2019 Partnership Return of Income

_	_	_
	^	
= 1	п	=0
•	•	•

For caler	ndar	year 2019 or fiscal year beginning (m m/d d/y y y y) and ending (m m/d d/y y	у у] . [] RP					
Partnership	name	e (type or print) Check box if name changed A FEIN							
		•							
Additional i	nform	ation B California Se	ecretary	of State (SOS) fi	le number				
Street addr	ess (s	uite, room, PO box)		PMB no.					
City (If the	partne	rship has a foreign address, see instructions.) State	ZIP cod	_					
			<u> </u>						
Foreign cou	ıntry r	ame Foreign province/state/county	F0	oreign postal code	,				
E Check	accol			tal assets at en	d of				
_		(m m/d d/y y y)	ear. Se	e instructions.					
(1)	٦,	Cash (2) Accrual (3) Other (attach explanation) ●							
H Check	tne a	oplicable box							
• (1)		nitial return (2) FINAL RETURN (3) Amended return (4) Protective claim							
(1)			4\						
		g this taxable year, did another person or legal entity acquire control or majority ownership (more than a 50% int s partnership or any legal entity in which the partnership holds a controlling or majority interest that owned Califc							
		roperty (i.e., land, buildings), leased such property for a term of 35 years or more, or leased such property from							
		nment agency for any term?	•	Yes	∐ No				
	•	g this taxable year, did this partnership acquire control or majority ownership (more than a 50% interest) in another	legal						
()		that owned California real property (i.e., land, buildings), leased such property for a term of 35 years or more, or lea	-						
	such	property from a government agency for any term?	●	Yes	☐ No				
(3)		ring this taxable year, has more than 50% of the partnership's ownership interests cumulatively transferred in one							
		re transactions after an interest in California real property (i.e., land, buildings) was transferred to it that was							
		ded from property tax reassessment under Revenue and Taxation Code Section 62(a)(2) and it was not reported previous year's tax return?		,					
		res filing of statement, penalties may apply – see instructions.)	•	LI res					
Caution	1	lude only trade or business income and expenses on line 1a through line 22. See the instructions for more inform	1 1						
	1	a Gross receipts or sales \$ b Less returns and allowances \$c Balance ●	1c		00				
	1	Cost of goods sold (Schedule A, line 8)	2		00				
	1	GROSS PROFIT. Subtract line 2 from line 1c			00				
	1	Total ordinary income from other partnerships and fiduciaries. Attach schedule			00				
ne	6	Total ordinary loss from other partnerships and fiduciaries. Attach schedule			00				
Income	7	Total farm loss. Attach federal Schedule F (Form 1040 or 1040-SR)			00				
드		Total gains included on Schedule D-1, Part II, line 17 (gain only)			00				
	9	Total losses included on Schedule D-1, Part II, line 17 (Joss only)			00				
	10	Other income. Attach schedule.			00				
	11	Other loss. Attach schedule			00				
	12	Total income (loss). Combine line 3 through line 11	12		00				
	13	Salaries and wages (other than to partners)			00				
ns aple	14	Guaranteed payments to partners			00				
Deductions Enclose, ut do not stapl any payment	15	Bad debts			00				
duc Encl o nc	16	Deductible interest expense not claimed elsewhere on return	16		00				
Deductions Enclose, but do not staple, any payment	17	a Depreciation and amortization. Attach form FTB 3885P \$							
_ _		b Less depreciation reported on Schedule A and elsewhere on return \$ c Balance ●	17c		00				

"		18	Depletion. Do not deduct oil and gas depletion	18	00		
ğ 🦳		19	Retirement plans, etc	19	00		
ductio (cont.)		20	Employee benefit programs	20	00		
Deductions (cont.)		21	Other deductions. Attach schedule	21	00		
Ц		22	Total deductions. Add line 13 through line 21	22	00		
		23	Ordinary income (loss) from trade or business activities. Subtract line 22 from line 12	23	00		
		24	Tax — \$800.00 (LPs, LLPs, and REMICs only). See instructions	24	00		
nts		25	Partnership level tax. See instructions	25	00		
Payments		26	Total tax. Add line 24 and line 25	26	00		
² ay			Withholding (Form 592-B and/or 593)				
_		29	Total payments. Add line 27 and line 28	29	00		
			Use tax. This is not a total line. See instructions				
			Payments balance. If line 29 is more than line 30, subtract line 30 from line 29	31	00		
_ ლ				32	00		
Amount Due or Refund			Tax due. If line 26 is more than line 31, subtract line 31 from line 26		00		
Ref			Refund. If line 31 is more than line 26, subtract line 26 from line 31 34	00	_ 00		
E P			Γ	0.5	00		
⋖				35	00		
		36	Total amount due . Add line 32, line 33, and line 35. Make the check or money order payable to the Franchise Tax Board		_ 00		
					• • • • • • • • • • • • • • • • • • • •		
			Cost of Goods Sold	1	00		
			at beginning of year	2	00		
			less cost of items withdrawn for personal use	3			
			or	4	00		
				<u> </u>	00		
			s. Attach schedule	6	00		
			at end of year	7	00		
		-		8	00		
			ods sold. Subtract line 7 from line 6. Enter here and on Side 1, line 2	0	00		
			Cost (2) Lower of cost or market as described in Treas. Reg. Section 1.471-4 (3) Write down of	of "su	bnormal" goods as		
			ed in Treas. Reg. Section 1.471-2(c) (4) Other. Specify method used and attach explanation		<u> </u>		
			this box if the LIFO inventory method was adopted this taxable year for any goods. If checked, attach federal Form				
			rules of IRC Section 263A (with respect to property produced or acquired for resale) apply to the partnership? ere any change (other than for IRC Section 263A purposes) in determining quantities, cost, or valuations between o				
			sing inventory? If "Yes," attach explanation	•	_		
J			of entity is filing this return? Check one only:				
	• 1	L	☐ General partnership ● 2 ☐ LP required to pay annual tax (is doing business in CA, is registered with	1 SOS	S, or is organized in CA)		
	• 2	Г	$oxed{egin{array}{c} LP, LLC, or other entity NOT required to pay annual tax (is not doing business in CA, is not registered with SO:$	C an	d is not organized in CA)		
	• 3		The control of the co	o, an	u is not organized in GA)		
	• 4		REMIC • 5 LLP • 6 L Other (See instructions)				
K	Princi	pal b	usiness activity code (Do not leave blank)				
			ctivity Product or service				
■ Enter the maximum number of partners in this partnership at any time during the year. Attach a CA Sch. K-1 (565)							
	for ea	ch pa	artner				
М	ls any	part	ner of the partnership related (as defined in IRC Section 267(c)(4)) to any other partner?	•	Yes No		
N	Is any	part	ner of the partnership a trust for the benefit of any person related (as defined in IRC Section 267(c)(4))				
	to any	othe	er partner?	€	Yes No		
^	Ara ==	N/ PC	rtnore in this partnorchin also partnorching or LLCo2 If "Voc." complete Cabadula I/ 1. Table 2 for each	_	Yes No		
	AIE al	ıy pa	rtners in this partnership also partnerships or LLCs? If "Yes," complete Schedule K-1, Table 3 for each		TES LINO		

		May the FTB discuss this return with the preparer shown above (see instructions	s)?		• Yes	No						
er's Use Only		Firm's name (or yours if self-employed) and address	Telephone		Firm's FEIN							
Paid Prep	par-	Preparer's signature		self-employed	•							
		General Partner's email address (optional) Paid	Date	Check if	PTIN							
Sign Here		general partner										
		and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.						40, 00				
		To request this notice by mail, call 800.852.5711. Under penalties of perjury, I declare that I have examined this return, including accompan		•								
	(2)	Is this the first year of doing business in California?				v/forms a	Yes and sear	ch for 1	No 1 131 .			
GG	. ,	Has this partnership previously operated outside California?				片	Yes	\vdash	No			
	(2)	If "Yes", provide prior FEIN(s) if different, business name(s), and entity tyles the FTB and/or IRS. (see instructions):				_						
	` ,	Limited Partnership, LLC or Sole Proprietorship in the previous five (5) ye	ears?				Yes	Ш	No			
FF		Has this partnership operated as another entity type such as a Corporation	n, S Corporation. (General Partnersl	 hip,	_						
EE	"Doi	ng business as" name. See instructions: ●										
DD	Is the	e partnership reporting previously deferred income from: Installr	ment Sale •	IRC §1031	• IRC §	1033	• [] 0	ther			
	(2)	If "Yes," enter the year of asset disposition										
cc	(1)	Is the partnership deferring any income from the disposition of assets? (se	ee instructions) .				Yes		No			
вв	B Does this partnership own an interest in a business entity disregarded for tax purposes? If "Yes," complete Schedule EO, Part II. ●								No			
AA	A Does this partnership have a beneficial interest in a trust or is it a grantor of a trust? Attach name, address, and FEIN							\sqcup	No			
Z	Is this partnership a direct owner of an entity that filed a federal Schedule M-3?							Щ	No			
Y	Did t	nis partnership file the Federal Schedule M-3 (Form 1065)?					Yes	Щ	No			
X		he partnership included a Reportable Transaction or Listed Transaction witl instructions for definitions.) If "Yes," complete and attach federal Form 888					Yes		l No			
		partnership apportioning or allocating income to California using Schedule				님	Yes	H	No			
		s an investment partnership? See General Information O, Investment Partn	•			님	Yes	H	l No			
	(3)	Were Form 592, Form 592-A, Form 592-B, and Form 592-F filed for these				님	Yes	H	l No			
	(2)	Does the partnership have any domestic (non-foreign) nonresident partner				片	Yes		l No			
U	` ,	Does the partnership have any foreign (non U.S.) nonresident partners?				H	Yes	H	l No			
Т	Is thi	s partnership under audit by the IRS or has it been audited in a prior year?					Yes		l No			
		s partnership a publicly traded partnership as defined in IRC Section 469(k	, , ,			H	Yes	H	l No			
	Was there a distribution of property or transfer (for example by sale or death) of a partnership interest during the taxable year? . If "Yes," see the federal instructions concerning an election to adjust the basis of the partnership's assets under IRC Section 754						Yes		l No			
		Is this partnership a partner in another partnership or multiple member LLC? If "Yes," complete Schedule EO, Part I							l No			
P	Does	oes the partnership meet all the requirements shown in the instructions for Question P?							l No			

3663193 Form 565 2019 **Side 3**

Schedule K Partners' Shares of Income, Deductions, Credits, etc.

		(a) Distributive share items			(b) Amounts from federal K (1065)	(c) California adjustments	Т	(d) otal amounts using California law
	1	Ordinary income (loss) from trade or business activities		. 1	•		•	
	2	Net income (loss) from rental real estate activities. Attach	federal Form 8825	. 2			•	
	3	a Gross income (loss) from other rental activities		. 3a			•	
		b Less expenses. Attach schedule		. 3b			•	
		c Net income (loss) from other rental activities. Subtr	act line 3b from line 3a	a 3c			•	
	4	Guaranteed payments to partners		. 4			•	
co c c c c c c c c	5	Interest income		. 5			•	
į	6	Dividends		. 6			•	
	7	Royalties		. 7			•	
	8	Net short-term capital gain (loss). Attach Schedule D	(565)	. 8			•	
•	9	Net long-term capital gain (loss). Attach Schedule D (•	
	10	a Total gain under IRC Section 1231 (other than due					•	
		b Total loss under IRC Section 1231 (other than due					•	
	11	a Other portfolio income (loss). Attach schedule					•	
		b Total other income. Attach schedule					•	
		c Total other loss. Attach schedule					<u> </u>	
	12	Expense deduction for recovery property (IRC Section					Ŏ	
	1	a Charitable contributions. See instructions. Attach	•				Ŏ	
	.0	b Investment interest expense						
		c 1 Total expenditures to which IRC Section 59(e) elec					<u> </u>	
		0 T(40.0				
		d Deductions related to portfolio income					(•)	
		e Other deductions. Attach schedule					\bigcirc	
	15	a Withholding on partnership allocated to all partners.						
	13				-		<u> </u>	
		b Low-income housing credit		. 100	-			
				150				
		estate activities			-			
		d Credits related to other rental activities						
		Nonconsenting nonresident members' tax allocated to						
	4-7	f Other credits						
MS.	17	a Depreciation adjustment on property placed in servic						
(AMT) Items		b Adjusted gain or loss						
Ē		c Depletion (other than oil and gas)						
fax (AMT) Items		d Gross income from oil, gas, and geothermal propertie						
		e Deductions allocable to oil, gas, and geothermal prop					\rightarrow	
		f Other alternative minimum tax items						
	18	•					<u> </u>	
		b Other tax-exempt income						
		c Nondeductible expenses						
	19	a Distributions of money (cash and marketable securiti					<u> </u>	
			1 1 1 1				<u> </u>	
	20	a Investment income					<u> </u>	
		b Investment expenses					<u> </u>	
		c Other information. See instructions					<u> </u>	
	21	a Total distributive income/payment items. Combine lines						
		From the result, subtract the sum of lines 12 through 13e						
		b Analysis by type (a)	(b) Individ	lual	(c)	(b)		(e)
		of partner: Corporate	i. Active	ii. Pa				Nominee/Other
			•)	•	•		•
			•		•	•		•

Schedule L Balance Sheets. See the instructions for Question P before completing Schedules L, M-1, and M-2.

		Beginning o	f income year	End of income year			
	Assets	(a)	(b)	(c)	(d)		
1	Cash						
2	a Trade notes and accounts receivable						
	b Less allowance for bad debts	((
3	Inventories				•		
4	U.S. government obligations						
5	Tax-exempt securities						
6	Other current assets. Attach schedule				•		
7	Mortgage and real estate loans						
8	Other investments. Attach schedule				•		
9	a Buildings and other depreciable assets						
	b Less accumulated depreciation	()		()	•		
10							
	b Less accumulated depletion			()			
11	Land (net of any amortization)				•		
	a Intangible assets (amortizable only)						
	b Less accumulated amortization	((
12	Other assets. Attach schedule						
	Total assets						
	Liabilities and Capital						
15	Accounts payable						
	Mortgages, notes, bonds payable in less than 1 year						
	Other current liabilities. Attach schedule						
	All nonrecourse loans						
	Mortgages, notes, bonds payable in 1 year or more.						
	Other liabilities. Attach schedule						
	Partners' capital accounts						
	Total liabilities and capital	Saaka Wiith Imaama (Laas) may Datum I loo total and	ount under California laur			
5 C	hedule M-1 Reconciliation of Income (Loss) per E If the partnership completed federal So			ount under Gamornia iaw.			
	Net income (loss) per books	6	Income recorded on boo				
	Income included on Schedule K, line 1 through		on Schedule K, line 1 thr				
	line 11c, not recorded on books this year.						
	Itemize	•					
	Guaranteed payments (other than health insurance).	•)		line 6b			
	Expenses recorded on books this year not	7		Schedule K, line 1 through			
	included on Schedule K, line 1 through		line 13e, not charged aga				
	line 13e. Itemize:		income this year. Itemize				
	a Depreciation		a Depreciation				
	b Travel and entertainment	_					
	c Limited partnership tax • \$	_		line 7b			
	d Other	_		e 7c			
	e Total. Add line 4a through line 4d	•9	Income (loss) (Schedule				
	Total of line 1 through line 4e				🖭		
Sc	hedule M-2 Analysis of Partners' Capital Accoun	nts. Use California amoun	ts.				
1	Balance at beginning of year	5	Total of line 1 through lin	ne 4			
	Capital contributed during year:	6					
	a Cash			rty			
	b Property		Other decreases. Itemize				
	Net income (loss) per books						
	Other increases. Itemize						
•	Other mercases. Itemize	_					
		··		ubtract line 8 from line 5	_		
		<u> </u>					

3665193 Form 565 2019 **Side 5**