2018 California Like-Kind Exchanges

3840

For	the calendar	year 2018 or fiscal year begin	ning (mm/dd/yyyy)	_, and ending	g (mm/dd	l/yyyy)				
Name(s) as shown on your California tax return.					(California corporation number				
SSN or ITIN			Spouse's/RDP's SSN or ITIN	Spouse's/RDP's SSN or ITIN			FEIN			
Add	tional information	. See instructions.		1 1		California	a Secreta	ry of State file number		
Stre	et address (suite/	room no.)			F	PMB no.				
City	(If you have a fore	eign address, see instructions.)		State			ZIP code			
Fore	ign country name		Foreign province/state/county	Foreign province/state/county			Foreign postal code			
В	Individual Estate Trust C corporation S corporation Partnership Limited liability company Exempt organization Initial FTB 3840 Amended FTB 3840 Annual FTB 3840 Final FTB 3840 (see instructions) If the "Annual FTB 3840" or "Final FTB 3840" box is checked, enter the taxable year the exchange occurred (yyyy): This exchange involves: www.com Partnership Limited liability company Exempt organization This exchange occurred (yyyy): This exchange involves: www.com Personal property Related party. If the "related party" box is checked, enter: Name of the related party:									
Pa		ion on Like-Kind Exchange. See			19 5 0011/		1 EIN			
1 2 3 4 5 6	 Description of like-kind property received:									
Pa 7			and Basis of Like-Kind Property Rece	ived. Enter am	ounts from	n federa	I Form 8	824. See instructions.		
8 9 10	Adjusted basis Gain or (loss) r Cash received,	of other property given up recognized on other property given FMV of other property received, plu	up. Subtract line 8 from line 7	arty, reduced		00	9	00		
11	-		curred				10 11	00		
12							12	00		
13			ounts paid to other party, plus any exchar					00		
14	-	. ,	9 12				14	00		
15			n zero				15	00		
16	•					F	16	00		
17 18	Subtract line 16 from line 15. If more than -0-, enter here. If zero or less, enter -0					00				
19		Recognized gain. Add line 16 and line 17 18 Deferred gain or (loss). Subtract line 18 from line 14 19					00			
20							00			
Sign here if you are filing this form separately and not with a tax return. See instructions.		To learn about your privacy rights, h ftb.ca.gov/forms and search for 113	ow we may use your information, and the 1 . To request this notice by mail, call 800 schedules and statements, and to the bes	consequences f .852.5711. Unde	or not prov er penalties lge and bel	/iding th of perju	e request ry, I decla true, corr	ed information, go to are that I have examined		
		Spouse's/RDP's signature (if filing joi	ing jointly, both must sign) Date (mm/dd/yyyy)			Telephone				
to f	unlawful orge a use's/RDP's	Signature of owner, officer, or represe	e of owner, officer, or representative			Title Date (mm/				
spouse's/RDP's signature.		Firm's name				Firm's address				

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Тахрау	/er	name	

Taxpayer ID

Schedule A Properties Given Up and Received. See instructions.

Par	t I Propert	ies Given Up.	. If you gave up more than three pr	operti	es, attach additional copie	es of Schedule A.		
1	ls property in California?	Ownership percentage	Property description					
A	Yes	%	Property address (if no street address, prov	/ide ass	essor's parcel number and count	y)/Description	State	ZIP code
	L No						otato	
В	Yes . %		Property address (if no street address, prov	/ide ass	essor's parcel number and count	y)/Description		
	🗆 No		City				State	ZIP code
C	☐ Yes%		Property address (if no street address, prov	/ide ass	essor's parcel number and count	y)/Description		-
-	🗆 No		City				State	ZIP code
			Properties giver	nn.	Α	В		C
2			ed in a prior tax deferred	2	Yes 🗆 No		0	Yes No
3	0			3			0	
4			urred	4				
5			t line 4 from line 3	5				
6				6				
7			ubtract line 6 from line 5	7				
Par	If multiple p instructions	roperties were . If the exchar	 Deferred gain, adjusted for diffeed given up and the properties were age included both real and personal If you received more than three properties and personal 	locate I prop	ed both in and outside of (erty, see instructions	California, see		800
9	ls property in California?	Ownership percentage	Property description					
D	☐ Yes	0/	Property address (if no street address, provide assessor's parcel number and county)/Description					
U	🗆 No] No	City				State	zIP code
	☐ Yes	Property address (if no street address, provide assessor's parcel number and county)/Description						
E	□ No	%	City				State	ZIP code
	Property address (if no street address, provide assessor's parcel number and county)/Description							
F	└ Yes	%	City				State	ZIP code
Par	t III Alloca	ation of Califo	prnia Source Deferred Gain. See ir	nstruc	tions			
			Properties recei		D	E		F
10				10				
11	Apportionment percentage for the taxable year of the exchange. See instructions							
	Side 2	FTB 3840 2	υιδ	84	422183			