TAXABLE YEAR

Charitable Remainder and Pooled Income Trusts

CALIFORNIA FORM

2021	and	Pooled Incom	ne Trusts						541	·B
Name of trust			·				FEIN		1	
Name of trust	ee(s)									
Additional info	ormation (see instru	uctions)								
Street address	s (number and stre	et) or PO box					Apt. no./s	te. no.	PMB/private ma	ailbox
City							State	ZIP code	<u> </u>	
Foreign count	ry name		Foreign provir	nce/state/count	ty			Foreign	postal code	
Date trust	created (mm/dd/yy	уу)								
	_	ole lead trust (2) Charitabl		st (3) Cha	aritable rema	ainder unitrust	(4) F	Pooled inc	come fund (5)	Other
Fair Market V	alue (FMV) of asse	ets at end of taxable year		Gross Incom	е					
Check the a	pplicable box:	☐ Initial Tax Return ●	Final Tax Return	Amen	ded Tax R	leturn	New Ti	rustee	New Add	dress
		tions (All Trusts complete Se	ections A through D)							
Section A –	Ordinary Income									
								1		00
	·	ding qualified dividends)						2a		00
	•	nstructions)		_			00			
). Attach federal Schedule C								00
		hips, other estates and trusts		•						00
		tach federal Schedule F (For	•					5		00
6 Ordinary	gain (or loss). A	ttach Schedule D-1					•	6		00
7 Other in	come. State natur	re of income						7		00
		ld lines 1, 2a, and 3 through	7				•	8		00
	Capital Gains (Lo	•								
•	- , ,	m Schedule D (541), line 8.						9		00
		arryover from Schedule D (5						10		00
·		n 1250 gain		_			00			
	oital gains (losses Nontaxable Inco n	s). Combine lines 9 and 10						12		00
-								13		00
	•	List type and amount						14		00
		Add lines 13 and 14						15		00
10 TOTAL HOL	Under penalties of p	perjury, I declare that I have exam	nined this tax return, includ	ding accompany	ying schedul	es and stateme	nts, and to	the best o	of my knowledge an	
Sign Here	true, correct, and co	omplete. Declaration of preparer (other than taxpayer) is ba	sed on all inforr	mation of wh	ich preparer has	any know	rledge.		
11010		ee or officer representing truste	е				Date)		
	X Preparer's signatu	re		Da	ate	Check if sel	f-	PTIN		
Paid	X					employed ▶				
Preparer's	Firm's name (or you	urs, if self-employed) and addre	ss	<u></u>			• 1	Firm's FE	IN	
Use Only							Tele	phone		
	May the FTB discu	uss this tax return with the prep	parer shown above (see	instructions)?.			· · · · • [Yes	No	

Section D – Deductions	T	
16 Interest	16	00
17 Taxes	17	00
18 Trustee fees	18	00
19 Attorney, accountant, and tax return preparer fees	19	00
20 Other allowable deductions. Attach schedule	20	00
21 Total (Add lines 16 through 20)	21	00
22 Charitable deduction 22 00		
Section E – Deductions Allocable to Income Categories (IRC Section 664 trust only)		
23a Enter the amount from line 21 allocable to ordinary income	23a	00
b Subtract line 23a from line 8	23b	00
24a Enter the amount from line 21 allocable to capital gains (losses)	24a	00
b Subtract line 24a from line 12	24b	00
25a Enter the amount from line 21 allocable to nontaxable income	25a	00
b Subtract line 25a from line 15	25b	00

Part II Unrelated Business Taxable Income						_
26 Did the trust have any unrelated business taxa	ble income?				Yes 1	No
If "Yes," file a separate Form 541 to report the						
Part III Schedule of Distributable Income (IRC Section 664 trust o	nly)				_
Accumulations	(a) Ordinary inc	ome	(b) Capital gains (losses)	N	(c) lontaxable income	
27 Undistributed income from prior taxable years						_
28 Current taxable year net income year						
(before distributions)						
• In column (a), enter the amount from line 23l						
• In column (b), enter the amount from line 24						
• In column (c), enter the amount from line 25l)					
29 Total distributable income. Add lines 27 and 28	itable Downson					—
Part IV-A Distributions of Principal for Char	•			20		00
30 Principal distributed in prior taxable years for31 Principal distributed during the current taxable				30		00
Fill in the information for columns (A), (B), an			on the space to the right			
		שוונ עוסנווטענטנ	of the space to the right.			
(A) Payee's name and address	(B) Date of distribution (mm/dd/yyyy)	Charitable pu	rpose and description of assets distributed			
а						Г
				\dashv \mid		
						00
b				31a		00
				_		
				31b		00
C						
				31c		00
32 Total. Add lines 30 through 31c				● 32		00
Part IV-B Accumulated Income Set Aside a	nd Income Distribution	s for Charitabl	e Purposes			_
33a Accumulated income set aside in prior taxable						00
${\bf 33b}$ Enter the amount shown on Side 2, line 22				33b		00
				34		00
35 Distributions made during the taxable year:			I IDO 0 11 040()			
For income set aside in prior taxable years to a few which a charitable and a few which are few which a fe						
 For charitable purposes for which a charitable Fill in the information for columns (A), (B), an 				if.		
		שוונ עוסנווטענטנ				
(A) Payee's name and address	(B) Date of distribution (mm/dd/yyyy)	Charitable pu	(C) rpose and description of assets distributed			
а						_
				7		
				35a		00
b				JJa		00
	<u> </u>			\dashv \vdash		
				_		
				35b	(00
С						
				35c		00
36 Add lines 35a through 35c				36		00
37 Carryover. Subtract line 36 from line 34				37		00

7023213 Form 541-B 2021 **Side 3**

Part V Balance Sheet					
Assets			(a) Beginning-of-Year Book Value	(b) End-of-Year Book Value	(c) FMV (see instructions)
38 Cash – non-interest bearing		 38			
39 Savings and temporary cash investments		 39			
40 a Accounts receivable	40a				
b Less: allowance for doubtful accounts	40b				
41 Receivables due from officers, directors, trustees, and					
other disqualified persons. Attach schedule		 41			
42 a Other notes and loans receivable	42a				
b Less: allowance for doubtful accounts	42b				
43 Inventories for sale or use		 43			
44 Prepaid expenses and deferred charges		 44			
45 a Investments – U.S. and state government obligations.		45a			
b Investments – corporate stock. Attach schedule		45b			
c Investments – corporate bonds. Attach schedule		45c			
46 a Investments – land, buildings, and equipment basis.					
Attach schedule	46a				
b Less: accumulated depreciation	46b				
47 Investments – other. Attach schedule		 47			
48 a Land, buildings, and equipment (trade or business):					
basis	48a				
b Less: accumulated depreciation	48b				
49 Other assets. Describe		 49			
50 Total assets. Add lines 38 through 49		50	•	•	
Liabilities					
51 Accounts payable and accrued expenses		51			
52 Deferred revenue		52			
53 Loans from officers, directors, trustees, and other disqua		53			
54 Mortgages and other notes payable. Attach schedule		54			
55 Other liabilities. Describe		55			
56 Total liabilities. Add lines 51 through 55		56	•	•	
Net Assets		 30	_	-	
57 Trust principal or corpus		 57			
58 a Undistributed income		58a			
b Undistributed capital gains		58b			
c Undistributed capital gams		58c			
59 Total net assets. Add lines 57 through 58c			•	•	
60 Total liabilities and net assets. Add line 56 and line 59.		60	-	-	

<u></u>	irt VI-A Charitable Remainder Annuity Trust (CRAT) Information (Complete only if an IRC Section 664 CRAT)			
	a Enter the initial fair market value (FMV) of the property placed in the trust	61a	1	00
01	b Enter the total annual annuity amounts for all recipients.	61b		00
Da	rt VI-B Charitable Remainder Unitrust (CRUT) Information (Complete only if an IRC Section 664 CRUT)	010		100
	Is the CRUT a net income charitable remainder unitrust (NICRUT) as described in IRC Regulations Section 1.664-3(a)(1)(i	\/h\/1\	2 \ \tag{Vec}	□ No
	Is the CRUT a net income with make-up charitable remainder unitrust (NIMCRUT) as described in IRC Regulations Section 1.66		_	
	Did the trust change its method of payment during the taxable year?			
04	If "Yes," describe the triggering event. Include the date of the event and the old method of payment.			NU
	11 103, describe the triggering event. Include the date of the event and the old method of payment.			
65	a Enter the unitrust fixed percentage to be paid to the recipients	65a		%
	b Unitrust amount. Subtract line 56, column (c) from line 50, column (c) and multiply the result by the percentage			 _
	on line 65a.	65b		00
	If "Yes," on line 62 or line 63, go to line 66a. Otherwise skip lines 66a through 67b and enter the line 65b			
	amount on line 68.			
66	a Trust's accounting income for 2021. Attach schedule	66a		00
	If "Yes," on line 62, go to line 66b. If "Yes," on line 63, skip line 66b and go to line 67a.			
	b Enter the smaller of line 65b or line 66a here and on line 68. Skip lines 67a and 67b	66b		00
67	a Total accumulated distribution deficiencies from previous years	67a		00
	b Add lines 65b and 67a	67b		00
	If lines 67a and 67b are completed, enter the smaller of line 66a or line 67b on line 68.			
68	Required unitrust distribution for 2021	68		00
	Carryover of accumulated distribution deficiency (only for trusts that answered "Yes" on line 63.)			
	Subtract line 68 from line 67b	69		00
70	If this is the final tax return, enter the initial FMV of all assets placed in trust by the donor	70		00
	Did the trustee change the method of determining the FMV of the assets? If "Yes," attach an explanation		Yes	No
	Were any additional contributions received by the trust during 2021? If "Yes," complete Side 6, Schedule A, Part III			No
Pa	rt VII Questionnaire for Charitable Lead Trusts, Pooled Income Funds, and Charitable Remainder Trusts			
Sec	ction A – All Trusts			
73	Check this box if any of the split-interest trust's income interests expired during 2021			$\overline{\Box}$
	Check this box if all of the split-interest trust's income interests expired before 2021			
	If either box is checked and this is not a final tax return, attach an explanation.			
Sec	ction B – Charitable Lead Trusts			
_	Enter the amount of annuity or unitrust payments required to be paid to charitable beneficiaries for 2021	75		00
	ction C – Pooled Income Funds	•		
76	Enter the amount of contributions received during 2021	76		00
77	Enter the amount required to be distributed for 2021 to satisfy the remainder interest	77		00
78	Enter any amounts that were required to be distributed to the remainder beneficiary that remain undistributed	78		00
79	Enter the amount of income required to be paid to the charitable remainder beneficiary for 2021	79		00
Sec	ction D – Charitable Remainder Trusts		•	
80	Check this box if you are filing for a charitable remainder annuity trust or a charitable remainder unitrust whose charitable	interes	sts	
	involve only cemeteries or war veterans' posts			
81	Check this box if you are making an election under IRC Regulations Section $1.664-2(a)(1)(i)(a)(2)$ or $1.664-3(a)(1)(i)(g)(2)$) to tre	eat	
	income generated from certain property distributions (other than cash) by the trust as occurring on the last day of the taxo			
82	Is this the initial tax return? If "Yes," attach a copy of the trust instrument		Yes	☐ No
	Was the trust instrument amended during the year? If "Yes," attach a copy			☐ No
	a If this is the final tax return, were final distributions made according to the trust instrument?			☐ No
	olf "Yes," did you complete Side 3, Part IV-A, line 31?		Yes	☐ No
(If "No," explain why			
٥-				
85	If this was the final year, was an early termination agreement signed by all parties to the trust?		∐ Yes ∐ No L	N/A
	If "Yes," attach a copy of the signed agreement.			
86	If "Yes," attach a copy of the signed agreement. At any time during the calendar year 2021, did the trust have an interest in or a signature or other authority over a bank, so			 .
86	If "Yes," attach a copy of the signed agreement.		Yes	□ No

7025213 Form 541-B 2021 **Side 5**

	S	chedule A - Distrib	utions, As	sets, and D	onor Information			
Pa	rt I Accumulation Schedule (IRC Se	ection 664 trust only)						
	Accumulations		(a) Ordinary ir	ncome	(b) Capital gains (losses)		(c) Nontaxable income	
1	Total distributable income.							
22	Enter the amount from Side 3, Part III, li Total distributions for 2021.	ine 29						
	2021 distributions from income							
	Undistributed income at end of taxable ye	ear.						
	Subtract line 2b from line 1							
_	II A Current Distributions Cohodu	le (IDC Continue 664 trust o	nlu)					
Ра	rt II-A Current Distributions Schedu	ie (IRG Section 664 trust 0	niy)	(b)			(c)	
	Name of recipient		Identifying number		Percentage of to		amount payable (if applicable)	
<u>4a</u>	•	(•		•		%	
4b	•		•		•		%	
<u>4c</u>	(d)	(e)		(f)	(g)		% (h)	
	Ordinary income	Capital gains	Nontax	cable income	Corpus		Total. Add cols. (d) through (g)	
<u>4a</u>	•				•			
<u>4b</u>	•				•			
4c								
Tota	art II-A Total, column (h) does not agree	with line 61h for a CDAT or	ling 60 for	a CDLIT chack	hore and attach evaluate	ion		
	art ii 77 Totai, ooraiiii (ii) dood not agroo	With line orbitor a orbit of	11110 00 101	u 01101, 011001	more and attach explanati			
Pa	rt II-B Current Distributions (chari	table lead trust or pooled ir	come funds	only)				
5	Enter the amount required to be paid to						\$	
_	rt III Assets and Donor Information							
	Is this the initial tax return or were addit		the trust in	2021?			Yes No	
	If "Yes," complete the schedule below If "No," complete only column (a) of the							
	(a)	(b)			(c)		(d)	
	Name and address of donor	Description of each asset	donated	FMV of each	asset on date of donation	Dat	e of donation (mm/dd/yyyy)	
7a								
7b								
_								
7c								
7d	Total . Add lines 7a through 7c							
	1							