Form 8879-CORP	E-file Authorization for Corporation	S		
(December 2022) Department of the Treasur Internal Revenue Service	For calendar year 2022, or tax year beginning , 20 , ending Use for <i>efile</i> authorizations for Form 1120, 1120-F or 1120 Do not send to the IRS. Keep for your records. Go to <i>www.irs.gov/Form8879CORP</i> for the latest informat	OMB No. 1545-0123		
Name of corporation	•	Employer identification	number	
SRINIX TECH LI	С	87-2973329		
Part I Inform	ation (Whole dollars only)	•		
1 Total income	(Form 1120, line 11)		1	
2 Total income	(Form 1120-F, Section II, line 11)		2	
	(loss) (Form 1120-S, line 6)		3 75,162.	
Part II Declar	ation and Signature Authorization of Officer. Be sure to get a co	opy of the corpora	ation'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 electronic income tax return and accompanying schedules and statements, and to the best of my knowledge and belief, they are 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 acknowledgment of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the corporation's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at **1-888-353-4537** no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the corporation's electronic income tax return and, if applicable, the corporation's consent to electronic funds withdrawal.

Officer's PIN: check one box only

	I authorize	to enter my PI	м [as m	ıy sign	ature
		ERO firm name	c	do no	ot ente	er all ze	ros			
	on the corporat	tion's electronically filed income tax return.								
_										
×	As an officer of	the corporation, I will enter my PIN as my signature on the corporation	tion's	s el	ectro	nically	y filed	inco	ome ta	Х
	return.									
Officer's sigr	nature	Date	Title	M	IANAC	GER				
Part III	Certification	n and Authentication								
								-		
									1	
ERO's EF	FIN/PIN. Enter yo	our six-digit EFIN followed by your five-digit self-selected PIN.	2	2	2	49	, 6	6	1 9	89
					,	do not	enter a	all zer	ros	
		meric entry is my PIN, which is my signature on the electronically f								
indicated	above. I confirm	n that I am submitting this return in accordance with the requirem	ents	of	Pub.	3112	., IRS	e-file	e App	lication
and Partic	cipation, and Put	b. 4163, Modernized e-File (MeF) Information for Authorized IRS e-fi	ile Pı	rovi	ders 1	for Bu	isines	s Re	turns.	
			03	2/1	4/20	0.2.2				
ERO's signat	ture	Date		<u> </u>	- - / 20	025				
		ERO Must Retain This Form — See Instruction	าร							
		Do Not Submit This Form to the IRS Unless Requested	d To	Do) So					

For Paperwork Reduction Act Notice, see instructions. BAA

REV 03/08/23 PRO

Form **1120-S**

Department of the Treasury

U.S. Income Tax Return for an S Corporation

OMB No. 1545-0123

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

2022

		The Service					luteo		•				
Fo	r calenc	dar year 2022 o	r tax yea	r beginning		, 2022	l, endi	ng			, 20		
ΑS	election	effective date		Name					DE	mployer	identification number		
10/03/2021 SF				SRINIX T	SRINIX TECH LLC						3329		
		activity code	TYPE OR	Number, street	, and room or suite no. If a	P.O. box, see instruc	ctions.		ED	ate incorp	porated		
r	umber (s	ee instructions)	PRINT	34972 NE	WARK BLVD UNIT	' 15			10	10/03/2021			
5	41512	2		City or town, st	tate or province, country, a	and ZIP or foreign pos	stal code	9	FT	otal assets	s (see instructions)		
c (heck if Sc	h. M-3 attached		NEWARK C	A 94560				\$		5,012.		
G	Is the c	orporation electi	ng to be	an S corporation	on beginning with this t	tax year? See instr	ruction	s. 🗌 Yes 🌶	No No				
н	Check	if: (1) 🗌 Final re	eturn (2)	Name char	nge 🛛 (3) 🗌 Address d	change 🛛 (4) 🗌 Ar	nende	d return (5)	🔲 S el	ection ter	mination		
I	Enter t	he number of sh	areholde	rs who were s	hareholders during an	y part of the tax y	/ear				2		
J	Check	if corporation: (1) 🗌 Aggr	regated activities	s for section 465 at-risk	purposes (2)	Groupe	d activities for	section	469 pas	sive activity purposes		
Ca	ution: In	clude only trade	or busine	ss income and	expenses on lines 1a t	hrough 21. See the	e instru	ctions for mor	e inforn	nation.			
	1a	Gross receipts	or sales				1a	75	,162				
	b	Returns and all					1b		7 ~				
~	с	Balance. Subtra	act line 1	b from line 1a						1c	75,162.		
Income	2				-A)					2			
õ	3				1c [´]					3	75,162.		
-	4				7 (attach Form 4797)					4	•		
	5				-attach statement) .					5			
	6	Total income (loss). Ad	ld lines 3 throu	ıgh 5					6	75,162.		
	7	Compensation	of officer	s (see instruct	ions-attach Form 11	25-E)				7			
suc	8				credits)					8			
tati	9				· · · · · · · ·					9			
li Li	10									10			
đ	11	Rents								11	6,000.		
(see instructions for limitations)	12									12			
ctic	13									13			
stru	14				ned on Form 1125-A					14			
ing	15				depletion.)					15			
see	16			-						16			
	17	Pension, profit-								17			
Deductions	18									18			
ŗ	19	Other deduction	ns (attacl	h statement)	See Statemen	it				19	64,150.		
edt	20	Total deductio								20	70,150.		
Õ	21				btract line 20 from line					21	5,012.		
	22a				capture tax (see instru		22a				· · ·		
	b	Tax from Sched				,	22b			-			
ţ	c			,	is for additional taxes)					22c			
Tax and Payments	23a				21 overpayment credit		23a						
Ĕ	b	Tax deposited					23b						
Pa	c				ach Form 4136)		23c						
pu	d	Add lines 23a t								23d			
×a	24				s). Check if Form 2220) is attached .			. 🗆	24			
Ta	25				nan the total of lines 22		amount	towed.		25			
	26				n the total of lines 22c					26			
	27			-	to 2023 estimated ta			Refunde	d.	27			
	<u> </u>	Under penalties of	perjury, I c	eclare that I have	e examined this return, incl	luding accompanying		les and stateme	ents, and	I to the be			
Si	gn				ation of preparer (other tha				ich prepa	arer has a	ny knowledge.		
	ere					MANAGEF	ર				RS discuss this return		
		Signature of office	r		Date	Title				See instru	reparer shown below? ctions. Yes No		
		Print/Type prep	oarer's nam	 1e	Preparer's signature			Date		ck 🗌 if	PTIN		
Pa		VENKATA SAT			LLI VENKATA SAI PAV		TTI 0	3/14/202		employed	P02470833		
	epare	Firm's name		BAL TAXES						ı's EIN	88-2145487		
Us	e Onl	y Firm's address	0.4 5		E BRUNSWICK	NJ 08816			_		578)965-9522		

For Paperwork Reduction Act Notice, see separate instructions. BAA

	Check accounting method: a	n (see instructions) □ Cash b ⊠ A				Yes	N
1	c	Other (specify)				103	
2	See the instructions and enter th a Business activity TECHNOLO		b Product or servi	ce SERVICE			
3	At any time during the tax year nominee or similar person? If "Y						:
1	At the end of the tax year, did th	e corporation:					
а	Own directly 20% or more, or c foreign or domestic corporation below	? For rules of construct	tive ownership, see ins				
	(i) Name of Corporation	(ii) Employer Identification Number (if any)	(iii) Country of Incorporation) If Percentage in (iv) Is 100 ite (if applicable) a Qualifie S Subsidiary Election W	d Subo	iter cha
b	Own directly an interest of 20%	or more or own dire	ctly or indirectly an inte	erest of 50% or more	in the profit loss or		
0	capital in any foreign or domesti						
	trust? For rules of constructive c						
	(i) Name of Entity	(ii) Employer Identification Number (if any)	(iii) Type of Entity	(iv) Country of Organization	(v) Maximum Percen in Profit, Loss, o	•	
-	At the and of the tay year, did th		outstanding shares of r				
ōa	At the end of the tax year, did th		outstanding shares of r	estricted stock?			
ōa	At the end of the tax year, did th If "Yes," complete lines (i) and (ii (i) Total shares of restricted s) below.					
ōa	If "Yes," complete lines (i) and (ii (i) Total shares of restricted s (ii) Total shares of non-restrict) below. stock ted stock					
5a b	If "Yes," complete lines (i) and (ii (i) Total shares of restricted s (ii) Total shares of non-restric At the end of the tax year, did th) below. .tock ted stock e corporation have any					
	If "Yes," complete lines (i) and (ii (i) Total shares of restricted s (ii) Total shares of non-restric At the end of the tax year, did th If "Yes," complete lines (i) and (ii) below. tock ted stock e corporation have any) below.	outstanding stock optic				
	If "Yes," complete lines (i) and (ii (i) Total shares of restricted s (ii) Total shares of non-restric At the end of the tax year, did th If "Yes," complete lines (i) and (ii (i) Total shares of stock outst) below. tock ted stock e corporation have any) below. anding at the end of th	outstanding stock optic				
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b 3 a b c	If "Yes," complete lines (i) and (ii (i) Total shares of restricted s (ii) Total shares of non-restrict At the end of the tax year, did the If "Yes," complete lines (i) and (ii (i) Total shares of stock outst (ii) Total shares of stock outst (ii) Total shares of stock outst Has this corporation filed, or information on any reportable tra Check this box if the corporation If checked, the corporation may Instruments. If the corporation (a) was a C corr basis determined by reference to (b) has net unrealized built-in gain gain reduced by net recognized built Did the corporation have an elect in effect during the tax year? Set Does the corporation satisfy one The corporation owns a pass-the The corporation is a tax shelter a If "Yes," complete and attach Fo) below. ted stock e corporation have any) below. canding at the end of the canding if all instrument is it required to file, ansaction? n issued publicly offered v have to file Form 828 poration before it elected the basis of the asset (on in excess of the net reconstruction 163 e instructions e or more of the followir rough entity with current verage annual gross of re more than \$27 million and the corporation has borm 8990 , Limitation or	outstanding stock option e tax year	ons, warrants, or simila Advisor Disclosure St 	ar instruments?		
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b 5 7 3) a b c	If "Yes," complete lines (i) and (ii (i) Total shares of restricted s (ii) Total shares of non-restrict At the end of the tax year, did the If "Yes," complete lines (i) and (ii (i) Total shares of stock outst (ii) Total shares of stock outst (ii) Total shares of stock outst Has this corporation filed, or information on any reportable tra Check this box if the corporation If checked, the corporation may Instruments. If the corporation (a) was a C corr basis determined by reference to (b) has net unrealized built-in gain gain reduced by net recognized built Did the corporation have an elect in effect during the tax year? Set Does the corporation satisfy one The corporation owns a pass-the The corporation is a tax shelter a If "Yes," complete and attach Fo) below. took	outstanding stock option e tax year	ons, warrants, or simila Advisor Disclosure St 	ar instruments?	×	

Form 112	20-S (2022	2)		P	age 3			
Schee	dule B	Other Information (see instructions) (continued)		Yes	No			
		the tax year, did the corporation have any non-shareholder debt that was canceled, was forgiver nodified so as to reduce the principal amount of the debt?			×			
If "Yes," enter the amount of principal reduction								
		he tax year, was a qualified subchapter S subsidiary election terminated or revoked? If "Yes," see ins			×			
	-	corporation make any payments in 2022 that would require it to file Form(s) 1099?			×			
		did or will the corporation file required Form(s) 1099?						
		prporation attaching Form 8996 to certify as a Qualified Opportunity Fund?			×			
		enter the amount from Form 8996, line 15						
	dule K	Shareholders' Pro Rata Share Items	Total am	ount				
	1	Ordinary business income (loss) (page 1, line 21)	1	5,0	12.			
	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) 3b						
	c	Other net rental income (loss). Subtract line 3b from line 3a	3c					
(s	4	Interest income	4					
Los	5	Dividends: a Ordinary dividends	5a					
) e(b Qualified dividends						
Income (Loss)	6	Royalties	6					
	7	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) 8c						
	9	Net section 1231 gain (loss) (attach Form 4797)	9					
	10	Other income (loss) (see instructions) Type:	10					
s	11	Section 179 deduction (attach Form 4562)	11					
ion	12a	Charitable contributions	12a					
nct	b	Investment interest expense	12b					
Deductions	c	Section 59(e)(2) expenditures Type:	12c					
	d	Other deductions (see instructions) Type:	12d					
	13a	Low-income housing credit (section 42(j)(5))	13a					
	b	Low-income housing credit (other)	13b					
its	c	Qualified rehabilitation expenditures (rental real estate) (attach Form 3468, if applicable)	13c					
Credits	d	Other rental real estate credits (see instructions) Type:	13d					
0	е	Other rental credits (see instructions) Type:	13e					
	f	Biofuel producer credit (attach Form 6478)	13f					
	g	Other credits (see instructions)	13g					
nal r								
Inter- national	14	Attach Schedule K-2 (Form 1120-S), Shareholders' Pro Rata Share Items-International, and						
		check this box to indicate you are reporting items of international tax relevance						
τ. Σ. α. α.	, 15a	Post-1986 depreciation adjustment	15a					
tive T	j b		15b					
Alternative Minimum Tax (AMT) Items		Depletion (other than oil and gas)	15c					
Alte inin	d	Oil, gas, and geothermal properties—gross income	15d					
Ϋ́Σ		Oil, gas, and geothermal properties—deductions	15e					
<u> </u>	f	Other AMT items (attach statement)	15f					
Items Affecting nareholder Basis	16a		16a					
ecti r B	b	Other tax-exempt income	16b					
Aff	с С	Nondeductible expenses	16c					
ehc ehc	d	Distributions (attach statement if required) (see instructions)	16d					
Items Affec Shareholder	e f	Repayment of loans from shareholders	16e 16f					
<u> </u>		Foreign taxes paid or accrued		20 6	(0.000)			

REV 03/08/23 PRO

ıle K	Shareholders' Pro Rata Share Item	s (continued)			T (otal amount
17a	Investment income				17a	
b	Investment expenses				17b	
с	Dividend distributions paid from accumul	ated earnings and p	rofits		17c	
d	Other items and amounts (attach stateme	ent)				
18			-	-	18	5,012
le L		1				
	Assets	(a)	(b)	(c)		(d)
ash .						
rade no	tes and accounts receivable			5,	012.	
ess allo	wance for bad debts	()			5,012
ventori	es					
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Jiai liai	sinces and shareholders equity					5 , 012 orm 1120-S (20
	d 18 ILE L ash ash ash ash ash ash ash ash	d Other items and amounts (attach stateme 18 Income (loss) reconciliation. Combine column. From the result, subtract the sur Ie L Balance Sheets per Books Assets	d Other items and amounts (attach statement) 18 Income (loss) reconciliation. Combine the amounts on liculum. From the result, subtract the sum of the amounts on liculum. From the result, subtract the sum of the amounts on liculum. From the result, subtract the sum of the amounts on liculum. From the result, subtract the sum of the amounts on liculum. From the result, subtract the sum of the amounts on liculum. From the result, subtract the sum of the amounts on liculum. From the result, subtract the sum of the amounts on liculum. From the result, subtract the sum of the amounts on liculum. From the result, subtract the sum of the amounts on liculum. From the result, subtract the sum of the amounts on liculum. From the results is set instructions) ash	d Other items and amounts (attach statement) 18 Income (loss) reconciliation. Combine the amounts on lines 1 through 10 in column. From the result, subtract the sum of the amounts on lines 11 through 12d at the statement is the statement of the amounts on lines 11 through 12d at the statement is statement in the statement is statement obligations ash Assets (a) (b) ash Assets (b) (c) ssa allowance for bad debts Assets (c) (c) wentories Assets (c) (c) (c) ssa government obligations Assets (c) (c) (c) wentories See instructions) Assets (c) (c) wentories (attach statement) Assets Assets (c) (c) (c) state obligations Assets Assets (c) (c) (c)	d Other items and amounts (attach statement) 18 Income (loss) reconciliation. Combine the amounts on lines 1 through 10 in the far right column. From the result, subtract the sum of the amounts on lines 11 through 12d and 16f 18 Balance Sheets per Books Beginning of tax year Assets (a) (b) (c) ash (a) (b) (c) ash (a) (b) (c) ash (a) (b) (c) eacle notes and accounts receivable (a) (b) (c) est allowance for bad debts (c) (c) (c) eventories (c) (c) (c) (c) se accountis securities (see instructions) (c) (c) (c) ther current assets (attach statement) (c) (c) (c) and other depreciable assets (c) (c) (c) ess accumulated depreciable (c) (c) (c) and (net of any amortization) (c) (c) (c) ess accumulated depreciable only) (c) (c) (c) ess accumulated depreciable (c) (c) (c)	d Other items and amounts (attach statement) 18 Income (loss) reconciliation. Combine the amounts on lines 1 through 10 in the far right column. From the result, subtract the sum of the amounts on lines 11 through 12d and 16f 18 18 Balance Sheets per Books Beginning of tax year End of tax ash (a) (b) (c) 18 ash (a) (b) (c) 18 ash (a) (b) (c) 10 sale notes and accounts receivable 5,012. 5 5,012. ss allowance for bad debts (a) (b) (c) 1 ventories (c) (c) (c) 1 1 ss gatowand effect attach statement) (c) (c) 1 1 1 ans to shareholders (c) (c) (c) 1 1 1 1 ans to shareholders (c) (c) (c) 1

Form 1	120-S (2022)				Page 5
Sche	edule M-1 Reconciliation of Income (L Note: The corporation may be re				
1 2	Net income (loss) per books Income included on Schedule K, lines 1, 2, 3c, 4, 5a, 6, 7, 8a, 9, and 10, not recorded on books this year (itemize)	5,012.	5 a	Income recorded on books this year not included on Schedule K, lines 1 through 10 (itemize): Tax-exempt interest \$	
3 a	Expenses recorded on books this year not included on Schedule K, lines 1 through 12, and 16f (itemize): Depreciation \$		6 a	Deductions included on Schedule K, lines 1 through 12, and 16f, not charged against book income this year (itemize): Depreciation \$	
b	Travel and entertainment \$		7 8	Add lines 5 and 6	
4	Add lines 1 through 3	5,012.		Subtract line 7 from line 4	5,012.

Schedule M-2

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

		(a) Accumulated adjustments account	(b) Shareholders' undistributed taxable income previously taxed	(c) Accumulated earnings and profits	(d) Other adjustments account
1	Balance at beginning of tax year				
2	Ordinary income from page 1, line 21	5,012.			
3	Other additions				
4	Loss from page 1, line 21	(
5	Other reductions	()			()
6	Combine lines 1 through 5	5,012.			
7	Distributions				
8	Balance at end of tax year. Subtract line 7 from line 6	5,012.			

REV 03/08/23 PRO

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			Final K-1	Amended		OMB No. 1545-0123
Schedule K-1 (Form 1120-S)	2022	Pa	Ded	luctions, Credits	, and	
Department of the Treasury Internal Revenue Service	For calendar year 2022, or tax year	1	Ordinary busi	iness income (loss) 2,556.	13	Credits
beginning / / 2022	ending / /	2	Net rental rea	Il estate income (loss)		
Shareholder's Share of Inc Credits, etc.	come, Deductions, See separate instructions.	3	Other net ren	tal income (loss)		
Part I Information About	-	4	Interest incor	ne		
A Corporation's employer identification 87-2973329	number	5a	Ordinary divid	dends		
B Corporation's name, address, city, sta SRINIX TECH LLC	ate, and ZIP code	5b	Qualified divi	dends	14	Schedule K-3 is attached if checked
34972 NEWARK BLVD UN	NIT 15	6	Royalties		15	Alternative minimum tax (AMT) items
NEWARK CA 94560		7	Net short-terr	m capital gain (loss)		
c IRS Center where corporation filed ret Ogden, UT 84201-001		8a	Net long-term	n capitàl gain (loss)		
D Corporation's total number of shares Beginning of tax year		8b	Collectibles (28%) gain (loss)		
End of tax year		8c	Unrecaptured	section 1250 gain		
Part II Information About	the Shareholder	9	Net section 1	231 gain (loss)	16	Items affecting shareholder basis
E Shareholder's identifying number 578-95-4081		10	Other income	e (loss)		
F Shareholder's name, address, city, sta SRIKANTH REDDY SAMA	ate, and ZIP code					
1270 BEETHOVEN CMN U FREMONT CA 94538	JNIT 206					
G Current year allocation percentage .	· · <u>51.00000 %</u>	11	Section 179 c	deduction	17	Other information
H Shareholder's number of shares Beginning of tax year End of tax year		12	Other deduct	ions		
I Loans from shareholder Beginning of tax year End of tax year	· · · \$	-				
		-				
For IRS Use Only						
or IRS						
ГЩ 		18 19	_	n one activity for at-risk n one activity for passiv		
			* See atta	ached statement f	or ad	lditional information.

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			Final K-			OMB No. 1545-0123
(Fo	redule K-1 20 22	Pa		Deductions, Credits,	, and	
	rtment of the Treasury For calendar year 2022, or tax year al Revenue Service	1	Ordinary	v business income (loss) 2 , 456 .	13	Credits
	beginning / / 2022 ending / /	2	Net renta	al real estate income (loss)		
	areholder's Share of Income, Deductions,	3	Other ne	et rental income (loss)		
	edits, etc. See separate instructions.	4	Interest i	income		
	Part I Information About the Corporation		Outliner	155-1		
A	Corporation's employer identification number 87–2973329	5a	Ordinary	/ dividends		
В	Corporation's name, address, city, state, and ZIP code SRINIX TECH LLC	5b		d dividends	14	Schedule K-3 is attached if checked
	34972 NEWARK BLVD UNIT 15	6	Royalties	s	15	Alternative minimum tax (AMT) items
	NEWARK CA 94560	7	Net shor	rt-term capital gain (loss)		
с	IRS Center where corporation filed return Ogden, UT 84201-0013	8a	Net long	-term capital gain (loss)		
D	Corporation's total number of shares Beginning of tax year	8b	Collectib	oles (28%) gain (loss)		
	End of tax year	8c	Unrecap	otured section 1250 gain		
C	art II Information About the Shareholder	9	Net sect	tion 1231 gain (loss)	16	Items affecting shareholder basis
E	Shareholder's identifying number 705-17-6879	10	Other inc	come (loss)		
F	Shareholder's name, address, city, state, and ZIP code NIKHIL GADDAM					
	1742 WILDWOOD TERRACE TRL					
	FORT MILL SC 29708					
G	Current year allocation percentage <u>49.00000 %</u>				17	Other information
Н	Shareholder's number of shares	11	Section	179 deduction		
	Beginning of tax year	12	Other de	eductions		
	End of tax year					
1	Loans from shareholder Beginning of tax year					
	End of tax year					
Only						
Use						
For IRS Use Only						
For		18	_	e than one activity for at-risk		
		19	More	e than one activity for passiv	/e activ	/ity purposes*
			* See	attached statement f	or ad	ditional information.

199A Worksheet by Activity ► Keep for your records

2022

-	on's name TECH LLC	Corporation's EIN 87-2973329	
Quick	Zoom to 199A Summary	· · · · · >	
Aggre	egation Code:	Trade or Business: <u>1120S</u> , Line <u>21</u> EIN: <u>87-2973329</u>	_
		Is this activity a qualified trade/business? Specified Service Trade or Business?	
QBI or q	ualified PTP items subjec	t to shareholder-specific determinations:	
b Add 2 a Re b Add C 3 a Re 3 a Re 3 a Re 3 a Re b Add Add 4 a Se b Add C 4 a Se b Add C 5 Ott Ott 6 a We b Add C 7 Ott B 9 UE Se	djustments djusted ordinary business djusted ordinary business ental income (loss) djustments djusted rental income (loss) djusted rental income (loss) djusted rental income (loss) djustments djustments djustments djustments djusted royalty income (loss) djustments djustments djustments djusted section 1231 gain her income (loss) djustments djustments <	loss) 1 a income (loss) b	2 c 3 c 4 c 5 6 c 7
b Ad	ljustments	b	9 c

Section 179 Carryover Detail for the	is Activity	
	Section 179 Regular Tax	Section 179 QBI
Tentative Section 179 deduction from current year assets Part I: Prior Year Carryovers by Year and Category		
 A Before 2018		0.
E 2021 Total prior year carryovers to this year		
Part II: 179 Deduction Allowed by Year and Category	Section 179 Regular Tax	Section 179 QBI
Total 179 deduction allowed for this activity in current yearAAmount allowed from 2022BAmount allowed from before 2018CAmount allowed from 2018DAmount allowed from 2019EAmount allowed from 2020FAmount allowed from 2021		
Part III: Total Carryforward to 2023 by Year and Category	Section 179 Regular Tax	Section 179 QBI
 A Carryforward from 2022. B Carryforward from before 2018. C Carryforward from 2018. D Carryforward from 2019. E Carryforward from 2020. F Carryforward from 2021. Total carryforward to next year 		
DSW9906.SCR 09/22/22		

Itemization Statement

Additional Information From 2022 US Form 1120S: Income Tax Return for S Corp

Form 1120S: S-Corporation Tax Return Gross Sales

Description			Amount
GLOBULETECH LLC			40,000.
DEVCARE SOLUTIONS			7,800.
GENZEON CORPORATION INC (10221)			17,618.
GENZEON CORPORATION INC (10218)			9,744.
		Total	75,162.
Form 1120S: S-Corporation Tax Return			
Other Deductions			Continuation Statement
Description			Amount
ACCOUNTING			160.
INSURANCE			700.
MEALS (100%)			1,980.
TELEPHONE			300.
TRAVEL			470.
CTM SOFTWARE SOLUTIONS			20,000.
MAIL BOX			300.
BACK OFFICE OPERATION EXPENSES			40,240.
	Total		64,150.

DO NOT MAIL A PAPER COPY OF THE CORPORATE OR EXEMPT ORGANIZATION TAX RETURN WITH THE PAYMENT VOUCHER.

If the amount of payment is zero, do not mail this voucher.

WHERE TO FILE:	Using black or blue ink, make check or money order payable to the "Franchise Tax Board." Write the corporation number , FEIN,
	CA SOS file number and "2022 FTB 3586" on the check or money order. Detach voucher below. Enclose, but do not staple the check
	or money order with voucher and mail to:
	FRANCHISE TAX BOARD PO BOX 942857
	SACRAMENTO CA 94257-0531
Make all checks or m institution.	noney orders payable in U.S. dollars and drawn against a U.S. financial

WHEN TO FILE:	Corporations – File and Pay by the 15th day of the 4th month following the close of the taxable year.
	S corporations – File and Pay by the 15th day of the 3rd month following the close of the taxable year.
	Exempt organizations – File and Pay by the 15th day of the 5th month following the close of the taxable year.
	Ils on a weekend or holiday, the deadline to file and pay ended to the next business day.

Corporations or exempt organizations can make payments
online using Web Pay for Businesses. Corporations or exempt
organizations can make an immediate payment or schedule
payments up to a year in advance. Go to ftb.ca.gov/pay for more
information.

DETACH HERE	IF NO PAYMENT IS	DUE, DO NOT MAIL THIS	VOUCHER	DETACH HERE
CAUTION: You may be required to TAXABLE YEAR 2022 Payme and Ex	nt Voucher for Co empt Organizatio	orporations	REV 02/17/23	california form 3586 (e-file)
2021278 SRI TYB 01-01-2022 SRINIX TECH LLC 34972 NEWARK BLVI NEWARK	TYE 12-31-2022	000000000000	22	form 0
(508) 414-4682		Amount o	f Payment	825.
	051	6181226		FTB 3586 2022

Installment 1 – File and Pay by the 15th day of the 4th month of the taxable year. When the due date falls on a weekend or holiday, the deadline to file and pay without a penalty is extended to the next business day.

If no payment is due, do not mail this form.

WHERE TO FILE: Using black or blue ink, make the check or money order payable to the "Franchise Tax Board." Write the corporation number, FEIN, and CA SOS file number, if applicable, and "2023 Form 100-ES" on the check or money order. Detach form below. Enclose, but **do not** staple, the payment with this form and mail to:

FRANCHISE TAX BOARD PO BOX 942857 SACRAMENTO CA 94257-0531

Make all checks or money orders payable in U.S. dollars and drawn against a U.S. financial institution.

ONLINE SERVICES: Corporations can make payments online using Web Pay for Businesses. Corporations can make an immediate payment or schedule payments up to a year in advance. Go to **ftb.ca.gov/pay** for more information.

DETACH HERE IF NO PAYMENT IS DUE, DO NOT MAIL THIS FORM Caution: The corporation may be required to pay electronically. See instructions. REV 02/17/23 PRO TAXABLE YEAR		
2023 Corporation Estimated Tax		100-ES
2021278 SRIN 87-2973329 000000000 TYB 01-01-2023 TYE 12-31-2023 SRINIX TECH LLC	00 23	FORM 1
34972 NEWARK BLVD UNIT 15 NEWARK CA 94560	(508) 414-4682	
Est Tax Amt 800. QSub Tax Amt Tota	l Payment Amt	800.

6101236

TAXABLE Y	'EAR									FORM
202	2 C	aliforn	ia e-file R	eturn Au	thorizat	ion for	· Co	rporat	ions	8453-C
Corporation r										CA SOS file no., or FEIN
SRINIX	TECH LI	LC						87-2973	3329	
Part I	Tax Return	Information ((whole dollars only)				I			
1 Total inco	ome (Form 1	100, line 9; For	rm 100S, line 8; Foi	rm 100W, line 9 or	Form 100X, line	6)			1	6,002.
			; Form 100S, line 2							
			100S, line 30; Form							
			00S, line 40; Form							800.
			orm 100S, line 41;		7 or Form 100X,	line 28)			5	
Part II			ronically for Taxab							
	•	•	orms 100, 100S, ar	id 100W only.)	_					
	tronic funds		7a Amount			b Withdrawa				
Part III	Schedule		ax Payments for Tax				ments to ird Payn			
0		FIISL	Payment	Second P	rayment		iru Payir	IGUL	FU	ourth Payment
8 Amoun										
	wal Date									
Part IV			ive you verified the	corporation's bank	ang information?					
10 Routing					40 T					
11 Account		n of Officer			12 Type	of account:		Checking	Savin Savin	igs
Part V				ated in Dent II If I			th at the	hankana	unt an a sified i	n Daut IV fau tha divad
										in Part IV for the direct mount listed on line 7a
-			isted on Part III, lin							
Under penalt	ties of perjury	/, I declare that	I am an officer of th	e above corporation	h and that the info	rmation I prov	vided to I	my electroni	c return origin	ator (ERO), transmitter,
return To the	ale service p e best of mv	knowledge and	e amounts in Part i I belief the corpora	tion's return is true	correct and corr	nlete If the c	orporati	s of the corp on is filing a	balance due r	2 California income tax eturn, I understand that
if the Franch	ise Tax Boar	d (FTB) does n	ot receive full and t	imely payment of t	he corporation's	ax liability, th	ie corpoi	ration will re	main liable fo	r the tax liability and all
applicable in	terest and pe	enàlties. I autho	orize the corporation	n return and accom	panying schedule	s and statem	ients be t	transmitted 1	to the FTB by [·]	the ERO, transmitter, or
provider the	service prov reason(s) f	nder. If the pro Dr the delay or	r the date when the	refund was sent.	refund is delaye	a, i autnorize	e the FII	B to disclose	e to the ERU (or intermediate service
	(-)									
Sign						MANAG	ER			
Here	Signatu	re of officer		Date		Title				
Part VI			c Return Originator	. ,	•					
I declare tha	it I have revi	ewed the abov	e corporation's retuined the	urn and that the en	tries on form FTI	3 8453-C are	comple ation's r	te and corre	ct to the best	of my knowledge. (If I , that form FTB 8453-C
										is return to the FTB; I
										uirements described in
										turn or four years from eparer, under penalties
of perjury, I	declare that	I have examine	ed the above corpo	ration's return and	accompanying s	hedules and	stateme			y knowledge and belief
they are true	e, correct, an	id complete. I	make this declarati	on based on all info	ormation of whic		-			
	ERO's				Date	Check also pa		Check if self	ERO's PTI	Ν
ERO	signature				03-14-	2023 prepar		employed]	
Must	Firm's name	(or yours	GLOBAL TAX					Firm's FEIN 88-214	5/97	
Sign	if self-employ and address		245 ROONEY					00-214	ZIP code	
			E BRUNSWIC	ĸ				NJ	08816	
										and to the best of my
knowledge a	ana beliet, th	ey are true, co	rrect, and complete	e. I make this decla	iration based on a	ui informatio	n of whi	ch i have kn	iowiedge.	
Paid	Paid				Date		Cheo	ck ∣Pa	aid preparer's F	PTIN
Preparer	preparer's					4-2023	if sel	f	02470833	
Must		,			0.5-1	1 2023	empl	oyed L P		,
Sign	Firm's name if self-emplo		GLOBAL TAX					88-214	5487	
	and address		245 ROONEY E BRUNSWIC					NJ	ZIP code 08816	

142	(AB	E YEAR California S Corporation		FORM
	2(22 Franchise or Income Tax Return		100\$
	ТΥ	21278 SRIN 87-2973329 00000000000 22 B 01-01-2022 TYE 12-31-2022 INIX TECH LLC		
		972 NEWARK BLVD UNIT 15 WARK CA 94560		
		Iule Q Questions (continued on Side 3) FINAL RETURN? Dissolved Surrendered (withdrawn) Merged/Reorganized	ction	338 sale QSub election
		Enter date (mm/dd/yyyy)	. ●	
	2.	s the S corporation deferring any income from the disposition of assets?		Yes × No
		If "Yes" enter the year of disposition (yyyy)	•	IRC §1033 • Othe
D		nterest) of this corporation or any of its subsidiaries that owned California real property (i.e., land, buildings), l such property for a term of 35 years or more, or leased such property from a government agency for any term?	eased	
		During this taxable year, did this corporation or any of its subsidiaries acquire control or majority ownership (m 50% interest) in another legal entity that owned California real property (i.e., land, buildings), leased such pro a term of 35 years or more, or leased such property from a government agency for any term?	perty	for
		During this taxable year, has more than 50% of the voting stock of this corporation cumulatively transferred in or more transactions after an interest in California real property (i.e., land, buildings) was transferred to it that we excluded from property tax reassessment under Revenue and Taxation Code Section 62(a)(2) and it was not represented by previous year's tax return?	vas portec	
		Yes requires filing of statement, penalties may apply – see instructions.)		
	1	Ordinary income (loss) from trade or business activities from Schedule F (Form 100S, Side 4), line 22 or federal Form 1120-S, line 21. If Schedule F (Form 100S, Side 4) was not completed, attach federal Form 1120-S, page 1, and supporting schedules	1	5,012.00
s	2	Foreign or domestic tax based on income or profits and California franchise or income tax deducted	2	00
tmen	3	Interest on government obligations	3	00
Adjus	4	Net capital gain from Schedule D (100S), Section A & Section B. Attach Schedule D (100S). See instructions $ullet$	4	00
State Adjustments	5	Depreciation and amortization adjustments. Attach Schedule B (100S) \ldots	5	00
	6	Portfolio income	6	00
	7	(-)	7	990.00
	8	Total. Add line 1 through line 7	8	6,002.00

REV 02/17/23 PRO



State Adjustments <i>(cont.)</i>	9	Dividends received deduction. Attach Schedule H (100S)	00		
is (ci	10	Water's-edge dividend deduction. Attach Schedule H (100S) • 10	00		
nent	11	Charitable contributions. See instructions	00		
justi	12	Other deductions. Attach schedule(s)	00		
ie Ad	13	Total. Add line 9 through line 12	•	13	00
Stat	14	Net income (loss) after state adjustments. Subtract line 13 from Side 1, line 8	•	14 6,002	. 00
	15	Net income (loss) for state purposes. Use Schedule R if apportioning or allocating income	•	15 6,002	. 00
e	16	R&TC Section 23802(e) deduction. See instructions	00		
Net Income	17	Net operating loss (NOL) deduction. See instructions • 17	00		
Vet II	18	EZ, TTA, or LAMBRA NOL carryover deduction. See instructions • 18	00		
CAI	19	Disaster loss deduction. See instructions	00		
	20	Net income for tax purposes. Combine line 16 through line 19. Subtract the result from line 15		20 6,002	• 00
	21	Tax. 1.5000 % x line 20 (at least minimum franchise tax, if applicable). See instructions		21 800	• 00
	22	Credit name code ● amount ▶ 22	00		
	23	Credit name code ● amount ▶ 23	00		
	24	To claim more than two credits, see instructions	00		
sex	25	Add line 22 through line 24. Attach Schedule C (100S)	•	25	00
Taxes	26	Balance. Subtract line 25 from line 21 (not less than minimum franchise tax plus QSub annual tax(es), if an	oplicable) ●	26 800	. 00
	27	Tax from Schedule D (100S). Attach Schedule D (100S). See instructions	• • • • • • •	27	00
	28	Excess net passive income tax. See instructions	• • • • • • •	28	00
	29	Pass-through entity elective tax. See instructions	• • • • • • •	29	00
	30	Total tax. Add line 26 through line 29	•	30 800	. 00
	31	Overpayment from prior year allowed as a credit	00		
ents	32	2022 Estimated tax/QSub payments. See instructions	00		
Payments	33	2022 Withholding (Forms 592-B and/or 593). See instructions	00		
	34	Amount paid with extension of time to file tax return	00		
	35	Amount paid with form FTB 3893	00		
	36	Total payments. Add line 31 through line 35.	· · · · · · •	36	00
	37	Use tax. This is not a total line. See instructions	00		
	38	Payments balance. If line 36 is more than line 37, subtract line 37 from line 36	••••••	38	00
	39	Use tax balance. If line 37 is more than line 36, subtract line 36 from line 37	••••••	39	00
e	40	Franchise or income tax due. If line 30 is more than line 38, subtract line 38 from line 30	••••••	40 800	• 00
it Du	41	Overpayment. If line 38 is more than line 30, subtract line 30 from line 38	••••••	41	00
nour	42	Amount of line 41 to be credited to 2023 estimated tax	••••••	42	00
Refund or Amount Due	43	Refund. Subtract line 42 from line 41	••••••	43	00
pun		See instructions to have the refund directly deposited.			
Ref		Checking			
		Savings			
		43a. ● Routing number 43b. ● Type 43c. ● Account number	•	25	00
	44	a Penalties and interest		44a 25	• 00
		b Check if estimate penalty computed using Exception B or C on form FTB 5806. See instruct	0		
REV		Total amount due. Add line 39, line 40, line 42, and line 44a. Then, subtract line 41 from the result		45 825	. 00
		Side 2 Form 100S 2022 051 3612224			

Sc	hedule	e Q Questions (c	ontinued from Si	de 1)						
С	Principa	al business activity co	de. Do not leave bla	.nk				<u>54</u>	1512	
		s activity TECHNOL								
D	Is this S	6 corporation filing on	a water's-edge bas	is pursuant to R&	TC Sections 25110	and 25113	for the current t	axable year?	• 🗆 Yes	× No
Е	Does th	is tax return include Q	Jualified Subchapter	r S Subsidiaries?					• 🗆 Yes	× No
F		corporated (mm/dd/yy			Vhere: State <u>CA</u>					
G	Maximu	ım number of shareho	olders in the S corpo	pration at any time	e during the year. D	o not leave l	blank			2
н	Date bu	siness began in Califo	ornia or date income	e was first derived	from California sou	urces (mm/c	1d/yyyy)	10/0	03/2021	
L		corporation under au								× No
J	Effective	e date of federal S elec	ction (mm/dd/yyyy)					10/0	3/2021	
L	Account	ting method					• (1) 🗆 Cash	(2) 🗙 Accr	ual (3) 🗌	Other
Μ		n of principal accounti								
Ν	"Doing	business as" (DBA) na	ame. See instructio	ns	•					
0		required information se Tax Board?	returns (e.g., feder	al Forms 1099, 83	300, and state Form	s 592, 592-	B etc.) been file	d with the	N/A 🗌 Yes	🗆 No
Ρ	Is this S	6 corporation apportio								
Q		S corporation include " complete and attach				is return? S	ee instructions f	or definitions .	. • 🗆 Yes	🗆 No
R		S corporation file the							. • 🗆 Yes	× No
S		FTB 3544, Side 2, Par								
т	Check if	f corporation:					activities for IRC vities for IRC Se			
	(2) If "Y	this business entity p fes," when was the las	st report filed? (mm	/dd/yyyy) •	(3) /		remitted s			
		apture due to S corpo	•					1		00
		computed under the lo								00
		on tax attributable to i								00
•					r installment obliga			3b		00
4	IRC Sect	tion 197(f)(9)(B)(ii) el	,		0			4		00
		capture name					•	5		00
6	Combine	e line 1 through line 5.	Revise the amount	on Side 2, line 40	0 or line 41, whiche	ver applies,				
	by this a	mount. Write "Schedu	ule J" to the left of I	ine 40 or line 41 .			• • • • • • • • • • •	6		00
		Under penalties of perjur							wledge and beli	ef, it is
Sig Her		true, correct, and comple	te. Declaration of prepar	rer (other than taxpaye	,		preparer has any k Date	nowledge.		
		Signature of officer			ANAGER		03-14-2023	· ·		
		Officer's email address	(optional)					(508)414	-4682	
Pai	d parer's	Preparer's 01 signature			Date	4 0000	Check if self- employed ►□	PTIN DOD47002	r	
	e Only	-	<u>TA SAI PAVA</u> GLOBAL TAX		DIPALLI 03-1	4-2023		P0247083 ● Firm's FEIN	3	
		Firm's name (or yours, if self-employed)	► <u>245 ROONEY</u>					88-21454	87	
		and address	<u>e</u> brunswic	<u>K NJ 08816</u>				 Telephone (678)965 	5-9522	
_		May the FTB discuss	<u>s this retu</u> rn with th	e preparer shown	above? See instruc	tions	<u>.</u>	. • 🗆 Yes 🗵		
REV	02/17/23 F	PRO								

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Sc	hed	lule F Computation of Trade or Business Income. See instructions.				
	1	a) Gross receipts or sales75, 162. b) Less returns and allowances c) Balance		1c	75,162.	00
		Cost of goods sold from Schedule V, line 8	-	2		00
me	3	Gross profit. Subtract line 2 from line 1c.	\bullet	3	75,162.	00
ncome	4	Net gain (loss). Attach schedule		4		00
-	5	Other income (loss). Attach schedule		5		00
	6	Total income (loss). Combine line 3 through line 5	-	6	75,162.	00
	7	Compensation of officers. Attach schedule. See instructions.	\bullet	7		00
	8	Salaries and wages		8		00
	9	Repairs and maintenance.		9		00
	10	Bad debts		10		00
	11			11	6,000.	00
	12	Taxes		12		00
us	13			13		00
Deductions	14	a) Depreciation 🔍 b) Less depreciation reported elsewhere 🔍 c) Balance		14c		00
inpe		Depletion	\frown	15		00
ő		Advertising		16		00
	17	Pension, profit-sharing plans, etc		17		00
	18	Employee benefit programs		18		00
	19	a) Total travel and entertainment (a) 2,450. b) Deductible amount		19b	2,450.	00
	20	Other deductions. Attach schedule.		20	61,700.	00
	21	Total deductions. Add line 7 through line 20.		21	70,150.	00
	22	Ordinary income (loss) from trade or business. Subtract line 21 from line 6. Enter here and on Side 1, line 1		22	5,012.	00

The corporation may not be required to complete Schedule L and Schedule M-1. See Schedule L and Schedule M-1 instructions for reporting requirements.

Schedule L Balance Sheet	Beginning of	taxable year	End of taxable year				
Assets	(a)	(b)	(C)	(d)			
1 Cash				•			
2 a Trade notes and accounts receivable			5,012				
b Less allowance for bad debts			()	5,012			
3 Inventories				•			
4 Federal and state government obligations							
5 Other current assets. Attach schedule(s)				•			
6 Loans to shareholders. Attach schedule(s)		•		•			
7 Mortgage and real estate loans							
8 Other investments. Attach schedule(s)				•			
9 a Buildings and other fixed depreciable assets							
b Less accumulated depreciation		•	()	•			
IO a Depletable assets							
b Less accumulated depletion	()		()				
1 Land (net of any amortization)		•		•			
2 a Intangible assets (amortizable only)							
b Less accumulated amortization.	()		()				
13 Other assets. Attach schedule(s)		•					
4 Total assets		•		• 5,012			
Liabilities and shareholders' equity							
5 Accounts payable.							
6 Mortgages, notes, bonds payable in less than 1 year							
7 Other current liabilities. Attach schedule(s)							
8 Loans from shareholders. Attach schedule(s)		•		•			
9 Mortgages, notes, bonds payable in 1 year or more .		•		•			
0 Other liabilities. Attach schedule(s)							
1 Capital stock		•		•			
2 Paid-in or capital surplus		•		•			
3 Retained earnings		•		• 5,012			
4 Adjustments. Attach schedule(s)							
25 Less cost of treasury stock		●()	•(
26 Total liabilities and shareholders' equity				5,012			

Side 4 Form 100S 2022

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Net income per books	5,012.	5	Income recorded on books this year not	
Income included on Schedule K, line 1 through			included on Schedule K, line 1 through	
line 10b, not recorded on books this year			line 10b (itemize)	
(itemize)			a Tax-exempt interest \$	
•			b Other \$	
Expenses recorded on books this year not			c Total. Add line 5a and line 5b	
included on Schedule K, line 1 through		6	Deductions included on Schedule K, line 1	
line 12e (itemize)			through line 12e, not charged against	
a Depreciation \$			book income this year (itemize)	
b State taxes \$			a Depreciation \$	
c Travel and			b State tax refunds \$	
entertainment \$ 990 .			c Other \$	
d Other\$			d Total. Add line 6a through line 6c	
e Total. Add line 3a through line 3d	990.	7	Total. Add line 5c and line 6d	
Total. Add line 1 through line 3e		8	Income (loss) (Schedule K, line 19, col. d).	
	6,002.		Subtract line 7 from line 4	6,002

Schedule M-1 Reconciliation of Income (Loss) per Books With Income (Loss) per Return.

Schedule M-2 CA Accumulated Adjustments Account, Other Adjustments Account, and Other Retained Earnings. See instructions.

Important: Use California figures and federal procedures.	(a) Accumulated adjustments account	(b) Other adjustments account	(c) Other retained earnings (see instructions)
1 Balance at beginning of year	•		۲
2 Ordinary income from Form 100S, Side 1, line 1	5,012.		
3 Other additions	0		
4 Loss from Form 100S, Side 1, line 1	()		
5 Other reductions		()	()
6 Combine line 1 through line 5	5,012.		
7 Distributions other than dividend distributions	•		
8 Balance at end of year. Subtract line 7 from line 6	• 5,012.		
9 Retained earnings at end of year. Add line 8, column (a) through column (c)		•	5,012.
10 If the corp. has C corp. E&P at the end of the taxable year, enter the amount. S	Gee instructions	•	

Schedule V Cost of Goods Sold • 1 1 Inventory at beginning of year 2 Purchases 2 Cost of labor 3 3 Other IRC Section 263A costs. Attach schedule. • 4 4 • 5 5 6 6 • 7 7 Inventory at end of year • 8 8 Cost of goods sold. Subtract line 7 from line 6

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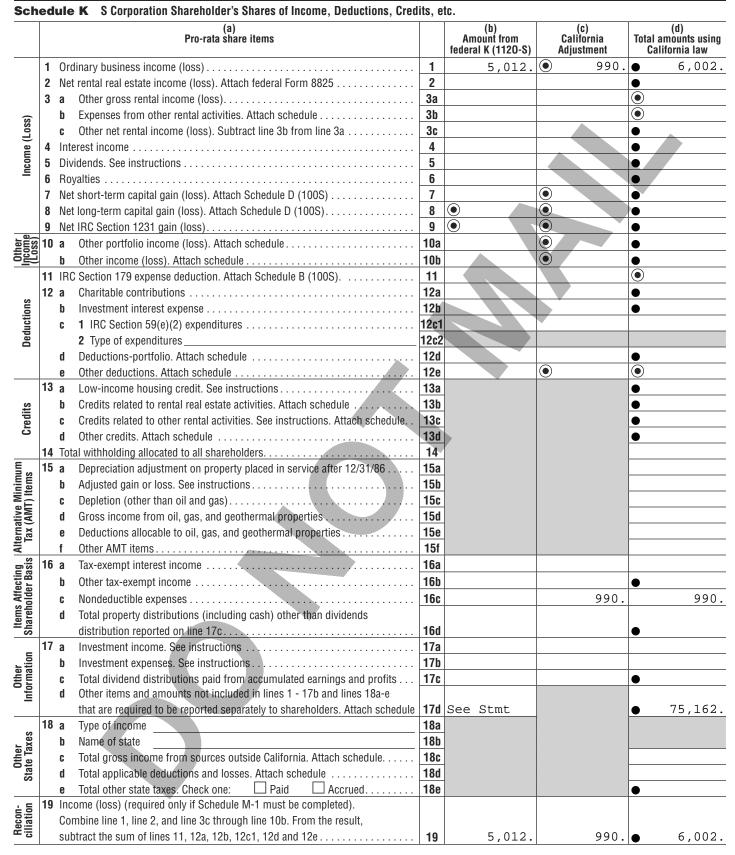
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TAXABLE YEAR 2022

Underpayment of Estimated Tax by Corporations

Foi	r calendar year 2022 or fiscal year beginning (mm/dd/yyyy)		, an	d ending (mm/dd/yyy	y)	· · ·			
Cor	poration name							California o	corporation	number
SR	INIX TECH LLC							202127	8	
Pa	rt I Figure the Underpayment									
1	Current year's tax. See instructions							1		800.
			(;	a)	(b))	(c)	((
2	Installment due dates. See instructions	2	04-15	-2022	06-15-	2022	09-15	-2022	12-15	-2022
3	Percentage required. See instructions	3	30)%	70% les			ss prior	100% le	ss prior
			(not less	than min.)						
	Amount due. See instructions	4		800.		0.		0.		0.
5	a Amount paid or credited for each installment	5a								
	b Overpayment from previous installment. See instructions	5b								
	Add line 5a and line 5b	6							-	
7	Underpayment (subtract line 6 from line 4). See instructions.									
	Overpayment (subtract line 4 from line 6).									
	If line 7 shows an underpayment for any installment,									
	go to Part IV, Exceptions Worksheets.	7		800.		0.		0.		0.
Ра	rt II Exceptions to the Penalty. See instructions. If Exception	A, line	8a is met f	or all four i	installments	, do not a	ttach this f	orm to the	return.	
	If Exception B or C is met, for any installment, attach form	FTB 5	806 to the	back of For	rm 100, Forr	n 100W, I	Form 100S	or Form 10)9.	
	(check the applicable boxes)		Yes	No	Yes	No	Yes	No	Yes	No
8	a Exception A – Regular Corporations, line 26 met?	8a					<i>•</i>			
	b Exception A – Large Corporations, line 30, met?	8b								
9	Exception B (line 42) met?	9								
10	Exception C (line 64) met?	10								
Ра	rt III Figure the Penalty. If line 7 shows an underpayment for	any ins	stallment a	nd none of	the three ex	ceptions i	s met, figu	re the pena	Ity for that	
	installment by completing line 11 through line 22.	5							5	
11	Enter the earlier of the payment date, or the 15th day of									
	the 3rd month after the close of the taxable year.									
	Form 109 filers, see instructions.	11	03-15	-2023	03-15-	2023	03-15	-2023	03-15	-2023
12	Number of days from date shown on line 2 to date shown on line 11 .	12	00 10	334	00 10	2020	00 10	2020	00 10	
	Number of days on line 12 before 7/01/22, or	H		551						
	the payment date, whichever is earlier.	13		76						
14	Number of days on line 12 after 6/30/22 and before 1/01/23, or									
	the payment date, whichever is earlier.	14		184						
15	Number of days on line 12 after 12/31/22 and before 7/01/23, or									
	the payment date, whichever is earlier. Calendar year corporations ,									
	see instructions.	15		74						
16	For fiscal year corporations only. Number of days on line 12 after			, 1						
	6/30/23 and before 1/01/24. See instructions	16								
17	For fiscal year corporations only. Number of days on line 12 after									
	12/31/23 and before 2/15/24. See instructions	17								
18		<u> </u>								
	Number of days in taxable year x 3% x line 7	18		5.						
19	Number of days on line 14									
	Number of days in taxable year x 3% x line 7	19		12.						
20	Number of days on line 15									
	Number of days in taxable year x 5% x line 7	20		8.						
21	Number of days on line 16									
	Number of days in taxable year x % (see instructions) x line 7	21								
22	Number of days on line 17									
	Number of days in taxable year x % (see instructions) x line 7	22								
22a	Add amounts for each column from line 18									
•	through line 22.	22a		25.						
22i	Total estimated penalty due. Add line 22a, column (a) through		nn (d). Ente		on Form 10	0, line 43	a;			
	Form 100W, line 40a; Form 100S, line 44a; or Form 109, line 2		. ,					22 b		25.

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Part IV Exceptions Worksheets. Even if line 7 shows an underpayment for any installment, the Franchise Tax Board will **not** assess a penalty **if** timely payments were made and they equal or exceed the amount determined under any of the three exceptions for the same installment period.

Ex	ception A — Prior Year's Tax — Regular Corpora	ation	5							
23	Prior year's tax (the return must have been for a full 12 months)							23		
			((a)	(b)	(c)	(1	d)
				0%	7()%	70)%	10	0%
			(not less	than min.)						
	Enter line 23 x the percentage shown	24								
	Amount paid by the installment due date (cumulative)	25				1				1
26	If line 25 is greater than line 24, the exception is met.									
	Check "Yes" here and check the applicable "Yes" box in									
	Part II, line 8a. If line 24 is greater than line 25, the exception									
	is not met. Check "No" here and check the applicable								*	
	"No" box in Part II, line 8a	26	Yes	No	Yes	No	Yes	No	Yes	No
	ception A — Prior Year's Tax — Large Corporati	ons								
	e this exception only if prior year tax is less than current year tax.									
27	Current year's tax. See instructions					<u></u>	<u></u>	27		
							1st Inst	tallment	2nd Ins	tallment
28	a Installment due. Enter line 23 x 30%					28 a				
	b Installment due. Enter line 27 x 70%					28 b				
29	Amount paid by the installment due date (cumulative)					29				
30	If line 29 is greater than line 28 for both installments, the except	ion is r	net. Check	« "Yes" here	for each					
	installment and check the applicable "Yes" box in Part II, line 8b.	. The ex	ception to	the penalty	/ applies					
	only if line 29 is greater than line 28 for both installments. If line	28 is (greater tha	in line 29 fo	r					
	either installment, the exception is not met. Check "No" here and	l check	the applic	able						
	"No" box in Part II, line 8b					30	Yes	No	Yes	No
See	e instructions regarding amounts to use for installment 3 and inst	allment	4.							
Ex	ception B — Tax on Annualized Current Year Incom	ne		(a)) (b)	(1	c)	(1	d)
Ent	er number of months for each period. See instructions \blacktriangleright \ldots .									
31	Enter taxable income for each annualization period	31								
32	Annualization amounts. See instructions	32								
33	a Annualized taxable income. Multiply line 31 by line 32	33a								
	b R&TC Section 23802(e) deduction (S corporations only)	33b								
	c Net income. Subtract line 33b from line 33a	33c								
34	Tax. Multiply line 33c by the current tax rate	34								
35	Tax credits for each payment period.	35								
36	Subtract line 35 from line 34	36								
37	Other taxes*	37								
38	Total tax. Add line 36 and line 37	38								
39	Applicable percentage. For short period returns (taxable year									
	of less than 12 months), see the instructions for Part I, line 3.	39		0%	7	0%	70)%	10	0%
			(not less	than min.)						
40	Installment due. Multiply line 38 by line 39	40								
41	Amount paid by the installment due date (cumulative)	41								
42	If line 41 is greater than line 40, the exception is met.									
	Check "Yes" here and check the applicable "Yes" box in									
	Part II, line 9. If line 40 is greater than line 41, the									
	exception is not met. Check "No" here and check the									
	applicable "No" box in Part II, line 9	42	Yes	No	Yes	No	Yes	No	Yes	No
*lı	nclude alternative minimum tax, S corporation taxes from Schedu	le D (10								
	ount credit recapture, and the minimum franchise tax.	`								

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Part IV Exceptions Worksheets (Continued)

Ex	ception C — Tax on Annualized Seasonal Incon	ıe	-	a)	(1	-	-	:)	(0	-
			1st 3 i	months	1st 5 n	nonths	1st 8 r	nonths	1st 11 i	months
43	Enter taxable income for the following periods:									
	a Taxable year beginning in 2019	43a								
	b Taxable year beginning in 2020	43b								
	c Taxable year beginning in 2021	43c								
44	Enter taxable income for each period for the taxable									
	year beginning in 2022	44								
			1st 4 i	months	1st 6 n	nonths	1st 9 r	nonths	Entire	e year
45	Enter taxable income for the following periods:									
	a Taxable year beginning in 2019	45a								
	b Taxable year beginning in 2020	45b							~	
	c Taxable year beginning in 2021	45c								
46	Divide the amount in each column on line 43a by the									
	amount in column (d) on line 45a	46								
47	Divide the amount in each column on line 43b by the									
	amount in column (d) on line 45b	47								
48	Divide the amount in each column on line 43c by the									
	amount in column (d) on line 45c	48								
	Add line 46 through line 48	49					¥			
50	Divide line 49 by 3	50								
			1st 4 i	months	1st 6 n	nonths	1st 9 r	nonths	Entire	e year
51	5	51 a								
	b R&TC Section 23802(e) deduction. (S corporations only) .	51b								
	c Net income. Subtract line 51b from line 51a	51c								
	Tax. Multiply line 51c by the current tax rate	52								
53	Divide the amounts in column (a) through column (c) on									
	line 45a by the amount in column (d) on line 45a	53								
54	Divide the amounts in column (a) through column (c) on									
	line 45b by the amount in column (d) on line 45b	54								
55	Divide the amounts in column (a) through column (c) on									
	line 45c by the amount in column (d) on line 45c	55								
	Add line 53 through line 55	56								
	Divide line 56 by 3	57								
58	Multiply the amounts in column (a) through column (c) of									
	line 52 by the amounts in the corresponding column of line 57.									
	In column (d), enter the amount from line 52, column (d)	58								
	Tax credits for each payment period.	59								
	Subtract line 59 from line 58	60								
61	Other taxes*	61	(ast lass							
			(not less	than min.)						
	Total tax. Add line 60 and line 61	62								
	Amount paid by the installment due date (cumulative)	63				I				I
64	If line 63 is greater than line 62, the exception is met.									
	Check "Yes" here and check the applicable "Yes" box in									
	Part II, line 10. If line 62 is greater than line 63, the exception									
	is not met. Check "No" here and check the applicable									
	"No" box in Part II, line 10	64	Yes	No	Yes	No	Yes	No	Yes	No

* Include alternative minimum tax, S corporation taxes from Schedule D (100S) and from the excess net passive income, QSub annual tax, installment amount credit recapture, and the minimum franchise tax.

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Attach to return (after all other FTB forms)

	California	a Corporation No. 78
I – Other Additions		
Payments to clubs that restrict membership or use	. 2 . 3 . 4 . 5 . 6a . b	990.
Total other state adjustments to ordinary income (loss) Other (itemize): MEALS AND ENTERTAINMENT Total to Form 100S, line 7		
II – Other Deductions		
Entries made on lines 1 through 14 will flow to line 15 Interest received on obligations of the federal government *	. 2 . 3 . 4 . 5 . 6 . 7 . 8 . 9 . 10 . 11 . 12 . 13 a . 14 . 14 . 15 	
	California ordinary net gain (loss)	IIX TECH LLC 20212' I - Other Additions I Entries made on lines 1 through 8 will flow to line 9 1 California ordinary net gain (loss) 1 Payments to clubs that restrict membership or use 2 Meals and Entertainment 3 Rental real estate income and net income from other rental activities. 4 Other income, Schedule K, line 10b 5 Adjustments from Form 3801, CA Worksheet for Passive Activities 6 Adjustment after PAL (losses overstated on line 4). 6 Total line 5 passive activity adjustments. 7 Other state adjustments to ordinary income (loss) 7 Total other state adjustments to ordinary income (loss) 7 MEALS AND ENTERTAINMENT 1 Interest received on obligations of the federal government * 1 Interest received on obligations of the federal government * 1 Interest received on obligations of the state of California * 2 Meals and Entertainment 2 Meals and Entertainment 3 Federal ordinary net gain (loss) 4 Rental real estate loss and net loss from other rental activities 5 IRC Section 179

* S corporations subject to Income Tax (not franchise tax) should note that interest received on obligations of the federal government and on obligations of the state of California and its political subdivisions is exempt from income tax. If such interest is reported on Form 100S, line 3, deduct it on this statement Part II, line 1 or 2, as applicable. Attach a schedule that clearly shows how each deduction was computed.

CALIFORNIA SCHEDULE

K-1 (100S)

TAXABLE YEARShareholder's Share of Income,2022Deductions, Credits, etc.

ļ	TYB 01-01-2022 TYE 12- 578-95-4081 SRIKANTH REDDY SAMA	31-2022			
	1270 BEETHOVEN CMN UNIT 2 FREMONT CA 94	06 538			
	2021278 87-29733 SRINIX TECH LLC	29			
	34972 NEWARK BLVD UNIT 15 NEWARK CA 94	560			
A C	urrent year allocation percentage				1.0 0 0 0 %
	hareholder's number of shares:			and Ending	
CLO	pans from shareholder:	Beginning S	6	and Ending \$	
DR	eportable transaction or tax shelter registration number	er(s):			
	heck here if this is:	• • • • • • • • • • • • • • • • • • • •	. • (1) 🗌 A final S	Schedule K-1 (2) 🗌 A	n amended Schedule K-1
F W	'hat type of entity this shareholder? ● (1) 🗙 Individ	ual (2) Estate/trus	st (3) 🗌 Qualified ex	cempt organization (4)	Single member LLC
	this shareholder a resident of California?				× Yes ► No
Caut	ion: Refer to the shareholder's instructions for Schedu			1	
	(a) Pro-rata share items	(b) Amount from federal Schedule K-1 (Form 1120-S)	(c) California adjustment	(d) Total amounts using California law. Combine col. (b) and col. (c) where applicable	(e) California source amounts and credits
	1 Ordinary business income (loss)	2,556.	505.	• 3,061.	▶ 3,061.
	2 Net rental real estate income (loss).				▶ ●
(;	3 Other net rental income (loss)4 Interest income				
(Los	5 Dividends. See instructions.			•	
ncome (Loss)	6 Royalties			•	
Inc	7 Net short-term capital gain (loss)			•	
	8 Net long-term capital gain (loss)			•	►
- ec	9 Net IRC Section 1231 gain (loss)			•	
Other Income	10 a Other portfolio income (loss). Attach schedule. b Other income (loss)				
		I		REV 02/	17/23 PRO

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Schedule K-1 (100S) 2022 Side 1

nare	eholder's name			Shareholder's identifying n	umber
SR:	IKANTH REDDY SAMA			578-95-4081	
autio	on: Refer to the shareholder's instructions for Schedu	le K-1 (100S) before enter	ing information from thi	s schedule on your Californ	ia tax return.
	(a) Pro-rata share items	(b) Amount from federal Schedule K-1 (Form 1120-S)	(c) California adjustment	(d) Total amounts using California law. Combine col. (b) and col. (c) where applicable	(e) California source amounts and credits
	11 IRC Section 179 expense deduction. Attach schedules				
Deductions	12 a Charitable contributions b Investment interest expense c 1 IRC Section 59(e)(2) expenditures			•	Þ.
2	2 Type of expenditures d Deductions-portfolio				
	13 a Low-income housing credit. See instructions. Attach schedule. b Credits related to rental real estate activities	· · · · · ·		•	•
Creatts	other than on line 13(a). Attach schedule c Credits related to other rental activities.			•	•
	See instructions. Attach schedule d Other credits. Attach schedule 14 Total withholding (equals amount on Form 592-B			•	▶ ▶
	if calendar year) 15 a Depreciation adjustment on property placed in			•	•
Items	service after 12/31/86 b Adjusted gain or loss c Depletion (other than oil and gas) d Gross income from oil, gas, and geothermal properties				
	e Deductions allocable to oil, gas, and geothermal properties f Other AMT items. Attach schedule				
Basis	16 a Tax-exempt interest income b Other tax-exempt income c Nondeductible expenses		505.	505.	50!
Shareholder	 d Total property distributions (including cash) other than dividends distribution reported on line 17c e Repayment of loans from shareholders 			•	•
	 a Investment income. See instructions b Investment expenses. See instructions				P
	from accumulated earnings and profits. See instructions d Other information. See instructions			• 38,333.	•
aves	18 a Type of income b Name of state c Total gross income from sources outside				
	California. Attach schedule d Total applicable deductions and losses. Attach schedule.				
-	e Total other state taxes. Check one: Paid Accrued 19 More than one activity for at-risk purposes. See	instruction-	00	activity for passive activity p	

Shareh	nolder's	name		Shareholder's identifying number					
SRI	KANTI	H REDDY SAMA		578-95-4081					
	Tab	le 1 — Each shareholder's share of nonbusines							
	Inte	rest \$	Royalties \$	Dividends \$					
	IRC	Section 1231 Gains/Losses \$	Capital Gains/Losses \$	Other \$					
	FO	R USE BY SHAREHOLDERS ONLY. SEE INSTRU	CTIONS.						
	Tab	le 2 — Shareholder's pro-rata share of busines							
	Α.	Shareholder's share of the S corporation's busi	iness income \$						
ion	В.	B. Shareholder's share of the nonbusiness income from real and tangible property sourced or allocable to California:							
format		Capital Gains/Losses \$	Rents/Ro	byalties \$					
der Inf		IRC Section 1231 Gains/Losses \$	Other	\$					
Other Shareholder Information	C.	C. Shareholder's share of the S corporation's property, payroll, and sales:							
Other S		Factors	Total within and outside California	Total within California					
		Property: Beginning	\$	\$					
		Ending	\$	\$					
		Annual Rent Expense	\$	\$					
		Payroll	\$	\$					
		Sales	\$	\$					



Additional Information From Schedule K-1:SH's Share of Inc, Ded, Credits, etc. (SRIKANTH REDDY SAMA)

		1			
Description	CA Law Amounts	CA Source Amounts			
LINE 16C, NON DEDUCTIBLE EXPENSES:					
NONDEDUCTIBLE PORTION OF MEALS	505.		505		
SUBTOTAL NON DEDUCTIBLE EXPENSES	505.		505		
JINE 17D, OTHER INFO:					
AGGREGATE GROSS RECEIPTS	38,333.				
SUBTOTAL OTHER INFO	38,333.				
Total	77,676.		1,010		

Schedule K-1:SH's Share of Inc. Ded. Credits. etc. (SRIKANTH REDDY SAMA)

CALIFORNIA SCHEDULE

K-1 (100S)

Shareholder's Share of Income, Deductions, Credits, etc. TAXABLE YEAR 2022

	TYB 01-01-2022 TYE 12- 705-17-6879	31-2022			
	IIKHIL GADDAM				
	.742 WILDWOOD TERRACE TRL FORT MILL SC 29	708			
	2021278 87-29733 SRINIX TECH LLC	29			
	4972 NEWARK BLVD UNIT 15 IEWARK CA 94	560			, ,
A Cu	rrent year allocation percentage			• 4	9.0 0 0 0 %
B Sh	areholder's number of shares:	Beginning		and Ending	
C Lo	ans from shareholder:	Beginning \$		and Ending \$	
D Re	portable transaction or tax shelter registration numb	er(s):			
E Ch	eck here if this is:		. • (1) 🗌 A final S	Schedule K-1 (2) 🗌 A	An amended Schedule K-1
	nat type of entity this shareholder? ● (1) 🗙 Individ	ual (2) Estate/trus	.t (3) Qualified ex	cempt organization (4)	Single member LLC
	this shareholder a resident of California?				Yes ► × No
	on: Refer to the shareholder's instructions for Schedu				
	(a) Pro-rata share items	(b) Amount from federal Schedule K-1 (Form 1120-S)	(c) California adjustment	(d) Total amounts using California law. Combine col. (b) and col. (c) where applicable	(e) California source amounts and credits
	1 Ordinary business income (loss)	2,456.	485.	• 2,941.	▶ 2,941.
	2 Net rental real estate income (loss)			•	•
	3 Other net rental income (loss)				
(ss	4 Interest income			•	
i (Lo:	5 Dividends. See instructions			•	•
Income (Loss)	6 Royalties			•	
Inc	7 Net short-term capital gain (loss)			•	
	8 Net long-term capital gain (loss)			•	
	9 Net IRC Section 1231 gain (loss)			•	
Other Income (Loss)	10 a Other portfolio income (loss). Attach schedule.			•	
5 <u>루</u> 근	b Other income (loss)				
				REV 02/	17/23 PRO
	For Privacy Notice, get FTB 1131 EN-SP.	51 787122	24	Schedule K-1 (100S)	2022 Side 1

7871224

nare	eholder's name		<u>s</u>	Shareholder's identifying r	umber
NI	KHIL GADDAM			705-17-6879	
utio	on: Refer to the shareholder's instructions for Schedul	le K-1 (100S) before enter	ring information from this	s schedule on your Californ	ia tax return.
	(a) Pro-rata share items	(b) Amount from federal Schedule K-1 (Form 1120-S)	(c) California adjustment	(d) Total amounts using California law. Combine col. (b) and col. (c) where applicable	(e) California source amounts and credits
ctions	11 IRC Section 179 expense deduction. Attach schedules 12 a Charitable contributions b Investment interest expense			•	Þ
Deductions	c 1 IRC Section 59(e)(2) expenditures 2 Type of expenditures d Deductions-portfolio e Other deductions.				
Urealts	 13 a Low-income housing credit. See instructions. Attach schedule. b Credits related to rental real estate activities other than on line 13(a). Attach schedule. c Credits related to other rental activities. 			•	► ►
22	See instructions. Attach schedule d Other credits. Attach schedule 14 Total withholding (equals amount on Form 592-B if calendar year)			•	▶ ▶
Items	 15 a Depreciation adjustment on property placed in service after 12/31/86 b Adjusted gain or loss c Depletion (other than oil and gas) d Gross income from oil, gas, and geothermal properties e Deductions allocable to oil, gas, and geothermal properties f Other AMT items. Attach schedule 				•
Shareholder Basis	16 a Tax-exempt interest income		485.	485.	48
	17 a Investment income. See instructions b Investment expenses. See instructions c Total taxable dividend distribution paid from accumulated earnings and profits. See instructions d Other information. See instructions			• 36,829.	· •
Uther State Laxes	18 a Type of income b Name of state c Total gross income from sources outside California. Attach schedule d Total applicable deductions and losses. Attach schedule. e Total other state taxes. Check one:			30,829.	
	Paid Accrued Paid Accrued Paid Paid Accrued Paid Paid Paid Paid Paid Paid Paid P	instructions.	20 🗌 More than one	• activity for passive activity p	► urposes. See instructio

Shareh	older's	name	Shareholder's identifying number							
NIK	HIL (GADDAM	705-17-6879							
	Tab	le 1 — Each shareholder's share of nonbusines	s income from intangibles. See instructions.							
	Inte	erest \$	Royalties \$	Dividends \$						
	IRC	Section 1231 Gains/Losses \$	Capital Gains/Losses \$	Other \$						
	FOI	FOR USE BY SHAREHOLDERS ONLY. SEE INSTRUCTIONS.								
	Tab	le 2 — Shareholder's pro-rata share of business	s income and factors. See instructions.							
	Α.	Shareholder's share of the S corporation's busi	ness income \$							
ion	В.	Shareholder's share of the nonbusiness income	ne from real and tangible property sourced or allocable to California:							
format		Capital Gains/Losses \$	Rents/Roy	Rents/Royalties \$						
der In		IRC Section 1231 Gains/Losses \$	Other	\$						
harehol	C.	Shareholder's share of the S corporation's prop	perty, payroll, and sales:							
Other Shareholder Information		Factors	Total within and outside California	Total within California						
		Property: Beginning	\$	\$						
		Ending	\$	\$						
		Annual Rent Expense	\$	\$						
		Payroll	\$	\$						
		Sales	\$	\$						



Continuation Statement

Additional Information From Schedule K-1:SH's Share of Inc, Ded, Credits, etc. (NIKHIL GADDAM)

Schedule K-1:SH's Share of Inc, Ded, Credits, etc. (NIKHIL GADDAM)	
Supplemental Information	

Description	CA Law Amounts	CA Source Amounts		
LINE 16C, NON DEDUCTIBLE EXPENSES:				
NONDEDUCTIBLE PORTION OF MEALS		485.		485.
SUBTOTAL NON DEDUCTIBLE EXPENSES		485.		485.
LINE 17D, OTHER INFO:				
AGGREGATE GROSS RECEIPTS		36,829.		
SUBTOTAL OTHER INFO		36,829.		
	Total	74,628.		970.

Continuation Statement

Additional Information From 2022 California S Corporation Income Tax Return

Form 100S: California S Corporation Franchise or Income Tax Return
Sch F: Other Deductions

Description		Amount
ACCOUNTING		160.
INSURANCE		700.
TELEPHONE		300.
CTM SOFTWARE SOLUTIONS		20,000.
MAIL BOX		300.
BACK OFFICE OPERATION EXPENSES		40,240.
	Total	61,700.
Form 100S: California S Corporation Franchise or Inc	come Tax Return	
Sch K: Other information	Со	ntinuation Statement
Description		Amount
AGGREGATE GROSS RECEIPTS		75,162.
	Total	75,162.

Form 100S: California S Corporation Franchise or Income Tax Return Schedule F Line 1a

Schedule F, Line 1a		Itemization Statement
Description		Amount
GLOBULETECH LLC		40,000.
DEVCARE SOLUTIONS		7,800.
GENZEON CORPORATION INC (10221)		17,618.
GENZEON CORPORATION INC (10218)		9,744.
	Total	75,162.

Form 887	-CORP	E-file Authorization for Corporations	S		
(December 20) Department of Internal Reven	the Treasury	For calendar year 2022, or tax year beginning , 20 , ending Use for <i>efile</i> authorizations for Form 1120, 1120-F or 1120; Do not send to the IRS. Keep for your records. Go to www.irs.gov/Form8879CORP for the latest information	OMB No. 1545-0123		
Name of corpo	oration		Employer identification	n number	
SRINIX 7	FECH LLO	2	87-2973329		
Part I	Informa	tion (Whole dollars only)			
1 Tota	al income (Form 1120, line 11)		1	
2 Tota	al income (Form 1120-F, Section II, line 11)		2	
	,	oss) (Form 1120-S, line 6)		3	75,162.
Part II	Declara	tion and Signature Authorization of Officer. Be sure to get a co	py of the corporation	ation'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 electronic income tax return and accompanying schedules and statements, and to the best of my knowledge and belief, they are 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 acknowledgment of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the corporation's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the corporation's electronic income tax return and, if applicable, the corporation's consent to electronic funds withdrawal.

Officer's PIN: check one box only

	I authorize	ERO firm	ı name	to enter my Pl		o not enter all zeros	as my signature
	on the corporation	n's electronically filed in	ncome tax return.				
X	As an officer of th return.	e corporation, I will ent	er my PIN as my signature	on the corpora	tion's	electronically fil	ed income tax
Officer's sigr	nature		Date		Title	MANAGER	
I certify th indicated	FIN/PIN. Enter your nat the above nume above. I confirm th	eric entry is my PIN, wh hat I am submitting thi	d by your five-digit self-sele nich is my signature on the is return in accordance wi e (MeF) Information for Aut	e electronically f th the requirem	ents	do not ent ncome tax return of Pub. 3112 , IF	RS e-file Application
ERO's signa	•			5.		/14/2023	
			Retain This Form – S		-	Do So	

ubmit This Form to the IRS Unless

For Paperwork Reduction Act Notice, see instructions. BAA

REV 03/08/23 PRO

Form **1120-S**

Department of the Treasury Internal Revenue Service

U.S. Income Tax Return for an S Corporation

OMB No. 1545-0123

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.

For	calen	dar year 2022 o	r tax yea	r beginning		, 202	2, endi	ing				, 20	
A S election effective date Name									D Em	ployer	identification number		
1	0/03	8/2021		SRINIX TECH	H LLC		87-2973329				3329		
ΒB	usiness	activity code	TYPE		d room or suite no. If a	P.O. box, see instru	uctions.			E Dat	te incorp	oorated	
n	umber (see instructions)	OR PRINT	34972 NEWA	RK BLVD UNIT	15				10	/03/2	2021	
5	4151	.2		City or town, state	or province, country, a	nd ZIP or foreign po	ostal cod	е		F Total assets (see instructions)			
		Sch. M-3 attached	1	NEWARK CA	94560					\$ 5,012.			
G	Is the	corporation electi	ina to be a	an S corporation b	beginning with this t	ax vear? See ins	tructior	ns. 🗌 Yes	5 🔀 N	0		-,	
		•	-	•	(3) 🗌 Address of						ction te	rmination	
				-	eholders during an	-						2	
					-		-					sive activity purposes	
					penses on lines 1a t								
	1a	Gross receipts					1a		75,1				
	b	Returns and all					1b						
	c										1c	75,162.	
Income	2										2	· · ·	
ပ္ပ	3	0	•	,							3	75,162.	
<u> </u>	4				ttach Form 4797)						4		
	5				ach statement) .						5		
	6				5						6	75,162.	
	7				s-attach Form 11						7		
ons	8				dits)					1	8		
tati	9				· · · · · ·						9		
<u>II</u>	10	. Bad debts									10		
for	11	Rents									11	6,000.	
suc	12	Taxes and licer	nses								12		
ctio	13	Interest (see ins	structions	3)							13		
(see instructions for limitations)	14	,		,	4562 not claimed on Form 1125-A or elsewhere on return (attach Form 4562) 14								
ë İ	15				pletion.)						15		
(see	16			-						1	16		
S	17	0									17		
ior	18		-								18		
nct	19				See Statemen						19	64,150.	
Deductions	20		•	lines 7 through 19							20	70,150.	
Δ	21	Ordinary busir	ness inco	ome (loss). Subtra	act line 20 from line	e6				.	21	5,012.	
	22a	Excess net pas	sive inco	me or LIFO recap	ture tax (see instru	ctions)	22a						
	b	Tax from Schee	dule D (Fo	orm 1120-S) .			22b						
ts	с	Add lines 22a a	and 22b (s	see instructions fo	or additional taxes)						22c		
Jen	23a	2022 estimated	d tax payr	ments and 2021 o	verpayment credit	ed to 2022 .	23a						
and Payments	b	Tax deposited	with Forn	n 7004			23b						
å	c	Credit for feder	ral tax pai	d on fuels (attach	Form 4136)		23c						
bue	d	Add lines 23a t	hrough 2	3c							23d		
Tax a	24	Estimated tax p	oenalty (s	ee instructions). C	Check if Form 2220	is attached .			. [24		
Ц Ц	25	Amount owed	. If line 23	Bd is smaller than	the total of lines 22	2c and 24, enter	amoun	it owed .			25		
	26				e total of lines 22c		mount o	overpaid .			26		
	27	Enter amount f	rom line 2	26: Credited to	2023 estimated ta	x		Refun	ded		27		
~.					amined this return, incl of preparer (other tha							est of my knowledge and	
Si	- 1	beller, it is true, co	niect, and t			ii taxpayer) is based		normation of v	which p			RS discuss this return	
He	ere					MANAGE	lR					reparer shown below?	
		Signature of office			Date	Title				Se	e instru		
Ра	id	Print/Type prep			Preparer's signature			Date		Check		PTIN	
	epare	er VENKATA SAI			VENKATA SAI PAV	AN KUMAR DUDIP.	ALLIC	03/14/20	023	selt-er	nployed	1021/0033	
	e On	Firm's name	0.45	BAL TAXES LI						Firm's		88-2145487	
		Firm's address			E BRUNSWICK I	NJ 08816				Phone		678)965-9522	
For	Paper	work Reduction	Act Notic	e, see separate in	nstructions. BAA			REV	/ 03/08/2	23 PRC)	Form 1120-S (2022)	

1		(see instructions)				Yes	N
2	Check accounting method: a c See the instructions and enter the	Other (specify)	Accruai			Tes	
	a Business activity TECHNOLOG		b Product or servi	ce SERVICE			
3	At any time during the tax year,						
	nominee or similar person? If "Ye		 Information on Certa 	in Shareholders of	an S Corporation		
1	At the end of the tax year, did the		by EOO/ or more of the	total at all issued	and autotomoline of any		
а	Own directly 20% or more, or ov foreign or domestic corporation? below	P For rules of construct	tive ownership, see ins				
	(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 10 Date (if applicable) a Qualifie S Subsidiary Election W	d Sub	cha
b	Own directly an interest of 20% capital in any foreign or domestic trust? For rules of constructive or	partnership (including	g an entity treated as a p	partnership) or in th	e beneficial interest of a		
	(i) Name of Entity	(ii) Employer Identification Number (if any)	(iii) Type of Entity	(iv) Country o Organization		•	
5a	At the end of the tax year, did the	e corporation have any	outstanding shares of r	estricted stock? .			
	If "Yes," complete lines (i) and (ii)	halaw	-				
	(i) Total shares of restricted st	ock					
b	(i) Total shares of restricted st(ii) Total shares of non-restricted	ock ed stock	<u>.</u>				
b	(i) Total shares of restricted st	ock ed stock e corporation have any	<u>.</u>				
b	 (i) Total shares of restricted st (ii) Total shares of non-restricted At the end of the tax year, did the If "Yes," complete lines (i) and (ii) (i) Total shares of stock outstate 	ock ed stock e corporation have any below. anding at the end of th	outstanding stock option	ons, warrants, or si			
	 (i) Total shares of restricted st (ii) Total shares of non-restricted At the end of the tax year, did the If "Yes," complete lines (i) and (ii) (i) Total shares of stock outsta (ii) Total shares of stock outsta 	ock ed stock e corporation have any below. anding at the end of th anding if all instrument	e tax year	ons, warrants, or si	milar instruments? .		
	 (i) Total shares of restricted st (ii) Total shares of non-restricted at the end of the tax year, did the If "Yes," complete lines (i) and (ii) (i) Total shares of stock outsta (ii) Total shares of stock outsta Has this corporation filed, or is 	ock ed stock e corporation have any below. anding at the end of th anding if all instrument s it required to file,	outstanding stock option e tax years were executed Form 8918, Material A	ons, warrants, or sin	milar instruments? .		
5	 (i) Total shares of restricted st (ii) Total shares of non-restricted At the end of the tax year, did the If "Yes," complete lines (i) and (ii) (i) Total shares of stock outsta (ii) Total shares of stock outsta 	ock	e tax year	ons, warrants, or sin	milar instruments?		
6	 (i) Total shares of restricted st (ii) Total shares of non-restricted at the end of the tax year, did the If "Yes," complete lines (i) and (ii) (i) Total shares of stock outsta (ii) Total shares of stock outsta Has this corporation filed, or is information on any reportable transitional statement of the statement of	ock	outstanding stock option e tax year s were executed	Advisor Disclosure	Statement, to provide		
)	 (i) Total shares of restricted st (ii) Total shares of non-restricted At the end of the tax year, did the If "Yes," complete lines (i) and (ii) (i) Total shares of stock outsta (ii) Total shares of stock outsta Has this corporation filed, or is information on any reportable transcription Check this box if the corporation If checked, the corporation may 	ock	e tax year	Advisor Disclosure original issue disco or Publicly Offered or the corporation roperty) in the hands n prior years, enter t	Statement, to provide 		
5 7 }	 (i) Total shares of restricted state (ii) Total shares of non-restricted at the end of the tax year, did the If "Yes," complete lines (i) and (ii) (i) Total shares of stock outstate (ii) Total shares of stock outstate (iii) Total shares of stock outstat	ock	outstanding stock option e tax year	Advisor Disclosure original issue disco or Publicly Offered or the corporation roperty) in the hands n prior years, enter t	Statement, to provide 		
5 7 3	 (i) Total shares of restricted state (ii) Total shares of non-restricted state (ii) Total shares of non-restricted At the end of the tax year, did the If "Yes," complete lines (i) and (ii) (i) Total shares of stock outstate (ii) Total shares of stock outstate (iii) Total	ock	outstanding stock option e tax year	Advisor Disclosure original issue disco or Publicly Offered or the corporation roperty) in the hand n prior years, enter t	Statement, to provide Statement, to provide ount		
5 7 3	 (i) Total shares of restricted st (ii) Total shares of non-restricted at the end of the tax year, did the If "Yes," complete lines (i) and (ii) (i) Total shares of stock outsta (ii) Total shares of stock outsta (iii) Total shares (iii) Total shares (iii) Total shares	ock	outstanding stock option e tax year	Advisor Disclosure original issue disco or Publicly Offered or the corporation roperty) in the hand n prior years, enter t 	Statement, to provide 		
6 7 3 9	 (i) Total shares of restricted st (ii) Total shares of non-restricted At the end of the tax year, did the If "Yes," complete lines (i) and (ii) (i) Total shares of stock outstat (ii) Total shares of stock outstat (iii) Total shares of stock outstat Has this corporation filed, or is information on any reportable trans Check this box if the corporation If checked, the corporation may instruments. If the corporation (a) was a C corposite basis determined by reference to the (b) has net unrealized built-in gain gain reduced by net recognized built /li>	ock	e tax year	Advisor Disclosure 	Statement, to provide Statement, to provide Statement, to provide Original Issue Discount acquired an asset with a s of a C corporation, and the net unrealized built-in or any farming business interest expense. c)) for the 3 tax years		
) a	 (i) Total shares of restricted staticity (ii) Total shares of non-restricted At the end of the tax year, did the If "Yes," complete lines (i) and (ii) (i) Total shares of stock outstation (ii) Total shares of stock outstation (iii) Checked, the corporation (a) was a C corporation (b) has net unrealized built-in gain (b) has net unrealized built-in gain (b) has net unrealized built-in gain (c) has net unrealized built-in gain (d) the corporation have an elecclistic effect during the tax year? See Does t	ock	outstanding stock option e tax year	Advisor Disclosure original issue disco or Publicly Offered or the corporation roperty) in the hands n prior years, enter t trade or business of 	Statement, to provide Statement, to provide		
) 3) a b c	 (i) Total shares of restricted staticity. (ii) Total shares of non-restricted At the end of the tax year, did the If "Yes," complete lines (i) and (ii) (i) Total shares of stock outstation. (ii) Total shares of stock outstation. (iii) To	ock	outstanding stock option e tax year	Advisor Disclosure 	milar instruments? Statement, to provide . . bunt . Original Issue Discount acquired an asset with a s of a C corporation, and the net unrealized built-in or any farming business . <		
b b c	 (i) Total shares of restricted staticity. (ii) Total shares of non-restricted At the end of the tax year, did the If "Yes," complete lines (i) and (ii) (i) Total shares of stock outstation. (ii) Total shares of stock outstation. (iii) Checked, the corporation have an election effect during the tax year? See Does the corporation statisfy one The corporation is a tax shelter at the corporation statisfy bothermore. 	ock	outstanding stock option e tax year	Advisor Disclosure original issue disco or Publicly Offered or the corporation roperty) in the hands n prior years, enter t 	milar instruments? Statement, to provide . . bunt . Original Issue Discount acquired an asset with a s of a C corporation, and the net unrealized built-in or any farming business . <		
6 7 8 9 0 a b	 (i) Total shares of restricted staticity. (ii) Total shares of non-restricted At the end of the tax year, did the If "Yes," complete lines (i) and (ii) (i) Total shares of stock outstation. (ii) Total shares of stock outstation. (iii) To	ock	e tax year	Advisor Disclosure 	milar instruments? Statement, to provide . . bunt . Original Issue Discount acquired an asset with a s of a C corporation, and the net unrealized built-in or any farming business . <	x	

Form 112	20-S (2022	2)		Pa	age 3
Sche	dule B	Other Information (see instructions) (continued)		Yes	No
	terms m	the tax year, did the corporation have any non-shareholder debt that was canceled, was forgiven, nodified so as to reduce the principal amount of the debt?			×
	If "Yes,"	enter the amount of principal reduction			
		he tax year, was a qualified subchapter S subsidiary election terminated or revoked? If "Yes," see inst			×
14a	Did the	corporation make any payments in 2022 that would require it to file Form(s) 1099?			×
b	If "Yes,"	did or will the corporation file required Form(s) 1099?			
		prporation attaching Form 8996 to certify as a Qualified Opportunity Fund?			×
	If "Yes,"	' enter the amount from Form 8996, line 15			
Sche	dule K	Shareholders' Pro Rata Share Items	Total am		
	1	Ordinary business income (loss) (page 1, line 21)	1	5,0	12.
Income (Loss)	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)			
	c	Other net rental income (loss). Subtract line 3b from line 3a	3c		
	4	Interest income	4		
	5	Dividends: a Ordinary dividends	5a		
це		b Qualified dividends			
col	6	Royalties	6		
드	7	Net short-term capital gain (loss) (attach Schedule D (Form 1120-S))	7		
	8a		8a		
	b	Collectibles (28%) gain (loss)			
	C	Unrecaptured section 1250 gain (attach statement)			
	9	Net section 1231 gain (loss) (attach Form 4797) .	9		
	10		10		
SL	11	· · · · · · · · · · · · · · · · · · ·	11		
Deductions	12a		12a		
quc	b		12b		
De	C		12c		
	d		12d		
	13a		13a		
	b	5 ()	13b		
dits	C		13c		
Credits	d		13d		
Ũ	e		13e 13f		
	f				
	g	Other credits (see instructions) Type:	13g		
Inter- national	14	Attach Schedule K-2 (Form 1120-S), Shareholders' Pro Rata Share Items—International, and check this box to indicate you are reporting items of international tax relevance			
5	15a	Post-1986 depreciation adjustment	15a		
Alternative Minimum Tax	2 b	Adjusted gain or loss	15b		
Alternative linimum Ta	c	Depletion (other than oil and gas)	15c		
uin Iter	d		15d		
Air A	¢ e		15e		
	f		15f		
Items Affecting nareholder Basis	16a		16a		
ctir B	b		16b		
Affe Ider	c		16c		
hol	d		16d		
Items Affec Shareholder	e		16e		
র	f	Foreign taxes paid or accrued	16f	00 6	

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chec	ule K Shareholders' Pro Rata Share Item	s (continued)			Tot	al amount
uo	17a Investment income				17a	
Other Information	b Investment expenses				17b	
er d	c Dividend distributions paid from accumula	ated earnings and pro	fits		17c	
	d Other items and amounts (attach stateme	ent)				
Recon- ciliation	18 Income (loss) reconciliation. Combine column. From the result, subtract the sum	n of the amounts on lir	nes 11 through 12d a	nd 16f	18	5,012.
chec	ule L Balance Sheets per Books	Beginning	,		End of tax ye	ear
	Assets	(a)	(b)	(c)		(d)
	Cash					
	Trade notes and accounts receivable			<u> </u>	012.	
	Less allowance for bad debts	())	5,012.
	Inventories					
	U.S. government obligations					
	Tax-exempt securities (see instructions)					
	Other current assets (attach statement)					
	Loans to shareholders					
	Mortgage and real estate loans					
	Other investments (attach statement)					
	Buildings and other depreciable assets Less accumulated depreciation	((
					/	
	Depletable assets	((
	Land (net of any amortization)			l)	
	Intangible assets (amortizable only)					
	Less accumulated amortization	(1		
	Other assets (attach statement)				,	
						5,012.
-	Liabilities and Shareholders' Equity					5,012.
6	Accounts payable					
	Mortgages, notes, bonds payable in less than 1 year					
	Other current liabilities (attach statement)					
	Loans from shareholders					
	Mortgages, notes, bonds payable in 1 year or more					
	Other liabilities (attach statement)					
	Additional paid-in capital					
	Retained earnings					5,012.
	Adjustments to shareholders' equity (attach statement)					_ ,
	Less cost of treasury stock		()		(,
	Total liabilities and shareholders' equity		1			5,012.

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Form 1	120-S (2022)			Page 5
Sche	edule M-1 Reconciliation of Income (L Note: The corporation may be re			
1 2	Net income (loss) per books Income included on Schedule K, lines 1, 2, 3c, 4, 5a, 6, 7, 8a, 9, and 10, not recorded on books this year (itemize)	5,012.	Income recorded on books not included on Schedule k through 10 (itemize): Tax-exempt interest \$	-
3 a	Expenses recorded on books this year not included on Schedule K, lines 1 through 12, and 16f (itemize): Depreciation \$		Deductions included on Sch lines 1 through 12, and 16f, no against book income this year Depreciation \$	t charged
b	Travel and entertainment \$		Add lines 5 and 6	
4	Add lines 1 through 3	5,012.	Subtract line 7 from line 4 .	,

Schedule M-2

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

		(a) Accumulated adjustments account	(b) Shareholders' undistributed taxable income previously taxed	(c) Accumulated earnings and profits	(d) Other adjustments account
1	Balance at beginning of tax year				
2	Ordinary income from page 1, line 21	5,012.			
3	Other additions				
4	Loss from page 1, line 21	()			
5	Other reductions	()			()
6	Combine lines 1 through 5	5,012.			
7	Distributions				
8	Balance at end of tax year. Subtract line 7 from line 6	5,012.			

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				1 🗌 Ame	ended K-1	OMB No. 1545-0123
(Forn	dule K-1 20 22	Pa		Deductions, Cre	dits, and	
	nent of the Treasury For calendar year 2022, or tax year Revenue Service	1	Ordinary	business income (los 2 , 5 5	<i>'</i>	Credits
	beginning / / 2022 ending / /	2	Net rent	al real estate income (l	loss)	
	eholder's Share of Income, Deductions, its, etc. See separate instructions.	3	Other ne	et rental income (loss)		
	rt I Information About the Corporation	4	Interest	income		
A C	orporation's employer identification number	5a	Ordinary	dividends		
вс	orporation's name, address, city, state, and ZIP code SRINIX TECH LLC	5b	Qualified	d dividends	14	Schedule K-3 is attached if checked
	34972 NEWARK BLVD UNIT 15	6	Royaltie	S	15	Alternative minimum tax (AMT) items
ľ	IEWARK CA 94560	7	Net shor	t-term capital gain (los	ss)	
	RS Center where corporation filed return Ogden,UT 84201-0013	8a	Net long	-term capital gain (los	s)	
D C	orporation's total number of shares Beginning of tax year	8b	Collectit	oles (28%) gain (loss)		
	End of tax year	8c	Unrecap	tured section 1250 ga	in	
Ра	rt II Information About the Shareholder	9	Net sect	ion 1231 gain (loss)	16	Items affecting shareholder basis
	hareholder's identifying number 578-95-4081	10	Other in	come (loss)		
	hareholder's name, address, city, state, and ZIP code BRIKANTH REDDY SAMA					
	270 BEETHOVEN CMN UNIT 206					
	REMONT CA 94538					
G C	urrent year allocation percentage 51.00000 %				17	Other information
H S	hareholder's number of shares	11	Section	179 deduction		
	Beginning of tax year	12	Other de	eductions		
	oans from shareholder	-				
	Beginning of tax year . . . \$					
		-				
È						
For IRS Use Only						
IRS L						
For		18 19	_	e than one activity for a e than one activity for p		
						ditional information.

		Final K-1	Amended		OMB No. 1545-0123
Schedule K-1 (Form 1120-S) 2022	Pa	Deductio	ons, Credits	e of C , and	urrent Year Income, Other Items
Department of the Treasury Internal Revenue Service For calendar year 2022, or tax year	1	Ordinary business ir	ncome (loss) 2,456.	13	Credits
beginning / / 2022 ending / /	2	Net rental real estate	e income (loss)		
Shareholder's Share of Income, Deductions, Credits, etc. See separate instructions.	3	Other net rental inco	ome (loss)		
Part I Information About the Corporation	4	Interest income			
A Corporation's employer identification number 87-2973329	5a	Ordinary dividends			
B Corporation's name, address, city, state, and ZIP code SRINIX TECH LLC	5b	Qualified dividends		14	Schedule K-3 is attached if checked
34972 NEWARK BLVD UNIT 15	6	Royalties		15	Alternative minimum tax (AMT) items
NEWARK CA 94560	7	Net short-term capit	tal gain (loss)		
C IRS Center where corporation filed return Ogden, UT 84201-0013	8a	Net long-term capita	al gain (loss)		
D Corporation's total number of shares Beginning of tax year	8b	Collectibles (28%) g	jain (loss)		
End of tax year	8c	Unrecaptured section	on 1250 gain		
Part II Information About the Shareholder	9	Net section 1231 ga	ain (loss)	16	Items affecting shareholder basis
E Shareholder's identifying number 705-17-6879	10	Other income (loss)			
F Shareholder's name, address, city, state, and ZIP code NIKHIL GADDAM					
1742 WILDWOOD TERRACE TRL					
FORT MILL SC 29708					
G Current year allocation percentage 49.00000 %				17	Other information
H Shareholder's number of shares	11	Section 179 deducti	ion		
Beginning of tax year . . . End of tax year 	12	Other deductions			
Loans from shareholder					
Beginning of tax year \$ End of tax year \$					
LO as					
For IRS Use Only					
For	18	More than one a			
	19	More than one a			
		* See attached	statement f	for ad	ditional information.

199A Worksheet by Activity ► Keep for your records

Corporation's name SRINIX TECH LLC		Corporation's EIN 87-2973329
QuickZoom to 199A Summar	y ▶	
Aggregation Code:	Trade or Business: <u>1120S</u> , Line 21 EIN: <u>87-2973329</u>	
	Is this activity a qualified trade/business? Specified Service Trade or Business?	
QBI or qualified PTP items subje	ect to shareholder-specific determinations:	
 b Adjustments	(loss) 1 a sincome (loss) b	1 c 2 c 3 c 3 c 4 c 5 6 c 7 8 c

	Section 179 Carryover Detail for this Activity					
		Section 179 Regular Tax	Section 179 QBI			
A B C D E	Tentative Section 179 deduction from current year assets Part I: Prior Year Carryovers by Year and Category Before 2018 2018 2019 2020 2021 Total prior year carryovers to this year		0			
	Part II: 179 Deduction Allowed by Year and Category	Section 179 Regular Tax	Section 179 QBI			
Tot A B C D E F	al 179 deduction allowed for this activity in current year					
	Part III: Total Carryforward to 2023 by Year and Category	Section 179 Regular Tax	Section 179 QBI			
A B C D E F	Carryforward from 2022					

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Additional Information From 2022 US Form 1120S: Income Tax Return for S Corp

Form 1120S: S-Corporation Tax Return Gross Sales

Gross Sales	Itemization Sta	atement
Description	Amount	
GLOBULETECH LLC		40,000.
DEVCARE SOLUTIONS		7,800.
GENZEON CORPORATION INC (10221)		17,618.
GENZEON CORPORATION INC (10218)		9,744.
	Total	75,162.

Form 1120S: S-Corporation Tax Return

Continuation Statement Other Deductions Description Amount ACCOUNTING 160. INSURANCE 700. MEALS (100%) 1,980. TELEPHONE 300. 470. TRAVEL CTM SOFTWARE SOLUTIONS 20,000. MAIL BOX 300. 40,240. BACK OFFICE OPERATION EXPENSES Total 64,150.