

540-ES Form 1 at bottom of page

ONLINE SERVICES: Use Web Pay and enjoy the ease of our free online payment service. Go to ftb.ca.gov for more information. You can schedule your payments up to one year in advance.
Do not mail this form if you use Web Pay.

✂ DETACH HERE _____ IF NO PAYMENT IS DUE, DO NOT MAIL THIS FORM _____ DETACH HERE ✂

TAXABLE YEAR **CAUTION:** You may be required to pay electronically. See instructions.

CALIFORNIA FORM

2017 Estimated Tax for Individuals File and Pay by April 18, 2017 540-ES

Fiscal year filers, enter year ending month: Year 2018				
Your first name	Initial	Last name	Your SSN or ITIN	
If joint payment, spouse's/RDP's first name	Initial	Last name	Spouse's/RDP's SSN or ITIN	
Address (number and street) PO box or PMB no.			Apt no./ste. no.	Payment Form 1
City (If you have a foreign address, see instructions)		State	ZIP code	

Do not combine this payment with payment of your tax due for 2016. Using black or blue ink, make your check or money order payable to the "Franchise Tax Board." Write your social security number or individual taxpayer identification number and "2017 Form 540-ES" on it. Mail this form and your check or money order to: **FRANCHISE TAX BOARD, PO BOX 942867, SACRAMENTO CA 94267-0008.**
 If no payment is due, do not mail this form.

Amount of payment

00

See Section A of the instructions for an alternative to using this form.

TAXABLE YEAR

CAUTION: You may be required to pay electronically. See instructions.

CALIFORNIA FORM

2017 Estimated Tax for Individuals File and Pay by June 15, 2017 540-ES

Fiscal year filers, enter year ending month: Year 2018

Form fields for personal information: Your first name, Last name, Your SSN or ITIN, Spouse's/RDP's SSN or ITIN, Address, City, State, ZIP code, Apt no./ste. no.

Payment Form 2

Do not combine this payment with payment of your tax due for 2016. Using black or blue ink, make your check or money order payable to the "Franchise Tax Board." Write your social security number or individual taxpayer identification number and "2017 Form 540-ES" on it.

Amount of payment

If no payment is due, do not mail this form.

See Section A of the instructions for an alternative to using this form.

Amount of payment .00

For Privacy Notice, get FTB 1131 ENG/SP.

1201173

Form 540-ES 2016

DETACH HERE IF NO PAYMENT IS DUE, DO NOT MAIL THIS FORM DETACH HERE

TAXABLE YEAR

CAUTION: You may be required to pay electronically. See instructions.

CALIFORNIA FORM

2017 Estimated Tax for Individuals File and Pay by Sept. 15, 2017 540-ES

Fiscal year filers, enter year ending month: Year 2018

Form fields for personal information: Your first name, Last name, Your SSN or ITIN, Spouse's/RDP's SSN or ITIN, Address, City, State, ZIP code, Apt no./ste. no.

Payment Form 3

Do not combine this payment with payment of your tax due for 2016. Using black or blue ink, make your check or money order payable to the "Franchise Tax Board." Write your social security number or individual taxpayer identification number and "2017 Form 540-ES" on it.

Amount of payment

If no payment is due, do not mail this form.

See Section A of the instructions for an alternative to using this form.

Amount of payment .00

For Privacy Notice, get FTB 1131 ENG/SP.

1201173

Form 540-ES 2016

DETACH HERE IF NO PAYMENT IS DUE, DO NOT MAIL THIS FORM DETACH HERE

TAXABLE YEAR

CAUTION: You may be required to pay electronically. See instructions.

CALIFORNIA FORM

2017 Estimated Tax for Individuals File and Pay by Jan. 16, 2018 540-ES

Fiscal year filers, enter year ending month: Year 2018

Form fields for personal information: Your first name, Last name, Your SSN or ITIN, Spouse's/RDP's SSN or ITIN, Address, City, State, ZIP code, Apt no./ste. no.

Payment Form 4

Do not combine this payment with payment of your tax due for 2016. Using black or blue ink, make your check or money order payable to the "Franchise Tax Board." Write your social security number or individual taxpayer identification number and "2017 Form 540-ES" on it.

Amount of payment

If no payment is due, do not mail this form.

See Section A of the instructions for an alternative to using this form.

Amount of payment .00

For Privacy Notice, get FTB 1131 ENG/SP.

1201173

Form 540-ES 2016

2017 Instructions for Form 540-ES Estimated Tax For Individuals

General Information

Installment Payments – Installments due shall be 30% of the required annual payment for the 1st required installment, 40% of the required annual payment for the 2nd required installment, no installment is due for the 3rd required installment, and 30% of the required annual payment for the 4th required installment.

You are required to remit all your payments electronically once you make an estimate or extension payment exceeding \$20,000 or you file an original tax return with a total tax liability over \$80,000. Once you meet the threshold, all subsequent payments regardless of amount, tax type, or taxable year must be remitted electronically. Individuals who do not send the payment electronically will be subject to a 1% noncompliance penalty. For more information go to ftb.ca.gov and search for **mandatory epay**. Electronic payments can be made using Web Pay on the Franchise Tax Board's (FTB's) website, electronic funds withdrawal (EFW) using tax preparation software, or your credit card.

A Purpose

Use Form 540-ES, Estimated Tax for Individuals, and the 2017 CA Estimated Tax Worksheet, to determine if you owe estimated tax for 2017 and to figure the required amounts. Estimated tax is the tax you expect to owe in 2017 after subtracting the credits you plan to take and tax you expect to have withheld.

If you need to make a payment for your 2016 tax liability or make a separate payment for any balance due on your 2016 tax return, use form FTB 3519, Payment for Automatic Extension for Individuals.

Certain taxpayers are limited in their use of the prior year's tax as a basis for figuring their estimated tax. See Section C for more information. Check for estimated payments we've received at ftb.ca.gov and search for **myftb account**.

Increasing your withholding could eliminate the need to make a large payment with your tax return. To increase your withholding, complete Employment Development Department (EDD) Form DE 4, Employee's Withholding Allowance Certificate, and give it to your employer's appropriate payroll staff. You can get this form from your employer, or by calling EDD at **888.745.3886**. You can download the Form DE 4 from EDD's website at edd.ca.gov or go to ftb.ca.gov and search for **de 4**.

Form DE 4 specifically adjusts your California state withholding and is not the same as the federal Form W-4, Employee's Withholding Allowance Certificate.

B Who Must Make Estimated Tax Payments

Generally, you must make estimated tax payments if you expect to owe at least \$500 (\$250 if married/RDP filing separately) in tax for 2017 (after subtracting withholding and credits) and you expect your withholding and credits to be less than the **smaller** of:

- 90% of the tax shown on your 2017 tax return; or
- 100% of the tax shown on your 2016 tax return including Alternative Minimum Tax (AMT).

Note:

- You do not have to make estimated tax payments if you are a nonresident or new resident of California in 2017 and did not have a California tax liability in 2016, see Section C for more information.
- If you are a military servicemember not domiciled in California, do not include your military pay in your computation of estimated tax payments. If you are the nonmilitary spouse of a servicemember you may or may not need to include your pay in your computation of estimated tax payments. For more information, get FTB Pub. 1032, Tax Information for Military Personnel.

If you and your spouse/RDP paid joint estimated tax payments, but are now filing separate income tax returns, either of you may claim all of the amount paid, or you may each claim part of the joint estimated payments. If you want the estimated tax payments to be divided, notify the FTB before you file the income tax returns so that the payments can be applied to the proper account. The FTB will accept in writing, any divorce agreement (or court ordered settlement) or a statement showing the allocation of the payments along with a notarized signature of both taxpayers. The statements should be sent to:

JOINT ESTIMATE CREDIT ALLOCATION MS F225
TAXPAYER SERVICES CENTER
FRANCHISE TAX BOARD
PO BOX 942840
SACRAMENTO CA 94240-0040

C Limit on the Use of Prior Year's Tax

Individuals who are required to make estimated tax payments, and whose 2016 California adjusted gross income is more than \$150,000 (or \$75,000 if married/RDP filing separately), must figure estimated tax based on the lesser of 90% of their tax for 2017 or 110% of their tax for 2016 including AMT. This rule does not apply to farmers or fishermen.

Taxpayers with 2017 California adjusted gross income equal to or greater than \$1,000,000 (or \$500,000 if married/RDP filing separately), must figure estimated tax based on their tax for 2017.

D When to Make Your Estimated Tax Payments

Pay your estimated payments by the dates shown below:

1st payment	April 18, 2017
2nd payment	June 15, 2017
3rd payment	September 15, 2017
4th payment	January 16, 2018

*Due to the federal Emancipation Day holiday observed on April 17, 2017, tax returns filed and payments mailed or submitted on April 18, 2017, will be considered timely.

Filing an Early Tax Return In Place of the 4th Installment. If you file your 2017 tax return by January 31, 2018, and pay the entire balance due, you do not have to make your last estimated tax payment. In addition, you will not owe a penalty for the fourth installment.

Annualization Option. If you do not receive your taxable income evenly during the year, it may be to your advantage to annualize your income. This method allows you to match your estimated tax payments to the actual period when you earned the income. You may use the annualization schedule included with the 2016 form FTB 5805, Underpayment of Estimated Tax by Individuals and Fiduciaries.

Farmers and Fishermen. If you are a farmer or fisherman, and at least two-thirds of your 2016 and 2017 gross income is from farming or fishing, you may do either of the following:

- Pay all of your estimated tax by January 16, 2018.
- File your tax return for 2017 on or before March 5, 2018, and pay the total tax due. In this case, you need not make estimated tax payments for 2017. Use the 2016 form FTB 5805F, Underpayment of Estimated Tax by Farmers and Fishermen, to determine if you paid the required estimated tax. If the estimated tax is underpaid, attach the completed form FTB 5805F to the back of your tax return.

Fiscal Year. If you file your tax return on a fiscal year basis, your due dates will be the 15th day of the 4th, 6th, and 9th months of your fiscal year and the 1st month of the following fiscal year. If the due date falls on a weekend, or legal holiday, use the next business day.

Mental Health Services Tax. If your taxable income or nonresident CA source taxable income is more than \$1,000,000, complete the worksheet below.

A. Taxable income from Form 540, line 19, or Long Form 540NR, line 35	_____
B. Less:	\$(1,000,000)
C. Subtotal	_____
D. Tax rate – 1%	x .01
E. Mental Health Services Tax – Multiply line C by line D. Enter this amount here and on line 17 of the 2017 CA Estimated Tax Worksheet, on the next page.	

E How to Use Form 540-ES Payment Form

Use the CA Estimated Tax Worksheet and your 2016 California income tax return as a guide for figuring your 2017 estimated tax. Be sure that the amount shown on line 21 of the CA Estimated Tax Worksheet has been reduced by any overpaid tax on your 2016 tax return which you chose to apply toward your 2017 estimated tax payment.

Note:

- If you filed Form 540 2EZ for 2016, **do not** use the Form 540 2EZ instructions to figure amounts on this worksheet. Instead, get the 2016 California 540 Personal Income Tax Booklet.
- Complete Form 540-ES using black or blue ink:
 1. Complete the Record of Estimated Tax Payments on the next page for your files.
 2. Paying your tax:

Web Pay – Make a payment online or schedule a future payment (up to one year in advance), go to **ftb.ca.gov** for more information.

Do not mail Forms 540-ES to us.

Credit card – Go to **ftb.ca.gov** and search for **pay by credit card** or call 800.272.9829. You will be charged a fee for this service.

Do not mail Forms 540-ES if you pay by credit card.

Check or money order – There is a separate payment form for each due date. Be sure you use the form with the correct due date shown in the top margin of the form.

Fiscal year filers: Enter the month of your fiscal year end (located directly below the form’s title).

Print your name, address, and social security number (SSN) or individual taxpayer identification number (ITIN) in the space provided on Form 540-ES. If you have a foreign address, enter the information in the following order: City, Country, Province/Region, and Postal Code. Follow the country’s practice for entering the postal code. Do not abbreviate the country name.

Complete the amount of payment line of the form by entering the amount of the payment that you are sending. Using black or blue ink, make your check or money order payable to the “Franchise Tax Board.” Write your SSN or ITIN and “2017 Form 540-ES” on it and mail to the address on the form.

Make all checks and money orders payable in U.S. dollars and drawn against a U.S. financial institution.

F Failure to Make Estimated Tax Payments

If you do not make the required estimate payments, if you pay an installment after the date it is due, or if you underpay any installment, a penalty may be assessed on the portion of estimated tax that was underpaid from the due date of the installment to the date of payment or the due date of your tax return, whichever is earlier. Get the 2016 form FTB 5805 for more information.

2017 California Estimated Tax Worksheet Keep this worksheet for your records.

- 1 Residents:** Enter your estimated 2017 California AGI. Nonresidents and part-year residents: Enter your estimated 2017 total AGI from all sources. Military servicemember/spouses, get FTB Pub. 1032, Tax Information for Military Personnel **1** _____
- 2 a** If you plan to itemize deductions, enter the estimated total of your itemized deductions **2a** _____
- b** If you do not plan to itemize deductions, enter the standard deduction for your filing status:
 \$4,129 single or married/RDP filing separately
 \$8,258 married/RDP filing jointly, head of household, or qualifying widow(er) **2b** _____
- c** Enter the amount from line 2a or line 2b, whichever applies **2c** _____
- 3** Subtract line 2c from line 1. **3** _____
- 4** Tax. Figure your tax on the amount on line 3 using the 2016 tax table for Form 540, or Long Form 540NR. Also include any tax from form FTB 3800, Tax Computation for Certain Children with Investment Income, and form FTB 3803, Parents' Election to Report Child's Interest and Dividends **4** _____
- 5 Residents:** Skip to line 6a. **Nonresidents and part-year residents:**
- a** Enter your estimated 2017 California taxable income from Schedule CA (540NR), Part IV, line 49. **5a** _____
- b** Compute the CA Tax Rate: $\frac{\text{Tax on total taxable income from line 4}}{\text{Total taxable income from line 3}}$ **5b** _____
- c** Multiply the amount on line 5a by the CA Tax Rate on line 5b **5c** _____
- 6 a Residents:** Enter the exemption credit amount from the 2016 instructions for Form 540. **6a** _____
- b Nonresidents or part-year residents:** Enter the CA credit proration percentage. Divide line 5a by line 3. If more than 1 enter 1.0000. **6b** _____
- 7 Nonresidents:** CA prorated exemption credits. Multiply the total exemption credit amount by line 6b. **7** _____
- 8 Residents:** Subtract line 6a from line 4. **Nonresidents or part-year residents:** Subtract line 7 from line 5c **8** _____
- 9** Tax on accumulation distribution of trusts. See instructions for form FTB 5870A, Tax on Accumulation Distribution of Trusts **9** _____
- 10** Add line 8 and line 9 **10** _____
- 11** Credits for joint custody head of household, dependent parent, senior head of household, and child and dependent care expenses. **11** _____
- Nonresidents and part-year residents:** For the child and dependent care expenses credit, use the amount from your 2016 Long Form 540NR, line 50. For the other credits listed on line 11, multiply the total 2016 credit amount by the ratio on line 6b.
- 12** Subtract line 11 from line 10. **12** _____
- 13** Other credits (such as other state tax credit). See the 2016 instructions for Form 540, or Long Form 540NR. **13** _____
- 14** Subtract line 13 from line 12. **14** _____
- 15** Interest on deferred tax from installment obligations under IRC Sections 453 or 453A **15** _____
- 16** Alternative Minimum Tax. See Schedule P (540 or 540NR) **16** _____
- 17** Mental Health Services Tax Worksheet, line E (on page 2 of these instructions). **17** _____
- 18** 2017 Estimated Tax. Add line 14 through line 17. Enter the result, but not less than zero **18** _____
- 19 a** Multiply line 18 by 90% (.90). Farmers and fishermen multiply line 18 by 66 2/3% (.6667). **19a** _____
- b** Enter the sum of line 48, line 61, and line 62 from your 2016 Form 540 or the sum of line 63, line 71, and line 72 from your Long Form 540NR. **19b** _____
- c** Enter the amount from your 2016 Form 540 line 17; or Long Form 540NR, line 32 **19c** _____
- d** Is the amount on line 19c more than \$150,000 (\$75,000 if married/RDP filing separately)?
Yes. Go to line 19e. **No.** Enter the lesser of line 19a or line 19b. Skip line 19e and 19f and go to line 20. **19d** _____
- e** Multiply 110% (1.10) by line 19b **19e** _____
- f** Enter the lesser of line 19a or line 19e and go to line 20 (If your California AGI is equal to or greater than \$1,000,000/\$500,000 for married filing separately, use line 19a.) **19f** _____
- Caution:** Generally, if you do not prepay at least the amount on line 19d (or 19f if no amount on line 19d), you may owe a penalty for not paying enough estimated tax. To avoid a penalty, make sure your estimated tax on line 18 is as accurate as possible. If you prefer, you may pay 100% of your 2017 estimated tax (line 18).
- 20** California income tax withheld and estimated to be withheld during 2017 (include withholding on pensions, annuities, etc.) **20** _____
- 21 Balance.** Subtract line 20 from line 19d (or line 19f if no amount on line 19d). If less than \$500 (or less than \$250, if married/RDP filing separately), you do not have to make a payment at this time. **21** _____
- 22 Installment amount.** Multiply the amount on line 21 by 30%. Enter the results on the 1st and 4th installments of your Forms 540-ES. Multiply the amount on line 21 by 40%. Enter the result on the 2nd installment of your Forms 540-ES. There is not a required 3rd installment payment. If you will earn your income at an uneven rate during the year, see Annualization Option in the instructions under paragraph D.

Record of Estimated Tax Payments

Payment form number	(a) Date	(b) Web Pay/Credit card and confirmation number	(c) Amount paid	(d) 2016 overpayment applied	(e) Total amount paid and credited add (c) and (d)
1			\$	\$	\$
2					
3					
4					
Total			\$	\$	\$