

2026**Payment Voucher for Pass-Through Entity Withholding****592-Q****The withholding agent completes and files this form.****Payment 1**

Due by April 15, 2026; for weekend or holiday, see instructions.

Business name

☐ SSN or ITIN ☐ FEIN ☐ CA Corp no. ☐ CA SOS file no.

First name

Initial

Last name

Telephone

Address (apt./ste., room, PO box, or PMB no.)

City (If you have a foreign address, see instructions.)

State

ZIP code

Using black or blue ink, make check or money order payable to: "Franchise Tax Board." Write the tax ID no. and "2026 Form 592-Q" on the check or money order. Mail Form 592-Q and check or money order to WITHHOLDING SERVICES AND COMPLIANCE MS F182, FRANCHISE TAX BOARD, PO BOX 942867, SACRAMENTO CA 94267-0651.

Amount of payment

For Privacy Notice, get FTB 1131 EN-SP.

8621263

Form 592-Q 2025

____ DETACH HERE ____ IF NO PAYMENT IS DUE, DO NOT MAIL THIS FORM ____ DETACH HERE ____

2026**Payment Voucher for Pass-Through Entity Withholding****592-Q****The withholding agent completes and files this form.****Payment 2**

Due by June 15, 2026; for weekend or holiday, see instructions.

Business name

☐ SSN or ITIN ☐ FEIN ☐ CA Corp no. ☐ CA SOS file no.

First name

Initial

Last name

Telephone

Address (apt./ste., room, PO box, or PMB no.)

City (If you have a foreign address, see instructions.)

State

ZIP code

Using black or blue ink, make check or money order payable to: "Franchise Tax Board." Write the tax ID no. and "2026 Form 592-Q" on the check or money order. Mail Form 592-Q and check or money order to WITHHOLDING SERVICES AND COMPLIANCE MS F182, FRANCHISE TAX BOARD, PO BOX 942867, SACRAMENTO CA 94267-0651.

Amount of payment

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2026**Payment Voucher for Pass-Through Entity Withholding****592-Q****The withholding agent completes and files this form.****Payment 3**

Due by September 15, 2026; for weekend or holiday, see instructions.

Business name

☐ SSN or ITIN ☐ FEIN ☐ CA Corp no. ☐ CA SOS file no.

First name

Initial

Last name

Telephone

Address (apt./ste., room, PO box, or PMB no.)

City (If you have a foreign address, see instructions.)

State

ZIP code

Using black or blue ink, make check or money order payable to: "Franchise Tax Board." Write the tax ID no. and "2026 Form 592-Q" on the check or money order. Mail Form 592-Q and check or money order to WITHHOLDING SERVICES AND COMPLIANCE MS F182, FRANCHISE TAX BOARD, PO BOX 942867, SACRAMENTO CA 94267-0651.

Amount of payment

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Form at bottom of page.

___ DETACH HERE ___ IF NO PAYMENT IS DUE, DO NOT MAIL THIS FORM ___ DETACH HERE ___

TAXABLE YEAR

CALIFORNIA FORM

2026 Payment Voucher for Pass-Through Entity Withholding

592-Q

The withholding agent completes and files this form.

Payment 4 Due by January 15, 2027; for weekend or holiday, see instructions.

Business name ☐ SSN or ITIN ☐ FEIN ☐ CA Corp no. ☐ CA SOS file no.

First name Initial Last name Telephone

Address (apt./ste., room, PO box, or PMB no.)

City (If you have a foreign address, see instructions.) State ZIP code

Using black or blue ink, make check or money order payable to: "Franchise Tax Board." Write the tax ID no. and "2026 Form 592-Q" on the check or money order. Mail Form 592-Q and check or money order to WITHHOLDING SERVICES AND COMPLIANCE MS F182, FRANCHISE TAX BOARD, PO BOX 942867, SACRAMENTO CA 94267-0651.

Amount of payment

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TAXABLE YEAR

CALIFORNIA FORM

2026 Payment Voucher for Pass-Through Entity Withholding

592-Q

Check the box to indicate how Form 592-PTE was submitted (check only one box): ☐ Electronic ☐ Paper

Supplemental Payment Voucher Use this voucher only if you have a final withholding payment to remit with Form 592-PTE. The due date of the Supplemental Payment Voucher is the same as your **original due date** for Form 592-PTE, **regardless of extension.**

Business name ☐ SSN or ITIN ☐ FEIN ☐ CA Corp no. ☐ CA SOS file no.

First name Initial Last name Telephone

Address (apt./ste., room, PO box, or PMB no.)

City (If you have a foreign address, see instructions.) State ZIP code

Using black or blue ink, make check or money order payable to: "Franchise Tax Board." Write the tax ID no. and "2026 Form 592-Q" on the check or money order. Mail Form 592-Q and check or money order to WITHHOLDING SERVICES AND COMPLIANCE MS F182, FRANCHISE TAX BOARD, PO BOX 942867, SACRAMENTO CA 94267-0651.

Amount of payment

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