

California Resident Income Tax Return 2003**540** C1 Side 1

Fiscal year filers only: Enter month of year end: month _____ year 2004.

Step 1Place
label here
or printName
and
Address

Your first name	Initial	Last name	PBA Code	P
If joint return, spouse's first name	Initial	Last name		AC
Present home address — number and street, PO Box, or rural route			Apt. no.	PMB no.
City, town, or post office (If you have a foreign address, see instructions)			State	ZIP Code

Step 1a
SSN

Your social security number

Spouse's social security number

IMPORTANT:Your social security number
is required.**Step 2****Filing Status**

Fill in only one.

- 1 ☐ Single
- 2 ☐ Married filing jointly (even if only one spouse had income)
- 3 ☐ Married filing separately. 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 _____.

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 10: 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 \$82 = \$ _____
- 8 **Blind:** If you (or if married, your spouse) are visually impaired, enter 1; if both, enter 2 8 ☐ X \$82 = \$ _____
- 9 **Senior:** If you (or if married, your spouse) are 65 or older, enter 1; if both, enter 2 9 ☐ X \$82 = \$ _____

Dependent Exemptions

- 10 **Dependents:** Enter name and relationship. Do not include yourself or your spouse.

Total dependent exemptions ● 10 ☐ X \$257 = \$ _____

- 11 **Exemption amount:** Add line 7 through line 10. Transfer this amount to line 21 11 \$ _____

Step 4**Taxable Income**Enclose, but do not
staple, any payment.

- 12 State wages from your Form(s) W-2, box 16 ● 12 _____
- 13 Enter federal adjusted gross income from Form 1040, line 34; Form 1040A, line 21; Form 1040EZ, line 4; or TeleFile Tax Record, line 1 13 _____
- 14 California adjustments — subtractions. Enter the amount from Schedule CA (540), line 34, column B ● 14 _____
- 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 34, column C ● 16 _____
- 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 41; **OR**
 Your California **standard deduction** shown below for your filing status:
 • Single or Married filing separately \$3,070
 • Married filing jointly, Head of household, or Qualifying widow(er) \$6,140
 If the circle on line 6 is filled in, STOP. See instructions ● 18 _____
- 19 Subtract line 18 from line 17. This is your taxable income. If less than zero, enter -0- 19 _____

Step 5**Tax**Attach copy of your
Form(s) W-2, W-2G,
592-B, 594 and
597. Also, attach any
Form(s) 1099
showing California
tax withheld.

- 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 \$1,500 of investment income, read the line 20 instructions to see if you must attach form FTB 3800.
- 21 Exemption credits. Enter the amount from line 11. If your federal AGI is more than \$135,714, see instructions 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 _____