

Example 9 - Withholding on boot in a completed exchange

YEAR

CALIFORNIA FORM

2007 Real Estate Withholding Tax Statement

593-B

Attach to Form 593, Real Estate Withholding Remittance Statement

Copy A FOR FRANCHISE TAX BOARD

Part I Withholding Agent (Payer/Sender) Check one: Escrow/Title Company Accommodator/Intermediary Buyer

Name, Mailing Address, (number and street, PO Box, rural route, Apt. no., suite, room, or PMB no.), City, State, and ZIP Code

All Fair Exchange
1234 Best Street
Section, CA 95000

FEIN CA Corp. No

0800018

SSN or ITIN

Seller or Transferor (Complete one 593-B for each seller, unless husband and wife)

Name, Mailing Address, (number and street, PO Box, rural route, Apt. no., suite, room, or PMB no.), City, State, and ZIP Code

Thomas Trader
11 Business Ave
Over, CA 91110

SSN or ITIN

600-77-6000

Spouse's SSN or ITIN (if jointly owned)

FEIN CA Corp. No

Enter in Box 2 the boot distribution date.

Leave Box 3 blank.

Escrow or Exchange Information

1 Escrow or Exchange Number P0321	2 Date of Transfer, Exchange Completion, Exchange Failure, or Installment Payment 10/01/2007	3 Total Sales Price \$	4 Ownership Percentage 100.00 %
5 Address (or parcel number and county) of the California real property transferred 77 Lucky Street Castle, CA 90110	6 Withholding Method Selected Check one: <input checked="" type="checkbox"/> Total Sales Price (complete box 7a and 7b, skip box 8 and 9) <input type="checkbox"/> Alternative Election (skip box 7a and 7b, complete box 8 and/or 9)	7a Amount Subject to Withholding (Total Sales Price) \$ 15,000.00 Check One: <input type="checkbox"/> Total Sales Price x Ownership % <input type="checkbox"/> Installment Sale Payment <input checked="" type="checkbox"/> Boot <input type="checkbox"/> Failed Exchange (Total Sales Price x Ownership %) <input type="checkbox"/> Failed Exchange (Less Boot at Sale)	
7b Amount Withheld From This Seller (Total Sales Price) \$ 499.50 (.0333 x Amount subject to withholding from box 7a)	8 Amount Withheld From This Seller (Alternative Election) \$	9 Installment Withholding Percent _____% (Percent from Box 9 instructions) Apply this percent to all installment payments.	

Enter in Box 7a the amount of Boot. (cash or cash equivalent)
Check the Boot checkbox.

Preparer: Name and Title (please type or print)

Adam Acomadant, Escrow Officer

Telephone Number

(210) 555-1212

Part II Election and Certification of Seller or Transferor (Complete and Sign if you elect the Alternative Withholding Amount and you checked "Alternative Election" in box 6 and completed box 8 and/or 9.)

Title and escrow persons and exchange accommodators are not authorized to provide legal or accounting advice for purposes of determining withholding amounts. Transferors are strongly encouraged to consult with a competent tax professional for this purpose.

Under penalties of perjury, I elect the alternative withholding and hereby certify that the information provided above is, to the best of my knowledge, true and correct. I understand that the Franchise Tax Board may review relevant escrow documents to ensure withholding compliance.

Seller's name (type or print) _____

Seller's signature _____ Date: _____

Spouse's name (if jointly owned) _____

Spouse's signature (if jointly owned) _____ Date: _____