TAXABLE YEAR

2019

Limited Liability Company Return of Income

CALIFORNIA FORM

568

For c	aler	nda	r year 2019 or fiscal year beginning (m m/d d/y y y y) and ending (m m/d d/y y y y	y) .	RP
Limited	d liab	ility			of State (SOS) file number
Additio	onal i	nforr	mation B	FEIN	
Street	addı	ess	(suite, room, PO box)		PMB no.
			(cate, reem, r o ser,		
City (If	f tha	11.0	has a foreign address, see instructions.) State	ZIP code	
City (ii	ı uıe	LLC	Tias a totelgii address, see ilistiuctions.)	ZIF COUE	
					-:
Foreig	n co	untry	/ name Foreign province/state/county	For	eign postal code
E C	neci	кас		nter total ee instru	assets at end of year. ctions.
	Г				
• (1	1) L		Cash (2) Accrual (3) Other (attach explanation) ● \$\ \$\		
н с	hec	k the	e applicable box		
• (-	., Г		Initial return (2) FINAL RETURN (3) Amended return (4) Protective claim		
· (י, ∟ 1) ∣	—— Duri	Initial return (2) FINAL RETURN (3) Amended return (4) Protective claim ng this taxable year, did another person or legal entity acquire control or majority ownership (more than a 50% int	erest)	
. ,			nis LLC or any legal entity in which the LLC holds a controlling or majority interest that owned California real prope	,	
			, land, buildings), leased such property for a term of 35 years or more, or leased such property from a governmen	-	
		ager	ncy for any term?		Yes No
(2	•		ng this taxable year, did this LLC acquire control or majority ownership (more than a 50% interest) in another lega	l	
			ty that owned California real property (i.e., land, buildings), leased such property for a term of 35 years or more,	_	
			eased such property from a government agency for any term?	•	Yes No
(;	•		ng this taxable year, has more than 50% of the LLC's ownership interests cumulatively transferred in one or more		
			sactions after an interest in California real property (i.e., land, buildings) was transferred to it that was excluded n property tax reassessment under Revenue and Taxation Code Section 62(a)(2) and it was not reported on a		
			vious year's tax return?		Yes No
	((Yes	requires filing of statement, penalties may apply- see instructions.)		
		Com	plete Schedule IW, LLC Income Worksheet (on Side 7) first to determine line 1.	W	hole dollars only
		1	Total income from Schedule IW, Limited Liability Company Income Worksheet. See instructions	1	00
			Limited Liability Company fee. See instructions.		00
o,			2019 annual Limited Liability Company tax. See instructions		00
itapl			Nonconsenting nonresident members' tax liability from Schedule T (Side 4)		00
ot s			Partnership level tax. See instructions		00
do n yme			Total tax and fee. Add line 2, line 3, line 4, and line 5		00
Enclose, but do not staple, any payment.					00
se, an			Amount paid with form FTB 3537 and 2019 form FTB 3522 and form FTB 3536.		00
ပ္ပ			Overpayment from prior year allowed as a credit.		
ш			Withholding (Form 592-B and/or 593)		00
	- []		Total payments. Add line 7, line 8, and line 9		00
			Use tax. This is not a total line. See instructions	1 7 7 1	
					00
		12	Payments balance. If line 10 is more than line 11, subtract line 11 from line 10 Use tax balance. If line 11 is more than line 10, subtract line 10 from line 11	12	00

			Whole d	ollars	only	_
	14 Tax and fee due. If line 6 is more than line 12, subtract line 12 from line 6	14				00
	15 Overpayment. If line 12 is more than line 6, subtract line 6 from line 12					00
	16 Amount of line 15 to be credited to 2020 tax or fee					00
	17 Refund. If the total of line 16 is less than line 15, subtract the total from line 15 ● 17				•	00
	18 Penalties and interest. See instructions	18				00
	19 Total amount due. Add line 13, line 14, line 16, and line 18, then subtract line 15 from the result • 19					00_
J	Principal business activity code (Do not leave blank)	●				
K	Enter the maximum number of members in the LLC at any time during the year. For multiple member LLCs, attach a California Schedule K-1 (568) for each of these members	•				
L	Is this LLC an investment partnership? See General Information 0	•		Yes		No
M	(1) Is this LLC apportioning or allocating income to California using Schedule R?	•		Yes	닏	No
	(2) If "No," was this LLC registered in California without earning any income sourced in this state during the taxable year?	€		Yes	Щ	No
N	Was there a distribution of property or a transfer (for example, by sale or death) of an LLC interest during the taxable year?	•	\vdash	Yes	닏	No
P	(1) Does the LLC have any foreign (non-U.S.) nonresident members?	•	님	Yes	Ц	No
	(2) Does the LLC have any domestic (non-foreign) nonresident members?	•	닏	Yes	닏	No
	(3) Were Form 592, Form 592-A, Form 592-B, and Form 592-F filed for these members?	•	\perp	Yes		No
Q	Are any members in this LLC also LLCs or partnerships?	•	\vdash	Yes	Щ	No
R	Is this LLC under audit by the IRS or has it been audited in a prior year?	•	\vdash	Yes		No
S	Is this LLC a member or partner in another multiple member LLC or partnership?			Yes		No
T	Is this LLC a publicly traded partnership as defined in IRC Section 469(k)(2)?		∐	Yes	닏	No
U	(1) Is this LLC a business entity disregarded for tax purposes?	•		Yes	Ш	No
	(2) If "Yes," see instructions and complete Side 1, Side 2, Side 3, Schedule B, Side 5, and Side 7, if applicable. Are there credits or credit carryovers attributable to the disregarded entity?	•		Yes		No
	(3) If "Yes" to U(1), does the disregarded entity have total income derived from or attributable to California that is less than the LLC's total income from all sources?			Yes		No
V	Has the LLC included a Reportable Transaction, or Listed Transaction within this return? (See instructions for definitions). If "Yes," complete and attach federal Form 8886 for each transaction	•		Yes		No
w	Did this LLC file the Federal Schedule M-3 (federal Form 1065)?	•		Yes	닏	No
X	Is this LLC a direct owner of an entity that filed a federal Schedule M-3?	•	\vdash	Yes	닏	No
Y	Does the LLC have a beneficial interest in a trust or is it a grantor of a Trust?	•		Yes		No
z	Does this LLC own an interest in a business entity disregarded for tax purposes?	€		Yes ntinue	d on Si	No i de 3)

(con	tinued fr	rom Side 2)									_	
AA	Is any member of the LLC related (as defined in IRC Section 267(c)(4)) to any other member of the LLC?										L No	
ВВ	-					lated (as defined i		. ,	. ,,	•	Yes	No No
cc	(1) Is t	the LLC deferr	ing any income	e from the disp	osition of asse	ets? (see instruction	ons)			•	Yes	L No
	(2) If "	"Yes," enter th	e year of asset	disposition								
DD	Is the L (see ins	LC reporting structions)	oreviously defe	rred Income fr	om:	Installment S	ale •	IRC	§1031 ●	IRC §10	033 •	Other
EE	"Doing b	business as" r	ame. See instr	uctions:		-						
FF						oration, S Corpora ive (5) years?				•	Yes	No
						, and entity type(s						
GG	(1) Ha	s this LLC pre	viously operate	d outside Calif	ornia?						Yes	No No
	(2) Is t	this the first y	ear of doing bu	siness in Califo	ornia?						Yes	L No
Sing	le Mem	ber LLC Infor	nation and Co	nsent — Comp	olete only if the	LLC is disregarde	ed.		• Federal TIN/	/SSN		
Sole (Owner's na	ame (as shown o	n owner's return)						FEIN/CA Corp	no./CA SOS File no).	
Street	t Address,	, City, State, and 2	ZIP Code									
• W		-			_	ctions. Check only						
	(1) Indi	lividual	(2) C Co	poration	[(3) Pa	ass-Through (S co	rporation, par	tnershi	p, LLC class	ified as a partne	ership)	
Ш	(4) Esta	ate/Trust	(5) Exem	pt Organizatio	n							
		onsent Statem the Franchise		o the jurisdicti	on of the State	of California to ta	x my LLC inco	ome and	d agree to fil	e returns and p	ay tax as ma	y be
Signa	ature ►	T						Date				
		and search fo	or 1131 . To reque ies of periury. I c	st this notice by leclare that I hav	mail, call 800.8 e examined this	rmation, and the co 352.5711. s return, including a er (other than taxpa	ccompanving s	chedule	es and statem	ents. and to the	best of mv kn	owledge and
Sigr Here		Signature of authorized member or manager						Date		Telephone		
		Authorized m	ember or manag	ger's email addre	ess (optional)		Data			● PTIN		
Paid		Paid preparer's signature					Date	Check self-e	k if mployed	•		
	oarer's Only	Firm's name	or yours,							Firm's FEIN		

May the FTB discuss this return with the preparer shown above (see instructions)?.....

Firm's name (or yours, if self-employed) and address

3673193 Form 568 2019 **Side 3**

Telephone

Yes

50	cnedule A Cost of Goods Sold									_
1	Inventory at beginning of year						1			00
2	Purchases less cost of items withdraw	wn for personal use					2			00
3	Cost of labor						3			00
4	Additional IRC Section 263A costs. A	ttach schedule					4			00
5	Other costs. Attach schedule						I I			00
6	Total. Add line 1 through line 5						1 1			00
7	Inventory at end of year						1 1			00
8	Cost of goods sold . Subtract line 7 fr						1 1			00
	a Check all methods used for valuin		-,,							
		f cost or market as desc	ribed in Treas, Reg. Sec	tion 1.471	1-4 (3) □ Wr	ite down of	"subnor	mal" do	ods as	
	described in Treas. Reg. Section 1				—			3-		
	b Check this box if the LIFO invento	· · · · —	• •		•					
	c Do the rules of IRC Section 263A	•	•	-					_	Nο
	d Was there any change (other than								. 🗀 .00 🗀	
	and closing inventory? If "Yes," a	·		•					. □ Yes □	Nο
<u>_</u>	chedule B Income and Deduction	-							. 🗀 100 🗀	
	aution: Include only trade or busine	_	on line 1e through line	22 halow	Coa the inetruction	no for more	informa	tion		
<u></u>	aution: include unly trade or busines	ss income and expenses	on line ra unrough line	ZZ Delow	. See the instruction	iis ioi iiiore	illiorilla	lioii.		
	1 a Gross receipts or sales S	\$ b Less	returns and allowances	\$	C	Balance	1c			00
	2 Cost of goods sold (Sched	dule A, line 8)					2			00
	3 GROSS PROFIT. Subtract		_	3			00			
	4 Total ordinary income fror	n other LLCs, partnershi	ps, and fiduciaries. Atta	ch schedi	ule	•	4			00
Ф	E Total ardinary loss from a						5			00
Ě	6 Total farm profit. Attach fe	deral Schedule F (Form	1040 or 1040-SR)			•	6			00
Income	7 Total farm loss. Attach fed	7 Total farm loss. Attach federal Schedule F (Form 1040 or 1040-SR)								00
_	8 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 (loss only)									00
	10 Other income. Attach schedule									00
										00
	12 Total income (loss). Com									00
	13 Salaries and wages (other						13			00
	14 Guaranteed payments to n						14			00
	15 Bad debts						1 1			00
	16 Deductible interest expens	se not claimed elsewhere	on return				16			00
ns	17 a Depreciation and amort									Ī
ductions	b Less depreciation repor				C	Balance	17c			00
ă	18 Depletion. Do not deduct of						18			00
Ğ	19 Retirement plans, etc						19			00
	20 Employee benefit program						20			00
	21 Other deductions. Attach s	schedule				•	21			00
	22 Total deductions. Add line						22			00
	23 Ordinary income (loss) from	· ·								00
Sc		sident Members' Tax Li								
	(a) Member's name	(b) SSN, ITIN,	(c) Distributive	<u>(</u> d)	(e)	Amount wi	(f)		(g)	
	Member's name	SSN, ITIN, or FEIN	Distributive share of income	Tax rate	Member's total tax due	Amount wi	thheld by is memb	/ this	Member's net tax due	
		OFFERN	Share of moonie	lato	(see instructions)	reported of			not tax auo	
										_
_										
										_
_										
To	tal the amount of tax due. Enter the tot	al here and on Side 1 lie	ne 4 If less than zero er	ıter -∩-						
.0	the total and the total and the total and the total	an noro ana on oldo 1, III								

$\textbf{Schedule K} \quad \textbf{Members' Shares of Income, Deductions, Credits, etc.}$

		(a) Distributive share items			(b) counts from eral K (1065)		(c) alifornia justments	Total Ca	(d) amounts using Ilifornia law
	1	Ordinary income (loss) from trade or business activities	1_	•				•	
		Net income (loss) from rental real estate activities. Attach federal Form 8825	2					ledow	
	١ _	a Gross income (loss) from other rental activities	3a					ledow	
		b Less expenses. Attach schedule.	3b						
		c Net income (loss) from other rental activities. Subtract line 3b							
		from line 3a	3c					•	
<u></u>	4	Guaranteed payments to members	4					•	
Income (Loss)	5	Interest income	5					•	
_ _	6	Dividends	6					•	
ΩOΩ	7	Royalties	7					•	
트		Net short-term capital gain (loss). Attach Schedule D (568)	8					•	
	l	Net long-term capital gain (loss). Attach Schedule D (568)	9					•	
	10		10a					•	
	10	b Total loss under IRC Section 1231 (other than due to casualty or theft).	10b					•	
	44		11a					•	
	11	. ,	11b					•	
		b Total other income. Attach schedule	11c						
	10								
		Expense deduction for recovery property (IRC Section 179). Attach schedule							
us	13	a Charitable contributions. See instructions. Attach schedule	13a					_	
Deductions		b Investment interest expense	13b					•	
퍥		c 1 Total expenditures to which IRC Section 59(e) election may apply							
De		2 Type of expenditures	13c2						
		d Deductions related to portfolio income	13d						
		e Other deductions. Attach schedule.	13e					<u> </u>	
	15	ů .							
		b Low-income housing credit	15b	-				-	
Credits		estate activities. Attach schedule	15c						
e S		d Credits related to other rental activities. Attach schedule	15d						
			15e						
		f Other credits. Attach schedule	15f					•	
Ē "	17		17a						
Minimum) Items		b Adjusted gain or loss	17b						
┋≝		c Depletion (other than oil and gas)	17c						
A je		d Gross income from oil, gas, and geothermal properties	17d						
Alternative I Tax (AMT)		e Deductions allocable to oil, gas, and geothermal properties	17e						
₽¤		f Other alternative minimum tax items. Attach schedule	17f						
	18		18a						
=		b Other tax-exempt income.	18b					•	
atic		c Nondeductible expenses	18c						
E O	19		19a					•	
Ξ		b Distribution of property other than money	19b					•	
Other Information	20		20a						
Ö		b Investment expenses	20b						
		c Other information. See instructions	20c						
	21	• •							
SiS		through 11c. From the result, subtract the sum of lines 12 through 13e. b Analysis of (a) (b) Individual	21a		1 (1)	<u> </u>			(2)
Analysis		mambare:	(c)		(d)		(e)		(f)
Ā		Corporate 1. Active 11. rassive re	artner	ship	Exempt Organiza	ation	Nominee/0	ther	LLC
		Members							

3675193 Form 568 2019 **Side 5**

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

Beginning of taxable year End of	taxable 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 a Depletable assets								
b Less accumulated depletion)							
11 Land (net of any amortization)	•							
12 a Intangible assets (amortizable only)								
b Less accumulated amortization)							
13 Other assets. Attach schedule	•							
14 Total assets								
Liabilities and Capital								
15 Accounts payable	•							
16 Mortgages, notes, bonds payable in less than 1 year	•							
17 Other current liabilities. Attach schedule								
18 All nonrecourse loans	•							
19 Mortgages, notes, bonds payable in 1 year or more	•							
20 Other liabilities. Attach schedule	•							
21 Members' capital accounts	•							
22 Total liabilities and capital								
Schedule M-1 Reconciliation of Income (Loss) per Books With Income (Loss) per Return. Use total amount under California I	aw. See instructions.							
1 Net income (loss) per books								
2 Income included on Schedule K, line 1 through line 11c Schedule K, line 1 through line 11c. Itemize:								
not recorded on books this year. Itemize								
3 Guaranteed payments (other than health insurance)								
4 Expenses recorded on books this year not included on Schedule K, line 1 through line 13e. Itemize: 7 Deductions included on Schedule K, line 1 through line								
a Depreciation	106							
b Travel and entertainment\$ a Depreciation\$								
c Annual LLC tax\$ b Other\$								
d Other								
e Total. Add line 4a through line 4d								
5 Total of line 1 through line 4e	om line 5.							
Schedule M-2 Analysis of Members' Capital Accounts. Use California amounts.								
1 Balance at beginning of year								
2 Capital contributed during year 6 Distributions: a Cash								
a Cashb Property								
b Property								
	8 Total of line 6 and line 7							
4 Other increases. Itemize								
Name of entity liquidated (if more than one, attach a schedule)	ooned on olde 1, Question II.)							
Type of entity: (1) C Corporation (2) S Corporation (3) Partnership (4) Limited Partnership (5) Sole Propr	ietor (6) Farmer							
Entity identification number(s): FEIN SSN or ITIN CA Corp. No CA SO								
Amount of liquidation gains recognized to capitalize the LLC								

Schedule IW Limited Liability Company (LLC) Income Worksheet

Enter your California income amounts on the worksheet. All amounts entered must be assigned for California law differences. **Use only amounts that are from sources derived from or attributable to California when completing lines 1-17 of this worksheet.** If your business is both within and outside of California, see Schedule IW instructions to assign the correct amounts to California. If the LLC is wholly within California, the total income amount is assigned to California and is entered beginning with line 1a. If the single member LLC (SMLLC) does not meet the 3 million criteria for filling Schedule B (568) and Schedule K (568), the SMLLC is still required to complete Schedule IW. Disregarded entities that do not meet the filing requirements to complete Schedule B or Schedule K should prepare Schedule IW by entering the California amounts attributable to the disregarded entity from the member's federal Schedule B, C, D, E, F (Form 1040 or 1040-SR), or additional schedules associated with other activities. **Do not enter amounts on this worksheet that have already been reported by another LLC to determine its fee.**

See instructions on page 14 of the Form 568 Booklet for more information on how to complete Schedule IW.

1	 Total California income from Form 568, Schedule B, line 3. See instructions					
2	 a If the answer to Question U(1) on Form 568 Side 2, is "Yes", include the gross income of this disregarded entity that is not included in lines 1 and 8 through 16	_				
3	 a LLC's distributive share of ordinary income from pass-through entities b Enter the LLC's distributive share of cost of goods sold from other pass-through entities associated with the receipt assigned to California on line 3a (see Schedule K-1s (565), Table 3, line 1a) c Enter the LLC's distributive share of deductions from other pass-through entities associated with the receipt assigned to California on line 3a (see Schedule K-1s (565), Table 3, line 1b) 	. •	3b _			
4	Add gross farm income from federal Schedule F (Form 1040 or 1040-SR). Use California amounts	_				
	Enter the total of other income (not loss) from Form 568, Schedule B, line 10	$\overline{}$				
	Enter the total gains (not losses) from Form 568, Schedule B, line 8	$\overline{}$				
	Add line 1a through line 6	_) 7	
	California rental real estate			O		
	a Enter the total gross rents from federal Form 8825, line 18a	. 💿	8b _) 8c	
9	Other California rentals.					
	 a Enter the amount from Schedule K (568), line 3a b Enter the amount from all Schedule K-1s (565), Table 3, line 3. c Add lines 9a and 9b 	. 💿	9b _) 9 c	
10	California interest. Enter the amount from Form 568, Schedule K, line 5) 10	_
11	California dividends. Enter the amount from Form 568, Schedule K, line 6) 11	_
12	California royalties. Enter the amount from Form 568, Schedule K, line 7) 12	_
13	California capital gains . Enter the capital gains (not losses) included in the amounts from Form 568, Schedule K, lines 8 and 9			·····••) 13	
14	California 1231 gains. Enter the amount of total gains (not losses) from Form 568, Schedule K, line 10a				14	_
15	$\textbf{Other California portfolio income (not loss)}. \ \textbf{Enter the amount from Form 568, Schedule K, line 11a.} \ . \ .$			• • • • • • • • • • • • • • • • • • • •	15	_
16	Other California income (not loss) not included in line 5. Enter the amount from Form 568, Schedule K	, line	11b .	• • • • • • • • • • • • • • • • • • • •) 16	_
17	Total California income . Add lines 7, 8c, 9c, 10, 11, 12, 13, 14, 15, and 16. Line 17 may not be a negat Enter here and on Form 568, Side 1, line 1. If less than zero enter -0) 17	

3677193 Form 568 2019 **Side 7**