TAYARIE VEAE

CALIFORNIA FORM

2017

Additional Taxes on Qualified Plans (Including IRAs) and Other Tax-Favored Accounts

3805P

First name	Initial Last name		SSN or ITIN	
Address (number and street, PO Box, or PME	<u>I</u>	Apt. no. /Ste. no.	Check this box if this is an amended return	
City		State	ZIP Code	-
retirement plan (including an IF	outions – Complete this part if you received RA) or modified endowment contract. You a rly distribution or you received a Roth IRA o	lso may have to complete th	is part if you received a fe	
	e. For Roth IRA distributions, see instruction	·		00
•	that are not subject to additional tax. See in			
	,			00
	tract line 2 from line 1*			
4 Tax due. Multiply line 3 by 21/2% (.025	5). Enter the amount here and include this a	mount in the total on Form 5	540, line 63 or	
Long Form 540NR, line 73. If you are	not required to file a California income tax	return, sign this form below	and refer to	
			· · · · · · · · · · · · · · · · · · ·	00
* *	a distribution from a SIMPLE IRA, you may	have to include 6% (.06) of	that amount on line 4 inst	ead of 2½% (.025).
See instructions.				
	ributions from Education Accounts and AB rom a Coverdell education savings account			
-	n a Coverdell ESA, a QTP, or an ABLE accou			
	re not subject to additional tax. See instruc			
	tract line 6 from line 5		· · · · · · · · · · · · · · · · · · ·	
•	5). Enter the amount here and include this a			
	not required to file a California income tax			
the instructions			8	00
Part III Additional Tax on Distributions taxable distribution from an MS	s from Archer and Medicare Advantage M o SA on federal Form 8853.	edical Savings Accounts (M	SAs) – Complete this part	if you reported a
9 Taxable Archer MSA distribution from	ı federal Form 8853, line 8		9	00
10 a If you meet any of the exceptions t	to the 12.5% tax (see instructions), check h	iere	10a 🗆	
b Otherwise, multiply line 9 by 12.5%	% (.125). Enter the amount here and includ	e this amount in the total on		
Form 540, line 63 or Long Form 54	40NR, line 73. If you are not required to file	a California income		
tax return, sign this form below an	nd refer to the instructions		00	
	antage MSA distributions. Enter the amour			
	rm 540, line 63 or Long Form 540NR, line 7			1
income tax return, sign this form belo	ow and refer to the instructions. Long Form	540NR filers, see instruction	ns 11	00
Signature. Complete only if you are filing	this form by itself and not with your tax ret	urn.		
	have examined this return, including accomis unlawful to forge a spouse's/registered do		ements, and to the best of	my knowledge and
Your signature			Date	
X				
	parer is based on all information of which prep	arer has any knowledge.)	PTIN	
Firm's name (or yours if self-employed) and a	address		FEIN	