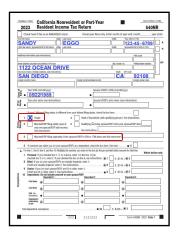
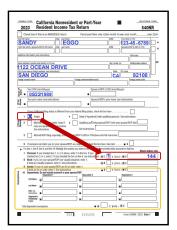


Scenario Sandy Eggo Citizen of Pandora Arrived in California on 7/1/2023 Spent the remainder of 2023 in CA Filing a 1040NR tax return for 2023 Single Sandy has the following income for 2023: Wages earned in California \$50,000 \$30,000 paid from California Institution \$20,000 paid from Pandoran employer (\$5,000 of the above is exempt on 1040NR from tax treaty) Wages earned in Pandora before 71/1/2023 \$8,000 Interest Income \$500





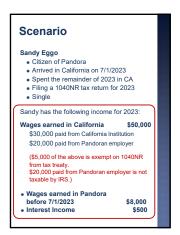


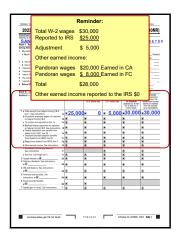


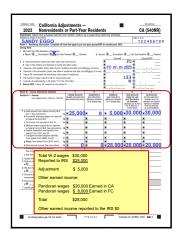


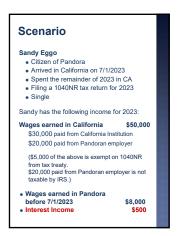
Scenario Sandy Eggo Citizen of Pandora Arrived in California on 7/1/2023 Spent the remainder of 2023 in CA Filling a 1040NR tax return for 2023 Filling status - Single Sandy has the following income for 2023: Wages earned in California \$50,000 \$30,000 paid from California Institution \$20,000 paid from Pandoran employer Wages earned in Pandora before 7/1/2023 \$8,000 Interest Income \$500



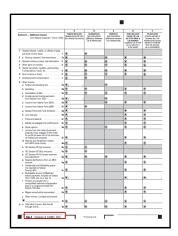


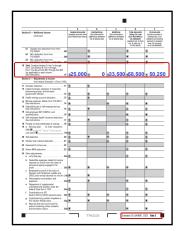






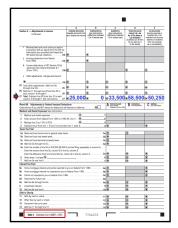


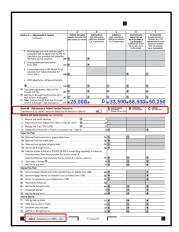




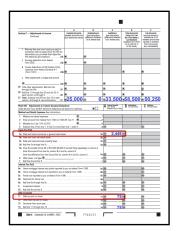


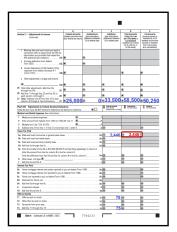
Section 9 — Additional Income	A Section Amounts	Supplementaria	6000000	2 Total Amounts	C# Amounts
Certinuel	(femble amounts from your board by return		See Instructions (othersnice between CA & Retenal lend)	Using CA Law As IT YOU Ware a CA Desident (NJETISCI DIX IS from DIX A self on C Si Tie Was()	(Income carnel or received and income surrect or technical time GA sources as a terresident)
\$1 Deather loss deduction from form F19 3805V St					
NZ NOL deduction from Sonn FTR 3005V Rs					
MS NOL deduction from form					
18 Table, Combine Section A, line 1s through line 1, and Section B, line 1 through line 1, line 9 and line 20 through line 1b 5 (jo applicable) in each column. Section 5 — Advantaged to become	e25,000	. 0	e33,500	e58,500	e 50,25
from federal Schedule 1 (Form 1940)					
11 Educator expenses	8	(e)			
12 Certain business expenses of reservicits, performing artists, and fee-basis					
government officials 12 13 Marith sevines second feduration 13		(8)		19	10
Moving expenses. Attach form FTD 2013.	-	*		_	_
See instructions 14			0		(0)
San Instructions 15	in .	ie			18
14 Self-employed SER, SIMPLE, and qualified plans. 16					
t) Self-employed health insurance deduction. See instructions					
 Peoply on soft withdrawal of sevines 18. 					
SSN ®	_		_		_
29 IFA deduction				9	
22 Reserved for Nature use	2		-	-	-
23 Anther MSA deduction 23					0
N Other educatments					
a Juny duty pay				•	
reported on line III from the nestal of personal property engaged in for profit					
Nontrouble amount of the value of Dympic and Paralympic medals and USOC onto money reported on line 8m 2M					
6 Februaristion amortization and expenses 24					
Repayment of supplemental repayment of benefits under the		ř –			
tedenal Trade Aut of 1974	0				
g Contributions by certain chaptains to IRC Section 40(b) plans					
Attorney fees and sourt costs for actions involving certain unlawful discrimination claims 25					



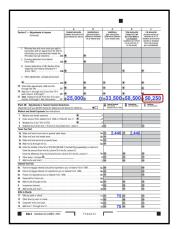


55555	123	45-6789	ONE No. 154	KS-0008		
33-0000000)			172	.000	2 Federal income tox with
Employer's name, address				2 Social se	nasty wages.	4 Similal security law with
Research				5 History	regre and fips	6 Nedcare to withheld
La Jolla	, CA	92037		7 Social se	owity tipe	8 Alocated tos
Control number				•		10 Dependent care benefit
Employer's first name and	retter Lan	ž rane	Suf.	11 Songari	led plans	th.
Sandy E	ggo			13 Dates		17: State
1122 Oc	ean I	Drive		14 Other	Inco	mes Tax
San Die	go, C	A 92108			7/	104
Employer's address and 2			_	_		In common to Inc.
	6789	30,000	2,4	46	Carwages, tips, etc.	19 Local Income Sax 20 Li
A 123-45	6789					
_W-2 wage	-6789 and Tax S	tatement	2,4 207			of the Treasury - Internal Reven
A 123-45	-6789 and Tax S	tatement				
W-2 Wage	-6789 and Tax S	tatement				
W-2 Wage	-6789 and Tax S r Local Tax De	tatement	208	23	Department	
W-2 Wage	e and Tax S r Local Tax De	tatement operiment	20a	23	Department	of the Treasury – Internal Reven
W-2 Wage	and Tax 9 r Local Tax De	tatement	20i	23	Department 15: \$2,44	of the Treasy - Internal Reven
W-2 Wage	and Tax 9 r Local Tax De	I Itemized e Income Tritable Dorr	20i	23	Department	of the Treasury—Internal Revenue
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W-2 Wage	and Tax S Local Tax De Tota State Chair	I Itemized e Income Tritable Dorr	20i	23	18: \$2,44 \$ 7	of the Treasury—Internal Revenue
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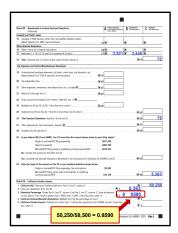


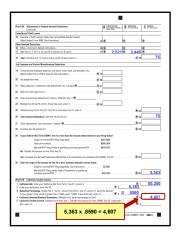
Pa	rt III Adjustments to Federal Itemized Deductions Continued		A guitory thous	B interest	C territories
	only and Theft Cosses			_	
15	Casualty or the't loss(es) (other than net qualified disaster losses).				
_	Attach federal Form 4584. See instructions.	15	·	9	
	or Namical Deductions Other—from lot in federal instructions	or l		125	100
	Add lines 4, 7, 10, 14, 15, and 16 in columns A, B, and C				- T
				_	10.5
18	Total, Combine line 17 column A less column 8 plus column G				310
Jak	Faceners and Certain Misselfaneous Deductions	_			
-					
19	Unnimbursel employee expenses: job travel, union dues, job education, etc. Altach federal Frem 2106 if required. See instructions	اه		1	
				1	
28	Tax preparation fixes.	⊛21			
21	Other expenses: Investment, rafe deposit box, etc. List trav ®	- 9 11			
				i	
72	Add line 19 through line 21	⊛22		J	
22	Enter amount from federal form 1040 or 1040-59, line 11 🛞	_			
	Multiple line 23 by 2% (\$.00). If less than zero, enter 0			1	
		0.44			_
25	Subtract line 24 from line 22. If line 24 is more than line 22, wrisn 0				O 25
	Total Remixed Deductions, Add Ine 18 and Ine 25.				
				_	
27	Other adjustments, See instructions, Specify, ®				027
28	Combine line 25 and line 27.				020
29	Is your lederal ACI (Form 540KT, line 13) more than the amount shown below				
	Single or married TOP filing separately.				
	Married SCP Size in inthe or qualifying surviving spouse SCP.				
	No. Departure the amount on line 75 to line 70		14,810		
	Yes, Complete the Itemized Deductions Worksheet in the instructions for Sched	ule CA (S408	01, Sne 29		329
30	Enter the larger of the amount on line 29 or your standard deduction shown by				
	Single or married/RDP filing separately. See instructions		\$5,383		
	Married/FCP filing jointly, head of household, or qualifying servicing species/FCP			6	5.36
			18,700		A. 0,00
	et IV California Tarabia Isroma				
	California AGE. Enter your California AGI from Part II, line 27, column E.				91
	Enter your deductions from line 30				_
3	Bedoction Percentage. Divide Part II, line 27, column E by Part II, line 27, column to four places. If the neutil is greater than 1,0000, when 1,0000. If less than zero	m D. Carry S	No decimal		
4					0.4
ŝ	Celifornia Taxable Insume. Subtract line 4 from line 1. Transfer this amount to 6	Form SADDIR,	fine 35. If less than		
	zero, enter -Q-				0.6





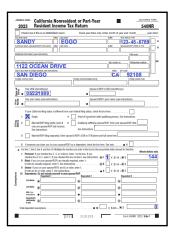
	A			0	-
Section C — Adjustments to Income Continued	Federal Binourità (familie amounts from your federal tax return)	Subtractions See Industries (Stenance between Cit & Indexs tax)	Additions See Instructions (Stiferance Selection Cit & federal tax)	Total Amounts Uning CA Law As 8 You Wore a CA Desident (subtract on 5 from CE A, add cat C to the mout)	CA Bhourts (income sumor received as a C suident and inco earned or receive from CA source as a nonvention
Atomey fees and court costs you gold in connection with an award from the IRS for information you provided that helped the IRS detect tax law violations. 288					
Housing deduction from federal Form 2555 246					
k Excess deductions of IRC Section 67(s) expenses from federal Schedule K-1 (Form 1041) 18k					
a Other adjustments. List type and amount.					
®					
25 Total other adjustments. Add line 34s through line 34s					
26 Add line 11 through line 23 and line 25 in each solumn, A through 6					
27 Tehd. Subtract line 25 from line 16 in each column. A through E. See instructions. 27	25,000	· 0	33,500	58,500	50,25
Part III Adjustments to Federal Resided Dedu Check the box if you did NOT benion for Indexed but will Medical and Destal Expenses See Instructions. 1 Medical and dental expenses.	Ellembe for California		A total tours	B seems	C series.
Onch the box II you dit NOT herice for helent but will Medical and Overtal Expenses See instructions. 1. Medical and diretal expenses 2. Chief amount from leight from 1048 or 1048	Stember for California			/58,500	
Onch the lot of purid MVT hands for hidned for vi- Medical and Destal Signesso See Instructions. 1. Medical and destal signesses. 2. Eater amount from Indexe from 1048 or 1048. 3. Medical and destal opportunity. 3. Medical and destal opportunity. 4. Special from 3 by 7 5% (0.025). 4. Special line 3 from line 1, If line 3 is more the liases for Paid.	-5%, line 11		50,250	/58,500	= 0.859
Onch the loss if you did NOT aminor for theirs for virill whicked and Destal Expenses See Instructions. 1. Medical and destal expenses. 2. Exists amount show feeled from 1048 or 1049. 2. Exists amount show feeled from 1048 or 1049. 3. Medical plant by 5 ZN (6007). 4. Subtray line 3 from line 1. If line 3 is more the Islant Nov Field. 3. What will document late or general seles fair.	Semble for California Semble 11 . Semble 20. Inte 11 . Semble 20. Inte 10 . Semble 20.		50,250	/58,500	= 0.859
Onch the lost of you did NOT amiles for helmed for yell Medical and Destal Superana See Institutions. 3. Medical and destal expenses. 2. Other amount from National form 1048 or 1048 3. Medical yellow 10 y 7.5% (2015) 3. Medical yellow 10 y 1.5% (2015) 4. Sobject line 10 from line 1. If line 3 is more the National See 10 from line 1. If line 3 is more the National See 10 from line 1. If line 3 is more the National See 10 from line to represent selections. 3. Solid and local income late or operand selections.	Semble for California 50, line 11 . B on line 1, order 0.		50,250	/58,500	= 0.859
Once the lost of you did NOT makes for helded but with Medical and Medical Agencies See instruction. 1. Medical and dental expenses See instruction. 2. Other encount from tradeal from 100E or 100E at Multiply like 3 (27% (6.00%)). 3. Multiply like 3 (27% (6.00%)). 4. Sobread like 3 from like 1, 3 like 3 in more the lastes Now Fall. 3b - Balle and focal innormer law or general sales has 95 dates and focal innormer law or general sales has 95 dates and focal areas has present properly to see the 100 Medical has like 100 and focal present grouping to see.	Samble for California SC. ST. line 11		50,250	/58,500	= 0.859
Once the lost of your GEVT hands for header har of Marcal and Demit Organization (Incomplete and Incomplete an	if banks for California B. -50, line 11 B. B. In line 1, enter 0. If numried filing separe 56, polares E.	St.	50,250 2,446	/58,500	= 0.859
Count to be only year of KIT hands for the wheath at ref inflanced and Extend Executed and Extend Executed and Extend Executed and Extend Executed and Executed Annual Execute	if banks for California B. -50, line 11 B. B. In line 1, enter 0. If numried filing separe 56, polares E.	59 99 99 99 99 99 99 99 99 99 99 99 99 9	50,250	/58,500	= 0.859
Once the lost of your GEVT hands for header har of Marcal and Demit Organization (Incomplete and Incomplete an	Familie for California -5%, line 11	See	50,250	/58,500	= 0.859
Check the last of pipe of KCP annotes the federal and Postal Registrated and Postal Registrate Res constructions. 3. Medical and Postal Registrate Res construction. 3. Medical and Postal Registrate Res (1984 or 1986) 4. Soldings and Registrate Res (1984 or 1986) 5. Soldings and Postal Registrate Registr	Flambs for California -5%, line 11	Signature C Signat	50,250	/58,500	= 0.859
Once the basis of pass of KVT leavine for helmatic fair will financial and formal operates disconnections. 3. Medical and formal operates. 3. Medical and formal operates. 2. Exhibit recome from the fair financial of the object of DAI of the object of	Familie for California ST, line 11	54 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9	50,250	/58,500	= 0.859
Count to be large just 6 KEF laws for the first set just 6 KEF laws for the first special and found for planting and found	Figure 11	50 50 50 50 50 50 50 50 50 50 50 50 50 5	50,250	/58,500	= 0.859
Constitution of page 40 KeV from the theories to the Constitution of Constitution of Constitu	Figure 11	5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	50,250	/58,500	= 0.859
Constitution of part of ECF from the Host has the Constitution of Constitution and Postal Expension Section (Constitution of Constitution and Constitution Section (Constitution of Constitution Section Secti	il bamba for California	50 50 50 50 50 50 50 50	50,250	/58,500	= 0.859
Constitution of page 40 KeV from the theories to the Constitution of Constitution of Constitu	il bamba for California	54 54 55 55 55 55 55 55	50,250	/58,500 0 2,448	= 0.859
Control to Language of Coff Time On the Market And Control Con	il bamba for California	1000 B B B B B B B B B B B B B B B B B B	50,250	/58,500 © 2,446	= 0.85
Done that has in you did Kiff limit by the best with the best will be desired and be found in general and institutions. In minimal consists of producting and institutions of the second best desired by the secon	Bamba for California	5	50,250	/58,500	= 0.859
Don't the late of your 64 CFF lates by the bast of the late of Lates I and Lat	I lambs for California On line 17 . 8 In line 17 . 8 In line 19 . 8 In line 1, when 0. In line 1, when 0. In line 16 . 4 In line 56. calls In line 56. calls In line 56. calls I line 68. calls I line	5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	2,446	/58,500	= 0.859
Constitution of the product of the constitution of the constitutio	I lambs for California On line 17 . 8 In line 17 . 8 In line 19 . 8 In line 1, when 0. In line 1, when 0. In line 16 . 4 In line 56. calls In line 56. calls In line 56. calls I line 68. calls I line	5 to dismost State of the State	50,250	/58,500	= 0.859

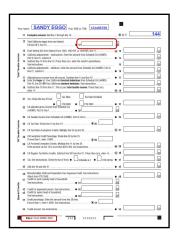




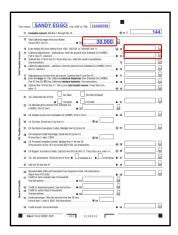
Pa	4 111	Afjectments to Federal Benized Deductions	A Peter Street	B introduce	C annual
Can	nde i	nd Theft Losses	per oug	_	
15	Cesu Attac	ally or theft loon(es) (other than net qualified doubler losses). h faderal Form 4684. See instructions			
		iced Deductions			
		—hon list in federal instructions. 15		9 244	
17	Add	ines 4, 7, 10, 14, 15, and 16 in columns A, 8, and 5	⊗ 2,521	10 2,44	
18	Mal	Combine line 17 column A less column 8 plus solumn C		6	75
Job	Exper	ses and Certain Missellaneous Deductions			
79	Lbesi	informal amotives senancer inhitrard union-base inhiaduration attr.		1	
	Rtsc	h federal Form 2106 if required. See instructions			
		nountion has See as			
		expenses: investment, safe deposit box, etc. List type 🛞			
		ine 19 through line 21		J	
		amount from federal Form 1040 or 1040-SR, line 11 👻		,	
		ply line 23 by 2% (E.OZ). If less than zero, enter 0		J	
25	Subb	set line 24 from line 22. If line 24 is more than line 22, enter 0.		4	28
26	Mel	Remitted Deductions. Add line 18 and line 25.			75
27	Othe	adjustments. Saw instructions. Specify 🕲		e	n
28	Cont	ine line 25 and line 27.			28
29	ls po	or federal AGE (Form \$435K), line 13) more than the amount shown below for your fi	ing status?		
		Single or manied ROP fling separately			
		Head of household			
		Married ROP King jointly or qualifying surviving spouse/ROP	174,075		
	80.7	runsfer the amount on line 25 to line 29.			
	Yes.	Complete the Itemized Deductions Worksheet in the instructions for Schedule CR (54)	NR), Sne 29		20
20	Estas	the larger of the amount on line 2% or your standard deduction shown below:			
		Single or municipROP filing separately. See instructions	\$5,363		
		Married/TCP filing jointly, head of household, or qualifying sunniving spouseRCP	110,725	6	5,363
Pa	n IV	California Sasabia Income			
1	Califo	mia AGE. Entervour California AGE from Part II. line 27. column E			50,250
z	Enter	your deductions from line 30		5,363	
3				0 0 0 0 0	_
	to for	note retrempte. United risk 11, the 27, column 1 by risk 11, the 27, column 0. Garly replaces. If the result is greater than 1 5000, enter 1 5000. If less than zero, enter 40- mis Benizadi@lander@loductions. Multiple line 2 by the percentage on line 3.		0.0095	4.607
:	Califo	mis itemized/Standard Deductions. Multiply line 2 by the percentage on line 3 mis Taxable Issuene. Subtract line 4 from line 1. Transfer this amount to Form 54065	See 95. If here then		
		eter d-			45.643



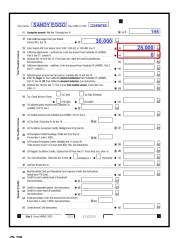


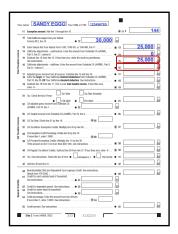




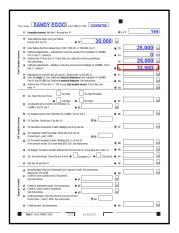


Section C — Adjustments to income Continued	Federal Amounts (buside amounts for your federal law return	Subtractions See Instructors (Stienance Sebasein Call & Indexation)	Additions See instructions (otherwise between CB & federal law)	Total Amounts Uning CA Law As E'Vol More a CA Feetbert (subtract co. ii from oil A, and oil C	CA Anno (noone or neatest an earned or neatest and served or n
Atomey has and court costs you paid in connection with an award from the RG for information you provided that helped the IRG detect tax law violations. 38					
j Housing deduction from federal Form 2005 26					
k Excess deductions of IRC Section 67(e) superase from federal Schedule IK-1 (Form 1641)					
2 Other adjustments. List type and amount.					
®					
25 Total other adjustments. Add line 34s through line 34s					
26 Add line 11 through line 23 and line 25 in each usigns. A through 6					
Medical and Dental Expenses See Instructions.			A reserve Amount Limited A Parts Co.		
Check the box if you did NOT itembre for Indeed but or Medical and Deetal Expenses See Instructions. 1. Medical and dental expenses 2. Enter amount from Televia Form 1048 or 104 Medical Process See See See See See See See See See			" Distribution		
Medical and Dertal Expenses See Instructions. 1 Medical and dental expenses 2 Eater amount from federal from 1045 or 104 3 Multiply line 2 by 7.5% (0.0%) 4 Subtract line 3 from line 1. If line 3 in more th	5-5P, Sre 11 . B		" Disarifumos		
Medical and Cental Expenses See Instructions. 1. Medical and dental expenses 2. Enter amount hore industripson 1048 or 104 3. Multiply line 2 by 7.5% (0.075) 4. Subtract like 3 from line 1. If line 3 is more th Tesse Rec Peld	D-SR, line 11 . B		" Disabilitation of		
Medical and Central Expenses See Instructions. 1. Medical and denial expenses. 2. State amount from feelant From 1048 or 104. 3. Multiply line 2 by 7.0% (1075). 4. Substrate line 3 from line 1. If line 3 is more to leave for Paid. 5. State and focal income tax or general usine tax.	D-SR, line 11 . B B an line 1, entire 0.		(Salati)		
Medical and Destral Expenses See Instructions. 1. Medical and denial expenses. 2. Select amount how fashed From 1048 or 104 3. Multiply line 2 by 7.0% (5.0%). 4. Subtral fashed Select Sel	0-00, line 11 . B B as line 1, order 0.		(Salati) merce	8	
Medical and Countal Expenses Sea instructions. 1. Medical and Sendal expenses. 2. Setter amount from treated Sendal Sequences. 3. Medically Sendal	5-5P, line 11 .		(Salati) on co		8
Medical and Gurial Expenses Sea instructions. 3. Medical and denial expenses 2. State annual from Industry Season 100 of 100 3. Medical place 3 pt 200 pt (2007) 4. Substant Season 100 pt (2007) 5. Substant	B-SR, line 11 . B . B . B . B . B . B . B . B . B		(Salati) on co	8	9
Medical and Sumila Expressor Sea instructions. 1 States amount from Value Sea of Sea	5-SR, line 11	ely ir columb.	() () () () () () () () () ()		
Medical and Claraf Expenses San Intractions. 3 3 Monthly and devide opposites 2 State amount to be before Sam State 1 State 3 Monthly and 2 by 7.5% (2015) 3 Monthly pin 2 by 7.5% (2015) 4 Monthly pin 2 by 7.5% (2015) 5 Monthly pin 2 by 7.5% (2015)	5-SR, line 11	my kolumA	1 (Salat) and 1		
Middel and Correll Expressor Sea motocolors. 3 Safet amount them shared from 550 or 155 or 1	B-DR, Sine 11 B-DR SINE 1 B-DR	any irodum.A	() () () () () () () () () ()		
Middle and Dorind Copenies for intractions. 1 Sinke amount how these fem 70% or 70% o	B-DR, Sire 11 . B . B . B . B . B . B . B . B . B	may in column A			0
Mission and South Copessor Sici introduction. 3. Sinke amount them thesis Sim 500 or 100 or	B- GR, line 11 B- GR and III B	many is column. A.			0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
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Missian and walling Digeomes for connections. In Missian device of the connection of	So Giff, less 15	many is column. A	District Jones Col. District		





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Sec	dion C — Adjustments to Income Continued	Pedew amounts datable amounts from your tedest tax return	Buddhecthons See Instructions (see Instructions (stitlement between Ca & federal see)	BOSTINIA See Instructions (otherwise between CA & Trobinal Stat)	Total Shourth Using CA Law As Thus Neve a Ga Smilder! (subhart ms. 3 hom Os. 8, accos. C to the smult)	CA About its process of the common co
7	Attorney has and sourt costs you paid in connection with an award from the IRS for information you provided that helped the IRS detect tax law violations. 34					
	J Housing deduction from federal from 2000 24					
	k Excess deductions of IRC Section 67(s) expenses from federal Schedule K-1 (Form 1001)					
	z Other adjustments. List type and amount.					
	Total other adjustments. Add line 24s	9		•		(0)
**	frough line 24c 25	10	·	(⊕)	⊕	in
				on.	on.	œ.
17	seeh od umn. A through it. 25 and sine 25 in Tatal, Subtract line 26 from line 10 in each			f		
	Retail, Subtract line 26 from line 10 in each column, A through E. See instructions	25,000	0	:33,500	*58,500	50,25
Me	ck the box if you did NOT termine for heleral but o disall and Denthal Expenses See Instructions. Medical and denthal expenses				B landau	
1 2 2 4	disat and Dental Expenses Sec Instructions. Medical and dental expenses Enter amount from Indensi from 1945 or 10 Multiply line 2 by 7 5% (0.075) Bubbasi line 3 from line 1. If line 3 in more t	-01, lee 11 . 00				
1 2 2 4	disal and Dental Expenses Sec Instructions. Medical and dental expenses. Enter amount from federal from 1045 or 104 Multiply line 2 by 7.5% (0.075).	-01, lee 11 . 00		8		18
1 2 2 4 Text	disal and Dettid Egansse See instructions. Medical and destid expenses. Enter amount from federal form 1046 or 104 Multiply line 2 by 7 5% (0.075). Buildest line 3 from line 1. If line 3 is more II see You Full State and lineal income tax or general sales is	9-1-57, line 11 . 8		8		
Tax Se Se	dead and Dental Expenses See Instructions. Medical and dental expenses. Enter amount from Indexs from 1048 or 100 Multiply line 2 by 7.5% (0.025). Subtract line 3 from line 1. If line 3 is more to see You Field State and listed instructors or general sales to 5 that and listed instructors.	S-DT, line 11 S S up line 1, order 0				18
Tex Se Se Se	disal and Damid Expenses See Instructions. Medical and death expenses. Delice smooth them federal from 1048 or 104 Multiply line 2 by 7.0% (0.005). Builded line 3 from line 1. If line 3 lin more the to the Tail State and lineal income tax or general sales to State and lineal relice that toom. State and lineal personal property leaves.	S-SV, line 11. 8 sun line 1, order 0.	5 5			18
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1 2 3 4 Test 50 50 50 50 50 10 10 10 10 10 10 10 10 10 10 10 10 10	Section and Section Representation Section Section Section Representation of the American Action of the Section Sectio	S-DC, line 11. Some service of the s	5 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9		8	8 8 8 9
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1 2 2 4 Tax 50 50 50 50 50 50 50 50 50 50 50 50 50	Market and Thompson, the controlled and Market and State of State	5-DP, free 11. Beauty on the control of the control	5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0



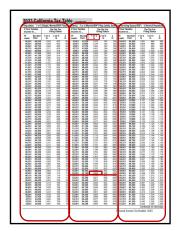




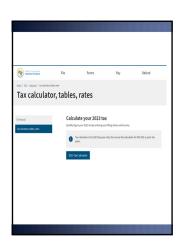


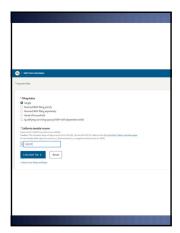


	_	SANDY EGGO Your SIN or TITR: 123458789 Exemplies amount: Add for 7 through line 19
	12	Total California wages from your federal Formical W-2 to 12 30,000 (to
ota l'assible Income	12	Enter Indianal ACC from Indianal Form 1940, 1940-SIR, or 1940-SIR, line 11
		Colifornia adjustments – subtractions. Enter the amount from Schedule CA (SARRE). Part II, line 27, column 8 • 14
	15	Subtract line 14 from line 13. If less than zero, enter the result in parentheses.
ě		
		line 27, column C • 16 33,500 .ts
Š	17	Adjusted gross income from all sources, Cambine line 15 and line 16. • 17 58,500 .px
		Enfor the larger of: Your California Memical deductions from Schedule CA (S40W1). Part III, line 30, GR Your California standard deduction. See instructions.
	19	Subtract line 18 from line 17. This is your total taxable leasure. If less than zero.
-	_	
	21	Tax. Check the box if his
	32	CA adjusted gross income from Stretch CA 22 22 39
	35	GA Tanable Income from Schedule CA (S40MI). Part IV line 5. • 35
8	36	CA Tax Rate. Divide line 31 by line 19.
8	27	CA Tax Sidner Exemption Credits. Multiply line 35 by line 35.
A lande book	38	CA Demption Credit Percentage. Divide line 25 by line 19. If many flash 1, enter 1,0000.
	20	CA Prouted Exemption Credits. Multiply like 11 by line 38. If the amount on line 13 is more than \$207,025, see instructions.
	40	CA Regular Tast Sefore Credits. Subtract line 39 from line 37. If less than zero, order -5 ® 48
	41	Tax. See instructions. Check the box if from: ● Schedule G-1 ● FTB SEYCR ● 41
	42	Add line 40 and line 41 • 42 • . 10
	50	Nonrefundable Child and Dependent Care Expenses Credit, See instructions.
	51	Credit for joint custody head of household.
É		See instructions • 61
pacal creers	82 83	Credit for dependent parent. See instructions ● 82
ķ		See instructions. • 55
		Emore than 1, enter 1,0000. See instructions
	65	Credit amount. See instructions • 55

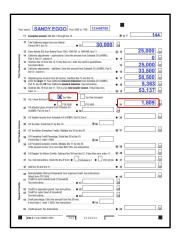


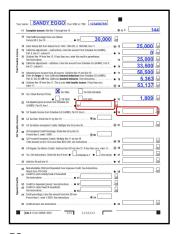
rnia	Tax '	Tab	e – cor	ntinued		
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371	708	708	52,751	52,850	-	916
,377	710	710	52,851	52,950		920
,383	712	712	52,951	53,050	1 000	924
,389	714	714	53.051	53,150	1,809	928
,395 .401	716 718	716 718	53,151 53,251	53,250 53,350	1,815 1,821	932 936
407	718 720	720	53,251	53,350	1,821	936
413	722	722	53,451	53,550	1.833	944
419	724	724	53,551	53,650	1.839	948
425	726	726	53,651	53,750	1.845	952
431	728	728	53,751	53,850	1,851	956

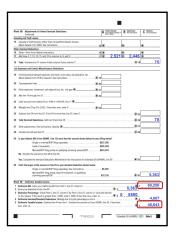


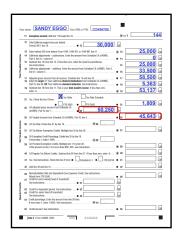


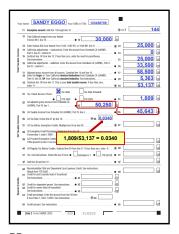


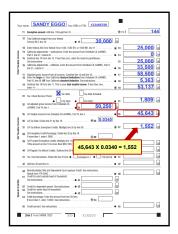






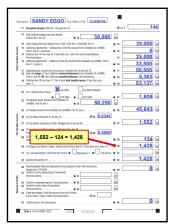




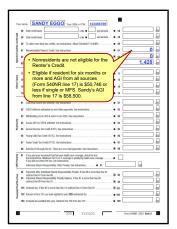


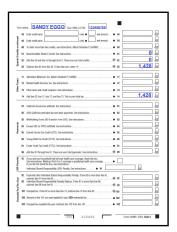
	11	Complies amount. Add Inv. 7 through Inv. 10
_	12	Total California reages from your federal
		Enter Redenil ACI from Redenil Form 1943, 1943-SR, or 1940-MR, line 11
8	54	California adjustments - subtractions. Enter the amount from Schedule CA (S409E). Part II, line 27, column 8 • 14
e le	15	
OtalTasable Income	16	California adjustments - additions. Enter the amount from Schedule CA (SHIWR), Part II,
Ē.		ine 27, column C • 18 33,500
ê	17	Adjusted gross income from all sources. Combine line 15 and line 16. • 17 58,500 (Infor the larger of Your Colfornia Heroland deductions from Schools CA (34090).
	-	Part III, line 30, 98 Your California standard deduction. See instructions. • 12 5.363
	'n	Subtract line 18 from line 17. This is your bital taxable isseeme . If less than zero, enter 4: 8 19 53,137
	٠,	Tax Charle the have if force: X Tax Table
		1.809
	32	CA adjusted gross income from Schedule CA (sASRFS, Fact IV, line 1. • 22 50, 250 July
	_	CA Tarable Income from Schedule CA SHINNI. Part N. Inc
8		
A Taxable Iscom		CA Tax Rate. Chiefe lane 31 by line 19.
g		
ą.	38	CA.Exemption Credit Percentage. Divide line 25 by line 19. If more than 1, enter 1,0000
0	39	CA Provided Compilion Credits, Multiply line 11 by line St. If the amount on line 13 is more than \$227.05. see instructions.
	40	CA Regular Tax Before Credit
	41	Tox. See instructions. Check 45,643 / 53,137 = 0.8590
_	¢	Add line 40 and line 41
	50	Noverhandable Child and Dependent Care Expenses Credit. See instructions. Attach form ITID 2506. • 88
	51	Codd for joint outdoy head of household.
special Credits		
ğ	12 13	Credit for dependent parent. See instructions. • st
ě		Se instructions. Graft percentage, Enter the amount from line 31 here.
	"	If more than 1, enter 1,0000. See instructions
	66	Credit amount Sectoraries • 65









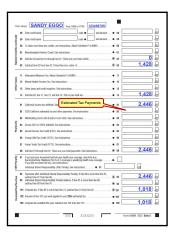


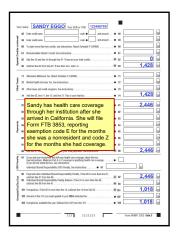


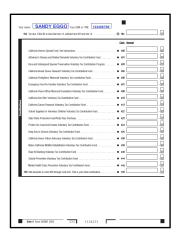


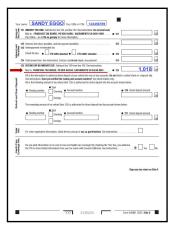


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2	10	From conditioning code • and amount • 58	0
ŧ	60	To claim more than two condits, see instructions, Attach Schedule P (nASAR)	00
soli Credib continue		Noverbundsbie Renter's Credit. See instructions • 61 0	
Š		Add line 50 and line 55 through line 61. These are your total credits.	ŭ
ě		Subtract line 62 has line 42. If less than zero, enter 4	ü
_	80	1,920 -	_
	21	Alternative Minimum Tax. Attach Schedule P (S40NR)	00
į	n	Mental Health Services Tax. See instructions	00
ě.	72	Other taxes and credit recapture. See instructions • 13 -	80
	34	Add line 63, line 71, line 72, and line 73. This is your total tax. • 14 1,428 .	
		California income tar widtheid fire instructions.	
			m
		9	w
į		592-B	00
£	25		w
	86	Young Child Tax Gredit (YCTC). See instructions • 66	
	-	Foster Youth Tax Credit (FYTC). See instructions.	
	80	Add line 31 through line 57. These are your total payments. See instructions	
diam'r.	81	If you and your household had full-year health care coverage, sheek the box. San instructions. Bedictors Part A or C coverage is qualifying health care coverage.	
ě		Individual Shared Responsibility (GR) Penalty. See Instructions	
	22	Payments after Individual Shared Responsibility Penalty: If line 68 is more than line 51, subtract line 91 from line 68.	60
Ampaid TairTax Due	83	Individual Shared Responsibility Pressly Salance. If line 81 is more than line 68, subtract line 68 from line 91.	
ě	101	Overpaid tax. If fine 92 is more than line 74, subtract line 74 from line 92	00
ě	102	Anount of fire 101 you want applied to your 2024 estimated tax	00
۳	100	Cverpaid tax available this year. Subtract line 102 from line 101	00







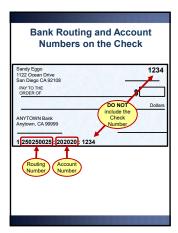


AMOUNT YOU OWE. Add line 104 and line 120. See instructions. Do not send cash.
Mail to: FRANCHISE TAX BOARD, PD BOX 942897. SACRAMENTO CA 94267-4001.
Pay Online – Go to 8th ca geology for more information.

REFUND OR NO AMOUNT DUE. Subtract line 120 from line 103.

Mail to: FRANCHISE TAX BOARD, PD BOX 942840, SACRAMENTO CA 94240-4001.







	Attach a copy of your complete federal return.
to bear FIG 11	to up to found in arous for building or other. Dy to the segmentation in least should not privacy policy plainment, or go to this as gentlement and search for T if the Privacy is an around 19 man plaint in a contract of the privacy in the contract of the privacy is an around the T in the privacy is a contract of the privacy in the contract of the privacy is a contract of the privacy in the privacy in the privacy is a contract of the privacy in the privacy in the privacy in the privacy is a contract of the privacy in the priva
is true, correct, That shoulders	s of perjunt, I declare that I have exemined this low mborn, including accompanying schedules and statements, and in the best of my tenovisidge and belief and complete. Dee GeometriCOTX separate 27 a plot for mborn, both most sept.
Sau	dy Eggo 04182024
	Tour small actions. Littler only one small actions.
Sign	Sandy.Eggo@gmail.com (987) 654-3210
Here	Pac yingan a nyasar (arcanosa or prepare is based on as arconastos or mice prepare ras any accessory)
t is unleastal to longe a	Firm's name (or yours, if self-employed)
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setum? See Instructions.	
	Do you want to allow another person to discuss this tax return with us? See instructions
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