in the box by the pre-printed dollar amount for that line.

7 **Personal:** If you filled in 1, 3, or 4 above, enter 1 in the box. If you filled in 2 or 5, enter 2 in the box. If you filled in the circle on line 6, see instructions 7 X \$72 = \$ _____

8 **Blind:** If you (or if married, your spouse) are visually impaired, enter 1; if both, enter 2 8 X \$72 = \$ _____

9 **Senior:** If you (or if married, your spouse) are 65 or older, enter 1; if both, enter 2 9 X \$72 = \$ _____

10 Add line 7 through line 9. This is your total exemption credit before the dependent exemption credit 10 **Total** \$ _____

11 **Dependents:** Enter name and relationship. Do not include yourself or your spouse. _____

 Total dependent exemption credit 11 X \$227 = \$ _____

Attach check or money order here.

Step 4 **Taxable Income**

12 State wages from your Form(s) W-2, box 17 12 _____

13 Enter federal adjusted gross income from Form 1040, line 33; Form 1040A, line 18; Form 1040EZ, line 4, or TeleFile Tax Record, line I 13 _____

14 California adjustments – subtractions. Enter the amount from Schedule CA (540), line 33, column B 14 _____
Caution: If the amount on Schedule CA (540), line 33, column B is a negative number, see instructions.

15 Subtract line 14 from line 13. If less than zero, enter the result in parentheses. See instructions 15 _____

16 California adjustments – additions. Enter the amount from Schedule CA (540), line 33, column C 16 _____
Caution: If the amount on Schedule CA (540), line 33, column C is a negative number, see instructions.

17 California adjusted gross income. Combine line 15 and line 16 17 _____

18 Enter the larger of:
 { Your California **itemized deductions** from Schedule CA (540), line 40; **OR**
 Your California **standard deduction** shown below for your filing status:
 • Married filing joint, Head of household, or Qualifying widow(er) \$5,422
 • Single or Married filing separate \$2,711
 (Dependent of someone else and filled in the circle on line 6 See instructions) 18 _____

19 Subtract line 18 from line 17. This is your taxable income. If less than zero, enter -0- 19 _____

Attach copy of your Form(s) W-2, W-2G, 1099-R, and other Forms 1099 showing California tax withheld.

Step 5 **Tax**

20 Tax. Fill in circle if from Tax Table Tax Rate Schedule FTB 3800 or FTB 3803 20 _____
Caution: If under age 14 and you have more than \$1,400 of investment income, read the line 20 instructions to see if you must attach form FTB 3800.

21 Exemption credits. If your federal AGI is more than \$119,813, see instructions. Otherwise, add line 10 and line 11 and enter the result on line 21 21 _____

22 Subtract line 21 from line 20. If less than zero, enter -0- 22 _____

23 Tax. Fill in circle if from Schedule G-1, Tax on Lump-Sum Distributions form FTB 5870A, Tax on Accumulation Distribution of Trusts 23 _____

24 Add line 22 and line 23. Continue to Side 2 24 _____

