Form **8879-PE**

E-file Authorization for Form 1065

(For return of partnership income or administrative adjustment request)

ERO must obtain and retain completed Form 8879-PE. Go to www.irs.gov/Form8879PE for the latest information.

2023

OMB No. 1545-0123

Department of the Treasury Internal Revenue Service

Name of partnership

For calendar year 2023, or tax year beginning , 2023, and ending , 20 .

Employer identification number

SRINIX TECH LLC	87-2973329		
Part I Form 1065 Information (Whole dollars only)			
1 Gross receipts or sales less returns and allowances (Form 1065, line 1c)		1	91,520.
2 Gross profit (Form 1065, line 3)		2	91,520.
3 Ordinary business income (loss) (Form 1065, line 23)		3	-1,480.
4 Net rental real estate income (loss) (Form 1065, Schedule K, line 2)		4	
5 Other net rental income (loss) (Form 1065, Schedule K, line 3c)		5	
Part II Declaration and Signature Authorization of Partner or Member or P	armership Repr	esentati	ive
declare under penalties of perjury that:			
1a. If the Form 1065 is being transmitted as part of a return of partnership income, I am a partnership.	partner or member	of the na	med
 b. If the Form 1065 is being transmitted as part of an administrative adjustment request (PR) of the named partnership. 	(AAR), I am the part	nership re	epresentative
2. I have examined a copy of the partnership's electronic Form 1065 (whether used as reschedules, and statements, and to the best of my knowledge and belief, it/they is/are			ying forms,
3. I am fully authorized to sign the return or AAR on behalf of the partnership.			
4. The amounts shown in Part I above are the amounts shown on the electronic copy of	the partnership's Fo	orm 1065	
5. I consent to allow my electronic return originator (ERO), transmitter, or intermediate se return or AAR to the IRS and to receive from the IRS (a) an acknowledgment of receip and (b) the reason for any delay in processing the return or AAR.			
6. I have selected a personal identification number (PIN) as my signature for the partners income or AAR.	hip's electronic retu	ırn of par	tnership
Partner or Member or PR PIN: check one box only			
☐ I authorize to enter my	PIN	as	my signature
ERO firm name on the partnership's 2023 electronically filed return of partnership income or AAF	Don't enter all z	eros	
As a Partner or Member or PR of the partnership, I will enter my PIN as my signal electronically filed return of partnership income or AAR.	ture on the partners	ship's 202	23
Poutney or Mambay or DD cignotures			
Partner or Member or PR signature:			
Title: LLC MEMBER	Date: _	04/15	/2024
Part III Certification and Authentication			
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.		6 6 1 er all zeros	
certify that the above numeric entry is my PIN, which is my signature on the 2023 electroni AAR for the partnership indicated above. I confirm that I am submitting this return or AAR in 3112, IRS e-file Application and Participation, and Pub. 4163, Modernized e-File (MeF) Inforfor Business Returns.	accordance with the	ne require	ements of Pub
ERO's signature:	Date:		
ERO Must Retain This Form — See Instruction	ons		

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

Form	106	35		U.S. R	eturn of Par	tnership	Inco	me		0	MB No. 1545-0123
Form			For cal	endar year 2023, or tax yea	ar beginning	, 2023, 6	ending		, 20		90 0 2
	rtment of the Treasury lal Revenue Service Go to www.irs.gov/Form1065 for instructions and the latest information.							·	2023		
		ness activity		Name of partnership						D E	Employer identification number
	•	ONSULTING		SRINIX TECH LL	.C						-2973329
		uct or service	Туре	Number, street, and room		κ, see instructions.					Date business started
		ONSULTING	or	34972 NEWARK E	BLVD UNIT 154					10	/03/2021
		de number	Print	City or town, state or provi		r foreign postal co	de			FT	otal assets
										(5	see instructions)
541	.512			NEWARK			CA	94560		\$	89,041.
G C	heck ap	plicable bo	xes:	(1) Initial return (2		(3) 🗌 Name ch					Amended return
		-			2) Accrual	(3) 🗌 Other (sp	ecify):				
				Attach one for each perso	on who was a partner	at any time dur	ring the	tax year:			2
				1-3 are attached							
				Aggregated activities for							
Caut				or business income ar							
				ales 91,520.						1c	91,520.
				old (attach Form 1125						2	01 500
ne				btract line 2 from line						3	91,520.
Income		•		e (loss) from other part loss) (attach Schedule		•		,		5	
<u>=</u>				rom Form 4797, Part I						6	
				oss) (attach statement)						7	
	8			oss). Combine lines 3						8	91,520.
	9			ges (other than to par						9	13,000.
<u> </u>	10			ments to partners .						10	·
ation	11			intenance						11	
imit	12									12	
ductions (see instructions for limitations)	13									13	
ions	14	Taxes and	d licen	ses						14	
truci	15	Interest (s	see ins	tructions)						15	
e ins				required, attach Form							
Š.		-		on reported on Form 1			_			16c	
Suc		-	-	ot deduct oil and gas						17	
뜢	18		•	s, etc						18	
ğ	19			fit programs						19	
De	20			commercial buildings						20	00.000
_	21 22			ns (attach statement) ns. Add the amounts s						21	80,000.
	23			ess income (loss). Su						23	93,000. -1,480.
	24			der the look-back met						24	1,100.
	25			der the look-back methoder the look-back meth	•	•	•		•	25	
ent	26			ed underpayment (see		•		,		26	
Ě	27		•							27	
) a)	28		•	due. Add lines 24 thro						28	
Fax and Payment	29			nt election amount from	•					29	
a	30	-	-							30	
ă	31	Amount	owed.	If the sum of line 29 a	nd line 30 is smalle	er than line 28,	, enter	amount owed	1	31	
	32	Overpayı	ment.	If the sum of line 29 ar	nd line 30 is larger	than line 28, e	nter o	verpayment .		32	0.
		Under pen	alties of	perjury, I declare that I have e, correct, and complete. De	examined this return, in	cluding accompar	nying sc	hedules and state	ements, an	d to the	best of my knowledge
Sigi	n	which prep	arer has	any knowledge.	La	and than partner t	or minico	a liability compan	y member,	15 5450	or an information of
Her				- Jelkan	\mathcal{M}_{\sim}		^	A 14 E 1000 4			RS discuss this return
		Cionati	of north	por or limited liability assesses	ov mombor			4/15/2024	See		reparer shown below? tions. Yes No
		Print/Type		ner or limited liability compar	Preparer's signature		Date	Date		. \Box	: PTIN
Paic	ł	1		VAN KUMAR DUDIPALLI		ייגרייחות מגשוע	гт	Date	Che self-	ck employ	II
-	oarer	Firm's nam		GLOBAL TAXES LI	VENKATA SAI PAVAN	MILLAND MAINON	пТ				88-2145487
Use	Only	Firm's add		245 ROONEY CT I		J 08816					678)965-9522

Page 2

Schedule B Other Information									
			le le le eve						
1								Yes	No
a									
С	☑ Domestic limited liability company d					•			
e									
2 a									
u	exempt organization, or any foreign government								
	loss, or capital of the partnership? For rules of c								
	B-1, Information on Partners Owning 50% or Mo								×
b	Did any individual or estate own, directly or indi-	rectly, a	n interest of	50% or mo	ore in tl	he profit, loss, o	r capital of		
	the partnership? For rules of constructive owner								
	on Partners Owning 50% or More of the Partners	ship .							×
3	At the end of the tax year, did the partnership:								
а	Own directly 20% or more, or own, directly or in	ndirectly	, 50% or mo	re of the to	otal vot	ing power of all	classes of		
	stock entitled to vote of any foreign or domestic								
	If "Yes," complete (i) through (iv) below								×
	(i) Name of Corporation		(ii) Employer I			iii) Country of	(iv) Perc		
			Number	(ir any)	'	ncorporation	Owned in Vo	oung Su	OCK
	Own directly an interest of 200% or more or own	diractly	or indirectly	on interest	of 500/	ar mara in the	orofit loop		
b	Own directly an interest of 20% or more, or own, or capital in any foreign or domestic partnership								
	interest of a trust? For rules of constructive owner								
	(i) Name of Entity		ii) Employer	(iii) Type		(iv) Country of		laximum	<u></u> า
	(i) Name of Littly		dentification umber (if any)	Entity		Organization	Percenta Profit, Los		
		140	arriber (ii arry)				T TOIL, LO	33, 01 01	арпа
4	Does the partnership satisfy all four of the follow	ina cond	ditions?					Yes	No
а	The partnership's total receipts for the tax year w	_		00.					
b	The partnership's total assets at the end of the ta				_				
С	Schedules K-1 are filed with the return and furnish	-				date (including	extensions)		
	for the partnership return.						, , , , , , , , , , , , , , , , , , , ,		
d	The partnership is not filing and is not required to	file Sch	edule M-3					×	
	If "Yes," the partnership is not required to comp	lete Sch	edules L. M-	1. and M-2	: item	F on page 1 of F	orm 1065:		
	or item L on Schedule K-1.		–,	.,	,	page			
5	Is this partnership a publicly traded partnership, a	as define	ed in section	469(k)(2)?					×
6	During the tax year, did the partnership have any			. , . ,					
	so as to reduce the principal amount of the debt?	_							×
7	Has this partnership filed, or is it required to file	e, Form	8918, Mater	ial Advisor	Disclo	sure Statement,	to provide		
	information on any reportable transaction?								×
8	At any time during calendar year 2023, did the pa	artnershi	ip have an int	erest in or	a signa	ture or other aut	hority over		
	a financial account in a foreign country (such as								
	See instructions for exceptions and filing requ Financial Accounts (FBAR). If "Yes," enter the nar	uirement	s for FinCE	N Form 1	ı4, Re	port of Foreign	Bank and		×
9	At any time during the tax year, did the partnersh								
	to, a foreign trust? If "Yes," the partnership may h Foreign Trusts and Receipt of Certain Foreign Gif								v
100									×
10a	Is the partnership making, or had it previously meffective date of the election			•					V
	See instructions for details regarding a section 75					• •			×
b	For this tax year, did the partnership make an opti			under sec	tion 74'	3(h)? If "Vee " ent	er the total		
b	aggregate net positive amount \$								
	of such section 743(b) adjustments for all partners	made in	n the tax year.	The partne	ership n	nust also attach a	statement		
	of such section 743(b) adjustments for all partners made in the tax year. The partnership must also attach a statement							· •	

Sch	edule B Other Information (continued)	Yes	No
С	For this tax year, did the partnership make an optional basis adjustment under section 734(b)? If "Yes," enter the total aggregate net positive amount \$ and the total aggregate net negative amount \$ ()		
	of such section 734(b) adjustments for all partnership property made in the tax year. The partnership must also attach a statement showing the computation and allocation of each basis adjustment. See instructions		×
d	For this tax year, is the partnership required to adjust the basis of partnership property under section 743(b) or 734(b)		
	because of a substantial built-in loss (as defined under section 743(d)) or substantial basis reduction (as defined under		
	section 734(d))? If "Yes," enter the total aggregate amount of such section 743(b) adjustments and/or section 734(b)		
	adjustments for all partners and/or partnership property made in the tax year \$ The partnership must also attach a statement showing the computation and allocation of the basis adjustment. See instructions		×
11	Check this box if, during the current or prior tax year, the partnership distributed any property received in a like-		
	kind exchange or contributed such property to another entity (other than disregarded entities wholly owned by the partnership throughout the tax year)		
12	At any time during the tax year, did the partnership distribute to any partner a tenancy-in-common or other undivided interest in partnership property?		×
13	If the partnership is required to file Form 8858, Information Return of U.S. Persons With Respect to Foreign Disregarded Entities (FDEs) and Foreign Branches (FBs), enter the number of Forms 8858 attached. See instructions		
14	Does the partnership have any foreign partners? If "Yes," enter the number of Forms 8805, Foreign Partner's Information Statement of Section 1446 Withholding Tax, filed for this partnership		×
15	Enter the number of Forms 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships, attached to this return		
16a	Did you make any payments in 2023 that would require you to file Form(s) 1099? See instructions		×
17	If "Yes," did you or will you file required Form(s) 1099?		
	attached to this return		
18	Enter the number of partners that are foreign governments under section 892		
19	During the partnership's tax year, did the partnership make any payments that would require it to file Forms 1042 and 1042-S under chapter 3 (sections 1441 through 1464) or chapter 4 (sections 1471 through 1474)?		×
20	Was the partnership a specified domestic entity required to file Form 8938 for the tax year? See the Instructions for Form 8938		×
21	Is the partnership a section 721(c) partnership, as defined in Regulations section 1.721(c)-1(b)(14)?		×
22	During the tax year, did the partnership pay or accrue any interest or royalty for which one or more partners are not allowed a deduction under section 267A? See instructions		×
	If "Yes," enter the total amount of the disallowed deductions		
23	Did the partnership have an election under section 163(j) for any real property trade or business or any farming business in effect during the tax year? See instructions		×
24	Does the partnership satisfy one or more of the following? See instructions		×
a b	The partnership owns a pass-through entity with current, or prior year carryover, excess business interest expense. The partnership's aggregate average annual gross receipts (determined under section 448(c)) for the 3 tax years		
-	preceding the current tax year are more than \$29 million and the partnership has business interest expense.		
С	The partnership is a tax shelter (see instructions) and the partnership has business interest expense. If "Yes" to any, complete and attach Form 8990.		
25	Is the partnership attaching Form 8996 to certify as a Qualified Opportunity Fund?		×
26	Enter the number of foreign partners subject to section 864(c)(8) as a result of transferring all or a portion of an		
	interest in the partnership or of receiving a distribution from the partnership		
27	At any time during the tax year, were there any transfers between the partnership and its partners subject to the		
	disclosure requirements of Regulations section 1.707-8?		×
28	Since December 22, 2017, did a foreign corporation directly or indirectly acquire substantially all of the properties constituting a trade or business of your partnership, and was the ownership percentage (by vote or value) for purposes of section 7874 greater than 50% (for example, the partners held more than 50% of the stock of the foreign corporation)? If "Yes," list the ownership percentage by vote and by value. See instructions. Percentage: By vote: By value:		×
29	Is the partnership required to file Form 7208 relating to the excise tax on repurchase of corporate stock (see instructions):		
<u>a</u>	Under the applicable foreign corporation rules?		<u>×</u>

Page 4 Other Information (continued) Schedule B No Yes X If "Yes" to either (a) or (b), complete Form 7208, Excise Tax on Repurchase of Corporate Stock. See the Instructions for Form 7208. 30 At any time during this tax year, did the partnership (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, or otherwise dispose of a digital asset (or financial interest in a digital asset)? See × × 31 Is the partnership electing out of the centralized partnership audit regime under section 6221(b)? See instructions If "Yes." the partnership must complete Schedule B-2 (Form 1065). Enter the total from Schedule B-2. Part III. If "No," complete Designation of Partnership Representative below. **Designation of Partnership Representative (see instructions)** Enter below the information for the partnership representative (PR) for the tax year covered by this return. Name of PR SRIKANTH REDDY SAMA U.S. address 34972 NEWARK BLVD UNIT 154 NEWARK CA 94560 U.S. phone number of PR (314)201-8422If the PR is an entity, name of the designated individual for the PR U.S. phone number of U.S. address of designated individual designated individual

Form 1065 (2023)

REV 03/07/24 PRO

Form 1065 (2023)

Page **5**

Sche	dule	Partners' Distributive Share Items	Т	otal amount
	1	Ordinary business income (loss) (page 1, line 23)	1	-1,480.
	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)		
	С	Other net rental income (loss). Subtract line 3b from line 3a	3c	
_	4	Guaranteed payments: a Services 4a b Capital 4b		
SS		c Total. Add lines 4a and 4b	4c	
2	5	Interest income	5	
<u>e</u>	6	Dividends and dividend equivalents: a Ordinary dividends	6a	
Income (Loss)		b Qualified dividends 6b c Dividend equivalents 6c		
Š	7	Royalties	7	
_	8	Net short-term capital gain (loss) (attach Schedule D (Form 1065))	8	
	9a	Net long-term capital gain (loss) (attach Schedule D (Form 1065))	9a	
	b	Collectibles (28%) gain (loss)		
	С	Unrecaptured section 1250 gain (attach statement) 9c		
	10	Net section 1231 gain (loss) (attach Form 4797)	10	
	11	Other income (loss) (see instructions) Type:	11	
Ø	12	Section 179 deduction (attach Form 4562)	12	
ü	13a	Cash contributions	13a	
ŧ	b	Noncash contributions	13b	
Deductions	С	Investment interest expense	13c	
Ď	d		13d(2)	
	е	Other deductions (see instructions) Type:	13e	
Self- Employ- ment	14a	Net earnings (loss) from self-employment	14a	-1,480.
Sel npl me	b	Gross farming or fishing income	14b	
	C	Gross nonfarm income	14c	91,520.
	15a	Low-income housing credit (section 42(j)(5))	15a	
ţ	b	Low-income housing credit (other)	15b	
Credits	C	Qualified rehabilitation expenditures (rental real estate) (attach Form 3468, if applicable)	15c	
ວັ	d	Other rental real estate credits (see instructions) Type:	15d	
	e f	Other rental credits (see instructions) Type:	15e	
	_	Other credits (see instructions) Type:	15f	
Inter- national	16	Attach Schedule K-2 (Form 1065), Partners' Distributive Share Items—International, and check		
_ <u>= </u>		this box to indicate that you are reporting items of international tax relevance		
× "	17a	Post-1986 depreciation adjustment	17a	
Alternative Minimum Tax (AMT) Items	b	Adjusted gain or loss	17b	
	С	Depletion (other than oil and gas)	17c	
Aji te	d	Oil, gas, and geothermal properties—gross income	17d	
≱ਵੇਂ	е	Oil, gas, and geothermal properties—deductions	17e	
	f	Other AMT items (attach statement)	17f	
_	18a	Tax-exempt interest income	18a	
<u>.</u>	b	Other tax-exempt income	18b	
Other Information	С	Nondeductible expenses	18c	F. 0.4.5
Zru	19a	Distributions of cash and marketable securities	19a	51,040.
nfc	b	Distributions of other property	19b	
<u> </u>	20a	Investment income	20a	
the	b	Investment expenses	20b	
Ö	C	Other items and amounts (attach statement)		
	21	Total foreign taxes paid or accrued	21	

Analy	sis of Net Income	: (Loss) per Reti	urn					
1	Net income (loss). Schedule K, lines 12							-1,480.
2	Analysis by partner type:	(i) Corporate	(ii) Individual (active)	(iii) Indivi (passiv	idual	(iv) Partnership	(v) Exempt Organization	(vi) Nominee/Other
a	General partners		1 400					
b Sob	Limited partners	oo Shooto nor B	-1,480.	Dom		f tay year	Fred of	<u> </u>
Scn	edule L Baland	ce Sheets per B	OOKS	_	ginning of	f tax year		tax year
_	Cook	Assets		(a)		(b)	(c)	(d)
1						5,012.		89,041.
2a	Trade notes and acc		+					
ь 3	Inventories							
4	U.S. Government of							
5	Tax-exempt securiti	-						
6	Other current assets							
7a	Loans to partners (o	•						
b	Mortgage and real e	="						
8	Other investments (a							
9a	Buildings and other	,						
b	Less accumulated d	•						
10a	Depletable assets	•						
b	Less accumulated d	lepletion						
11	Land (net of any am	ortization)						
12a	Intangible assets (ar							
b	Less accumulated a	mortization .						
13	Other assets (attach	statement) .						
14	Total assets					5,012.		89,041.
	Liabilit	ties and Capital						
15	Accounts payable							
16	Mortgages, notes, b		-					
17	Other current liabiliti	•	· ·					
18	All nonrecourse loar							
19a	Loans from partners							
b	Mortgages, notes, b		-					
20	Other liabilities (atta	•						
21	Partners' capital acc					5,012.		89,041.
22	Total liabilities and o					5,012.		89,041.
Sche	Recon	nciliation of Inco The partnership ma	ome (Loss) per l ay be required to f	Books Wit	th Anal e M-3. S	ysis of Net Inc see instructions.	ome (Loss) pei	Return
1	Net income (loss) pe	er books	1,48	0. 6 II	ncome red	corded on books this	s year not included	
2	Income included on Sci 5, 6a, 7, 8, 9a, 10, and books this year (itemize	d 11, not recorded o	on		Tax-exer	lule K, lines 1 thro		
3	Guaranteed paymen insurance)	ts (other than healt	th	li	ines 1 th	ons included or nrough 13e, and 2	21, not charged	
4	Expenses recorded not included on Se through 13e, and 21	chedule K, lines			Deprecia	oook income this ation \$		
а	Depreciation \$			8 Ā		s 6 and 7		
b	Travel and entertain	ment \$		1		(loss) (Analysis		
5	Add lines 1 through					ne 1). Subtract lin		-1,480.
Sche	edule M-2 Analys							
1	Balance at beginnin	g of year	. 5,01	.2. 6 [Distributi	ions: a Cash .		51,040.
2	Capital contributed:	a Cash	. 136,54					
		b Property .			Other de	creases (itemize)		
3	Net income (loss) (se			0.				
4	Other increases (iter				Add lines	s 6 and 7		51,040.
5	Add lines 1 through	4	140,08	1. 9 E	Balance at	end of year. Subtract	ct line 8 from line 5	89.041.

651123

			Final K-	1	Amended	l K-1	OMB No. 1545-0123
Sch	nedule K-1	Pa			s Share of	f Cur	rent Year Income,
(Fo	rm 1065)						nd Other Items
•	rtment of the Treasury	1		business inc	•	14	Self-employment earnings (loss)
nterr	nal Revenue Service For calendar year 2023, or tax year	-	o a a a a	2400000	-755 .	A	-755.
	beginning / / 2023 ending / /	2	Not ropto	al rool ootata	income (loss)	A	-755.
			Net renta	ai reai estate	income (ioss)	_	46.685
Pai	rtner's Share of Income, Deductions,					C	46,675.
Cre	edits, etc. See separate instructions.	3	Other ne	et rental incor	ne (loss)	15	Credits
	,						
L	Part I Information About the Partnership	4a	Guarante	eed payment	s for services		
Α	Partnership's employer identification number						
	87-2973329	4b	Guarante	eed payment	s for capital	16	Schedule K-3 is attached if
В	Partnership's name, address, city, state, and ZIP code						checked
	SRINIX TECH LLC	4c	Total gua	aranteed pay	ments	17	Alternative minimum tax (AMT) items
	34972 NEWARK BLVD UNIT 154						
	NEWARK, CA 94560	5	Interest i	income			
С	IRS center where partnership filed return: OGDEN, UT						
D	Check if this is a publicly traded partnership (PTP)	6a	Ordinary	dividends			
_	art II Information About the Partner	Va	Ordinary	aividends			
			0 ""			10	
E	Partner's SSN or TIN (Do not use TIN of a disregarded entity. See instructions.)	6b	Qualified	d dividends		18	Tax-exempt income and nondeductible expenses
	578-95-4081					1	Tionadadubio oxponede
F	Name, address, city, state, and ZIP code for partner entered in E. See instructions.	6с	Dividenc	d equivalents			
	SRIKANTH REDDY SAMA						
	1270 BEETHOVEN CMN UNIT 206	7	Royalties	S			
	FREMONT CA 94538						
G	☐ Limited partner or other LLC ☐ Limited partner or other LLC	8	Net shor	t-term capita	al gain (loss)		
	member-manager member					19	Distributions
H1	✓ Domestic partner ✓ Foreign partner	9a	Net long	-term capital	gain (loss)	A	25,520.
H2	If the partner is a disregarded entity (DE), enter the partner's:						
	TIN Name	9b	Collectib	oles (28%) ga	in (loss)	1	
l1	What type of entity is this partner? INDIVIDUAL					20	Other information
12	If this partner is a retirement plan (IRA/SEP/Keogh/etc.), check here	9с	Unrecap	tured section	n 1250 gain	1	
J	Partner's share of profit, loss, and capital (see instructions):				Ü		
J	Beginning Ending	10	Net sect	ion 1231 gair	n (loss)		
			1101 0001	ion izor gan	1 (1000)		
	Profit 51.00000% 51.00000%	11	Other in	come (loss)		-	
	Loss 51.00000% 51.00000%	٠.	Other in	come (1033)			
	Capital 51.00000% 51.00000%						
	Check if decrease is due to:						
	Sale or Exchange of partnership interest. See instructions.	- 40	0 "	470		0.1	
K1	Partner's share of liabilities:	12	Section	179 deductio	on	21	Foreign taxes paid or accrued
	Beginning Ending						
	Nonrecourse \$	13	Other de	eductions			
	Qualified nonrecourse						
	<u>financing</u> \$						
	Recourse \$						
K2	Check this box if item K1 includes liability amounts from lower-tier partnerships						
K3	Check if any of the above liability is subject to guarantees or other						
	payment obligations by the partner. See instructions	22	More	than one ac	tivity for at-risl	k purpo	oses*
L	Partner's Capital Account Analysis	23	More	than one ac	tivity for passi	ve activ	vity purposes*
	Beginning capital account \$ 2 , 556 .	*Se	ee attacl	hed stater	nent for add	dition	al information.
	Capital contributed during the year \$ 68,275.						
	Current year net income (loss) \$						
	Other increase (decrease) (attach explanation) \$	ş					
	Withdrawals and distributions \$(25,520.)	Only					
	Ending capital account \$ 44,556.	Use					
м	Did the partner contribute property with a built-in gain (loss)?) (
141	Yes No If "Yes," attach statement. See instructions.	IRS					
NI .		For I					
N	Partner's Share of Net Unrecognized Section 704(c) Gain or (Loss) Beginning						
	Ending \$						

651123

		L	Final K-	1 _	Amended	K-1	OMB No. 1545-0123
Sch	nedule K-1 20 23	Pa	art III	Partner's \$	Share of	Cur	rent Year Income,
(Fo	rm 1065)			Deduction	s, Credi	ts, a	nd Other Items
	rtment of the Treasury	1	Ordinary	business incom	ne (loss)	14	Self-employment earnings (loss)
nterr	nal Revenue Service For calendar year 2023, or tax year				-725.	A	-725.
	beginning / / 2023 ending / /	2	Net renta	al real estate inc	ome (loss)		
Dai	rtner's Share of Income, Deductions,					С	44,845.
	,	3	Other ne	t rental income	(loss)	15	Credits
Cre	edits, etc. See separate instructions.						
E	Part I Information About the Partnership	4a	Guarante	eed payments f	or services		
Α	Partnership's employer identification number	1					
	87-2973329	4b	Guarante	eed payments f	or capital	16	Schedule K-3 is attached if
В	Partnership's name, address, city, state, and ZIP code						checked
	SRINIX TECH LLC	4c	Total gua	aranteed payme	ents	17	Alternative minimum tax (AMT) items
	34972 NEWARK BLVD UNIT 154						
	NEWARK, CA 94560	5	Interest i	income			
С	IRS center where partnership filed return: OGDEN, UT						
D	Check if this is a publicly traded partnership (PTP)	6a	Ordinary	dividends			
P	art II Information About the Partner						
E	Partner's SSN or TIN (Do not use TIN of a disregarded entity. See instructions.)	6b	Qualified	dividends		18	Tax-exempt income and
	705-17-6879						nondeductible expenses
F	Name, address, city, state, and ZIP code for partner entered in E. See instructions.	6с	Dividend	l equivalents			
	NIKHIL GADDAM						
	3167 CALDWELL RIDGE PKWY	7	Royalties	3			
	CHARLOTTE NC 28213						
G	☐ Limited partner or other LLC	8	Net shor	t-term capital g	ain (loss)		
	member-manager member					19	Distributions
H1	■ Domestic partner	9a	Net long	-term capital ga	ain (loss)	А	25,520.
H2	If the partner is a disregarded entity (DE), enter the partner's:						
	TIN Name	9b	Collectib	oles (28%) gain	(loss)		
11	What type of entity is this partner? <u>INDIVIDUAL</u>					20	Other information
12	If this partner is a retirement plan (IRA/SEP/Keogh/etc.), check here .	9с	Unrecap	tured section 1	250 gain		
J	Partner's share of profit, loss, and capital (see instructions):						
	Beginning Ending	10	Net sect	ion 1231 gain (I	oss)		
	Profit 49.0000% 49.0000%						
	Loss 49.00000% 49.00000%	11	Other inc	come (loss)			
	Capital 49.00000% 49.00000%						
	Check if decrease is due to:						
	Sale or Exchange of partnership interest. See instructions.	10	0 "	470		-	
K1	Partner's share of liabilities:	12	Section	179 deduction		21	Foreign taxes paid or accrued
	Beginning Ending	40	041	-14!			
	Nonrecourse \$	13	Other de	eductions			
	Qualified nonrecourse						
	financing \$ \$ Recourse \$						
νo							
K2	Check this box if item K1 includes liability amounts from lower-tier partnerships L. Check if any of the above liability is subject to guarantees or other						
КЗ	payment obligations by the partner. See instructions	22	☐ More	than one activ	ity for at rial	(DUED C	2000*
_	Partner's Capital Account Analysis	23	=	than one active	•		
L	•				<u> </u>		al information.
		<u> </u>	oc attaci	ica stateme	int for auc	aitiOi i	ar imormation.
	Current year net income (loss) \$	چ					
	Withdrawals and distributions \$ (25,520.)	Only					
	Ending capital account \$ 44,485.	Use					
м	Did the partner contribute property with a built-in gain (loss)?						
	Yes No If "Yes," attach statement. See instructions.	For IRS					
N	Partner's Share of Net Unrecognized Section 704(c) Gain or (Loss)	For					
••	Beginning \$	_					
	Ending \$	1					

REV 03/07/24 PRO

Partnership's name SRINIX TECH LLC		Partnership's EIN 87-2973329				
-	Note: See 199A Summary for Special Allocation information QuickZoom to 199A Summary ▶					
Aggregation Code: Trade or Business: 1065, Line 22 EIN: 87-2973329						
	Is this activity a qualified trade/business? Specified Service Trade or Business?					
QBI or qualified PTP items subject	ct to partner-specific determinations:					
b Adjustments	(loss)	2 c 3 c 4 c				
 6 a Section 179 deduction b Adjustments c Adjusted section 179 deduction 7 Other deductions 8 a W-2 wages b Adjustments c Adjusted W-2 Wages 	ction	6 c 7				
b Adjustments	9 a	9 c				

Section 179 Carryover Detail for this Activity Section 179 Section 179 **Regular Tax** QBI Tentative Section 179 deduction from current year assets **Part I: Prior Year Carryovers** by Year and Category Ε Part II: 179 Deduction Allowed Section 179 Section 179 by Year and Category **Regular Tax** QBI Total 179 deduction allowed for this activity in current year В Ε Part III: Total Carryforward to 2024 Section 179 Section 179 by Year and Category **Regular Tax** QBI D

SRINIX TECH LLC 87-2973329 1

Additional Information From 2023 Federal Partnership Tax Return

Form 1065: Partnership Tax Return

Line 1a Itemization Statement

Description	Amount
GLOBULETECH LLC	40,000.
DEVCARE SOLUTIONS	23,680.
GENZEON CORPORATION INC (10221	
GENZEON CORPORATION INC (10218)	
NITYO INFOTECH CORPORATION	27,840.
DEVCARE SOLUTIONS	
Total	91,520.

Form 1065: Partnership Tax Return Line 21, Other Deductions

Continuation Statement

Description		Amount
Description		
ACCOUNTING		8,000.
AUTOMOBILE AND TRUCK EXPENSE		4,000.
CLEANING		1,000.
COMPUTER SERVICES AND SUPPLIES		5,000.
INSURANCE		4,000.
LEGAL AND PROFESSIONAL		4,000.
MEALS (100%)		2,000.
MISCELLANEOUS		4,000.
OFFICE EXPENSE		5,000.
OUTSIDE SERVICES		32,000.
PERMITS AND FEES		2,000.
PRINTING		2,000.
SECURITY		1,000.
SUPPLIES		1,000.
TELEPHONE		1,000.
TRAINING/CONTINUING EDUCATION		2,000.
TRAVEL		2,000.
	Total	80,000.

Form 1065: Partnership Tax Return -- Smart Worksheet

Line 9a Itemization Statement

Description	Amount
	13,000.
Total	13,000.





STATE OF SOUTH CAROLINA

2023 PARTNERSHIP RETURN Due by the 15th day of the third month following the close of the taxable year.

SC 1065

(Rev. 5/2/23) 3087

For the year	January 1 - December	31, 2023, or fiscal tax	c year beginning	g – 20	23 and ending	_ 2024
Name			Location of bu	siness property: C	ity and state	Phone number
SRINIX	TECH LLC					(341)201-8422
Address			City		State	ZIP
34972 N	NEWARK BLVD UN	IIT 154	NEWARK		CA	94560
H	Required):	County code:		Check for Active	Trade or Busine	ess election.
87-29		46		Check here if you	i filed a federal	or state extension.
			inal ratura			
Check if:		al return F	inal return	Address ch	lariye	Amended return
Total numb			er of nonreside			of nonresident partners
of partners:	2 nonresident pa	artners: 2 partne	ers exempt from	withholding:	included i	n the composite return:
	C business income (from					1 -1,480 00
	rade or Business Incom	•	•			2 00
	rade or Business Incom					3 00
	ndable tax credits (from					4 00
	rade or Business Incom	•		,		5 00
	me taxable to partners (•			6 -1,480 00
	income exempt from wi	- '	•		,	7 00
	subject to nonresident w			•		8 -1,48000
	dent Withholding Tax (m					9 000
	x (add line 5 and line 9).					10 000
	hheld (attach I-290 or 10	•				11 00
	on payment (amount pai				.	12 00
	ed Tax payments				,	13 00
	ed for future use					14 00
-	yments (add line 11 thro	- ,				15 00
	is larger than line 10, s					16 00 17 00
	of line 16 to be credited	•				
	t line 17 from line 16 and			•		18 00 19 0 00
) is larger than line 15, s ng and/or late payment:					20 00
	e 19 and line 20 and ente			is is your BALANC		21 0 00
	DEPOSIT Getting a refu				DE DOL	21
	irect Deposit:	•				
	NFORMATION		, (,	,		
Type of Acc		g Savings				
Routing			The first two numbers	Bank Account		1-17
Number		of the RTN must	be 01 through 32.	Number (BAN)		digits
Have a bala	ance due? Pay electron	ically! It's quick and	d easy! Use ou	r free online tax po	ortal, MyDORW	AY, at dor.sc.gov/pay.
I declare tha	t this return and all attac	chments are true, cor	rect, and compl	ete to the best of r	ny knowledge.	REV 12/20/23 PRO
Sign			_N	IKHILVPGO@G	SMAIL.COM	Attach a complete copy of your federal return.
Here	Signature of general partn	er or LLC/LLP member		nail		Mail to:
	I authorize the Director of	f the SCDOR or delega	ate to discuss thi	s return,	D No	Balance Due:
	attachments, and related t	<u> </u>		Y€		SCDOR
Paid	Print preparer's name	1	eck if f-employed	Preparer phone nu		Taxable Partnership PO Box 125
Preparer's	VENKATA SAI PAVAN K	ONINAK DODILATITI sei	i-employed 🗀	(678)965-1		Columbia, SC 29214-0036
Use Only	Preparer signature VENKATA SAI	דייות מואוא אוואע	λτττ	Date PUZ4	10033	Zero Tax:
200 J,		LOBAL TAXES			L45487	SCDOR Nontaxable Partnership
	vours if self-employed)					PO Box 125
	and address 24	45 ROONEY CT E BI	KUMSWICK, NJ	ZIP)	Columbia, SC 29214-0037



SC1065 page 2

_	SCHEDULE SC-K	PARTNERS' SHA	RES OF INCOME (L	OSSES), DEDUCTI	ONS, AND CREDITS	(See instructions.)
	А	В	С	D	E	F
	Enter Amounts From Federal Schedule K	Plus or Minus South Carolina Adjustment	Federal Schedule K Amounts After SC Adjustments	Amounts Allocated to SC	Amounts Allocated to States Other Than SC	Amounts Subject to Apportionment
	Ordinary business income (loss)					
1	-1,480 Net rental real estate income (loss)	0	-1,480			-1,480
	Net rental real estate income (loss)					
2	Other net rental income (loss)					
3	Guaranteed payments					
5	Interest income					
	Dividends					
6	Royalties					
7 8	Net short term capital gain (loss)					
9	Net long term capital gain (loss)					
10	Net section 1231 gain (loss)					
	Other income (loss)					
11	Section 179 Deduction					
12	Contributions					
13a	Investment interest expense					
13b	Section 59(e)(2) Expenditures					
13c	Other deductions					
13d	Total					
14	-1,480	0	-1,480	0	0	-1,480
	15. Amount from federal So	chedule K (line 14, c	olumn A)		15	-1,480
	16. Amount allocated to So	outh Carolina (line 14	, column D)		16	0
	17. Net income (loss) subje	ect to apportionment	(line 14, column F)		17	-1,480
:	APPORTIONMENT			TOTAL	00	
				TOTAL	SC	
	18. Total sales or gross red	ceipts		18		
	19. Apportionment factor (c	divide South Carolina	a sales or gross recei	pts by total)	19	100.0000%
:	20. Net business income (le	oss) apportioned to	South Carolina (multi	ply line 17 by line 19	9) 20	-1,480
:	21. Net business income (lo	oss) taxable to Soutl	n Carolina (add line 1	6 and line 20)	21	-1,480

7030

dor.sc.gov

STATE OF SOUTH CAROLINA DEPARTMENT OF REVENUE

PARTNER'S SHARE OF SOUTH CAROLINA INCOME, DEDUCTIONS, CREDITS, ETC.

SC1065 K-1

(Rev. 9/29/21) 3515

2023 or tax year beginning _____ For calendar year and ending **Partner's Identification Number** ▶ 578-95-4081 Partnership's FEIN ▶ 87-2973329 Partner's name, address, and ZIPSRIKANTH REDDY SAMA Partnership's name, address, and ZIPSRINIX TECH LLC 1270 BEETHOVEN CMN UNIT 206 34972 NEWARK BLVD UNIT 154 FREMONT, CA 94538 NEWARK, CA 94560 Partnership - Check for Active Trade or Business election If partner is a disregarded entity, name and SSN or FEIN of owner: Check if: 🗌 Final K-1 🔲 Amended K-1 🔀 Nonresident Check if partner is exempt from nonresident withholding because the: partner filed an I-309 affidavit with the Partnership partner is included in a composite return partner is a tax exempt entity Α В С D Partner's Share of Current Year Income, Federal Plus or Amounts Not Amounts Deductions, Credits, etc. Minus K-1 Allocated or Allocated or **Amounts** SC Adjustments Apportioned to SC Apportioned to SC 1 Ordinary business income (loss)..... 1 -755 0 -755 2 2 2 2 Net rental real estate income (loss)....... Other net rental income (loss)..... 3 3 3 3 Guaranteed payments 4 4 4 4 Interest income..... 5 5 5 5 6 6 6 6 Dividends..... 7 7 7 7 7 Royalties..... 8 8 8 8 Net short-term capital gain (loss)..... Net long-term capital gain (loss)..... 9 9 9 9 10 Net Section 1231 gain (loss)..... 10 10 10 11 Other income (loss)..... 11 11 11 11 12 Section 179 deduction..... 12 12 12 12 Deductions 13 13 13 13 Other deductions 13 Active Trade or Business Income taxed by the Partnership 14 15 Net taxable income (add line 1 through line 11 then subtract line 12, line 13, and line 14)..... -755 16 Withholding Tax for nonresident partner (see SC1065 K-1 Instructions)..... 16 List applicable South Carolina tax credits. (Attach an additional sheet if needed.) 17 17 18 18 Total South Carolina tax credits.....

7030

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STATE OF SOUTH CAROLINA DEPARTMENT OF REVENUE

PARTNER'S SHARE OF SOUTH CAROLINA INCOME, DEDUCTIONS, CREDITS, ETC.

SC1065 K-1

(Rev. 9/29/21) 3515

2023 or tax year beginning _____ For calendar year and ending **Partner's Identification Number** ▶ 705-17-6879 Partnership's FEIN ▶ 87-2973329 Partner's name, address, and ZIPNIKHIL GADDAM Partnership's name, address, and ZIPSRINIX TECH LLC 3167 CALDWELL RIDGE PKWY 34972 NEWARK BLVD UNIT 154 CHARLOTTE, NC 28213 NEWARK, CA 94560 Partnership - Check for Active Trade or Business election If partner is a disregarded entity, name and SSN or FEIN of owner: Check if:
Final K-1
Amended K-1
Nonresident Check if partner is exempt from nonresident withholding because the: partner filed an I-309 affidavit with the Partnership partner is included in a composite return partner is a tax exempt entity Α В С D Partner's Share of Current Year Income, Federal Plus or Amounts Not Amounts Deductions, Credits, etc. Minus K-1 Allocated or Allocated or **Amounts** SC Adjustments Apportioned to SC Apportioned to SC 1 Ordinary business income (loss)..... 1 -725 0 -725 2 2 2 2 Net rental real estate income (loss)....... Other net rental income (loss)..... 3 3 3 3 Guaranteed payments 4 4 4 4 Interest income..... 5 5 5 5 Dividends..... 6 6 6 6 7 7 7 7 7 Royalties..... 8 8 8 8 Net short-term capital gain (loss)..... Net long-term capital gain (loss)..... 9 9 9 9 10 Net Section 1231 gain (loss)..... 10 10 10 11 Other income (loss)..... 11 11 11 11 12 Section 179 deduction..... 12 12 12 12 Deductions 13 13 13 13 Other deductions 13 Active Trade or Business Income taxed by the Partnership 14 15 Net taxable income (add line 1 through line 11 then subtract line 12, line 13, and line 14)..... -725 16 Withholding Tax for nonresident partner (see SC1065 K-1 Instructions)..... 16 List applicable South Carolina tax credits. (Attach an additional sheet if needed.) 17 17 18 18 Total South Carolina tax credits.....

Voucher at bottom of page



If amount of payment is zero, do no mail this voucher.

When to pay:

Fiscal Year – File and Pay by the 15th day of the 4th month after the beginning of the taxable year.

Calendar Year - File and Pay by April 15, 2024.

When the due date falls on a weekend or holiday, the deadline to file and pay without penalty is extended to the next business day.

Pay online: Go Green! Enjoy the ease and secure options for online payments.



- Web pay for businesses LLCs can make an immediate payment or schedule payments for up to a year in advance.
- Credit Card (service fee)

Go to **ftb.ca.gov/pay** for more information. Do not mail this form if you pay online.

Where to pay: Using black or blue ink, make a check or money order payable to the "Franchise Tax Board." Write the California SOS file number, FEIN, and "2024 FTB 3522" on the check or money order. Detach the payment voucher from the bottom of the page. Enclose, but do not staple, your payment with the voucher 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.

DETACH HERE	IF NO PAYMENT IS	DUE, DO NOT MAIL THIS VOL REV 03/11/24 PRO	ICHER	DET	ACH HERE	
TAXABLE YEAR				CALI	FORNIA FORM	
2024 LLC Ta	x Voucher				3522	
000000000000 SRI TYB 01-01-2024 SRINIX TECH LLC		(341) 201-8422	24	FORM	0	
34972 NEWARK BLVD NEWARK	UNIT 154 CA 94560					

AMOUNT OF PAYMENT

800.

2023

Limited Liability Company Return of Income

568

00000000000 SRIN 87-2973329 TYB 01-01-2023 TYE 12-31-2023 SRINIX TECH LLC 23

34972 NEWARK BLVD UNIT 154 NEWARK CA 94560

ACCTMETHOD 1 10-03-2021 ASSETS 89041. INITIAL 0 FINAL 0 AMENDED 0 PROTECTIVE 0

(1) During this taxable year, did this LLC acquire control or majority ownership (more than a 50% interest) in another legal entity?

If yes, did the acquired entity(ies) own California real property (i.e., land, buildings), lease such property for a term of 35 years or more, or lease such property from a government agency for any term? If yes to both questions, answer yes...... During this taxable year, did another person or legal entity acquire control or majority ownership (more than a 50% interest) of this LLC or any legal entity in which the partnership holds a controlling or majority interest? If yes, did the acquired entity(ies) own California real property (i.e., land, buildings), lease such property for a term of 35 years or more, or lease such property from a government agency for any term? If yes to both questions, answer yes... Has California real property (i.e., land, buildings) transferred to the LLC that was excluded from property tax reassessment under Revenue and Taxation Code Section 62(a)(2)? If yes, during this taxable year, has more than 50% of the LLC's ownership interests cumulatively transferred in one or more transactions and it was not reported on a previous year's tax return? If yes to both questions, answer yes. . . . (Yes requires filing of BOE-100-B statement, penalties may apply- see instructions.) Complete Schedule IW, LLC Income Worksheet (on Side 7) first to determine line 1. Whole dollars only 91520. 1 1 Total income from Schedule IW, Limited Liability Company Income Worksheet. See instructions 0. 2 2 Limited Liability Company fee. See instructions..... 800. 3 00 4 00 5 00 Enclose, but do not staple, 6 Partnership level tax. If IRS concluded a centralized audit for this year, see instructions. If not, leave blank. 6 00 800. 7 00 7 Total tax and fee. Add line 2, line 3, line 4, line 5, and line 6...... 8 00 8 Amount paid with form FTB 3537 and 2023 form FTB 3522 and form FTB 3536..... 00 9 Amounts paid for pass-through entity elective tax 10 00 10 Overpayment from prior year allowed as a credit. **11** Withholding (Form 592-B and/or 593)..... 11 00 00 13 00 Use tax. This is not a total line. See instructions. 14 Payments balance. If line 12 is more than line 13, subtract line 13 from line 12...... 00 14 15 00 800. 00

051

00

17

		Whole	dollar	s only	
	18 Amount of line 17 to be credited to 2024 tax or fee	3			00
	19 Refund. If the total of line 18 is less than line 17, subtract the total from line 17 • 19				00
	20 Penalties and interest. See instructions	ן			00
	21 Total amount due. Add line 15, line 16, line 18, and line 20, then subtract line 17 from the result 21			800	00
J	Principal business activity code (Do not leave blank)	. • 5	4151	2	
K	Enter the maximum number of members in the LLC at any time during the year. For multiple member LLCs, attach a California Schedule K-1 (568) for each of these members	• _		2	
L	Is this LLC an investment partnership? See General Information 0	. • _	Yes	×	No
M	(1) Is this LLC apportioning or allocating income to California using Schedule R?	. • _	Yes	Ľ	No
	(2) If "No," was this LLC registered in California without earning any income sourced in this state during the taxable year?	. ●	Yes		No
N	Was there a distribution of property or a transfer (for example, by sale or death) of an LLC interest during the taxable year? \dots	. ●	Yes	Ľ	No
P	(1) Does the LLC have any foreign (non-U.S.) nonresident members?		Yes	×	No
	(2) Does the LLC have any domestic (non-foreign) nonresident members?	. • <u> </u>	Yes	Ц	No
	(3) Were Form 592, Form 592-A, Form 592-B, Form 592-F, and Form 592-PTE filed for these members?	. • 📙	Yes	×	No
Q	Are any members in this LLC also LLCs or partnerships?	. • 崖	Yes	×	No
R	Is this LLC under audit by the IRS or has it been audited in a prior year?	. • 💆	Yes	×	No
S	Is this LLC a member or partner in another multiple member LLC or partnership?	. • L	Yes	×	No
T	Is this LLC a publicly traded partnership as defined in IRC Section 469(k)(2)?		Yes	Ľ	No
U	(1) Is this LLC a business entity disregarded for tax purposes?	. • L	Yes	×	No
	(2) If "Yes," see instructions and complete Side 1, Side 2, Side 3, Schedule B, Side 5, and Side 7, if applicable. Are there credits or credit carryovers attributable to the disregarded entity?	• [Yes		No
	(3) If "Yes" to U(1), does the disregarded entity have total income derived from or attributable to California that is less than the LLC's total income from all sources?	. \Box	Yes		No
V	Has the LLC included a Reportable Transaction, or Listed Transaction within this return? (See instructions for definitions). If "Yes," complete and attach federal Form 8886 for each transaction	• [Yes	×	No
w	Did this LLC file the Federal Schedule M-3 (federal Form 1065)?		Yes	×	No
X	Is this LLC a direct owner of an entity that filed a federal Schedule M-3?	. • 🗀	Yes	×	No
Y	Does the LLC have a beneficial interest in a trust or is it a grantor of a Trust?	• [Yes	×	No
Z	Does this LLC own an interest in a business entity disregarded for tax purposes?		Yes	×	No
AA	Is any member of the LLC related (as defined in IRC Section 267(c)(4)) to any other member of the LLC?	. • L	Yes	L×	No
ВВ	Is any member of the LLC a trust for the benefit of any person related (as defined in IRC Section 267(c)(4)) to any other member?	•	Yes	×	No

(continued on Side 3)

REV 03/11/24 PRO

(cont	tinued fr	rom Side 2)	_
СС	(1) Is t	the LLC deferring any income from the disposition of assets? (see instructions)	Yes
	(2) If "	Yes," enter the year of asset disposition	
DD	Is the L (see ins	LC reporting previously deferred Income from: structions)	§1031 • IRC §1033 • Other
EE "	Doing b	ousiness as" name. See instructions:	
	Lim (2) If "	s this LLC operated as another entity type such as a Corporation, S Corporation, General Partners nited Partnership, or Sole Proprietorship in the previous five (5) years?	•
GG	(1) Has	s this LLC previously operated outside California?	•
	(2) Is t	his the first year of doing business in California?	•
нн	Is the L	LC a section 721(c) partnership, as defined in Treasury Regulations Section 1.721(c)-1T(b)(14)?	Yes × No
Ш	At any t	ime during the tax year, were there any transfers between the LLC and its members subject to the ure requirements of Regulations section 1.707-8?	e
JJ	Check if	f the LLC: (1) Aggregated activities for IRC Section 465 at-risk purposes	
		(2) Grouped activities for IRC Section 469 passive activity purposes	
KK	(1) Has	this business entity previously filed an unclaimed property Holder Remit Report with the State Co	ontroller's Office?●
	(2) If "Y	es," when was the last report filed? (mm/dd/yyyy) ● (3) Amount last remi	itted = \$
Singl	e Memb	ber LLC Information and Consent — Complete only if the LLC is disregarded.	● Federal TIN/SSN
Sole 0	Owner's na	ame (as shown on owner's return)	FEIN/CA Corp no./CA SOS File no.
		City, State, and ZIP Code	
	nat type (1) Indi [,]	of entity is the ultimate owner of this SMLLC? See instructions. Check only one box: vidual (2) C Corporation (3) Pass-Through (S corporation, partnership	11 C classified as a nartnershin)
			J, LLO Glassified as a partificistiff)
Ш	(4) Esta	ate/Trust (5) Exempt Organization	
		onsent Statement: I consent to the jurisdiction of the State of California to tax my LLC income and he Franchise Tax Board.	d agree to file returns and pay tax as may be
Signa	ture 🕨	Date	
		Our privacy notice can be found in annual tax booklets or online. Go to ftb.ca.gov/privacy to learn about our privacy 1131 to locate FTB 1131 EN-SP, Franchise Tax Board Privacy Notice on Collection. To request this notice by mail, ca Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statem correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has	nents, and to the best of my knowledge and belief, it is true,
Sign Here		Signature of authorized Date member or manager	Telephone
		Authorized member or manager's email address (optional) NIKHILVPGO@GMAIL.COM Paid Date Observed Observed Observed Observed Date Observed Observ	● (341)201-8422 PTIN
Paid Pren	arer's	nrenarer's Cneck	mployed P02470833 Firm's FEIN
Use		Firm's name (or yours, if self-employed) GLOBAL TAXES LLC	● 88-2145487
		and address 245 ROONEY CT	Telephone
-		E BRUNSWICK, NJ 08816	• (678)965-9522
		May the FTB discuss this return with the preparer shown above (see instructions)?	● Yes No

REV 03/11/24 PRO

051 3673234 Form 568 2023 **Side 3**

S	chedu	ıle /	A Cost of Goods Sold									
1	Inven	tory a	it beginning of year						1			00
2	Purch	ases	less cost of items withdr	awn for personal use					2			00
3	Cost	of lab	or						3			00
4	Additi	onal	IRC Section 263A costs.	Attach schedule					4			00
5	Other	costs	s. Attach schedule						5			00
6	Total.	Add	line 1 through line 5									00
7		-	-						1 1			00
8		_			nd on Schedule B, line 2.				8			00
9			all methods used for valu									
	•				scribed in Treas. Reg. Sec						oods as	
			ed in Treas. Reg. Section	—	Other. Specify method us							
				•	d this taxable year for any	-						1 81
					rty produced or acquired						Yes] NO
					purposes) in determining						□ Vac □	l No
_			3 Income and Deduction								🔲 165 🔼	INO
_					es on line 1a through line	22 halow	See the instruction	ne for more	inforr	mation		
_	autio	1							1 1		21522	1
					ess returns and allowance				1c		91520.	
			,	. ,				_			01500	00
									3		91520.	
		1	•		hips, and fiduciaries. Atta				5			00
me		1	•		s, and fiduciaries. Attach				6			00
Income		1	•	•	n 1040)				7			00
_		1		•	e 17 (gain only)				8			00
		1							9			00
		9 Total losses included on Schedule D-1, Part II, line 17 (loss only)							10	00		00
		1							1 1			00
		12	Total income (loss). Con	nbine line 3 through line	<u>: 11 </u>						91520.	
		13	Salaries and wages (other	er than to members)					13		13000.	00
		1	, ,					_	$\overline{}$			00
		1						_	$\overline{}$			00
S		1			re on return				16			00
uctions		1			B 3885L \$			D	4-			
ucti					elsewhere on return \$			Balance •				00
Ded		1	•						18			00
		1	•						19 20			00
					See				21		80000.	
		1							22		93000.	
		1		· ·	ctivities. Subtract line 22				23		-1480.	
S	chedu				iability. Attach addition.							
		Mo	(a) mber's name	(b) SSN, ITIN,	(c) Distributive	(d) Tax	(e) Member's	Amount wi	(f)	l by thic	(g) Member's	
		IVIC	illuci 3 liailic	or FEIN	share of income	rate	total tax due	LLC on th	is mer	mber –	net tax due	
_							(see instructions)	reported o	n Forn	n 592-B		
											1	
_							-					
To	tal the a	amou	nt of tax due. Enter the to	otal here and on Side 1,	line 4. If less than zero en	nter -0				<u>_</u> _		
				,								
									REV	/ 03/11/24 P	PRO	

Schedule K Members' Shares of Income, Deductions, Credits, etc.

			Distributivė share items			ounts from eral K (1065)	Californ adjustme		lotal a Cal	(d) mounts usir ifornia law
	1	Ord	dinary income (loss) from trade or business activities	1	•	-1480.		0.0		-1480
			t income (loss) from rental real estate activities. Attach federal Form 8825	2	•			(
	3		Gross income (loss) from other rental activities	3a	•			C		
	٠	b	Less expenses. Attach schedule.	3b						
		C	Net income (loss) from other rental activities. Subtract line 3b from line 3a	3c	•			•		
	1	Gu	aranteed payments a Services	4a						
	4	_	Capital	4b						
		b	Total	4c	•					
	_	C		5	\odot					
			erest income	6	\odot					
			ridends	7	\odot					
			yalties		•					
			t short-term capital gain (loss). Attach Schedule D (568)	8	•					
	9	Ne.	t long-term capital gain (loss). Attach Schedule D (568)	9						
	10	а	Total gain under IRC Section 1231 (other than due to casualty or theft) .	10a	<u>•</u>					
		b	Total loss under IRC Section 1231 (other than due to casualty or theft) $. $	10b	<u> </u>					
	11	а	Other portfolio income (loss). Attach schedule	11a	<u> </u>					
		b	Total other income. Attach schedule	11b	<u> </u>			•		
		C	Total other loss. Attach schedule	11c	<u> </u>			(
	12	Exp	pense deduction for recovery property (IRC Section 179). Attach schedule	12	<u> </u>					
	13	а	Cash contributions	13a	O			C		
		b	Noncash contributions	13b	\odot				<u>) </u>	
		C	Investment interest expense	13c	ledow			•		
		d		13d1	ledow					
			2 Type of expenditures	13d2						
		е	Deductions related to portfolio income	13e	•			(
		-	Other deductions. Attach schedule	13f	\circ			(
	15		Withholding on LLC allocated to all members	15a						
		b	Low-income housing credit	15b						
		C	Credits other than the credit shown on line 15b related to rental real estate activities. Attach schedule	15c						
		d	Credits related to other rental activities. Attach schedule	15d						
		e	Nonconsenting nonresident members' tax paid by LLC	15e						
		f	Other credits. Attach schedule	15f	-					
	17									
~	17	a								
욛		b	Adjusted gain or loss	17b						
Tax (AMT) Iten		C	Depletion (other than oil and gas)	17c						
¥.		d	Gross income from oil, gas, and geothermal properties	17d	-					
<u>1</u> 3		е	Deductions allocable to oil, gas, and geothermal properties	17e	-					
\dashv		f	Other alternative minimum tax items. Attach schedule	17f						
	18	а	Tax-exempt interest income	18a						
		b	Other tax-exempt income	18b						
ļ		C	Nondeductible expenses	18c						
	19	а	Distributions of money (cash and marketable securities)	19a		51040.		0.		5104
L		b	Distribution of property other than money	19b						
	20	а	Investment income	20a				•		
		b	Investment expenses	20b				•		
		C	Other information. See instructions AGGREGATE GROSS RECEIPTS	20c				(9152
	21	_	Total distributive income/payment items. Combine lines 1, 2, 3c and 4c through 11c. From the result, subtract the sum of lines 12							
ļ		1.	through 13f	21a		-1480.	ı	0.	<u> </u>	-148
		b	Analysis of (a) (b) Individual	(c)		(d)		(e)		(f)
- 1			members: Corporate i. Active ii. Passive Po	artners	ship	Exempt Organiz	ation Non	minee/Other		LLC

REV 03/11/24 PRO

051 3675234 Form 568 2023 **Side 5**

Schedule L Balance Sheets. See instructions before completing Schedules L, M-1, and M-2.

		Beginning of	taxable year	End of taxable year		
	Assets	(a)	(b)	(c)	(d)	
1	Cash		5012.		89041	
2	a Trade notes and accounts receivable					
-	b Less allowance for bad debts	()		()		
3		1		,	•	
_						
4	geren geren en gemeent in			-		
5						
6				-	•	
7				_		
	b Mortgage and real estate loans			_		
8	Other investments. Attach schedule				•	
9	a Buildings and other depreciable assets					
	b Less accumulated depreciation	()	O	()	•	
10	a Depletable assets					
	b Less accumulated depletion	(()		
11	Land (net of any amortization)		O		•	
12	a Intangible assets (amortizable only)					
	b Less accumulated amortization	()		()		
13					•	
	Total assets		5012.		89041	
	Liabilities and Capital					
15	Accounts payable				•	
	Mortgages, notes, bonds payable in less than 1 year.				•	
17	_				•	
	All nonrecourse loans		O		•	
	a Loans from members					
	b Mortgages, notes, bonds payable in 1 year or more		•		•	
20					•	
	Members' capital accounts		• 5012.		89041	
	Total liabilities and capital		5012.		89041	
	chedule M-1 Reconciliation of Income (Loss) per Bo	oks With Income (Loss)		ount under California law. S		
	Net income (loss) per books		ne recorded on books this			
	Income included on Schedule K, line 1 through line 11c		dule K, line 1 through line 1			
	not recorded on books this year. Itemize		x-exempt interest			
	Guaranteed payments (other than health insurance) •	b Ot	her	§		
	Expenses recorded on books this year not included on	c To	tal. Add line 6a and line 6b		•	
	Schedule K, line 1 through line 13f. Itemize:	7 Dedu	ctions included on Schedu	le K, line 1 through line 13f		
	a Depreciation		harged against book incom			
	b Travel and entertainment		preciation			
	c Annual LLC tax		her			
	d Other					
	e Total. Add line 4a through line 4d				_	
	Total of line 1 through line 4e			21a.) Subtract line 8 from lin		
	Balance at beginning of year			4	140081.	
	Capital contributed during year		-		F1040	
2	a Cash	136549.		у		
			·	y		
•	b Property	4400				
	Net income (loss) per books	0		atroat line 0 from line 5	_	
4 S c	Other increases. Itemize	ı 9 t alize a Limited I iahility (ompany, (Complete only	otract line 8 from line 5 if initial return box is checked	<u> </u>	
_	me of entity liquidated (if more than one, attach a schedu					
	pe of entity: (1) C Corporation (2) S Corporation	,	(4) imited Partnersh	in (5) Sole Proprietor	(6) Farmer	
			CA Corp. No		No.	
	•		•		INU	
ΑΠ	nount of liquidation gains recognized to capitalize the LLC			REV 03/11/24 PRO		
	Side 6 Form 568 2023 0.5	1 367623	34			

Schedule IW Limited Liability Company (LLC) Income Worksheet

Enter your California income amounts on the worksheet. All amounts entered must be assigned for California law differences. **Use only amounts that are from sources derived from or attributable to California when completing lines 1-17 of this worksheet.** If your business is both within and outside of California, see Schedule IW instructions to assign the correct amounts to California. If the LLC is wholly within California, the total income amount is assigned to California and is entered beginning with line 1a. If the single member LLC (SMLLC) does not meet the 3 million criteria for filing Schedule B (568) and Schedule K (568), the SMLLC is still required to complete Schedule IW. Disregarded entities that do not meet the filing requirements to complete Schedule B or Schedule K should prepare Schedule IW by entering the California amounts attributable to the disregarded entity from the member's federal Schedule B, C, D, E, F (Form 1040), or additional schedules associated with other activities. **Do not enter amounts on this worksheet that have already been reported by another LLC to determine its fee.**

	chedules associated with other activities. Do not enter amounts on this worksheet that have already been reported by another LLC Bee instructions on page 14 of the Form 568 Booklet for more information on how to complete Schedule IW.	to determine its fee.
1	Total California income from Form 568, Schedule B, line 3. See instructions	
2	2 a If the answer to Question U(1) on Form 568 Side 2, is "Yes", include the gross income of this disregarded entity that is not included in lines 1 and 8 through 16	
3	b Enter the LLC's distributive share of cost of goods sold from other pass-through entities associated with the receipt assigned to California on line 3a (see Schedule K-1s (565), Table 3, line 1a)	
4	1 Add gross farm income from federal Schedule F (Form 1040). Use California amounts	
5	5 Enter the total of other income (not loss) from Form 568, Schedule B, line 10	
6	6 Enter the total gains (not losses) from Form 568, Schedule B, line 8	
7	7 Add line 1a through line 6	• 791520.
8		
	a Enter the total gross rents from federal Form 8825, line 18a	• 8c
9	Other California rentals.	
	a Enter the amount from Schedule K (568), line 3a	 • 9c
10	California interest. Enter the amount from Form 568, Schedule K, line 5	• 10
11	California dividends. Enter the amount from Form 568, Schedule K, line 6	
12	California royalties. Enter the amount from Form 568, Schedule K, line 7	• 12
13	California capital gains. Enter the capital gains (not losses) included in the amounts from Form 568, Schedule K, lines 8 and 9	• 13
14	California 1231 gains. Enter the amount of total gains (not losses) from Form 568, Schedule K, line 10a	• 14
15	5 Other California portfolio income (not loss). Enter the amount from Form 568, Schedule K, line 11a	• 15
16	6 Other California income (not loss) not included in line 5. Enter the amount from Form 568, Schedule K, line 11b	• 16

051 3677234 Form 568 2023 **Side 7**

17 Total California income. Add lines 7, 8c, 9c, 10, 11, 12, 13, 14, 15, and 16. Line 17 may not be a negative number.

REV 03/11/24 PRO

2023

Limited Liability Company Nonresident Members' Consent

CALIFORNIA FORM

3832

For use by limited liability companies (LLCs) with one or more nonresident members. Attach to Form 568 and give a copy to each nonresident member. Use additional sheets if necessary. Separate forms FTB 3832 for each nonresident member (or groups of nonresident members) may be used.

Limited liability company name	California Secretary of State (SOS) file number
	FEIN
SRINIX TECH LLC	87-2973329

Note: Completion of this form does not satisfy the requirements for filing a California income tax return. See General Information C, Nonresidents Who Must File a California Return.

List the names and identification numbers below, of the nonresident members of record at the end of the LLC's taxable year.

Number	Nonresident member's name	I consent to the jurisdiction of the State of Ca to tax my distributive share of the LLC inc attributable to California sources.	Nonresident member's identifying number.	
		Signature	Date	See instructions.
1	●NIKHIL GADDAM			• 705-17-6879
2	•			•
3	•			•
4	•			•
5	•			•
6	•			•
7	•			•

List the names and identification numbers below, of the nonresident members who sold or transferred their ownership interests before the end of the LLC's taxable year.

Number	Nonresident member's name	I consent to the jurisdiction of the State of California to tax my distributive share of the LLC income attributable to California sources.	Nonresident member's identifying number.
		Signature Date	See instructions.
1	•		•
2	•		•
3	•		•
4	•		•
5	•		•
6	•		•
7	•		•

REV 03/11/24 PRO

TAXABLE YEAR

2023

Member's Share of Income, Deductions, Credits, etc.

CALIFORNIA SCHEDULE

K-1 (568)

TYB 01-01-2023 TYE 12-31-2023 578-95-4081 SRIKANTH REDDY SAMA

1270 BEETHOVEN CMN UNIT 206 FREMONT CA 94538

87-2973329 SRINIX TECH LLC

34972 NEWARK BLVD UNIT 154 NEWARK CA 94560

A	What type of entity is this memb	ber? • See instructions.				
	(1) X Individual	(4) C Corporation	(7)	LLP	(10)	Exempt Organization
	(2) S Corporation	(5) General Partnership	(8)	LLC	(11a)	Disregarded Entity (DE)
	(3) Estate/Trust	(6) Limited Partnership	(9)	IRA/Keogh/SEP	(11b)	DE owner's name
					(11c)	DE owner's TIN
В	Is this member a foreign memb	er?				● ☐ Yes 🗷 No
C	Enter member's percentage (wit	thout regard to special allocations) of:		(i) Beginning		(ii) Ending
	Profit			5 1.0 0 0 0	%	• 5 1.0 0 0 0 %
	Loss			5 1.0 0 0 0	%	• 5 1.0 0 0 0 ¶%
	Capital			5 1.0 0 0 0	%	• 5 1.0 0 0 0 %
	Check if decreases is due to:	Sale or Exchange of LLC in	teres	t.		
D	Member's share of liabilities:			(i) Beginning		(ii) Ending
	Nonrecourse		. \$,	00	•\$.00
	Qualified nonrecourse financing	l	. \$		00	•\$.00
	Recourse		. \$		00	•\$.00
	Check the box if Item D includes	s liability amounts from lower tier part	tners	hips or LLCs		
	Check if any of the above liabilit	y is subject to guarantees or other pay	ymer	nt obligations by the member		
E	Reportable transaction or tax sh	nelter registration number(s)				
F	(1) Check here if this is a public	cly traded partnership as defined in IR	C Se	ction 469(k)(2)		

Member's name Member's identifying number 578-95-4081 SRIKANTH REDDY SAMA G Check here if this is: • (1) A final Schedule K-1 (568) (2) An amended Schedule K-1 (568) Did this member contribute property with a built-in gain or loss? If "Yes" attach statement. See instructions. Member's share of net unrecognized IRC Section 704(c) gain or (loss) (i) Beginning ___ _____ (ii) Ending Analysis of member's tax basis capital account: (b) (c)
Capital contributed during year Current year net income (loss) (d) (e) Withdrawals and distributions (f)
Capital account at end of year, (a) Capital account at beginning Other increase (decrease) combine column (a) through column (e) of year (attach explanation) 68275. -755. 25,520) 42000. Caution: Refer to Member's Instructions for Schedule K-1 (568) before entering information from this schedule on your California return. (b) (e) California adjustments Distributive share items Amounts from Total amounts using California federal Schedule K-1 California law. Combine source amounts (Form 1065) col. (b) and col. (c) and credits 1 Ordinary income (loss) from trade or -755. 0. -755. 2 Net income (loss) from rental real (•) 3 Net income (loss) from other rental activities . . **4 a** Guaranteed payments for services..... **4 b** Guaranteed payments for capital ncome (Loss) 4 c Total guaranteed payments 8 Net short-term capital gain (loss) 9 Net long-term capital gain (loss) 10 a Total gain under IRC Section 1231 (other than due to casualty or theft) **b** Total loss under IRC Section 1231 other than due to casualty or theft) 11 a Other portfolio income (loss). Attach schedule **b** Total other income. Attach schedule c Total other loss. Attach schedule

REV 03/11/24 PRO

Member's name

Member's identifying number

~~		~
SRIKANTH	עוווים ט	CVMM

578-95-4081

			(a) Distributive share items	(b) Amounts from	(c) California adjustments	(d) Total amounts using	(e) California
				federal Schedule K-1 (Form1065)		California law. Combine col. (b) and col. (c)	source amounts and credits
	12		Expense deduction for recovery property (IRC Section 179)			•	•
	13	а	Cash contributions			•	
			Noncash contributions			•	
Deductions			Investment interest expense			•	•
Dedu		d	1 Total expenditures to which an IRC Section 59(e) election may apply			•	•
			2 Type of expenditures				
		е	Deductions related to portfolio income. Attach schedule			•	•
			Other deductions. Attach schedule			•	•
	15	а	Total withholding (equals amount on Form 592-B if calendar year LLC)			•	>
		b	Low-income housing credit			•	•
Credits		C	Credits other than line 15b related to rental real estate activities. Attach schedule			•	•
Cre		d	Credits related to other rental activities. Attach schedule			•	•
		е	Nonconsenting nonresident members' tax paid by LLC				
		f	Other credits – Attach required schedules or statements				
Items	17	a	Depreciation adjustment on property placed in service after 1986				•
AMT)		b	Adjusted gain or loss			•	•
n Tax (Depletion (other than oil & gas)			•	•
Alternative Minimum Tax (AMT) Items		d	Gross income from oil, gas, and geothermal properties			•	•
ıtive IV		е	Deductions allocable to oil, gas, and geothermal properties				
VIterna		f	Other alternative minimum tax items.			•	•
e e	40		Attach schedule			•	•
Tax-exempt Inco and Nondeductil Expenses	18		Tax-exempt interest income			•	•
ax-exer nd Non Exp			Other tax-exempt income			•	•
ons a	19		Distributions of money (cash and		_		
Distributions			marketable securities)	25520.	0.	<u>25520.</u>	
			Distributions of property other than money			•	
Other Information	20	a	Investment income			•	(a)
Ott nform			Investment expenses			<u> </u>	•
_=	04	C	Other information. See instructions	One instance		● 46675.	
	21 22		☐ More than one activity for at-risk purpose☐ More than one activity for passive activity		nns		

REV 03/11/24 PRO

Member's name Member's identifying number SRIKANTH REDDY SAMA 578-95-4081 **Other Member Information** Table 1 — Member's share of nonbusiness income from intangibles (source of income is dependent on residence or commercial domicile of the member): Sec. 1231 Gains/Losses\$ Interest \$ Capital Gains/Losses . . . \$ Dividends \$ Royalties\$ Other\$ FOR USE BY MEMBERS ONLY - See instructions. **Table 2** — Member's share of distributive items. A. Member's share of the LLC's business income. See instructions. \$ Member's share of nonbusiness income from real and tangible personal property sourced or allocable to California. Rents/Royalties\$ C. Member's distributive share of the LLC's property, payroll, and sales: **Factors** Total within and outside California **Total within California** Property: Beginning Property: Ending\$ Property: Annual rent expense\$

SRINIX TECH LLC 87-2973329 1

Additional Information From CA Schedule K-1 (568): Member's Share of Income, Deductions, Credits, etc. (SRIKANTH REDDY SAMA)

CA Schedule K-1 (568): Member's Share of Income, Deductions, Credits, etc. (SRIKANTH REDDY SAMA)

Supplemental Information Required to be Reported

Continuation Statement

Description	CA Law Amounts
AGGREGATE GROSS RECEIPTS	46675.
TOTAL	46675.

TAXABLE YEAR

2023

Member's Share of Income, Deductions, Credits, etc.

CALIFORNIA SCHEDULE

K-1 (568)

TYB 01-01-2023 TYE 12-31-2023 705-17-6879 NIKHIL GADDAM

3167 CALDWELL RIDGE PKWY CHARLOTTE NC 28213

87-2973329 SRINIX TECH LLC

34972 NEWARK BLVD UNIT 154 NEWARK CA 94560

A	What type of entity is this memb	ber? • See instructions.				
	(1) 🗵 Individual	(4) C Corporation	(7)	LLP	(10)	Exempt Organization
	(2) S Corporation	(5) General Partnership	(8)	LLC	(11a)	Disregarded Entity (DE)
	(3) Estate/Trust	(6) Limited Partnership	(9)	IRA/Keogh/SEP	(11b)	DE owner's name
					(11c)	DE owner's TIN
В	Is this member a foreign memb	er?				• Yes 🗶 No
C	Enter member's percentage (wit	thout regard to special allocations) of:		(i) Beginning		(ii) Ending
	Profit			4 9.0 0 0 0	%	• 4 9.0 0 0 0 %
	Loss			4 9.0 0 0 0	%	4 9.0 0 0 0 %
	Capital			4 9.0 0 0 0	%	4 9.0 0 0 0 0 %
	Check if decreases is due to:	Sale or Exchange of LLC in	eres	t.		
D	Member's share of liabilities:			(i) Beginning		(ii) Ending
	Nonrecourse		\$		00	• \$.00
	Qualified nonrecourse financing	l	\$		00	• \$
	Recourse		\$		00	•\$.00
	Check the box if Item D includes	s liability amounts from lower tier part	ners	hips or LLCs		
	Check if any of the above liabilit	y is subject to guarantees or other pay	/men	nt obligations by the member		
Ε	Reportable transaction or tax sh	nelter registration number(s)				
F	(1) Check here if this is a public	cly traded partnership as defined in IR	C Se	ction 469(k)(2)		

Member's name Member's identifying number 705-17-6879 NIKHIL GADDAM G Check here if this is: • (1) A final Schedule K-1 (568) (2) An amended Schedule K-1 (568) Did this member contribute property with a built-in gain or loss? If "Yes" attach statement. See instructions. Member's share of net unrecognized IRC Section 704(c) gain or (loss) (i) Beginning ___ Analysis of member's tax basis capital account: (b) (c)
Capital contributed during year Current year net income (loss) (d) (e) Withdrawals and distributions (f)
Capital account at end of year, (a) Capital account at beginning Other increase (decrease) combine column (a) through column (e) of year (attach explanation) 68274. -725. 25,520) 42029. Caution: Refer to Member's Instructions for Schedule K-1 (568) before entering information from this schedule on your California return. (b) (e) California adjustments Distributive share items Amounts from Total amounts using California federal Schedule K-1 California law. Combine source amounts (Form 1065) col. (b) and col. (c) and credits 1 Ordinary income (loss) from trade or -725. 0. -725. -725. 2 Net income (loss) from rental real (•) 3 Net income (loss) from other rental activities . . **4 a** Guaranteed payments for services..... **4 b** Guaranteed payments for capital ncome (Loss) 4 c Total guaranteed payments 8 Net short-term capital gain (loss) 9 Net long-term capital gain (loss) 10 a Total gain under IRC Section 1231 (other than due to casualty or theft) **b** Total loss under IRC Section 1231 other than due to casualty or theft) 11 a Other portfolio income (loss). Attach schedule **b** Total other income. Attach schedule c Total other loss. Attach schedule

REV 03/11/24 PRO

Member's name

Member's identifying number

	E0E 1E 60E0
NIKHIL GADDAM	705-17-6879

			(a) Distributive share items	(b) Amounts from federal Schedule K-1 (Form1065)	(c) California adjustments	(d) Total amounts using California law. Combine col. (b) and col. (c)	(e) California source amounts and credits
	12		Expense deduction for recovery property (IRC Section 179)			•	•
	13	а	Cash contributions			•	
ø		b	Noncash contributions			•	
Deductions			Investment interest expense			•	•
Dedu		d	1 Total expenditures to which an IRC Section 59(e) election may apply			•	•
		_	2 Type of expenditures				
		е	Deductions related to portfolio income. Attach schedule			•	•
			Other deductions. Attach schedule			•	•
	15	а	Total withholding (equals amount on Form 592-B if calendar year LLC)			•	>
		b	Low-income housing credit			•	•
dits		C	Credits other than line 15b related to rental real estate activities. Attach schedule			•	
Credits		d	Credits related to other rental activities. Attach schedule			•	•
		е	Nonconsenting nonresident members' tax paid by LLC			lacksquare	
		f	Other credits – Attach required schedules or statements			•	•
Items	17	а	Depreciation adjustment on property placed in service after 1986				•
Alternative Minimum Tax (AMT) Items		b	Adjusted gain or loss			•	•
ı Tax		C	Depletion (other than oil & gas)			•	•
imun			Gross income from oil, gas, and			lacksquare	•
ve Mi		е	geothermal properties			•	•
ernati		f	geothermal properties				
ne Alt			Attach schedule				•
l Incom ductibl ses	18	a	Tax-exempt interest income			•	•
Nonde Expen		b	Other tax-exempt income			•	•
Tax-e			Nondeductible expenses			•	•
Tax-exempt Incor Distributions and Nondeductib Expenses	19	а	Distributions of money (cash and marketable securities)	25520.	0.	25520.	
Distri		b	Distributions of property other than money			•	
ion	20	а	Investment income			•	•
Other Information			Investment expenses			•	
Infe			Other information. See instructions			44845.	
	21		☐ More than one activity for at-risk purpos				
	22		☐ More than one activity for passive activity	/ purposes. See instruction	ons.		

REV 03/11/24 PRO

Member's name Member's identifying number NIKHIL GADDAM 705-17-6879 **Other Member Information** Table 1 — Member's share of nonbusiness income from intangibles (source of income is dependent on residence or commercial domicile of the member): Sec. 1231 Gains/Losses\$ Interest \$ Capital Gains/Losses . . . \$ Dividends \$ Royalties\$ Other\$ FOR USE BY MEMBERS ONLY - See instructions. **Table 2** — Member's share of distributive items. A. Member's share of the LLC's business income. See instructions. \$ Member's share of nonbusiness income from real and tangible personal property sourced or allocable to California. Rents/Royalties\$ C. Member's distributive share of the LLC's property, payroll, and sales: **Factors** Total within and outside California **Total within California** Property: Beginning Property: Ending\$ Property: Annual rent expense\$

SRINIX TECH LLC 87-2973329

Additional Information From CA Schedule K-1 (568): Member's Share of Income, Deductions, Credits, etc. (NIKHIL GADDAM)

CA Schedule K-1 (568): Member's Share of Income, Deductions, Credits, etc. (NIKHIL GADDAM) Supplemental Information Required to be Reported Continuation Statement

Description	CA Law Amounts
AGGREGATE GROSS RECEIPTS	44845.
TOTAL	44845.

SRINIX TECH LLC 87-2973329 1

Additional Information From 2023 California Limited Liability Company Tax Return

Form 568: Limited Liability Company Return of Income Schedule B, Line 21

Continuation Statement

Description	Amount
ACCOUNTING	8000.
AUTOMOBILE AND TRUCK EXPENSE	4000.
CLEANING	1000.
COMPUTER SERVICES AND SUPPLIES	5000.
INSURANCE	4000.
LEGAL AND PROFESSIONAL	4000.
MISCELLANEOUS	4000.
OFFICE EXPENSE	5000.
OUTSIDE SERVICES	32000.
PERMITS AND FEES	2000.
PRINTING	2000.
SECURITY	1000.
SUPPLIES	1000.
TELEPHONE	1000.
TRAINING/CONTINUING EDUCATION	2000.
TRAVEL	2000.
MEALS (100%)	2000.
Total	80000

Form 568: Limited Liability Company Return of Income Sch B, Line 1a

Itemization Statement

Description	Amount
GLOBULETECH LLC	40000.
DEVCARE SOLUTIONS	23680.
GENZEON CORPORATION INC (10221	
GENZEON CORPORATION INC (10218)	
NITYO INFOTECH CORPORATION	27840.
DEVCARE SOLUTIONS	
Total	91520