Claros & Wolverton Tax and Accounting Associates 22082 Avonworth Sq Broadlands, VA 20148

> INFORMATION CONSULTING SERVICES LLC 42767 RAVENGLASS DR ASHBURN, VA 20148

Indilliannillabilialialialia

Claros & Wolverton Tax and Accounting Associates 22082 Avonworth Sq Broadlands, VA 20148

INFORMATION CONSULTING SERVICES LLC 42767 RAVENGLASS DR ASHBURN, VA 20148

### Form 8879-S

#### IRS e-file Signature Authorization for Form 1120-S

► ERO must obtain and retain completed Form 8879-S.

► Go to www.irs.gov/Form8879S for the latest information.

, 2021, and ending

OMB No. 1545-0123

2021

Department of the Treasury Internal Revenue Service

For calendar year 2021, or tax year beginning Name of corporation **Employer identification number** INFORMATION CONSULTING SERVICES LLC 84-1700245 Tax Return Information (whole dollars only) 349.956 315,964 3 22,324 Net rental real estate income (loss) (Form 1120-S, Schedule K, line 2) . . . . . . . . . . . . . . 4 Income (loss) reconciliation (Form 1120-S, Schedule K, line 18) . . . . . . . . . . . 5 20,271 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 2021 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 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 to enter my PIN as my signature ERO firm name Don't enter all zeros on the corporation's 2021 electronically filed income tax return. X As an officer of the corporation, I will enter my PIN as my signature on the corporation's 2021 electronically filed income tax return. Officer's signature ▶ Title ▶ PRESIDENT Part III **Certification and Authentication** ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 54206010158 Don't enter all zeros I certify that the above numeric entry is my PIN, which is my signature on the 2021 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 ▶ Tamera D Wolverton 5/3/2022 **ERO Must Retain This Form — See Instructions** 

Don't Submit This Form to the IRS Unless Requested To Do So

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 2021

## DO NOT SEND THIS VA-8879P TO THE VIRGINIA DEPARTMENT OF TAXATION OR THE IRS. IT MUST BE MAINTAINED IN YOUR FILES!

Entity Name	Federal ID Number						
NFORMATION CONSULTING SERVICES LLC	84-1700245						
Part I Number and Types of Owners							
a. The total number of owners	<b>a</b> . 1.						
<b>b.</b> The total number of nonresident owners	<b>b</b> . 0.						
c. Total amount withheld for nonresident owners (Total of Line e from all Schedules VK-1)	<b>c</b> . 0.						
d. If the entity is exempt from withholding, enter the exemption code	d.						
Part II Declaration and Signature Authorization of Authorized Repres	sentative						
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.							
Officer's e-File PIN: check one box only  I authorize the ERO named below to enter my e-File PIN 10245  Virginia pass-through entity tax return.  Do not enter all zeros							
Tamera D Wolverton							
I will enter my e-File PIN as my signature on the pass-through entity's 2021 electronic Virgini are entering your own e-File PIN and the return is filed using the Practitioner PIN method. The	a pass-through entity tax return. Check this box only if you see ERO must complete Part III below.						
Your Signature	Date						
Part III Certification and Authentication							
ERO's EFIN/PIN: Enter your six digit EFIN followed by your five digit self-selected PIN.	54206010158						
	Do not enter all zeros						
I certify that the above numeric entry is my ERO EFIN/PIN, which is my signature for the 2021 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.							
ERO's Signature	Date						

1833 Form VA-8879P (REV 10/21)

### Form **1120-S**

Department of the Treasury Internal Revenue Service

#### U.S. Income Tax Return for an S Corporation

▶ 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.

OMB No. 1545-0123

		aiyeaizuziuita	k year beg	mining		, enuling			
A S	election	effective date		Name				D Emp	ployer identification number
				INFORMATION CO	<b>NSULTING SERVIC</b>	ES LLC			
		/1/2012	TYPE		m or suite no. If a P.O. box				84-1700245
		activity code				, 55554 45455.		E Date	e incorporated
nu	mber (s	ee instructions)	OR	42767 RAVENGLAS	55 DR				
			0	City or town		State	ZIP code		1/1/2012
0440	00		PRINT	ASHBURN		VA	20148	<b>F</b> Tota	al assets (see instructions)
6110	00			Foreign country name	Foreign province/s	state/county	Foreign postal code		
C Ch	eck if S	ch. M-3 attached				-		\$	214,051
	ook ii o	on: W o attaonoa						•	214,031
G Is	the c	corporation electin	g to be an	S corporation beginnin	g with this tax year? So	ee instructions.	Yes	No	
шС	heck i	f: <b>(1)</b> Fina	l return	(2) Name change	(3) Address char	(4)	Amended return (5)		lection termination
							` ''	_	
ΙE	nter th	ne number of share	eholders w	ho were shareholders	during any part of the t	ax year			ĭ <b>▶</b> 1
			_						
<u> </u>	neck i	f corporation:	<b>(1)</b> Ag	ggregated activities for section	on 465 at-risk purposes	(2) Grou	uped activities for section	469 pass	ave activity purposes
Caut	ion: Ir	nclude <b>only</b> trade	or busines	s income and expense	s on lines 1a through 2	1. See the instr	uctions for more infor	mation.	<u>.</u>
							358,424		
	_						8,468		
	b							_	
-	С			from line 1a .  .  .  .				1c	349,956
ne	2	Cost of goods s	old (attach	Form 1125-A)				2	33,992
ō	3			2 from line 1c				3	315,964
Income								4	0.0,00.
_	4	net gain (loss)	IIOIII FOIIII	4797, line 17 (attach F	Om 4797)			$\vdash$	
	5	Other income (I	oss) (see i	nstructions—attach sta	tement)			5	5,008
	6			lines 3 through 5				6	320,972
	7	Compensation	of officers	(see instructions — atta	ach Form 1125-F)			7	29,500
Su								8	54.775
뜵	8			employment credits) .				$\vdash$	54,775
ig.	9							9	
. <u>≒</u>	10	Bad debts						10	
ō	11							11	73,450
Deductions (see instructions for limitations)	12	Tayos and licon						12	14,312
<u>S</u>		Taxes and neer							
귤	13	13 Interest (see instructions)						13	1,930
呈	14	Depreciation no	t claimed	on Form 1125-A or else	ewhere on return (attac	ch Form 4562)		14	
SL	15	Depletion (Do r	ot deduc	t oil and gas depletio	n.)			15	
φ.	16							16	3,330
SS									
Ś	17			c., plans				17	7,137
6	18	Employee bene	fit program	ns				18	4,444
퓽	19	Other deduction	ns (attach s	statement)				19	109,770
큥	20	Total deduction	ne Add lir	nes 7 through 19	<b>*</b>		•	20	298,648
ĕ									,
	21			me (loss). Subtract line			<del></del>	21	22,324
	22a	Excess net pas	sive incom	e or LIFO recapture tax					
	b	Tax from Sched	lule D (For	m 1120-S)		22b			
इ	С	Add lines 22a a	nd 22h (se	ee instructions for additi				22c	0
ents	23a			ents and 2020 overpay					
								-	
Tax and Paym	b	•							
Δ.	С	Credit for federa	al tax paid	on fuels (attach Form 4	1136)	23c			
힏	d	Add lines 23a th	rough 23c					23d	0
ਲ	24			e instructions). Check if	Form 2220 is attached	4	▶□	24	
×									
ï	25			is smaller than the total				25	0
	26	Overpayment.	If line 23d	is larger than the total	of lines 22c and 24, en	iter amount ovei	rpaid	26	0
	27	Enter amount fr	om line 26	: Credited to 2022 est	timated tax		Refunded >	27	0
	J			e that I have examined this retu		chedules and stateme	ents, and to the best of my k	now <u>ledge</u>	and belief, it is true, correct,
				arer (other than taxpayer) is bas					the IRS discuss this return
Sia	n l							,	the preparer shown below?
Sign		<b>L</b>			5/2/2022	DDEGIDE	NT		
Her	е	0: 1 5 5			5/3/2022	PRESIDE	-IN I	<b>–</b> I	Yes No
		Signature of off		1_	Date	Title	1= .		
		Print/Type prep	arer's name	Preparer's	signature		Date	Check	if PTIN
Paid	k	Tamora D M	lalverton	Tamera I	D Wolverton		5/3/2022		ployed P00392196
	pare	Tamera D W	OIVEI LOIT			Accociates		_	
					Tax and Accounting	Associates	Firm's EIN		83-1940486
Use	On			22082 Avonworth S	q		Phone no		1-252-3818
		City	Broad	dlands		State V	'A ZIP code	201	148
									= 1120 C (0004)

Sc	hedule B Other Inf	ormation (see instruction	ns)				
1	Check accounting method:	a X Cash b	Accrual			Yes	No
		c Other (specify)	<b>&gt;</b>				
2	See the instructions and er						
	a Business activity ▶ T	UTORING	<b>b</b> Product or serv	rice SERVICE			
3	At any time during the tax y	year, was any shareholder of the	e corporation a disrega	arded 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		Χ
4	At the end of the tax year,	did the corporation.					
		or own, directly or indirectly, 50	% or more of the total	stock issued and outst	anding of any		
		ation? For rules of constructive of					
	below		<u> </u>	· · · · · · · · · · · · · · · · · · ·			Х
	(i) Name of Corporation	(ii) Employer	(iii) Country of	(iv) Percentage of	(v) If Percentage in (iv) is 100	)%, Ente	er the
		Identification Number (if any)	Incorporation	Stock Owned	Date (if applicable) a Qualifie	d Subch	napter
		rvamber (ii arry)			S Subsidiary Election Wa	as Made	е
		20% or more, or own, directly or	•				
		mestic partnership (including an			eficial interest of a		\ \ \
		tive ownership, see instructions			<u> </u>		X
	(i) Name of Entity	(ii) Employer Identification	(iii) Type of Entity	(iv) Country of Organization	(v) Maximum Percentage in Profit, Loss, or Ca		d
		Number (if any)		Organization	in Front, 2000, or ou	pitai	
58	At the end of the tax year,	did the corporation have any ou	tstanding shares of res	stricted stock?			Х
	If "Yes," complete lines (i) a	and (ii) below.					
	(i) Total shares of rest	ricted stock					
	` '	-restricted stock	<b>&gt;</b>				
		did the corporation have any ou	tstanding stock options	s, warrants, or similar ir	nstruments?		Х
	If "Yes," complete lines (i) a						
		k outstanding at the end of the t					
c	• •	k outstanding if all instruments	•••		provide		
6		or is it required to file, <b>Form 891</b> ble transaction?					X
7		ration issued publicly offered de					<del>L^</del>
7		may have to file <b>Form 8281</b> , In					
	Instruments.	nato to illo i offiii ozo i, ill	.s.maden Notalii iol I	aziloi, Oliolod Oligilla	5545 Di500uiit		
_							
8	, , ,	C corporation before it elected	•	•	•		
		nce to the basis of the asset (or	-				
		in gain in excess of the net rec nized built-in gain from prior yea	-				
9		n election under section 163(j) for		•===	farmina business		
•		r? See instructions		•	<u> </u>		Х
10	-	fy one or more of the following?					X
		ss-through entity with current, o					
		te average annual gross receipt					
		ear are more than \$26 million a	•		•		
	c The corporation is a tax sh	elter and the corporation has bu	siness interest expens	se.			
	If "Yes," complete and atta						
11	Does the corporation satisf	fy <b>both</b> of the following condition	ns?				Х
	a The corporation's total rece	eipts (see instructions) for the ta	x year were less than S	\$250,000.			
		ets at the end of the tax year we		•			
	If "Yes," the corporation is	not required to complete Sched	ules L and M-1.				

f Foreign taxes paid or accrued .

	Sched	ule B Other Information (see instructions) (continued)			Yes	No
2	During t	he tax year, did the corporation have any non-shareholder debt that was canceled, was forgiven, or ha	d the			
		nodified so as to reduce the principal amount of the debt?				Χ
	If "Yes,"	enter the amount of principal reduction				
3		he tax year, was a qualified subchapter S subsidiary election terminated or revoked? If "Yes," see instr				Χ
4a	Did the	corporation make any payments in 2021 that would require it to file Form(s) 1099?				Х
b	If "Yes,"	did the corporation file or will it file required Form(s) 1099?				
5		orporation attaching Form 8996 to certify as a Qualified Opportunity Fund?				Х
	If "Yes,"	enter the amount from Form 8996, line 15				
Scl	nedule	Shareholders' Pro Rata Share Items	1	Γotal amοι	ınt	
	1	Ordinary business income (loss) (page 1, line 21)	1		22	2,324
	2	Net rental real estate income (loss) (attach Form 8825)	2			
	3a	Other gross rental income (loss)				
	b	Expenses from other rental activities (attach statement)				
<u> </u>	C	Other net rental income (loss). Subtract line 3b from line 3a	3с			C
ŝ	4	Interest income	4			
Ę	. 5	Dividends: <b>a</b> Ordinary dividends	5a			
Income (Loss)		<b>b</b> Qualified dividends				
Ö	6	Royalties	6			
ڪ		Net short-term capital gain (loss) (attach Schedule D (Form 1120-S))	7			
	8a	Net long-term capital gain (loss) (attach Schedule D (Form 1120-S))	8a			
	b	Collectibles (28%) gain (loss)				
	c	Unrecaptured section 1250 gain (attach statement)				
	9	Net section 1231 gain (loss) (attach Form 4797)	9			
	10	Other income (loss) (see instructions) Type	10			0.045
Deductions	11	Section 179 deduction (attach Form 4562)	11			2,015 38
	12a		12a			30
	b	Investment interest expense	12b 12c			
ĕ	٦		12d			
	b Codroction d		12u			
	13a b	Low-income housing credit (section 42(j)(5))	13a 13b			
	-	Qualified rehabilitation expenditures (rental real estate) (attach Form 3468, if applicable)	13c			
Credits	d	Other rental real estate credits (see instructions) Type	13d			
ē	e	Other rental credits (see instructions) Type	13e			
ပ	f		13f			
	ď	Other credits (see instructions) Type	13g			
	ဖွ	, , , , , , , , , , , , , , , , , , , ,				
ĕ.	suo 14	Attach Schedule K-2 (Form 1120-S), Shareholders' Pro Rata Share Items—International, and				
nati	380	check this box to indicate you are reporting items of international tax relevance				
International	I ransacti					
드	=	·				
_ ×	15a	Post-1986 depreciation adjustment	15a			
⊒ ĕ	SE b	Adjusted gain or loss	15b			
in at	를 c	Depletion (other than oil and gas)	15c			
喜星	Ê∣d	Oil, gas, and geothermal properties—gross income	15d			
Alternative Minimum Tax	₹ e	Oil, gas, and geothermal properties—deductions	15e			
	T		15f			
<u>.</u>	16a	Tax-exempt interest income	16a			
녆	b	Other tax-exempt income	16b			
Affe	sisi c	Nondeductible expenses	16c			
tems Affecting Shareholder	m d	Distributions (attach statement if required) (see instructions)	16d			
ളഗ	e	Repayment of loans from shareholders	16e			

16f

_			IN ORIMATION CONSOCTING SE				1	04-1700243 Tage 4
Sch		ıle K	Shareholders' Pro Rata Share	Items (continued)				Total amount
	ior	17a	Investment income				17a	
Other	Information	b	Investment expenses				17b	
ŏ	forı	С	Dividend distributions paid from accumula	ted earnings and pro	fits		17c	
	_	d	Other items and amounts (attach stateme	nt)				
Recon-	on							
ě	ciliation	18	Income (loss) reconciliation. Combine		-	-		
			column. From the result, subtract the sum	of the amounts on lir	nes 11 through 12d and	16f	18	20,271
Scl	ned	ule L	Balance Sheets per Books	Beginning	g of tax year		End	of tax year
			Assets	(a)	(b)		(c)	(d)
1	Ca	sh			5,898			5,417
2a	Tra	ade note	es and accounts receivable					
b	Les	ss allow	vance for bad debts		0			0
3	Inv	entorie	s					
4	U.S	S. gove	rnment obligations					
5	Ta	x-exem	pt securities (see instructions)					
6	Oth	ner curr	rent assets (attach statement)		7			
7	Loa	ans to s	shareholders					
8	Мо	rtgage	and real estate loans					
9	Oth	ner inve	estments (attach statement)		159,697			208,634
10a	Bu	ildings	and other depreciable assets	1,436			3,45	51
b	Les	ss accu	ımulated depreciation	1,436	0		3,45	51 0
11a	De	pletable	e assets					
b	Les	ss accu	ımulated depletion		0			0
12	Lar	nd (net	of any amortization)					
13a	Inta	angible	assets (amortizable only)					
b	Les	ss accu	ımulated amortization		0			0
14	Oth	ner ass	ets (attach statement)					
15	Tot	tal asse	ets		165,602			214,051
		Liabili	ties and Shareholders' Equity					
16			payable		,			
17			notes, bonds payable in less than 1 year					
18			rent liabilities (attach statement) .   .   .   .		29,257			26,272
19	Loa	ans fror	n shareholders		78,500			83,500
20			notes, bonds payable in 1 year or more					
21	Oth	ner liabi	ilities (attach statement)					107,424
22	Ca	pital sto	ock		911			911
23	Ad	ditional	paid-in capital		349,908			
24			earnings		127,820			20,271
25	-		s to shareholders' equity (attach statement)		( 420,794)			( 24,327)
26			of treasury stock					
27	Tot	tal liabil	lities and shareholders' equity		165,602			214,051

Form **1120-S** (2021)

Form 1	120-S (2021) INFORMATION CONSULTING S	SERVICES LLC			84	-1700245	Page 5
Sch	nedule M-1 Reconciliation of Income (Los	s) per Books With I	ncon	ne (Loss) per Return			
	<b>Note:</b> The corporation may be requi	red to file Schedule M	-3. Se	e instructions.			
1	Net income (loss) per books	20,271	5	Income recorded on books this year			
2	Income included on Schedule K, lines 1, 2,			not included on Schedule K, lines 1			
	3c, 4, 5a, 6, 7, 8a, 9, and 10, not recorded			through 10 (itemize):			
	on books this year (itemize)		а	Tax-exempt interest \$			
							(
3	Expenses recorded on books this year		6	Deductions included on Schedule K,			
	not included on Schedule K, lines 1			lines 1 through 12 and 16f, not charge	ged		
	through 12 and 16f (itemize):			against book income this year (itemize	ze):		
а	Depreciation \$		а	Depreciation \$			
							(
b	Travel and entertainment \$		7	Add lines 5 and 6			(
		0	8	Income (loss) (Schedule K, line 18).			
4	Add lines 1 through 3	20,271		Subtract line 7 from line 4			20,271
Sch				eholders' Undistributed Taxable			
		ted Earnings and P	rofits	, and Other Adjustments Accour	nt		
	(see instructions)						
		(a) Accumulated		(b) Shareholders' (c) Accum	nulated	(d) Other ad	ljustments
		adjustments account		ndistributed taxable earnings are	nd profits	accol	unt
1	Balance at beginning of tax year						
2	Ordinary income from page 1, line 21	22,324					
3	Other additions						
4	Loss from page 1, line 21						
5	Other reductions	2,053					
6	Combine lines 1 through 5	20,271		0	0		(

20,271

0

7

from line 6.

Form **1120-S** (2021)

0

INFORMATION CONSULTING SERVICES LLC 42767 RAVENGLASS DR ASHBURN, VA 20148

May 3, 2022

ANIL GOEL 42767 RAVENGLASS DR ASHBURN, VA 20148

RE: INFORMATION CONSULTING SERVICES LLC 84-1700245

Enclosed is your current year Schedule K-1 (Form 1120S) for the above-referenced account. The amounts shown are your distributive share of the S corporation's income, deductions and credits incurred during the year and are to be reported on your income tax return. The amounts may differ from the distributions you actually received during the year. The difference may be due to a number of factors including the allocation of fees or other deductions, exclusion of tax-exempt income, or a variance between your taxable year and that of the S corporation.

If applicable, state tax information has been attached to the K-1. Since income tax requirements vary from state to state, the presentation of the state tax information will be different for each state. The information provided is based on your state of residence from our records. If information for your state of residence is not listed, please contact us at the number below.

If you have any questions concerning this information, please call

Sincerely,

INFORMATION CONSULTING SERVICES LLC

		Final K-1		Amend	ded K-1	OMB No. 1545-0123
Schedule K-1 (Form 1120-S)	021	art III				Current Year Income, d Other Items
Department of the Treasury For calendar year 202 Internal Revenue Service	1, or tax year 1	Ordinary b	usiness income	(loss) 22,324	13	Credits
beginning ending ending	2	Net rental rea	al estate income (lo			
Shareholder's Share of Income, Deduction Credits, etc. ▶ See Separate Instruct		Other net r	rental income (lo	oss)	<u> </u>	
	ions.	Interest inc	come		4	
Part I Information About the Corporation	50	Ordinary d	li, rial a mala			
A Corporation's employer identification number 84-1700245	5a	Ordinary d	lividends			
B Corporation's name, address, city, state, and ZIP code	5b	Qualified d	lividends		14	Schedule K-3 is attached if checked
INFORMATION CONSULTING SERVICES LLC 42767 RAVENGLASS DR	6	Royalties			15	Alternative minimum tax (AMT) items
ASHBURN, VA 20148	7	Net short-t	term capital gain	(loss)		
C IRS Center where corporation filed return e-file	8a		erm capital gain			
D Corporation's total number of shares  Beginning of tax year	8b		s (28%) gain (lo	•		
End of tax year	8c	Unrecaptu	red section 1250	) gain		
Part II Information About the Shareholder	9	Net section	n 1231 gain (los	s)	16	Items affecting shareholder basis
E Shareholder's identifying number Sharehold XXX-XX-8662	lder: 1 10	Other inco	me (loss)			
F Shareholder's name, address, city, state, and ZIP code						
ANIL GOEL						
42767 RAVENGLASS DR ASHBURN, VA 20148						
G Current year allocation percentage	000000 %	Ozation 47	10 de desetie e		17 V*	Other information See Attached Stmt
H Shareholder's number of shares	'''	Section 17	'9 deduction	2,015	AC	527,173
Beginning of tax year	12	Other dedu	uctions	20		
End of tax year	A_			38		
Loans from shareholder	-16,500					
Beginning of tax year	-16,500					
<u>≥</u>						
For IRS Use Only						
RS C						
For	18	More	than one activity	for at-risk	purpos	ses*
	19	More	than one activity	for passiv	e activi	ity purposes*
		* 0^	a attached of	atemont	for add	ditional information

ANIL GOEL XXX-XX-8662

K-1 Statement (Sch K-1, Form 1120S)		
Line 12 - Deductions		
A Code A - Cash contributions (60%)	A _	38
Line 17 - Other Information		
AC Code AC - Gross receipts for section 448(c)	AC_	527,173
Section 199A Information (Code V)		
Income Items	Non-SSTB	SSTB
Ordinary Income	<u>22,324</u>	0
Deduction Items		
Cash Contributions (60%)	38	0
Section 179 expense deduction	2,015	0
Additional Information		
Section 199A W-2 wages	84,275	0
Section 199A unadjusted basis	3,451	0

Department of the Treasury Internal Revenue Service

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

File a separate application for each return.

► Go to www.irs.gov/Form7004 for instructions and the latest information.

OMB No. 1545-0233

		Name				Identi	fying number	
<b>.</b> .		INFORMATION CONSULTING SERVICES L	LC				84-17002	45
Prin	τ	Number, street, and room or suite no. (If P.O. box, see in	structions.)					
or		42767 RAVENGLASS DR						
Type	е	City, town, state, and ZIP code (If a foreign address, ente	er city, province	or state, and country (follow the co	ountry's practice fo	or enter	ing postal code).	)
		ASHBURN, VA 20148	371	, , , , , , , , , , , , , , , , , , , ,			, , , , , , , , , , , , , , , , , , ,	,
Noto			Co o im otuv oti					
		equest for extension by the due date of the return.				Datu	C i	. 4 4
1	Enter	the form code for the return listed below that	this applicati					25
	cation	1	Form	Application				Form
Is Fo			Code	Is For:				Code
	706-G	\ /	01	Form 1120-ND (section	4951 taxes)			20
	706-G		02	Form 1120-PC				21
		(bankruptcy estate only)	03	Form 1120-POL				22
		(estate other than a bankruptcy estate)	04	Form 1120-REIT				23
	1041 (		05	Form 1120-RIC				24
	1041-		06	Form 1120\$				25
	1041-	QFT	07	Form 1120-SF				26
Form			08	Form 3520-A				27
Form			09	Form 8612				28
Form			11	Form 8613				29
Form			12	Form 8725				30
	1120-		34	Form 8804				31
	1120-		15	Form 8831				32
	1120-		16	Form 8876				33
	1120-		17	Form 8924				35
	1120-		18	Form 8928				36
	1120-		19					
Part		All Filers Must Complete This Part						
2	If the	organization is a foreign corporation that does	not have ar	office or place of busines	ss in the Unite	d Sta	tes,	_
		chere						· [
3	If the	organization is a corporation and is the comm	on parent of	a group that intends to file	e a consolidat	ed ret	urn,	
	check	k here					🕨	·
	If che	cked, attach a statement listing the name, add	dress, and ei	nployer identification num	ber (EIN) for e	each r	nember	
	cover	red by this application.						
4	If the	organization is a corporation or partnership th	at qualifies ι	inder Regulations section	1.6081-5, che	ck he	ere 🕨	•
5a		application is for calendar year 20 21 , or ta						
		t tax year. If this tax year is less than 12 mont					inal return	
~								
		Change in accounting period Consolid	dated return	to be filed Othe	er (See Instruc	tions-	–attach expla	anation.)
_						1 - 1	1	اه
6	renta	ative total tax				6		0
_	_							
7	Total	payments and credits. See instructions				7		0
8	Balar	nce due. Subtract line 7 from line 6. See instru	ıctions			8		0

#### Form **1125-A**

(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
INFOR	MATION CONSULTING SERVICES LLC		84-1700245
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	33,992
6	Total. Add lines 1 through 5	6	33,992
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	33,992
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>&gt;</b>	<u></u>
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	•	<u>—</u>
	computed under LIFO	9d	
е	If property is produced or acquired for resale, do the rules of section 263A apply to the entity? See instruc	tions	Yes No
f	Was there any change in determining quantities, cost, or valuations between opening and closing inventor	y? If	
	"Yes," attach explanation	•	

**Depreciation and Amortization** 

(Including Information on Listed Property)

OMB No. 1545-0172

Internal Revenue Service

► Attach to your tax return. ► Go to www.irs.gov/Form4562 for instructions and the latest information.

Sequence No. 179

Identifying number Business or activity to which this form relates Name(s) shown on return INFORMATION CONSULTING SERVICES LLC 1120S - TUTORING 84-1700245 **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. 1.050.000 2 2,015 3 2.620.000 Threshold cost of section 179 property before reduction in limitation (see instructions). . . . . 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 separately, see instructions . 5 1,050,000 6 (a) Description of property (c) Elected cost **COMPUTER EQUIPMENT** 2.015 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 2,015 9 2,015 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions . 11 51,786 12 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11. 12 2,015 13 Carryover of disallowed deduction to 2022. Add lines 9 and 10, less line 12 . . . . . . . . . . . **Note:** Don't use Part II or Part III below for listed property. Instead, use Part V. Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.) 14 Special depreciation allowance for qualified property (other than listed property) placed in service 14 15 **16** Other depreciation (including ACRS). 16 MACRS Depreciation (Don't include listed property. See instructions.) Part III Section A 17 MACRS deductions for assets placed in service in tax years beginning before 2021 . . . . . . . 17 18 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 2021 Tax Year Using the General Depreciation System (b) Month and (c) Basis for depreciation (d) Recovery (a) Classification of property year placed (business/investment use (e) Convention (f) Method (g) Depreciation deduction in service only—see instructions) **19 a** 3-year property **b** 5-year property c 7-year property **d** 10-year property e 15-year property f 20-year property g 25-year property 25 yrs. S/L h Residential rental 27.5 yrs. MM S/L 27.5 yrs. MM property i Nonresidential real 39 yrs. MM MM S/L property Section C - Assets Placed in Service During 2021 Tax Year Using the Alternative Depreciation System 20 a Class life **b** 12-year S/L 12 yrs. 30 yrs. MM S/L c 30-year **d** 40-year 40 yrs. S/L Part IV Summary (See instructions.) 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions 23 For assets shown above and placed in service during the current year, enter the

Form **4562** 

Internal Revenue Service

#### Virginia State Depreciation and Amortization

#### (Including Information on Listed Property)

► Attach to your tax return.

Go to www.irs.gov/Form4562 for instructions and the latest information.

OMB No. 1545-0172 **2021** 

Sequence No. 179

Identifying number Business or activity to which this form relates Name(s) shown on return INFORMATION CONSULTING SERVICES LLC 1120S - TUTORING 84-1700245 **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. 1.050.000 2 2,015 3 Threshold cost of section 179 property before reduction in limitation (see instructions). . . . 2.620.000 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0- . . . . . . . . . . 4 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions . 5 1,050,000 6 (a) Description of property (c) Elected cost **COMPUTER EQUIPMENT** 2.015 2.015 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 2,015 9 2,015 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions . 11 51,327 12 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11. 12 2,015 13 Carryover of disallowed deduction to 2022. Add lines 9 and 10, less line 12 . . . . . . . . . . . **Note:** Don't use Part II or Part III below for listed property. Instead, use Part V. Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.) 14 Special depreciation allowance for qualified property (other than listed property) placed in service 14 15 **16** Other depreciation (including ACRS). 16 MACRS Depreciation (Don't include listed property. See instructions.) Part III Section A 17 MACRS deductions for assets placed in service in tax years beginning before 2021 . . . . . . . . 459 18 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 2021 Tax Year Using the General Depreciation System (b) Month and (c) Basis for depreciation (d) Recovery (a) Classification of property (business/investment use year placed (e) Convention (f) Method (g) Depreciation deduction in service only—see instructions) **19 a** 3-year property **b** 5-year property c 7-year property **d** 10-year property e 15-year property f 20-year property g 25-year property 25 yrs. S/L h Residential rental 27.5 yrs. MM S/L 27.5 yrs. MM property i Nonresidential real 39 yrs. MM MM S/L property Section C - Assets Placed in Service During 2021 Tax Year Using the Alternative Depreciation System 20 a Class life **b** 12-year S/L 12 yrs. 30 yrs. MM S/L c 30-year **d** 40-year 40 yrs. S/L Part IV Summary (See instructions.) 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions 459 23 For assets shown above and placed in service during the current year, enter the

INFORMATION CONSULTING SERVICES LLC	84-17002	245			
The following questions should be answered in the context of the <b>FEDERAL</b> return being electronical Responses for state efiles are below.	ally filed.				
	Fo	orm family	applicabi	itv	
Check ("x") this column to see more information, when available.  Name of signing officer or fiduciaryANIL GOEL	1065	1120/F	11208	990	1041
Check ("X") if foreign officer and does not have a SSN/TIN					
OR Check ("X") if officer opts not to provide SSN/ITIN					
OR Enter SSN/EIN of signing officer or fiduciary	Y	Y	~	Y	Y
	-			-	<u> </u>
Total Income from Prior Year return	Y	Y	Y		Y
X If claiming deduction for Salary & Wages on current year return, mark this box and enter the <b>COUNT</b> of original W2's reported to SSA for this tax year.	<b>Y</b>	<b>A</b> •	~		
If no W2s were issued enter "0". If paying a Reporting Agent or Professional Employer Organ on behalf of the business provide a number for how many W2's the Agent or PEO issued for					
			-		
Likely, a threshold variance will be applied to account for corrected W2's and other instances where an	exact mat	ch is not po	ossible.		
X   If claiming Compensation of Officers on current year return, mark this box and enter the number of officers		Y	· Y		
Enter the number of officers associated with the claim of compensation of officers					
Volume threshold will be applied. If paying a Reporting Agent or Professional Employer Organ officer compensation provide the number of officers the Agent or PEO paid compensation to be					
	on benan	or the bus	ness.		
Parent Company Name	Y	Y	Y		
Business's Primary Physical Address:					
Street Line 2					
City St Zip					
	Y	Y	Y		
Grantor Name					Y
Indicate which, if any, of the following forms this entity is required to file.					
720 990 1042					
940 941 943 944 945	Y	Y	Y		Y
Were estimated tax payments made for this entity towards the current tax year's liability?					
Yes No Note: For EFTPS Confirmation Number, if more than 15 digits, enter the first 15 digits.		Y	Y		Y
First Payment, regardless of quarter or date paid.  Method Direct Debit/ACH Cash Check EFTPS					
Date payment was requested to be debited					
Last 4 digits of account number for Direct Debit/ACH or EFTPS payment					
EFTPS Confirmation Number ,					
irginia					
The following questions should be answered in the context of the Virginia return being electronically	filed.				
	Fo	orm family	applicabi	ity	
Check ("x") this column to see more information, when available.  Name of signing officer or fiduciaryANIL GOEL GOEL	502*	500	502*	N/A	770
Check ("X") if foreign officer and does not have a SSN/TIN					
OR Check ("X") if officer opts not to provide SSN/ITIN					
OR Enter SSN/EIN of signing officer or fiduciary	Y	Y	Y		Y
Total Income from Prior Year return	Y	Y	Y		Y
Enter total number of K-1's for this state	Y		Y		
If claiming deduction for Salary & Wages on current year state return, mark this box and enter the <b>COUNT</b> of original W2's reported to state for this tax year 35	~	Y	Y		
	•	· ·			
If claiming Compensation of Officers on current year state return, mark this box and enter the number of officers		Y	Y		
Parent Company Name					
Parent Company EIN	Y	Y	Y		
Business's Primary Physical Address: Street					
Line 2					
CityStZip CountryProvincePostal Code	Y	Y	Y		
Grantor Name					
Grantor SSN					Y
Were estimated tax payments made for this entity towards the current tax year's liability?  Yes No		Y	Y		Y

1	FRANCHISE PAYMENT	1	5,000
2	AMAZON ROYALTY FEE	2	8
3	Total other income (loss)	3	5,008

Line 19 (1120S) - Other Deductions

a b	Travel	1a	8,252
	Meals, subject to 100% limit (Business meals paid or incurred in 2021 or 2022) 1b		•
~			
y		1g	10,249
<b>2</b> Au	utomobile and truck expenses	2	20,498
<b>3</b> Ba	ank charges	3	319
<b>4</b> Cr	redit and collection costs	4	2,000
<b>5</b> Du	ues and subscriptions	5	792
<b>6</b> Ec	quipment rent	6	132
<b>7</b> Ins	surance	7	5,128
8 Le	egal and professional fees	8	4,560
<b>9</b> Of	ffice expenses	9	20,393
<b>10</b> Pa	arking fees and tolls	10	991
	ostage	11	417
<b>12</b> Su	upplies	12	5,872
<b>13</b> Te	elephone	13	13,983
<b>14</b> GI	IFTS	14	8
<b>15</b> SC	OFTWARE & WEB HOSTING	15	10,261
16 TF	RAINING & EDUCATION	16	5,915
<b>17</b> To	otal other deductions	17	109,770

#### Line 12a, Sch K (1120S) - Contributions

A Code A - Cash contributions (60%)	 	 	 	 	 . A	38
Total contributions	 		 	 	 12a	38

#### Line 17d, Sch K (1120S) - Other Items and Amounts

Section 199A Information		
Income Items	Non-SSTB	SSTB
Ordinary Income	22,324	(
Deduction Items		
Cash Contributions (60%)	38	(
Section 179 expense deduction	2,015	
Additional Information		
Section 199A W-2 wages	84,275	
Section 199A unadjusted basis	3,451	ı

#### Line 6, Sch L (1120S) - Other Current Assets

			Beginning	End
1	PAYPAL	1	7	
2	Total other current assets	2	7	0

Line 9, Sch L (1120S) - Other Investments

			Beginning	End
1	PIPELINE PLAZA	1	60,000	60,000
2	PREMIER PLAZA	2	90,000	90,000
3	PROP PLANT	3	9,697	58,634
4	Total other current investments	4	159,697	208,634

Line 18, Sch L (1120S) - Other Current Liabilities

			Begin <b>nin</b> g	End
1	MY STUDIO	1	573	573
2	PAYROLL	2	26,560	23,246
3	PAYROLL TAX	3	1,822	2,453
4	PAYROLL PENSION	4	302	
5	Total other current liabilities	5	29,257	26,272

Line 21, Sch L (1120S) - Other Liabilities

			Beginning	<u> </u>	End
1	PPP LOAN PAYABLE 2020	1			28,836
2	PPP LOAN PAYABLE 2021	2	7		30,467
3	KABBAGE LOAN	3			48,121
4	Total other liabilities	4	0		107,424

Line 25, Sch L (1120S) - Adjustments to Shareholders' Equity

				Beginning	End
1	DISTRIBUTIONS		1	-420,794	-24,327
2	Total adjustment to shareholder's equity	,	2	-420,794	-24,327

Line 5 (1125-A) - Other Costs for Cost of Goods Sold

1	COST OF GOOD SOLD	1	4,397
2	INDEPENDENT CONTRACTOS	2	21,087
3	MERCHANT FEE EXP	3	8,240
4	RECRUITING	4	268
5	Total other costs	5	33,992
6	Total other costs less expenses for offsetting credits	6	33,992

#### **Summary of Unadjusted Basis of Qualified Property (4562)**

12/31/2021

#### **Summary of Qualified Property by Activity**

		Unadjusted
	Activity	Cost or Basis
1	1120S	3,451

**Detail of Qualified Property** 

			Date In	Recovery	Years in	Total Cost	Business/Time	Unadjusted
	Activity	Asset Description	Service	Period	Service	or Basis	Use Percent	Cost or Basis
2	1120S	FURNITURE & FIXTURES	6/1/2020	5.0	2	1,436	100.00%	1,436
3	1120S	COMPUTER FOUIPMENT	6/1/2021	5.0	1	2 015	100.00%	2 015

3 Total.

4,444

0 4,444

2

1	ne 8 (1120S) - Salaries and Wages Salaries
2	Wages
3	3
4	Total salaries and wages
	Salaries and wages reported elsewhere on return:
5	Amounts included in Cost of Goods Sold
6	Elective contributions to a section 401(k) cash or deferred
	arrangement, or amounts contributed under a salary reductions SEP
	agreement or a SIMPLE IRA plan
7	Total salaries and wages reported elsewhere on return
	Less employment credits:
8	From Form 5884 - Work Opportunity Credit
9	From Form 5884-A - Employee retention credit for emloyers affected by qualified disasters 90
10	From Form 8844 - Empowerment Zone Employment Credit
11	From Form 8845 - Indian Employment Credit
	From Form 8994 - Employer Credit for Paid Family and Medical Leave
13	
14	14
15	
16	Total employment credits
	Reduction of expenses for offsetting credits
18	Total salaries and wages less employment credits and expense reductions
Li	ne 12 (1120S) - Taxes and Licenses
1	Payroll tax
2	TAXES 2 7,179
3	FUTA & UI 518
_	Sub Total
4	
4 5	Licenses

Sch L (1120S) - Balance Sheets per Books

	Assets	Beginning	Ending
1	Cash	5,898	5,417
2a	Trade notes and accounts receivable	,	<u> </u>
2b	Less allowance for bad debts		
2c	Net trade notes and accounts receivable	0	0
3	Inventories	0	0
4	U.S. government obligations		
5	Tax-exempt securities		
6	Other current assets	7	0
7	Loans to shareholders		
8	Mortgage and real estate loans		
9	Other investments	159,697	208,634
10a	Buildings and other depreciable assets	1,436	3,451
	Less accumulated depreciation	1,436	3,451
	Net buildings and other depreciable assets	0	0
	Depletable assets		*
	Less accumulated depletion		
	Net depletable assets	0	0
	Land (net of any amortization)	0	0
	Intangible assets (amortizable only)	0	0
	Less accumulated amortization	0	0
	Net intangible assets		0
14		0	0
15	Total assets	165,602	214,051
	Liabilities and Capital		
16	Accounts payable		
17	Mortgages, notes, bonds payable in less than 1 year	00.057	00.070
18	Other current liabilities	29,257	26,272
19	Loans from shareholders	78,500	83,500
20	Mortgages, notes, bonds payable in 1 year or more	0	407.404
21	Other liabilities	0 911	107,424 911
22 23	Capital stock	349,908	911
	Retained earnings	,	20 271
24		127,820 -420,794	20,271 -24,327
25	· · · · · · · · · · · · · · · · · · ·	-420,794	-24,321
	Less cost of treasury stock	165,602	214,051
21	Total habilities and shareholders equity	100,002	214,001
	End of year balance sheet out of balance by		0
	End of your building Street out of building by	<u> </u>	0

Sch M-2 (1120S) - Analysis of AAA

			Shareholders'	Retained	
	Accumulated	Other	Undistributed	Earnings	Total
	Adjustments	Adjustments	Taxable Income	Unappropriated/	Retained
	Account	Account	Previously Taxed	Timing Differences	Earnings
1 Balance at beginning of tax year	0	0	0	0	0
2 Income from page 1, line 21 2	22,324				22,324
3 Other additions 3	0	0			0
4 Loss from page 1, line 21 4	0				0
5 Other reductions 5	2,053	0			2,053
6 Combine lines 1 through 5 6	20,271	0	0	0	20,271
7 Distributions	0	0	0		0
8 Balance at end of tax year 8	20,271	0	0	0	20,271

#### Sch M-2, Lines 3 and 5 (1120S) - Other Additions and Reductions

Line 3 - Other additions	(a) Accumulated adjustments account	(b) Other adjustments account
Line 5 - Other reductions		
<b>1</b> Section 179 expense deduction	<b>I</b> 2,015	
2 Charitable contributions	2 38	
3 Total other reductions. Enter on line 5, Schedule M-2	2,053	0

Assets by Classification - 1120S

INFORMA	ATION CONSULTING SERVIC	ES LLC 84	-1700245													
	Description of	Date		Business	Cost or								Con-	Prior Accum.	2021	2021
Item	Property	Placed	Asset	Use	Other	Sec. 179		Special	Salvage	Recovery	Recovery		vention	Deprec.,		Accum.
No.	"**" indicates DISPOSED	In Service	Code	%	Basis	Deduction	Credit	Allowance	Value	Basis	Period	Method	Code	179, Bonus	Deprec.	Deprec.
	nputers and peripherals (not															
2	COMPUTER EQUIPMENT	6/1/2021	F-5	100.00%	2,015	2,015	0	0	0	C	5.0	200DB	HY	0	0	2,015
	Total: 5-yr Computers (not liste	ed)		_ _	2,015	2,015	0	0	0	C	-			0	0	2,015
	ce machinery (data-handling															
1	FURNITURE & FIXTURES	6/1/2020	F-6	100.00%	1,436	0	0	1,436	0	C	5.0	200DB	HY	1,436	0	1,436
	Total: 5-yr Office mach (data h	andling)		<del>-</del>	1,436	0	0	1,436	0	C				1,436	0	1,436
	SubTotals				3,451	2,015	0	1,436	, 0	0				1,436	0	3,451
	Less: Disposed Assets Ending Totals				3,451	( 0) ( 2,015	( 0)	( 0) 1.436	( 0)	0	-			( 0)	0)	( 0) 3,451



Detail Report - 1120S

12/31/2021

INFORM	ATION CONSULTING SERVIC	ES LLC 84	4-1700245		_							_	_
	Description of	Date	Business	Cost or						Con-	Prior Accum.	2021	2021
Item	Property	Placed in	Use	Other	Sec. 179	Special	Recovery	Rec		vention	Deprec.,	Current	Accum.
No.	"**" indicates DISPOSED	Service	%	Basis	Deduction	Allowance	Basis	Period	Method	Code	179, Bonus	Deprec.	Deprec.
1	FURNITURE & FIXTURES	6/1/2020	100.00%	1,436	0	1,436	0	5.0	200DB	HY	1,436	0	1,436
2	COMPUTER EQUIPMENT	6/1/2021	100.00%	2,015	2,015	0	0	5.0	200DB	HY	0	0	2,015
											1		
	SubTotals			3,451	2,015	1,436	0	)			1,436	0	3,451
	Less: Disposed Assets		_	( 0)	( 0)	( 0) (	( 0)	<u>.</u>			( 0)	( 0)	( 0)
	Ending Totals		=	3,451	2,015	1,436	0	) =			1,436	0	3,451



Part I Summary (4562)

<u> </u>	11 1 Summary (4302)						
1	Maximum amount of Section 179		Federal		Federal AMT		VA
	a Maximum amount (see instructions)		1,050,000		1,050,000	1a _	1,050,000
	<b>b</b> Additions or subtractions to line 1a			1b	0	1b _	0
	c Additional Qual Empowerment Zone (Max: \$35,000)	1c		1c	0	1c _	0
	<b>d</b> Adjusted maximum amount. Add lines 1a through 1c	1d	1,050,000	1d	1,050,000	1d	1,050,000
2	Total cost of Section 179 property (Fixed Assets & 4562)						
	<b>a</b> Total cost	2a	2,015	2a	2,015	2a	2,015
	<b>b</b> Additions or subtractions to line 2a	2b	0	2b	0	2b	0
	c Adjusted total cost of section 179 property	2c	2,015	2c	2,015	2c	2,015
3	Threshold cost of Sec 179 property before reduction in limitation .	3	2,620,000	3	2,620,000	3	2,620,000
4	Reduction in limitation					_	
	Subtract line 3 from line 2c. If zero or less, enter -0	4	0	4	0	4	0
5	Dollar limitation for tax year					_	
	Subtract line 4 from line 1d. If zero or less, enter -0	5	1,050,000	5	1,050,000	5	1,050,000
6	Section 179 property (non-listed)					_	
	i From Fixed Assets	i	2,015	4	2,015	i	2,015
	ii From K-1 Input Worksheet(s)		0	ii	0	ii _	0
	iii Loss Limitations (Prior Year Allowed)	iii	0	iii	0	iii	0
	iv Less: Loss Limitations (Current Year Unallowed)		( 0)	iv	( 0)	iv	( 0)
	a Total Section 179 property (non-listed)	6a	2,015	6a	2,015	6a	2,015
7	Section 179 property (listed)	7	0	7	0	7	0
8	Total elected cost of Section 179 property. Add lines 6 and 7	8	2,015	8	2,015	8	2,015
9	Total tentative deduction	9	2,015	9	2,015	9	2,015
10	Carryover of disallowed Section 179 from 2020's Form 4562			4		_	
	a Total carryover from last year	10a	0	10a	0	10a	0
11	Business income limitation					_	
	<b>a</b> Business taxable income calculated for Sec 179 limitation	11a	51,786	11a			51,327
	<b>b</b> Form 4797 gain or loss	11b	0	11b	0	11b	0
	c Schedule D Business gain or loss	11c	0	11c	0	11c _	0
	<b>d</b> Adjustments to business taxable income	11d	0	11d	0	11d	0
	e Adjusted business taxable income. Combine lines 11a thru 11d	11e	51,786	11e	51,786	11e	51,327
	<b>f</b> Enter the smaller of business income (not less than zero) or line 5	11f	51,786	11f	51,786	11f	51,327
12	Section 179 expense deduction					_	
	a Total Section 179 expense deduction	12a	2,015	12a	2,015	12a	2,015
13	Carryover of disallowed deduction to 2022					_	
	a Total carryover of disallowed deduction (Line 13b)	13a	0	13a	0	13a	0
14	Difference in regular Section 179 deduction and AMT Section 179 de	educ	tion	14	0	_	

INFORMATION CONSULTING SERVICES LLC 84-1700245

#### Section 179 Worksheet (4562)

Tax	able Business Income (Federal)	Totals
11a	Business Income (without Section 179 deduction)	51,786
11b	Form 4797 gain or loss	0
11c	Schedule D Business gain or loss	0
11d	Adjustments to business taxable income	0
	Adjusted business taxable income (without Sec 179)	51,786
	n 4562	
2a	Total cost of Section 179 property (Fixed Assets & 4562)	2,015
2b	Additions or subtractions to line 2a	0
2c	Adjusted total cost of Sec 179 property placed in service	2,015
	eral Section 179	
6b	Total cost of non-listed property	2,015
6c	Total elected cost of non-listed property	2,015
7	Total elected cost of listed property	0
10	CO disallowed from prior year	0
12	Allocate allowable Section 179	2,015
13	CO disallowed for next year	0
	Section 179	
6b	Total cost of non-listed property	
6c	Total elected cost of non-listed property	
7	Total elected cost of listed property	0
10	CO disallowed from prior year	0
12	Allocate allowable Section 179	2,015
13	CO disallowed for next year	0
	e Section 179	
10	CO disallowed from prior year	0
12	Allocate allowable Section 179	2,015
13	CO disallowed for next year	0

## 2021 Virginia Form 502

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



0.00

0.00

Department of Taxation PO Box 1500 Richmond, VA 23218-1500 Official Use Only FISCAL or SHORT Year Filer: Beginning Date 2021; Ending Date 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. Initial return Amended return: Enter Reason Code Final return Address change Unified nonresident return filed Electing large partnership Subject to Bank Franchise Tax Certified Company Apportionment FEIN Date of Formation Entity Type (see instructions) SC 84-1700245 01012012 Entity Name Date Operations Began in Virginia NAÏCS INFORMATION CONSULTING SERVICES LLC 01012012 611000 Number and Street State or Country Where Incorporated Description of Business Activity or Organized 42767 RAVENGLASS DR City or Town, State, and ZIP Code ASHBURN, VA 20148 **TUTORING** 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: 1 . . . . . . . . . . . . . . . . . . b. 0 0.00 Distributive or Pro Rata Income and Deductions (See instructions) 22324. 00 2. 2053. 00 0.00 Allocation and Apportionment: Check if electing the manufacturer's alternative method of apportionment 0.00 0. 00 0.00 Virginia apportionment percentage from Schedule 502A, Section B, percent from Line 1 or Line 2(f) or 100% . . . . 7. 100.0000% Virginia Additions – See Schedule 502ADJ for Other Additions 8. Fixed date conformity – depreciation . . . 0.00 0.00 0.00 10. 0.00 0.00 0.00 Virginia Subtractions - See Schedule 502ADJ for Other Subtractions 459. 00 0. 00 0.00 16 0. 00 459. 00 Virginia Tax Credits Passed Through to Owners

## 2021 Virginia Form 502

Name

INFORMATION CONSULTING SERVICES LLC

Page 2

FEIN 84-1700245

Section 1 – Withholding	Payment Reconciliation
-------------------------	------------------------

Sec	ction 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	0. 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
Sec	ction 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.	0. 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.	0. 00
7.	Interest (may apply if there is a balance due on Line 4)	7	0. 00
8.	Penalty and interest charges due. Add Line 5 or Line 6 (whichever applies) to Line 7	8	0. 00
Sec	ction 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.	0. 00
Sec	ction 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 2022	. 11.	00
12.	Amount of withholding overpayment to be refunded	. 12.	0. 00
Sec	ction 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 LI fthere is an overpayment on Line 3 and Line 8 or Line 9 is greater than Line 3, enter Line 5 minus Line 3		0. 00
14.			0. 00
15.	Late filing penalty. Enter the greater of Line 6 or Line 9		0. 00
16.	Total payment due. Add Line 13, Line 14, and Line 15.		0. 00
	ction 6 – Amount Due or Refund		0. 00
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)	<u>-</u>	00
19.	Credit to be refunded directly to PTE. Add Line 17 and Line 18		0. 00
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		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	Date
		PRESIDENT	05032022
Printed Name of Owner or Authorized Representative		Phone	
ANIL GOEL		(703) 565-3342	
Individual or Firm, Signature of Preparer, Phone Number, and Address			Date
Claros & Wolverton Tax a Tamera D Wolverton	571-252-3818	22082 Avonworth Sq, Broadla	05032022
Printed Name of Individual or Firm		Preparer's FEIN, PTIN, or SSN	Approved Vendor Code
Tamera D Wolverton		P00392196	1833

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.

#### 2021 Form 502 Schedule VK-1

1833

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



CHECK IF— Final If SHORT Period Return: Beginnin	ng Date	, 2021;	Ending Date		, 20
Amended Return: Enter Reason Code		wner is Participatin	g in a Unified Nonres	sident Individ	ual Income Tax Return
Owner Information		Pas	s-Through Enti	ty (PTE) I	nformation
Name #1 FEIN or 8 ANIL GOEL 010-82		Name	N CONSULTING S	SERVICES	FEIN I 84-1700245
Address	2-0002	Address	N CONSOLTING	BEITTIGES	Taxable Year End Date
42767 RAVENGLASS DR		42767 RAVEN	NGLASS DR	_	12312021
Address Continued		Address Continued			
City or Town, State, and ZIP Code		City or Town, State,	and ZIP Code		
ASHBURN, VA 20148		ASHBURN, V	A 20148		
ADDITIONAL OWNER INFORMATION (SEE INSTRUC	CTIONS)				
a. Date owner acquired interest in the PTE (MM/DD/	•				01/01/2012
<b>b.</b> Owner's entity type (Enter code)				-	
c. Owner's participation type (Enter code)					
<b>d.</b> Owner's participation percentage (Example: 47.35)	%)			. d	100.00%
e. Amount withheld by PTE for the owner				е	0.
f. If owner or entity is exempt from withholding, enter	r an exemption code			. f	
DISTRIBUTIVE OR PRO RATA INCOME AND DEDU	UCTIONS (SEE INSTE	RUCTIONS)			
1. Total taxable income amounts			<u></u>	. 1	22324. 00
2. Total deductions				2	2053. 00
3. Tax-exempt interest income				3	0. 00
ALLOCATION AND APPORTIONMENT					
4. Income allocated to Virginia (owner's share from P	TE's Schedule 502/	A, Section C, Line 2	)	4	0. 00
5. Income allocated outside of Virginia (owner's share	e from PTE's Sched	ule 502A, Section C	C, Line 3(e))	5	0. 00
6. Apportionable income (owner's share from PTE's S	Schedule 502A, Sec	tion C, Line 4)		6	22324. 00
7. Virginia apportionment percentage (from PTE's Schedu	ule 502A, Section B -	percent from Line 1 c	or Line 2(f), or 100%)		100.0000%
VIRGINIA ADDITIONS – OWNER'S SHARE					
8. Fixed date conformity – depreciation				. 8. <u> </u>	0. 00
9. Fixed date conformity – other				9	0. 00
10. Net income tax or other tax used as a deduction in	determining taxable	e income (see instru	ıctions)		
11. Interest on municipal or state obligations other than	n from Virginia			. 11	0. 00
12. Other additions (see Form 502 instructions for add	lition codes.)				
Code Amount		Code	Amount		
12a. 0. 00			0. 00		
12c 0. 00			0. 00	_	
13. Total Additions (add Lines 8-11 and 12a-12d)				13	0. 00
VIRGINIA SUBTRACTIONS - OWNER'S SHARE					
14. Fixed date conformity – depreciation					459. 00
15. Fixed date conformity – other					0. 00
<b>16.</b> Income from obligations of the United States				. 16	0. 00
17. Other subtractions (see Form 502 instructions for s	· · · · · · · · · · · · · · · · · · ·		_		
Certification Number (if applicable	<del>)</del>	Code	Amount		
17a 17b.			0. 00 0. 00		
176.			0. 00	_	
17d.			0. 00		
18. Total Subtractions. (add Lines 14-16 and 17a-1	17d)			. 18.	459. 00
Use <b>Schedule SVK-1</b> if you are claiming more additio	ns or subtractions th	an the Schedule VI	K-1 allows.		

## 2021 Virginia Schedule VK-1

Page 2

Owner FEIN or SSN 010-82-8662

PTE FEIN

84-1700245



#### **VIRGINIA TAX CREDITS**

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

Part I – Nonrefundable Credits			22.	Research and Development	
1.	State Income Tax Paid			Expenses Tax Credit (Use this line if the taxpayer does not qualify for a	
	(see Form 502 Instructions)	0. 00		refundable credit.)	0. 00
2.	Neighborhood Assistance Act Tax Credit	0. 00	23.	Education Improvement Scholarships Tax Credit	0. 00
3.	Biodiesel and Green Diesel Fuels Tax		24.	Major Research and Development	
	Credit	0. 00		Expenses Tax Credit	0. 00
4.	Recyclable Materials Processing		25	Food Crop Donation Tax Credit	
	Equipment Tax Credit	0. 00			
5.	Vehicle Emissions Testing Equipment			Worker Training Tax Credit	0. 00
	Tax Credit	0. 00	27.	Virginia Housing Opportunity Tax	
6.	Major Business Facility Job Tax			Credit	0. 00
	Credit	0. 00	Par	t II – Total Nonrefundable Credits	
7.	Waste Motor Oil Burning Equipment		1.	Total Nonrefundable Credits.	
_	Tax Credit	0. 00		Add Part I, Lines 1-8 and 11-27	0. 00
8.	Riparian Forest Buffer Protection for Waterways Tax Credit	0. 00	Par	t III – Refundable Credits	
9.	Virginia Coal Employment and	0. 00	1.	Agricultural Best Management	
•	Production Incentive Tax Credit	0. 00		Practices Tax Credit	0. 00
10.	Enter the amount of Virginia Coal		2.	100% Coalfield Employment	
	Employment and Production Incentive			Enhancement Tax Credit from	
	Tax Credit assigned to another party	0. 00		2021 Form 306B, Line 1(b)	0. 00
11.	Virginia Coal Employment and		3.	Full Credit: Enter amount from	
	Production Incentive Tax Credit	· ·		2021 Form 306B, Line 13	0. 00
	available for use by owner		4.	85% Credit: Enter amount from	
	(Subtract Line 10 from Line 9)	0.00		2021 Form 306B, Line 15	0. 00
12	Historic Rehabilitation Tax Credit	0. 00	5.	Total Coalfield Employment	
	-			Enhancement Tax Credit allowable	
	Land Preservation Tax Credit	0. 00		this year (Add Lines 3 and 4)	0. 00
14.	Qualified Equity and Subordinated		6.	2021 Coalfield Employment	
4-	Debt Investments Tax Credit	0. 00		Enhancement Tax Credit earned to be	
15.	Communities of Opportunity Tax	0.00		used when completing your 2024	
	Credit	0. 00		return. Enter amount from your 2021	0. 00
16.	Green Jobs Creation Tax Credit	0. 00	7	Form 306, Line 11	0. 00
17.	Farm Wineries and Vineyards Tax		٠.	Tax Credit	0. 00
	Credit	0. 00	8	Research and Development	0. 00
18.	International Trade Facility Tax		٠.	Expenses Tax Credit	0. 00
	Credit	0. 00	9.	Conservation Tillage and Precision	0. 00
19.	Port Volume Increase Tax Credit	0. 00		Agricultural Equipment Tax Credit	0. 00
20	Barge and Rail Usage Tax Credit	0. 00	Par	t IV – Total Refundable Credits	
		_	1.	Total Refundable Credits.	
21.	Livable Home Tax Credit	0. 00		(Add Part III, Lines 1, 5, and 7-9)	0. 00

**NOTICE:** You 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).

#### Fixed Date Conformity - Depreciation (VA 502)

	Description	Fed current deprec	Virginia current deprec	Depreciation Adjustment
	FURNITURE & FIXTURES	0	459	-459
1	VA/Fed depreciation adjustment	<b>1</b> -459		
	VA/Fed K1 flow through K1 adjustment			
3		3		
4		4		
5		5		
6				6
7	Fixed Date Conformity - Depreciation (Virginia Subtractions, Line 1		<b>7</b>	