

## Part II Figure Your Penalty.

13 Enter the date (mm/dd/yyyy) the amount on line 12 was paid or April 15, 2020, whichever is earlier. . . . . . . . . . . . . . . . . . . . . . 13
 If you are a calendar year taxpayer and made no estimate payment, enter 90 days.

15 Penalty: $\frac{\text { Number of days on line } 14}{366} \times .05 \times$ underpayment on line 12. Enter the result here.
If you are requesting a waiver, go to line 16. Otherwise, enter this amount on Form 540, line 113; Form 540NR, line 123; or Form 541 , line 44 . Also, check the box on that line to show that form FTB 5805F is attached to the return

15
 line 113; Form 540NR, line 123; or Form 541, line 44. See General Information E 16
16 To request a waiver, check the box on this line and provide an explanation below. Be sure to check the box on Form 540,
$\qquad$
$\qquad$

