Instructions for Form FTB 3519

Payment Voucher for Automatic Extension for Individuals

General Information

Use form FTB 3519 only if:

- You cannot file your 2003 return* by April 15, 2004; and
- You owe tax for 2003.

Use the worksheet below to determine if you owe tax.

- If you do not owe tax, there is nothing to file at this time. Do not complete or mail this voucher. But, you must file your return by October 15, 2004.
- If you owe tax, choose one of the following payment options. Be sure to pay by April 15, 2004 to avoid penalties and interest. See Penalties and Interest for more information.

Check or Money Order: Complete the payment voucher below and mail it with your check or money order to the Franchise Tax Board (FTB).

Web Payment: To make a payment online or to schedule a future payment (up to one year in advance), visit FTB's Website at **www.ftb.ca.gov** and select "Payment Options." **Do not mail** the voucher to us.

Credit Card: Use your Discover/NOVUS, MasterCard, American Express, or Visa card to pay your tax. Call (800) 272-9829 or visit the Website www.officialpayments.com, and use the jurisdiction code 1555. Official Payments Corp. charges a convenience fee for using this service. Do not mail the voucher to us.

Installment Agreement: Can't pay the full amount you owe? Visit our Website at www.ftb.ca.gov or get FTB 3567, Installment Agreement Request Booklet.

Name and Address. Be sure to fill in your complete name(s), address, and social security number(s) on the voucher. If you lease a private mailbox (PMB) from a private business rather than a PO box from the United States Postal Service, include the box number in the field labeled "PMB no." in the address area.

Penalties and Interest

If you fail to pay your total tax liability by April 15, 2004, a late-payment penalty plus interest will be added to your tax due. If after April 15, 2004, you find that your estimate of tax due was too low, you should pay the additional tax as soon as possible to avoid further accumulation of penalties and interest. Pay your additional tax with another form FTB 3519 voucher. If you do not file your tax return by October 15, 2004, you will be assessed a late-filing penalty plus interest from the original due date of the return.

Taxpayers Residing or Traveling Outside the USA

If you are living or traveling outside the USA on April 15, 2004, the deadline to file your return and pay the tax is June 15, 2004. Interest will accrue from the original due date (April 15, 2004) until the date of payment. If you need additional time to file your tax return, you will be allowed an automatic six-month extension without filing a written request. To qualify for the extension, you must file your tax return by December 15, 2004. To avoid any late-payment penalties, you must pay 100% of your tax liability by June 15, 2004. When filing your tax return, be sure to attach a statement to the front indicating that you were "outside the USA on April 15, 2004."

* When you do file your 2003 return, you can e-file. Visit our Website at www.ftb.ca.gov. Otherwise, you must use Form 540A, Form 540, or Long Form 540NR. Note: If you use form FTB 3519, you may not file Form 540 2EZ or Short Form 540NR.

1	Total tax you expect to owe. This is the amount you	u expect to enter on Form 540A, line 23 ^r	; Form 540, line 37;	
	or Long Form 540NR, line 46	•		1
2	Payments and credits:			
_	a California income tax withheld (including real es	tate and nonresident withholding)	2a	
	b California estimated tax payments and amount a	σ,		
	(Note: You can check the estimated tax payment	• •	. 20	
	,	is we ve received by visiting our		
	Website at www.ftb.ca.gov)	aumanta mada with any mayiaya		
	c Other payments and credits, including any tax pa		0	
_	form FTB 3519 voucher			
	Total tax payments and credits. Add line 2a, line 2b			
4	Tax due. Is line 1 more than line 3?			
	No. Stop here. You have no tax due. DO NOT Ma for the extension.	AIL THE PAYMENT VOUCHER. Your retu	urn, when filed by October 1	5, 2004, will verify that you qualified
	Yes. Subtract line 3 from line 1. This is your tax	due. Enter the tax due amount from line	e 4 as the "Amount of paym	ent" on the form FTB 3519 voucher
	below. Fill in your name(s), address, and social s			
	or money order payable to "Franchise Tax Board	I." Also write your social security numbe	er and "2003 FTB 3519" on t	the check or money order. Mail both
	the check or money order and the voucher to: F			67-0051
		and the first of a control of a second control of the control of t	vour tay records	
	✓ Kee	ep this completed worksheet with	your lax records.	
Q.			•	DETACHLIEDE V
≫		ep this completed worksheet with O PAYMENT IS DUE, DO NOT MA	•	— — — DETACH HERE —————————————————————————————————
≽			•	— — — DETACH HERE ————
0	— DETACH HERE — — — — IF N	IO PAYMENT IS DUE, DO NOT MA	NIL THIS FORM	CALIFORNIA FORM
0	C— DETACH HERE — — — — IF N XABLE YEAR Payment Vouch	no payment is due, do not ma	•	CALIFORNIA FORM
0	C— DETACH HERE — — — — IF N XABLE YEAR Payment Vouch	no payment is due, do not ma	Calendar year	CALIFORNIA_FORM
<u>TA</u>	ABLE YEAR Payment Vouch	ner for Automatic ndividuals	NIL THIS FORM	CALIFORNIA_FORM
<u>TA</u>	CABLE YEAR Payment Vouch 2003 Extension for I	ner for Automatic ndividuals	Calendar year	CALIFORNIA FORM 3519 (PIT)
<u>TA</u> Yo	Payment Vouch 2003 Extension for I Initial Last	ner for Automatic ndividuals	Calendar year	CALIFORNIA FORM 3519 (PIT)
<u>TA</u> Yo	Payment Vouch 2003 Extension for I Initial Last	ner for Automatic ndividuals	Calendar year	CALIFORNIA FORM 3519 (PIT) Your social security number
TA You	Payment Vouch 2003 Extension for I ur first name Initial Last oint payment, spouse's first name Initial Last	ner for Automatic ndividuals	Calendar year Due April 15, 20	CALIFORNIA FORM 3519 (PIT) Your social security number Spouse's social security number
TA You	Payment Vouch 2003 Extension for I Initial Last	ner for Automatic ndividuals	Calendar year Due April 15, 20	CALIFORNIA FORM 3519 (PIT) Your social security number
TA You If jo	DETACH HERE — IF N AABLE YEAR Payment Vouch 2003 Extension for I ur first name Initial Last esent home address – number and street, PO Box, or rura	ner for Automatic ndividuals	Calendar year Due April 15, 20	CALIFORNIA FORM 3519 (PIT) Your social security number Spouse's social security number Apt. no. PMB no.
TA You If jo	Payment Vouch 2003 Extension for I ur first name Initial Last oint payment, spouse's first name Initial Last	ner for Automatic ndividuals	Calendar year Due April 15, 20	CALIFORNIA FORM 3519 (PIT) Your social security number Spouse's social security number Apt. no. PMB no.
TA You If jo	DETACH HERE — IF N AABLE YEAR Payment Vouch 2003 Extension for I ur first name Initial Last esent home address – number and street, PO Box, or rura	ner for Automatic ndividuals	Calendar year Due April 15, 20	CALIFORNIA FORM 3519 (PIT) Your social security number Spouse's social security number Apt. no. PMB no.
You If jo	Payment Vouch 2003 Extension for I ur first name Initial Last bint payment, spouse's first name Initial Last esent home address – number and street, PO Box, or rura ty, town, or post office	ner for Automatic ndividuals	Calendar year Due April 15, 20	CALIFORNIA FORM 3519 (PIT) Your social security number Spouse's social security number Apt. no. PMB no.
You If jo	Payment Vouch 2003 Extension for I ur first name Initial Last bint payment, spouse's first name Initial Last esent home address – number and street, PO Box, or rura ty, town, or post office	ner for Automatic ndividuals name	Calendar year Due April 15, 20	CALIFORNIA FORM 3519 (PIT) Your social security number Spouse's social security number Apt. no. PMB no.
You If jo	PAYMENT IS DUE, MAIL TO: FRANCHISE TAX BOARD PO BOX 942867 PAYMENT IS DUE, MAIL TO: FRANCHISE TAX BOARD PO BOX 942867	ner for Automatic ndividuals name la route	Calendar year Due April 15, 20 State	CALIFORNIA FORM 3519 (PIT) Your social security number Spouse's social security number Apt. no. PMB no.
You If jo	PAYMENT IS DUE, MAIL TO: FRANCHISE TAX BOARD	ner for Automatic ndividuals name	Calendar year Due April 15, 20 State	CALIFORNIA FORM 3519 (PIT) Your social security number Spouse's social security number Apt. no. PMB no.
TA You If jo	PAYMENT IS DUE, MAIL TO: FRANCHISE TAX BOARD PO BOX 942867 PAYMENT IS DUE, MAIL TO: FRANCHISE TAX BOARD PO BOX 942867	ner for Automatic ndividuals name la route	Calendar year Due April 15, 20 State	CALIFORNIA FORM 3519 (PIT) Your social security number Spouse's social security number Apt. no. PMB no.

TAX PAYMENT WORKSHEET FOR YOUR RECORDS