

GUIDELINES FOR SCANNABLE FORM FTB 3519

Scannable Form FTB 3519 Specifications

Definitions: ALPHA = A-Z (MUST BE ALL CAPS) Use Courier 12-point font, not bold, for taxpayer data
 NUMERIC = 0-9 (print lines 51-58) and CTP ID and doc. ID (print line 63).
 ALPHANUMERIC = A-Z, 0-9
 LEFT JUSTIFY = LJ
 RIGHT JUSTIFY = RJ

| Print Line Number | Identification | Begin Print Position | Maximum Field Length | End Print Position | Field Description |
|-------------------|---|----------------------|----------------------|--------------------|--|
| 1-3 | Blank lines | - | - | - | - |
| 4 | "Form at bottom of page." | 30 | 29 | 58 | Conventional form size/style |
| 4 | Anchor Mark | 59 | 2 | 60 | Anchor mark, Conventional form size/style |
| 5 | Blank line | - | - | - | - |
| 6-11 | "DO NOT MAIL ..." and box | 12 | 62 | 73 | Conventional form size/style |
| 12-13 | Blank lines | - | - | - | - |
| 14-26 | "WHERE TO FILE" and box | 12 | 62 | 73 | Conventional form size/style |
| 27 | Blank line | - | - | - | - |
| 28-35 | "WHEN TO FILE" and box | 12 | 62 | 73 | Conventional form size/style |
| 36 | Blank line | - | - | - | - |
| 37-42 | "ONLINE SERVICES" and box | 12 | 62 | 73 | Conventional form size/style |
| 43-44 | Blank lines | - | - | - | - |
| 45 | "Detach Here"/"Do Not Mail" line | 6 | 75 | 80 | Conventional form size/style |
| 46 | "CAUTION: You may be required to pay electronically. See instructions." | 6 | 46 | 51 | Conventional form size/style |
| 47 | "Taxable Year" and underline | 6 | 8 | 13 | Conventional form size/style |
| 47 | Title of Form | 15 | 37 | 51 | Conventional form size/style |
| 47 | "California Form" and underline | 69 | 11 | 79 | Conventional form size/style |
| 48 | Taxable Year Area "2017" | 7 | 6 | 12 | Conventional form size/style |
| 48 | Title of Form | 15 | 37 | 51 | Conventional form size/style |
| 48 | Form Identifier (3519 (PIT)) Area | 70 | 9 | 78 | Conventional form size/style |
| 49 | Taxable Year Area "2017" | 7 | 6 | 12 | Conventional form size/style |
| 49 | Title of Form | 15 | 37 | 51 | Conventional form size/style |
| 49 | Form Identifier (3519 (PIT)) Area | 70 | 9 | 78 | Conventional form size/style |
| 49 | Bold line | 6 | 75 | 80 | Conventional form size/style |
| 50 | Blank line | - | - | - | - |
| 51 | Taxpayer's SSN or ITIN (mandatory) | 9 | 11 | 19 | Numeric, "-" |
| 51 | Name Control (First 4 Letters of Taxpayer's Last Name) (mandatory) | 22 | 4 | 25 | Alpha, No embedded spaces, No symbols or punctuation |
| 51 | If Joint Return, Spouse's/RDP's SSN or ITIN (mandatory) | 31 | 11 | 41 | Numeric, "-" |
| 51 | Form Year Indicator | 59 | 2 | 60 | "17" |
| 52 | Taxpayer's First Name (mandatory) | 9 | 11 | 19 | Alpha, No embedded spaces |
| 52 | Taxpayer's Middle Initial | 22 | 1 | 22 | Alpha |
| 52 | Taxpayer's Last Name (mandatory) | 25 | 35 | 59 | Alpha |
| 52 | Taxpayer Suffix | 62 | 4 | 65 | Alphanumeric |

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 ALPHANUMERIC = A-Z, 0-9
 LEFT JUSTIFY = LJ
 RIGHT JUSTIFY = RJ

| Print Line Number | Identification | Begin Print Position | Maximum Field Length | End Print Position | Field Description |
|-------------------|---|----------------------|----------------------|--------------------|--|
| 53 | If Joint Return, Spouse's/RDP's First Name (mandatory) | 9 | 11 | 19 | Alpha, No embedded spaces |
| 53 | If Joint Return, Spouse's/RDP's Middle Initial | 22 | 1 | 22 | Alpha |
| 53 | If Joint Return, Spouse's/RDP's Last Name (mandatory) | 25 | 35 | 59 | Alpha |
| 53 | Spouse Suffix | 62 | 4 | 65 | Alphanumeric |
| 54 | Additional Information | 9 | 35 | 43 | Alphanumeric, Embedded spaces, No punctuation, No symbols other than "/". If no "in-care-name" and additional information leave print line 54 blank. |
| 55 | Street Address (mandatory) | 9 | 35 | 43 | Alphanumeric, Embedded spaces, No punctuation, No symbols other than "/" or "-" |
| 55 | APT, STE, SP, RM, FL, BLDG, and UN | 46 | 5 | 50 | Alpha, LJ, "APT, STE, SP, RM, FL, BLDG, or UN" Print only if there is a Number or Letter. |
| 55 | APT, STE, SP, RM, FL, BLDG, and UN Number or Letter | 52 | 5 | 56 | Alphanumeric, LJ, no symbols |
| 55 | Private Mail Box (PMB) | 59 | 3 | 61 | "PMB" Print only if there is a Number or Letter. |
| 55 | Private Mail Box Number or Letter | 63 | 6 | 68 | Alphanumeric, LJ |
| 56 | City (mandatory) | 9 | 17 | 25 | Alphanumeric, Embedded spaces |
| 56 | State (mandatory) (Use Standard Abbreviations in this publication) | 28 | 2 | 29 | Alpha. If foreign address, leave State field blank. |
| 56 | ZIP Code | 32 | 10 | 41 | Numeric, "-", LJ . If foreign address, leave Zip Code field blank. |
| 57 | If Foreign Country Name | 9 | 19 | 27 | Alphanumeric, Embedded spaces, or blank, 2-character Country Abbreviation may be used. |
| 57 | If Foreign Province/State/County | 30 | 17 | 46 | Alphanumeric, Embedded spaces, or blank |
| 57 | If Foreign Postal Code | 49 | 16 | 64 | Alphanumeric, Embedded spaces, or blank |
| 58 | "Amount of payment" | 42 | 17 | 58 | Print as: "Amount of payment" |
| 58 | Taxpayer's Amount of payment | 63 | 10 | 72 | Numeric, RJ, whole dollars only. Decimal point must print at end of dollar amount – at print position 72. Do not use commas. |
| 59-61 | Blank lines | - | - | - | - |
| 62-63 | Bottom Registration Mark, Anchor Mark, and conventional form FTB 3519 | - | - | - | End of bottom registration mark, anchor mark, and conventional form size/style |
| 63 | CTP ID (mandatory) | 32 | 3 | 34 | Numeric |
| 63 | Doc. ID (mandatory) | 40 | 7 | 46 | Numeric, "1221176" |

If no spouse/RDP name, leave the applicable fields on print line 53 blank. If no additional information, leave the applicable field on print line 54 blank.

