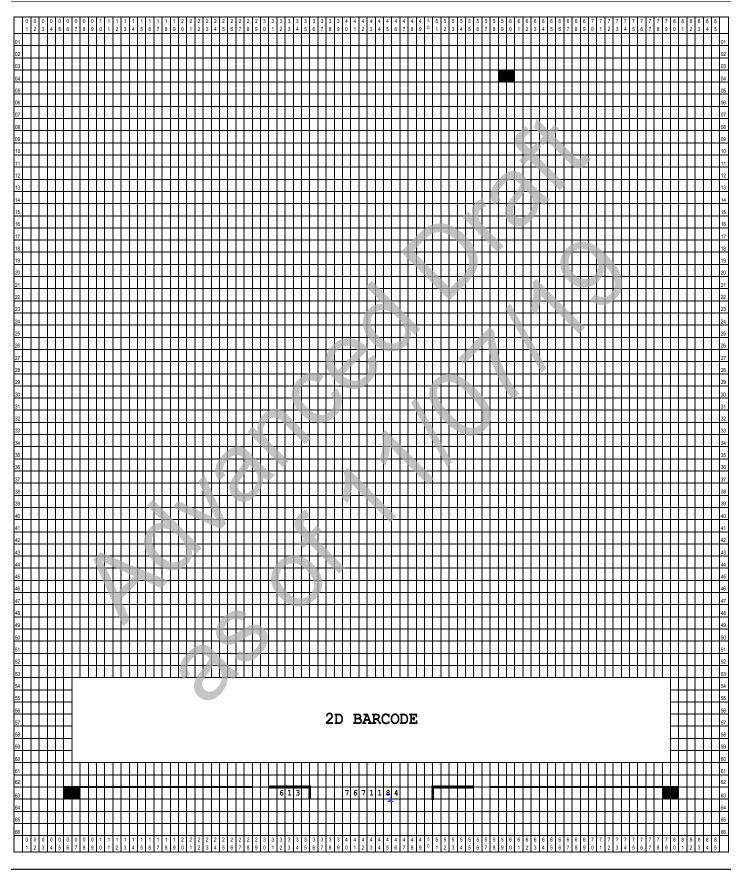
Index/ Field No.	Line/ Box No.	Description	Data Type A = Alpha N = Numeric AN = Alphanumeric X = Checkbox	Length	Value/ Comments	Special Printing Instructions on Substitute Form(s) Blank = Print in associated field
1	Header	Header Version Number	N	2	T1	
2	Header	CTP ID	N	3		
3	Gov't	Tax Year	N	4	YYYY	
4	Gov't	Form Type	N	6	767	
5	Gov't	Software Developer Version	N	3	001. Increment plus 1 for each change to the barcode.	
6	Gov't	FTB Specification Version	Ν	3	001. See Header Fields Definitions in Publication 1098, Part II for more information.	
7		Taxpayer's First Name	А	11		
8		Taxpayer's Middle Initial	A	1		
9		Taxpayer's Last Name	A	35		
10		Taxpayer Suffix	А	4		
11		Taxpayer's SSN, ITIN, or FEIN	N	9		
12	1	Yes – Penalty Waiver Check box	X	1	Upper X = marked check box Blank = unmarked check box	Print: Check mark
13	1	No – Penalty Waiver Check box	x	1	Upper X = marked check box Blank = unmarked check box	Print: Check mark
14	2	Yes – Annualized Income Installment Method Used Check box	X	J	Upper X = marked check box Blank = unmarked check box	Print: Check mark
15	2	No – Annualized Income Installment Method Used Check box		1	Upper X = marked check box Blank = unmarked check box	Print: Check mark
16	3	Yes – California Withholding Installments Check box	X	1	Upper X = marked check box Blank = unmarked check box	Print: Check mark
17	3	No – California Withholding Installments Check box	X	1	Upper X = marked check box Blank = unmarked check box	Print: Check mark
18	3	N/A – California Withholding Installments Check box	X	1	Upper X = marked check box Blank = unmarked check box	Print: Check mark
19	3	Actual amounts withheld 4/15/18	N	15		
20	3	Actual amounts withheld 6/15/18	N	15		
21	3	Actual amounts withheld 9/15/18	N	15		
22	3	Actual amounts withheld 1/15/19	N	15		
23	4	Yes - Estates and Trusts Check box	Х	1	Upper X = marked check box Blank = unmarked check box	Print: Check mark
24	4	No - Estates and Trusts Check box	X	1	Upper X = marked check box Blank = unmarked check box	Print: Check mark
25	13	Penalty amount	N	15		

Form FTB 5805 Specifications Barcode 1 of 1

Index/ Field No.	Line/ Box No.	Description	Data Type A = Alpha N = Numeric AN = Alphanumeric X = Checkbox	Length	Value/ Comments	Special Printing Instructions on Substitute Form(s) Blank = Print in associated field
26	23(a)	Enter Line 18 or 21, whichever is less total	N	15		
27	23(b)	Enter Line 18 or 21, whichever is less total	N	15		
28	23(c)	Enter Line 18 or 21, whichever is less total	N	15		
29	23(d)	Enter Line 18 or 21, whichever is less total	N	15		
30		END OF FILE	AN	5	*EOD*	

Form FTB 5805 Specifications Barcode 1 of 1



Form FTB 5805 Barcode Placement Side 1 Record Layout Note: Record Layout is Reduced