TAXABLE YEAR

2017 California Adjustments — Residents

CA (540)

lmp	ortant: Attach this schedule behind Form 540, Side 5 as a supporting Californ	nia schedule.		
Nam	es(s) as shown on tax return	SSN	l or ITIN	
			_	_
Par	t I Income Adjustment Schedule	A Federal Amounts (taxable amounts from	B Subtractions See instructions	C Additions See instructions
Sect	ion A – Income	your federal tax return)	See instructions	See instructions
7	Wages, salaries, tips, etc. See instructions before making an entry in column B or C \dots 7	•	•	•
8	Taxable interest (b)8(a)	•	•	•
9	Ordinary dividends. See instructions. (b)9(a)	•	•	•
10	Taxable refunds, credits, offsets of state and local income taxes	•	•	
11	Alimony received	•		•
12	Business income or (loss)	•	•	•
13	Capital gain or (loss). See instructions	•	•	•
14	Other gains or (losses)	•	•	•
15	IRA distributions. See instructions. (a)15(b)	•	•	•
16	Pensions and annuities. See instructions. (a)16(b)	•	•	•
17	Rental real estate, royalties, partnerships, S corporations, trusts, etc	•	•	•
18	Farm income or (loss)	•	•	•
19	Unemployment compensation	•	•	
20	Social security benefits (a) •	•	•	
21	Other income.		√ a <u>●</u>	_ a
	a California lottery winningse NOL from FTB 3805Z,		b 🖲	b
	b Disaster loss deduction from FTB 3805V 3806, 3807, or 3809 21	<u> </u>	C	_ c <u> </u>
	c Federal NOL (Form 1040, line 21) f Other (describe):		d 💽	_ d
	d NOL deduction from FTB 3805V		e <u>•</u>	e
			` f <u>●</u>	_ f <u>•</u>
22	Total. Combine line 7 through line 21 in column A. Add line 7 through line 21f in		_	_
	column B and column C. Go to Section B	<u> </u>	•	•
Coot	ion D. Adjustments to Income			
	ion B – Adjustments to Income			
23	Educator expenses		•	
24	Certain business expenses of reservists, performing artists, and fee-basis government officials			•
25	Health savings account deduction		•	
26	Moving expenses			
20 27	Deductible part of self-employment tax			
28	Self-employed SEP, SIMPLE, and qualified plans	•		
29	Self-employed health insurance deduction			
30	Penalty on early withdrawal of savings			
	Alimony paid. (b) Recipient's: SSN •			
ora	Aimony paid. (b) necipicites.			
	Last name ● 31a			•
32	IRA deduction			
33	Student loan interest deduction	_		•
34	Reserved			
35	Domestic production activities deduction		•	
50	Domostio production activities acadetion			
36	Add line 23 through line 31a and line 32 through line 35 in columns A, B, and C.			
50	See instructions	•	•	•
37	Total. Subtract line 36 from line 22 in columns A, B, and C. See instructions	•	•	•

Adjustments to Federal Itemized Deductions Federal itemized deductions. Enter the amount from federal Schedule A (Form 1040), lines 4, 9, 15, 19, 20, 27, and 28...... 38 Enter total of federal Schedule A (Form 1040), line 5 (State Disability Insurance, and state and local income tax, or **③** 39 40 41 Other adjustments including California lottery losses. See instructions. Specify 41 42 Is your federal AGI (Form 540, line 13) more than the amount shown below for your filing status? No. Transfer the amount on line 42 to line 43. Yes. Complete the Itemized Deductions Worksheet in the instructions for Schedule CA (540), line 43......

Enter the larger of the amount on line 43 or your standard deduction listed below

Transfer the amount on line 44 to Form 540, line 18

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