TAXABLE YEAR

FORM

2023

## **California Earned Income Tax Credit**

3514

Attach to your California Form 540, Form 540 2EZ, or Form 540NR.	
Name(s) as shown on tax return	Your SSN or ITIN
If you are separated from your spouse/registered domestic partner (RDP), filling a separate return, and meet the	he requirements to claim
the California Earned Income Tax Credit (EITC) (see instructions), check here	
Before you begin:	
If you claim the California EITC even though you know you are not eligible, you may not be allowed to take the	
If you are claiming the California EITC, you must provide your date of birth (DOB), and spouse's/RDP's DOB if If you qualify for the California EITC, you may also qualify for the Young Child Tax Credit (YCTC) and/or the Fo	
may also qualify for the YCTC if you would otherwise have been allowed the California EITC but you have earn	ed income of zero dollars or less. See
instructions for additional information.	m and to figure the amount of the avadit(a)
Follow Step 1 through Step 11 in the instructions to determine if you meet the requirements to complete this for	in, and to figure the amount of the credit(s).
Part I Qualifying Information (See Step 1 in the instructions.)	
1 a Has the Internal Revenue Service (IRS) previously disallowed your federal Earned Income Credit (EIC)?	Yes No
<b>b</b> Has the Franchise Tax Board (FTB) previously disallowed your California EITC?	• Yes No
<b>2</b> Federal AGI (federal Form 1040 or 1040-SR, line 11)	. 0 2
2 Tederal Adi (lederal Form 1040 of 1040-50), line Fr	.00
3 Federal EIC (federal Form 1040 or 1040-SR, line 27)	. 00
Part II Investment Income Information	
4 Investment Income. See instructions for Step 2 – Investment Income	● 4
Part III Qualifying Child Information (See Step 3 in the instructions.)	
You must complete Part I and Part II before filling out Part III. If you are not claiming a qualifying child, skip P	
Qualifying Child Information (Complete line 5 through line 12 for each child under Child 1, Child 2	
Child 1 Child 2	Child 3
5 First name	•
6 Last name	
7 SSN or ITIN.	
See instructions.	•
8 Date of birth (mm/dd/yyyy). If born after 2004 and the child is younger than you (or your spouse/RDP, if fill skip line 9a and line 9b; go to line 10.	ing jointly),
skip lilie aa aliu lilie ab, yo to lilie to.	
	<ul><li></li></ul>
9 a Was the child under age 24 at the end of 2023, a student, and younger than you (or your spouse/RDP, if	filing jointly)?
If yes, go to line 10. If no, go to line 9b. See instructions.	
<ul> <li>Yes</li> <li>Yes</li> <li>Yes</li> </ul>	Yes  No
<b>b</b> Was the child permanently and totally disabled during any part of 2023? If yes, go to line 10. If no, stop	here.
The child is not a qualifying child.	
<ul> <li>Yes</li> <li>No</li> <li>Yes</li> <li>No</li> </ul>	Yes No
10 Child's relationship to you. See instructions.	
	•
11 Number of days child lived with you in California during 2023. Do not enter more than 365 days. See instr	
	uonons.

12	Child's p	hysica	al address during 202 <u>3</u> .	See instructions.					
			<b>a</b> Street address (number,	street, and apt. no./ste. no	D.)		$\neg$		
	Child 1	ledot							
			<b>b</b> City		C State	<b>d</b> ZIP code			
		•							
			<b>a</b> Street address (number,	street, and apt. no./ste. no	0.)		$\neg$		
	Child 2	ledot							
			<b>b</b> City		C State	d ZIP code			
		•							
	01:11:10		<b>a</b> Street address (number,	street, and apt. no./ste. no	0.)				
	Child 3	•							
			<b>b</b> City		C State	d ZIP code	4		
		•							
Pa	rt IV C	alifor	nia Earned Income	$\leftarrow$					
13	Wages,	salarie	s, tips, and other emplo	yee compensation, s	subject to Ca	lifornia withholdin	g. See instruc	tions • 13	. 00
1/	IUCC na	vmont	ts. See instructions					• 14	
		-	wages and/or pension			leferred compens	ation plan or a		
. •			ntal IRC Section 457 pl					15	_ 00
16	Subtract	t line 1	4 and line 15 from line	13				● 16	_ 00
17	Montava	hle co	mbat pay. See instructi	one				17	<b>.</b> 00
				1.0				- [	
18	Busines	s inco	me or (loss). Enter amo	ount from Workshee	t 3, line 5. S	ee instructions .		18	<b>.</b> 00
	<b>a</b> Busin	ess na	ame	<ul><li></li></ul>					
				Street address (nun	nber, street, and	d apt. no./ste. no.)			
	<b>b</b> Busin	ess ac	ldress	•					
				City		Sta	ate ZIP	code	٦
			•				•		
	<b>c</b> Busin	ess lic	cense number	0					
	4 CEINI								
	u SEIN								
	<b>e</b> Busin	ess co	ode	•				_	 
19	Californ	ia ear	ned income. Add line 1	6, line 17, and line	18			• 19 [	<b>.</b> 00
Pa	r <b>t V</b> Ca	liforn	nia Earned Income Ta	<b>ax Credit</b> (Comple	te Step 6 iı	n the instruction	ıs.)		
20			<b>C.</b> Enter amount from (					[	
	This am	ount s	hould also be entered o	on Form 540, line 75	; or Form 5	40 2EZ, line 23a.		• 20	_ 00

Pa	rt VI Part-Year Resident California Earned Income Tax Credi <u>t</u>
04	CA exemption credit percentage from Form 540NR, line 38. See instructions • 21
22	Part-year resident EITC. Multiply line 20 by line 21. This amount should also be entered on Form 540NR, line 85
	· · · · · · · · · · · · · · · · · · ·
Pa	rt VII Young Child Tax Credit (See Step 8 in the instructions before completing this part.)
23	California earned income. Enter the amount from FTB 3514, line 19. If the amount entered here is greater than \$0, do not complete line 23a or line 23b and continue on to line 24
	a Total wages, salaries, tips, and other employee compensation. See instructions . ● 23a b If your total net loss exceeds \$33,497 or your federal AGI exceeds \$30,950, check the box. See instructions
24	Available Young Child Tax Credit.  If the amount on line 23 is \$25,775 or less, skip line 25 through line 27 and enter \$1,117 on line 28. If applicable, complete line 29 and line 30.  If the amount on line 23 is greater than \$25,775 complete line 25 through line 28. If applicable, complete line 29 and line 30.
25	Excess earned income over threshold. Subtract \$25,775 from line 23
	Divide line 25 by 100. Enter the result as a decimal out to two decimal places, <b>do not</b> round
28	<ul> <li>Young Child Tax Credit.</li> <li>If you did not need to complete line 25 through line 27, your credit is the \$1,117 from line 24.</li> <li>If you completed lines 25 through 27, to compute your credit, subtract line 27 from line 24. If your credit amount is between \$0 and \$1, enter \$1. If your credit amount is over \$1, round to the nearest whole dollar.</li> </ul>
	This amount should also be entered on Form 540, line 76; or Form 540 2EZ, line 23b ● 28
Pa	rt VIII Part-Year Resident Young Child Tax Credit (See Step 9 in the instructions.)
	CA exemption credit percentage from Form 540NR, line 38. See instructions • 29
30	Part-year resident YCTC. Multiply line 28 by line 29. This amount should also be entered on Form 540NR, line 86
Pa	rt IX Foster Youth Tax Credit (See Step 10 in the instructions.)
31	Who is claiming the FYTC? If both spouses/RDPs qualify, you must each check the box that applies to you. See instructions.
	a Primary Taxpayer: My name is the first name listed on this return
	<b>b</b> Spouse/RDP: My name is listed as the spouse/RDP on this joint return
32	Qualifying foster youth information. See instructions.  Primary Taxpayer  Spouse/RDP
	a First name
	b Last name

84632<del>3</del>3 FTB 3514 202<del>3</del> **Side 3** 

33	To better assist us in verifying your eligibility, please check the applicable box(es) below. See instructions.
	a Primary Taxpayer: By checking the box and signing the tax return to which this form is attached, I certify that I am the primary taxpayer listed on this return and voluntarily consent and authorize the California Department of Social Services and any of its affiliated programs (including, but not limited to, CalWORKS and CalFRESH) to confirm or deny, and disclose relevant information to the State of California Franchise Tax Board regarding, my eligibility for the FYTC
	b Spouse/RDP: By checking the box and signing the tax return to which this form is attached, I certify that I am the spouse/RDP listed on this joint return and voluntarily consent and authorize the California Department of Social Services and any of its affiliated programs (including, but not limited to, CalWORKS and CalFRESH) to confirm or deny, and disclose relevant information to the State of California Franchise Tax Board regarding, my eligibility for the FYTC
	Note: Each individual who claims the FYTC and does not check the applicable box above must attach to this return a letter issued by a county or state agency confirming that individual's status as a foster youth at or after age 13, or other proof of status, as a condition of receiving the FYTC.
34	California earned income. Enter the amount from FTB 3514, line 19
	Available Foster Youth Tax Credit  If the amount on line 34 is \$25,775 or less, skip line 36 through line 38 and enter on line 35 and line 39 the following amount.  If either the taxpayer or spouse/RDP is claiming the FYTC, enter \$1,117 on line 35 and line 39.  If both taxpayer and spouse/RDP are claiming the FYTC, enter \$2,234 on line 35 and line 39.  If applicable, complete line 40 and line 41.  If the amount on line 34 is greater than \$25,775, complete line 36 through line 38 and enter on line 35 the following amount.  If either the taxpayer or spouse/RDP is claiming the FYTC, enter \$1,117 on line 35.  If both taxpayer and spouse/RDP are claiming the FYTC, enter \$2,234 on line 35.  If applicable, complete line 40 and line 41.
36	Excess earned income over threshold. Subtract \$25,775 from line 34
37	Divide line 36 by 100. Enter the result as a decimal out to two decimal places, <b>do not</b> round
	Reduction amount
	<ul> <li>Foster Youth Tax Credit.</li> <li>If you did not need to complete line 36 through line 38, and either the taxpayer or spouse/RDP is claiming the FYTC, the credit is the \$1,117 from line 35.</li> <li>If you did not need to complete line 36 through line 38, and both taxpayer and spouse/RDP are claiming the FYTC, the credit is the \$2,234 from line 35.</li> <li>If you completed line 36 through line 38, to compute your credit, subtract line 38 from line 35. If your credit amount is between \$0 and \$1, enter \$1. If your credit amount is over \$1, round to the nearest whole dollar.</li> </ul>
	This amount should also be entered on Form 540, line 77; or Form 540 2EZ, line 23c
Par	t X Part-Year Resident Foster Youth Tax Credit (See Step 11 in the instructions.)
40	CA exemption credit percentage from Form 540NR, line 38. See instructions • 40 •
	Part-year resident FYTC. Multiply line 39 by line 40. This amount should also be entered on Form 540NR, line 87