TAXABLE YEAR CALIFORNIA FORM

2022 Payment Voucher for Foreign Partner or Member Withholding

592-A

	gent completes and files t					
	022 or fiscal year beginning		,	and ending (mm	/dd/yyyy)	
Payment 1	Due by the 15th day of 4th	n month of taxable year; for	weekend or holiday, see instruction	is.		
Business name				☐ FEIN ☐	CA Corp	no. CA SOS file no.
First name		Initial Last name			Teleph	one
Address (apt./ste., ro	oom, PO box, or PMB no.)					
City (If you have a fo	oreign address, see instructi	ions.)			State	ZIP code
on the check or money		heck or money order to WITHH	rd." Write the tax ID no. and "2022 For IOLDING SERVICES AND COMPLIANC		ount of pa	ayment
			70912 2 3			Form 592-A 2021
	ERE	IF NO PAYMEN	NT IS DUE, DO NOT MAIL THIS F	ORM		DETACH HERE
TAXABLE YEAR	_					CALIFORNIA FORM
202 2			gn Partner or Mem	ber Withl	noldi	ng 592-A
	gent completes and files t					
	022 or fiscal year beginning			and ending (mm	/dd/yyyy)	
Payment 2	Due by the 15th day of 6th	n month of taxable year; for	weekend or holiday, see instruction			
Business name				LI FEIN LI	CA Corp	o no. CA SOS file no.
First name		Initial Last name) ''		Teleph	one
Address (apt./ste., ro	oom, PO box, or PMB no.)					
City (If you have a fo	oreign address, see instructi	ions.)	70		State	ZIP code
on the check or money		neck or money order to WITHH	rd." Write the tax ID no. and "2022 For IOLDING SERVICES AND COMPLIANCE		ount of pa	ayment
	100		70912 2 3			Form 592-A 2021,
DETACH HE	ERE	IF NO PAYMEN	NT IS DUE, DO NOT MAIL THIS F	ORM		DETACH HERE
	– Povmont Vo	Johan fan Farai	gn Partner or Mem	har With	aldi	CALIFORNIA FORM
ZUZZ	Payment vot	icher for Forei	gn Partner or Men	ber withi	lolul	ng 592-A
	gent completes and files t					
	022 or fiscal year beginning			and ending (mm	/dd/yyyy)	
Payment 3	Due by the 15th day of 9th	n month of taxable year; for	weekend or holiday, see instruction			
Business name				☐ FEIN ☐	CA Corp	o no. CA SOS file no.
First name		Initial Last name			Teleph	one
Address (apt./ste., ro	oom, PO box, or PMB no.)					
City (If you have a fo	oreign address, see instructi	ions.)			State	ZIP code
on the check or money		heck or money order to WITHH	rd." Write the tax ID no. and "2022 For IOLDING SERVICES AND COMPLIANCE		ount of pa	ayment

Form at bottom of page.

TAXABLE YEAR	IF NO PAYMEN			DETACH HERE CALIFORNIA FORM
2022 Payn	nent Voucher for Foreig	gn Partner or Membe	er Withholdi	ng 592-A
The withholding agent comple			1	
For calendar year 2022 or fiscal			ending (mm/dd/yyyy)	
Payment 4 Due by the	15th day of 12th month of taxable year; for	r weekend or holiday, see instructions.		
Business name			FEIN CA Corp	o no. CA SOS file no.
First name	Initial Last name		Teleph	one
Address (apt./ste., room, PO box	x, or PMB no.)			
City (If you have a foreign addres	ss, see instructions.)		State	ZIP code
on the check or money order. Mail Fo	or money order payable to: "Franchise Tax Board orm 592-A and check or money order to WITHH 42867, SACRAMENTO CA 94267-0651.			nyment
		7091223	_	Form 592-A 2024
DETACH HERE	IF NO PAYMEN	70912 2 3		DETACH HERE
DETACH HERE TAXABLE YEAR	IF NO PAYMEN			•
TAXABLE YEAR 2022 Payn	nent Voucher for Foreig	nt is due, do not mail this form	er Withholdi	DETACH HERECALIFORNIA FORM
TAXABLE YEAR 2022 Payn For calendar year 2022 or fiscal	nent Voucher for Foreig	gn Partner or Membe	er Withholdi	DETACH HERECALIFORNIA FORM
TAXABLE YEAR 2022 Payn For calendar year 2022 or fiscal Check the box to indicate how For Supplemental Use thi	nent Voucher for Foreign year beginning (mm/dd/yyyy) rm 592-F was submitted (check only one box is voucher only if you have a final withholding	gn Partner or Member of Lectronic Papering payment to remit with Form 592-F. To	er Withholdi ending (mm/dd/yyyy)	DETACH HERECALIFORNIA FORM ng 592-A
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