TAXABLE YEAR

2021 Real Estate Withholding Statement

E	۵	2
J	J	J

MENDED: ● □ Escrow or Exchange No							
Part I Remitter Information ● ☐ REE	P 🗆	Qualified Intermediary		Buye	r/Transferee 🗌 Oth	er	
Business name						FEIN	CA Corp no. CA SOS file no.
First name	Initial	Last name					SSN or ITIN
Address (apt./ste., room, PO box, or PMB no.)							
City (If you have a foreign address, see instructions.)			St	tate	ZIP code		Telephone number
Part II Seller/Transferor Information	lf a	grantor or nongrantor	trust, c	check	the box that applies.	• 🗆	Grantor 🗌 Nongrantor Trust
First name/Grantor	Initial	Last name/Grantor				SSN or	ITIN
Spouse's/RDP's first name (if jointly owned)	Initial	Last name				Spouse	's/RDP's SSN or ITIN (if jointly owned)
Business/Nongrantor Trust name (if applicable)		<u></u>				□ FEIN	☐ CA Corp no. ☐ CA SOS file no.
Address (apt./ste., room, PO box, or PMB no.)							
City (If you have a foreign address, see instructions.)			State	ZIP	code		Telephone number
Property address (provide street address, parcel numb	Property address (provide street address, parcel number, and county)				Ownership percentage		
							. %
Code (IRC) Section 121. 2. The seller (or decedent, if sold by under IRC 121 without regard to the seller has a loss or zero gain of the seller has a loss or zero gain of the seller has a loss or zero gain of the seller is compulsorily or in gain under IRC Section 1033. 5. The transfer qualifies for nonrecognization for a limit that is either qualified through the seller is a California partnersh California income tax purposes the companion of the seller is an insurance companion	the two for Cali volunta gnition roperty nited li e Califo ip or q at is no nder Ca y, indiv	r-year time period. fornia income tax purpo arily converted, and the treatment under IRC Se contributed to a partne ability company (LLC) c rnia Secretary of State of ualified to do business i of a single member LLC alifornia or federal law.	eses or seller i ction 3 rship i lassifie or has a n Calif that is	n this inten 351 (n exc ed as a per cornia i disr	s sale. Complete Part \ ds to acquire property property transferred t change for a partnersh a corporation for fed rmanent place of busin a (or an LLC that is cla regarded for federal ar pension/profit sharin	VI, Compu y that will to a corpo nip interes eral and C ness in Ca assified as nd Califori g plan, or	utation on Side 2. qualify for nonrecognition of eration controlled by the st). California income tax purposes) alifornia. Is a partnership for federal and nia income tax purposes). It charitable remainder trust.
If you checked one or more boxes in line 1 thro Sides 1-3 to the remitter before the close of esc Part IV Certifications that may partially	crow or	r exchange transaction t	o subr	nit to	the Franchise Tax Bo	ard.	
Determine whether you qualify for a full, partial,	, or no	withholding exemption.	Check	all b	oxes that apply to the	property I	peing sold or transferred.
10. • The transfer qualifies as either a s Form 593, Part IV.	imultar	neous or deferred like-ki	nd exc	hanç	je under IRC Section	1031. See	e instructions for
 The transfer of this property is an Copy of the promissory note is at be required. No exemptions apply. Complete F 	tached	at the close of escrow.	Compl	ete F	Part V, Buyer/Transfere	ee Informa	ation on Side 2. Withholding may
,		,	_	,			3 1 2

Eccrow	۸r	Exchange	NΙΛ
LSCIUW	UΙ	LAGIIAIIUC	IVU

						-	
Remitter name						SSN, ITIN, FE	IN, CA corp no., or CA SOS file no.
Part V Buyer/Transferee Information Complete this part if you checked box 11 in P	art IV	for an installment a	greemer	t.		l.	
First name/Grantor	Initial	Last name/Grantor					SSN or ITIN
Spouse's/RDP's first name (if jointly purchased)	Initial	Last name					Spouse's/RDP's SSN or ITIN
Business/Nongrantor Trust name (if applicable)						FEIN	CA Corp no. CA SOS file no.
Address (apt./ste., room, PO box, or PMB no.)							
City (If you have a foreign address, see instruction	ıs.)		State	ZIP code		Telephone	number
Principal Amount of Promissory Note	Install	ment Amount			Interest Rate	l .	Repayment Period
		_			•	%	Number of months
Buyer's/Transferee's Acknowledgment to W Read the "Buyer/Transferee" Information belo		ld					
real property either at the rate of 3 1/3% (.C. Form 593, Real Estate Withholding Stateme each installment payment and send one copthe withholding payment, and give one copthe 20th day of the month following the mochange, I will promptly inform the Franchis withholding compliance. I also understand payment and do not send the withholding a the seller/transferor by the due date. Go to seller/transferor by the due date. Go to seller/transferor by the due date. Seller/transferor by the due date.	ent, of ey of ey of Founth of e Tax I that I a long we side 3,	the principal portion ach to the Franchisom 593 to the selle the installment pay Board. I understand am subject to with high vith Form 593 to the complete the perjusary in Part III, or to ca	n of each e Tax Bo er/transfer ment. If I that the holding p e Franch iry stater alculate a	n installment ard along wi ror. I will ser the terms of Franchise Ta enalties if I d ise Tax Board nent and sign	payment. I will th Form 593-V, nd each withhol the installment ax Board may re lo not withhold d by the due dat 1. e withholding ca	complete For Payment You ding payment it sale, promiss eview relevant on the principate, or if I do not be a considered to the principate.	cm 593 for the principal portion of cher for Real Estate Withholding, to the Franchise Tax Board by sory note, or payment schedule escrow documents to ensure pal portion of each installment ot send one copy of Form 593 to pount.
14. Selling expenses							
15. Amount realized. Subtract line 14 from							
16. Enter the price you paid to purchase the		- 1		-	•		
17. Seller/Transferor-paid points							
18. Depreciation							
19. Other decreases to basis				_			
20. Total decreases to basis. Add line 17 thr	-						
21. Subtract line 20 from line 16				_			
22. Cost of additions and improvements				_			
23. Other increases to basis							
24. Total increases to basis. Add line 22 and							
25. Adjusted basis. Add line 21 and line 24							
26. Enter any suspended passive activity los							
27. Add line 25 and line 26							
28. Estimated gain or loss on sale. Subtract							
If you have a loss or zero gain, skip lines If you have a gain, go to line 29 to calcu				_			20
ii you nave a yani, yo to iiile 29 to calcu	iait yu	rai withinolality					
Side 2 Form 593 2020			8602	213			

_			
Escrow	or	Exchange	NO.

Remitter name				SSN, ITIN, FEIN, CA corp no., or CA SOS file no.			
29. Alternative wit	thholding calculation am	ount. Check the applicable bo	x for the filing type.	1			
	☐ Individual 12.3% ☐ Corporation 8.84% ☐ Bank and Financial Corporation 10.84% ☐ Trust 12.3%						
☐ Non-California Partnership 12.3% ☐ S Corporation 13.8% ☐ Financial S Corporation 15.8%							
Multiply the amount on line 28 by the tax rate for the filing type selected above and enter the amount here. This is the							
alternative withholding calculation amount. If you elect the alternative withholding calculation amount, then check the							
	ŭ	•	· ·	29			
		oly the selling price on line 13					
	-		ce withholding amount, check b	nox A on			
		•	- · · · · · · · · · · · · · · · · · · ·	30			
	or Exchange Informat						
	=		• 31				
	-			mm/dd/yyyy) ● 32			
				% ● 33			
			X Ownership referriage				
A 🗌 Conventi	ction (Check One Only): • ional Sale/Transfer ent Sale Payment	C ☐ Boot D ☐ Failed Exchange					
Sales Price Me		y): or Installment Sale Payment					
B ☐ Individua C ☐ Non-Cali D ☐ Corporat	thholding Calculation Ele al 12.3% x Gain on Sale fornia Partnership 12.3% tion 8.84% x Gain on Sale d Financial Corp. 10.84%	F	S Corporation 13.8% x Gain or Financial S Corporation 15.8% Trust 12.3% x Gain on Sale				
36. Amount Withhel	d from this Seller/Transfer	or		6			
Title and escrow withholding amo	persons, and exchange unts. Transferors are str	accommodators are not auth ongly encouraged to consult	orized to provide legal or acco with a competent tax professio	unting advice for purposes of determining nal for this purpose.			
				ding the requested information, go to			
Perjury Statement Under penalties of Check the applicable	perjury, I hereby certify the box(s):	quest this notice by mail, call nat the information provided algorization as indicated by a check mark	bove is, to the best of my knowl	edge, true and correct. I further certify that:			
$\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ $	or partially exempt from	withholding as indicated by a	check mark in Part IV, box 10 o	r 11.			
		•	ited by a check mark in Part VII,	` ,			
☐ The buyer/trans in Part V. The b	uyer/transferee should or	ccepts the withholding require aly check this box when involv	ments as stated on the Buyer's/ ved in an installment sale.	Transferee's Acknowledgment to Withhold			
Sign	Seller's/Transferor's signature			Date			
	X Sallar's/Transfaror's spousa's //	DDD's signature		Date			
Here Seller's/Transferor's spouse's /RDP's signature							
It is unlawful to forge a spouse's/RDP's	X Buyer's/Transferee's signature			Date			
signature.	X						
	Buyer's/Transferee's spouse's/F	RDP's signature		Date			
	Remitter's name and Title/Escrow business name Telephone Number						
	Tronsition 3 name and Title/ESC	ow business name		Totophone Ruilinei			