

2024**California Like-Kind Exchanges****3840**

For the calendar year 2024 or fiscal year beginning (mm/dd/yyyy) _____, and ending (mm/dd/yyyy) _____.

Name(s) as shown on your state tax return.		California corporation number
SSN or ITIN	Spouse's/RDP's SSN or ITIN	FEIN
Additional information. See instructions.		California Secretary of State file number
Street address (suite/room no.)		PMB no.
City (If you have a foreign address, see instructions.)		State
		ZIP code
Foreign country name	Foreign province/state/county	Foreign postal code

- A** ☒ Individual ☐ Estate ☐ Trust ☐ C corporation ☐ S corporation ☐ Partnership ☐ Limited liability company ☐ Exempt organization
- B** ☒ 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): _____
- C** This exchange involves: ☒ Real property ☐ Personal property (Individuals only) ☐ Related party. If the "related party" box is checked, enter:
Name of the related party: _____ Related party's SSN/ITIN or FEIN: _____

Part I Information on Like-Kind Exchange. For individuals, exceptions apply based on AGI limitations. See instructions and R&TC Section 18031.5, for more information.

- 1 Description of like-kind property given up: ☒ _____
- 2 Description of like-kind property received: ☒ _____
- 3 Date like-kind property given up was originally acquired (mm/dd/yyyy) ☒ **3** _____
- 4 Date you actually transferred your property to other party (mm/dd/yyyy) ☒ **4** _____
- 5 Date like-kind property you received was identified by written notice to another party (mm/dd/yyyy) ☒ **5** _____
- 6 Date you actually received the like-kind property from other party (mm/dd/yyyy) ☒ **6** _____

Part II Realized Gain or (Loss), Recognized Gain, and Basis of Like-Kind Property Received. Enter amounts from federal Form 8824. See instructions.

7	Fair market value (FMV) of other property given up.	<input checked="" type="radio"/> 7		00	
8	Adjusted basis of other property given up.	<input checked="" type="radio"/> 8		00	
9	Gain or (loss) recognized on other property given up. Subtract line 8 from line 7.	<input checked="" type="radio"/> 9			00
10	Cash received, FMV of other property received, plus net liabilities assumed by the other party, reduced (but not below zero) by any exchange expenses incurred	<input checked="" type="radio"/> 10			00
11	FMV of like-kind property received	<input checked="" type="radio"/> 11			00
12	Add line 10 and line 11.	<input checked="" type="radio"/> 12			00
13	Adjusted basis of like-kind property given up, net amounts paid to other party, plus any exchange expenses not used on line 10.	<input checked="" type="radio"/> 13			00
14	Realized gain or (loss). Subtract line 13 from line 12.	<input checked="" type="radio"/> 14			00
15	Enter smaller of line 10 or line 14, but not less than zero.	<input checked="" type="radio"/> 15			00
16	Ordinary income under recapture rules.	<input checked="" type="radio"/> 16			00
17	Subtract line 16 from line 15. If more than -0-, enter here. If zero or less, enter -0-.....	<input checked="" type="radio"/> 17			00
18	Recognized gain. Add line 16 and line 17.	<input checked="" type="radio"/> 18			00
19	Deferred gain or (loss). Subtract line 18 from line 14.	<input checked="" type="radio"/> 19			00
20	Basis of like-kind property received. Subtract line 10 from the sum of line 13 and line 18.....	<input checked="" type="radio"/> 20			00

Sign here
if you are
filing this form
separately and
not with a tax
return. See
instructions.

It is unlawful
to forge a
spouse's/RDP's
signature.

Our privacy notice can be found in annual tax booklets or online. Go to ftb.ca.gov/privacy to learn about our privacy policy statement, or go to ftb.ca.gov/forms and search for **1131** to locate FTB 1131 EN-SP, Franchise Tax Board Privacy Notice on Collection. To request this notice by mail, call 800.338.0505 and enter form code **948** when instructed. Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete.

Your signature	Date (mm/dd/yyyy)	Telephone	
Spouse's/RDP's signature (if filing jointly, both must sign)	Date (mm/dd/yyyy)	Telephone	
Signature of owner, officer, or representative	Title	Date (mm/dd/yyyy)	
Firm's name	Firm's address		

Taxpayer name	Taxpayer ID
---------------	-------------

Schedule A Properties Given Up and Received. See instructions.

Part I Properties Given Up. If you gave up more than three properties, attach additional copies of Schedule A.

1	Is property in California?	Ownership percentage	Property description
A	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> _____%	<input type="radio"/> Property address (if no street address, provide assessor's parcel number and county)/Description <input type="radio"/> City <input type="radio"/> State <input type="radio"/> ZIP code
B	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> _____%	<input type="radio"/> Property address (if no street address, provide assessor's parcel number and county)/Description <input type="radio"/> City <input type="radio"/> State <input type="radio"/> ZIP code
C	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> _____%	<input type="radio"/> Property address (if no street address, provide assessor's parcel number and county)/Description <input type="radio"/> City <input type="radio"/> State <input type="radio"/> ZIP code

Properties given up:		A	B	C
2	Was this property acquired in a prior tax deferred exchange?	2 <input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No
3	Consideration/Sales price	3 <input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>
4	Selling expenses paid/incurred	4 <input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>
5	Amount realized. Subtract line 4 from line 3.	5 <input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>
6	California adjusted basis.	6 <input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>
7	Realized gain or (loss). Subtract line 6 from line 5.	7 <input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>
8	California sourced deferred gain. If all property given up was real property located in California, enter the amount from Side 1, line 19, Deferred gain, adjusted for differences between federal and California law. If multiple properties were given up and the properties were located both in and outside of California, see instructions. If the exchange included both real and personal property, see instructions. <input checked="" type="radio"/> 8 _____ 00			

Part II Properties Received. If you received more than three properties, attach additional copies of Schedule A.

9	Is property in California?	Ownership percentage	Property description
D	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> _____%	<input type="radio"/> Property address (if no street address, provide assessor's parcel number and county)/Description <input type="radio"/> City <input type="radio"/> State <input type="radio"/> ZIP code
E	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> _____%	<input type="radio"/> Property address (if no street address, provide assessor's parcel number and county)/Description <input type="radio"/> City <input type="radio"/> State <input type="radio"/> ZIP code
F	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> _____%	<input type="radio"/> Property address (if no street address, provide assessor's parcel number and county)/Description <input type="radio"/> City <input type="radio"/> State <input type="radio"/> ZIP code

Part III Allocation of California Sourced Deferred Gain. See instructions.

Properties received:		D	E	F
10	Allocation of California sourced deferred gain to properties received. If only one property was received, enter the amount from Part I, line 8, in column D. If more than one property was received, see instructions.	10 <input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>
11	Apportionment percentage for the taxable year of the exchange. See instructions. <input checked="" type="radio"/> 11 _____%			