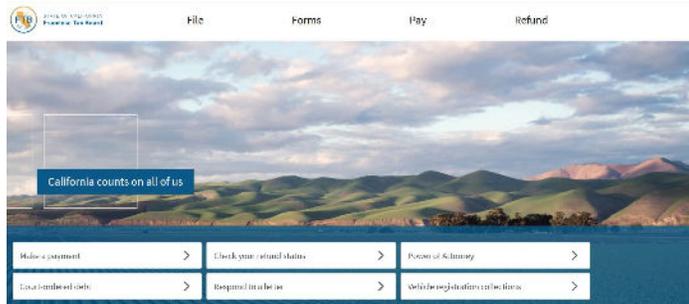
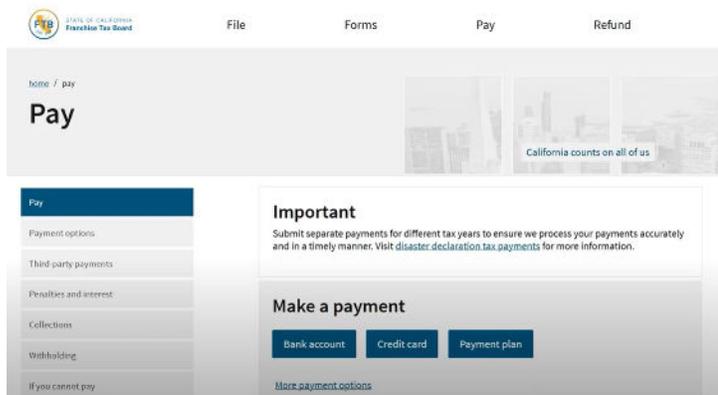


CA Web Pay Tax Payment

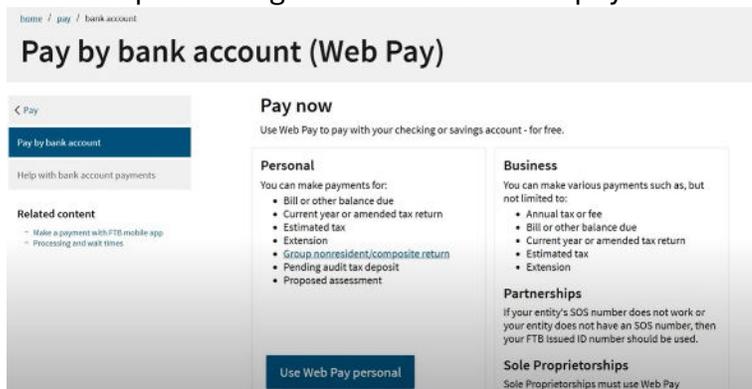
1. Go to <https://www.ftb.ca.gov/>.



2. Select make a payment.



3. Select either bank account or credit card. We recommend using bank account as there are processing fees with credit card payments.



4. Click use web pay personal button.

Enter your Social Security Number and Last Name below. The combination must match our records in order to access this service.

* Social Security Number

9 numbers, no spaces or dashes

* Last Name

Up to 17 letters, no special characters

If you use Web Pay, do not mail the paper payment voucher.

5. Enter your social security number and last name then click submit.

Name & Address Information

* = Required Field

[Privacy Policy](#)

* First Name

Middle Initial

* Last Name

6. Complete name and address section. Then click continue.

Payment Type

* = Required Field

* Select a payment type.

[Help](#)

- Estimated Tax Payment (Form 540 – ES)
- Bill Payment
- Tax Return Payment
- Amended Tax Return Payment
- Notice of Proposed Assessment or Form 3834 Payment
- Pending Audit Tax Deposit Payment (Form 3576)

7. Select payment type then click submit.

Payment Information

*= Required Field

Payment Type: **Estimated Tax**
Change payment type

* Tax Year
Help

You may make up to 4 estimated tax payments.

Payment Amount	Payment Date	Action
No estimated tax payments added yet. Click the button below to add an estimated tax payment.		
Add an estimated tax payment >		

* Is this a joint tax payment?
 Yes
 No

8. Enter tax year the payment is for, select if the payment is a joint payment, then click add an estimated tax payment.

Estimate Payment Details

* Payment Amount
Whole dollars only

* Payment Date
MM/DD/YYYY
Must be today's date or a future date, not to exceed 1 year.

[Continue >](#)

9. Enter amount of payment and date of payment then click continue.

Payment Information

*= Required Field

Payment Type: **Estimated Tax**
Change payment type

* Tax Year
Help

You may make up to 4 estimated tax payments.

Payment Amount	Payment Date	Action
\$800.00	4/15/2025	Edit Delete

[Add an estimated tax payment >](#)

* Is this a joint tax payment?
 Yes
 No

[Continue >](#)

10. Enter bank routing number and account number then click continue.

Bank Information

* = Required Field

*** Routing Number**
[Help](#)
9 numbers only

*** Account Number**
[Help](#)
3-17 characters max

*** Re-enter Account Number**

*** Account Type**

Checking
 Savings

11. Review the information entered. Enter your email address to receive an email confirmation of payment receipt.

Review Your Request

* = Required Field [Privacy Policy](#)

The next screen will show that your request is scheduled.

Email & Phone Information
If you want an email confirmation that your payment request has been received, provide an email address. This email address is only used for this request.

Email Address

Re-enter Email Address

Telephone Number

Payment Authorization
I hereby authorize the Franchise Tax Board to initiate and process a debit entry to the bank account identified above. This authorization will remain in effect unless I contact the Franchise Tax Board to cancel the request. I request the payment(s) above be deducted from the bank account on the date specified above. If this day falls on a Saturday, Sunday, or holiday, the transfer is authorized the next business day. If the Franchise Tax Board cannot deduct the payment from the account because of insufficient funds or because the bank account is closed, the Franchise Tax Board may charge a dishonored payment penalty. I will be responsible for any overdraft fees charged by the bank. Under penalties of perjury under the law of the State of California I declare that I have completed this application to the best of my knowledge and belief, it is true, correct, and complete.

*By checking this box, I agree to the terms above.

12. Check the payment authorization box. The payment scheduled screen will appear.

Payment Scheduled

* = Required Field [Privacy Policy](#)

Thank you for scheduling your payment.

This page expires in **20 minutes**. Please print or save this page.

Important Note: This page serves as a confirmation of your payment request but does not constitute proof of payment. Your financial institution may reject your request if you have insufficient funds, the banking information you entered is incorrect, or your account is closed.

Your Bank Account: Allow up to 2 business days from the payment date for your bank account to reflect your payment. To confirm your payment has been cleared, review your bank account statement, or contact your bank. We recommend you print or save a copy of this page even if you requested an email confirmation. This page expires in 20 minutes.

Date Request Made **3/7/2025 3:45 PM**

Contact Information

Taxpayer's Social Security Number
Name
Address

Payment Information
Payment Type: Estimated Tax Payment (540-ES)
Tax Year: 2025
Estimated Payments

Payment Amount	Payment Date
\$800.00	4/15/2025

Bank Information
Routing Number
Bank Name
Account Number
Account Type: Checking

13. Keep a copy of the email confirmation that the payment was received.