Change of Address

Do not attach this form to your return.

Part I	Complete	This Part to	Change Your	Home Mailing	Address
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1a Your fi	rst name		1b Your SSN or ITIN				
		.			. I . .		
2a Spouse's/RDP's first name Initial Last name				2b Spouse's/RDP's SSN or IT			
		.					
3 Prior n	ame(s) See instructions.						
4: 011:1		1715	O I VIC DOI DME			10.	
ia Old ad	dress (number and street, ci	no., or foreign address, see instruc	ctions.	Apt. no./Ste no.			
th Spaus	o's/PDP's old address (nun	nhor and street	city state and ZIP Code)	If a PO box, PMB no., or foreign ac	ddroes, soo instructions	Apt. no./Ste. no.	
in Shone	s S/RDF S old address, (Hull	ibei and street, t	nty, state, and ZIP Code).	II a PO box, PIVIB 110., OF lotely 11 at	duress, see mstructions.	Apt. 110./Ste. 110.	
5 New ac	ddress (number and street of	rity state and ZII	P Code) If a PO box PM	B no., or foreign address, see instru	ıctions	Apt. no./Ste. no.	
o mon ac	railed (namber and effect, e	nty, otato, and zin	0000). II u 1 0 box, 1 ivii	5 no., or loroigh address, see mone	ioliono.	7 (51. 110.) 610. 110.	
art II (Complete This Part to Cha	nne Your Rusin	ess Mailinn Address or	Rusiness Location Address			
art II Complete This Part to Change Your Business Mailing Address or Business Location Address eck ALL boxes this change affects:					7b California corporation number		
6 Business, Estate, or Trust returns (Forms 100, 100W, 100S, 109, 199, 541, 565, or 568)							
_	ısiness, Estate, or Trust loc	•		· · · · · · · · · · · · · · · · · · ·	7c Secretary of State (SOS) file number		
			,				
8a Business, Estate, or Trust name					8b FEIN		
					_		
9 Old ms	ailing address (number and	street city state	and 7IP Code). If a PO b	ox, PMB no., or foreign address, se	ae instructions		
3 Old Ille	ming address (number and	street, city, state,	and Zii Code). Il a i O b	ox, I wib no., or loreign address, se	se manuchona.		
0 New m	ailing address (number and	street, city, state	, and ZIP Code). If a PO	box, PMB no., or foreign address, s	see instructions.		
1 New bu	usiness location address (r	number and stree	et, city, state, and ZIP Coc	e). If a PO box, PMB no., or foreign	address, see instructions.		
art III	Signature						
	Daytime telephone nur	mber of person to	contact ▶ (
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			1	• 1			
lease							
lease ign	Your signature		Date	If Part II complete, signal		Date	
lease ign lere			Date	If Part II complete, signate officer, or representative		Date	
Please Sign Iere See Istructions)						Date	

General Information

For purposes of California income tax, references to a spouse, husband, or wife also refer to a California registered domestic partner (RDP), unless otherwise specified. When we use the initials RDP they refer to both a California registered domestic "partner" and a California registered domestic "partnership," as applicable. For more information on RDPs, get FTB Pub. 737, Tax Information for Registered Domestic Partners.

Purpose

Use form FTB 3533, Change of Address, to change your home or business mailing address or your business location. This address change will be used for future correspondence. Generally, complete only one form FTB 3533 to change your home or business address. If this change also affects the mailing address for your children who filed separate tax returns, complete a separate form FTB 3533 for each child. If you are a representative filing for the taxpayer, attach a copy of your form FTB 3520, Power of Attorney, to this form.

You may also go to **ftb.ca.gov** and search for **myftb account** (individuals only) or call 800.852.5711 to change your address. If you change your address online or by phone, you do not need to file this form.

Prior Name(s)

If you or your spouse/RDP changed your name because of marriage, divorce, etc., complete line 3.

Addresses

Include any apartment number, suite number, or private mail box (PMB) in the address field. Write the "PMB" first, then the box number. Example: 111 Main St. PMB 123.

PO Box

If your post office does not deliver mail to your street address, show your PO box number instead of your street address.

Foreign Address

If your address is outside the United States or its possessions or territories, enter the information in

the following order: City, Country, Province/Region, and Postal Code. Follow the country's practice for entering the postal code. **Do not** abbreviate the country name.

Signature

If you complete Part II, the owner, officer, or a representative must sign. An officer is the president, vice president, treasurer, chief accounting officer, etc. A representative is a person who maintains a valid power of attorney to handle tax matters.

Where to File

Mail this form to:

FRANCHISE TAX BOARD PO BOX 942840 SACRAMENTO CA 94240-0002

If you moved after you filed your return and you are expecting a refund, notify the post office serving your old address to assist in forwarding your check to the new address.