

Tax on Accumulation Distribution of Trusts

Attach to beneficiary's tax return.

Name(s) as shown on your tax return, SSN or ITIN, Name of trust, FEIN, Address of trust, City, State, ZIP code, Beneficiary's date of birth, Enter number of trusts from which you received accumulation distributions in this taxable year.

Part I Tax on Accumulation Distribution under Internal Revenue Code Section 667.

Section A - Average Income and Determination of Computation Years

1 Amount of current distribution that is considered distributed in earlier taxable years from Schedule J (541), line 30, column (a) ... 11 Number of trust's earlier taxable years to be taken into account. See instructions ... 12 Average amount for recomputing tax. Divide line 7 by line 11. Enter here and in each column on line 15 below. ... 13 Enter your taxable income before this distribution for the five immediately preceding taxable years.

Section B - Tax Attributable to the Accumulation Distribution

14 Enter the amounts and the years from line 13, eliminating the highest and lowest taxable income years ... 15 Enter amount from line 12 in each column ... 16 Recomputed taxable income. Add line 14 and line 15 ... 17 Tax on amounts on line 16 ... 18 Tax before credits on line 14 income ... 19 Additional tax before credits. Subtract line 18 from line 17 ... 20 Tax credit adjustment. Attach schedule ... 21 See instructions ... 22 Alternative minimum tax adjustments ... 23 Combine line 21 and line 22 ... 24 Add column (a), column (b), and column (c) of line 23 ... 25 Divide the amount on line 24 by 3 ... 26 Multiply the amount on line 25 by the number of taxable years on line 11 ... 27 Enter the amount from line 4 ... 28 Partial tax attributable to the accumulation distribution. Subtract line 27 from line 26. If zero or less, enter -0-. See instructions

Part II Tax on Distributions of Previously Untaxed Trust Income under Revenue and Taxation Code Section 17745 (b) and (d):

- If the income was accumulated over a period of five taxable years or more, complete Section A.
- If the income was accumulated over a period of less than five taxable years, complete Section B.

Section A — See instructions.

1	Income accumulated over five taxable years or more	1		00			
2	Divide line 1 by six. Enter here and on Schedules CA (540), Part I, Section B, line 8f, column C, or CA (540NR), Part II, Section B, line 8f, column C.	2		00			
			(a) 2020	(b) 2019	(c) 2018	(d) 2017	(e) 2016
3	Were you a resident or part-year resident? Check "Yes" or "No" for each year (Answer "No" for nonresident years.)	3	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
4	Enter your taxable income before this distribution for the five immediately preceding years. See instructions.	4					
5	Enter the amount from line 2 in col. (a) through col. (e) if the distribution is ordinary income. For a capital gain distribution, see instructions.	5					
6	Recomputed taxable income. Add line 4 and line 5	6					
7	Tax on amounts on line 6.	7					
8	Tax before credits on line 4 income	8					
9	Additional tax before credits. Subtract line 8 from line 7	9					
10	Tax credit adjustment. Attach schedule	10					
11	Subtract line 10 from line 9. See instructions.	11					
12	Alternative minimum tax adjustments	12					
13	Add line 11 and line 12.	13					
14	Add line 13, column (a) through column (e) for all taxable years that you checked "Yes" on line 3. Enter here and on Form 540, line 34; Form 540NR, line 41; or Form 541, line 21b. See instructions.	14					00

Section B — See instructions.

1	Income accumulated less than five taxable years.	1		00
2	Averaging factor:			
	a Enter the number of years the trust accumulated the amount on line 1	2a		
	b Distribution year	2b	1	
3	Add line 2a and line 2b.	3		
4	Divide line 1 by line 3. Enter here and on Schedule CA (540), Part I, Section B, line 8f, column C, or Schedule CA (540NR), Part II, Section B, line 8f, column C.	4		00

			(a) 2020	(b) 2019	(c) 2018	(d) 2017
5	Were you a resident or part-year resident? Check "Yes" or "No" for each year. (Answer "No" for nonresident years.)	5	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
6	Enter your taxable income before this distribution for the number of preceding years entered on line 2a. See instructions.	6				
7	Enter the amount from line 4 in col. (a) through col. (d). See instructions. . .	7				
8	Recomputed taxable income. Add line 6 and line 7	8				
9	Tax on amounts on line 8.	9				
10	Tax before credits on line 6 income	10				
11	Additional tax before credits. Subtract line 10 from line 9	11				
12	Tax credit adjustment. Attach schedule	12				
13	Subtract line 12 from line 11. See instructions	13				
14	Alternative minimum tax adjustments	14				
15	Add line 13 and line 14.	15				
16	Add line 15, column (a) through column (d) for all taxable years that you checked "Yes" on line 5. Enter here and on Form 540, line 34; Form 540NR, line 41; or Form 541, line 21b. See instructions.	16				00

Part III Mental Health Services Tax under Revenue and Taxation Code Section 17043:

- If the income was accumulated over a period of five taxable years or more, complete Section A.
- If the income was accumulated over a period of less than five taxable years, complete Section B.

Section A — See instructions.

List the tax year where you selected “Yes” to Part II, Section A, line 3.

	(a) Year _____	(b) Year _____	(c) Year _____	(d) Year _____	(e) Year _____	
1 Enter the recomputed taxable income from Part II, Section A, line 6	1					
2 Subtract 1,000,000 from line 1. If zero or less, enter -0-	2					
3 Multiply line 2 by 1%	3					
4 Mental Health Services Tax paid on taxable income before distribution	4					
5 Subtract line 4 from line 3	5					
6 Add line 5, columns (a) through (e). Enter here and on Form 540, line 62; Form 540NR, line 72; or Form 541, line 27. See instructions					6	00

Section B — See instructions.

List the tax year where you selected “Yes” to Part II, Section B, line 5.

	(a) Year _____	(b) Year _____	(c) Year _____	(d) Year _____	
1 Enter the recomputed taxable income from Part II, Section B, line 8	1				
2 Subtract 1,000,000 from line 1. If zero or less enter -0-	2				
3 Multiply line 2 by 1%	3				
4 Mental Health Services Tax paid on taxable income before distribution	4				
5 Subtract line 4 from line 3	5				
6 Add line 5, columns (a) through (d). Enter here and on Form 540, line 62; Form 540NR, line 72; or Form 541, line 27. See instructions				6	00

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