

TAXCOM LLC

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October 15, 2021

PRESTIGE SECURITY SOLUTIONS INC 466 Bridge St Lowell, MA 01850

PRESTIGE SECURITY SOLUTIONS INC:

Enclosed is the 2020 Form 1120, U.S. Corporation Income Tax Return, prepared for PRESTIGE SECURITY SOLUTIONS INC from the information provided. This return was e-filed with the IRS and was accepted on October 15, 2021.

The corporation's federal return reflects neither a refund nor a balance due.

Enclosed is the 2020 Massachusetts Income Tax return, prepared for PRESTIGE SECURITY SOLUTIONS INC from the information provided. This return was e-filed with the Massachusetts taxing authority and was accepted on October 15, 2021.

The corporation's Massachusetts Income Tax return reflects a balance due of \$456.

The corporation's payment was due on April 15, 2021. To minimize penalties and interest, make the payment as soon as possible. Check the state's website for electronic payment options. If not paying electronically, mail this payment to the following address:

Mass. Department of Revenue
P.O. Box 7062
Boston, MA 02204
(Payable to Commonwealth of Massachusetts)

Enclosed is the 2020 New Hampshire Business Tax Summary return, prepared for PRESTIGE SECURITY SOLUTIONS INC from the information provided. This return was e-filed with the New Hampshire taxing authority and was accepted on October 15, 2021.

The corporation's New Hampshire Business Tax Summary return reflects a balance due of \$631.

The corporation's payment was due on April 15, 2021. To minimize penalties and interest, make the payment as soon as possible. Check the state's website for electronic payment options. If not paying electronically, mail this payment to the following address:

NH DRA
Document Processing Division
PO Box 1265
Concord, NH 03302-1265
(Payable to State of New Hampshire)

Thank you for the opportunity to be of service. For further assistance with your tax return needs, contact our office at (919)890-5058.

Sincerely,	
Sincercity,	
Zeh Baive FA	
Zeb Baiye EA TAXCOM LLC	
TAXCOM LLC	

Table 1120 Corporation 2020 Diagnostic Summary Name Employer Identification # 82-4498108

Demographics

Mailing Address: Phone: (781) 389–7678

466 Bridge St Lowell, MA 01850

Resident State: MA

Diagnostics

Preparer: Zeb Baiye EA Invoice: 000323 Date: 10-15-2021

Return Information

Hama on Batuma	2020	2019 Federal
Item on Return	Federal	(If available)
Total Assets	54,427	31,780
Gross Receipts/Sales	331,993	
Total Income	207,251	
Total Deductions	207,931	
Taxable Income	(680)	
Тах		
Overpayment		
Refund		
Refund Applied to ES		
Balance Due		
2220 Penalty	0	·
Total Equity	33,293	23,616

State/City Information

State/City	Gross	<u>Taxable</u>	Income Tax	Other Tax	Refund/
	Income	Income			(Balance Due)
MA355	330,894			456	(456)
NHBTSUM					(631)

8879-C

IRS e-file Signature Authorization for Form 1120

For calendar year 2020, or tax year beginning 2020, ending

2020

OMB No. 1545-0123

Department of the Treasury Internal Revenue Service

Do not send to the IRS. Keep for your records.

► Go to www.irs.gov/Form8879C for the latest information.

Employer identification number

Name of	corporation	Employer identification number
PRES'	TIGE SECURITY SOLUTIONS INC	82-4498108
Part	Tax Return Information (Whole dollars only)	
1	Total income (Form 1120, line 11)	
2	Taxable income (Form 1120, line 30)	
3	Total tax (Form 1120, line 31)	
4	Amount owed (Form 1120, line 35)	4
5	Overpayment (Form 1120, line 36)	
Part	II Declaration and Signature Authorization of Officer. Be sure to get	a copy of the corporation's return.

Under penalties of perjury, I declare that I am an officer of the above corporation and that I have examined a copy of the corporation's 2020 electronic income tax return and accompanying schedules and statements and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts shown on the copy of the corporation's electronic income tax return. I consent to allow my electronic return originator (ERO), transmitter, or intermediate service provider to send the corporation's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the corporation's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the corporation's electronic income tax return and, if applicable, the corporation's consent to electronic funds withdrawal.

Officer's PIN: check one box only

X I authorize TAXCOM LLC	to enter my PIN	98108	as my signature
ERO firm name	de	o not enter all zeros	
on the corporation's 2020 electronically filed income tax return.			
As an officer of the corporation, I will enter my PIN as my signature	on the corporation's 20	120 electronically file	d income tax
return.	on the corporations 20	20 clock of loany mo	a moonie tax
return.			
3 // 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	- 10 14 00	01 1	DEGED 5115
Officer's signature	Date ► <u>10-14-20</u>	21 Title ▶ P	RESIDENT
Part III Certification and Authentication			
Part III Certification and Authentication			
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selecte	d PIN.	<u>696653</u>	42013
			do not enter all zeros
I certify that the above numeric entry is my PIN, which is my signature on the 20	020 electronically filed i	ncome tax return for	the
corporation indicated above. I confirm that I am submitting this return in accordar	nce with the requiremen	nts of Pub. 3112, IRS	S e-file
Application and Participation, and Pub. 4163, Modernized e-File (MeF) Information	on for Authorized IRS e	-file Providers for Bu	siness
Returns.			
EDOVe signature . In 70b Pairro EA		Date ► 10	-15-2021
ERO's signature Zeb Baiye EA		Date	-13-2021

ERO Must Retain This Form - See Instructions Do Not Submit This Form to the IRS Unless Requested To Do So

1120 TAX RETURN COMPARISON 2018 / 2019 / 2020

2020

Name(s) as shown on return

PRESTIGE SECURITY SOLUTIONS INC

Identifying number 82-4498108

	2018 FEDERAL	2019 FEDERAL	2020 FEDERAL	DIFFERENCE BETWEEN 2019 & 2020
Net receipts			330,894	330,894
Cost of goods sold			126,722	126,722
Gross profit			204,172	204,172
Dividends				,
Interest				
Gross rents				
Gross royalties				
Capital gain net income				
Net gain/loss from 4797				
			2 070	2.070
Other income			3,079	3,079
Total income			207,251	207,251
Compensation of officers			52,000	52,000
Salaries and wages			48,350	48,350
Repairs and maintenance				
Bad debts				
Rents			653	653
Taxes and licenses			12,262	12,262
Interest			131	131
Charitable contributions				
Depreciation			11,260	11,260
Depletion			11,200	11,200
Advertising			30,359	30,359
				· · · · · · · · · · · · · · · · · · ·
Pension, profit-sharing			852	852
Employee benefits			699	699
Domestic production activities ded				
Other deductions			51,365	51,365
Total deductions			207,931	207,931
NOL deduction				
Special deductions				
Taxable income			(680)	(680)
Total tax			(333)	(333)
Estimated taxes paid				
Total payments line 33				
Total payments line oo IIIIII				
Amount owed				
Amount owed				
Overpayment				
Applied to estimate				
Refund				
RESIDENT STATE			MA	
Taxable				
Tax			456	456
Overpayment				
Balance Due			456	456
	2018	2019	2020	DIFFERENCE

1120EF	EF	2020				
		(Keep for your re	ecords)			
Name(s) as shown on return PRESTIGE SECURITY	SOLUTIONS INC					EIN number 82-4498108
					<u>'</u>	
The following will be transi	mitted to the IRS.	<u> </u>	7004	Amended	FinCEN 1	14
The following state returns	will be transmitted:					
The following returns have	been suppressed or are not elig	ible and will M	OT ho tran	nemittod		
NHBTSUM MA3				isiiittea.		
EF Notes						
MA MA355 not eli	nas a MESSAGE PAGE.					
NH NHBTSUM not e	eligible for e-file.					

Carryover/Carryforward Worksheet

Form 1120 (Keep for your records) 2020

Name(s) as shown on return Tax ID Number PRESTIGE SECURITY SOLUTIONS INC 82-4498108 To Next Year Form 1120 Net Operating Loss Carryover 680 Schedule D (Form 1120) Unused capital loss carryover Reserved for future use Carryover expiring this year Capital loss carryover to next year Form 2220 Form 3800 General business credit carryforward Form 4562 Section 179 Carryover Form 4797 Nonrecaptured net section 1231 losses from WK_1231C Reserved for future use Reserved Reserved for future use Form 8827 Minimum tax credit carryforward

Form 1120, Line 29a, NOL Deduction Form 1120-C, Schedule G, Line 9a, Column (a), Patronage NOL Deduction

(Keep for your records)

2020

Name(s) as shown on return

Tax ID Number

PDESTICE: SECURITING SOLUTIONS, TNC

92, 4499109

PRESTIGE SE	82-4498108				
Year	Loss Carryover/ Carryback	Increase of NOL Due to Sec 170(d)(2)(B) Contribution Reduction*	Loss Applied to 2020	Unused Loss	Unused Sec 170(d)(2)(B)
2000				Expiring this year	Expiring this year
2001					
2002					
2003					
2004					
2005					
2006					
2007					
2008					
2009					
2010					
2011					
2012					
2013					
2014					
2015					
2016					
2017					
2018					
2019				Remaining 2020	
	Current year NOL		Applied to Prior Years	NOL carryover	
2020	680			680	
	Future years NOL		Applied to 2020		
Future Years					
TOTALS	680		0	680	0

^{*} A corporation having a net operating loss (NOL) carryover from any taxable year must apply the special rule of §170(d)(2)(B). The rules are designed to prevent a double tax benefit through interaction of NOL and charitable contribution carryovers. The excess charitable deduction can reduce taxable income only once. Under these rules, a corporation's charitable contributions carryover (but not the NOL carryover) must be reduced, to the extent the charitable contribution deduction, in computing the taxable income of an intervening year, would increase the NOL to a succeeding year.

	Acknowledgement and General Information for Entities That File Returns Electronically	2020
ame(s) as shown on return	TTY SOLUTIONS INC	Employer Identification Number **-***8108
x 2020 1120	rticipating in IRS e-file.	d electronically.
an electronic signature and electronic signature. The submission	income tax return was accepted on	nter or generate a PIN signature.
		.i Oilli.

	Acknowledgement and General Information for Entities That File Returns Electronically	2020
Name(s) as shown on return		Employer Identification Number
RESTIGE SECURI	TY SOLUTIONS INC	**-***8108
ntity address		
466 Bridge St		
nank you for par	ticipating in IRS e-file.	
x 2020 7004 The electronic fili	income tax return for Federal was filed ng services were provided by TAXCOM_LLC	electronically.
	income tax return was accepted on 04-07-2021 using a Personature. The entity entered a PIN or authorized the Electronic Return Originator (ERO) to end D assigned to this return is 6966532021097ek2begu	
	DU DO. IT WILL DELAY THE PROCESSING OF THE RE	TURN.
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Form	112	0		U.S	. Corpora	ation In	come ⁻	Tax F	Returi	า			OMB No. 1545-0123	
	nent of th	ne Treasury	For ca	alendar year 2020 or tax y				, ending			, 20	_	2020	
	Revenue			► Go to www.i	rs.gov/Form1	120 for inst	tructions a	and the	latest in	formation	1.			
A Che	eck if: nsolidated	d roturn —		Name							B Em	B Employer identification number		
	ach Form			PRESTIGE SEC	CURITY SO	LUTIONS	INC					82-44	498108	
	/nonlife c		TYPE								C Dat	e incorp	oorated	
	ed return			Number, street, and ro	om or suite no.	If a P.O. box,	see instructi	ions.						
	sonal hol ach Sch.		OR									02-12	2-2018	
		vice corp.	PRINT	466 Bridge S	St.								s (see instructions)	
(se	e instructi	ions) - 📙		City or town, state or p		and ZIP or fo	reign postal	code					- (
4 Sch	edule M-	3 attached		Lowell			MA	0	1850		\$		54,427	
			E Check		(2)	Final retu		(3)	Name ch	2000	(4)	Address	s change	
$\overline{}$	1a	Gross recei		es · · · · · ·	. ,	_			1a		31,993		3 change	
				es							1,099			
				e 1b from line 1a									220 004	
	-											1c		
				ttach Form 1125-A)								2	126,722	
as l				line 2 from line 1c •								3	204,172	
Income				ons (Schedule C, line								4		
ည်												5		
_	-											6		
	7	Gross royalt	ies · ·									7		
	8	Capital gain	net incom	ne (attach Schedule D	(Form 1120))							8		
	9	Net gain or ((loss) fron	n Form 4797, Part II,	line 17 (attach	Form 4797))					9		
	10	Other incom	e (see ins	structions - attach sta	tement)				· · · st	atemer	nt · #1·	10	3,079	
	11	Total incom	ne. Add lii	nes 3 through 10							▶	11	207,251	
<u>~</u>	12	Compensati	on of offic	ers (see instructions	- attach Form	1125-E)					▶	12	<u> </u>	
ű				ess employment cred								13		
흉				ance								14	,	
륯	15	Bad debts										15		
ğ	16											16		
9	17											17		
uctions for limitations on deductions.)				ons)						•				
ig		•		,								18		
⊒ <u>i</u>				ns								19		
=				rm 4562 not claimed o								20		
₽		•										21		
Su	22	•										22	30,359	
뜷	23	Pension, pro	ofit-sharin	g, etc., plans								23	852	
	24	Employee be	enefit prog	grams								24	699	
nsi	25	Reserved fo	r future us	se								25		
<u>.</u>	26	Other deduc	tions (atta	ach statement)					· · Sta	tement	·#5· ·	26	51,365	
Š	27	Total deduc	ctions. A	dd lines 12 through 20	3						▶	27	207,931	
пS	28	Taxable inco	me before	e net operating loss d	eduction and s	special dedu	ctions. Sub	otract lir	ne 27 fror	n line 11		28	<u> </u>	
읉				duction (see instruction		•			29a				(333	
쥙		•	-	Schedule C, line 24)	,				29b					
Deductions (See inst		•	,	b								290		
	30			btract line 29c from lir								30	+	
જ	31			Part I, line 11)								31	1	
di di														
Tax, Refundable Credits, & Payments	32			lity paid (Schedule J,								32		
undable C Payments	33		•	ts, and section 965 ne	, ,	-	•	,				33		
und Pay				See instructions. Ch							_	34		
Ref	35			33 is smaller than the								35		
ă,	36			33 is larger than the to				unt over	rpaid .			36		
	37	Enter amour	nt from line	e 36 you want: Credit	ed to 2021 es	timated tax				Refun	ded 🕨	37		
				clare that I have examined the						to the best of	my knowle	dge and	belief, it is true, correct,	
Sig		a complete. Decl	arauuri 01 pr	eparer (other than taxpayer	, is based on all if	nonnation of Wi	men preparer	паъ апу К	anowiedge.		Mos	the IPC	discuss this return	
Her	e 👠 🔉	JONATHAN	ALEO		10-3	15-2021	PRE	SIDEN	VТ				parer shown below?	
		Signature of offic	er		Date		Title				See	instructi	ons. Yes X No	
		Print/Type pr	eparer's nan	me	Preparer's signa	ture			Date		Check	if	PTIN	
Paid		Zeb Ba	iye EA		Zeb Bai	ye EA			10-15	-2021	self-empl	oyed	P01545499	
Prep	arer	Firm's name	-	AXCOM LLC							EIN ▶47	7-180		
Use	Only	Firm's addres		601 SIX FORKS	RD STE 4	00				Phone				
				ALEIGH NC 276						(919)89	0-50	58	

82-4498108

Schedule J Tax Computation and Payment (see instructions) Part I - Tax Computation 1 Check if the corporation is a member of a controlled group (attach Schedule O (Form 1120)). See instructions 2 Income tax. See instructions 2 0 3 3 Base erosion minimum tax amount (attach Form 8991) 4 4 0 5a 5a b 5b 5c С d 5d 6 6 7 7 0 8 8 0 Recapture of investment credit (attach Form 4255) 9a 9a 9b b Interest due under the look-back method - completed long-term contracts (attach С 9c d Interest due under the look-back method - income forecast method (attach Form 8866) . . 9d Alternative tax on qualifying shipping activities (attach Form 8902) 9e е Interest/tax due under Section 453A(c) and/or Section 453(l) f 9f g 10 10 11 11 0 Part II - Section 965 Payments (see instructions) 2020 net 965 tax liability paid from Form 965-B, Part II, column (k), line 4. Enter here an on page 1, line 32 12 12 Part III - Payments, Refundable Credits, and Section 965 Net Tax Liability 13 13 14 14 15 15 16 16 17 17 18 Withholding (see instructions) 18 19 19 Refundable credits from: 20 20a 20b c Reserved for future use 20c **d** Other (attach statement - see instructions) 21 21 22 22 Total payments, credits, and section 965 net tax liability Add lines 19, 21, and 22. Enter here and on page 1, 23 23 line 33

Form 1120 (2020) EEA

Sc	chedule K Other Information (see instructions)	_								
1	I Check accounting method: a 🛛 Cash b 🗌 Accrual c 🗌	Other (specify)			Yes	No				
2	See the instructions and enter the:									
	a Business activity code no. ► 512100									
	b Business activity SECURITY CAMERAS									
	c Product or service SECURITY CAMERAS									
3	3 Is the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group?									
	If "Yes," enter name and EIN of the parent corporation									
4										
	a Did any foreign or domestic corporation, partnership (including any er	• • • • • • • • • • • • • • • • • • • •	•							
	organization own directly 20% or more, or own, directly or indirectly, 5		•							
	corporation's stock entitled to vote? If "Yes," complete Part I of Sched	, , ,	,			X				
	b Did any individual or estate own directly 20% or more, or own, directly		= :							
_	classes of the corporation's stock entitled to vote? If "Yes," complete	Part II of Schedule G (Form 1	120) (attach Schedule G)		Х					
5	At the end of the tax year, did the corporation:									
а	Own directly 20% or more, or own, directly or indirectly, 50% or more of the total	= :								
	any foreign or domestic corporation not included on Form 851, Affiliations Schedule?	? For rules of constructive owners	hip, see instructions			Х				
	If "Yes," complete (i) through (iv) below.	(ii) Employer	(iii) Country of	(jv) Pa	ercentage	2				
	(i) Name of Corporation	Identification Number	Incorporation	Owned	d in Votin					
		(if any)		S	tock					
	Own directly an interest of 20% or more, or own, directly or indirectly, an interest of	of 50% or more in any foreign or	domestic partnership							
	(including an entity treated as a partnership) or in the beneficial interest of a trust'	· · · · · · · · · · · · · · · · · · ·	· ·			х				
	If "Yes," complete (i) through (iv) below.	. I di fuldo di dondi udilivo diviloni	omp, coo mon donono							
	The state of the s	(ii) Employer	(iii) Country of		Maximum					
	(i) Name of Entity	Identification Number (if any)	Organization	Percenta Profit, Lo						
6	During this tax year, did the corporation pay dividends (other than stock of	dividends and distributions in	exchange for stock) in							
	excess of the corporation's current and accumulated earnings and profits	s? See sections 301 and 316				Х				
	If "Yes," file Form 5452, Corporate Report of Nondividend Distributions. S	See the instructions for Form 5	452.							
	If this is a consolidated return, answer here for the parent corporation an	d on Form 851 for each subs	idiary.							
7	At any time during the tax year, did one foreign person own, directly or inc	directly, at least 25% of the to	tal voting power of all							
	classes of the corporation's stock entitled to vote or at least 25% of the to	otal value of all classes of the	corporation's stock?			х				
	For rules of attribution, see section 318. If "Yes," enter:									
	(a) Percentage owned • and (b) Owner's cou	· —								
	(c) The corporation may have to file Form 5472, Information Return of a 2		poration or a Foreign							
	Corporation Engaged in a U.S. Trade or Business. Enter the number of		0							
8	Check this box if the corporation issued publicly offered debt instruments	· ·		▶ ∐						
	If checked, the corporation may have to file Form 8281, Information Retur	•	Issue Discount Instruments.							
9	1									
10	, ·									
11	If the corporation has an NOL for the tax year and is electing to forego the	•	,	▶∐						
	If the corporation is filing a consolidated return, the statement required by	y Regulations section 1.1502-	21(b)(3) must be attached							
	or the election will not be valid.									
12	Enter the available NOL carryover from prior tax years (do not reduce it be	by any deduction reported on								
	page 1, line 29a.)		▶\$							

So	chedule K Other Information (continued from page 4)		
13	Are the corporation's total receipts (page 1, line 1a, plus lines 4 through 10) for the tax year and its total assets at the end of the	Yes	No
	tax year less than \$250,000?		х
	If "Yes," the corporation is not required to complete Schedules L, M-1, and M-2. Instead, enter the total amount of cash		
	distributions and the book value of property distributions (other than cash) made during the tax year		
14	Is the corporation required to file Schedule UTP (Form 1120), Uncertain Tax Position Statement? See instructions		х
	If "Yes," complete and attach Schedule UTP.		
15a	Did the corporation make any payments in 2020 that would require it to file Form(s) 1099?	х	
b	If "Yes," did or will the corporation file required Form(s) 1099?	х	
16	During this tax year, did the corporation have an 80%-or-more change in ownership, including a change due to redemption of its		
	own stock?		х
17	During or subsequent to this tax year, but before the filing of this return, did the corporation dispose of more than 65% (by value)		
	of its assets in a taxable, non-taxable, or tax deferred transaction?		х
18	Did the corporation receive assets in a section 351 transfer in which any of the transferred assets had a fair market basis or fair		
	market value of more than \$1 million?		х
19	During the corporation's tax year, did the corporation make any payments that would require it to file Forms 1042 and 1042-S		
	under chapter 3 (sections 1441 through 1464) or chapter 4 (sections 1471 through 1474) of the Code?		х
20	Is the corporation operating on a cooperative basis?		Х
21	During the tax year, did the corporation pay or accrue any interest or royalty for which the deducton is not allowed under section		
	267A? See instructions		Х
	If "Yes," enter the total amount of the disallowed deductions		
22	Does the corporation have gross receipts of at least \$500 million in any of the 3 preceding tax years? (See sections 59A(e)(2)		
	and (3))		Х
	If "Yes," complete and attach Form 8991.		
23	Did the corporation have an election under section 163(j) for any real property trade or business or any farming business in effect		
	during the tax year? See instructions		Х
24	Does the corporation satisfy one or more of the following conditions? See instructions		Х
а	The corporation owns a pass-through entity with current, or prior year carryover, excess business interest expense.		
b	The corporation's aggregate average annual gross receipts (determined under section 448(c)) for the 3 tax years preceding the		
	current tax year are more than \$26 million and the corporation has business interest expense.		
С	·		
	If "Yes," complete and attach Form 8990.		
25	Is the corporation attaching Form 8996 to certify as a Qualified Opportunity Fund?		Х
	If "Yes," enter amount from Form 8996, line 15 • • • • • • • • • • • • • • • • • •		
26	Since December 22, 2017, did a foreign corporation directly or indirectly acquire substantially all of the properties held directly or		
	indirectly by the corporation, and was the ownership percentage (by vote or value) for purposes of section 7874 greater than		
	50% (for example, the shareholders held more than 50% of the stock of the foreign corporation)? If "Yes," list the ownership		
	percentage by vote and by value. See instructions		Х
	Percentage: By Vote By Value		

EEA Form **1120** (2020)

82-4498108

Scl	hedule L Balance Sheets per Books	Beginning of tax year		year	End of	tax year	
	Assets	(a)		(b)	(c)	(d)	
1	Cash			9,380		10,700	
2a	Trade notes and accounts receivable						
b	Less allowance for bad debts	((
3	Inventories						
4	U.S. government obligations						
5	Tax-exempt securities (see instructions)						
6	Other current assets (attach statement)						
7	Loans to shareholders					21,087	
8	Mortgage and real estate loans						
9	Other investments (attach statement)						
10a	Buildings and other depreciable assets	28,000			39,500		
b	Less accumulated depreciation	(5,600)		22,400	(16,860)	22,640	
11 a	Depletable assets	, ,		,	,	,	
b	Less accumulated depletion	()			()		
12	Land (net of any amortization)				,		
	Intangible assets (amortizable only)						
	Less accumulated amortization	((
14	Other assets (attach statement)				,		
15	Total assets			31,780		54,427	
	Liabilities and Shareholders' Equity			32,700		01,12,	
16	Accounts payable						
17	Mortgages, notes, bonds payable in less than 1 year						
18	Other current liabilities (attach statement)	Statement #11		1,164		672	
19	Loans from shareholders	Deacement wil		1,104		072	
20	Mortgages, notes, bonds payable in 1 year or more			7,000		20,462	
21	Other liabilities (attach statement)			7,000		20,402	
22	Capital stock: a Preferred stock						
	b Common stock						
23	Additional paid-in capital						
24	Retained earnings-Appropriated (attach statement)						
25	Retained earnings-Unappropriated			23,616		33,293	
26	Adjustments to shareholders' equity (attach statement)			23,010		33,273	
-0 27	Less cost of treasury stock		()		(
28	Total liabilities and shareholders' equity			31,780		54,427	
	hedule M-1 Reconciliation of Income (I	oss) per Books Wit	th Inc		n	01,12,	
	Note: The corporation may be requ						
1	Net income (loss) per books	9,677	7	Income recorded of	on books this year		
2	Federal income tax per books			not included on thi	•		
3	Excess of capital losses over capital gains			Tax-exempt interes	st \$		
4	Income subject to tax not recorded on books			•			
	this year (itemize):						
	· · · · · · · · · · · · · · · · · · ·		8	Deductions on this	return not charged		
5	Expenses recorded on books this year not			against book incor	me this year (itemize):		
	deducted on this return (itemize):		а		··· § 11,500		
а	Depreciation		b	Charitable contribu	•		
b	Charitable contributions • • • \$				Ψ		
	Travel and entertainment \$1,143						
	Ψ				_	11,500	
		1,143	9	Add lines 7 and 8		11,500	
6	Add lines 1 through 5	10,820	10		ne 28)-line 6 less line 9	(680)	
	hedule M-2 Analysis of Unappropriated					()	
1	Balance at beginning of year	23,616	5		a Cash		
2	Net income (loss) per books	9,677	1	ı	Stock		
3	Other increases (itemize):			(Property		
	· /		6	Other decreases (
			7				
4	Add lines 1, 2, and 3	33,293	8	Balance at end of	year (line 4 less line 7)	33,293	

1125-A Form

(Rev. November 2018) Department of the Treasury Internal Revenue Service

Cost of Goods Sold

► Attach to Form 1120, 1120-C, 1120-F, 1120S, or 1065.

► Go to www.irs.gov/Form1125A for the latest information.

OMB No. 1545-0123

Name			Employer identification number
PRE	STIGE SECURITY SOLUTIONS INC		82-4498108
1	Inventory at beginning of year	1	
2	Purchases	2	
3	Cost of labor	3	
4	Additional section 263A costs (attach schedule)	4	
5	Other costs (attach schedule)	5	126,722
6	Total. Add lines 1 through 5	6	126,722
7	Inventory at end of year	7	
8	Cost of goods sold. Subtract line 7 from line 6. Enter here and on Form 1120, page 1, line 2 or the		
	appropriate line of your tax return. See instructions	8	126,722
9a	Check all methods used for valuing closing inventory:		
	(i) Cost		
	(ii) Lower of cost or market		
	(iii) Other (Specify method used and attach explanation.)		
b	Check if there was a writedown of subnormal goods		▶ 🔲
С	Check if the LIFO inventory method was adopted this tax year for any goods (if checked, attach Form 970)		▶ 🔲
d	If the LIFO inventory method was used for this tax year, enter amount of closing inventory computed	1	1
	under LIFO	9d	<u>_</u>
е	If property is produced or acquired for resale, do the rules of section 263A apply to the entity? See instructions		· · · · · · · · · · · · · · · · · · ·
f	Was there any change in determining quantities, cost, or valuations between opening and closing inventory? If "Y	∕es,"	<u>_</u>
	attach explanation		Yes X No

SCHEDULE G (Form 1120)

Information on Certain Persons Owning the **Corporation's Voting Stock**

(Rev. December 2011)

OMB No. 1545-0123

► Attach to Form 1120. Department of the Treasury See instructions. Internal Revenue Service Employer identification number (EIN) Name PRESTIGE SECURITY SOLUTIONS INC 82-4498108 Certain Entities Owning the Corporation's Voting Stock. (Form 1120, Schedule K, Question 4a). Complete Part I columns (i) through (v) below for any foreign or domestic corporation, partnership (including any entity treated as a partnership), trust, or tax-exempt organization that owns directly 20% or more, or owns, directly or indirectly, 50% or more of the total voting power of all classes of the corporation's stock entitled to vote (see instructions). (ii) Employer Identification (i) Name of Entity (iv) Country of Organization (v) Percentage Owned in Voting Stock (iii) Type of Entity Number (if any) Part II Certain Individuals and Estates Owning the Corporation's Voting Stock. (Form 1120, Schedule K, Question 4b). Complete columns (i) through (iv) below for any individual or estate that owns directly 20% or more, or owns, directly or indirectly, 50% or more of the total voting power of all classes of the corporation's stock entitled to vote (see instructions). (iii) Country of (ii) Identifying Number (iv) Percentage Owned Citizenship (see (i) Name of Individual or Estate (if any) in Voting Stock instructions) 824-49-8108 100 US JONATHAN ALEO

_{-orm} **222**0

Underpayment of Estimated Tax by Corporations

Attach to the corporation's tax return.

OMB No. 1545-0123

Employer identification number

2020

Department of the Treasury Internal Revenue Service

Name

▶ Go to www.irs.gov/Form2220 for instructions and the latest information.

PRESTIGE SECURITY SOLUTIONS INC 82-4498108 Note: Generally, the corporation is not required to file Form 2220 (see Part II below for exceptions) because the IRS will figure any penalty owed and bill the corporation. However, the corporation may still use Form 2220 to figure the penalty. If so, enter the amount from page 2, line 38, on the estimated tax penalty line of the corporation's income tax return, but **do not** attach Form 2220. **Required Annual Payment** Total tax (see instructions) 2a Personal holding company tax (Schedule PH (Form 1120), line 26) included on line 1 2a b Look-back interest included on line 1 under section 460(b)(2) for completed long-term contracts or section 167(g) for depreciation under the income forecast method 2b c Credit for federal tax paid on fuels (see instructions) 2d Subtract line 2d from line 1. If the result is less than \$500, do not complete or file this form. The corporation 3 Enter the tax shown on the corporation's 2019 income tax return. See instructions. Caution: If the tax is zero or the tax year was for less than 12 months, skip this line and enter the amount from line 3 on line 5 4 3,168 Required annual payment. Enter the smaller of line 3 or line 4. If the corporation is required to skip line 4, enter Part II Reasons for Filing - Check the boxes below that apply. If any boxes are checked, the corporation must file Form 2220 even if it does not owe a penalty. See instructions. The corporation is using the adjusted seasonal installment method. 6 The corporation is using the annualized income installment method. 7 The corporation is a "large corporation" figuring its first required installment based on the prior year's tax. R Part III Figuring the Underpayment (b) (c) (d) (a) **Installment due dates.** Enter in columns (a) through (d) the 15th day of the 4th (Form 990-PF filers: Use 5th month), 6th, 9th, and 12th months of the corporation's tax year. Filers with installments due on or after April 1, 2020, and before July 15, 2020, see instructions . . . 9 07-15-2020 07-15-2020 09-15-2020 12-15-2020 Required installments. If the box on line 6 and/or line 7 above is checked, enter the amounts from Schedule A, line 38. If the box on line 8 (but not 6 or 7) is checked, see instructions for the amounts to enter. If none of these boxes are checked, enter 25% (0.25) of line 5 10 11 Estimated tax paid or credited for each period. For column (a) only, enter the amount from line 11 on line 15. See instructions 11 Complete lines 12 through 18 of one column before going to the next column. 12 12 Enter amount, if any, from line 18 of the preceding column 14 Subtract line 14 from line 13. If zero or less, enter -0-0 0 0 0 If the amount on line 15 is zero, subtract line 13 from line 14. Otherwise, enter -0-16 Underpayment. If line 15 is less than or equal to line 10, subtract line 15 from line 10. Then go to line 12 of the next column. Otherwise, go

17

Go to Part IV on page 2 to figure the penalty. Do not go to Part IV if there are no entries on line 17 - no penalty is owed.

18 Overpayment. If line 10 is less than line 15, subtract line 10 from line

82-4498108

Part IV Figuring the Penalty

	,						
	г		(a)	(b)	(c)		(d)
19	Enter the date of payment or the 15th day of the 4th month after						
	the close of the tax year, whichever is earlier. (C corporations with						
	tax years ending June 30 and S corporations: Use 3rd month instead of 4th month. Form 990-PF and Form 990-T filers: Use 5th						
	month instead of 4th month.) See instructions	10	07-15-2020	07_15_2020	00_15_2	0000	12_15_2020
20	Number of days from due date of installment on line 9 to the date	13	07-13-2020	07-13-2020	09-15-2	2020	12-15-2020
	shown on line 19	20					
21	Number of days on line 20 after 4/15/2020 and before 7/1/2020	21					
	Number of days on line 21						
22	Underpayment on line 17 x Number of days on line 21 x 5% (0.05)	22	\$	\$	\$		\$
23	Number of days on line 20 after 6/30/2020 and before 10/1/2020	23					
24	Underpayment on line 17 x Number of days on line 23 x 3% (0.03)	24	\$	\$	\$		\$
	366 × 575 (0.55)		Ψ	Ψ	Ψ		Ψ
25	Number of days on line 20 after 9/30/2020 and before 1/1/2021	25					
	N. whose of down on line OF						
26	Underpayment on line 17 x Number of days on line 25 x 3% (0.03)	26	\$	\$	\$		\$
27	Number of days on line 20 after 12/31/2020 and before 4/1/2021	27					
28	Underpayment on line 17 x Number of days on line 27 x 3% (0.03)	28	\$	\$	\$		\$
20	365 × 376 (0.00)	20	Ψ	Ψ	Ψ		Ψ
29	Number of days on line 20 after 3/31/2021 and before 7/1/2021	29					
30	Underpayment on line 17 x Number of days on line 29 x *%	30	\$	\$	\$		\$
31	Number of days on line 20 after 6/30/2021 and before 10/1/2021	31					
22	Underpayment on line 17 x Number of days on line 31 x *%	32	\$	\$	\$		\$
32	365 x /6	32	Ψ	Ψ	Ψ		φ
33	Number of days on line 20 after 9/30/2021 and before 1/1/2022	33					
34	Underpayment on line 17 x Number of days on line 33 x *%	34	\$	\$	\$		\$
35	Number of days on line 20 after 12/31/2021 and before 3/16/2022	35					
	Undergourgest on line 17 Number of days on line 35						
36	Underpayment on line 17 x Number of days on line 35 / 365 x *%	36	\$	\$	\$		\$
37	Add lines 22, 24, 26, 28, 30, 32, 34, and 36	37	\$	\$	\$		\$
5,	7.00 miles 22, 24, 26, 26, 56, 62, 64, 610 60 1111111111111111111111111111111	J1	Ψ	Ψ	ΙΨ		Ψ
38	Penalty. Add columns (a) through (d) of line 37. Enter the total here and on Fo	orm 1	120, line 34; or th	e comparable			
	line for other income tay returns		•	•		20	• •

Form **2220** (2020) EEA

^{*}Use the penalty interest rate for each calendar quarter, which the IRS will determine during the first month in the preceding quarter. These rates are published quarterly in an IRS News Release and in a revenue ruling in the Internal Revenue Bulletin. To obtain this information on the Internet, access the IRS website at www.irs.gov. You can also call 1-800-829-4933 to get interest rate information.

Schedule A Adjusted Seasonal Installment Method and Annualized Income Installment Method See instructions.

Form 1120-S filers: For lines 1, 2, 3, and 21 "taxable income" refers to excess net passive income or the amount on which tax is imposed under section 1374(a), whichever applies.

Part I Adjusted Seasonal Installment Method

Caution: Use this method only if the base period percentage for any 6 consecutive months is at least 70%. See instructions.

			1	1	T	T
			(a)	(b)	(c)	(d)
1	Enter taxable income for the following periods.		First 3 months	First 5 months	First 8 months	First 11 months
а	Tax year beginning in 2017	1a				
b	Tax year beginning in 2018	1b				
С	Tax year beginning in 2019	1c				
2	Enter taxable income for each period for the tax year beginning in					
	2020. See the instructions for the treatment of extraordinary items • •	2				
3	Enter taxable income for the following periods.		First 4 months	First 6 months	First 9 months	Entire year
а	Tax year beginning in 2017	3a				
b	Tax year beginning in 2018	3b				
С	Tax year beginning in 2019	3с				
4	Divide the amount in each column on line 1a by the amount in					
	column (d) on line 3a	4				
5	Divide the amount in each column on line 1b by the amount in					
	column (d) on line 3b	5				
6	Divide the amount in each column on line 1c by the amount in					
	column (d) on line 3c · · · · · · · · · · · · · · · · · ·	6				
7	Add lines 4 through 6	7				
8	Divide line 7 by 3.0	8				
9a	Divide line 2 by line 8	9a				
b	Extraordinary items (see instructions)	9b				
c	Add lines 9a and 9b	9c				
10	Figure the tax on the amount on line 9c using the instructions					
	for Form 1120, Schedule J, line 2, or comparable line of					
	corporation's return	10				
11a	Divide the amount in columns (a) through (c) on line 3a by the					
114	amount in column (d) on line 3a · · · · · · · · · · · · · · · · · ·	11a				
b	Divide the amount in columns (a) through (c) on line 3b by the	- II a				
D	amount in column (d) on line 3b	11b				
•		110				
С	Divide the amount in columns (a) through (c) on line 3c by the amount in column (d) on line 3c	11.				
10		11c				
12	Add lines 11a through 11c	12				
13	Divide line 12 by 3.0	13				
14	Multiply the amount in columns (a) through (c) of line 10 by					
	columns (a) through (c) of line 13. In column (d), enter the					
	amount from line 10, column (d)	14				
15	Enter any alternative minimum tax (trusts only) for each payment					
	period. See instructions	15				
16	Enter any other taxes for each payment period. See instructions	16				
17	Add lines 14 through 16 · · · · · · · · · · · · · · · · · ·	17				
18	For each period, enter the same type of credits as allowed on					
	Form 2220, lines 1 and 2c. See instructions	18				
19	Total tax after credits. Subtract line 18 from line 17. If zero or					
	less, enter -0-	19				Form 2220 (202

EEA Form **2220** (2020)

Annualized Income Installment Method Part II (a) (b) (c) (d) First First First First 20 20 Annualization periods (see instructions) months months months months Enter taxable income for each annualization period. See 21 22 22 23a Annualized taxable income. Multiply line 21 by line 22 23a 23b b 23c 0 0 0 0 Figure the tax on the amount on line 23c using the instructions 24 for Form 1120, Schedule J, line 2, or comparable line of 24 25 Enter any alternative minimum tax (trusts only) for each payment 25 period (see instructions) 26 Enter any other taxes for each payment period. See instructions 26 27 27 For each period, enter the same type of credits as allowed on 28 29 Total tax after credits. Subtract line 28 from line 27. If zero or 29 0 0 0 0 30 30 25% 50% 75% 100% 31 Part III Required Installments Note: Complete lines 32 through 38 of one column before 1st 2nd 3rd 4th installment installment installment installment completing the next column. 32 If only Part I or Part II is completed, enter the amount in each column from line 19 or line 31. If both parts are completed, enter the **smaller** of the amounts in each column from line 19 or line 31 32 33 Add the amounts in all preceding columns of line 38. See 33 34 Adjusted seasonal or annualized income installments. Subtract line 33 from line 32. If zero or less, enter -0- 34 Enter 25% (0.25) of line 5 on page 1 of Form 2220 in each column. Note: "Large corporations," see the instructions for line 35 36 Subtract line 38 of the preceding column from line 37 of the preceding column 36 37 37 Add lines 35 and 36 Required installments. Enter the smaller of line 34 or line 37 here and on page 1 of Form 2220, line 10. See instructions 38

EEA Form **2220** (2020)

Form 4562

Depreciation and Amortization

(Including Information on Listed Property)

Attach to your tax return.

OMB No. 1545-0172

Department of the Treasury Attachment Sequence No. 179 ► Go to www.irs.gov/Form4562 for instructions and the latest information. Internal Revenue Service (99) Business or activity to which this form relates Identifying number Name(s) shown on return PRESTIGE SECURITY SOLUTIONS INC FORM 1120 82-4498108 **Election To Expense Certain Property Under Section 179** Part I Note: If you have any listed property, complete Part V before you complete Part I. 1 Maximum amount (see instructions) 1 2 2 3 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-4 5 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing 5 6 (a) Description of property (b) Cost (business use only) 7 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 9 9 10 Carryover of disallowed deduction from line 13 of your 2019 Form 4562 10 Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions 11 11 12 12 13 Carryover of disallowed deduction to 2021. Add lines 9 and 10, less line 12 13 Note: Don't use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.) Special depreciation allowance for qualified property (other than listed property) placed in service 14 0 15 15 16 **MACRS Depreciation** (Don't include listed property. See instructions.) Section A 17 8,960 If you are electing to group any assets placed in service during the tax year into one or more general Section B - Assets Placed in Service During 2020 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery (a) Classification of property placed in (business/investment use (e) Convention (f) Method (g) Depreciation deduction period service only-see instructions) 19a 3-year property b 5-year property 11,500 HY 200 DB 2,300 7-year property d 10-year property 15-year property 20-year property g 25-year property 25 yrs. h Residential rental MM S/L 27.5 yrs. MM S/L property 27.5 yrs. S/L Nonresidential real 39 yrs. MM S/L property MM Section C - Assets Placed in Service During 2020 Tax Year Using the Alternative Depreciation System 20a Class life S/L S/L b 12-year 12 yrs. С 30-year 30 yrs. MM S/L S/L 40-year 40 yrs. MM Summary (See instructions.) Part IV Listed property. Enter amount from line 28

Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter

For assets shown above and placed in service during the current year, enter the

here and on the appropriate lines of your return. Partnerships and S corporations - see instructions -

.

11,260

22

Form 7004 (Rev. December 2018) Department of the Treasury

Internal Revenue Service

Application for Automatic Extension of Time To File Certain Business Income Tax, Information, and Other Returns

and Other Returns

OMB No. 1545-0233

▶ File a separate application for each return.
 ▶ Go to www.irs.gov/Form7004 for instructions and the latest information.

		Name			lucillinging	g number		
Print	t	PRESTIGE SECURITY SOLUTION	ONS INC		82-44	98108		
or		Number, street, and room or suite no. (If P.O. box, s	eae instructions)	02-44	98108		
Туре	<u> </u>	466 Bridge St	occ matractions.	,				
·ypc	,	City, town, state, and ZIP code (If a foreign address	enter city prov	ince or state, and country (follow the country's pra	ctice for en	ntering postal code)	.)	
		Lowell	,,, p	MA 01850	000 .0. 0	noming poortal oction	•,	
Note:	File re	quest for extension by the due date of the return	n. See instructi					
Part		Automatic Extension for Certain B			er Retu	rns. See instr	ructio	ns.
1		the form code for the return listed below					1	2
ilaaA	cation		Form	Application			orm	
s For			Code	Is For:		C	Code	
Form	706-G	S(D)	01	Form 1120-ND (section 4951 taxes	3)		20	
Form	706-G	S(T)	02	Form 1120-PC			21	
Form	1041 (bankruptcy estate only)	03	Form 1120-POL			22	
Form	1041 (estate other than a bankruptcy estate)	04	Form 1120-REIT			23	
Form	1041 (trust)	05	Form 1120-RIC			24	
Form	1041-1	V	06	Form 1120S			25	
Form	1041-0	QFT	07	Form 1120-SF			26	
Form	1042		80	Form 3520-A			27	
Form	1065		09	Form 8612			28	
Form	1066		11	Form 8613			29	
Form	1120		12	Form 8725			30	
Form	1120-0		34	Form 8804			31	
Form	1120-F		15	Form 8831			32	
Form	1120-F	FSC	16	Form 8876			33	
Form	1120-F	-	17	Form 8924			35	
Form	1120-L	_	18	Form 8928			36	
	1120-1		19					
Part	II	All Filers Must Complete This Par	t					
2		organization is a foreign corporation tha					· [П
3	If the	organization is a corporation and is the	common pa	rent of a group that intends to file a co	onsolidat	ted return,	_	_
	check	khere					. [
	If che	cked, attach a statement listing the nam	ne, address,	and employer identification number (I	∃IN) for €	each member		
	cover	red by this application.						
4	If the	organization is a corporation or partners	ship that qua	alifies under Regulations section 1.608	31-5, che	ck here 🕨	· [
		application is for calendar year 20 20 ,			ending_		20	
b	Shor	t tax year. If this tax year is less than 12	months, che	eck the reason: $\ \ \square$ Initial return $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$	Final	return		
	□с	hange in accounting period $\;\;\square\;\;$ Consc	lidated retur	rn to be filed \square Other (See instri	uctions-a	attach explanat	ion.)	
6	Tenta	tive total tax			. 6			0
7	Total	payments and credits. See instructions			. 7			0_
8	Ralar	ace due Subtract line 7 from line 6. See	instructions		. 8			0

Special Depreciation Elections	2020 PG01
Name(s) as shown on return	Tax ID Number
PRESTIGE SECURITY SOLUTIONS INC	82-4498108

THE TAXPAYER MAKES THE FOLLOWING ELECTIONS RELATED TO BONUS DEPRECIATION FOR THE 2020 TAX YEAR.

CL	ASS LIFE	BONUS	NO BONUS
3	YEAR	X	
5	YEAR		x
7	YEAR	X	
10	YEAR	X	
15	YEAR	X	
20	YEAR	X	

Federal Supporting Statements 2020 PG01 Tax ID Number Name(s) as shown on return PRESTIGE SECURITY SOLUTIONS INC 82-4498108 Schedule L - Line 1 STMT Description Beg Of Year End Of Year DFCU SAV-4568-1 93 3,822 2,648 DFCU CHK-4568-2 DFCU TAX-4568-3 2,738 1,001 DFCU MISC-4568-4 DFCU SAV-4568-5 1,003 NEW ENG TRADE-7115 5,550 3,137 R CO-OP BANKCHK 6460 8.0 9,380 10,700 Total PG01 Schedule L - Line 7 STMT Description Beg Of Year End Of Year JONATHAN ALEO 14,876 JONATHAN GONZALEZ 6,211 Total 21,087 PG01 Schedule L - Line 20 STMT Description Beg Of Year End Of Year WILLIAM KEELEY 1,000 19,462 SBA EIDL LOAN Total 20,462 7,000

Federal Supporting Statements Name(s) as shown on return PRESTIGE SECURITY SOLUTIONS INC PRESTIGE SECURITY SOLUTIONS INC 82-4498108

Form 1120	_	Line	10	_	Other	Income
-----------	---	------	----	---	-------	--------

Statement #1

Description	Amount
INTEREST INCOME	79
GRANTS RECEIVED	3,000
Total	3,079

Form 1120 - Line 26 - Other Deductions Statement #5

Description	Amount
Automobile and truck expenses	6,223
Bank charges	493
Computer	2,049
Education and training	605
Entertainment - deductible	681
Independent Contractor	8,063
Insurance	350
Other Insurance	5,320
Workers Comp Insurance	1,560
Legal and professional	5,858
Meals 50% limit	1,144
Miscellaneous	(2)
Office expense	2,415
Parking fees and tolls	490
Payroll processing expenses	1,791
Permits and fees	137
Postage/Shipping	174
Recruiting	436
Travel	477
Uniforms	1,981
EQUIPMENT EXPENSE	2,481
FACILITY UTILITIES EXPENSE	3,567
MERCHANT FEES	891
OTHER PAYROLL EXPENSE	(1,628)
PHONE INTERNET EXPENSE	2,387
SOFTWARE WEB HOSTING EXPENSE	3,422

Total _____51,365

	Federal Supporting State	ements 2020 PG01
Name(s) as shown on return		Tax ID Number
PRESTIGE SE	CCURITY SOLUTIONS INC	82-4498108

Schedule L - Line 18

Statement #11

Description Beg Of Year End Of Year AMEX CC-2006-1008 1,164 PAYROLL TAX 672 Total 1,164 672

PG01

Form 1125A - Line 5 - Other Cost Statement #7

Description **Amount** 126,722 COST OF SERVICE 126,722 Total

1120 **2020** Page 1 Overflow Statement FEIN Name(s) as shown on return 82-4498108 PRESTIGE SECURITY SOLUTIONS INC Deductions - Other Insurance Description Amount AUTO 780 HEALTH Total: \$ 5,320 Form 1120, Page 1, Line 26 Description Amount OFFICE KITCHEN EXPENSE \$ 2,138 OFFICE SUPPLY EXPENSE Total: \$ 2,415

1120 Overflow Statement Page 2 Name(s) as shown on return FEIN PRESTIGE SECURITY SOLUTIONS INC 82-4498108

Form 1120, Page 1, Line 17 - Other Misc Taxes and Licenses

Description		Amount
SALES TAX	\$\$	723
TAXES PAID		3,668
	Total: \$	4,391

1120-W

(WORKSHEET)

Estimated Tax for Corporations

, 2021, and ending

OMB No. 1545-0123

For calendar year 2021, or tax year beginning ► Go to www.irs.gov/Form1120W for instructions and the latest information.

2021

Department of the Treasury Internal Revenue Service ▶ Keep for the corporation's records - Do *not* send to the Internal Revenue Service.

IIICIIIC	F.I. I.I. A. III		IGE SECURITY			mai rievende oervice.		82-4498108
1					1	(680)		
2	Multiply line 1 by 21% (0.21)						2	(143)
3	Tax credits. See instructions						3	
4	Subtract line 3 from line 2						4	(143)
5	Other taxes. See instructions						5	
6	Total tax. Add lines 4 and 5						6	(143)
7 8	Credit for federal tax paid on fuels and other re Subtract line 7 from line 6. Note: If the result is	less th	an \$500, the corpora	ation is not requ	ired to		7	
•							8	(143)
уа	Enter the tax shown on the corporation's 2020 the tax year was for less than 12 months, skip						9a	
h	Enter the smaller of line 8 or line 9a. If the corp				אווווווכ	90	Ja	
-	·						9b	
			(a)	(b)	(c)		(d)
10	Installment due dates. See							
	instructions	10						
11	Required installments. Enter							
	25% of line 9b in columns (a)							
	through (d). If the corporation uses							
	the annualized income installment							
	method or adjusted seasonal							
	installment method or is a "large							
	corporation," see the instructions	44						
	for the amount to enter	11						Form 1120 W (2021)

For Paperwork Reduction Act Notice, see instructions.

Form **1120-W** (2021)

	Note: This information does not transmit to the IR Including with a paper filed return is	S with e-filed returns.	2020
ORP	PORATION NAME		EIN
PR	RESTIGE SECURITY SOLUTIONS INC		82-4498108
			Form 1120, line 17
axe	es and Licenses		Form 1120-C, line 15
			Form 1120-H, line 12
1	State income taxes	1	
2	State franchise taxes	2	
3	City income taxes	3	
4	City franchise taxes	4	
5	Real estate taxes	5	
6	Local property taxes	6	
7	Intangible property taxes	7	
8	Payroll taxes	8	7,871
9	Less: credit from Form 8846	9	
10	Foreign taxes paid	10	
11	Occupancy taxes	11	
12	Other miscellaneous taxes	12	4,391
13	Licenses	13	
14	Total to Form 1120, Page 1, Line 17	14	12,262

Depreciation Detail Listing FORM 1120 For your records only	Social security number/EIN 82-4498108	Basis Business Section Bonus Depreciable Life Method Rate Depreciation Depreciation Current Accumulated AMT Adjustment percentage 179 depreciation Basis Current	100.00 11,500 5 200 DB HY 20 5,600 8,960 14,560 2,300	
			28,000 11,500 100.00 100.00	
* Item is included in UBIA for Section 199A calculations. See "UBIA" in lower right corner.	Name(s) as shown on return PRESTIGE SECURITY SOLUTIONS INC	Description Date C	Hyundai Santa Fe Spor 01012020	

Next Year's	Depreciation	Worksheet
--------------------	---------------------	-----------

(Keep for your records)

2020

Name(s) as ahown on return Tax ID Number 82-4498108 PRESTIGE SECURITY SOLUTIONS INC Basis Form Multi-Form Description Date Method Life Deduction 1120 1 TRUCK 01-01-2019 28,000 M 5 5,376 11,500 3,680 1120 1 01-01-2020 5 Hyundai Santa Fe Sport M TOTAL 9,056

2020 Filing Instructions PRESTIGE SECURITY SOLUTIONS INC Tax year ending 12-31-2020

Form filed:

Form 1120 and supplemental forms and schedules

Filing method:

The return has been e-filed, do not mail.

Due date:

10-15-2021

The return reflects neither a refund nor a balance due.

FILEINS LLD

7004 Filing Instructions PRESTIGE SECURITY SOLUTIONS INC Tax year ending 12-31-2020

Form filed:

Form 7004

Filing method:

The extension has been e-filed, do not mail.

Due date:

04-15-2021

TAXCOM LLC

8601 SIX FORKS RD STE 400 RALEIGH, NC 27615 ZEBAIYE@TAXCOMLLC.COM Phone: (919)890-5058 | Fax: (919)890-5127

October 15, 2021

PRESTIGE SECURITY SOLUTIONS INC 466 Bridge St Lowell, MA 01850

Subject: Preparation of 2020 Tax Returns

PRESTIGE SECURITY SOLUTIONS INC:

Thank you for choosing TAXCOM LLC to assist with the 2020 taxes for PRESTIGE SECURITY SOLUTIONS INC. This letter confirms the terms of the engagement and outlines the nature and extent of the services we will provide.

We will prepare the 2020 federal and state income tax returns for PRESTIGE SECURITY SOLUTIONS INC. We will depend on management to provide the information we need to prepare complete and accurate returns. We may ask management to clarify some items but will not audit or otherwise verify the data submitted.

We will perform accounting services only as needed to prepare the tax returns. Our work will not include procedures to find defalcations or other irregularities. Accordingly, our engagement should not be relied upon to disclose errors, fraud, or other illegal acts, though it may be necessary for management to clarify some of the information submitted. We will inform management of any material errors, fraud, or other illegal acts we discover.

The law imposes penalties when taxpayers underestimate their tax liability. Call us if there are any concerns about such penalties.

Should we encounter instances of unclear tax law, or of potential conflicts in the interpretation of the law, we will outline the reasonable courses of action and the risks and consequences of each. We will ultimately adopt, on the behalf of PRESTIGE SECURITY SOLUTIONS INC, the alternative selected by management.

Our fee is based on the time required at standard billing rates plus out-of-pocket expenses. Invoices are due and payable upon presentation. All accounts not paid within thirty (30) days are subject to interest charges to the extent permitted by state law.

We will return the original records to management at the end of this engagement. Store these records, along with all supporting documents, in a secure location. We retain copies of your records and our work papers from your engagement for up to seven years, after which these documents will be destroyed.

If management has not selected to e-file the returns with our office, management will be solely responsible to file the returns with the appropriate taxing authorities. The tax matters representative should review all tax-return documents carefully before signing them. Our engagement to prepare the 2020 tax returns will conclude with the delivery of the completed returns to management, or with e-filed returns, with the tax matters representative's signature and our subsequent submittal of the tax return.

To affirm that this letter correctly summarizes the arrangements for this work, sign the enclosed copy of this letter in the space indicated and return it to us in the envelope provided.

Thank you for the opportunity to be of service. For further assistance with your tax return needs, contact our office at

(0.10) 000 2 0 2 0	
(919)890-5058.	
Sincerely,	
Z.I. D. S., DA	
Zeb Baiye EA TAXCOM LLC	
Accepted By:	
0.00	_
Officer	
<u></u>	_
Date	

2020 MA355 Filing Instructions PRESTIGE SECURITY SOLUTIONS INC

Form filed:

MA355 and supplemental forms and schedules

Filing method:

Your return has been e-filed, do not mail your return

Due date:

10-15-2021

Payment:

\$456.00

Transaction method:

Checks must be payable to Commonwealth of Massachusetts. Form 355-PV must be stapled to your remittance. The federal EIN should be entered on the front of the remittance.





2020 Form 355

MA20397011024

Business or Manufacturing Corporation Excise Return

Year beginning 01012020 Ending 12312020

PRESTIGE SECURITY SOLUTIONS INC 82-4498108

466 BRIDGE ST LOWELL MA 01850

	Check if:	Amended return	Federal amer	ndment	Federal aud	dit	Member	of lower-tier	entity	
	Enclos	sing Schedule TDS	Final Massachu	isetts return	Initial Return		Name change		ge Addr	ess change
	Enclosing	Schedule FCI S e	election termination or re	vocation						
1.	Check if the cor	poration is incorporated	within Massachusetts				X			
2.	Date of incorpo	ration in Massachusetts						2	02	122018
3.	Type of corpora	tion Section	38 manufacturer	Mutual fund se	rvice					
4.	Type of corpora	tion R&D		Classified man	ufacturing	RIC		REIT		
5.	Check if the cor	poration is filing a Massa	achusetts combined retur	'n						
6.	FID of principal	reporting corporation if a	nswer to line 5 is Yes					6		
7.	Check if the cor	poration's tax year is diffe	erent from the 355U							
8.	Check if the cor	poration is an insurance	mutual holding corporati	on						
9.	Check if the cor	poration is requesting alt	ernate apportionment							
10.	Principal busine	ess code						10		512100
11.	Average number	er of employees in Massa	chusetts					11		
12.	Average number	er of employees worldwide	е					12		
13.	Foreign corpora	ation: first date of busines	s in Massachusetts					13		
14.	Last year audite	ed by IRS						14		
15.	Check if adjustr	ments have been reported	d to Massachusetts							
16.	Check if the cor	poration is deducting into	angible or interest expens	ses paid to a relate	ed entity					
17.	Check if:	Taxpayer is claimin	g exemption from the inc	ome measure of t	he excise pursu	ant to PL	86-272		Taxable only with	respect to
	partnership acti	vity								

SIGN HERE. Under penalties of perjury, I declare that to the best of my knowledge and belief this return and enclosures are true, correct and complete.

Signature of appropriate officer Date Print paid preparer's name Paid preparer's SSN or PTIN $10142021 \quad ZEB \quad BAIYE \quad EA \qquad \qquad P01545499$ Title PRESIDENT Paid preparer's phone Paid preparer's EIN $919-890-5058 \qquad \qquad 47-1800341$ Are you signing as an authorized delegate

of the appropriate officer of the corporation? (see instructions) X Yes No

Paid preparer's signature Date Check if self-employed

10152021

Taxpayer's e-mail address

INFO@PRESTIGESECURITYSOLUTION.COM

PRIVACY ACT NOTICE AVAILABLE UPON REQUEST



2020 Excise Calculation

MA20397021024

Business or Manufacturing Corporation Excise Return $8\,2-4\,4\,9\,8\,1\,0\,8$

1.	Taxable Massachusetts tangible property, if	applicable	x .0026 =	: 1	
2.	Taxable net worth, if applicable		x .0026 =	2	
3.	Massachusetts taxable income		= 0080. x	3	
4.	Credit recapture			4	
5.	Tax on installment sales			5	
6.	Excise before credits			6	
7.	Total credits			7	
8.	Excise after credits			8	0
9.	Combined filer tax due			9	0
10.	Minimum excise			10 45	6
11.	Excise due before voluntary contribution			11 45	6
12.	Voluntary contribution for endangered wildli	fe conservation		12	
13.	Excise due plus voluntary contribution			13 4 5	6
14.	2019 overpayment applied to your 2020 esti	mated tax		14	
15.	2020 Massachusetts estimated tax paymen	ts		15	
16.	Payment made with extension			16	
17.	Payment with original return			17	
18.	Pass-through entity withholding. Payer ID n	umber		18	
19.	Total refundable credits			19	
20.	Total payments			20	
21.	Amount overpaid			21	
22.	Amount overpaid to be credited to 2021 esti	mated tax		22	
23.	Amount overpaid to be refunded		Refund	23	
24.	4. Balance due		Balance due	24 4 5	6
25.	a. M-2220 penalty	b. Late file/pay penalties	a + b =	25	
26.	Interest on unpaid balance			26	
27.	Total payment due at time of filing		Total due	27 4 5	6





2020 Schedule A MA20060011024 Balance Sheet

PRESTIGE SECURITY SOLUTIONS INC 82-4498108

			A.	B. Accumulated	C.
_			Original	depreciation and	Net book
Tan	gible Assets		cost	amortization	value
1.	Capital assets in Massachusetts:				
	a. Buildings	1a			
	b. Land	1b			
	c. Motor vehicles and trailers	1c			
	d. Machinery taxed locally	1d			
	e. Machinery not taxed locally	1e			
	f. Equipment	1f			
	g. Fixtures	1g			
	h. Leasehold improvements taxed locally	1h			
	i. Leasehold improvements not taxed locally	1i			
	j. Other fixed depreciable assets	1j			
	k. Construction in progress	1k			
	I. Total capital assets in Massachusetts	11			
2.	Inventories in Massachusetts:				
	a. General merchandise	2a			
	b. Exempt goods	2b			
3.	Supplies and other non-depreciable assets in Mass.	3			
4.	Total tangible assets in Massachusetts	4			
5.	Capital assets outside of Massachusetts:				
	a. Buildings and other depreciable assets	5a			
	b. Land	5b			
6.	Leaseholds/leasehold improvements outside Mass.	6			
7.	Total capital assets outside Massachusetts	7			



2020 Schedule A, pg. 2 MA20060021024

Business or Manufacturing Corporation Excise Return 82-4498108



8.	Inventories outside Massachusetts	8	
9.	Supplies and other non-depreciable assets outside Massachusetts	9	
10.	Total tangible assets outside of Massachusetts	10	
11.	Total tangible assets. Add lines 4 and 10	11	
12.	Investments:		
	a. Investments in subsidiary corporations at least 80% owned	12a	
	b. Other investments	12b	
13.	Notes receivable	13	
14.	Accounts receivable	14	
15.	Intercompany receivables	15	
16.	Cash	16	10700
17.	Other assets	17	
18.	Total assets	18	10700
Liab	pilities and Capital		
19.	Mortgages on:		
	a. Massachusetts tangible property taxed locally	19a	
	b. Other tangible assets	19b	
20.	Bonds and other funded debt	20	
21.	Accounts payable	21	
22.	Intercompany payables	22	
23.	Notes payable	23	20462
24.	Miscellaneous current liabilities	24	672
25.	Miscellaneous accrued liabilities	25	
26.	Total liabilities	26	21134
27.	Total capital stock issued	27	
28.	Paid-in or capital surplus	28	
29.	Retained earnings and surplus reserves	29	33293
30.	Undistributed S corporation net income	30	
31.	Total capital	31	33293
32.	Treasury stock	32	
33.	Total liabilities and capital	33	54427





2020 Schedule B

MA20061011024

Tangible or Intangible Property Corp. Classification

PRESTIGE SECURITY SOLUTIONS INC 82-4498108

1.	Total Massachusetts tangible property	1	
2.	Massachusetts real estate	2	
3.	Massachusetts motor vehicles and trailers	3	
4.	Massachusetts motor venicles and trailers Massachusetts machinery taxed locally	4	
	•	-	
5.	Massachusetts leasehold improvements taxed locally	5	
6.	Massachusetts tangible property taxed locally	6	
7.	Massachusetts tangible property not taxed locally	7	
8.	Total assets	8	10700
9.	Massachusetts tangible property taxed locally	9	
10.	Total assets not taxed locally	10	10700
11.	Investments in subsidiaries at least 80% owned	11	
12.	Assets subject to allocation	12	10700
13.	Income apportionment percentage	13	1.000000
14.	Allocated assets	14	10700
15.	Tangible property percentage	15	0.000000
Sch	edule C. Tangible Property Corporation		
1.	Total Massachusetts tangible property	1	
2.	Exempt Massachusetts tangible property:		
	a. Massachusetts real estate	2a	
	b. Massachusetts motor vehicles and trailers	2b	
	c. Massachusetts machinery taxed locally	2c	
	d. Massachusetts leasehold improvements taxed locally	2d	
	e. Exempt goods	2e	
	f. Certified Massachusetts industrial waste/air treatment facilities	2f	
	g. Certified Massachusetts solar or wind power deduction	2g	
3.	Total exempt Massachusetts tangible property	3	
4.	Taxable Massachusetts tangible property	4	

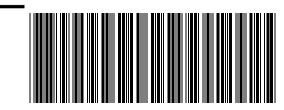


HIII NOO DOO KAARAATAA KAARAATAA KAARAATAA KAARAATAA HIIII NOO DOO KAARAATAA KAARAATAA HIIII HIIII

2020 Schedule D

MA20062011024 Intangible Property Corporation 82-4498108

1.	Total assets	1	10700
2.	Total liabilities	2	21134
3.	Massachusetts tangible property taxed locally	3	
4.	Mortgages on Massachusetts tangible property taxed locally	4	
5.	Subtract line 4 from line 3	5	
6.	Investments in subsidiaries at least 80% owned	6	
7.	Deductions from total assets	7	21134
8.	Allocable net worth	8	
9.	Income apportionment percentage	9	1.000000
10.	Taxable net worth	10	
Sch	edule E-1. Dividends Deduction		
Sch	edule E-1. Dividends Deduction Total dividends	1	
		1 2	
1.	Total dividends	1 2 3	
1. 2.	Total dividends Dividends from Massachusetts corporate trusts	_	
1. 2. 3.	Total dividends Dividends from Massachusetts corporate trusts Dividends from non-wholly-owned DISCs	3	
1. 2. 3. 4.	Total dividends Dividends from Massachusetts corporate trusts Dividends from non-wholly-owned DISCs Dividends, if less than 15% of voting stock owned	3 4	
1. 2. 3. 4. 5.	Total dividends Dividends from Massachusetts corporate trusts Dividends from non-wholly-owned DISCs Dividends, if less than 15% of voting stock owned Dividends from RICs	3 4 5	
1. 2. 3. 4. 5.	Total dividends Dividends from Massachusetts corporate trusts Dividends from non-wholly-owned DISCs Dividends, if less than 15% of voting stock owned Dividends from RICs Dividends from REITs	3 4 5	





2020 Schedule E MA20064011024

Taxable Income

PRESTIGE SECURITY SOLUTIONS INC 82-4498108

				2 2 2 2 2 4
1.	Gross receipts or sales		1	330894
2.	Gross profit		2	204172
3.	Other deductions		3	51365
4.	Net income		4	-680
5.	Allowable U.S. wage credit		5	
6.	Subtract line 5 from line 4		6	-680
7.	State and municipal bond interest not included in U.S. net income		7	
8.	Foreign, state or local income, franchise, excise or capital stock taxes deducted from U.S. net income		8	
9.	Section 168(k) "bonus" depreciation adjustment		9	
10.	Section(s) 31I and 31K intangible expenses		10	
11.	Section(s) 31J and 31K interest expenses		11	
12.	Reserved for future use		12	
13.	Other adjustments, including research and development expenses		13	
14.	Add lines 6 through 13		14	-680
15.	Abandoned building renovation deduction	x .10 =	15	
16.	Dividends deduction		16	
17.	Add back of intangible expenses exception		17	
18.	Add back of interest expenses exception		18	
19.	Income subject to apportionment		19	-680
20.	Income apportionment percentage		20	1.000000
21.	Multiply line 19 by line 20		21	-680
22.	Income not subject to apportionment		22	
23.	Total net income allocated or apportioned to Massachusetts		23	-680
24.	Certified Massachusetts solar or wind power deduction		24	
25.	Massachusetts taxable income before NOL deduction		25	-680
26.	Net operating loss deduction		26	
27.	Massachusetts taxable income		27	-680
28.	Net operating loss carryover		28	

2020 MA355PV Voucher Instructions PRESTIGE SECURITY SOLUTIONS INC

Filing method:

Your return will be efiled, but your voucher will not be debited. Sign and date your check. Mail it and the voucher on or before the due date of the return to the address listed below.

Due date:

04-15-2021

Payment:

\$456.00

Payment methods:

Checks must be payable to Commonwealth of Massachusetts. This form must be stapled to your remittance. The federal EIN should be entered on the front of the remittance.

Mail-to address:

Mass. Department of Revenue P.O. Box 7062 Boston, MA 02204

Taxpayer records

Amount paid:	
Check number:	
Date mailed:	

DETACH HERE

2020 Form 355-PV

Massachusetts Corporate Tax Payment Voucher

Payment for period end date (mm/dd/yyyy)	Tax type		Voucher type	ID type	Vendo	r code
12/31/2020	014		01	004	1024	
Name of corporation			Federal Identificat	ion number		
PRESTIGE SECURITY S	SOLUTIONS	Ι	82-44981	.08		
Mailing address						
466 Bridge St						
City/Town			State	Zip	Amour	nt enclosed
Lowell			MA	01850	\$	456.00
Phone			E-mail		Check	if name/address changed since 2019
(781)389-7678						

Pay online at mass.gov/masstaxconnect. Or, return this voucher with check or money order payable to: Commonwealth of Massachusetts. Mail to: Massachusetts Department of Revenue, PO Box 7062, Boston, MA 02204.







Massachusetts Department of Revenue Schedule M-1 Federal Reconciliation

2020

For calendar year 2020	or taxable year beginning			2020 and endin	g	
Name of corporation			Federal Identification nu	mber		
PRESTIGE SEC	URITY SOLUTIONS	INC	82-4498108			
5						
Part 1. Income a	nd expenses				1	330894
2 Cost of goods sold						126722
G						001170
·	sions					0
						0
						0
•						0
8 Capital gains on net	income				8	0
9 Net gain or loss (from	m Form 4797)				9	0
10 Other income					10	3079
11 Total income					11	207251
12 Compensation of offi	icers deduction				12	52000
13 Salaries and wages	deduction				13	48350
14 Repairs and mainter	nance deduction				14	0
15 Bad debts deduction					15	0
16 Rents deduction .					16	653
17 Taxes and licenses of	deduction				17	12262
18 Interest expense dec	duction				18	131
19 Charitable contribution	ons deduction				19	0
20 Depreciation deducti	ion				20	11260
21 Depletion deduction					21	0
22 Advertising deductio	n				22	30359
23 Pension and profit sl	haring deduction				23	852
24 Employee benefit pro	ograms deduction				24	699
25 Reserved for future	use				25	0
26 Other deductions					26	51365
27 Total deductions					27	207931
28 Taxable income befo	re NOL deduction and special de	eductions			28	-680





1	
Name of corporation	Federal Identification number
PRESTIGE SECURITY SOLUTIONS	INC 82-4498108
Part 2 Cornorate ownership	

PKE	STIGE SECURITY SOLUTI	IONS INC 82-44	98108		
Part	t 2. Corporate ownership				
1 At	t the end of the tax year did any foreign or dorganization own, directly or indirectly, more the				•
	a. Name of entity	b. Federal Identification number	c. Type of entity	d. Country of organization	e. Ownership percentage
	t the end of the tax year did the corporation only foreign or domestic corporation?		% or more of the total vo	ting power of all classes	
					Yes 🖾 N
	a. Name of corporation	b. Federal Identification numbe		intry of poration	L Yes ⊠ N d. Ownership percentage
	-			-	d. Ownership
	-			-	d. Ownership
	-			-	d. Ownership
	-			-	d. Ownership
	-			-	d. Ownership
	-			-	d. Ownership
	-			-	d. Ownership

Form M-8453C

Corporate Tax Declaration for Electronic Filing

2020
Massachusetts
Department of
Revenue

Please print or type. Privacy Act Notice available upon	request. For the	year January 1 - Decemi	ber 31, 20	20.	
Corporation name	Federal Iden	tification number	For	m filed: X 355	355U 355S 355SC
PRESTIGE SECURITY SOLUTI	82-44	98108			
Mailing address	City/Town		Sta	ite Zip	
466 BRIDGE ST	LOWELL		M	A 0:	1850
Part 1. Tax Return Information for Electron	nic Filing				
1 Excise due before credits (from Form 355, line 6; Form 3	355U, line 24; Fori	m 355S, line 9; or Form 359	5SC, line 7	7)	1
2 Total credits (from Form 355, line 7; Form 355U, lines 2				´	
3 Excise due before voluntary contributions (from Form 35			,		_
line 11)	<i>'</i>		•	•	456
4 Overpayment amount (from Form 355, line 21; Form 355					
5 Balance due (from Form 355, line 24; Form 355U, line 4				•	
3 Dalance due (nom 1 om 355, line 24, 1 om 3550, line 4	0, 1 0111 3333, 11116		.4)		450
Part 2. Declaration and Signature of Taxpa	IVer				
Under pains and penalties of perjury, I declare that I have re Return Originator and that the amounts above agree with the this information is true, correct and complete. I consent that sent to the Massachusetts Department of Revenue by my E the transmitter when my electronic return has been accepted the return can be corrected and re-transmitted. If I have file my tax liability, I will remain liable for the tax liability and all a	e amounts shown t my return, includi Electronic Return C d. In the event tha d a balance due re	on my 2020 Massachusett ng this declaration and acc Originator. I authorize DOR t it is rejected, I authorize E turn, I understand that if Do	s return. T companying to inform r OOR to ide	o the best of m g schedules, fo ny Electronic R ntify the reason	y knowledge and belief rms and statements be eturn Originator and/or s for rejection so that
Your signature		Date			
		10-15-2021			
I declare that I have reviewed the above taxpayer's return ar (Collectors are not responsible for reviewing the taxpayer's I have obtained the taxpayer's signature before submitting the acopy of all forms and information filed with the Massachus perjury I declare that I have examined the above taxpayer's belief, they are true, correct and complete. I declare that I have the This declaration of paid preparer (other than taxpayer) is be should not be sent to DOR, but must instead be retained by to which the M-8453C relates was filed.	return; however, the his return to the Missetts Department of return and accompave verified the taxused on all informations.	ey must ensure that the Massachusetts Department of Revenue. If I am also the banying schedules and state payer's proof of account artion of which the preparer h	8453C ac of Revenue paid prepa ements an nd it agrees as any kno	curately reflects B. I have provide Arer, under pair Countries to the best of Something with the name Cowledge. Origin	s the data on the return.) ed the taxpayer with as and penalties of my knowledge and e(s) shown on this form. al Forms M-8453C
ERO's signature and SSN or PTIN TED DATABLE EA		Date	EIN		Па
ZEB BAILE EA	1545499	10-15-2021		2003/1	Check if self-employed
Firm name (or yours, if self-employed) and address	<u> </u>		4 / — 1 ·	<u> </u>	
		Oity, IOWII	Gialo	'P	Check if also paid preparer
TAXCOM LLC			NO	07615	paid preparer
8601 SIX FORKS RD STE 400		RALEIGH	NC	27615	
Part 4. Declaration and Signature of Paid II Under pains and penalties of perjury, I declare that I have ex my knowledge and belief it is true, correct and complete. The preparer has any knowledge. Paid preparer's signature and SSN or PTIN	xamined this return	n, including accompanying			
Firm name (or yours, if self-employed) and address		City/Town	State	Zip	

MAEF ACK

Acknowledgement and General Information for Taxpayers Who File Returns Electronically

2020

Name(s) as shown on return

PRESTIGE SECURITY SOLUTIONS INC

Identification Number

-*8108

466 Bridge St Lowell, MA 01850

Thank you for participating in IRS e-file.

- 1. X Your 2020 state income tax return for MA355 was filed electronically.

 The electronic filing services were provided by TAXCOM LLC
- 2. \times Your return was accepted on 10-15-2021 using a Personal Identification Number (PIN) as your electronic signature. You entered a PIN or authorized the Electronic Return Originator (ERO) to enter or generate a PIN for you.

 The submission ID assigned to this return is 6966532021288rhyvg44

PLEASE DO NOT SEND A PAPER COPY OF THE TAX RETURN TO THE

STATE. IF YOU DO, IT WILL DELAY THE PROCESSING OF THE RETURN.

MAEF_ACK.LD

2020 NHBTSUM Filing Instructions PRESTIGE SECURITY SOLUTIONS INC

Form filed:

NHBTSUM and supplemental forms and schedules

Filing method:

Your return has been e-filed, do not mail your return

Due date:

11-15-2021

Payment:

\$631.00

DO NOT STAPLE New Hampshire

Department of Revenue Administration

2020 BT-SUMMARY





UB 130 WIZO 1

	BUSINI	ESS TAX RETURN SUN	MARY			
STEP 1 - PRINT OR TYPE		MMDDYYYY		MMDDYYYY		
For the CALENDAR year 2020 or other	taxable period beginning:	01012020	and ending:	12312020		
For the CALENDAR year 2020 or other taxable period beginning: 01012020 and ending: 12312020 Check box if there has been a name change since last filling. List former name. Proprietorship Last Name						
Proprietorship Last Name First Name	мі	Social Security	Number	use the D appropriate identificat	IN in the taxpayerion box.	er
						EIN if
		С				
		Activity Code (Federal)				
Number & Street Address 466 BRIDGE ST						
Address (continued)				Unit Typ	pe l	Jnit #
City / Town LOWELL				or Canadian Postal Code)		
STEP 2 - Return Type and Feder	al Information		•	•	∑ Yes	□ No
If you checked "yes" to one or both of th	e first two	Are you required to file a BPT Re	turn (Gross Business	Income Over \$50,000)?	X Yes	☐ No
questions, you must file the completed or return(s) with this BT-Summary.	corresponding	Do you file a Form 990/990T?			Yes	⊠ No
		Do you file a Federal Form 8023, 10b on Schedule B of Federal Fo		nd/or have checked box	Yes	X No
		Is the business organization filing tax year?	its return on an IRS a	pproved 52/53 week	Yes	∑ No
2 - CORPORATION	3 - PARTNER	SHIP 1 - PROPRIETO	ORSHIP	AMENDED RETUR	RN 🔲	LLC
OR 6 - COMBINED GROUP	5 - NON-PRO	FIT 4 - FIDUCIARY		FINAL RETURN		LLO
Check here if the IRS has made any age income tax return, which adjustment(s) Do not use this form to report an IRS	has not been previously re	ported to New Hampshire.	Years Covered by IRS	(MMYYYYMMYYYY)		
Check Appropriate Box(es):						
∑ Payment I	Required Refu	nd Request Credit No	ext Year's Tax Liabilit	ty No Payment R	equired	

Department of Revenue Administration

2020 BT-SUMMARY



BUSINESS TAX RETURN SUMMARY - Continued

824498108

STEP 3 - Complete the BET and / or BPT return(s) and then complete the BT-Summary and attach return(s)

STEP 4 - Calculate Your Balance Due or Overp	ayment			Round to the nearest whole dollar
1 (a) Business Enterprise Tax Net of Statutory Credits 1	(a)	608		
(b) Business Profits Tax Net of Statutory Credits 1	(b)	0		
(c) Subtotal of Business Tax Due (Line 1(b) plus Line 1(a))			1(c)	608
2 PAYMENTS				
(a) Tax paid with application for extension	2(a)			
(b) Total of taxable period's estimated tax payments	2(b)			
(c) Credit carryover from prior tax period	2(c)			
(d) Tax paid with original return (Amended returns only)	2(d)			
(e) Total of Lines 2(a) through 2(d)			2(e)	0
3 TAX DUE: (Line 1(c) minus Line 2(e))			3	608
4 ADDITIONS TO TAX				
(a) Interest (See instructions)	4(a)			
(b) Failure to Pay (See instructions)	4(b)			
(c) Failure to File (See instructions)	4(c)			
(d) Underpayment of Estimated Tax (See instructions)	4(d)	23		
(e) Total of Lines 4(a) through 4(d)			4(e)	23
5 (a) Subtotal of Amount Due (Line 3 plus Line 4(e))			5(a)	631
(b) Return Payment Made Electronically	5(b)			
(c) BALANCE DUE: Line 5(a) minus 5(b). Make your payment of make check payable to: STATE OF NEW HAMPSHIRE	nline at <u>www.r</u>	evenue.nh.gov/gtc or PAY THIS AMOUNT	5(c)	631
6 OVERPAYMENT: If balance due is less than zero, enter on Line	e 6	6		
7 Apply overpayment amount on Line 6 to: (a) Credit - Next Year's Tax Liability		 D	O NOT PAY	7(a)
(b) Refund			O NOT PAY	7(b)

STEP 5

THIS RETURN MUST BE ACCOMPANIED BY COMPLETE AND LEGIBLE COPIES OF THE APPROPRIATE FEDERAL FORMS AND SCHEDULES





New Hampshire Department of Revenue Administration

2020 **BT-SUMMARY**



BUSINESS TAX RETURN SUMMARY - Continued

824498108

Under penalties of perjury, I declare that I have examined this BT-Summary and the attached returns, and to the best of my belief they are true, correct and complete. If prepared by a person other than the taxpayer, this declaration is based on all information of which the preparer has knowledge. If a combined group, I also certify that all affiliated companies are included in the appropriate group described in this return.

POA: By checking this box and signing below, you authorize us to discuss this return with the preparer listed below.

TAXPAYER'S SIGNATURE & INFORMATION

Signature (in ink) **MMDDYYYY** 10142021

Print Signatory Name & Title

JONATHAN ALEO PRESIDENT

Email Address

INFO@PRESTIGESECURITYSOLUTION.COM

Phone Number

Check this box if you are filing as a surviving spouse

PAID PREPARER'S SIGNATURE & INFORMATION

Signature of Preparer **MMDDYYYY** 10152021

Printed Name of Preparer ZEB BAIYE EA

Email Address

ZEBAIYE@TAXCOMLLC.COM

Phone Number Preparer Identification Number

9198905058 P01545499

Preparer's Address

8601 SIX FORKS RD STE 400

Address (continued)

City / Town State Zip Code + 4 (or Canadian Postal Code)

RALEIGH NC 27615

Mail to: NH DRA **PO BOX 637** Concord NH 03302-0637

Make Check Payable to: STATE OF NEW HAMPSHIRE Enclose but DO NOT staple or tape your attachments

FILE ONLINE AT GRANITE TAX CONNECT www.revenue.nh.gov/gtc







Department of Revenue Administration 2020



BUSINESS ENTERPRISE TAX RETURN

Taxpayer Name

824498108

PRESTIGE SECURITY SOLUTIONS INC

Taxpayer Identification Number

For the CALENDAR year **2020**

MMDDYYYY

MMDDYYYY

or other taxable period beginning:

01012020

and ending: 12312020

You are required to file this return if the gross business receipts were greater than \$217,000 or the enterprise value tax base is greater than \$108,000.

Check here if required to file Form BET-80

		Round to the nearest whole dollar
Total Gross Business Receipts for this business organization	335072	
1. Dividends Paid	1	
2. Compensation and Wages Paid or Accrued	2	101202
3. Interest Paid or Accrued	3	131
4. Taxable Enterprise Value Tax Base (Sum of Lines 1, 2, and 3)	4	101333
5. New Hampshire Business Enterprise Tax (BET) (Line 4 multiplied by .006) before credits	5	608
6. Enter credits against BET. Use DP-160 to determine credit against BET	6	
7. Enter Tax Due (Line 5 minus 6). If negative, enter Zero. Report on BT-SUMMARY Line 1(a) TAX D	DUE 7	608

BET CREDIT WORKSHEET

1. Business Profits Tax (BPT) from BPT Return, Line 18 NH-1120-WE, Line 10 all other forms.

0

2. Sum the amounts from Lines 3 through 9, Column B plus other credits applied from Form DP-160 part B, not to exceed the amount on Line 1. Include the result on the BPT return, Line 19(a) NH-1120-WE or Line 11(a) all other forms. If other credits are applied, include result on BPT return, Line 19(b) NH-1120-WE, Line 11(b) all other forms.

Use carry forward amounts in the following order for this taxable period

Available Credits

В Credit Applied to BPT

С **Excess Credits**

3. BET tax paid amount from Line 7 BET Return plus Line 4 of DP-160, Part A.

608

608

4. Carry over BET from sixth prior taxable period

5. Carry over BET from fifth prior taxable period

6. Carry over BET from fourth prior taxable period

7. Carry over BET from third prior taxable period

8. Carry over BET from second prior taxable period

9. Carry over BET from first prior taxable period







Department of Revenue Administration 2020 NH-1120



BUSINESS PROFITS TAX RETURN

Business Organization Name

PRESTIGE SECURITY SOLUTIONS

Taxpayer Identification Number

824498108

For the CALENDAR year **2020** or other taxable period beginning:

MMDDYYYY

01012020

1

MMDDYYYY

and ending: 12312020

1 FEDERAL TAXABLE INCOME/(LOSS)

Enter Amount Reported on:

If 1120, Federal Form 1120, Line 28

If 1120S, DP-120. Line 2 (attach DP-120 to tax return)

Round to the nearest whole dollar

-680

2 INCREASE or DECREASE TO GROSS BUSINESS PROFITS TO RECONCILE WITH IRC

_			
2(a)	Add amount of IRC §179 expense taken on Federal Form 4562 in excess of the amount permitted pursuant to RSA 77-A:3-b, IV, including carryover amounts deducted in this taxable period	2(a)	
2(b)	Add the amount of bonus depreciation taken on the federal return for assets placed in service this period pursuant to RSA 77-A:3-b, I	2(b)	
2(c)	Add the amount of Domestic Production Activities deduction taken on the federal return this taxable period (does not apply to 1120S) pursuant to RSA 77-A:3-b, II	2(c)	
2(d)	Add any other deductions or exclusions taken on the federal return that need to be eliminated or adjusted pursuant to RSA 77-A:1, XX and 77-A:3-b, III. Complete and attach Schedule IV	2(d)	
2(e)	Deduct regular depreciation related to IRC §179 and bonus depreciation not allowed for this taxable period or for prior taxable periods	2(e)	
2(f)	Deduct any other items included on the federal return that need to be eliminated or adjusted pursuant to RSA 77-A;1, XX or RSA 77-A:4, XIX. Complete and attach Schedule IV	2(f)	
2(g)	Increase or Decrease for the net gain or loss on the sale of assets used in the business which have a different State basis from the tax basis reported on the federal return	2(g)	
2(h)	Net 2(a) through 2(g)	2(h)	
3	Subtotal Line 1 adjusted by Line 2(h)	3	
4	Separate entity items of income or expense (attach schedule)	4	
5	Gross Business Profits (combine Line 3 and Line 4)	5	
6	ADDITIONS AND DEDUCTIONS (RSA 77-A:4)		
6(a)	Deduct interest on direct US Obligations not subject to tax under RSA 77 (RSA 77-A:4, II)		6(a)
6(b)	Add income taxes or franchise taxes measured by income (attach schedule of taxes by State) (RSA 77-A:4, VII)		6(b)
6(c)	Add federal non-recognized IRC §337 Gain (RSA 77-A:4, VIII)	6(c)	
6(d)	Deduct wage adjustment required by IRC §280C (RSA 77-A:4, IX)		6(d)
6(e)	Add expenses related to federal constitutionally exempt income (RSA 77-A:4, X)		6(e)
6(f)	Deduct foreign dividend gross-up (IRC §78) (RSA 77-A:4, XI)		6(f)
6(g)	Deduct research contribution (attach computation) (RSA 77-A:4, XII)		6(g)





Department of Revenue Administration

2020 NH-1120



BUSINESS PROFITS TAX RETURN

Business Organization Name

PRESTIGE SECURITY SOLUTIONS INC

Taxpayer Identification Number

824498108

For the CALENDAR year 2020

or other taxable period beginning:

MMDDYYYY

01012020

MMDDYYYY

and ending: $1\,2\,3\,1\,2\,0\,2\,0$

NH-1120 continued					
6(h) Deduct New Hampshire Net Operating Loss Deduction (NOLD) (attac	h Form DP-132) (RSA	A 77-A:4, XIII)		Round to the ne	arest whole dollar
NOLD available 6(h) - A					
Less NOLD used this tax period	-	6(h)			
NOLD to be carried forward 6(h) - B					
6(i) Adjustments to gross business profits required due to the increase in the sale or exchange of an interest in the business organization (RSA		sulting from			
Add the amount of the increase in the basis of assets federally, du to the sale or exchange of interest in the business organization	e 6(i) - A				
Check yes if an election is being made to recognize the basis increase for		reported above	Yes	Multiple Transa (schedule atta	
If not making an election, deduct the basis increase associated wire sale or exchange(s). If making an election, enter zero. If reporting transactions, please attach a schedule reporting the details for each transaction.	multiple			·	,
Add the amount of depreciation/amortization on the federal return attributate to an increase in the basis of assets not recognized for NH purposes	6(i) - C				
Upon the sale of assets, adjust the net gain or loss attributable to an increa in the basis of assets that has not been recognized for NH purposes	6(i) - D				
Net Lines 6(i) - A through 6(i) - D			6(i)		
6(j) Add Qualified Investment Company (QIC) holders proportional share o	f QIC profits (RSA 77-	A:4, XV)	6(j)		
6(k) Deduct assistance payments under 12 USC §1823 (RSA 77-A:4, XVI)			6(k)		
6(I) Net Lines 6(a) through 6(k)		6(I)			0
7 Adjusted Gross Business Profits (Sum of Lines 5 and 6(I))		7			-680
8 New Hampshire Apportionment (If other than 100%, complete Form D percentage from Form DP-80, Line 5)	P-80 BPT Apportionm		er P.L. 86-272	8	1.000000
9 New Hampshire Taxable Business Profits (Line 7 multiplied by Line 8.	If negative, enter zero	D)	9		0
Compute tax (Line 9 multiplied by 7.7%)			10		



Page 2 of 3

Department of Revenue Administration 2020 NH-1120



BUSINESS PROFITS TAX RETURN

Business Organization Name

PRESTIGE SECURITY SOLUTIONS INC

Taxpayer Identification Number

For the CALENDAR year **2020**

MMDDYYYY

MMDDYYYY

and ending: $1\,2\,3\,1\,2\,0\,2\,0$

824498108

or other taxable period beginning:

01012020

NH-1120 continued

Round to the nearest whole dollar

-OR-

(b) Other credit including BET (attach Form DP-160)

11 (a) BET Credit only - attach Form BET Credit Worksheet

11(b)

12 New Hampshire Business Profits Tax Net of Statutory Credits (Line 10 minus Line 11(a) or 11(b), as applicable, cannot be less than zero) Report on BT-Summary, Line 1(b)

12

11(a)

0

This return must be accompanied by complete and legible copies of the appropriate federal forms and schedules.

FILE ONLINE AT GRANITE TAX CONNECT www.revenue.nh.gov/gtc





Department of Revenue Administration

2020 **DP-131-A**



WORKSHEET FOR APPORTIONMENT OF NET OPERATING LOSS (NOL)

(SEE RSA 77-A:4, XIII)

LINE 1

Enter this tax period's NOL as defined in the United States Income Tax Regulations relative to IRC § 172 in effect pursuant to RSA 77-A:4, XIII. If a gain or zero, DO NOT use this worksheet. (Business organizations not qualifying for treatment as a Subchapter "C" Corporation under the IRC should calculate their NOL as if the business organization were a Subchapter "C" Corporation). The line references for each tax year are listed below for your reference. Use the line reference that correspond with the tax year for which this form is being used.

Enter the current tax period's New Hampshire apportionment percentage from Form DP-80, Line 5, expressed to six decimal places.

LINE 3

Enter the amount of Line 1 multiplied by Line 2.

LINE 4

For taxable periods ending from July 1, 2005 to December 31, 2012, \$1,000,000 is the maximum amount that may be carried forward each year.

For taxable periods ending on or after January 1, 2013 forward, \$10,000,000 is the maximum amount that may be carried forward each year.

LINE 5

Enter the lesser of Line 3 or Line 4. This is your New Hampshire NOL available from the current tax period for carryforward. Enter this amount on Form DP-132 or DP-132-WE, Column B.

COMBINED FILERS: Rev 303.03(d) states, with regard to NOLs for combined filers, that each business organization subject to RSA 77-A shall treat its apportioned share of the combined loss amount as a tax attribute that remains with that business organization. The individual member's net operating loss, pursuant to RSA 77-A:4, XIII applied to the individual member's allocated portion of the BPT liability, should be tracked in the event of an individual member's disposition or acquisition.

Business Organization Name

PRESTIGE SECURITY SOLUTIONS INC

Taxpayer Identification Number

For the CALENDAR year 2020 824498108

or other taxable period beginning:

01012020

1

5

MMDDYYYY

MMDDYYYY

and ending: $1\,2\,3\,1\,2\,0\,2\,0$

1	The amount of the	current period NOL	(See entity type	line references	below)
---	-------------------	--------------------	------------------	-----------------	--------

5 New Hampshire NOL available for carryforward (the lesser amount of Line 3 or Line 4)

	July 1, 2005 - Tax Year 2010	Tax Year 2011				
Proprietorship:	Line 6 of NH-1040	Line 3 adjusted by Line 4 of NH-1040				
Fiduciary:	Line 6 of NH-1041 Line 3 adjusted by Line 4 of N					
Partnership: Corporation:	Line 5 of NH-1065 Line 1(c) of NH-1120	Line 3 adjusted by Line 4 of NH-1065 Line 3 adjusted by Line 4 of NH-1120				
Combined:	Line 1(c) of NH-1120-WE	Line 11(c) of NH-1120-WE				
Current period apporti	onment percentage from Form DP-80, ex	pressed to six decimal places	:			
3 Apportionment limitations (Line 1 multiplied by Line 2)						

Tax Year 2012 - Present Line 5 of NH-1040 Line 5 of NH-1041 Line 5 of NH-1065 Line 5 of NH-1120 Line 11(c) of NH-1120-WE

1.000000

680

680

10000000

680





4 Statutory limitations (See instructions above)

Department of Revenue Administration

2020 DP-2210/2220



DP22102011024

EXCEPTIONS AND PENALTY FOR THE UNDERPAYMENT OF ESTIMATED TAX

Taxpayer Name

PRESTIGE SECURITY SOLUTIONS INC

Taxpayer Identification Number 8 2 4 4 9 8 1 0 8

For the CALENDAR year **2020** or other taxable period beginning:

MMDDYYYY 01012020 $\begin{array}{c} \text{MMDDYYYY} \\ \text{and ending:} 12312020 \end{array}$

C	Check One: Description Business Tax Return(s)	erest & Dividends Tax Re	eturn Other		
F	PART I - CALCULATE YOUR UNDERPAYMENT			Round to the	e nearest whole dollar
1 0	Current year tax			\$	608
2 9	90% of Line 1 (Line 1 x .90)			\$	547
3(a)	Enter in Columns A through D the installment dates that correspond to the 15th of the 4th, 6th, 9th, and 12th months of your tax period or specify statutory	Α	В	С	D
	due dates. (I&D filers see instructions)	04152020	06152020	09152020	12152020
3(b)	Applicable percentages	25%	25%	25%	25%
3(c)	Enter Line 2 multiplied by Line 3(b) for Columns A through D	137	137	137	136
4	Amount paid timely or credited for each period				
5	Overpayment of previous installment calculated on Line 7				
6	Total (Line 4 plus Line 5)				
7	Overpayment (Line 6 minus Line 3(c)). Enter in Line 5 of next column $$				
8	Underpayment (Line 3(c) minus Line 6)	137	137	137	136
P	PART II - EXCEPTIONS TO PENALTY - See Instr	ructions			
9	Cumulative amount paid or credited from the beginning of the tax year through the installment dates (see instructions)	Α	В	С	D
10	Applicable percentages	25%	50%	75%	100%
11	Exception, prior period's tax (prior year must be 12 full months) (RSA 21-J:32, IV(a))				
12	Applicable percentages	25%	50%	75%	100%
13	Exception, prior period's tax base and facts using current years tax rate (RSA 21-J:32, IV(b))				
14	Applicable percentages	22.5%	45%	67.5%	90%
15	Exception, tax on annualized income (RSA 21-J:32, IV(c)) (Attach schedule)				



New HampshireDepartment of Revenue Administration

2020 DP-2210/2220



DP22102021024

EXCEPTIONS AND PENALTY FOR THE UNDERPAYMENT OF ESTIMATED TAX - Continued

Taxpayer Name

824498108

PRESTIGE SECURITY SOLUTIONS INC

Taxpayer Identification Number

For the CALENDAR year 2020

MMDDYYYY MMDDYYYY

or other taxable period beginning: 01012020 and ending: 12312020

PART III - CALCULATE THE PENALTY

				Α	В	С	D	
16	Amount of underpayn	nent from Part I, Line 8		137 ******	_	L37 ATTACHED	137	136
17	Enter the date of pays whichever is earlier	ment or statutory due date	of tax,	*****	** NI	12210WK	*****	* *
18	Enter the number of o	days from installment date e 17	e (Line 3(a))					
19	Interest due through 12/31/20 at 7%: (see instructions)	Number of Days x 7% x 366	Underpayment amount (Line 16)	7		5	3	
20	Interest due after 12/31/20 at 5%: (see instructions)	Number of Days x 5% x 365	Underpayment amount (Line 16)	2		2	2	2
21	Penalty for Underpay	ment of Estimated Tax (Li	ne 19 plus Line 20)	9		7	5	2
22	22 Total Penalty for Underpayment of Estimated Tax (Total of Columns A through D, Line 21).							

Note: For interest rate in other years see instructions





NH 2210/2220 Late payment/underpayment worksheet

Do Not File Keep for your records.

Name(s) as shown on return Your SSN/Fed. EIN PRESTIGE SECURITY SOLUTIONS INC 824498108

В С D **Third Quarter First Quarter Second Quarter Fourth Quarter Total Payments** Required Payment 137 137 137 136 First Payment 04 - 15 - 2021Second Payment 04-15-2021 **Third Payment** 04 - 15 - 2021**Fourth Payment** 04 - 15 - 2021Return Payment

137

1st Quarter	Through 12/31/2020	After 12/31/2020
Amt Due After 1st Payment	137	137
Days late	260	105
Penalty	7	2
Amt Due After 2nd Payment		
Days late		
Penalty		
Amt Due After 3rd Payment		
Days late		
Penalty		
Amt Due After 4th Payment		
Days late		
Penalty		
Penalty Per Period	7	2
1st Quarter Total Penalty	9	

137

BUSINESS TAX RETURN

04-15-2021

2nd Quarter	Through 12/31/2020	After 12/31/2020
Amt Due After 1st Payment		
Days late		
Penalty		
Amt Due After 2nd Payment	137	137
Days late	199	105
Penalty	5	2
Amt Due After 3rd Payment		
Days late Penalty		
Amt Due After 4th Payment		
Days late Penalty		
Penalty Per Period	5	2
2nd Quarter Total Penalty	7	

136

547

137

Oud Occasion	Through	After
3rd Quarter	12/31/2020	12/31/2020
Amt Due After 1st Payment		
Days late		
Penalty		
Amt Due After 2nd Payment		
Days late		
Penalty		
Amt Due After 3rd Payment	137	137
Days late	107	105
Penalty	3	2
Amt Due After 4th Payment		
Days late		
Penalty		
Penalty Per Period	3	2
3rd Quarter Total Penalty	5	

	Through	After
4th Quarter	12/31/2020	12/31/2020
Amt Due After 1st Payment		
Days late		
Penalty		
Amt Due After 2nd Payment		
Days late		
Penalty		
Amt Due After 3rd Payment		
Days late		
Penalty	100	100
Amt Due After 4th Payment	136	136
Days late	16	105
Penalty		2
Penalty Per Period		2
4th Quarter Total Penalty	2	

Department of Revenue Administration

2021 NH-1120-ES

ESTIMATED CORPORATE BUSINESS TAX

ESTIMATED CORPORATE BUSINESS TAX						
1 ESTIMATED TAX BASE AND/OR TAXABLE BUSINESS PROFITS	BET (a)	BPT (b)				
(a) BET Taxable Base After Apportionment	101333					
(b) New Hampshire Taxable Business Profits After Apportionment						
2 TAX						
(a) Line 1(a) x .006	608					
(b) Line 1(b) x .077						
3 CREDITS						
(a) RSA 162-L:10 (CDFA Investment Tax Credit)						
(b) RSA 162-N (Economic Revitalization Zone Tax Credit)						
(c) RSA 162-P (Research & Development Tax Credit)						
(d) RSA 162-Q (Coos County Job Creation Tax Credit)						
(e) RSA 77-G (Education Tax Credit)						
(f) RSA 400-A (Insurance Tax Credit)						
(g) RSA 77-A:5, X		608				
(h) RSA 188-E:9-a (CTE Centers Tax Credit)						
(i) Total Credits (Sum of Lines 3(a) through 3(i))		608				
4 ESTIMATED TAX FOR CURRENT YEAR (Line 2 minus Line 3(i))	608					
5 OVER PAYMENT FROM PREVIOUS TAXABLE PERIOD						
6 BALANCE OF BUSINESS TAXES DUE (Line 4 minus Line 5)	608					

COMPUTATION and RECORD of PAYMENTS

	Date Paid	BET A	mount of Each Installment (1/4 of Line 6 above)	ВРТ	Total Due (BET and/or BPT)	Calendar Year Dates
1						April 15, 2021
2						June 15, 2021
3						Sept. 15, 2021
4						Dec. 15, 2021
	IMI	PORTANT			MAKE YOUR PAYMENTS	ONLINE

AT GRANITE TAX CONNECT

www.revenue.nh.gov/gtc



THE PENALTY PROVISIONS OF RSA 21-J:32 WILL APPLY

IF THE ESTIMATE REQUIREMENTS HAVE NOT BEEN MET

NHBGBRWK	Gross Business Receipts (Keep for your records)	2020
Name		EIN
PRESTIGE SECU	RITY SOLUTIONS INC	824498108

Federal form or Schedule	Gross Receipts
FEDERAL 1120 OTHER INCOME	3079
FEDERAL 1120 GROSS SALES	331993
=======================================	=======
TOTAL GROSS BUSINESS RECEIPTS	335072

New Hampshire Department of

Revenue Administration

Payment Voucher



0NHPYT1311024

INSTRUCTIONS

- 1 Select the tax type for which the payment applies.
- 2 For a Business Tax or Interest and Dividend Tax payment, select the appropriate entity type. For Meals and Rentals (M&R) Tax, select All Entity Types.
- 3 Enter the beginning and ending date of the taxable period for which the payment applies.
- 4 Select the Taxpayer Identification Number type (Social Security Number (SSN), Federal Employer Identification Number (FEIN), Department Identification Number (DIN), or M&R License Number) and enter number. For a Joint entity type, please enter Identification Number of the primary filer.
- 5 Enter the amount paid.
- 6 Enter the taxpayer's name and address. For a joint entity type, please enter the information for the primary filer.

Make your check payable to: STATE OF NEW HAMPSHIRE

Do not staple or tape the voucher and check together.

If you are making payments for multiple tax periods or multiple tax types, please provide a voucher for each tax period and each tax type and indicate the amount you wish to be applied to each tax period and each tax type.

Mail this voucher with your payment to: NH DRA PO BOX 1265 CONCORD, NH 03302-1265

Save a stamp! Visit our website at www.revenue.nh.gov/ and choose the "e-File" button on the left hand side to pay electronically by authorizing withdrawal of the payment from your account.

Need Help? Call the Dep	artment at (603) 230-	5920, Monday through F	riday, 8:00aı	m - 4:30pm		
1 Tax Type	2 Entity Type	DO NOT C	CUT			
X Business	$\overline{\mathbb{X}}$ Corporation	Combined Pa	artnership	Proprietorship	Fiduciary	Non-Profit
Interest & Dividends	☐ Individual/Joint	Partnership Es	state			
Meals & Rentals	All Entity Types MMDDYYYY		MMDDYYY	γY		
3 Taxable period beginning	ng: 01012020	and ending:	12312	2020		
4 Taxpayer Identification		R License Number			5 Amount Paid	
824498108		License Number			631	
6 Taxpayer Name Last Name			First Name			MI
Business Name						
PRESTIGE SECUI	RITY SOLUTION	NS INC				
Number & Street Addres	SS					
466 BRIDGE ST						
Address (continued)						
City / Town			State	Zip Code + 4 (or C	Canadian Postal Cod	de)
LOWELL			MA	01850		



NHBEVWK	Enterprise Valuation	2020
	(Keep for your records)	
Name		EIN
PRESTIGE SECUR	ITY SOLUTIONS INC	824498108

Federal form or Schedule	Deductions	
COMPENSATION OF OFFICERS	52000	
SALARIES AND WAGES NOT PAID TO OFFICERS	48350	
RETIREMENT PLANS	852	
INTEREST	131	
TOTAL ENTERPRISE VALUE TAX BASE	101333	

NHEF_ACK

Acknowledgement and General Information for Taxpayers Who File Returns Electronically

2020

Name(s) as shown on return

PRESTIGE SECURITY SOLUTIONS INC

Identification Number

-*8108

Address

466 Bridge St Lowell, MA 01850

Thank you for participating in IRS e-file.

- 1. X Your 2020 state income tax return for NHBTSUM was filed electronically.

 The electronic filing services were provided by TAXCOM LLC
- 2. $\overline{\mathbb{X}}$ Your return was accepted on $\underline{10-15-2021}$ using a Personal Identification Number (PIN) as your electronic signature. You entered a PIN or authorized the Electronic Return Originator (ERO) to enter or generate a PIN for you.

 The submission ID assigned to this return is 6966532021288bgbo2jx

PLEASE DO NOT SEND A PAPER COPY OF THE TAX RETURN TO THE STATE. IF YOU DO, IT WILL DELAY THE PROCESSING OF THE RETURN.