## **2020 Real Estate Withholding Statement**

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ary 🗌 E	Buye	r/Transferee 🗌 0		N CA Corp no. CA SOS file no		
			FEI	CA Corp no. CA SOS file no		
				SSN or ITIN		
St	tate	ZIP code		Telephone number		
tor trust, c	check	the box that applie	s. • 🗆	Grantor   Nongrantor Trust		
Last name (Grantor)			SSN or	SSN or ITIN		
name			Spouse	Spouse's/RDP's SSN or ITIN (if jointly owned)		
		☐ FEIN	☐ FEIN ☐ CA Corp no. ☐ CA SOS file no.			
State	ZIP	code		Telephone number		
				Ownership percentage . %		
				. /6		
tax purpos the seller i C Section 3 C) classified business purposes) w.	ses o inten 351 d ed as in C.	n this sale. Complet ds to acquire prope or IRC Section 721. a corporation), qua A (or an LLC classif	e Part VI, ( rty that will lified throu ed as a pal	computation.  qualify for nonrecognition of  gh the CA Secretary of State or  thership for income tax purposes		
buyer mus	st wi	thhold on the princi	pal portion	of each installment payment.		
OP here. W ed.				he remitter before the close of		
	State  State  ding (See in poxes that er Internal dence und tax purpose the seller C) classific business purposes) aw.  count, quality from with the seller with the seller count, quality statements are statements.	ding (See instructions that apply er Internal Revealer internal Re	state   ZIP code      State   ZIP code	state   ZIP code   ZIP code   State   ZIP code   ZIP		

Remitter Name						SSN, ITIN, FE	EIN, CA corp no., or CA SOS file no.
Part V Buyer/Transferee Information							
Complete if you checked box 11 in Part IV fo		tallment agreement.					
First name (Grantor)	Initial	Last name (Grantor)					SSN or ITIN
Spouse's/RDP's first name (if jointly purchased)	Initial	Last name					Spouse's/RDP's SSN or ITIN
Business/Nongrantor Trust name (if applicable)						FEIN	CA Corp no. CA SOS file no.
Address (apt./ste., room, PO box, or PMB no.)							
City (If you have a foreign address, see instruction	ne \		Stato	ZIP code		Telephone	numbor
City (ii you have a loreigh address, see instruction	) is.)		Siale	ZIP code		relepriorie	enumber
Principal Amount of Promissory Note	Install	ment Amount			Interest Rate		Repayment Period
						%%	Number of months
Buyer's/Transferee's Acknowledgment to Read the "Buyer/Transferee" Information bel			the perj	ury statemer	nt and sign.		
I acknowledge that I am required to withhoreal property either at the rate of 3 1/3% ( on Form 593, Real Estate Withholding State portion of each installment payment and s Withholding, the withholding payment, and Tax Board by the 20th day of the month for payment schedule change, I will promptly documents to ensure withholding compliate of each installment payment and do not secopy of Form 593 to the seller/transferor be	0333) of tement, end one of give of lowing information in the	of the total sales price of the principal portion of the principal portion of the copy of each to the ne copy of Form 593 the month of the instanchise Tax Bo lso understand that I withholding along wi	e or the franch to the tallmer bard. It am su	e Alternative each installm ise Tax Boar seller/transf at payment. I understand the bject to with	Withholding Cal ent payment. I v d along with For eror. I will send f the terms of th nat the Franchise holding penaltie	culation, as s vill complete m 593-V, Pa each withhol e installment e Tax Board r s if I do not v	specifed by the seller/transferor Form 593 for the principal yment Voucher for Real Estate ding payment to the Franchise t sale, promissory note, or may review relevant escrow withhold on the principal portion
Part VI Computation Complete this part if you checked and certifi	ed box	3 in Part III, or to cal	culate a	nn alternative	e withholding cal	culation amo	ount.
13. Selling price							
14. Selling expenses							14
15. Amount realized. Subtract line 14 from	n line 1	3					15
16. Enter the price you paid to purchase th	e prope	rty (see instructions	, How t	o Figure You	r Basis.)	16	
17. Seller/Transferor-paid points				17 _		_	
18. Depreciation				18 _		_	
19. Other decreases to basis				19 _		_	
20. Total decreases to basis. Add line 17 th	rough	ine 19				20	
21. Subtract line 20 from line 16						21	
22. Cost of additions and improvements				• 22 _		_	
23. Other increases to basis							
24. Total increases to basis. Add line 22 an							
25. Adjusted basis. Add line 21 and line 24							
<b>26.</b> Enter any suspended passive activity lo							
<b>27.</b> Add line 25 and line 26							
28. Estimated gain or loss on sale. Subtra							
certify on Side 3. No withholding is req					-		•

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Form 593 2019 Side 2

Remitter Name				SSN, ITIN, FEIN, CA corp no., or CA SOS file no.		
☐ Individual 1☐ Non-Califor Multiply the am alternative with appropriate bo	12.3% rnia Partnership 12.3% nount on line 28 by the ta nholding calculation amou x on line 35, Boxes B-H, a	Corporation 8.84  S Corporation 13  x rate for the filing typ nt. If you elect the alte	cable box for the filing type.  4% Bank and Financial Corpo  3.8% Financial S Corporation 1 be selected above and enter the amount ernative withholding calculation amount on line 36	5.8% here. This is the , then check the		
This is the tota	I sales price withholding	amount. If you select t	the total sales price withholding amou			
Part VII Escrow	or Exchange Informat	ion				
	-		● 31			
	-			mm/dd/yyyy) <b>● 32</b>		
		_		% ● 33		
<b>34.</b> Type of Transac <b>A</b> ☐ Conventi	ction (Check One Only): • ional Sale/Transfer	• _		/u <b>U u</b> u		
Total Sales Pri A ☐ 3 <sup>1</sup> / <sub>3</sub> % (.0	0333) x Total Sales Price,	Boot, or Installment S	Sale Payment			
B	thholding Calculation Ele al 12.3% x Gain on Sale ifornia Partnership 12.3% tion 8.84% x Gain on Sale d Financial Corp. 10.84%	x Gain on Sale x Gain on Sale	F ☐ S Corporation 13.8% x Gain or G ☐ Financial S Corporation 15.8% H ☐ Trust 12.3% x Gain on Sale	x Gain on Sale		
<b>36.</b> Amount Withhei	id from this Seller/Transfer	or		6		
Title and escrow withholding amo	persons, and exchange unts. Transferors are str	accommodators are r ongly encouraged to (	not authorized to provide legal or acco consult with a competent tax professio	unting advice for purposes of determining nal for this purpose.		
ftb.ca.gov/forms a	nd search for <b>1131</b> . To re	quest this notice by m	•			
·		at the information pro	ovided above is, to the best of my knowl	edge, true and correct. I further certify that:		
Check the applicable	` '	a an indicated by a abo	ook mark(a) in Dort III			
<ul> <li>☐ The sale is fully exempt from withholding as indicated by a check mark(s) in Part III.</li> <li>☐ The sale is fully or partially exempt from withholding as indicated by a check mark(s) in Part IV.</li> </ul>						
•		-	as indicated by a check mark in Part VII,	line 35 (B-H).		
☐ The Buyer/Tranin Part V. This b	oox should only be check	ccepts the withholding ed by those who are in	g requirements as stated on the Buyer's nvolved in an installment sale.	/Transferee's Acknowledgment to Withhold		
	Seller's/Transferor's signature			Date		
Cian	Seller's/Transferor's spouse's /I	RDP's signature		Date		
Sign Here	<b>X</b> Buyer's/Transferee's signature			Date		
It is unlawful to force						
a spouse's/RDP's signature.	Buyer's/Transferee's spouse's/F	IDP's signature		Date		
	Preparer's name and Title/Esci	ow business name		Telephone Number		
	*			·		

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Form 593 2019 Side 3