

## Scannable Form FTB 3539 Specifications

Definitions: ALPHA = A-Z (MUST BE ALL CAPS) Use Courier 12-point font, not bold, for taxpayer data (print lines 51 - 59) and CTP ID and doc. ID (print line 63). All printed text and data must be Left Aligned unless specific instruction is provided in Field Description column.

NUMERIC = 0-9

ALPHANUMERIC = A-Z (MUST BE ALL CAPS), 0-9

| 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                 | Conventional form size/style                                                                                                |
| 5                 | Blank line                                                                                         | —                    | —                    | —                  | —                                                                                                                           |
| 6-9               | "DO NOT FILE ..." and box                                                                          | 12                   | 62                   | 73                 | Conventional form size/style                                                                                                |
| 10                | Blank line                                                                                         | —                    | —                    | —                  | —                                                                                                                           |
| 11-22             | "WHERE TO FILE" and box                                                                            | 12                   | 62                   | 73                 | Conventional form size/style                                                                                                |
| 23                | Blank line                                                                                         | —                    | —                    | —                  | —                                                                                                                           |
| 24-35             | "WHEN TO FILE" and box                                                                             | 12                   | 62                   | 73                 | Conventional form size/style                                                                                                |
| 36                | Blank line                                                                                         | —                    | —                    | —                  | —                                                                                                                           |
| 37-43             | "ONLINE SERVICES" and box                                                                          | 12                   | 62                   | 73                 | Conventional form size/style                                                                                                |
| 44                | Blank line                                                                                         | —                    | —                    | —                  | —                                                                                                                           |
| 45                | "Detach Here"/"Do Not Mail" line                                                                   | 6                    | 75                   | 80                 | Conventional form size/style                                                                                                |
| 46                | <b>CAUTION:</b> 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 "2019"                                                                           | 7                    | 6                    | 12                 | Conventional form size/style                                                                                                |
| 48                | Title of Form                                                                                      | 15                   | 37                   | 51                 | Conventional form size/style                                                                                                |
| 48                | Form Identifier "3539 (CORP)" Area                                                                 | 70                   | 9                    | 78                 | Conventional form size/style                                                                                                |
| 49                | Taxable Year Area "2019"                                                                           | 7                    | 6                    | 12                 | Conventional form size/style                                                                                                |
| 49                | Title of Form                                                                                      | 15                   | 37                   | 51                 | Conventional form size/style                                                                                                |
| 49                | Form Identifier "3539 (CORP)" Area                                                                 | 70                   | 9                    | 78                 | Conventional form size/style                                                                                                |
| 49                | Bold line                                                                                          | 6                    | 75                   | 80                 | Conventional form size/style                                                                                                |
| 50                | Blank line                                                                                         | —                    | —                    | —                  | —                                                                                                                           |
| 51                | Corporation Number (mandatory)                                                                     | 6                    | 7                    | 12                 | Numeric, seven digits, or zero fill (e.g., "1234567" or "0000000")                                                          |
| 51                | Entity Name Control (First Four characters of Corporation or Exempt Organization Name) (mandatory) | 20                   | 4                    | 23                 | Alphanumeric, No embedded spaces, No symbols or punctuation                                                                 |
| 51                | Federal Employer Identification Number (FEIN) (if available)                                       | 26                   | 10                   | 35                 | Numeric, "-", zero fill (e.g. "12-3456789" or "00-0000000").                                                                |
| 51                | California Secretary of State (SOS) (if available)                                                 | 40                   | 12                   | 51                 | Numeric, CA SOS number must be 12 digits. If not available, zero fill (e.g., "000000000000")                                |
| 51                | Form Year Indicator (mandatory)                                                                    | 59                   | 2                    | 60                 | "19"                                                                                                                        |
| 51                | FORM (mandatory)                                                                                   | 68                   | 4                    | 71                 | "FORM"                                                                                                                      |
| 51                | Form Type Indicator (mandatory)                                                                    | 74                   | 1                    | 74                 | The type of return the entity will file:<br>100, 100S, 100W = "1", 109 = "2", 199 = "3"<br>More than one form/No form = "0" |

# GUIDELINES FOR SCANNABLE FORM FTB 3539

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| Print Line Number | Identification                                                                                                                   | Begin Print Position | Maximum Field Length | End Print Position | Field Description                                                                                                                                                             |
|-------------------|----------------------------------------------------------------------------------------------------------------------------------|----------------------|----------------------|--------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 52                | Taxable Year Beginning (mandatory)                                                                                               | 6                    | 3                    | 8                  | "TYB"<br>Numeric, "-", Enter "MM-DD-YYYY" for fiscal or calendar year beginning, Enter "00-00-0000" <b>only</b> if TYB is unknown                                             |
| 52                | Taxable Year Beginning (mandatory)                                                                                               | 11                   | 10                   | 20                 |                                                                                                                                                                               |
| 52                | Taxable Year Ending (mandatory)                                                                                                  | 24                   | 3                    | 26                 | "TYE"<br>Numeric, "-", Enter "MM-DD-YYYY" for fiscal or calendar year ending, Enter "00-00-0000" <b>only</b> if TYE is unknown                                                |
| 52                | Taxable Year Ending (mandatory)                                                                                                  | 29                   | 10                   | 38                 |                                                                                                                                                                               |
| 53                | Name of Corporation or Exempt Organization (mandatory)                                                                           | 6                    | 70                   | 75                 | Alphanumeric, Embedded spaces, "-", No other symbols or punctuation                                                                                                           |
| 54                | Additional Information for Owner, Representative, Attention name, or Doing Business As (DBA) or supplemental address information | 6                    | 35                   | 40                 | Alphanumeric, Embedded spaces, No other symbols or punctuation. If no owner/representative/attention name/DBA or supplemental address information, leave print line 54 blank. |
| 55                | Street Address (mandatory)                                                                                                       | 6                    | 35                   | 40                 | Alphanumeric, Embedded spaces, "-", "/", No other symbols or punctuation                                                                                                      |
| 55                | STE, RM, FL, BLDG, and UN                                                                                                        | 43                   | 5                    | 47                 | Alpha, "STE, RM, FL, BLDG, or UN" Print only if there is a Number or Letter.                                                                                                  |
| 55                | STE, RM, FL, BLDG, and UN Number or Letter                                                                                       | 50                   | 5                    | 54                 | Alphanumeric, no symbols                                                                                                                                                      |
| 55                | Private Mail Box (PMB)                                                                                                           | 57                   | 3                    | 59                 | "PMB" Print only if there is a Number or Letter.                                                                                                                              |
| 55                | Private Mail Box Number or Letter                                                                                                | 61                   | 6                    | 66                 | Alphanumeric                                                                                                                                                                  |
| 56                | City (mandatory)                                                                                                                 | 6                    | 17                   | 22                 | Alphanumeric, Embedded spaces                                                                                                                                                 |
| 56                | State (mandatory) (Use Standard Abbreviations in this publication.)                                                              | 25                   | 2                    | 26                 | Alpha. If foreign address, leave State field blank.                                                                                                                           |
| 56                | ZIP Code                                                                                                                         | 29                   | 10                   | 38                 | Numeric, "-", If foreign address, leave ZIP Code field blank.                                                                                                                 |
| 57                | If Foreign Country Name                                                                                                          | 6                    | 19                   | 24                 | Alphanumeric, Embedded spaces, or blank 2-character Country Abbreviation may be used.                                                                                         |
| 57                | If Foreign Province/State/County                                                                                                 | 27                   | 17                   | 43                 | Alphanumeric, Embedded spaces, "-", "/", or blank                                                                                                                             |
| 57                | If Foreign Postal Code                                                                                                           | 46                   | 16                   | 61                 | Alphanumeric, Embedded spaces, "-", "/", or blank                                                                                                                             |
| 58                | Point of Contact Phone Number                                                                                                    | 6                    | 14                   | 19                 | Numeric, "()", "-", embedded space, no other symbol or punctuation, or blank (e.g., (123) 456-7890)                                                                           |
| 59                | "Amount of Payment" (mandatory)                                                                                                  | 46                   | 17                   | 62                 | Print as: "Amount of Payment"                                                                                                                                                 |
| 59                | Amount of Payment                                                                                                                | 67                   | 10                   | 76                 | Numeric, Right Aligned, whole dollars only. Decimal point must print at end of dollar amount – print position 76.                                                             |
| 60-61             | Blank lines                                                                                                                      | –                    | –                    | –                  | –                                                                                                                                                                             |
| 62-63             | Bottom Registration Mark, Anchor Mark, and conventional form FTB 3539                                                            | –                    | –                    | –                  | End of bottom registration mark, anchor mark, and conventional form size/style                                                                                                |
| 63                | CTP ID (mandatory)                                                                                                               | 32                   | 3                    | 34                 | Numeric, replace '613' with your assigned CTP ID.                                                                                                                             |
| 63                | Doc. ID (mandatory)                                                                                                              | 40                   | 7                    | 46                 | Numeric, "6141196"                                                                                                                                                            |

