

# Local Agency Military Base Recovery Area Deduction and Credit Summary

**2020**

**3807**

Attach to your California tax return.

Name(s) as shown on your California tax return

SSN or ITIN    CA Corporation no.    FEIN

California Secretary of State (SOS) file number

**A. Check the appropriate box for your entity type:**

- Individual    Estate    Trust    C corporation    S corporation    Partnership
- Exempt organization    Limited liability company    Limited liability partnership

**B. Enter the name of the Local Agency Military Base Recovery Area (LAMBRA) business:** \_\_\_\_\_

**C. Enter the address (actual location) where the LAMBRA business is conducted:** \_\_\_\_\_

**D. Enter the name of the LAMBRA in which the business and/or investment activity is located.** \_\_\_\_\_

**E. Enter the six-digit Principal Business Activity Code of the LAMBRA business.** . . . . . \_\_\_\_\_

**F. Total number of employees in the LAMBRA.** . . . . . \_\_\_\_\_

**G. Gross annual receipts of the business.** . . . . . \_\_\_\_\_

**H. Total asset value of the business.** . . . . . \_\_\_\_\_

**Part I Credit Carryover** (Complete Schedule Z on Side 2 before you complete this part.)

**1** Hiring and sales or use tax credit carryover claimed on the current year tax return:

- a** Hiring credit carryover from Schedule Z, line 8A, column (f) or line 10, column (c) . . . . . **1a** \_\_\_\_\_
- b** Sales or use tax credit carryover from Schedule Z, line 9A, column (f) or line 11, column (c). . . . . **1b** \_\_\_\_\_
- c** Add line 1a and line 1b. . . . . **1c** \_\_\_\_\_

**Part II Portion of Business Attributable to the Former LAMBRA.** See instructions.

**2** Enter the average apportionment percentage of your business that is in the former LAMBRA from Worksheet I, Section A, line 4. If your operation is wholly within the former LAMBRA, the average apportionment percentage is 100% (1.00) . . . . . **2** \_\_\_\_\_

**Part III Net Operating Loss (NOL) Carryover and Deduction.** See instructions.

- 3 a** Enter the total LAMBRA NOL carryover from prior years from Worksheet II, line 9, column (b) . . . . . **3a** \_\_\_\_\_
- b** Enter the total LAMBRA NOL deduction used in the current year from Worksheet II, line 9, column (c).  
Enter this amount on Schedule CA (540), Part I, Section B, line 8e, column B; Schedule CA (540NR), Part II, Section B,  
line 8e, column B; Form 100, line 20; Form 100W, line 20; Form 100S, line 18; or Form 109, line 6. . . . . **3b** \_\_\_\_\_
- c** Enter the LAMBRA NOL carryover to future years from Worksheet II, line 9, column (e) . . . . . **3c** \_\_\_\_\_

**Schedule Z Computation of Credit Carryover Limitations – LAMBRA**

**Part I Computation of Credit Limitations.** See instructions.

<b>1</b> Trade or business income. <b>Individuals:</b> Enter the amount from Worksheet I, Section B, line 14, column (c) on this line and on line 3 (skip line 2). See instructions. Corporations which file a combined report, enter the taxpayer's business income apportioned to California (see instructions for form FTB 3807, Part II) . . . . .	<b>1</b>	
<b>2</b> <b>Corporations:</b> Enter the average apportionment percentage from Worksheet I, Section A, line 4. See instructions . . .	<b>2</b>	
<b>3</b> Multiply line 1 by line 2. . . . .	<b>3</b>	
<b>4</b> Enter the LAMBRA NOL deduction from Worksheet II, line 9, column (c) . . . . .	<b>4</b>	
<b>5</b> LAMBRA taxable income. Subtract line 4 from line 3 . . . . .	<b>5</b>	
<b>6 a</b> Compute the amount of tax due using the amount on line 5. See instructions . . .	<b>6a</b>	
<b>b</b> Enter the amount of tax from Form 540, line 35; Form 540NR, line 42; Form 541, line 21; Form 100, line 23; Form 100W, line 23; Form 100S, line 21; or Form 109, line 10. Corporations, combined groups, and S corporations, see instructions . . . . .	<b>6b</b>	
<b>7</b> Enter the smaller of line 6a or line 6b. This is the limitation based on LAMBRA business income. Go to Part II, Part III, or Part IV. See instructions. . . . .	<b>7</b>	

**Part II Limitation of Credits for Corporations, Individuals, Estates, and Trusts.** See instructions.

	(a) Credit name	(b) Total prior year carryover	(c) Total credit assigned from form FTB 3544, Part A, col. (g)	(d) Total credit col. (b) minus col. (c)	(e) Limitation based on LAMBRA business income	(f) Credit carryover used on Sch. P can never be greater than col. (d) or col. (e)	(g) Total credit carryover col. (d) minus col. (e)
<b>8</b> Hiring credit carryover	A						
	B						
<b>9</b> Sales or use tax credit carryover	A						
	B						

**Part III Limitation of Credits for S Corporations Only.** See instructions.

	(a) Credit name	(b) Total prior year carryover	(c) Credit carryover used this year by S corporation	(d) Carryover col. (b) minus col. (c)
<b>10</b> Hiring credit carryover				
<b>11</b> Sales or use tax credit carryover				

**Part IV Limitation of Credits for Corporations and S Corporations Subject to Paying Only the Minimum Franchise Tax.** See instructions.

	(a) Credit name	(b) Total prior year carryover	(c) Total credit assigned from form FTB 3544, Part A, col. (g)	(d) Total credit carryover col. (b) minus col. (c)
<b>12</b> Hiring credit carryover				
<b>13</b> Sales or use tax credit carryover				

Refer to page 3 for information on how to claim deductions and credit carryovers.