| Section B - Additional Income<br>Continued |                                                                                                                                                                                                                                                                                                 | A Federal Amounts<br>(taxable amounts from your<br>federal tax return) | B Subtractions<br>See instructions | C Additions<br>See instructions |
|--------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|------------------------------------|---------------------------------|
| 9                                          | a Total other income. Add lines 8a through 8z . 9a                                                                                                                                                                                                                                              | •                                                                      | •                                  | •                               |
|                                            | <b>b1</b> Disaster loss deduction from form FTB 3805V 9b1                                                                                                                                                                                                                                       |                                                                        | •                                  |                                 |
|                                            | <b>b2</b> NOL deduction from form FTB 3805V 9b2                                                                                                                                                                                                                                                 |                                                                        | <b>(</b>                           |                                 |
|                                            | <b>b3</b> NOL deduction from form FTB 3805Z, 3807, or 3809 • • • • • • • • • • • • • • • • • • •                                                                                                                                                                                                |                                                                        | •                                  |                                 |
| 10                                         | Total. Combine Section A, line 1z through line 7, and Section B, line 1 through line 7, and line 9a in column A and column C. Add Section A, line 1z through line 7, and Section B, line 1 through line 7, line 9a, and line 9b1 through line 9b3 in column B (as applicable). See instructions | •                                                                      | •                                  | •                               |
| Se                                         | ction C - Adjustments to Income                                                                                                                                                                                                                                                                 |                                                                        |                                    |                                 |
|                                            | n federal Schedule 1 (Form 1040)                                                                                                                                                                                                                                                                |                                                                        |                                    |                                 |
| 11                                         | Educator expenses                                                                                                                                                                                                                                                                               | •                                                                      | •                                  |                                 |
| 12                                         | Certain business expenses of reservists, performing artists, and fee-basis government officials 12                                                                                                                                                                                              | •                                                                      | •                                  | •                               |
| 13                                         | Health savings account deduction 13                                                                                                                                                                                                                                                             | •                                                                      | •                                  |                                 |
| 14                                         | Moving expenses. Attach form FTB 3913. See instructions                                                                                                                                                                                                                                         | •                                                                      |                                    | •                               |
| 15                                         | Deductible part of self-employment tax. See instructions 15                                                                                                                                                                                                                                     | •                                                                      | •                                  |                                 |
| 16                                         | Self-employed SEP, SIMPLE, and qualified plans 16                                                                                                                                                                                                                                               | •                                                                      |                                    |                                 |
| 17                                         | Self-employed health insurance deduction.                                                                                                                                                                                                                                                       | •                                                                      | •                                  |                                 |
| 18                                         | Penalty on early withdrawal of savings 18                                                                                                                                                                                                                                                       | •                                                                      |                                    |                                 |
| 19                                         | a Alimony paid 19a                                                                                                                                                                                                                                                                              | •                                                                      |                                    | •                               |
|                                            | <b>b</b> Recipient's: SSN                                                                                                                                                                                                                                                                       |                                                                        |                                    |                                 |
|                                            | Last Name (e)                                                                                                                                                                                                                                                                                   |                                                                        |                                    |                                 |
| 20                                         | IRA deduction                                                                                                                                                                                                                                                                                   | •                                                                      | •                                  | •                               |
| 21                                         | Student loan interest deduction 21                                                                                                                                                                                                                                                              | •                                                                      |                                    | •                               |
| 22                                         | Reserved for future use                                                                                                                                                                                                                                                                         |                                                                        |                                    |                                 |
| 23                                         | Archer MSA deduction 23                                                                                                                                                                                                                                                                         | •                                                                      |                                    |                                 |