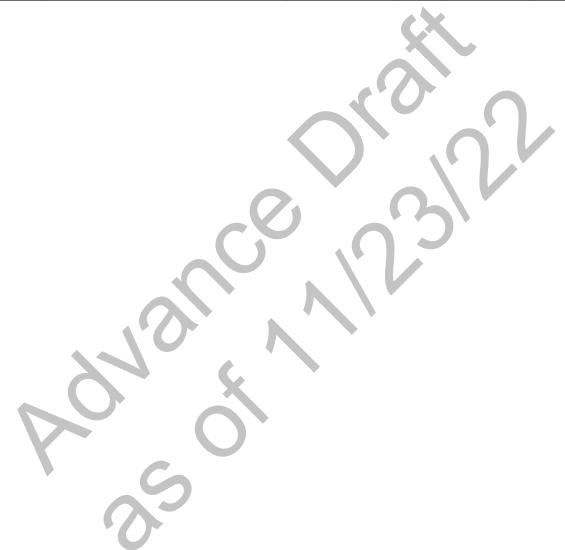
Index/ Field No.	Line/ Box No.	Description	Data Type A = Alpha N = Numeric AN = Alphanumeric X = Checkbox	Length	Value/ Comments	Special Printing Instructions on Substitute Form(s) Blank = Print in associated field
1	Header	Header Version Number	N	2	T1	
2	Header	CTP ID	N	3		
3	Gov't	Tax Year	N	4	YYYY	
4	Gov't	Form Type	N	6	797	
5	Gov't	Software Developer Version	N	3	001. Increment plus 1 for change to the barcode.	
6	Gov't	FTB Specification Version	N	3	001. See Header Fields Definitions in Publication 1098, Part II for more information.	
7		Taxpayer's First Name	A	11		
8		Taxpayer's Middle Initial	Α	1		
9		Taxpayer's Last Name	А	35		
10		Taxpayer Suffix	Α	4		
11		Taxpayer's SSN, or ITIN	N	9		
12	2	Medical and dental expenses	N	15		
13	3	Personal property taxes and real property taxes	N	15		
14	4	Certain interest on a home mortgage not used to buy, build, or improve your home	N	15		
15	5	Miscellaneous itemized deductions	N	15		
16	6	Refund of personal property taxes and real property taxes	N	15		
17	7	Investment interest expense adjustment	N	15	Special chars: -	
18	8	Post-1986 depreciation	N	15	Special chars: -	
19	9	Adjusted gain or loss	N	15	Special chars: -	
20	10	Incentive stock options and California qualified stock options (CASOs)	N	15	Special chars: -	
21	11	Passive activities adjustment	N	15	Special chars: -	
22	12	Beneficiaries of estates and trusts	N	15	Special chars: -	
23	13a	Circulation expenditures	N	15	Special chars: -	
24	13b	Depletion	N	15	Special chars: -	
25	13c	Installment sales	N	15	Special chars: -	
26	13d	Intangible drilling costs	N	15	Special chars: -	
27	13e	Long-term contracts	N	15	Special chars: -	
28	13f	Loss limitations	N	15	Special chars: -	
29	13g	Mining costs	N	15	Special chars: -	
30	13h	Patron's adjustment	N	15	Special chars: -	
31	13i	Pollution control facilities	N	15	Special chars: -	
32	13j	Research and experimental	N	15	Special chars: -	
33	13k	Tax shelter farm activities	N	15	Special chars: -	
34	131	Related adjustments	N	15	Special chars: -	

Index/ Field No.	Line/ Box No.	Description	Data Type A = Alpha N = Numeric AN = Alphanumeric X = Checkbox	Length	Value/ Comments	Special Printing Instructions on Substitute Form(s) Blank = Print in associated field
35	13	Other adjustments and preference. Enter the amount if any for each item a through,	N	15	Special chars: -	
36	14	Total adjustments and preferences	N	15	Special chars: -	
37	15	Enter taxable income from Form 540	N	15	Special chars: -	
38	16	Regular NOL deductions	N	15		
39	17	AMTI exclusion line 17	N	15		
40	18	Federal adjusted gross income	N	15		
41	19	Combine 14 through 18	N	15	Special chars: -	
42	20	AMT NOL deduction	N	15	Special chars: -	
43	21	AMTI,	N	15	Special chars: -	
44	22	Exemption amount	N	15		
45	24	Tentative minimum tax	N	15	Special chars: -	
46	25	Regular tax before credits	N	15	Special chars: -	
47	26	Alternative minimum tax	N	15		
48	Part III, Line 1	Enter the amount from 540, line 35	N	15	Special chars: -	
49	Part III, Line 2	Enter the tentative minimum tax from Part II, line 24	N	15	Special chars: -	
50	Part III, Line 3c	Excess tax that may be offset by credits	N	15		
51	Part III, Line 4b	Code: 162 Prison inmate labor, credit used	N	15		
52	Part III, Line 5b	Code: 232 Child and dependent care expenses, credit used	N	15		
53	Part III, Line 6	Code	N	3		
54	Part III, Line 6b	Credit used	N	15		
55	Part III, Line 6d	Credit carryover	N	15		
56	Part III, Line 7	Code	N	3		
57	Part III, Line 7b	Credit used	N	15		
58	Part III, Line 7d	Credit carryover	N	15		
59	Part III, Line 8	Code	N	3		
60	Part III, Line 8b	Credit used	N	15		
61	Part III, Line 8d	Credit carryover	N	15		
62	Part III, Line 9	Code	N	3		
63	Part III, Line 9b	Credit used	N	15		
64	Part III, Line 9d	Credit carryover	N	15		

Index/ Field No.	Line/ Box No.	Description	Data Type A = Alpha N = Numeric AN = Alphanumeric X = Checkbox	Length	Value/ Comments	Special Printing Instructions on Substitute Form(s) Blank = Print in associated field
65	Part III, Line 10a	Code: 188 Credit for prior year AMT, credit amount	N	15		
66	Part III, Line 10b	Code: 188 Credit for prior year AMT, credit used	N	15		
67	Part III, Line 10d	Code: 188 Credit for prior year AMT, credit carryover	N	15		
68	Part III, Line 11c	Enter the amount from line 1 or	N	15	Special chars: -	
69	Part III, Line 12b	Code: 170 Credit for joint custody head of household, credit used	N	15		
70	Part III, Line 13b	Code: 173 Credit for dependent parent, credit used	N	15		
71	Part III, Line 14b	Code: 163 Credit for senior head of household, credit used	N	15		
72	Part III, Line 15b	Nonrefundable renter's credit, credit used	N	15		
73	Part III, Line 16	Code	N	3		
74	Part III, line 16b	Credit used	N	15		
75	Part III, line 16d	Credit carryover	N	15		
76	Part III, Line 17	Code	N	3		
77	Part III, Line 17b	Credit used	N	15		
78	Part III, Line 17d	Credit carryover	N	15		
79	Part III, Line 18	Code	N	3		
80	Part III, Line 18b	Credit used	N	15		
81	Part III, Line 18d	Credit carryover	N	15		
82	Part III, Line 19	Code	N	3		
83	Part III, Line 19b	Credit used	N	15		
84	Part III, Line 19d	Credit carryover	N	15		
85	Part III, Line 20b	Code: 187 Other state tax credit, credit used	N	15		
86,	Part III, Line 21c	Enter your alternative minimum tax from Part II, line 26	N	15	Special chars: -	
87,	Part III, Line 22b	Code: 180 solar energy credit carryover used this year	N	15		
88,	Part III, Line 22d	Code: 180 solar energy credit carryover	N	15		
89,	Part III, Line 23b	Code: 181 Commercial solar energy credit carryover used this year	N	15		

F

Index/ Field No.	Line/ Box No.	Description	Data Type A = Alpha N = Numeric AN = Alphanumeric X = Checkbox	Length	Value/ Comments	Special Printing Instructions on Substitute Form(s) Blank = Print in associated field
90,	Part III, Line 23d	Code: 181 Commercial solar energy credit carryover	Ν	15		
91,	Part III, Line 24c	Adjusted AMT	N	15	Special chars: -	
92		END OF FILE	AN	5	*EOD*	



TAXABLE YEAR

2022

CALIFORNIA SCHEDULE

Alternative Minimum Tax and Credit Limitations — Residents

P (540)

$\overline{}$	ach this schedule to Form 540.								
Nan	ne(s) as shown on Form 540	7-	10			Your S	SSN or ITIN	1	
P~	rt I Alternative Minimum Taxable	Income (AMTI)	Imnorta	nt. See instructions for in:	ormation rec	narding Califo			
	If you itemized deductions, go to line	. ,				jarunig Gamo	illa/loucial ullion		
-	deduction from Form 540, line 18, an						1		00
2	Medical and dental expenses. Enter the								
	of federal Form 1040 or 1040-SR, lin				•	•	© 2	12	00
3	Personal property taxes and real prop							13	00
	Certain interest on a home mortgage							14	00
	Miscellaneous itemized deductions. S							15	00
6	Refund of personal property taxes an	d real property	taxes. See	instructions			6 <u>└</u>	16	00)
	Do not include your state income tax	refund on this I	ine.						
	Investment interest expense adjustme							17	00
8	Post-1986 depreciation. See instructi	ons					≥ 8	18	00
9	Adjusted gain or loss. See instruction							19	00
	Incentive stock options (ISOs) and Ca							20	00
	Passive activities adjustment. See ins							21	00
	Beneficiaries of estates and trusts. Er						12	22	00
13	Other adjustments and preferences. E		•						
	a Circulation expenditures •	23		Mining costs	_	29	100		
	b Depletion	24		Patron's adjustment	_	30	100		
	c Installment sales	25	<u>00</u> i	Pollution control facilities		31	100		
	d Intangible drilling costs •	26	<u> 00</u> j	Research and experiment		32	100		
	e Long-term contracts •	27	<u> 00</u> k			33	100		
	f Loss limitations	28	<u> [00</u>	Related adjustments		34	00		
	Add amounts on line a through line I							35	00
	Total Adjustments and Preferences. C							36	00
	Enter taxable income from Form 540,							37	00
16	Net operating loss (NOL) deductions							20	
	Enter as a positive amount							38	00
	AMTI exclusion. See instructions.						_	39	00)
18	If your federal adjusted gross income							40	00)
	to line 19. If you itemized deductions a				-		ons • 18 <u>(</u>	[40]	00)
	Single or married/RDP filing se								
	Married/RDP filing jointly or qu								
10	Head of household Combine line 14 through line 18						19	41	00
	Alternative minimum tax NOL deduct							42	00
	Alternative Minimum Taxable Incom								
	is more than \$436,827, see instruction							43	00
Pa	rt II Alternative Minimum Tax (AN								
	Exemption Amount. (If this schedule		child unde	r age 24, see instructions.)				
	If your filing status is:			21 is not over:	Enter on	line 22:			
	Single or head of household			\$317,062		4,550)	1		
	Married/RDP filing jointly or qualifyin	g surviving spo	use/RDP	\$422,750	\$112	2,734	● 22	44	00
	Married/RDP filing separately If Part I, line 21 is more than the amo	unt chown abo	o for vour	\$211,371		6,364			
22	Subtract line 22 from line 21. If zero		-				22		00
	Tentative Minimum Tax. Multiply line							45	00
	Regular tax before credits from Form							46	00
	Alternative Minimum Tax. Subtract I								
_0	than zero, enter here and on Form 54								
	line 26 on the 2023 Form 540-ES, Ca				-				
	energy or commercial solar energy fi				•	-	26	47	lon

1 Enter the amount from Form 540, line 35						1	4	8	C
2 Enter the tentative minimum tax from Side 1, Part II, line 24						2	4	9	C
Section A – Credits that reduce excess tax.		(a) Credit amount	С	(b) redit used this year		(c) Tax balance may be of	ffset		(d) Credit arryover
						by cred	11.5		
3 Subtract line 2 from line 1. If zero or less enter -0- and see instructions.						• 50	7		
	3					<u> </u>	<u></u>		
A1 Credits that reduce excess tax and have no carryover provisions.				51					
	4			52	-				
5 Code: 232 Child and dependent care expenses credit (FTB 3506)	5		\odot	52	-				
-	_			54					55
- I I	6 7			57				<u> </u>	58
* 7 = 6	<u>'</u>			60				<u> </u>	61
	° -			63				<u> </u>	64
10 Code: 188 Credit for prior year alternative minimum tax	* H	65		66				<u> </u>	67
Section B – Credits that may reduce tax below tentative minimum tax.		9 1 30							<u> </u>
1 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)	1					68	7		
B1 Credits that reduce net tax and have no carryover provisions.				17					
12 Code: 170 Credit for joint custody head of household	2		•	69					
3 Code: 173 Credit for dependent parent				70					
4 Code: 163 Credit for senior head of household			0	71					
5 Nonrefundable renter's credit	5		0	72					
32 Credits that reduce net tax and have carryover provisions. See instructions.		, (
6 Code: • 73 Credit Name: 10	6 _		(74				\odot	75
17 Code: • 76 Credit Name:	7		\odot	77				\odot	78
8 Code: • 79 Credit Name:	8		\odot	80				\odot	81
9 Code: (a) 82 Credit Name: 15	9		\odot	83				\odot	84
33 Other state tax credit.									
20 Code: 187 Other state tax credit	0		\odot	85					
34 Pass-through entity elective tax credit. See instructions.			_					_	
1 Code: 242 Pass-through entity elective tax credit	1		\odot	86				O	87
Section C – Credits that may reduce alternative minimum tax.							٦ .		
22 Enter your alternative minimum tax from Side 1, Part II, line 26 25	2			, ,		88	Ц		
23 Code: 180 Solar energy credit carryover from Section B2, column (d)	3 _		<u> </u>	89	_			<u> </u>	90
24 Code: 181 Commercial solar energy credit carryover from Section B2, column (d) 24	4		\odot	91				•	92
25 Adjusted AMT. Enter the balance from line 24, column (c) here						_ _	_		
and on Form 540, line 61	5					93	<u> </u>		

This space reserved for 2D barcode

7972224

Schedule P (540) Barcode Placement Side 2 Specifications

Comments: Use Courier 12-point font, for CTP ID and Doc. ID (print line 63).

Print Line <u>Number</u>	<u>Identification</u>	Begin Print <u>Position</u>	Maximum Field <u>Length</u>	End Print <u>Position</u>	Field <u>Description</u>
1-3	Blank lines	_	_	_	_
4	Anchor Mark	59	2	60	Anchor mark, Conventional form size/style
5-53	Blank lines	_	_	-	_
54-60	"2D BARCODE"	7	73	79	Conventional form size/style
61	Blank line	_	_	-	V-
62-63	Bottom Registration Mark, Anchor Mark, and conventional form	_	_	-	End of bottom registration mark, anchor mark and conventional form size/style
63	CTP ID (mandatory)	32	3	34	Numeric
63	Doc. ID (mandatory)	40	7	46	Numeric. "7972214" (Side 2)

Schedule P (540) Barcode Placement Side 2 Record Layout Note: Record Layout is Reduced

