

2024

Alternative Minimum Tax and Credit Limitations — Nonresidents or Part-Year Residents

P (540NR)

Attach this schedule to Form 540NR.

Name(s) as shown on Form 540NR

Your SSN or ITIN

Part I Alternative Minimum Taxable Income (AMTI) Important: See instructions for information regarding California/federal differences.

1 If you itemized deductions, go to line 2. If you did not itemize deductions, enter your standard deduction from Form 540NR, line 18, and go to line 6. 2 Medical and dental expenses. Enter the smaller of federal Schedule A (Form 1040), line 4, or 2 1/2% (.025) of federal Form 1040 or 1040-SR, line 11. See instructions. 3 Personal property taxes and real property taxes. See instructions. 4 Certain interest on a home mortgage not used to buy, build, or improve your home. See instructions. 5 Miscellaneous itemized deductions. See instructions. 6 Refund of personal property taxes and real property taxes. See instructions. Do not include your state income tax refund on this line. 7 Investment interest expense adjustment. See instructions. 8 Post-1986 depreciation. See instructions. 9 Adjusted gain or loss. See instructions. 10 Incentive stock options (ISOs) and California qualified stock options (CQSOs). See instructions. 11 Passive activities adjustment. See instructions. 12 Beneficiaries of estates and trusts. Enter the amount from Schedule K-1 (541), line 12a. 13 Other adjustments and preferences. Enter the amount, if any, for each item, a through l. See instructions. a Circulation expenditures. b Depletion. c Installment sales. d Intangible drilling costs. e Long-term contracts. f Loss limitations. g Mining costs. h Patron's adjustment. i Pollution control facilities. j Research and experimental costs. k Tax shelter farm activities. l Related adjustments. Add amounts on line a through line l, and enter total here. 14 Total Adjustments and Preferences. Combine line 1 through line 13. 15 Enter taxable income from Form 540NR, line 19. See instructions. 16 Net operating loss (NOL) deduction from Schedule CA (540NR), Part II, Section B, line 9b1, line 9b2, and line 9b3, column B. Enter as a positive amount. 17 AMTI exclusion. See instructions. 18 If your federal adjusted gross income (AGI) is less than the amount for your filing status (listed below), skip this line and go to line 19. If you itemized deductions and your federal AGI is more than the amount for your filing status, see instructions. Single or married/RDP filing separately \$244,857 Married/RDP filing jointly or qualifying surviving spouse/RDP \$489,719 Head of household \$367,291 19 Combine line 14 through line 18. 20 Alternative minimum tax NOL deduction. See instructions. 21 Alternative Minimum Taxable Income. Subtract line 20 from line 19 (if married/RDP filing separately and line 21 is more than \$465,231, see instructions).

Part II Alternative Minimum Tax (AMT)

22 Exemption Amount. (If this schedule is for certain children under age 24, see instructions.)

If your filing status is:	And line 21 is not over:	Enter on line 22:				
Single or head of household	\$337,678	\$90,048	}	<input checked="" type="radio"/>	22	00
Married/RDP filing jointly or qualifying surviving spouse/RDP	\$450,238	\$120,065				00
Married/RDP filing separately	\$225,115	\$60,029				00

If Part I, line 21 is more than the amount shown above for your filing status, see instructions.

23 Subtract line 22 from Part I, line 21. If zero or less, enter -0-. See instructions.	<input checked="" type="radio"/> 23	00
24 Total Tentative Minimum Tax (TMT). Multiply line 23 by 7% (.07)	<input checked="" type="radio"/> 24	00
25 California adjusted gross income (AGI) from Schedule CA (540NR), Part IV, line 1.	<input checked="" type="radio"/> 25	00
26 NOL adjustment, if any, included on Schedule CA (540NR), Part II, Section B, line 9b1, line 9b2, and line 9b3, column E. Enter as a positive number.	<input checked="" type="radio"/> 26	00
27 Alternative Minimum Tax Income (AMTI) exclusion. See instructions	<input checked="" type="radio"/> 27	(00)
28 Combine line 25 through line 27	<input checked="" type="radio"/> 28	00

29 Adjustments and Preferences. See instructions before completing.

a Investment interest expense	<input checked="" type="radio"/> 00	j Intangible drilling costs	<input checked="" type="radio"/> 00
b Post-1986 depreciation	<input checked="" type="radio"/> 00	k Long-term contracts	<input checked="" type="radio"/> 00
c Adjusted gain or loss	<input checked="" type="radio"/> 00	l Loss limitations	<input checked="" type="radio"/> 00
d Incentive stock options and QOSOs	<input checked="" type="radio"/> 00	m Mining costs	<input checked="" type="radio"/> 00
e Passive activities	<input checked="" type="radio"/> 00	n Patron's adjustment	<input checked="" type="radio"/> 00
f Beneficiaries of estates & trusts	<input checked="" type="radio"/> 00	o Pollution control facilities	<input checked="" type="radio"/> 00
g Circulation expenditures	<input checked="" type="radio"/> 00	p Research and experimental costs	<input checked="" type="radio"/> 00
h Depletion	<input checked="" type="radio"/> 00	q Tax shelter farm activities	<input checked="" type="radio"/> 00
i Installment sales	<input checked="" type="radio"/> 00	r Related adjustments	<input checked="" type="radio"/> 00

Add amounts on line a through line r, and enter total here 29 00

30 Combine line 28 and line 29	<input checked="" type="radio"/> 30	00
31 California Alternative Minimum Tax (AMT) net operating loss (NOL) deduction. See instructions	<input checked="" type="radio"/> 31	00
32 California AMT AGI. Subtract line 31 from line 30. If you did not itemize deductions, enter the result here and on line 40 and skip line 33 through line 39. If you itemized deductions, enter the result here and continue to line 33.	<input checked="" type="radio"/> 32	00
33 Itemized deductions (before federal AGI limitation and proration). Enter the amount from Schedule CA (540NR), Part III, line 28	<input checked="" type="radio"/> 33	00

34 Itemized deductions included in Part I.

a Medical and dental expense, enter amount from Part I, line 2	<input checked="" type="radio"/> a	00
b Personal property taxes and real property taxes, enter amount from Part I, line 3.	<input checked="" type="radio"/> b	00
c Interest on home mortgage, enter amount from Part I, line 4	<input checked="" type="radio"/> c	00
d Miscellaneous itemized deductions, enter amount from Part I, line 5	<input checked="" type="radio"/> d	00
e Investment interest expense adjustment, enter amount from Part I, line 7	<input checked="" type="radio"/> e	00

Combine amounts on line a through line e, and enter total here 34 (00)

35 Total AMT Itemized Deductions. Combine line 33 and line 34	<input checked="" type="radio"/> 35	00
36 Total AMTI. Enter the amount from Part I, line 21	<input checked="" type="radio"/> 36	00
37 Total AMT AGI. Add line 35 and line 36	<input checked="" type="radio"/> 37	00
38 AMT Itemized Deduction Percentage. Divide line 32 by line 37. Do not enter more than 1.0000	<input checked="" type="radio"/> 38
39 Prorated AMT Itemized Deductions. Multiply line 35 by line 38	<input checked="" type="radio"/> 39	00
40 California AMTI. Subtract line 39 from line 32	<input checked="" type="radio"/> 40	00
41 Total TMT. Enter the amount from line 24	<input checked="" type="radio"/> 41	00
42 California AMT Rate. Divide line 41 by amount from Part I, line 21	<input checked="" type="radio"/> 42
43 California TMT. Multiply line 40 by line 42	<input checked="" type="radio"/> 43	00
44 Regular Tax. Enter the amount from Form 540NR, line 37	<input checked="" type="radio"/> 44	00
45 Alternative Minimum Tax. Subtract line 44 from line 43. If zero or less, enter -0- here and on Form 540NR, line 71. Continue to Part III to figure your allowable credits. (If you have a carryover credit for solar energy or commercial solar energy, also enter the result on Side 3, Part III, Section C, line 23 or 24). If you make estimated tax payments for taxable year 2025, enter amount from line 45 on the 2025 Form 540-ES, California Estimated Tax Worksheet, line 16	<input checked="" type="radio"/> 45	00

Part III Credits that Reduce Tax **Note:** Be sure to attach your credit forms to Form 540NR.

1	Enter the amount from Form 540NR, line 42	<input type="radio"/> 1		00
2	Enter the tentative minimum tax from Side 2, Part II, line 43	<input type="radio"/> 2		00

	(a) Credit amount	(b)* Credit used this year	(c) Tax balance that may be offset by credits	(d) Credit carryover
Section A – Credits that reduce excess regular tax.				
3	Subtract line 2 from line 1. If zero or less enter -0- and see instructions. This is your excess tax which may be offset by credits		<input type="radio"/>	
A1 Credits that reduce excess tax and have no carryover provisions.				
4	Code: 162 Prison inmate labor credit (FTB 3507)	<input type="radio"/>	<input type="radio"/>	
5	Code: 232 Child and dependent care expenses credit (FTB 3506)	<input type="radio"/>	<input type="radio"/>	
A2 Credits that reduce excess tax and have carryover provisions. See instructions.				
6	Code: <input type="radio"/> Credit Name: _____	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7	Code: <input type="radio"/> Credit Name: _____	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8	Code: <input type="radio"/> Credit Name: _____	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
9	Code: <input type="radio"/> Credit Name: _____	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
10	Code: 188 Credit for prior year alternative minimum tax	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Section B – Credits that may reduce tax below tentative minimum tax.				
11	If Part III, line 3 is zero, enter the amount from line 1. If line 3 is more than zero, enter the total of line 2 and the last entry in column (c)		<input type="radio"/>	
B1 Credits that reduce net tax and have no carryover provisions.				
12	Code: 170 Credit for joint custody head of household Credit from _____ Credit _____ Form 540NR, _____ X Percentage _____ = 12	<input type="radio"/>	<input type="radio"/>	
13	Code: 173 Credit for dependent parent Credit from _____ Credit _____ Form 540NR, _____ X Percentage _____ = 13	<input type="radio"/>	<input type="radio"/>	
14	Code: 163 Credit for senior head of household Credit from _____ Credit _____ Form 540NR, _____ X Percentage _____ = 14	<input type="radio"/>	<input type="radio"/>	
15	Code: 150 Nonrefundable renter's credit	<input type="radio"/>	<input type="radio"/>	
B2 Credits that reduce net tax and have carryover provisions. See instructions.				
16	Code: <input type="radio"/> Credit Name: _____	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
17	Code: <input type="radio"/> Credit Name: _____	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
18	Code: <input type="radio"/> Credit Name: _____	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
19	Code: <input type="radio"/> Credit Name: _____	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
B3 Other state tax credit				
20	Code: 187 Other state tax credit	<input type="radio"/>	<input type="radio"/>	
B4 Pass-through entity elective tax credit. See instructions.				
21	Code: 242 Pass-through entity elective tax credit		<input type="radio"/>	<input type="radio"/>
Section C – Credits that may reduce alternative minimum tax.				
22	Enter your alternative minimum tax from Side 2, Part II, line 45		<input type="radio"/>	
23	Code: 180 Solar energy credit carryover from Section B2, column (d)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
24	Code: 181 Commercial solar energy credit carryover from Section B2, column (d)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
25	Adjusted AMT. Enter the balance from line 24, column (c) here and on Form 540NR, line 71		<input type="radio"/>	

*If the taxpayer is subject to the business credit limitation, the total of the business credits in Part III, Sections A and B, column (b) cannot exceed \$5,000,000. See instructions.