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

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

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

INFORMATION CONSULTING SERVICES LLC 42767 RAVENGLASS DR ASHBURN, VA 20148

50rm 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.

OMB No. 1545-0123

Department of the Treasury Internal Revenue Service

Name of corporation

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

ng , 20 .

Employer identification number

2020

INFORMATION CONSULTING SERVICES LLC		87-1700245	
Part I Tax Return Information (Whole dollars only)	•		
1 Gross receipts or sales less returns and allowances (Form 1120-S, line 1	1c)	1	527,173
2 Gross profit (Form 1120-S, line 3)	A	2	485,329
3 Ordinary business income (loss) (Form 1120-S, line 21)		· -	128,830
4 Net rental real estate income (loss) (Form 1120-S, Schedule K, line 2) .			0
5 Income (loss) reconciliation (Form 1120-S, Schedule K, line 18)		5	127,820
Part II Declaration and Signature Authorization of Officer (B	e sure to get a copy of the	corporation's re	eturn)
Under penalties of perjury, I declare that I am an officer of the above corporati 2020 electronic income tax return and accompanying schedules and statemer correct, and complete. I further declare that the amounts in Part I above are the electronic income tax return. I consent to allow my electronic return originator send the corporation's return to the IRS and to receive from the IRS (a) an act transmission, (b) the reason for any delay in processing the return or refund, at the U.S. Treasury and its designated Financial Agent to initiate an electronic finstitution account indicated in the tax preparation software for payment of the financial institution to debit the entry to this account. To revoke a payment 1-888-353-4537 no later than 2 business days prior to the payment (settlemer in the processing of the electronic payment of taxes to receive confidential infinitesues related to the payment. I have selected a personal identification number income tax return and, if applicable, the corporation's consent to electronic fur	nts and to the best of my knowled the amounts shown on the copy of (ERO), transmitter, or intermedial knowledgement of receipt or reasond (c) the date of any refund. If a funds withdrawal (direct debit) enter corporation's federal taxes owed the transmitter of the contact the U.S. Treasurent) date. I also authorize the finant ormation necessary to answer incer (PIN) as my signature for the contact the U.S.	dge and belief, it is to feel the corporation's ate service provider son for rejection of the applicable, I authority to the financial don this return, and y Financial Agent and institutions invoquiries and resolve	true, to the ize d it olved
Officer's PIN: check one box only I authorize ERO firm name on the corporation's 2020 electronically filed income tax return. X As an officer of the corporation, I will enter my PIN as my signature		enter all zeros	ny signature e tax
return. Officer's signature ▶	Date ▶ Title ▶	PRESIDENT	
Part III Certification and Authentication			
Tare in Softmouton and Admendiation			
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-sele	ected PIN. 5420601	10158	
ENO'S ET IN/FIN. Effect your six-digit Et in followed by your live-digit self-sele	50ed F IIV. [342000 I	Don't enter all zero	
I certify that the above numeric entry is my PIN, which is my signature on the corporation indicated above. I confirm that I am submitting this return in according Application and Participation, and Pub. 4163, Modernized e-File (MeF) Information. Returns.	dance with the requirements of P	Pub. 3112, IRS e-file	
ERO's signature ▶ Tamera D Wolverton	Date ▶	6/14/2021	
ERO Must Retain This Form - Don't Submit This Form to the IRS U			

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 2020

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	87-1700245
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 Represe	entative
Under penalties of perjury, I, the undersigned owner and authorized representative of the pass-through penalties provided by law that this return (including any accompanying schedules, statements and attaknowledge and belief, a true, correct, and complete return, made in good faith, for the taxable year staknowledge and the than the authorized representative declares the same, and such declaration is based further declare that the information provided to my Electronic Return Originator (ERO), Transmitter, or in Part I above agrees with the information and amounts shown on the corresponding lines of the pass	achments) has been examined by me and is, to the best of my ted, pursuant to the tax laws of the Commonwealth of Virginia. on all information of which he or she has any knowledge. Intermediate Service Provider including the amounts shown
Virginia pass-through entity tax return. Do not enter all zeros	gnature on the pass-through entity's 2020 electronic
Tamera D Wolverton	
I will enter my e-File PIN as my signature on the pass-through entity's 2020 electronic Virginia pare entering your own e-File PIN and the return is filed using the Practitioner PIN method. The Your Signature	pass-through entity tax return. Check this box only if you ERO must complete Part III below.
Part III Certification and Authentication	
ERO's EFIN/PIN: Enter your six digit EFIN followed by your five digit self-selected PIN. 54. I certify that the above numeric entry is my ERO EFIN/PIN, which is my signature for the 2020 Virginia indicated above. I confirm that I am submitting this return in accordance with the requirements of the P requirements as specified by the Virginia Department of Taxation. EROs may sign the form using a rule or computer software program.	Do not enter all zeros pass-through entity return for the pass-through entity Practitioner PIN method and have followed all other
ERO's Signature D	Pate 06142021

1833 Form VA-8879P (REV 10/20)

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

2020

		_	ear 2020 or tax	year beg				, endir	ig						
A S election effective date 1/1/2012 B Business activity code			ctive date		Name							D Emp	oloyer identi	fication num	ber
			012		INFORMATION CONSULTING SERVICES LLC					87-1700245					
				TYPE			uite no. If a P.O. b	ox, see instru	ctions.		-	E Date	incorporated		
nı	ımber (s	see in	structions)	OR		VENGLASS D)R						·		
				_	City or town			State		code	L			1/2012	
6110	000			PRINT	ASHBURN			VA)148		F Tota	l assets (see	instructions)	
					Foreign coun	try name	Foreign province	ce/state/county	Foi	reign posta	al code				
C CI	neck if S	Sch. M	-3 attached									\$		1	165,602
G Is	the c	orpo	oration electing	to be an	S corporation	beginning with	this tax year?		Yes	No	If "Yes,"	attach	Form 2553	if not alrea	dy filed
	heck	•	(1) Final	•	<u> </u>	0 0) Address cl	hange (4)	声 。	nded retur				ation or revoc	•
			. ,		· · —	•	· 	• ,				_			
ΙE	nter tl	he n	umber of share	ehol <u>der</u> s w	ho were sha	reholders durin	g any part of the	e tax year			.		- _		1
JC	heck	if co	rporation:	(1) Ag	gregated activi	ties for section 465	at-risk purposes	(2)	Grouped	activities	for section 4	169 pass	sive activity pu	ırposes	
Caut	ion: I	nclu	de only trade	or husines	s income an	d expenses on	lines 1a through	h 21 See th	e instructi	ons for n	ore inform	mation			
Ouut	12									0110 101 11	537,891				
	b		•								10,718				
							· · · · · · · ·							E	207 479
<u>o</u>	٥											1c			527,173
Ĕ	2											2			41,844
Income	3											3		- 4	485,329
=	4						4797)					4			
	5						ent)					5			10,000
	6											6			195,329
$\widehat{\mathbf{s}}$	7						form 1125-E) .					7			21,633
Ö	8											8		1	103,578
itat	9	R	epairs and ma	intenance			📤					9			
<u>=</u>	10	В	ad debts									10			
ō	11						A.					11			91,579
S	12						4					12			11,399
뎙	13											13			
5	14					orm 1125-A or elsewhere on return (attach Form 4562)									1,436
nst	15											14 15			.,
œ.	16											16			18,077
es)	17		_									17			10,011
ns	18		ension, promes	fit program	c., piaris .							18			10,137
ţ															108,660
<u>ဒ</u>	19											19			
Deductions (see instructions for limitations)	20											20			366,499
<u> </u>	21						from line 6					21			128,830
	22a						e instructions) .					_			
ţ	b		ax from Sched					<u>22b</u>							
ents	C						taxes)					22c			0
	23a					9 overpayment	credited to 202								
Paym	b		ax deposited v												
_	C	; C	redit for federa	al tax paid	on fuels (atta	ch Form 4136))								
Tax and	d	l R	Reserved for ful	ture use .				23d							
a	e	• A	dd lines 23 <mark>a t</mark> h	rough 23c							. <u></u>	23e			0
ã.	24	Ε	stimated tax p	enalty (see	instructions). Check if Forr	m 2220 is attach	ned		🕨	·Ш	24			
_	25	Α	mount owed.	If line 23e	is smaller th	an the total of	lines 22c and 24	4, enter amo	unt owed		.	25			0
	26	0	verpayment.	If line 23e	is larger that	n the total of lin	es 22c and 24,	enter amoui	nt overpai	d		26			0
	27	Е	nter amount fr	om line 26	: Credited to	2021 estimat	ted tax		·	Refu	nded >	27			0
		Uı	nder penalties of pe	erjury, I declar	e that I have exar	mined this return, inc	cluding accompanying	g schedules and	statements,	and to the b	est of my kn	owledge a	and belief, it is	true, correct,	
		ar	nd complete. Declar	ration of prepa	irer (other than ta	xpayer) is based on	all information of wh	ich preparer has	any knowled	dge.		May	the IRS discus	s this return	
Sig	n						•						the preparer s	nown below?	
_		A .						PRE	SIDENT			See	instructions.	X Yes	No
<u>He</u>	е		Signature of offi				Date	Title							
	_		Print/Type prepa	arer's name		Preparer's signa	ture			Date		Check	if PTII	N	
Pai	d		Tamera D W	olverton		Tamera D Wo	olverton			6/14/			oloyed P00	392196	
Pre	pare	er	Firm's name	DIVOITOIT	Claros & V		and Accounti	ng Associat	tes L		Firm's EIN		83-19404		
Use	•		Firm's address	<u> </u>	22082 Avo			J			Phone no.		3) 585-50		
J36		· y	City	•	dlands	7		Sta	ite VA		ZIP code	201			

Forn	n 1120-S (2020) INFORMA	ATION CONSULTING SERVICE	ES LLC		87-1700245	F	Page 2
Sc	hedule B Other In	formation (see instructions	s)				
1	Check accounting method		Accrual			Yes	No
2	See the instructions and e	c Other (specify)					
2	a Business activity ►		b Product or serv	vice ▶ SERVICE			
3	••	year, was any shareholder of the			estate or a		
	-	? If "Yes," attach Schedule B-1, Ir	-				Х
4	At the end of the tax year,	did the corporation:			4		
	a Own directly 20% or more	e, or own, directly or indirectly, 50%	% or more of the total	stock issued and outsta	anding of any		
	foreign or domestic corpor	ration? For rules of constructive ov	wnership, see instruc	tions. If "Yes," complete	e (i) through (v)		
	below	<u> </u>	<u> </u>				Х
	(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 Date (if any) a Qualified Sut Subsidiary Election Was	ochapte	
	h O	5 000/ an manner an array discard	in alima address on the desired	- F F00/	an fit lass an		
	•	f 20% or more, or own, directly or	•				
		omestic partnership (including an e			eticiai interest of a		X
		ctive ownership, see instructions.				0	•
	(i) Name of Entity	(ii) Employer Identification Number (if any)	(iii) Type of Entity	(iv) Country of Organization	(v) Maximum Percentage in Profit, Loss, or Cap		a
		1					
5a	•	did the corporation have any out	standing shares of re	stricted stock?			Х
	If "Yes," complete lines (i)	1.7					
	` '	tricted stock					
	` '	n-restricted stock	· · · · · · · · · · · · · · · · · · ·				.
	•	did the corporation have any outs	standing stock option	s, warrants, or similar ir	nstruments?		Х
	If "Yes," complete lines (i)						
		ck outstanding at the end of the ta					
6		ck outstanding if all instruments w		a alaquira Ctatamant ta	n roy il do		
6	information on any reporta	or is it required to file, Form 8918 able transaction?					X
-	, ,						⊢^
7		oration issued publicly offered deb n may have to file Form 8281, Infe		•			
8		a C corporation before it elected to ence to the basis of the asset (or t					
	gain reduced by net recog	It-in gain in excess of the net reco gnized built-in gain from prior years	s. See instructions .	▶ \$			
9		an election under section 163(j) fo		ade or business or any t	farming business		
		ar? See instructions					Х
10		sfy one or more of the following? S					Х
		ass-through entity with current, or					
		ate average annual gross receipts	•	` ''	•		
		year are more than \$26 million an			ense.		
	c The corporation is a tax sl	helter and the corporation has bus	siness interest expens	se.			

 ${\bf a} \ \ {\bf The \ corporation's \ total \ receipts \ (see \ instructions) \ for \ the \ tax \ year \ were \ less \ than \ $250,000.$ ${f b}$ 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.

Other foreign tax information (attach statement)

14q

Scne	aule N	Shareholders' Pro Rata Share I	t ems (continuea)				101	ai amount
×	15a	Post-1986 depreciation adjustment				15a		
Ţaÿ	g b	Adjusted gain or loss				15b		
ם	e c	Depletion (other than oil and gas)				15c		
j j j	d	Oil, gas, and geothermal properties—gross	income			15d		
Alternative Minimum Tax	₹ e	Oil, gas, and geothermal properties—deduc	tions			15e		
	f	Other AMT items (attach statement)				15f		
ō.`	16a	Tax-exempt interest income				16a		
Items Affecting Shareholder	b b	Other tax-exempt income				4 16b		
P Aff	c c	Nondeductible expenses				16c		
sms Shai	" d	Distributions (attach statement if required) (see instructions).			16 d		
<u>ਜ</u>	е	Repayment of loans from shareholders			. /.	16e		16,500
Other Information	17a	Investment income				17a		
her	b	Investment expenses				17b		
ថ្មី	С	Dividend distributions paid from accumulate	d earnings and pro	fits		17c		
	d	Other items and amounts (attach statement)					
<u> </u>								
Recon-	18	Income (loss) reconciliation. Combine the	e amounts on lines	1 through 10 in the far r	ight			
æ <u>:</u>		column. From the result, subtract the sum o	f the amounts on li	nes 11 through 12d and	14p .	18		127,820
Sche	edule L	Balance Sheets per Books	Beginnin	g of tax year		En	nd of tax	k year
		Assets	(a)	(b)	(c)		(d)
1 (Cash .			40,399				5,898
2a -	Trade not	es and accounts receivable						
b I	Less allov	vance for bad debts		0				0
3	Inventorie	es						
4	U.S. gove	rnment obligations						
5	Tax-exem	npt securities (see instructions)						
6	Other curi	rent assets (attach statement)		11				7
7	Loans to s	shareholders						
8	Mortgage	and real estate loans						
9	Other inve	estments (attach statement)		156,607				159,697
10a	Buildings	and other depreciable assets				1,4	436	
b I	Less accu	ımulated depreciation		0		1,4	436	0
11a	Depletable	e assets						
		ımulated depletion		0				0
12	Land (net	of any amortization)						
		assets (amortizable only)	<u> </u>				_	
		umulated amortization		0				0
		ets (attach statement)		107.017				405.000
15		ets		197,017				165,602
4.0		ities and Shareholders' Equity						
		payable						
		notes, bonds payable in less than 1 year		2 006				20.257
		rent liabilities (attach statement)		3,896				29,257
		m shareholders		95,000				78,500
		notes, bonds payable in 1 year or more						
		illities (attach statement)		911				911
22 23	∪apıtaı sti Additionol	ock		176,756				349,908
		paid-in capital		121,426				127,820
		s to shareholders' equity (attach statement)		(200,972)			-	420,794
	-	of treasury stock		200,312)				720,134
		lities and shareholders' equity		407.047				405.000
- /	ı Jun ilabi	naco ana sharonolacio equity		197,017				165,602

Form	1120-S (2020) INFORMATION CONSULTING S	SERVICES LLC		87-1700245 Page 5
Scl	nedule M-1 Reconciliation of Income (Los Note: The corporation may be requi			
1 2	Net income (loss) per books	127,820	5 Income recorded on books this ye not included on Schedule K, lines through 10 (itemize):	
3 a b	Expenses recorded on books this year not included on Schedule K, lines 1 through 12 and 14p (itemize): Depreciation \$ Travel and entertainment \$	0	Deductions included on Schedule 1 through 12 and 14p, not charge against book income this year (ite Depreciation \$ Add lines 5 and 6 Income (loss) (Schedule K, line 1	d 'emize):
4	Add lines 1 through 3	127,820	Subtract line 7 from line 4	
Scl	nedule M-2 Analysis of Accumulated Adj		Shareholders' Undistributed Taxal rofits, and Other Adjustments Acco	
		(a) Accumulated adjustments account		cumulated (d) Other adjustments account
1	Balance at beginning of tax year			
2	Ordinary income from page 1, line 21	128,830		
3	Other additions			
4 5	Loss from page 1, line 21	1,010		
6	Combine lines 1 through 5	127,820	0	0 0

127,820

7

from line 6.

Combine lines 1 through 5

Distributions Balance at end of tax year. Subtract line 7

Form **1120-S** (2020)

0

105,235

-105,235

0

INFORMATION CONSULTING SERVICES LLC 42767 RAVENGLASS DR ASHBURN, VA 20148

June 14, 2021

ANIL GOEL 42767 RAVENGLASS DR ASHBURN, VA 20148

RE: INFORMATION CONSULTING SERVICES LLC 87-1700245

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

671.1.20

		Final K-1	Amer	nded K-1	OMB No. 1545-0123
Schedule K-1 (Form 1120-S) 2020	P	art III	Shareholder's Sh Deductions, Cred	are of lits, ar	Current Year Income, nd Other Items
Department of the Treasury For calendar year 2020, or tax year Internal Revenue Service	1	Ordinary bu	usiness income (loss) 128,830	13	Credits
beginning ending	2	Net rental rea	al estate income (loss)	,	
Shareholder's Share of Income, Deductions,	3	Other net re	ental income (loss)		
Credits, etc. ▶ See separate instructions.		Int 4 in .		4	
Part I Information About the Corporation	4	Interest inc			
A Corporation's employer identification number 87-1700245	5a	Ordinary di	vidends		
B Corporation's name, address, city, state, and ZIP code	5b	Qualified di	ividends	14	Foreign transactions
INFORMATION CONSULTING SERVICES LLC	6	Royalties	V		
42767 RAVENGLASS DR ASHBURN, VA 20148	7		erm capital gain (loss)		
C IRS Center where corporation filed return e-file	8a	Net long-te	rm capital gain (loss)		
Part II Information About the Shareholder	8b		s (28%) gain (loss)		
D Shareholder's identifying number Shareholder: 1 XXX-XX-8662	8c	Unrecaptur	ed section 1250 gain		
E Shareholder's name, address, city, state, and ZIP code	9	Net section	1231 gain (loss)		
ANIL GOEL 42767 RAVENGLASS DR	10	Other incor	me (loss)	15	Alternative minimum tax (AMT) items
ASHBURN, VA 20148					
F Current year allocation percentage	,				
G Shareholder's number of shares Beginning of tax year					
H Loans from shareholder	11	Section 179	9 deduction	16 D	Items affecting shareholder basis 105,235
Beginning of tax year	12	Other dedu			
End of tax year	A_		1,010) E	16,500
<u></u>				17	Other information
o o				V*	See Attached Stmt
S Use					
For IRS Use Only					
2					
	18	More t	han one activity for at-ris	sk purpo	ses*
	19	More t	han one activity for pass	ive activ	ity purposes*
		* Se	e attached statemen	t for ad	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 _	1,010
Line 16 - Items affecting shareholder basis		
D Code D - Distributions	D	105,235
E Code E - Repayment of loans from shareholders		
		_
Line 17 - Other Information		
Section 199A Information (Code V)		
Income Items	Non-SSTB	SSTB
Ordinary Income	128,830	0
Deduction Items		
Cash Contributions (60%)	1,010	0
Additional Information		
Section 199A W-2 wages	125,211	0
Section 199A unadjusted basis	1,436	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		87-1700245	
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	41,84	14
6	Total. Add lines 1 through 5	6	41,84	14
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	41,84	14
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		▶ □	<u> </u>
ь			_	, ,
С	Check if the LIFO inventory method was adopted this tax year for any goods (if checked, attach Form 97	0)		_
d	If the LIFO inventory method was used for this tax year, enter amount of closing inventory	1 1		ı
	computed under LIFO	9d		
е	If property is produced or acquired for resale, do the rules of section 263A apply to the entity? See instru	ctions	Yes	No
f	Was there any change in determining quantities, cost, or valuations between opening and closing inventor	ory? If		7
	"Yes," attach explanation		Yes	No

Form **1125-E**

(Rev. October 2016)

Department of the Treasury Internal Revenue Service

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

87-1700245

Note: Complete Form 1125-E only if total receipts are \$500,000 or more. See instructions for definition of total receipts. (c) Percent of Percent of stock owned (f) Amount of (a) Name of officer (b) Social security number time devoted to compensation (d) Common (e) Preferred business 1 ANIL GOEL 010-82-8662 100.00% 100.00% % 21,633 % 2 2 Total compensation of officers . 21,633 3 Compensation of officers claimed on Form 1125-A or elsewhere on return . Subtract line 3 from line 2. Enter the result here and on Form 1120, page 1, line 12 or the appropriate line of your tax return. 21,633

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 87-1700245 **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. 1.040.000 2 1.436 3 2.590.000 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 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions . 5 1,040,000 6 (a) Description of property (c) Elected cost Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 0 9 0 10 Carryover of disallowed deduction from line 13 of your 2019 Form 4562. 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions . 11 12 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11. 12 13 Carryover of disallowed deduction to 2021. 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 1,436 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 2020 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 2020 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 2020 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 1.436 23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs 23

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

Sequence No. 179

Identifying number Business or activity to which this form relates Name(s) shown on return INFORMATION CONSULTING SERVICES LLC 1120S - TUTORING 87-1700245 **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. 1.040.000 2 1.436 3 2.590.000 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 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions . 5 1,040,000 6 (a) Description of property (c) Elected cost Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 0 9 0 10 Carryover of disallowed deduction from line 13 of your 2019 Form 4562. 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions . 11 12 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11. 12 13 Carryover of disallowed deduction to 2021. 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 2020 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 2020 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 1.436 HY 200DB **b** 5-year property 5 287 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 MM 39 yrs. MM S/L property Section C - Assets Placed in Service During 2020 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 287 23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs 23

INFORMATION CONSULTING SERVICES LLC The following questions should be answered in the context of the FEDERAL return being electronical	87-17002 Illy filed.	245			
Responses for state efiles are below.	-				
Check ("x") this column to see more information, when available. X Name of signing officer or fiduciaryANIL GOEL	1065	rm family 1120/F		990	1041
Name of signing officer or fiduciaryANIL GOEL Check ("X") if foreign officer and does not have a SSN/TIN OR					
Check ("X") if officer opts not to provide SSN/ITIN					
Enter SSN/EIN of signing officer or fiduciary	Y	Y	Y	Y	Y
If a financial institution is the fiduciary then the financial institution's name should be entered.					
Total Income from Prior Year return	Y	A Y	Y		Y
X If claiming deduction for Salary & Wages on current year return, mark this box					
and enter the <u>COUNT</u> of original W2's reported to SSA for this tax year. 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 t					
Likely, a threshold variance will be applied to account for corrected W2's and other instances where an	exact mat	ch is not po	essible.		
If claiming Compensation of Officers on current year return, mark this box and enter the number of officers		Y	Y		
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 o					
Parent Company Name	V	Y	Y		
Business's Primary Physical Address: Street Line 2					
City St Zip Country Province Postal Code	Y	· ·	~		
Grantor Name					Y
Indicate which, if any, of the following forms this entity is required to file.					•
	Y	· ·	~		~
Were estimated tax payments made for this entity towards the current tax year's liability?	•		r		T
Yes		ΙΥ	Y		Y
Amount paid with first quarter					
/irginia					
The following questions should be answered in the context of the Virginia return being electronically	filed.				
Check ("x") this column to see more information, when available.	502*	rm family 500	applicabil	ity N/A	770
Name of signing officer or fiduciary ANIL GOEL Check ("X") if foreign officer and does not have a SSN/TIN	002		002	1477	
OR Check ("X") if officer opts not to provide SSN/ITIN					
OR Enter SSN/EIN of signing officer or fiduciary	Y	Y	Y		Y
		T			
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 X and enter the COUNT of original W2's reported to state for this tax year 0	Y	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	Υ	Y	Y		
Business's Primary Physical Address: Street					
City St Zip					
Country Province Postal Code Grantor Name	Y .	Y	Y		
Grantor SSN					Y
Were estimated tax payments made for this entity towards the current tax year's liability? Yes No		Y	Y		Y

Line 5 (1120S) - Other Income (Loss)

1	TAXABLE GRANT	,	•		1	10,000
2	Total other income (loss)		 	 	2	10,000

Line 19 (1120S) - Other Deductions

1	Travel, Meals and Entertainment		
	a Travel	1a	3,150
2	Automobile and truck expenses	2	21,390
3	Bank charges	3	80
4	Consulting fees	4	100
5	COMPUTER & EQUIPMENT	5	4,743
6	Dues and subscriptions	6	30
7	Insurance	7	5,114
8	Office expenses	8	12,021
9	Parking fees and tolls	9	451
10	Postage	10	200
11	Supplies	11	22,112
12	Telephone	12	9,052
13	Utilities	13	11,946
14	GIFTS	14	205
15	PROFESSIONAL SERV EXP	15	1,894
16	SOFTWARE & WEB HOSTING	16	14,672
17	TRAINING & EDUCATION	17	1,500
18	Total other deductions	18	108,660
			•

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

A Code A - Cash contributions (60%)	. A _	1,010
Total contributions	12a	1,010

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

Section 199A Information		
Income Items	Non-SSTB	SSTB
Ordinary Income	 128,830	0
Deduction Items		
Cash Contributions (60%)	 1,010	0
Additional Information		
Section 199A W-2 wages	 125,211	0
Section 199A unadjusted basis	 1,436	0

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

			Beginning	End
1	PAYPAL	1	11	7
2	Total other current assets	2	11	7

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	6,607	9,697
Total other current investments	. 4	156,607	159,697

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

			Beginning	<u>End</u>
1	MY STUDIO	1	573	573
2	PAYROLL	2	1,761	26,560
3	PAYROLL TAX	3	1,562	1,822
4	PAYROLL PENSION	4		302
5	Total other current liabilities	. 5	3,896	29,257

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

			Beginning	End
1	DISTRIBUTIONS	1	-200,972	-420,794
2	Total adjustment to shareholder's equity	2	-200,972	-420,794

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

1 COST OF GOOD SOLD	1	7,251
2 INDEPENDENT CONTRACTOS	2	20,907
3 MERCHANT FEE EXP	3	13,686
4 Total other costs	4	41,844
5 Total other costs less expenses for offsetting credits	5	41,844

Summary of Unadjusted Basis of Qualified Property (4562)

12/31/2020

Summary of Qualified Property by Activity

		Unadjusted
	Activity	Cost or Basis
1	1120S	1,436

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	l
2	1120S	FURNITURE & FIXTURES	6/1/2020	5	1	1,436		100.00%	1,436	ı

Li	ne 8 (1120S) - Salaries and Wages		
1	Salaries	1,700	_
2	Wages	101,878	
3	3		
4	Total salaries and wages	4	4 103,578
	Salaries and wages reported elsewhere on return:		
5	Amounts included in Cost of Goods Sold	0	
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			70
_	Less employment credits:		
	From Form 5884 - Work Opportunity Credit		
	From Form 5884-A - Employee Retention Credit		
	From Form 8844 - Empowerment Zone Employment Credit		
	From Form 8845 - Indian Employment Credit		
13 14			
4-			
16	Total employment credits	1	6 0
		1 1	·
	Total salaries and wages less employment credits and expense reductions		
Li	ne 12 (1120S) - Taxes and Licenses		
1	Payroll tax		11,294
	Sub Total		
3	Licenses		3 105
4	Total taxes and licenses	4	11,399
	ne 14 (1120S) - Depreciation		
1	Depreciation		
2	Depreciation claimed on 1125-A and elsewhere on return		
_ 3	Depreciation not claimed on 1125-A and elsewhere on return	<u> </u>	3 1,436
l i	ne 18 (1120S) - Employee Benefit Programs		
1			1 10,137
_	Less: Credit for Small Employer Health Insurance Premiums		2 0
3	Total		10,137

Sch L (1120S) - Balance Sheets per Books

<u> </u>	Assets	Beginning	Ending
1	Cash	40,399	5,898
2a	Trade notes and accounts receivable	10,000	3,000
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	11	7
7	Loans to shareholders		
8	Mortgage and real estate loans		
9	Other investments	156,607	159,697
	Buildings and other depreciable assets	0	1,436
	Less accumulated depreciation	0	1,436
	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	0
14		0	0
15		197,017	165,602
	Liabilities and Capital		
16	Accounts payable		
17	Mortgages, notes, bonds payable in less than 1 year	0.000	00.057
18	Other current liabilities	3,896	29,257
19	Loans from shareholders	95,000	78,500
20 21		0	
22	Other liabilities	911	911
23		176,756	349.908
	Additional paid-in capital		,
24	Retained earnings	121,426 -200.972	127,820 -420,794
	Less cost of treasury stock	-200,972	-420,194
20 27	Total liabilities and shareholders' equity	197,017	165.602
21	Total habilities and shareholders equity	137,017	100,002
	End of year balance sheet out of balance by		0
		<u> </u>	

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

	Accumulated Adjustments Account	Other Adjustments Account	Shareholders' Undistributed Taxable Income Previously Taxed	Retained Earnings Unappropriated/ Timing Differences	Total Retained Earnings
1 Balance at beginning of tax year	7		•	<u> </u>	0
2 Income from page 1, line 21 2	128,830				128,830
3 Other additions 3	0	0			0
4 Loss from page 1, line 21 4	. 0				0
5 Other reductions 5	1,010	0			1,010
6 Combine lines 1 through 5 6	127,820	0	0	0	127,820
7 Distributions	0	0	0		0
8 Balance at end of tax year 8	127,820	0	0	0	127,820

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

Lin	e 3 - Other additions		adjustments account	adjustments account
	e 5 - Other reductions Charitable contributions	1	1,010	
2	Total other reductions. Enter on line 5, Schedule M-2	2	1,010	0

Assets by Classification - 1120S

IN	NFORM <i>A</i>	ATION CONSULTING SERVIC	ES LLC 87	7-1700245													
		Description of	Date		Business	Cost or								Con-	Prior Accum.	2020	2020
	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.
<u>5</u> -	yr Offic	ce machinery (data-handling	equipment,	except co	mputers)												
1		FURNITURE & FIXTURES	6/1/2020	F-6	100.00%	1,436	0	0	1,436	0	C	5	200DB	HY	0	0	1,436
		Total: 5-yr Office mach (data h	nandling)		-	1,436	0	0	1,436	0	C				0	0	1,436
		SubTotals				1,436	0	0	1,436	0	0				0	0	1,436
		Less: Disposed Assets				(0)	(0)	(0)	(0)	(0)	(0)				(0)	(0)	(0)
		Ending Totals			_	1,436	0	0	1,436	0	C				0	0	1,436



Detail Report - 1120S

12/31/2020

INFORM	ATION CONSULTING SERVIC	ES LLC 8	7-1700245										
	Description of	Date	Business	Cost or						Con-	Prior Accum.	2020	2020
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	200DB	HY	0	0	1,436
	SubTotals			1,436	0	1,436	0				0	0	1,436
	Less: Disposed Assets		-	(0)	(0)	(0)	(0)	_			(0)	(0)	(0)
	Ending Totals		-	1,436	0	1,436	0	_			0	0	1,436



2020 Virginia Form 502

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



Department of Taxation PO Box 1500 Richmond, VA 23218-1500

Richmond, VA 23218-1500				Official Use Only
FISCAL or SHORT Year Filer: Beginning Date 2020; Ending Dat	te		. 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 retu	urn with t	he undersigned	d tax preparer.	———— X
Check if: Initial return Amended return: Enter Reason Code	-	Final return	Name cha	
Change in fiscal year Unified nonresident return filed Electing large partnership	Su	ubject to Bank Frai	nchise Tax	Certified Company Apportionment
FEIN		ate of Formation		Entity Type (see instructions)
87-1700245		01012	012	SC
Entity Name	Da	ate Operations Be		NAICS
INFORMATION CONSULTING SERVICES LLC		01012		611000
Number and Street		ate or Country Wher Organized	e Incorporated	Description of Business Activity
42767 RAVENGLASS DR				
City or Town, State, and ZIP Code				TUTODINO
ASHBURN, VA 20148		RGINIA		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	ar and ent	ter:		
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 Schedule	es 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)	.)			
Total taxable income amounts			1.	128830. 00
2. Total deductions			2.	1010. 00
3. Tax-exempt interest income				0. 00
Allocation and Apportionment: Check if electing the manufacturer's alternative m	nethod of a	apportionment -	\longrightarrow	
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.	0. 00
7. Virginia apportionment percentage from Schedule 502A, Section B, percent from Schedule 502A,	om Line 1	1 or Line 2(f) or	100% 7.	100.0000%
Virginia Additions – See Schedule 502ADJ for Other Additions	3			
8. Fixed date conformity – depreciation			8.	1149. 00
9. Fixed date conformity – other			9.	0. 00
10. Net income tax or other tax used as a deduction in determining taxable income	e (see ins	structions.)	10.	0. 00
11. Interest on municipal or state obligations other than from Virginia			11.	0. 00
12. Total additions from enclosed Schedule 502ADJ, Section A , Line 5			12.	0. 00
13. Total additions. Add Lines 8 through 12			13.	1149. 00
Virginia Subtractions – See Schedule 502ADJ for Other Subtra	actions	i		
14. Fixed date conformity – depreciation			14.	0. 00
15. Fixed date conformity – other			15.	0. 00
16. Income from obligations of the United States				
17. Total subtractions from enclosed Schedule 502ADJ, Section B, Line 5				· <u> </u>
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

2020 Virginia **Form 502**

Name INFORMATION CONSULTING SERVICES LLC

Page 2

FEIN

Section 1 – Withholding Payment Reconciliation

87-1700245

2.	Total withholding tax paid (Entity's own payments only – see instructions.)		0. 00
3.	Overpayment. If Line 2 is greater than Line 1, subtract Line 1 from Line 2		0. 00
4.	Withholding tax due. If Line 2 is less than Line 1, subtract Line 2 from Line 1	4. <u> </u>	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 a	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 more than 6 months after the original due date). Enter 30% of the amount on Line 4		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 3 federal extended due date, enter \$1,200		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 Compare Line 6 and Line 9. If Line 6 is greater than Line 9, subtract Line 8 from Line 3. than Line 6, subtract Line 7 plus Line 9 from Line 3. Otherwise, enter overpayment amounts of the compared to the compared t	If Line 9 is greater	0. 00
11.	Amount of withholding overpayment to be credited to 2021	_	
	Amount of withholding overpayment to be refunded	_	
	ction 5 – Tax, Penalty, and Interest Due		
	Balance of tax due plus extension penalty, if applicable. If there is an amount due on Lin If there is an overpayment on Line 3 and Line 8 or Line 9 is greater than Line 3, enter Line 3.	ne 4, enter Line 4 plus Line 5. ne 5 minus Line 3 13.	0. 00
14.	Interest charges on withholding tax from Line 7		
15.	Late filing penalty. Enter the greater of Line 6 or Line 9		
16.			
Sec	ction 6 – Amount Due or Refund		
17.		17.	00
18.	Research and Development Expenses Tax Credit to be refunded directly to PTE (see in		
19.			
20.	Amount Due. If there is an amount due on Line 16 and the amount exceeds the amount subtract Line 19 from Line 16	nt on Line 19,	
21.	Amount of Refund. If there is an amount due on Line 16 and the amount is less than the 19, subtract Line 16 from Line 19. If there is an amount on Line 12, add Line 12 and Line 19.		0. 00
pro be of info	the undersigned owner and authorized representative of the pass-through entity for which by law that this return (including any accompanying schedules, statements, and east of my knowledge and belief, a true, correct, and complete return, made in good faith, the Commonwealth of Virginia. A preparer other than the authorized representative declormation of which he or she has any knowledge.	enclosures) has been examined for the taxable year stated, purs	by me and is, to the suant to the tax laws
Sign	ature of Owner or Authorized Representative	Title	Date
		PRESIDENT	
Prin	ted Name of Owner or Authorized Representative	Phone	
Indiv	vidual or Firm, Signature of Preparer, Phone Number, and Address		Date
Cla	ros & Wolverton Tax a Tamera D Wolverton (703) 585-5001	22082 Avonworth Sq, Broadla	06142021
Prin		Preparer's FEIN, PTIN, or SSN	Approved Vendor Code
Tan	nera 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.

2020 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 Peri	od Return: Beginning Date	,	2020; Ending Date		, 20
Amended Return: Enter F	Reason Code	Owner is Parti	cipating in a Unified Nonresi	dent Individu	ual Income Tax Return
Owne	r Information		Pass-Through Entit	y (PTE) Ir	nformation
Name #1	FEIN or SSN	Name	MATION CONSULTING S	E A VICES I	FEIN 97 1700245
ANIL GOEL Address	010-82-8662	Address	IATION CONSULTING S	ERVICES I	Taxable Year End Date
42767 RAVENGLASS DR					12312020
Address Continued		Address Co			
City or Town, State, and ZIP Code			AVENGLASS DR n, State,and ZIP Code		•
ASHBURN, VA 20148		ASHBU	RN, VA 20148		
ADDITIONAL OWNER INFORM	IATION (SEE INSTRUCTIONS)	-			
	t in the PTE (MM/DD/YYYY)			a.	01/01/2012
b. Owner's entity type (Enter co	ode)			b. RES	
c. Owner's participation type (E	nter code)			c. SHR	
d. Owner's participation percen	tage (Example: 47.35%)			d.	100.00%
e. Amount withheld by PTE for	the owner				0
f. If owner or entity is exempt fi	rom withholding, enter an exemptior	n code		f	
DISTRIBUTIVE OR PRO RATA	INCOME AND DEDUCTIONS (SEE	INSTRUCTIONS)			
1. Total taxable income amount	ts			1	128830. 00
2. Total deductions				2	1010. 00
3. Tax-exempt interest income		<i></i>		3	0. 00
ALLOCATION AND APPORTIC	<u>DNMENT</u>				
4. Income allocated to Virginia	(owner's share from PTE's Schedule	e 502A, Section C,	Line 2)	4	0. 00
5. Income allocated outside of	Virginia (owner's share from PTE's S	Schedule 502A, Se	ction C, Line 3(e))	5	0. 00
6. Apportionable income (owne	r's share from PTE's Schedule 502	A, Section C, Line 4)	6	128830. 00
7. Virginia apportionment percenta	age (from PTE's Schedule 502A, Section	on B – percent from L	ine 1 or Line 2(f), or 100%)	7	100.0000%
VIRGINIA ADDITIONS - OWNE	ER'S SHARE				
	reciation	7		8	1149. 00
9. Fixed date conformity – othe	r	•		9	0. 00
10. Net income tax or other tax ι	used as a deduction in determining t	axable income (see	e instructions)	10	0. 00
11. Interest on municipal or state	e obligations other than from Virginia	a		11	0. 00
	02 instructions for addition codes.)				
Code	Amount	Code .	Amount		
12a. 12c.	0. 00 12 0. 00 12		0.00		
	s 8-11 and 12a-12d)			13.	1149. 00
VIRGINIA SUBTRACTIONS - C					1110.00
	eciation			14.	0. 00
	r			15.	0. 00
	ne United States			16.	0. 00
ŭ	n 502 instructions for subtraction co				0. 0.
	Number (if applicable)	Code	Amount		
17a.	, ,,		0. 00		
17b.			0. 00		
17c.			0. 00	_	
17d.	Lines 14 16 and 17s 17d		0. 00	_ 10	0. 00
,	Lines 14-16 and 17a-17d)			18	0. 00
Use Schedule SVK-1 if you are	cianimo more additions of subtracti	ious man the Sched			

2020 Virginia Schedule VK-1

Owner FEIN or SSN 010-82-8662

87-1700245

Ρ	aq	le	2

PTE FEIN



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

Nonr	efundable Credits	,	
1.	State Income Tax Paid (see Form 502 Instructions)	1.	0. 00
2.	Neighborhood Assistance Act Tax Credit	2.	0. 00
3.	Reserved for Future Use	3.	
4.	Enterprise Zone Act – Zone Investment Tax Credit (Carryover credit only. See Schedule CR or 500CR Instructions.)	4.	0. 00
5.	Conservation Tillage Equipment Tax Credit	5.	0. 00
6.	Biodiesel and Green Diesel Fuels Tax Credit	6.	0. 00
7.	Precision Fertilizer and Pesticide Application Equipment Tax Credit	7.	0. 00
8.	Recyclable Materials Processing Equipment Tax Credit	8.	0. 00
9a.	Clean-Fuel Vehicle Tax Credit (only carryover credit allowed)	9a	0. 00
9b.	Vehicle Emissions Testing Equipment Tax Credit	9b	0. 00
10.	Major Business Facility Job Tax Credit	10	0. 00
11.	Reserved for Future Use	11	
12.	Worker Retraining Tax Credit (only carryover credit allowed)	12	0. 00
13.	Waste Motor Oil Burning Equipment Tax Credit	13	0. 00
14.	Riparian Forest Buffer Protection for Waterways Tax Credit		0. 00
	Virginia Coal Employment and Production Incentive Tax Credit	15	0. 00
16.	Enter the amount of Virginia Coal Employment and Production Incentive Tax Credit assigned to another party	16	0. 00
17.	Virginia Coal Employment and Production Incentive Tax Credit available for use by owner (Subtract Line		
	16 from Line 15)		0. 00
	Historic Rehabilitation Tax Credit		0. 00
	Land Preservation Tax Credit		0. 00
	Qualified Equity and Subordinated Debt Investments Tax Credit		0. 00
	Communities of Opportunity Tax Credit		0. 00
	Green Jobs Creation Tax Credit		
	Farm Wineries and Vineyards Tax Credit		0. 00
	International Trade Facility Tax Credit		0. 00
	Port Volume Increase Tax Credit		0. 00
	Barge and Rail Usage Tax Credit		0. 00
	Livable Home Tax Credit		0. 00
			0. 00
29.	Education Improvement Scholarships Tax Credit		0. 00
30.	Major Research and Development Expenses Tax Credit		0. 00
	Food Crop Donation Tax Credit		0. 00
	Worker Training Tax Credit		0. 00
	Total Nonrefundable Credits. (Total Lines 1, 2, 4-10, 12-14, and 17-32)	33	0. 00
			0.00
	Agricultural Best Management Practices Tax Credit	34.	0. 00
	Reserved for Future Use		
	Reserved for Future Use		
	Reserved for Future Use		
37.		37. <u></u>	
38.	2020 Coalfield Employment Enhancement Tax Credit earned to be used when completing your 2023 return.	20	0 00
20	Enter amount from your 2020 Form 306, Line 11		0. 00 0. 00
39.	Motion Picture Production Tax Credit		
40.			
41.	Total Refundable Credits. (Add Lines 34, 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).

Fixed Date Conformity - Depreciation (VA 502)

Description	Fed current deprec	Virginia current deprec	Depreciation Adjustment		
FURNITURE & FIXTURES	1,436	287	1,149		
	VA/Fed depreciation adjustment				
5 Fixed Date Conformity - Depreciation (Virginia Additions, Line 8) .			5 6 7 1,149		