TAXABLE YEAR

2025 Real Estate Withholding Statement

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| ΑM | AMENDED: ● ☐ Escrow or Exchange No | | | | | | | | | | |
|---|---|---|--|---------|------------------------|----------|------|-----------------------|----------------------|---|--|
| Pa | rt I | Remitter Info | rmation • 🗆 REE | P 🗆 | Qualified Intermediary | | Buye | r/Transferee 🗌 Othe | r | | |
| Bu | sines | s name | | | | | | | FEIN | CA Corp no. CA SOS file no. | |
| Fire | st nar | ne | | Initial | Last name | | | | 1 | SSN or ITIN | |
| Ad | dress | (apt./ste., room, P | O box, or PMB no.) | | | | | | | | |
| | | | | | | 1.5 | | I | | | |
| Cit | y (If y | ou have a foreign a | address, see instructions.) | | | St | ate | ZIP code | 1 | elephone number | |
| Pa | rt II | Seller/Transf | eror Information | If a | grantor or nongrantor | trust, c | hecl | the box that applies. | ● □ G | rantor 🗌 Nongrantor Trust | |
| Fire | st nar | ne/Grantor | | Initial | Last name/Grantor | | | | SSN or I | TIN | |
| Sp | ouse's | s/RDP's first name | (if jointly owned) | Initial | Last name | | | | Spouse's | ouse's/RDP's SSN or ITIN (if jointly owned) | |
| Bu | sines | s/Nongrantor Trust I | name (if applicable) | | | | | | □ FEIN | ☐ CA Corp no. ☐ CA SOS file no. | |
| Ad | dress | (apt./ste., room, PC | D box, or PMB no.) | | | - | | | | | |
| Cit | y (If y | ou have a foreign a | ddress, see instructions.) | | | State | ZIP | ' code | Т | elephone number | |
| Pro | perty | address (provide s | treet address, parcel numb | er, and | county) | | | | Ownership percentage | | |
| | | | | | | | | | | . % | |
| •••• | under IRC Section 121 without regard to the two-year time period. 3. The seller has a loss or zero gain for California income tax purposes on this sale. Complete Part VI, Computation on Side 2. 4. The property is compulsorily or involuntarily converted, and the seller intends to acquire property that will qualify for nonrecognition of gain under IRC Section 1033. 5. The transfer qualifies for nonrecognition treatment under IRC Section 351 (property transferred to a corporation controlled by the transferor) or IRC Section 721 (property contributed to a partnership in exchange for a partnership interest). 6. The seller is a corporation (or a limited liability company (LLC) classified as a corporation for federal and California income tax purposes) that is either qualified through the California Secretary of State or has a permanent place of business in California. 7. The seller is a California partnership or qualified to do business in California (or an LLC that is classified as a partnership for federal and California income tax purposes that is not a single member LLC that is disregarded for federal and California income tax purposes). 8. The seller is a tax-exempt entity under California or federal law. | | | | | | | | | | |
| | If you checked one or more boxes in line 1 through line 9, withholding is not required. Do not complete Part IV. Go to Side 3, complete the perjury statement and sign. Provide Sides 1-3 to the remitter before the close of escrow or exchange transaction to submit to the Franchise Tax Board. | | | | | | | | | | |
| Part IV Certifications that may partially or fully exempt the sale from withholding or if no exemptions apply (See instructions) Determine whether you qualify for a full, partial, or no withholding exemption. Check all boxes that apply to the property being sold or transferred. | | | | | | | | | | | |
| 10. The transfer qualifies as either a simultaneous or deferred like-kind exchange under IRC Section 1031. See instructions for | | | | | | | | | | | |
| • | 11. | ☐ The transfe | Form 593, Part IV. The transfer of this property is an installment sale where the buyer must withhold on the principal portion of each installment payment. | | | | | | | | |
| • | 12. | Copy of the promissory note is attached at the close of escrow. Complete Part V, Buyer/Transferee Information on Side 2. Withholding may be required. 2. No exemptions apply. Check this box if the exemptions in Part III or Part IV, line 10 and line 11, do not apply. Remitter must complete Part VII, Escrow or Exchange Information, on Side 3 for amounts to withhold. Withholding is required. | | | | | | | | | |

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| 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 F | art IV f | or an installment agr | eemen | t. | | | |
| 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 | ns.) | | State | ZIP code | | Telephone | number |
| Principal Amount of Promissory Note | Installr | ment Amount | | | Interest Rate | | Repayment Period |
| | | | | | • | % | Number of months |
| Buyer's/Transferee's Acknowledgment to V Read the "Buyer/Transferee" information belo | | d | | | | | |
| Form 593, Real Estate Withholding Statem of each installment payment and send one Withholding, the withholding payment, and 20th day of the month following the month change, I will promptly inform the FTB. I u understand that I am subject to withholding withholding along with Form 593 to the FT Side 3, complete the perjury statement and | copy of give of the nderstage pena | of each to the Franch one copy of Form 59: installment paymen and that the FTB may lties if I do not withh | ise Tax 3 to the t. If the review | Board (FTB) e seller/trans e terms of th v relevant es the principa |) along with For feror. I will sen e installment sa crow document I portion of eac | m 593-V, Pay d each withho le, promissor ts to ensure w h installment | ment Voucher for Real Estate olding payment to the FTB by the y note, or payment schedule rithholding compliance. I also payment and do not send the |
| Part VI Computation Complete this part if you checked and certifice 13. Selling price | | | | | | | • 13 |
| 14. Selling expenses | | | | | | | |
| 16. Enter the price you paid to purchase the | | | | | | | |
| 17. Seller/Transferor-paid points | | - • | | - | • | | |
| 18. Depreciation | | | | 18 _ | | | |
| 19. Other decreases to basis | | | | 19 _ | | | |
| 20. Total decreases to basis. Add line 17 the | ough l | ine 19 | | | | . 20 | |
| 21. Subtract line 20 from line 16 | | | | | | . 21 | |
| 22. Cost of additions and improvements | | | | •• 22 _ | | | |
| 23. Other increases to basis | | | | | | | |
| 24. Total increases to basis. Add line 22 and | l line 2 | 3 | | | | . 24 | |
| 25. Adjusted basis. Add line 21 and line 24 | | | | | | | |
| 26. Enter any suspended passive activity los | sses fr | om this property | | | | . 26 | |
| 27. Add line 25 and line 26 | | | | | | | |
| 28. Estimated gain or loss on sale. Subtrad | t line 2 | 27 from line 15 and e | nter th | e amount he | re. | | |
| If you have a loss or zero gain, skip line: | s 29 an | d 30. Certify on Side | 3. Wit | hholding is n | ot required. | | |
| If you have a gain, go to line 29 to calcu | | - | | _ | | | 28 |

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| Rei | mitter name | | | | SSN, ITIN, F | FEIN, CA corp no., or CA SOS file no. | | |
|--|--|--|---|---|--|--|--|--|
| 29. | ☐ Individual 1☐ Non-Califor Multiply the amalternative with | 2.3% [rnia Partnership 12.3% [nount on line 28 by the tax in holding calculation amount | ☐ S Corporation 13.8% rate for the filing type selecte. If you elect the alternative v | ☐ Bank and Financial Corpo☐ Financial S Corporation 1 d above and enter the amount vithholding calculation amount | 5.8% here. This is t, then check | s the c the | | |
| 30. | appropriate box on line 36, Boxes B-H, and enter the amount on line 37 | | | | | | | |
| Pai | rt VII Escrow | or Exchange Informatio | n | | | | | |
| 32. 33. 34. 35. | Date of Transfel Sales Price, Fai Amount that sho Type of Transac | r, Exchange Completion, Fa led Exchange, or Boot Amo | iled Exchange, or Installment unt \$ | x Ownership Percentage | mm/dd/yyyy) _ . % | 323334 | | |
| | B ☐ Installment Sale Payment D ☐ Failed Exchange 36. Withholding Calculation (Check One Only): Sales Price Method A ☐ 3½% (.0333) x Sales Price, Boot, or Installment Sale Payment | | | | | | | |
| | Alternative Withholding Calculation Election B | | | | | | | |
| Ti | 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. | | | | | | | |
| ftb. | Our privacy notice can be found in annual tax booklets or online. Go to ftb.ca.gov/privacy to learn about our privacy policy statement, or go to ftb.ca.gov/forms and search for 1131 to locate FTB 1131 EN-SP, Franchise Tax Board Privacy Notice on Collection. To request this notice by mail, call 800.338.0505 and enter form code 948 when instructed. | | | | | | | |
| Und Che | Perjury Statement Under penalties of perjury, I hereby certify that the information provided above is, to the best of my knowledge, true and correct. I further certify that: Check the applicable box(s): The sale is fully exempt from withholding as indicated by a check mark(s) in Part III. | | | | | | | |
| □ The sale is fully or partially exempt from withholding as indicated by a check mark in Part IV, box 10 or 11. □ The seller has elected the Alternative Withholding Calculation as indicated by a check mark in Part VII, line 36 (B-H). □ The buyer/transferee understands and accepts the withholding requirements as stated on the Buyer's/Transferee's Acknowledgment to Withhold | | | | | | | | |
| in Part V. The buyer/transferee should only check this box when involved in an installment sale. The Remitter (Qualified Intermediary) acknowledges this is a cash poor transaction as indicated by a check mark in Part VII, line 35, box E. | | | | | | | | |
| Callario (Transferente aigneturo | | | | | | | | |
| | | X | | | | | | |
| | CIC | Seller's/Transferor's spouse's /RD | P's signature | | | Date | | |
| a sp | ouse's/RDP's | Buyer's/Transferee's signature | | | | Date | | |
| - 9' | | Buyer's/Transferee's spouse's/RDI | D's signature | | | Date | | |
| | | X Remitter's name and Title/Escrov | v business name | | | Telephone Number | | |
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