

Form Selection

Check appropriate form you are filling in

☒ 1120S☐ 7004☐ No Activity Return

Name of Corporation

INFORMATION CONSULTING SERVICES LLC

EIN

XX-XXX0245

Fiscal Year Beginning:

Fiscal Year Ending:

Date Business Started: 01/01/2012

In care of Name:

Apt. #:

Basic Information of Entity

US address / U.S Possession Address

US Address

Street Address: 42767 RAVENGLASS DR

City: ASHBURN

State: VA

ZIP Code: 20148

Foreign Address

Street Address:

Country:

City:

ProvinceOrState:

PostalCode:

S Election Effective Date:

01/01/2012

Principal Business Activity:

611000

Business Activity Code Number:

Educational Services

Other Information of Entity

Check all that apply

☐ Final Return☐ Amended Return☐ Name change☐ Address Change☐ Election Termination or Revocation☐ Check If schedule M3 is attachedIs the corporation electing to be an S corporation beginning with this tax year? ☐ Yes ☒ No

If "Yes", attach Form 2553 if not already filed.

Enter the No. of shareholders who were shareholders during any part of the tax year. 1

Signature Authorization :☐ Check here if using Practitioner PIN Method.☒ Form 8879S☐ Form 8453S☐ Check here for paper filing of the return.

Enter ERO Pin: 12345

Date: 03/02/2020

Business Representative Identifying Number: XXX-XX-8662

Business Representative PIN: 10245

Business Representative Name / First Name

Last Name

Middle Initial

ANIL

GOEL

Business Representative Title: PRESIDENT

Business Representative Phone Number: (703)565-3342

Business Representative Email Address: ANIL.GOEL@MYEXAMSPREP.COM

Refund/Payment Option :☐ Direct Deposit☐ Direct Debit☐ Paper Check**Bank Account Information :**

Routing Number

Account Number

Account Type:

☐ Savings☐ Checking

Are you making payment with this return?

☐ Yes ☒ No**Third Party Designee :**

Do you want another person to discuss this return with IRS?

☒ Yes ☐ No

Name

Telephone

TAMERA WOLVERTON

(703)585-5001

PIN 10158

Preparer Information

Preparer ID:

1

Preparer Name: Tamera Wolverton

Preparer SSN: XXX-XX-6980

PTIN (Preparer TIN): PXXXXXXXXX

Firm Name: Claros Wolverton Tax Acct Assoc

US Address:

Street Address: 44084 Riverside Pkwy ste 120

City: Leesburg

State: VA

ZIP Code: 20176

Foreign Address:

Street Address:

Country:

City:

ProvinceOrState:

PostalCode:

Email Address: Tamera@cwtaxandassociates.com

Non-Paid Preparer Indicator:

Date:

Self Employed?

☐ Yes ☒ No

EIN XX-XXX9486

Telephone: (703) 585-5001

Fax:

Client Copy

2019Department of the Treasury
Internal Revenue Service▶ ERO must obtain and retain completed Form 8879-S.
▶ Go to www.irs.gov/Form8879S for the latest information.

For calendar year 2019, or tax year beginning

, 2019, and ending

, 20

Name of corporation

INFORMATION CONSULTING SERVICES LLC

Employer identification number

XX-XXX0245

Part I Tax Return Information (Whole dollars only)

1	Gross receipts or sales less returns and allowances (Form 1120-S, line 1c)	1	519,087
2	Gross profit (Form 1120-S, line 3)	2	470,072
3	Ordinary business income (loss) (Form 1120-S, line 21)	3	204,622
4	Net rental real estate income (loss) (Form 1120-S, Schedule K, line 2)	4	0
5	Income (loss) reconciliation (Form 1120-S, Schedule K, line 18)	5	204,482

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 2019 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

☒ I authorize Claros Wolverton Tax Acct Assoc to enter my PIN 1 0 2 4 5 as my signature

ERO firm name

Don't enter all zeros

on the corporation's 2019 electronically filed income tax return.

☒ As an officer of the corporation, I will enter my PIN as my signature on the corporation's 2019 electronically filed income tax return.

Officer's signature ▶ _____ Date ▶ 03/02/2020 Title ▶ PRESIDENT

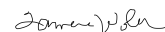
Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.

5 4 2 0 6 0 1 2 3 4 5

Don't enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2019 electronically filed income tax return for the corporation indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 3112**, IRS e-file Application and Participation, and **Pub. 4163**, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature ▶  Date ▶ 03/05/2020

ERO Must Retain This Form — See Instructions
Don't Submit This Form to the IRS Unless Requested To Do So

Future Developments

For the latest information about developments related to Form 8879-S and its instructions, such as legislation enacted after they were published, go to www.irs.gov/Form8879S.

Purpose of Form

A corporate officer and an electronic return originator (ERO) use Form 8879-S when the corporate officer wants to use a personal identification number (PIN) to electronically sign an S corporation's electronic income tax return and, if applicable, consent to electronic funds withdrawal. A corporate officer who doesn't use Form 8879-S must use Form 8453-S, U.S. S Corporation Income Tax Declaration for an IRS e-file Return. For more information, see the instructions for Form 8453-S.

Don't send this form to the IRS. The ERO must retain Form 8879-S.

ERO Responsibilities

The ERO must:

- ♦ Enter the name and employer identification number of the corporation at the top of the form;
- ♦ Complete Part I using the amounts (zero may be entered when appropriate) from the corporation's 2019 income tax return;
- ♦ Enter on the authorization line in Part II the ERO firm name (not the name of the individual preparing the return) if the ERO is authorized to enter the officer's PIN;
- ♦ Give the officer Form 8879-S for completion and review by hand delivery, U.S. mail, private delivery service, email, Internet website, or fax; and
- ♦ Complete Part III, including a signature and date.



CAUTION *The ERO must receive the completed and signed Form 8879-S from the officer before the electronic return is transmitted (or released for transmission).*

Officer Responsibilities

The corporate officer must:

- ♦ Verify the accuracy of the corporation's income tax return;
- ♦ Check the appropriate box in Part II to either authorize the ERO to enter the officer's PIN or choose to enter it in person;
- ♦ Indicate or verify his or her PIN when authorizing the ERO to enter it (the PIN must be five digits other than all zeros);
- ♦ Sign, date, and enter his or her title in Part II; and
- ♦ Return the completed Form 8879-S to the ERO by hand delivery, U.S. mail, private delivery service, email, Internet website, or fax.

The corporation's return won't be transmitted to the IRS until the ERO receives the officer's signed Form 8879-S.

Important Notes for EROs

- ♦ Don't send Form 8879-S to the IRS unless requested to do so. Retain the completed Form 8879-S for 3 years from the return due date or IRS received date, whichever is later. Form 8879-S can be retained electronically in accordance with the recordkeeping guidelines in Rev. Proc. 97-22, which is on page 9 of Internal Revenue Bulletin 1997-13 at www.irs.gov/pub/irs-irbs/irb97-13.pdf.
- ♦ Enter the corporate officer's PIN on the input screen only if the corporate officer has authorized you to do so.
- ♦ Provide the officer with a copy of the signed Form 8879-S upon request.
- ♦ Provide the officer with a corrected copy of the Form 8879-S if changes are made to the return (for example, based on the officer's review).
- ♦ See Pub. 4163 for more information.

Paperwork Reduction Act Notice. We ask for the information on this form to carry out the Internal Revenue laws of the United States. You are required to give us the information. We need it to ensure that you are complying with these laws and to allow us to figure and collect the right amount of tax.

You aren't required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by Internal Revenue Code section 6103.

The time needed to complete and file this form will vary depending on individual circumstances. The estimated burden for business taxpayers filing this form is approved under OMB control number 1545-0123 and is included in the estimates shown in the instructions for their business income tax return.

Comments. You can send us comments from www.irs.gov/FormComments. Or you can write to the Internal Revenue Service, Tax Forms and Publications Division, 1111 Constitution Ave. NW, IR-6526, Washington, DC 20224. **Don't send the form to this office.**

VA-8879P
Virginia Department
of Taxation**Virginia Pass-Through Entity Return of Income and
Return of Nonresident Withholding Tax e-file Signature
Authorization****Tax Year
2019****DO NOT SEND THIS VA-8879P TO THE VIRGINIA DEPARTMENT OF TAXATION OR THE IRS.
IT MUST BE MAINTAINED IN YOUR FILES!**

Entity Name INFORMATION CONSULTING SERVICES LLC	Federal ID Number X X - X X X 0 2 4 5
Part I Number and Types of Owners	
a. The total number of owners	a. 1
b. The total number of nonresident owners	b. 0
c. Total amount withheld for nonresident owners (Total of Line e from all Schedules VK-1)	c. 0
d. If the entity is exempt from withholding, enter the exemption code	d.
Part II Declaration and Signature Authorization of Authorized Representative	
<p>Under penalties of perjury, I, the undersigned owner and authorized representative of the pass-through entity for which this return is made, declare under the penalties provided by law that this return (including any accompanying schedules, statements and attachments) has been examined by me and is, to the best of my knowledge and belief, a true, correct, and complete return, made in good faith, for the taxable year stated, pursuant to the tax laws of the Commonwealth of Virginia. A preparer other than the authorized representative declares the same, and such declaration is based on all information of which he or she has any knowledge. I further declare that the information provided to my Electronic Return Originator (ERO), Transmitter, or Intermediate Service Provider including the amounts shown in Part I above agrees with the information and amounts shown on the corresponding lines of the pass-through entity electronic tax return</p>	
Officer's e-File PIN: check one box only <input checked="" type="checkbox"/> I authorize the ERO named below to enter my e-File PIN 1 0 2 4 5 as my signature on the pass-through entity's 2019 electronic Virginia pass-through entity tax return. <p style="text-align: center;">Do not enter all zeros</p> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">Claros Wolverton Tax Acct Assoc</div> <p style="text-align: center;">ERO Firm Name</p> <p>I will enter my e-File PIN as my signature on the pass-through entity's 2019 electronic Virginia pass-through entity tax return. Check this box only if you are entering your own e-File PIN and the return is filed using the Practitioner PIN method. The ERO must complete Part III below.</p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> Your Signature _____ Date _____ </div>	
Part III Certification and Authentication	
ERO's EFIN/PIN: Enter your six digit EFIN followed by your five digit self-selected PIN. X X X X X X 1 2 3 4 5 <p style="text-align: center;">Do not enter all zeros</p> <p>I certify that the above numeric entry is my ERO EFIN/PIN, which is my signature for the 2019 Virginia pass-through entity return for the pass-through entity indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and have followed all other requirements as specified by the Virginia Department of Taxation. EROs may sign the form using a rubber stamp, mechanical device, such as a signature pen, or computer software program.</p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> ERO's Signature <u>James J. Wu</u> Date <u>03052020</u> </div>	

U.S. Income Tax Return for an S Corporation

OMB No. 1545-0123

Department of the Treasury
Internal Revenue Service▶ Do not file this form unless the corporation has filed or
is attaching Form 2553 to elect to be an S corporation.▶ Go to www.irs.gov/Form1120S for instructions and the latest information.**2019**

For calendar year 2019 or tax year beginning , 2019, ending , 20

A S election effective date 01/01/2012	TYPE OR PRINT	Name INFORMATION CONSULTING SERVICES LLC	D Employer identification number XX-XXX0245
B Business activity code number (see instructions) 611000		Number, street, and room or suite no. If a P.O. box, see instructions. 42767 RAVENGLASS DR	E Date incorporated 01/01/2012
C Check if Sch. M-3 attached <input type="checkbox"/>		City or town, state or province, country, and ZIP or foreign postal code ASHBURN VA 20148	F Total assets (see instructions) \$ 197,018

- G** Is the corporation electing to be an S corporation beginning with this tax year? ☐ Yes ☒ No If "Yes," attach Form 2553 if not already filed
- H** Check if: (1) ☐ Final return (2) ☐ Name change (3) ☐ Address change (4) ☐ Amended return (5) ☐ S election termination or revocation
- I** Enter the number of shareholders who were shareholders during any part of the tax year 1
- J** Check if corporation: (1) ☐ Aggregated activities for section 465 at-risk purposes (2) ☐ Grouped activities for section 469 passive activity purposes

Caution: Include **only** trade or business income and expenses on lines 1a through 21. See the instructions for more information.

Income	1a Gross receipts or sales	1a	535,152	
	b Returns and allowances	1b	16,065	
	c Balance. Subtract line 1b from line 1a	1c		519,087
	2 Cost of goods sold (attach Form 1125-A)	2		49,015
	3 Gross profit. Subtract line 2 from line 1c	3		470,072
	4 Net gain (loss) from Form 4797, line 17 (attach Form 4797)	4		0
5 Other income (loss) (see instructions—attach statement)	5		161	
6 Total income (loss). Add lines 3 through 5 ▶	6		470,233	
Deductions (see instructions for limitations)	7 Compensation of officers (see instructions—attach Form 1125-E)	7		41,000
	8 Salaries and wages (less employment credits)	8		61,649
	9 Repairs and maintenance	9		
	10 Bad debts	10		
	11 Rents	11		64,887
	12 Taxes and licenses	12		9,719
	13 Interest (see instructions)	13		
	14 Depreciation not claimed on Form 1125-A or elsewhere on return (attach Form 4562)	14		0
	15 Depletion (Do not deduct oil and gas depletion.)	15		
	16 Advertising	16		4,109
	17 Pension, profit-sharing, etc., plans	17		2,540
	18 Employee benefit programs	18		
	19 Other deductions (attach statement)	19		81,707
	20 Total deductions. Add lines 7 through 19 ▶	20		265,611
	21 Ordinary business income (loss). Subtract line 20 from line 6	21		204,622
Tax and Payments	22a Excess net passive income or LIFO recapture tax (see instructions)	22a	0	
	b Tax from Schedule D (Form 1120-S)	22b	0	
	c Add lines 22a and 22b (see instructions for additional taxes)	22c		0
	23a 2019 estimated tax payments and 2018 overpayment credited to 2019	23a		
	b Tax deposited with Form 7004	23b	0	
	c Credit for federal tax paid on fuels (attach Form 4136)	23c	0	
	d Reserved for future use	23d	0	
	e Add lines 23a through 23d	23e		0
	24 Estimated tax penalty (see instructions). Check if Form 2220 is attached ▶ <input type="checkbox"/>	24		0
	25 Amount owed. If line 23e is smaller than the total of lines 22c and 24, enter amount owed	25		0
	26 Overpayment. If line 23e is larger than the total of lines 22c and 24, enter amount overpaid	26		0
27 Enter amount from line 26: Credited to 2020 estimated tax ▶ Refunded ▶	27		0	

**Sign
Here**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature of officer	03/05/2020	PRESIDENT
	Date	Title

May the IRS discuss this return with the preparer shown below? See instructions. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

**Paid
Preparer
Use Only**

Print/Type preparer's name Tamera Wolverton	Preparer's signature <i>Tamera Wolverton</i>	Date	Check <input type="checkbox"/> if self-employed	PTIN PXXXXXXX
Firm's name ▶ Claros Wolverton Tax Acct Assoc	Firm's EIN ▶ XX-XXX9486			
Firm's address ▶ 44084 Riverside Pkwy ste 120 Leesburg VA 20176	Phone no. (703) 585-5001			

Schedule B Other Information (see instructions)

1	Check accounting method: a <input checked="" type="checkbox"/> Cash b <input type="checkbox"/> Accrual c <input type="checkbox"/> Other (specify) ▶ _____	Yes	No																									
2	See the instructions and enter the: a Business activity ▶ Educational Services b Product or service ▶ SERVICE																											
3	At any time during the tax year, was any shareholder of the corporation a disregarded entity, a trust, an estate, or a nominee or similar person? If "Yes," attach Schedule B-1, Information on Certain Shareholders of an S Corporation . . .		x																									
4	At the end of the tax year, did the corporation:																											
a	Own directly 20% or more, or own, directly or indirectly, 50% or more of the total stock issued and outstanding of any foreign or domestic corporation? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (v) below		x																									
	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 25%;">(i) Name of Corporation</th> <th style="width: 15%;">(ii) Employer Identification Number (if any)</th> <th style="width: 15%;">(iii) Country of Incorporation</th> <th style="width: 15%;">(iv) Percentage of Stock Owned</th> <th style="width: 30%;">(v) If Percentage in (iv) Is 100%, Enter the Date (if any) a Qualified Subchapter S Subsidiary Election Was Made</th> </tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </table>	(i) Name of Corporation	(ii) Employer Identification Number (if any)	(iii) Country of Incorporation	(iv) Percentage of Stock Owned	(v) If Percentage in (iv) Is 100%, Enter the Date (if any) a Qualified Subchapter S Subsidiary Election Was Made																						
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b	Own directly an interest of 20% or more, or own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital in any foreign or domestic partnership (including an entity treated as a partnership) or in the beneficial interest of a trust? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (v) below		x																									
	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 25%;">(i) Name of Entity</th> <th style="width: 15%;">(ii) Employer Identification Number (if any)</th> <th style="width: 15%;">(iii) Type of Entity</th> <th style="width: 15%;">(iv) Country of Organization</th> <th style="width: 30%;">(v) Maximum Percentage Owned in Profit, Loss, or Capital</th> </tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </table>	(i) Name of Entity	(ii) Employer Identification Number (if any)	(iii) Type of Entity	(iv) Country of Organization	(v) Maximum Percentage Owned in Profit, Loss, or Capital																						
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5a	At the end of the tax year, did the corporation have any outstanding shares of restricted stock? If "Yes," complete lines (i) and (ii) below.		x																									
	(i) Total shares of restricted stock ▶ _____																											
	(ii) Total shares of non-restricted stock ▶ _____																											
b	At the end of the tax year, did the corporation have any outstanding stock options, warrants, or similar instruments? If "Yes," complete lines (i) and (ii) below.																											
	(i) Total shares of stock outstanding at the end of the tax year ▶ _____																											
	(ii) Total shares of stock outstanding if all instruments were executed ▶ _____																											
6	Has this corporation filed, or is it required to file, Form 8918 , Material Advisor Disclosure Statement, to provide information on any reportable transaction?		x																									
7	Check this box if the corporation issued publicly offered debt instruments with original issue discount <input type="checkbox"/> If checked, the corporation may have to file Form 8281 , Information Return for Publicly Offered Original Issue Discount Instruments.																											
8	If the corporation (a) was a C corporation before it elected to be an S corporation or the corporation acquired an asset with a basis determined by reference to the basis of the asset (or the basis of any other property) in the hands of a C corporation and (b) has net unrealized built-in gain in excess of the net recognized built-in gain from prior years, enter the net unrealized built-in gain reduced by net recognized built-in gain from prior years. See instructions ▶ \$ _____																											
9	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		x																									
10	Does the corporation satisfy one or more of the following? See instructions		x																									
a	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.																											
c	The corporation is a tax shelter and the corporation has business interest expense. If "Yes," complete and attach Form 8990.																											
11	Does the corporation satisfy both of the following conditions?		x																									
a	The corporation's total receipts (see instructions) for the tax year were less than \$250,000.																											
b	The corporation's total assets at the end of the tax year were less than \$250,000. If "Yes," the corporation is not required to complete Schedules L and M-1.																											

Schedule B Other Information (see instructions) (continued)		Yes	No
12	During the tax year, did the corporation have any non-shareholder debt that was canceled, was forgiven, or had the terms modified so as to reduce the principal amount of the debt?		x
	If "Yes," enter the amount of principal reduction ▶ \$		
13	During the tax year, was a qualified subchapter S subsidiary election terminated or revoked? If "Yes," see instructions		x
14a	Did the corporation make any payments in 2019 that would require it to file Form(s) 1099?		x
b	If "Yes," did the corporation file or will it file required Form(s) 1099?		
15	Is the corporation attaching Form 8996 to certify as a Qualified Opportunity Fund?		x
	If "Yes," enter the amount from Form 8996, line 14 ▶ \$		

Schedule K Shareholders' Pro Rata Share Items		Total amount	
Income (Loss)	1 Ordinary business income (loss) (page 1, line 21)	1	204,622
	2 Net rental real estate income (loss) (attach Form 8825)	2	0
	3a Other gross rental income (loss) 3a		
	b Expenses from other rental activities (attach statement) 3b		0
	c Other net rental income (loss). Subtract line 3b from line 3a 3c		0
	4 Interest income 4		
	5 Dividends: a Ordinary dividends 5a		
	b Qualified dividends 5b		
	6 Royalties 6		
	7 Net short-term capital gain (loss) (attach Schedule D (Form 1120-S)) 7		0
8a Net long-term capital gain (loss) (attach Schedule D (Form 1120-S)) 8a		0	
b Collectibles (28%) gain (loss) 8b			
c Unrecaptured section 1250 gain (attach statement) 8c		0	
9 Net section 1231 gain (loss) (attach Form 4797) 9		0	
10 Other income (loss) (see instructions) Type ▶ 10		0	
Deductions	11 Section 179 deduction (attach Form 4562) 11		0
	12a Charitable contributions 12a		140
	b Investment interest expense 12b		
	c Section 59(e)(2) expenditures (1) Type ▶ (2) Amount ▶ 12c(2)		
d Other deductions (see instructions) Type ▶ 12d		0	
Credits	13a Low-income housing credit (section 42(j)(5)) 13a		
	b Low-income housing credit (other) 13b		0
	c Qualified rehabilitation expenditures (rental real estate) (attach Form 3468, if applicable) 13c		0
	d Other rental real estate credits (see instructions) Type ▶ 13d		
	e Other rental credits (see instructions) Type ▶ 13e		
	f Biofuel producer credit (attach Form 6478) 13f		0
	g Other credits (see instructions) Type ▶ 13g		0
Foreign Transactions	14a Name of country or U.S. possession ▶		
	b Gross income from all sources 14b		
	c Gross income sourced at shareholder level 14c		
	Foreign gross income sourced at corporate level 14d		
	d Reserved for future use 14d		
	e Foreign branch category 14e		
	f Passive category 14f		
	g General category 14g		
	h Other (attach statement) 14h		
	Deductions allocated and apportioned at shareholder level 14i		
	i Interest expense 14i		
	j Other 14j		
	Deductions allocated and apportioned at corporate level to foreign source income 14k		
	k Reserved for future use 14k		
	l Foreign branch category 14l		
	m Passive category 14m		
	n General category 14n		
	o Other (attach statement) 14o		
	Other information 14p		
p Total foreign taxes (check one): <input type="checkbox"/> Paid <input type="checkbox"/> Accrued ▶ 14p			
q Reduction in taxes available for credit (attach statement) 14q			
r Other foreign tax information (attach statement) 14r			

Schedule K Shareholders' Pro Rata Share Items (continued)		Total amount
Alternative Minimum Tax (AMT) Items	15a Post-1986 depreciation adjustment	15a
	b Adjusted gain or loss	15b 0
	c Depletion (other than oil and gas)	15c
	d Oil, gas, and geothermal properties—gross income	15d
	e Oil, gas, and geothermal properties—deductions	15e
	f Other AMT items (attach statement)	15f 0
Items Affecting Shareholder Basis	16a Tax-exempt interest income	16a
	b Other tax-exempt income	16b
	c Nondeductible expenses	16c 0
	d Distributions (attach statement if required) (see instructions)	16d
	e Repayment of loans from shareholders	16e
Other Information	17a Investment income	17a
	b Investment expenses	17b
	c Dividend distributions paid from accumulated earnings and profits	17c
	d Other items and amounts (attach statement)	
Reconciliation	18 Income (loss) reconciliation. Combine the amounts on lines 1 through 10 in the far right column. From the result, subtract the sum of the amounts on lines 11 through 12d and 14p	18 204,482

Schedule L Balance Sheets per Books		Beginning of tax year		End of tax year	
Assets		(a)	(b)	(c)	(d)
1	Cash		5,377		40,399.42
2a	Trade notes and accounts receivable	1,500			
b	Less allowance for bad debts	()	1,500	()	0
3	Inventories				0
4	U.S. government obligations				
5	Tax-exempt securities (see instructions)				
6	Other current assets (attach statement)		289		11
7	Loans to shareholders				
8	Mortgage and real estate loans				
9	Other investments (attach statement)		0		156,607
10a	Buildings and other depreciable assets			0	
b	Less accumulated depreciation	()	0	()	0
11a	Depletable assets				
b	Less accumulated depletion	()	0	()	0
12	Land (net of any amortization)				0
13a	Intangible assets (amortizable only)			0	
b	Less accumulated amortization	()	0	()	0
14	Other assets (attach statement)		0		0
15	Total assets		7,166		197,018
Liabilities and Shareholders' Equity					
16	Accounts payable				
17	Mortgages, notes, bonds payable in less than 1 year				
18	Other current liabilities (attach statement)		3,254		3,896
19	Loans from shareholders		0		95,000
20	Mortgages, notes, bonds payable in 1 year or more				
21	Other liabilities (attach statement)		0		0
22	Capital stock		911		911
23	Additional paid-in capital		80,709		176,756
24	Retained earnings		137,194		121,426
25	Adjustments to shareholders' equity (attach statement)		-214,902		-200,972
26	Less cost of treasury stock	()		()	
27	Total liabilities and shareholders' equity		7,166		197,018

Schedule M-1 Reconciliation of Income (Loss) per Books With Income (Loss) per Return**Note:** The corporation may be required to file Schedule M-3. See instructions.

1	Net income (loss) per books	204,482	5	Income recorded on books this year not included on Schedule K, lines 1 through 10 (itemize):	
2	Income included on Schedule K, lines 1, 2, 3c, 4, 5a, 6, 7, 8a, 9, and 10, not recorded on books this year (itemize) _____	0	a	Tax-exempt interest \$ _____	0
3	Expenses recorded on books this year not included on Schedule K, lines 1 through 12 and 14p (itemize):		6	Deductions included on Schedule K, lines 1 through 12 and 14p, not charged against book income this year (itemize):	
a	Depreciation \$ _____		a	Depreciation \$ _____	
b	Travel and entertainment \$ _____	0	7	Add lines 5 and 6	0
4	Add lines 1 through 3	204,482	8	Income (loss) (Schedule K, line 18). Subtract line 7 from line 4	0 204,482

Schedule M-2 Analysis of Accumulated Adjustments Account, Shareholders' Undistributed Taxable Income Previously Taxed, Accumulated Earnings and Profits, and Other Adjustments Account
(see instructions)

	(a) Accumulated adjustments account	(b) Shareholders' undistributed taxable income previously taxed	(c) Accumulated earnings and profits	(d) Other adjustments account
1	Balance at beginning of tax year	0	0	0
2	Ordinary income from page 1, line 21	204,622		
3	Other additions	0		0
4	Loss from page 1, line 21	(0)		
5	Other reductions	(0)		(0)
6	Combine lines 1 through 5	204,622	0	0
7	Distributions	200,972		
8	Balance at end of tax year. Subtract line 7 from line 6	3,650	0	0

☐ Final K-1☐ Amended K-1

OMB No. 1545-0123

Schedule K-1
(Form 1120-S)**2019**Department of the Treasury
Internal Revenue Service

For calendar year 2019, or tax year

beginning / / 2019ending / /**Shareholder's Share of Income, Deductions, Credits, etc.**

▶ See back of form and separate instructions.

Part I Information About the Corporation**A** Corporation's employer identification number

X X - X X X 0 2 4 5

B Corporation's name, address, city, state, and ZIP code

INFORMATION CONSULTING SERVICES LLC

42767 RAVENGLASS DR

ASHBURN

VA

20148

C IRS Center where corporation filed return**Part II Information About the Shareholder****D** Shareholder's identifying number

XXX-XX-8662

E Shareholder's name, address, city, state, and ZIP code

ANIL GOEL

42767 RAVENGLASS DRIVE

Ashburn

VA

20148

F Shareholder's percentage of stock ownership for tax year

100 %

Part III Shareholder's Share of Current Year Income, Deductions, Credits, and Other Items

1	Ordinary business income (loss)	13	Credits
	204,622		
2	Net rental real estate income (loss)		
	0		
3	Other net rental income (loss)		
	0		
4	Interest income		
	0		
5a	Ordinary dividends		
	0		
5b	Qualified dividends	14	Foreign transactions
	0		
6	Royalties		
	0		
7	Net short-term capital gain (loss)		
	0		
8a	Net long-term capital gain (loss)		
	0		
8b	Collectibles (28%) gain (loss)		
	0		
8c	Unrecaptured section 1250 gain		
	0		
9	Net section 1231 gain (loss)		
	0		
10	Other income (loss)	15	Alternative minimum tax (AMT) items
11	Section 179 deduction	16	Items affecting shareholder basis
	0		
12	Other deductions		
A	140		
		17	Other information
18	<input type="checkbox"/> More than one activity for at-risk purposes*		
19	<input type="checkbox"/> More than one activity for passive activity purposes*		

* See attached statement for additional information.

For IRS Use Only

2019

EIN

SSN/EIN

[illegible]

Computation of Shareholder's Basis

1 Stock Basis at beginning of tax year	911
2 Basis from any capital contributions made or additional stock acquired during the tax year	

INCREASES :

3 Ordinary income	
4 Net income from rental activities	
5 Net portfolio income	
6 Net gain under Section 1231	
7 Other income	
8 Tax-exempt interest income	
9 Other tax-exempt income	
10 Net gain on disposition of Section 179 assets	
11 Oil and gas depletion in excess of basis	
12 Other Increases :	
Description	Amount
13 Total Increases : (add lines 3 – 12)	0

DECREASES :

14 Nondeductible expenses	
15 Oil and gas depletion	
16 Ordinary loss	
17 Net loss from rental activities	
18 Net portfolio loss	
19 Net loss under Section 1231	
20 Other loss	
21 Charitable contributions	
22 Section 179 expense deduction	
23 Deductions related to portfolio income (loss)	
24 Other deductions	
25 Investment interest expense	
26 Total foreign taxes	
27 Section 59(e) expenses	
28 Prior year loss in excess of basis	
29 Other Decreases	
Description	Amount
30 Property distributions (including cash)	200,972
31 Total Decreases	200,972
32 Stock basis at the end of Tax Year. (Line 1 plus line 12 minus line 30)	-200,061
33 Debt basis at the beginning of Tax Year	
34 Adjustments to Debt basis	
Description	Amount
35 Debt basis at the end of Tax Year (Combine line 32 and 33)	0
36 Shareholder's total basis at the end of Tax Year	-200,061

This list identifies the codes used on Schedule K-1 for all shareholders and provides summarized reporting information for shareholders who file Form 1040 or 1040-SR. For detailed reporting and filing information, see the separate Shareholder's Instructions for Schedule K-1 and the instructions for your income tax return.

	<i>Report on</i>	<i>Code</i>	<i>Report on</i>
1. Ordinary business income (loss). Determine whether the income (loss) is passive or nonpassive and enter on your return as follows:		N Credit for employer social security and Medicare taxes	} See the Shareholder's Instructions
Passive loss	See the Shareholder's Instructions	O Backup withholding	
Passive income	Schedule E, line 28, column (h)	P Other credits	
Nonpassive loss	See the Shareholder's Instructions		
Nonpassive income	Schedule E, line 28, column (k)		
2. Net rental real estate income (loss)	See the Shareholder's Instructions	14. Foreign transactions	
3. Other net rental income (loss)		A Name of country or U.S. possession	} Form 1116, Part I
Net income	Schedule E, line 28, column (h)	B Gross income from all sources	
Net loss	See the Shareholder's Instructions	C Gross income sourced at shareholder level	
4. Interest income	Form 1040 or 1040-SR, line 2b	<i>Foreign gross income sourced at corporate level</i>	
5a. Ordinary dividends	Form 1040 or 1040-SR, line 3b	D Reserved for future use	} Form 1116, Part I
5b. Qualified dividends	Form 1040 or 1040-SR, line 3a	E Foreign branch category	
6. Royalties	Schedule E, line 4	F Passive category	
7. Net short-term capital gain (loss)	Schedule D, line 5	G General category	
8a. Net long-term capital gain (loss)	Schedule D, line 12	H Other	
8b. Collectibles (28%) gain (loss)	28% Rate Gain Worksheet, line 4 (Schedule D instructions)	<i>Deductions allocated and apportioned at shareholder level</i>	
8c. Unrecaptured section 1250 gain	See the Shareholder's Instructions	I Interest expense	Form 1116, Part I
9. Net section 1231 gain (loss)	See the Shareholder's Instructions	J Other	Form 1116, Part I
10. Other income (loss)		<i>Deductions allocated and apportioned at corporate level to foreign source income</i>	
<i>Code</i>		K Reserved for future use	} Form 1116, Part I
A Other portfolio income (loss)	See the Shareholder's Instructions	L Foreign branch category	
B Involuntary conversions	See the Shareholder's Instructions	M Passive category	
C Sec. 1256 contracts & straddles	Form 6781, line 1	N General category	
D Mining exploration costs recapture	See Pub. 535	O Other	
E Reserved for future use		<i>Other information</i>	
F Section 965(a) inclusion	} See the Shareholder's Instructions	P Total foreign taxes paid	Form 1116, Part II
G Income under subpart F (other than inclusions under sections 951A and 965)		Q Total foreign taxes accrued	Form 1116, Part II
H Other income (loss)		R Reduction in taxes available for credit	Form 1116, line 12
11. Section 179 deduction	See the Shareholder's Instructions	S Foreign trading gross receipts	Form 8873
12. Other deductions		T Extraterritorial income exclusion	Form 8873
A Cash contributions (60%)	} See the Shareholder's Instructions	U Section 965 information	See the Shareholder's Instructions
B Cash contributions (30%)		V Other foreign transactions	See the Shareholder's Instructions
C Noncash contributions (50%)		15. Alternative minimum tax (AMT) items	
D Noncash contributions (30%)		A Post-1986 depreciation adjustment	} See the Shareholder's Instructions and the Instructions for Form 6251
E Capital gain property to a 50% organization (30%)		B Adjusted gain or loss	
F Capital gain property (20%)		C Depletion (other than oil & gas)	
G Contributions (100%)		D Oil, gas, & geothermal—gross income	
H Investment interest expense	Form 4952, line 1	E Oil, gas, & geothermal—deductions	
I Deductions—royalty income	Schedule E, line 19	F Other AMT items	
J Section 59(e)(2) expenditures	See the Shareholder's Instructions	16. Items affecting shareholder basis	
K Section 965(c) deduction	See the Shareholder's Instructions	A Tax-exempt interest income	Form 1040 or 1040-SR, line 2a
L Deductions—portfolio (other)	Schedule A, line 16	B Other tax-exempt income	} See the Shareholder's Instructions
M Preproductive period expenses	See the Shareholder's Instructions	C Nondeductible expenses	
N Commercial revitalization deduction from rental real estate activities	See Form 8582 instructions	D Distributions	
O Reforestation expense deduction	See the Shareholder's Instructions	E Repayment of loans from shareholders	
P through R	Reserved for future use	17. Other information	
S Other deductions	See the Shareholder's Instructions	A Investment income	Form 4952, line 4a
13. Credits		B Investment expenses	Form 4952, line 5
A Low-income housing credit (section 42(j)(5)) from pre-2008 buildings	} See the Shareholder's Instructions	C Qualified rehabilitation expenditures (other than rental real estate)	See the Shareholder's Instructions
B Low-income housing credit (other) from pre-2008 buildings		D Basis of energy property	See the Shareholder's Instructions
C Low-income housing credit (section 42(j)(5)) from post-2007 buildings		E Recapture of low-income housing credit (section 42(j)(5))	Form 8611, line 8
D Low-income housing credit (other) from post-2007 buildings		F Recapture of low-income housing credit (other)	Form 8611, line 8
E Qualified rehabilitation expenditures (rental real estate)		G Recapture of investment credit	See Form 4255
F Other rental real estate credits		H Recapture of other credits	See the Shareholder's Instructions
G Other rental credits		I Look-back interest—completed long-term contracts	See Form 8697
H Undistributed capital gains credit	Schedule 3 (Form 1040 or 1040-SR), line 13, box a	J Look-back interest—income forecast method	See Form 8866
I Biofuel producer credit	} See the Shareholder's Instructions	K Dispositions of property with section 179 deductions	} See the Shareholder's Instructions
J Work opportunity credit		L Recapture of section 179 deduction	
K Disabled access credit		M through U	
L Empowerment zone employment credit		V Section 199A information	} Reserved for future use
M Credit for increasing research activities		W through Z	
		AA Excess taxable income	
		AB Excess business interest income	} See the Shareholder's Instructions
		AC Other information	

(Rev. November 2018)
Department of the Treasury
Internal Revenue Service▶ **Attach to Form 1120, 1120-C, 1120-F, 1120S, or 1065.**
▶ **Go to www.irs.gov/Form1125A for the latest information.**

Name INFORMATION CONSULTING SERVICES LLC		Employer identification number XX-XXX0245	
1	Inventory at beginning of year	1	0
2	Purchases	2	3,098
3	Cost of labor	3	1,713
4	Additional section 263A costs (attach schedule)	4	0
5	Other costs (attach schedule)	5	44,204
6	Total. Add lines 1 through 5	6	49,015
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	49,015

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 ▶ ☐

c 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 under LIFO **9d** | |

e If property is produced or acquired for resale, do the rules of section 263A apply to the entity? See instructions . . . ☐ Yes ☐ No

f Was there any change in determining quantities, cost, or valuations between opening and closing inventory? If "Yes," attach explanation ☐ Yes ☐ No

Section references are to the Internal Revenue Code unless otherwise noted.

What's New**Small business taxpayers.** For tax years beginning after December 31, 2017, the following apply.

- A small business taxpayer (defined below), may use a method of accounting for inventories that either: (1) treats inventories as nonincidental materials and supplies, or (2) conforms to the taxpayer's financial accounting treatment of inventories.
- A small business taxpayer is not required to capitalize costs under section 263A.

General Instructions**Purpose of Form**

Use Form 1125-A to calculate and deduct cost of goods sold for certain entities.

Who Must File

Filers of Form 1120, 1120-C, 1120-F, 1120S, or 1065, must complete and attach Form 1125-A if the applicable entity reports a deduction for cost of goods sold.

Inventories

Generally, inventories are required at the beginning and end of each tax year if the production, purchase, or sale of

merchandise is an income-producing factor. See Regulations section 1.471-1. If inventories are required, you generally must use an accrual method of accounting for sales and purchases of inventory items.

Exception for certain taxpayers. A small business taxpayer (defined below), can adopt or change its accounting method to account for inventories in the same manner as material and supplies that are non-incidental, or conform to its treatment of inventories in an applicable financial statement (as defined in section 451(b)(3)), or if it does not have an applicable financial statement, the method of accounting used in its books and records prepared in accordance with its accounting procedures. See section 471(c)(3).

A small business taxpayer claiming exemption from the requirement to keep inventories is changing its method of accounting for purposes of section 481. For additional guidance on this method of accounting, see Pub. 538, Accounting Periods and Methods. For guidance on changing to this method of accounting, see Form 3115 and the Instructions for Form 3115.

Small business taxpayer. A small business taxpayer is a taxpayer that (a) has average annual gross receipts of \$25 million or less (indexed for inflation) for the 3 prior tax years, and (b) is not a tax shelter (as defined in section 448(d)(3)). See Pub. 538.**Uniform capitalization rules.** The uniform capitalization rules of section 263A generally require you to capitalize, or include in inventory, certain costs incurred in connection with the following.

- The production of real property and tangible personal property held in inventory or held for sale in the ordinary course of business.
- Real property or personal property (tangible and intangible) acquired for resale.
- The production of real property and tangible personal property for use in its trade or business or in an activity engaged in for profit.

A small business taxpayer (defined above) is not required to capitalize costs under section 263A. See section 263A(i).

See the discussion on section 263A uniform capitalization rules in the instructions for your tax return before completing Form 1125-A. Also see Regulations sections 1.263A-1 through 1.263A-3. See Regulations section 1.263A-4 for rules for property produced in a farming business.

Compensation of Officers

▶ Attach to Form 1120, 1120-C, 1120-F, 1120-REIT, 1120-RIC, or 1120S.

► Information about Form 1125-E and its separate instructions is at www.irs.gov/form1125e.

OMB No. 1545-0123

Name _____

INFORMATION CONSULTING SERVICES LLC

Employer identification number

XX-XXX0245

Note: Complete Form 1125-E only if total receipts are \$500,000 or more. See instructions for definition of total receipts.

[illegible]

2019 Virginia
Form 502

Department of Taxation
P.O. Box 1500
Richmond, VA 23218-1500

Pass-Through Entity
Return of Income and Return of
Nonresident Withholding Tax



Official Use Only

FISCAL or

SHORT Year Filer: Beginning Date _____ 2019; Ending Date _____, 20 _____

Check if Schedules VK-1 were filed by Web Upload ☐

By checking the box to the right, I (we) authorize the Department to discuss this return with the undersigned tax preparer. _____ ☐

Check if: ☐ Initial return ☐ Amended return ☐ Final return ☐ Name change ☐ Address change ☐ Change in fiscal year
☐ Unified nonresident return filed ☐ Electing large partnership ☐ Subject to Bank Franchise Tax ☐ Certified Company Apportionment

FEIN XXXXX0245	Date of Formation 01012012	Entity Type (see instructions)
Entity Name INFORMATION CONSULTING SERVICES LLC	Date Operations Began in Virginia 01012012	NAICS Code 611000
Number and Street 42767 RAVENGLASS DR	State or Country Where Incorporated or Organized US	Description of Business Activity Educational Serv
City or Town, State, and ZIP Code ASHBURN VA 20148		

Number and Types of Owners (See instructions)

Count all of the owners who were issued a federal Schedule K-1 for the taxable year and enter:

a. The total number of owners (include individuals and any other entity types) a. 1
b. The total number of nonresident owners b. 0
c. Total amount withheld for nonresident owners (total of Line e from all Schedules VK-1) c. 0 .00
d. If the entity is exempt from withholding, enter the exemption code. d.

Distributive or Pro Rata Income and Deductions (See instructions)

1. Total taxable income amounts 1. 204622 .00
2. Total deductions 2. 140 .00
3. Tax-exempt interest income 3. 0 .00

Allocation and Apportionment: Check if electing the manufacturer's alternative method of apportionment → ☐

4. Income allocated to Virginia from Schedule 502A, Section C, Line 2 4. 0 .00
5. Income allocated outside of Virginia from Schedule 502A, Section C, Line 3(e) 5. 0 .00
6. Apportionable income from Schedule 502A, Section C, Line 4 6. 204622 .00
7. Virginia apportionment percentage from Schedule 502A, Section B, percent from Line 1 or Line 2(f) or 100% ... 7. 100 %

Virginia Additions – See Schedule 502ADJ for Other Additions

8. Fixed date conformity – depreciation 8. .00
9. Fixed date conformity – other 9. .00
10. Net income tax or other tax used as a deduction in determining taxable income (see instructions) 10. .00
11. Interest on municipal or state obligations other than from Virginia 11. .00
12. Total additions from enclosed Schedule 502ADJ, Section A, Line 5 12. 0 .00
13. Total additions. Add Lines 8 through 12 13. 0 .00

Virginia Subtractions – See Schedule 502ADJ for Other Subtractions

14. Fixed date conformity – depreciation 14. .00
15. Fixed date conformity – other 15. .00
16. Income from obligations of the United States 16. .00
17. Total subtractions from enclosed Schedule 502ADJ, Section B, Line 5 17. 0 .00
18. Total subtractions. Add Lines 14 through 17 18. 0 .00

Virginia Tax Credits Passed Through to Owners

19. Total nonrefundable credits from enclosed Schedule 502ADJ, Section C, Line 33 19. 0 .00
20. Total refundable credits from enclosed Schedule 502ADJ, Section C, Line 41 20. 0 .00

2019 Virginia
Form 502

Page 2

Name INFORMATION CONSULTING SERVICE

FEIN XXXXX0245



Section 1 – Withholding Payment Reconciliation

1. Total withholding tax due for nonresident owners	1. _____	0 .00
2. Total withholding tax paid (Entity's own payments only – see instructions).	2. _____	.00
3. Overpayment. If Line 2 is greater than Line 1, subtract Line 1 from Line 2.	3. _____	0 .00
4. Withholding tax due. If Line 2 is less than Line 1, subtract Line 2 from Line 1	4. _____	0 .00

Section 2 – Penalty and Interest Charges on Withholding Tax

5. Extension penalty (may apply to returns filed within extension period if 90% of Line 1 is not paid timely)	5. _____	.00
6. Late payment penalty on tax due (will apply if there is a balance due on Line 4 and Form 502 is being filed more than 6 months after the original due date). Enter 30% of the amount on Line 4	6. _____	.00
7. Interest (may apply if there is a balance due on Line 4)	7. _____	.00
8. Penalty and interest charges due. Add Line 5 or Line 6 (whichever applies) to Line 7	8. _____	0 .00

Section 3 – Penalty for Late Filing of Form 502

9. If Form 502 is being filed more than 6 months after the original due date, or more than 30 days after the federal extended due date, enter \$1,200.	9. _____	.00
--	----------	-----

Section 4 – Withholding Overpayment

10. Net overpayment. If Line 8 or Line 9 exceeds Line 3, go to Line 13 below to compute the total payment due. Compare Line 6 and Line 9. If Line 6 is greater than Line 9, subtract Line 8 from Line 3. If Line 9 is greater than Line 6, subtract Line 7 plus Line 9 from Line 3. Otherwise, enter overpayment amount from Line 3	10. _____	0 .00
11. Amount of withholding overpayment to be credited to 2020	11. _____	.00
12. Amount of withholding overpayment to be refunded	12. _____	0 .00

Section 5 – Tax, Penalty, and Interest Due

13. Balance of tax due plus extension penalty, if applicable. If there is an amount due on Line 4, enter Line 4 plus Line 5. If there is an overpayment on Line 3 and Line 8 or Line 9 is greater than Line 3, enter Line 5 minus Line 3.	13. _____	0 .00
14. Interest charges on withholding tax from Line 7	14. _____	0 .00
15. Late filing penalty. Enter the greater of Line 6 or Line 9	15. _____	0 .00
16. Total payment due. Add Line 13, Line 14, and Line 15	16. _____	0 .00

Section 6 – Amount Due or Refund

17. Motion Picture Production Tax Credit to be refunded directly to PTE (see instructions).	17. _____	.00
18. Research and Development Expenses Tax Credit to be refunded directly to PTE (see instructions).	18. _____	.00
19. Credit to be refunded directly to PTE. Add Line 17 and Line 18	19. _____	0 .00
20. Amount Due. If there is an amount due on Line 16 and the amount exceeds the amount on Line 19, subtract Line 19 from Line 16.	20. _____	0 .00
21. Amount of Refund. If there is an amount due on Line 16 and the amount is less than the amount on Line 19, subtract Line 16 from Line 19. If there is an amount on Line 12, add Line 12 and Line 19.	21. _____	0 .00

I, the undersigned owner and authorized representative of the pass-through entity for which this return is made, declare under the penalties provided by law that this return (including any accompanying schedules, statements, and enclosures) has been examined by me and is, to the best of my knowledge and belief, a true, correct, and complete return, made in good faith, for the taxable year stated, pursuant to the tax laws of the Commonwealth of Virginia. A preparer other than the authorized representative declares the same, and such declaration is based on all information of which he or she has any knowledge.

Signature of Owner or Authorized Representative	Title PRESIDENT	Date 03112020
Printed Name of Owner or Authorized Representative ANIL GOEL	Phone 7035653342	
Individual or Firm, Signature of Preparer, Phone Number, and Address Tamera Wolverton 703 585500 44084 Riverside Pkwy ste 120 Leesburg VA 20176	Date	
Printed Name of Individual or Firm Tamera Wolverton	Preparer's FEIN, PTIN, or SSN XXXXXX9486	Approved Vendor Code 1 9 3 7

Include a copy of your federal return with Form 502. Important: do not include a federal Schedule K-1 for each owner. If you filed a Schedule VK-1 for each owner online using Web Upload, do not include copies of Schedules VK-1 with the Form 502.

Do not submit Form 765 with this return – Mail it to the address on Form 765.

**2019 Form 502
Schedule VK-1**

**Virginia Pass-Through Entity
Owner's Share of Income and
Virginia Modifications and Credits**



CHECK IF—

- ☐ Final If **SHORT Period Return**: Beginning Date _____, 2019; Ending Date _____, 20 _____
☐ Amended Return ☐ Owner is Participating in a Unified Nonresident Individual Income Tax Return

Owner Information		Pass-Through Entity (PTE) Information	
Name ANIL GOEL	FEIN or SSN XXXXX8662	Name INFORMATION CONSULTING SERVICES LLC	FEIN XXXXX0245
Address 42767 RAVENGLASS DRIVE		Address 42767 RAVENGLASS DR	
Address Continued		Address Continued	
City or Town, State, and ZIP Code Ashburn VA 20148		City or Town, State, and ZIP Code ASHBURN VA 20148	
Taxable Year End Date 12312019			

Additional Owner Information (see instructions)

- | | |
|---|--------------------------|
| a. Date owner acquired interest in the PTE (MM/DD/YYYY)..... | a. <u>01 / 01 / 2012</u> |
| b. Owner's entity type (Enter code)..... | b. <u>RES</u> |
| c. Owner's participation type (Enter code) | c. <u>SHR</u> |
| d. Owner's participation percentage (Example: 47.35%)..... | d. <u>100.00 %</u> |
| e. Amount withheld by PTE for the owner | e. _____ |
| f. If owner or entity is exempt from withholding, enter an exemption code | f. _____ |

Distributive or Pro Rata Income and Deductions (see instructions)

- | | |
|---------------------------------------|----------------------|
| 1. Total taxable income amounts | 1. <u>204622 .00</u> |
| 2. Total deductions | 2. <u>140 .00</u> |
| 3. Tax-exempt interest income | 3. <u>0 .00</u> |

Allocation and Apportionment

- | | |
|--|----------------------|
| 4. Income allocated to Virginia (owner's share from PTE's Schedule 502A, Section C, Line 2)..... | 4. <u>0 .00</u> |
| 5. Income allocated outside of Virginia (owner's share from PTE's Schedule 502A, Section C, Line 3(e))..... | 5. <u>0 .00</u> |
| 6. Apportionable income (owner's share from PTE's Schedule 502A, Section C, Line 4) | 6. <u>208069 .00</u> |
| 7. Virginia apportionment percentage (from PTE's Schedule 502A, Section B – percent from Line 1 or Line 2(f), or 100%) ... | 7. <u>100 %</u> |

Virginia Additions – Owner's Share

- | | |
|--|------------------|
| 8. Fixed date conformity – depreciation | 8. <u>0 .00</u> |
| 9. Fixed date conformity – other | 9. <u>0 .00</u> |
| 10. Net income tax or other tax used as a deduction in determining taxable income (see instructions) | 10. <u>0 .00</u> |
| 11. Interest on municipal or state obligations other than from Virginia..... | 11. <u>0 .00</u> |
| 12. Other additions (see Form 502 instructions for addition codes.) | |

Code	Amount	Code	Amount
12a. <input style="width: 50px;" type="text"/>	.00	12b. <input style="width: 50px;" type="text"/>	.00
12c. <input style="width: 50px;" type="text"/>	.00	12d. <input style="width: 50px;" type="text"/>	.00

- | | |
|--|------------------|
| 13. Total Additions (add Lines 8-11 and 12a-12d)..... | 13. <u>0 .00</u> |
|--|------------------|

Virginia Subtractions – Owner's Share

- | | |
|---|------------------|
| 14. Fixed date conformity – depreciation | 14. <u>0 .00</u> |
| 15. Fixed date conformity – other | 15. <u>0 .00</u> |
| 16. Income from obligations of the United States | 16. <u>0 .00</u> |
| 17. Other subtractions (see Form 502 instructions for subtraction codes.) | |

Certification Number (if applicable)	Code	Amount
17a. <input style="width: 100px;" type="text"/>	<input style="width: 50px;" type="text"/>	.00
17b. <input style="width: 100px;" type="text"/>	<input style="width: 50px;" type="text"/>	.00
17c. <input style="width: 100px;" type="text"/>	<input style="width: 50px;" type="text"/>	.00
17d. <input style="width: 100px;" type="text"/>	<input style="width: 50px;" type="text"/>	.00

- | | |
|---|------------------|
| 18. Total Subtractions. (add Lines 14-16 and 17a-17d)..... | 18. <u>0 .00</u> |
|---|------------------|

Use **Schedule SVK-1** if you are claiming more additions or subtractions than the Schedule VK-1 allows.

Refer to the Form 502 Instructions for addition and subtraction codes. Check this box and enclose Schedule SVK-1. ☐

2019 Virginia
Schedule VK-1

Page 2

Owner FEIN or SSN XXXXX0245

PTE FEIN XXXXX8662



Virginia Tax Credits. See the Schedule CR Instructions (individuals) or Schedule 500CR Instructions (corporations)

Nonrefundable Credits

1. State Income Tax Paid (see Form 502 Instructions).....	1.	.00
2. Neighborhood Assistance Act Tax Credit.....	2.	.00
3. Enterprise Zone Act – General Tax Credit.....	3.	.00
4. Enterprise Zone Act – Zone Investment Tax Credit.....	4.	.00
5. Conservation Tillage Equipment Tax Credit.....	5.	.00
6. Biodiesel and Green Diesel Fuels Tax Credit.....	6.	.00
7. Precision Fertilizer and Pesticide Application Equipment Tax Credit.....	7.	.00
8. Recyclable Materials Processing Equipment Tax Credit.....	8.	.00
9a. Clean-Fuel Vehicle Tax Credit (only carryover credit allowed).....	9a.	.00
9b. Vehicle Emissions Testing Equipment Tax Credit.....	9b.	.00
10. Major Business Facility Job Tax Credit.....	10.	.00
11. Clean-Fuel Vehicle Job Creation Tax Credit (only carryover credit allowed).....	11.	.00
12. Worker Retraining Tax Credit (only carryover credit allowed).....	12.	.00
13. Waste Motor Oil Burning Equipment Tax Credit.....	13.	.00
14. Riparian Forest Buffer Protection for Waterways Tax Credit.....	14.	.00
15. Virginia Coal Employment and Production Incentive Tax Credit.....	15.	.00
16. Enter the amount of credit assigned to another party.....	16.	.00
17. Virginia Coal Employment and Production Incentive Tax Credit available for use by owner (Subtract Line 16 from Line 15).....	17.	0.00
18. Historic Rehabilitation Tax Credit.....	18.	.00
19. Land Preservation Tax Credit.....	19.	.00
20. Qualified Equity and Subordinated Debt Investments Tax Credit.....	20.	.00
21. Communities of Opportunity Tax Credit.....	21.	.00
22. Green Jobs Creation Tax Credit.....	22.	.00
23. Farm Wineries and Vineyards Tax Credit.....	23.	.00
24. International Trade Facility Tax Credit.....	24.	.00
25. Port Volume Increase Tax Credit.....	25.	.00
26. Barge and Rail Usage Tax Credit.....	26.	.00
27. Livable Home Tax Credit.....	27.	.00
28. Research and Development Expenses Tax Credit (Use this line if the taxpayer does not qualify for a refundable credit.).....	28.	.00
29. Education Improvement Scholarships Tax Credit.....	29.	.00
30. Major Research and Development Expenses Tax Credit.....	30.	.00
31. Food Crop Donation Tax Credit.....	31.	.00
32. Worker Training Tax Credit.....	32.	.00
33. Total Nonrefundable Credits. (Total Lines 1-14 and 17-32).....	33.	0.00

Refundable Credits

34. Agricultural Best Management Practices Tax Credit.....	34.	.00
35. 100% Coalfield Employment Enhancement Tax Credit from 2019 Form 306B, Line 1(b).....	35.	.00
36a. Full Credit: Enter amount from 2019 Form 306B, Line 13.....	36a.	.00
36b. 85% Credit: Enter amount from 2019 Form 306B, Line 15.....	36b.	.00
37. Total Coalfield Employment Enhancement Tax Credit allowable this year (Add Lines 36a and 36b).....	37.	0.00
38. 2019 Coalfield Employment Enhancement Tax Credit earned to be used when completing your 2022 return. Enter amount from your 2019 Form 306, Line 11.....	38.	.00
39. Motion Picture Production Tax Credit.....	39.	.00
40. Research and Development Expenses Tax Credit.....	40.	.00
41. Total Refundable Credits. (Add Lines 34, 37, 39, and 40).....	41.	0.00

NOTICE: You have received this Schedule VK-1 because the above-named PTE earned income from Virginia sources and has passed through to you a portion of that Virginia source income based on your ownership of the PTE. A copy of this schedule has been filed with the Department. Everyone who receives Virginia source income is subject to taxation by Virginia regardless of state of residency or domicile. You may be required to file a Virginia tax return even though you may be a nonresident individual or a business domiciled outside of Virginia. To determine if you are required to file a Virginia income tax return, consult a tax professional. Information and forms may be obtained at www.tax.virginia.gov, or by calling the Department at (804) 367-8031 (individuals) or (804) 367-8037 (businesses).

Line 5(I) Shareholders info

Shareholder First Name	Shareholders Last Name	Shareholders percentage of stock ownership	Shareholder EIN / SSN	Shareholder as a (Individual=Yes) / (Other Entity=No)
ANIL	GOEL	100	XXX-XX-8662	YES

Other Income (loss) Page1 Line5

Type of other income	Amount
ROYALTY INCOME	161

Form 1120S, Deductions , Line 19: Other deductions - Meals and Entertainment

Meals and entertainment	Deductible Amount	Total Deductible Amount
allowed at 100%	5,961	5,961

Form 1120S, Deductions , Line 19: Other deductions - Other than Meals and Entertainment

Other Deductions	Amount
AUTO EXPENSE	15,939
COMPUTER EXPENSES	3,896
DUES & MEMERSHIPS	41
FACILITY & UTITLIES EXP	12,091
FURNITURE & FIXTURES	13
GIFTS	35
INSURANCE	4,009
SOFTWARE & WEB HOSTING	5,200
PARKING TOLLS	709
PHONE & INTERNET	10,005
POSTAGE & SHIPPING	736
LEGAL & PROFESSIONAL	8,241
RECRUITING HR EXP	10
TRAINING & EDUCATION	1,905
TRAVEL & TRANSPORTATION	4,761
WORKERS COMP	289
OFFICE KITCHEN EXP	4,419
OTHER TAXES PROPERTY TAX AND FEES	3,447

Schedule L Line 6 Other Current Assets Information Statement

(a) Description	(b) Beginning of the year	(c) End of the year
PAYPAL	289	11

Schedule L Line 9 Other Investments Information Statement

(a) Description	(b) Beginning of the year	(c) End of the year
PIPELINE PLAZA		60,000
PREMIER PLAZA		90,000
PROP PLANT		6,607

Schedule L Line 18 Other Current Liabilities Information Statement

(a) Descriptionprint	(b) Beginning of the yearprintprint	(c) End of the yearprint
PAYROLL	3,112	1,761
PAYROLL TAX	142	1,562
MY STUDIO		573

Schedule L Line 25 Shareholders Equity Information Statement

(a) Descriptionprint	(b) Beginning of the yearprint	(c) End of the yearprint
Distribution	-214,902	-200,972

Statement - Line 12 A- 12 a Charitable contributions

Description	Business Code	Business Name	Amount
CHARITIES	A	SCHOOLS	140

Other costs Statement

Description	Amount
MERCHANT FEES	13,140
OFFICE SUPPLIES	27,996
ADMIN ADP	1,827
OTHER	1,241