

Form at bottom of page.

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 “2019 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 --- DETACH HERE ---

Caution: The corporation may be required to pay electronically. See instructions.

REV 01/07/19 PRO

Installment 1

TAXABLE YEAR

CALIFORNIA FORM

2019 Corporation Estimated Tax

100-ES

4171635 DZOK 83-0930746 000000000000 19 FORM 1
TYB 01-01-2019 TYE 12-31-2019
DZOKDEN

3436 DIVISADERO ST
SAN FRANCISCO CA 94123

Est Tax Amt 1318. QSub Tax Amt
Total Payment Amt 1318.

Form at bottom of page.

Installment 2 – File and Pay by the 15th day of the 6th 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 “2019 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 --- DETACH HERE ---

Caution: The corporation may be required to pay electronically. See instructions.

REV 01/07/19 PRO

Installment 2

TAXABLE YEAR

CALIFORNIA FORM

2019 Corporation Estimated Tax

100-ES

4171635 DZOK 83-0930746 000000000000 19 FORM 1
TYB 01-01-2019 TYE 12-31-2019
DZOKDEN

3436 DIVISADERO ST
SAN FRANCISCO CA 94123

Est Tax Amt 1758. QSub Tax Amt
Total Payment Amt 1758.

Form at bottom of page.

Installment 4 – File and Pay by the 15th day of the 12th 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 “2019 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 --- DETACH HERE ---

Caution: The corporation may be required to pay electronically. See instructions.

REV 01/07/19 PRO

Installment 4

TAXABLE YEAR

CALIFORNIA FORM

2019 Corporation Estimated Tax

100-ES

4171635 DZOK 83-0930746 000000000000 19 FORM 1
TYB 01-01-2019 TYE 12-31-2019
DZOKDEN

3436 DIVISADERO ST
SAN FRANCISCO CA 94123

Est Tax Amt 1318. QSub Tax Amt
Total Payment Amt 1318.

California Corporation Franchise or Income Tax Return

2018

100

4171635 DZOK 83-0930746 000000000000 18
TYB 01-01-2018 TYE 12-31-2018
DZOKDEN

3436 DIVISADERO ST
SAN FRANCISCO CA 94123

Schedule Q Questions (continued on Side 2)

A FINAL RETURN? ● Dissolved Surrendered (withdrawn) Merged/Reorganized IRC Section 338 sale QSub election
Enter date (mm/dd/yyyy) ●

B 1. Is income included in a combined report of a unitary group? ● Yes No

If "Yes," indicate: Wholly within CA (R&TC 25101.15)
 Within and outside of CA

2. Is there a change in the members listed in Schedule R-7 from the prior year? ● Yes No

3. Enter the number of members (including parent or key corporation) listed in the Schedule R-7, Part I, Section A, subject to income or franchise tax ●

4. Is form FTB 3544 and/or 3544A attached to the return? ● Yes No

C 1. During this taxable year, did another person or legal entity acquire control or majority ownership (more than a 50% interest) of this corporation or any of its subsidiaries that owned California real property (i.e., land, buildings), leased such property for a term of 35 years or more, or leased such property from a government agency for any term? ● Yes No

2. During this taxable year, did this corporation or any of its subsidiaries acquire control or majority ownership (more than a 50% interest) in another legal entity that owned California real property (i.e., land, buildings), leased such property for a term of 35 years or more, or leased such property from a government agency for any term? ● Yes No

3. During this taxable year, has more than 50% of the voting stock of this corporation cumulatively transferred in one or more transactions after an interest in California real property (i.e., land, buildings) was transferred to it that was excluded from property tax reassessment under R&TC Section 62(a)(2) and it was not reported on a previous year's tax return? ● Yes No

(Yes requires filing of statement, penalties may apply – see instructions.)

| | | | | |
|--------------------------|---|----------|---------|----|
| State Adjustments | 1 Net income (loss) before state adjustments. See instructions ● | 1 | 49,703. | 00 |
| | 2 Amount deducted for foreign or domestic tax based on income or profits from Schedule A ● | 2 | | 00 |
| | 3 Amount deducted for tax under the provisions of the Corporation Tax Law from Schedule A ● | 3 | | 00 |
| | 4 Interest on government obligations ● | 4 | | 00 |
| | 5 Net California capital gain from Side 6, Schedule D, line 11 ● | 5 | | 00 |
| | 6 Depreciation and amortization in excess of amount allowed under California law. Attach form FTB 3885 ● | 6 | | 00 |
| | 7 Net income from corporations not included in federal consolidated return. See instructions. ● | 7 | | 00 |
| | 8 Other additions. Attach schedule(s) ● | 8 | | 00 |
| | 9 Total. Add line 1 through line 8. ● | 9 | 49,703. | 00 |

| | | | | | | |
|---------------------------|----------|---|--|---------|------|------------------|
| State Adjustments (cont.) | 10 | Intercompany dividend elimination. Attach Schedule H (100) | 10 | 00 | | |
| | 11 | Dividends received deduction. Attach Schedule H (100) | 11 | 00 | | |
| | 12 | Additional depreciation allowed under CA law. Attach form FTB 3885 | 12 | 00 | | |
| | 13 | Capital gain from federal Form 1120, line 8 | 13 | 00 | | |
| | 14 | Charitable Contributions | 14 | 00 | | |
| | 15 | Other deductions. Attach schedule(s) | 15 | 00 | | |
| | 16 | Total. Add line 10 through line 15. | 16 | | 00 | |
| CA Net Income | 17 | Net income (loss) after state adjustments. Subtract line 16 from Side 1, line 9 | 17 | 49,703. | 00 | |
| | 18 | Net income (loss) for state purposes. Complete Schedule R if apportioning or allocating income. See instructions. | 18 | 49,703. | 00 | |
| | 19 | Net operating loss (NOL) deduction. See instructions | 19 | 00 | | |
| | 20 | EZ, LARZ, TTA, or LAMBRA NOL carryover deduction. See instructions | 20 | 00 | | |
| | 21 | Disaster loss deduction. See instructions. | 21 | 00 | | |
| | 22 | Net income for tax purposes. Combine line 19 through line 21. Then, subtract from line 18 | 22 | 49,703. | 00 | |
| Taxes | 23 | Tax. <u>8.84%</u> x line 22 (at least minimum franchise tax, if applicable). See instructions | 23 | 4,394. | 00 | |
| | 24 | Credit name _____ code ● _____ amount | 24 | 00 | | |
| | 25 | Credit name _____ code ● _____ amount | 25 | 00 | | |
| | 26 | To claim more than two credits, see instructions | 26 | 00 | | |
| | 27 | Add line 24 through line 26 | 27 | | 00 | |
| | 28 | Balance. Subtract line 27 from line 23 (at least minimum franchise tax, if applicable) | 28 | 4,394. | 00 | |
| | 29 | Alternative minimum tax. Attach Schedule P (100). See instructions. | 29 | 0. | 00 | |
| | 30 | Total tax. Add line 28 and line 29. | 30 | 4,394. | 00 | |
| | Payments | 31 | Overpayment from prior year allowed as a credit. | 31 | 00 | |
| | | 32 | 2018 Estimated tax payments. See instructions | 32 | 00 | |
| 33 | | 2018 Withholding (Form 592-B and/or 593). See instructions | 33 | 00 | | |
| 34 | | Amount paid with extension of time to file tax return | 34 | 00 | | |
| 35 | | Total payments. Add line 31 through line 34 | 35 | | 00 | |
| Refund or Amount Due | | 36 | Use tax. This is not a total line. See instructions | 36 | 00 | |
| | 37 | Payments balance. If line 35 is more than line 36, subtract line 36 from line 35 | 37 | | 00 | |
| | 38 | Use tax balance. If line 36 is more than line 35, subtract line 35 from line 36. | 38 | | 00 | |
| | 39 | Franchise or income tax due. If line 30 is more than line 37, subtract line 37 from line 30. | 39 | 4,394. | 00 | |
| | 40 | Overpayment. If line 37 is more than line 30, subtract line 30 from line 37 | 40 | | 00 | |
| | 41 | Amount of line 40 to be credited to 2019 estimated tax | 41 | | 00 | |
| | 42 | Refund. Subtract line 41 from line 40. | 42 | | 00 | |
| | | See instructions to have the refund directly deposited. <input type="checkbox"/> Checking <input type="checkbox"/> Savings | | | | |
| | 42a. | ● Routing number | 42b. | ● Type | 42c. | ● Account number |
| | 43 | a Penalties and interest. | 43a | 122. | 00 | |
| | | b ● <input type="checkbox"/> Check if estimate penalty computed using Exception B or C on form FTB 5806. See instructions. | | | | |
| | 44 | Total amount due. Add line 38, line 39, line 41, and line 43a. Then, subtract line 40 from the result | 44 | 4,516. | 00 | |

Schedule Q Questions (continued from Side 1)

- D** If the corporation filed on a water's-edge basis pursuant to R&TC Sections 25110 and 25113 in previous years, enter the date the water's-edge election ended (mm/dd/yyyy) ● _____
- E** Was the corporation's income included in a consolidated federal return? ● Yes No
- F** Principal business activity code. (Do not leave blank): ● 8 1 3 3 1 9
 Business activity NONPROFIT ORGANIZATION
 Product or service NONPROFIT ORGANIZATION

Schedule Q Questions (continued on Side 3)

G Date incorporated (mm/dd/yyyy): 0 7 0 5 2 0 1 8 Where: State CA Country

H Date business began in California or date income was first derived from California sources (mm/dd/yyyy) 0 7 0 5 2 0 1 8

I First return? Yes No If "Yes" and this corporation is a successor to a previously existing business, check the appropriate box. (1) Sole proprietorship (2) Partnership (3) Joint venture (4) Corporation (5) Other

J "Doing business as" name. See instructions:

K At any time during the taxable year, was more than 50% of the voting stock: 1. Of the corporation owned by any single interest? 2. Of another corporation owned by this corporation? 3. Of this and one or more other corporations owned or controlled, directly or indirectly, by the same interests?

L Has the corporation 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.

M Is this corporation apportioning or allocating income to California using Schedule R?

N How many affiliates in the combined report are claiming immunity from taxation in California under Public Law 86-272?

O Corporation headquarters are: (1) Within California (2) Outside of California, within the U.S. (3) Outside of the U.S.

P Location of principal accounting records 3436 DIVISADERO ST SAN FRANCISCO CA 94123

Q Accounting method: (1) Cash (2) Accrual (3) Other

R Does this corporation or any of its subsidiaries have a Deferred Intercompany Stock Account (DISA)? If "Yes," enter the total balance of all DISAs \$

S Is this corporation or any of its subsidiaries a RIC?

T Is this corporation treated as a REMIC for California purposes?

U Is this corporation a REIT for California purposes?

V Is this corporation an LLC or limited partnership electing to be taxed as a corporation for federal purposes? If "Yes," enter the effective date of the election (mm/dd/yyyy):

W Is this corporation to be treated as a credit union?

X Is the corporation under audit by the IRS or has it been audited by the IRS in a prior year?

Y Have all required information returns (e.g. federal Forms 1099, 5471, 5472, 8300, 8865, etc.) been filed with the Franchise Tax Board? N/A Yes No

Z Does the taxpayer (or any corporation of the taxpayer's combined group, if applicable) own 80% or more of the stock of an insurance company? Yes No

AA Did the corporation file the federal Schedule UTP (Form 1120)? Yes No

BB Does any member of the combined report own an SMLLC or generate/claim credits that are attributable to an SMLLC? Yes No

CC 1. Did this corporation, or any corporation in a combined reporting group, receive any qualified health care service plan income that is excluded from gross income for state purposes (R&TC Section 24330)? 2. Is this corporation's, or any corporation in a combined reporting group's, only source of income qualified health care service plan income that is excluded from gross income under R&TC Section 24330 for the taxable year?

Sign Here Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Signature of officer PRABHA NG Title PRESIDENT Date Telephone () Officer's email address (optional) Preparer's signature DANIEL MICHIELS Date 03/18/2024 Check if self-employed PTIN P 0 2 0 4 7 9 7 2 Firm's name (or yours, if self-employed) and address Firm's FEIN 8 4 2 2 4 9 5 5 4 Telephone () May the FTB discuss this return with the preparer shown above? See instructions Yes No

Schedule A Taxes Deducted. Use additional sheet(s) if necessary.

| (a) Nature of tax | (b) Taxing authority | (c) Total amount | (d) Nondeductible amount |
|--|-------------------------|---------------------|-----------------------------|
| | | | 00 |
| | | | 00 |
| Total. Enter total of column (c) on Schedule F, line 17, and total of column (d) on Side 1, line 2 or line 3. If the corporation uses California computation method to compute the net income, see instructions. | | | 00 |

Schedule F Computation of Net Income. See instructions.

| | | | | |
|--|--|---------|----------------------|----------------------|
| Income | 1 a) Gross receipts or gross sales | 49,914. | | |
| | b) Less returns and allowance | | c) Balance ● | 1c 49,914. 00 |
| | 2 Cost of goods sold. Attach federal Form 1125-A (California Schedule V) | | ● | 2 00 |
| | 3 Gross profit. Subtract line 2 from line 1c | | ● | 3 49,914. 00 |
| | 4 Total dividends. Attach federal Schedule C, (California Schedule H (100)) | | ● | 4 00 |
| | 5 a) Interest on obligations of the United States and U.S. instrumentalities | | ● | 5a 00 |
| | b) Other interest. Attach schedule | | ● | 5b 00 |
| | 6 Gross rents | | ● | 6 00 |
| | 7 Gross royalties | | ● | 7 00 |
| | 8 Capital gain net income. Attach federal Schedule D (California Schedule D) | | ● | 8 00 |
| | 9 Ordinary gain (loss). Attach federal Form 4797 (California Schedule D-1) | | ● | 9 00 |
| 10 Other income (loss). Attach schedule. Sch. F., Other Income | | ● | 10 5,000. 00 | |
| 11 Total income. Add line 3 through line 10 | | ● | 11 54,914. 00 | |
| Deductions | 12 Compensation of officers. Attach federal Form 1125-E or equivalent schedule | ● | 12 | 00 |
| | 13 Salaries and wages (not deducted elsewhere) | ● | 13 | 00 |
| | 14 Repairs and maintenance | ● | 14 | 100. 00 |
| | 15 Bad debts | ● | 15 | 00 |
| | 16 Rents | ● | 16 | 00 |
| | 17 Taxes (California Schedule A). See instructions | ● | 17 | 00 |
| | 18 Interest. Attach schedule | ● | 18 | 00 |
| | 19 Charitable Contributions. Attach schedule | ● | 19 | 00 |
| | 20 Depreciation. Attach federal Form 4562 and FTB 3885 | ● | 20 | |
| | 21 Less depreciation claimed elsewhere on return | ● | 21a | |
| | | ● | 21b | 00 |
| | 22 Depletion. Attach schedule | ● | 22 | 00 |
| | 23 Advertising | ● | 23 | 00 |
| | 24 Pension, profit-sharing plans, etc. | ● | 24 | 00 |
| | 25 Employee benefit plans | ● | 25 | 00 |
| | 26 a) Total travel and entertainment | | | |
| | b) Deductible amounts | ● | 26b | 00 |
| | 27 Other deductions. Attach schedule. Sch. F., Deduction | ● | 27 | 5,111. 00 |
| | 28 Specific deduction for organizations under R&TC Section 23701r or 23701t. See instructions | ● | 28 | 00 |
| 29 Total deductions. Add line 12 through line 28 | | ● | 29 5,211. 00 | |
| 30 Net income before state adjustments. Subtract line 29 from line 11. Enter here and on Side 1, line 1 | | ● | 30 49,703. 00 | |

Schedule J Add-On Taxes and Recapture of Tax Credits. See instructions.

| | | | |
|--|---|-----------|----|
| 1 LIFO recapture due to S corporation election, IRC Sec. 1363(d) deferral: \$ | ● | 1 | 00 |
| 2 Interest computed under the look-back method for completed long-term contracts (Attach form FTB 3834) | ● | 2 | 00 |
| 3 Interest on tax attributable to installment: a Sales of certain timeshares and residential lots | ● | 3a | 00 |
| b Method for nondealer installment obligations | ● | 3b | 00 |
| 4 IRC Section 197(f)(9)(B)(ii) election | ● | 4 | 00 |
| 5 Credit recapture name: | ● | 5 | 00 |
| 6 Combine line 1 through line 5, revise Side 2, line 39 or line 40, whichever applies, by this amount. Write "Schedule J" to the left of line 39 or line 40 | ● | 6 | 00 |

Schedule V Cost of Goods Sold

| | | | |
|---|----------------------------------|----|----|
| 1 Inventory at beginning of year | <input checked="" type="radio"/> | 1 | 00 |
| 2 Purchases | <input checked="" type="radio"/> | 2 | 00 |
| 3 Cost of labor | <input checked="" type="radio"/> | 3 | 00 |
| 4 a Additional IRC Section 263A costs. Attach schedule | <input checked="" type="radio"/> | 4a | 00 |
| b Other costs. Attach schedule | <input checked="" type="radio"/> | 4b | 00 |
| 5 Total. Add line 1 through line 4b | <input checked="" type="radio"/> | 5 | 00 |
| 6 Inventory at end of year | <input checked="" type="radio"/> | 6 | 00 |
| 7 Cost of goods sold. Subtract line 6 from line 5. Enter here and on Side 4, Schedule F, line 2 | <input checked="" type="radio"/> | 7 | 00 |

Method of inventory valuation ▶ _____
 Was there any change in determining quantities, costs of valuations between opening and closing inventory? Yes No
 If "Yes," attach an explanation.

Enter California seller's permit number, if any ▶ _____
 Check if the LIFO inventory method was adopted this taxable year for any goods. If checked, attach federal Form 970
 If the LIFO inventory method was used for this taxable year, enter the amount of closing inventory under LIFO _____
 Do the rules of IRC Section 263A (with respect to property produced or acquired for resale) apply to the corporation? Yes No

The corporation may not be required to complete Schedules L, M-1, and M-2. See Schedule M-1 instructions for reporting requirements.

| Schedule L Balance Sheet | Beginning of taxable year | | End of taxable year | |
|---|----------------------------------|----------------------------------|----------------------------------|---------|
| | (a) | (b) | (c) | (d) |
| Assets | | | | |
| 1 Cash | <input checked="" type="radio"/> | | <input checked="" type="radio"/> | 49,703. |
| 2 a Trade notes and accounts receivable | | | <input checked="" type="radio"/> | |
| b Less allowance for bad debts | () | <input checked="" type="radio"/> | <input checked="" type="radio"/> | |
| 3 Inventories | | <input checked="" type="radio"/> | | |
| 4 Federal and state government obligations | | <input checked="" type="radio"/> | | |
| 5 Other current assets. Attach schedule(s) | | <input checked="" type="radio"/> | | |
| 6 Loans to stockholders/officers. Attach schedule | | <input checked="" type="radio"/> | | |
| 7 Mortgage and real estate loans | | <input checked="" type="radio"/> | | |
| 8 Other investments. Attach schedule(s) | | <input checked="" type="radio"/> | | |
| 9 a Buildings and other fixed depreciable assets | | | <input checked="" type="radio"/> | |
| b Less accumulated depreciation | () | <input checked="" type="radio"/> | <input checked="" type="radio"/> | |
| 10 a Depletable assets | | | | |
| b Less accumulated depletion | () | <input checked="" type="radio"/> | () | |
| 11 Land (net of any amortization) | | <input checked="" type="radio"/> | | |
| 12 a Intangible assets (amortizable only) | <input checked="" type="radio"/> | | <input checked="" type="radio"/> | |
| b Less accumulated amortization | <input checked="" type="radio"/> | () | <input checked="" type="radio"/> | () |
| 13 Other assets. Attach schedule(s) | | <input checked="" type="radio"/> | | |
| 14 Total assets | | | | 49,703. |
| Liabilities and Stockholders' Equity | | | | |
| 15 Accounts payable | | <input checked="" type="radio"/> | | |
| 16 Mortgages, notes, bonds payable in less than 1 year | | <input checked="" type="radio"/> | | |
| 17 Other current liabilities. Attach schedule(s) | | <input checked="" type="radio"/> | | |
| 18 Loans from stockholders. Attach schedule(s) | | <input checked="" type="radio"/> | | |
| 19 Mortgages, notes, bonds payable in 1 year or more | | <input checked="" type="radio"/> | | |
| 20 Other liabilities. Attach schedule(s) | | <input checked="" type="radio"/> | | |
| 21 Capital stock: a Preferred stock | <input checked="" type="radio"/> | | <input checked="" type="radio"/> | |
| b Common stock | <input checked="" type="radio"/> | <input checked="" type="radio"/> | <input checked="" type="radio"/> | |
| 22 Paid-in or capital surplus. Attach reconciliation | | <input checked="" type="radio"/> | | |
| 23 Retained earnings – Appropriated. Attach schedule | | | | |
| 24 Retained earnings – Unappropriated | | | | 49,703. |
| 25 Adjustments to shareholders' equity. Attach schedule | | | | |
| 26 Less cost of treasury stock | | () | | () |
| 27 Total liabilities and stockholders' equity | | | | 49,703. |

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

If the corporation completed federal Schedule M-3 (Form 1120/1120-F), see instructions.

| | | | |
|---|---------|--|---------|
| 1 Net income per books | 49,703. | 7 Income recorded on books this year not included in this return (itemize) | |
| 2 Federal income tax | | a Tax-exempt interest | |
| 3 Excess of capital losses over capital gains | | b Other | |
| 4 Taxable income not recorded on books this year (itemize) | | c Total. Add line 7a and line 7b | |
| 5 Expenses recorded on books this year not deducted in this return (itemize) | | 8 Deductions in this return not charged against book income this year (itemize) | |
| a Depreciation | | a Depreciation | |
| b State taxes | | b State tax refunds | |
| c Travel and entertainment | | c Other | |
| d Other | | d Total. Add line 8a through line 8c | |
| e Total. Add line 5a through line 5d | | 9 Total. Add line 7c and line 8d | |
| 6 Total. Add line 1 through line 5e | 49,703. | 10 Net income per return. | |
| | | Subtract line 9 from line 6 | 49,703. |

Schedule M-2 Analysis of Unappropriated Retained Earnings per Books (Side 5, Schedule L, line 24)

| | | | |
|---|---------|---------------------------------------|---------|
| 1 Balance at beginning of year | | 5 Distributions: | |
| 2 Net income per books | 49,703. | a Cash | |
| 3 Other increases (itemize) | | b Stock | |
| | | c Property | |
| | | 6 Other decreases (itemize) | |
| 4 Total. Add line 1 through line 3 | 49,703. | 7 Total. Add line 5 and line 6 | |
| | | 8 Balance at end of year. | |
| | | Subtract line 7 from line 4 | 49,703. |

Schedule D California Capital Gains and Losses

Part I Short-Term Capital Gains and Losses – Assets Held One Year or Less. Use additional sheet(s) if necessary.

| (a) Kind of property and description (Example, 100 shares of Z Co.) | (b) Date acquired (mm/dd/yyyy) | (c) Date sold (mm/dd/yyyy) | (d) Gross sales price | (e) Cost or other basis plus expense of sale | (f) Gain (loss) (d) less (e) |
|---|--------------------------------------|----------------------------------|--------------------------|---|------------------------------------|
| 1 | | | | | 00 |
| | | | | | 00 |
| | | | | | 00 |
| | | | | | 00 |
| | | | | | 00 |
| 2 Short-term capital gain from installment sales from form FTB 3805E, line 26 or line 37 | | | | | 00 |
| 3 Unused capital loss carryover from 2017 | | | | | 00 |
| 4 Net short-term capital gain (loss). Combine line 1 through line 3 | | | | | 00 |

Part II Long-Term Capital Gains and Losses – Assets Held More Than One Year. Use additional sheet(s) if necessary.

| | | | | | |
|---|--|--|--|--|----|
| 5 | | | | | 00 |
| | | | | | 00 |
| | | | | | 00 |
| | | | | | 00 |
| | | | | | 00 |
| 6 Enter gain from Schedule D-1, line 9 and/or any capital gain distributions | | | | | 00 |
| 7 Long-term capital gain from installment sales from form FTB 3805E, line 26 or line 37 | | | | | 00 |
| 8 Net long-term capital gain (loss). Combine line 5 through line 7 | | | | | 00 |
| 9 Enter excess of net short-term capital gain (line 4) over net long-term capital loss (line 8) | | | | | 00 |
| 10 Net capital gain. Enter excess of net long-term capital gain (line 8) over net short-term capital loss (line 4) | | | | | 00 |
| 11 Total lines 9 and 10. Enter here and on Form 100, Side 1, line 5. | | | | | 00 |
| If losses exceed gains, carry forward losses to 2019 | | | | | 00 |

Alternative Minimum Tax and Credit Limitations – Corporations

P (100)

Attach to Form 100 or Form 109.

Corporation name

DZOKDEN

California corporation number

4 1 7 1 6 3 5

Part I Tentative Minimum Tax (TMT) and Alternative Minimum Tax (AMT) Computation

| | | | | | |
|-----------|---|----------------------------------|-----------|---------|------|
| 1 | Net income (loss) after state adjustments. Enter the amount from Form 100, line 17; Schedule R, line 1c; or Form 109, the lesser of line 1 or line 2. See instructions | <input checked="" type="radio"/> | 1 | 49,703 | 00 |
| 2 | Adjustments. See instructions. | | | | |
| | a Depreciation of tangible property placed in service after 1986 | <input checked="" type="radio"/> | 2a | | 00 |
| | b Amortization of certified pollution control facilities placed in service after 1986 | <input checked="" type="radio"/> | 2b | | 00 |
| | c Amortization of mining exploration and development costs incurred after 1987 | <input checked="" type="radio"/> | 2c | | 00 |
| | d Basis adjustments in determining gain or loss from sale or exchange of property | <input checked="" type="radio"/> | 2d | | 00 |
| | e Long-term contracts entered into after February 28, 1986 | <input checked="" type="radio"/> | 2e | | 00 |
| | f Installment sales of certain property | <input checked="" type="radio"/> | 2f | | 00 |
| | g Tax shelter farm activities (personal service corporations only) | <input checked="" type="radio"/> | 2g | | 00 |
| | h Passive activities (closely held corporations and personal service corporations only) | <input checked="" type="radio"/> | 2h | | 00 |
| | i Certain loss limitations | <input checked="" type="radio"/> | 2i | | 00 |
| | j Beneficiaries of estates and trusts. Enter the amount from Schedule K-1 (541), line 12a. | <input checked="" type="radio"/> | 2j | | 00 |
| | k Merchant marine capital construction funds | <input checked="" type="radio"/> | 2k | | 00 |
| | l Combine line 2a through line 2k | <input checked="" type="radio"/> | 2l | | 00 |
| 3 | Tax preference items. See instructions. | | | | |
| | a Depletion | <input checked="" type="radio"/> | 3a | | 00 |
| | b Intangible drilling costs | <input checked="" type="radio"/> | 3b | | 00 |
| | c Add line 3a and line 3b | <input checked="" type="radio"/> | 3c | | 00 |
| 4 | Pre-adjustment alternative minimum taxable income (AMTI): | | | | |
| | a Combine line 1, line 2l, and line 3c | <input checked="" type="radio"/> | 4a | 49,703 | 00 |
| | b Apportioned pre-adjustment AMTI. If income is derived from sources both within and outside of California, see instructions. Otherwise, enter the amount from line 4a | <input checked="" type="radio"/> | 4b | 49,703 | 00 |
| 5 | Adjusted current earnings (ACE) adjustment: | | | | |
| | a Enter ACE. See instructions | <input checked="" type="radio"/> | 5a | 49,703 | 00 |
| | b Apportioned ACE. If income is derived from sources both within and outside of California, see instructions. Otherwise, enter the amount from line 5a | <input checked="" type="radio"/> | 5b | 49,703 | 00 |
| | c Subtract line 4b from line 5b (even if one or both of the figures are negative). If negative, use brackets | <input checked="" type="radio"/> | 5c | 0 | 00 |
| | d Multiply line 5c by 75% (.75) and enter the result as a positive number | <input checked="" type="radio"/> | 5d | | 0 00 |
| | e Enter the excess, if any, of the corporation's total increases in AMTI from prior year ACE adjustments over its total reductions in AMTI from prior year ACE adjustments. Enter an amount on line 5e (even if line 5c is positive) | <input checked="" type="radio"/> | 5e | | 00 |
| | f ACE adjustment: | | | | |
| | • If line 5c is a positive amount or zero, enter the amount from line 5d on line 5f as a positive amount. | | | | |
| | • If line 5c is a negative amount, enter the smaller of line 5d or line 5e on line 5f as a negative amount | <input checked="" type="radio"/> | 5f | | 0 00 |
| 6 | Combine line 4b and line 5f. If zero or less, enter -0- | <input checked="" type="radio"/> | 6 | 49,703 | 00 |
| 7 | a Reduction for disaster loss deduction, if any, from Form 100, line 21 | <input checked="" type="radio"/> | 7a | | 00 |
| | b AMT net operating loss deduction. See instructions | <input checked="" type="radio"/> | 7b | | 00 |
| | c Combine line 7a and line 7b | <input checked="" type="radio"/> | 7c | | 00 |
| 8 | AMTI. Subtract line 7c from line 6 | <input checked="" type="radio"/> | 8 | 49,703 | 00 |
| 9 | Enter \$40,000 exemption. See instructions | <input checked="" type="radio"/> | 9 | 40,000 | 00 |
| 10 | Enter \$150,000 limitation. See instructions | <input checked="" type="radio"/> | 10 | 150,000 | 00 |
| 11 | Subtract line 10 from line 8. If zero or less, enter -0- | <input checked="" type="radio"/> | 11 | | 0 00 |
| 12 | Multiply line 11 by 25% (.25) | <input checked="" type="radio"/> | 12 | | 0 00 |
| 13 | Exemption. Subtract line 12 from line 9. If zero or less, enter -0- | <input checked="" type="radio"/> | 13 | 40,000 | 00 |
| 14 | Subtract line 13 from line 8. If zero or less, enter -0- | <input checked="" type="radio"/> | 14 | 9,703 | 00 |
| 15 | Multiply line 14 by 6.65% (.0665) | <input checked="" type="radio"/> | 15 | 645 | 00 |
| 16 | Banks and financial corps. Multiply Form 100, line 22, by 2.00% (.0200). See instructions. | <input checked="" type="radio"/> | 16 | | 00 |

Part I Tentative Minimum Tax (TMT) and Alternative Minimum Tax (AMT) Computation (continued)

| | | | | |
|--|-----------------------|-----------|-------|----|
| 17 TMT. Add line 15 and line 16 from Side 1 | <input type="radio"/> | 17 | 645 | 00 |
| 18 Regular tax before credits. Enter the amount from Form 100, line 23 or Form 109, line 10. See instructions | <input type="radio"/> | 18 | 4,394 | 00 |
| 19 AMT. Subtract line 18 from line 17. If zero or less, enter -0-. See instructions | <input type="radio"/> | 19 | 0 | 00 |

Part II Credits that Reduce Tax. See instructions.

| | | | | |
|---|-----------------------|----------|--|----|
| 1 Regular tax from Form 100, line 23 or Form 109, line 10 | <input type="radio"/> | 1 | | 00 |
| 2 TMT (before credits) from Part I, line 17 (but not less than the minimum franchise tax, if applicable) | <input type="radio"/> | 2 | | 00 |

| | | (a) Credit amount | (b) Credit used this year | (c) Tax balance that may be offset by credits | (d) Credit carryover |
|---|-----------------------|-----------------------|---------------------------------|--|----------------------------|
| Section A – Credits that reduce excess regular tax. | | | | | |
| 3 Subtract line 2 from line 1. If zero or less, enter -0- and see instructions. This is the excess regular tax which may be offset by credits. | <input type="radio"/> | | | <input type="radio"/> | |
| A1 Credits that reduce excess regular tax and have no carryover provisions. | | | | | |
| 4 Code: 162 Prison Inmate Labor Credit | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | |
| A2 Credits that reduce excess regular tax and have carryover provisions. See instructions. | | | | | |
| 5 Code: <input type="radio"/> Credit Name: _____ | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 6 Code: <input type="radio"/> Credit Name: _____ | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 7 Code: <input type="radio"/> Credit Name: _____ | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 8 Code: <input type="radio"/> Credit Name: _____ | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 9 Code: 188 Credit for prior year AMT from Part III, line 3 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Section B – Credits that may reduce regular tax below TMT. | | | | | |
| 10 If Part II, line 3 is zero, enter the amount from line 1 minus the minimum franchise tax, if applicable. If line 3 is more than zero, enter the total of Part II, line 2, minus the minimum franchise tax, if applicable, plus line 9, column (c) or the last entry in column (c) | <input type="radio"/> | | | <input type="radio"/> | |
| B Credits that reduce net tax and have carryover provisions. See instructions. | | | | | |
| 11 Code: <input type="radio"/> Credit Name: _____ | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 12 Code: <input type="radio"/> Credit Name: _____ | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 13 Code: <input type="radio"/> Credit Name: _____ | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 14 Code: <input type="radio"/> Credit Name: _____ | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Section C – Credits that may reduce AMT. See instructions. | | | | | |
| 15 Enter the AMT from Part I, line 19 | <input type="radio"/> | | | <input type="radio"/> | |
| 16a Code: 180 Solar Energy Credit carryover from Section B, column (d) | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 16b Code: 181 Commercial Solar Energy Credit carryover from Section B, column (d) | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 17 Code: 176 Enterprise Zone Hiring & Sales or Use Tax Credit carryover from Section B, column (d) | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 18 Adjusted AMT. Enter the balance from line 17, column (c) here and on Form 100, Side 2, line 29 or Form 109, Side 1, line 13 | <input type="radio"/> | | | <input type="radio"/> | |

Part III Credit for Prior Year AMT

| | | | | |
|---|-----------------------|----------|--|----|
| 1 Enter the AMT from the 2017 Schedule P (100). See instructions | <input type="radio"/> | 1 | | 00 |
| 2 Carryover of unused credit for prior year AMT. See instructions | <input type="radio"/> | 2 | | 00 |
| 3 Total available credit. Add line 1 and line 2. Enter here and on Part II, line 9, column (a) | <input type="radio"/> | 3 | | 00 |

Underpayment of Estimated Tax by Corporations

2018

5806

For calendar year 2018 or fiscal year beginning (mm/dd/yyyy) _____, and ending (mm/dd/yyyy) _____.

| | |
|------------------------------------|---|
| Corporation name DZOKDEN | California corporation number 4 1 7 1 6 3 5 |
|------------------------------------|---|

Part I Figure the Underpayment

| | | | |
|---|-----------|---|--------|
| 1 Current year's tax. See instructions | 1 | | 4,394. |
| | | (a) (b) (c) (d) | |
| 2 Installment due dates. See instructions | 2 | 04-15-2018 06-15-2018 09-15-2018 12-15-2018 | |
| 3 Percentage required. See instructions | 3 | 30% 70% less 1st 70% less prior 100% less prior (not less than min.) | |
| 4 Amount due. See instructions | 4 | 1,318. 1,758. 0. 1,318. | |
| 5 a Amount paid or credited for each installment | 5a | | |
| b Overpayment from previous installment. See instructions. | 5b | | |
| 6 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 | 1,318. 1,758. 0. 1,318. | |

Part II Exceptions to the Penalty. See instructions. If Exception A, line 8a is met for all four installments, **do not** attach this form to the return. If Exception B or C is met, for any installment, attach form FTB 5806 to the back of Form 100, Form 100W, Form 100S or Form 109.

| | | | | | | | | | |
|--|-----------|------------|-----------|------------|-----------|------------|-----------|------------|-----------|
| (check the applicable boxes) | | Yes | No | Yes | No | Yes | No | Yes | No |
| 8 a Exception A – Regular Corporations, line 26 met? | 8a | | | | | | | | |
| b Exception A – Large Corporations, line 30, met? | 8b | | | | | | | | |
| 9 Exception B (line 42) met? | 9 | | | | | | | | |
| 10 Exception C (line 64) met? | 10 | | | | | | | | |

Part III Figure the Penalty. If line 7 shows an underpayment for any installment and none of the three exceptions is met, figure the penalty for that installment by completing line 11 through line 22.

| | | | | | |
|---|------------|------------|------------|------------|------------|
| 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 | 03-15-2019 | 03-15-2019 | 03-15-2019 | 03-15-2019 |
| 12 Number of days from date shown on line 2 to date shown on line 11 | 12 | 334 | 273 | | 90 |
| 13 Number of days on line 12 before 7/01/18, or the payment date, whichever is earlier. | 13 | 76 | 15 | | |
| 14 Number of days on line 12 after 6/30/18 and before 1/01/19, or the payment date, whichever is earlier. | 14 | 184 | 184 | | 16 |
| 15 Number of days on line 12 after 12/31/18 and before 7/01/19, or the payment date, whichever is earlier. Calendar year corporations, see instructions. | 15 | 74 | 74 | | 74 |
| 16 For fiscal year corporations only. Number of days on line 12 after 6/30/19 and before 1/01/20. See instructions. | 16 | | | | |
| 17 For fiscal year corporations only. Number of days on line 12 after 12/31/19 and before 2/15/20. See instructions. | 17 | | | | |
| 18 $\frac{\text{Number of days on line 13}}{\text{Number of days in taxable year}} \times 4\% \times \text{line 7}$ | 18 | 11. | 3. | | |
| 19 $\frac{\text{Number of days on line 14}}{\text{Number of days in taxable year}} \times 4\% \times \text{line 7}$ | 19 | 27. | 35. | | 2. |
| 20 $\frac{\text{Number of days on line 15}}{\text{Number of days in taxable year}} \times 5\% \times \text{line 7}$ | 20 | 13. | 18. | | 13. |
| 21 $\frac{\text{Number of days on line 16}}{\text{Number of days in taxable year}} \times \% \text{ (see instructions)} \times \text{line 7}$ | 21 | | | | |
| 22 $\frac{\text{Number of days on line 17}}{\text{Number of days in taxable year}} \times \% \text{ (see instructions)} \times \text{line 7}$ | 22 | | | | |
| 22a Add amounts for each column from line 18 through line 22. | 22a | 51. | 56. | | 15. |
| 22b Total estimated penalty due. Add line 22a, column (a) through column (d). Enter here and on Form 100, line 43a; Form 100W, line 40a; Form 100S, line 42a; or Form 109, line 27 | 22b | | | | 122. |

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.

Exception A — Prior Year's Tax — Regular Corporations

| | | | | | | | | |
|----|--|--|------------|----|------------|----|------------|----|
| 23 | Prior year's tax (the return must have been for a full 12 months) | | | | 23 | | | |
| | (a) | | (b) | | (c) | | (d) | |
| | 30% | | 70% | | 70% | | 100% | |
| | (not less than min.) | | | | | | | |
| 24 | Enter line 23 x the percentage shown | | | | 24 | | | |
| 25 | Amount paid by the installment due date (cumulative) | | | | 25 | | | |
| 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 |

Exception A — Prior Year's Tax — Large Corporations

Use this exception only if prior year tax is less than current year tax.

| | | | | | | | | |
|------|--|--|-----------------|----|-----|----|-----|----|
| 27 | Current year's tax | | | | 27 | | | |
| | 1st Installment | | 2nd Installment | | | | | |
| 28 a | Installment due. Enter line 23 x 30% | | | | 28a | | | |
| 28 b | Installment due. Enter line 27 x 70% | | | | 28b | | | |
| 29 | Amount paid by the installment due date (cumulative) | | | | 29 | | | |
| 30 | If line 29 is greater than line 28 for both installments, the exception is met. Check "Yes" here for each installment and check the applicable "Yes" box in Part II, line 8b. The exception to the penalty applies only if line 29 is greater than line 28 for both installments. If line 28 is greater than line 29 for either installment, the exception is not met. Check "No" here and check the applicable "No" box in Part II, line 8b. | | | | 30 | | Yes | No |
| | | | Yes | No | Yes | No | Yes | No |

See instructions regarding amounts to use for installment 3 and installment 4.

Exception B — Tax on Annualized Current Year Income

| | | | | | | | | |
|------|--|--|-----|----|-----|----|------|----|
| | Enter number of months for each period. See instructions ▶ | | | | | | | |
| 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 | | | |
| 33 b | R&TC Section 23802(e) deduction (S corporations only) | | | | 33b | | | |
| 33 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 | 30% | | 70% | | 70% | | 100% | |
| | (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 |

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

Part IV Exceptions Worksheets (Continued)

| Exception C — Tax on Annualized Seasonal Income | | (a) | | (b) | | (c) | | (d) | |
|--|---|--------------|----------------------|--------------|--------------|--------------|-----|---------------|-----|
| | | 1st 3 months | | 1st 5 months | | 1st 8 months | | 1st 11 months | |
| 43 | Enter taxable income for the following periods: | | | | | | | | |
| | a Taxable year beginning in 2015 | 43a | | | | | | | |
| | b Taxable year beginning in 2016 | 43b | | | | | | | |
| | c Taxable year beginning in 2017 | 43c | | | | | | | |
| 44 | Enter taxable income for each period for the taxable year beginning in 2018. | 44 | | | | | | | |
| | | | 1st 4 months | 1st 6 months | 1st 9 months | Entire year | | | |
| 45 | Enter taxable income for the following periods: | | | | | | | | |
| | a Taxable year beginning in 2015 | 45a | | | | | | | |
| | b Taxable year beginning in 2016 | 45b | | | | | | | |
| | c Taxable year beginning in 2017 | 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 | | | | | | | |
| 49 | Add line 46 through line 48 | 49 | | | | | | | |
| 50 | Divide line 49 by 3 | 50 | | | | | | | |
| | | | 1st 4 months | 1st 6 months | 1st 9 months | Entire year | | | |
| 51 a | Divide line 44 by line 50 | 51a | | | | | | | |
| | b R&TC Section 23802(e) deduction. (S corporations only) . | 51b | | | | | | | |
| | c Net income. Subtract line 51b from line 51a | 51c | | | | | | | |
| 52 | 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 | | | | | | | |
| 56 | Add line 53 through line 55 | 56 | | | | | | | |
| 57 | 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 | | | | | | | |
| 59 | Tax credits for each payment period. | 59 | | | | | | | |
| 60 | Subtract line 59 from line 58 | 60 | | | | | | | |
| 61 | Other taxes* | 61 | | | | | | | |
| | | | (not less than min.) | | | | | | |
| 62 | Total tax. Add line 60 and line 61 | 62 | | | | | | | |
| 63 | Amount paid by the installment due date (cumulative) | 63 | | | | | | | |
| 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 |

*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.

Additional information from your 2018 California Corporation Tax Return**Form 100: California Corporation Franchise or Income Tax Return****Sch F, Other Income****Continuation Statement**

| Description | Amount |
|---------------|--------|
| MISCELLANEOUS | 5,000. |
| Total | 5,000. |

Form 100: California Corporation Franchise or Income Tax Return**Schedule F, Other Deductions****Continuation Statement**

| description | Amount |
|----------------|--------|
| BANK CHARGES | 34. |
| OFFICE EXPENSE | 2,937. |
| POSTAGE | 137. |
| SUPPLIES | 600. |
| MERCHANT FEES | 1,403. |
| Total | 5,111. |

| | | | |
|---|----------------------|---|--|
| A Check if: 1a Consolidated return (attach Form 851) <input type="checkbox"/> b Life/nonlife consolidated return <input type="checkbox"/> 2 Personal holding co. (attach Sch. PH) <input type="checkbox"/> 3 Personal service corp. (see instructions) <input type="checkbox"/> 4 Schedule M-3 attached <input type="checkbox"/> | TYPE OR PRINT | Name Dzokden Number, street, and room or suite no. If a P.O. box, see instructions. 3436 Divisadero St City or town, state or province, country, and ZIP or foreign postal code San Francisco CA 94123 | B Employer identification number 83-0930746 C Date incorporated 07/05/2018 D Total assets (see instructions) \$ 49,703 |
| E Check if: (1) <input type="checkbox"/> Initial return (2) <input type="checkbox"/> Final return (3) <input type="checkbox"/> Name change (4) <input type="checkbox"/> Address change | | | |

| | | | | | |
|---|--|---|--------|--------|--------|
| Income | 1a | Gross receipts or sales | 49,914 | | |
| | b | Returns and allowances | | | |
| | c | Balance. Subtract line 1b from line 1a | | | 49,914 |
| | 2 | Cost of goods sold (attach Form 1125-A) | | | |
| | 3 | Gross profit. Subtract line 2 from line 1c | | | 49,914 |
| | 4 | Dividends and inclusions (Schedule C, line 23, column (a)) | | | |
| | 5 | Interest | | | |
| | 6 | Gross rents | | | |
| | 7 | Gross royalties | | | |
| | 8 | Capital gain net income (attach Schedule D (Form 1120)) | | | |
| | 9 | Net gain or (loss) from Form 4797, Part II, line 17 (attach Form 4797) | | | |
| 10 | Other income (see instructions—attach statement) Miscellaneous | | | 5,000 | |
| 11 | Total income. Add lines 3 through 10 | | | 54,914 | |
| Deductions (See instructions for limitations on deductions.) | 12 | Compensation of officers (see instructions—attach Form 1125-E) | | | |
| | 13 | Salaries and wages (less employment credits) | | | |
| | 14 | Repairs and maintenance | | | 100 |
| | 15 | Bad debts | | | |
| | 16 | Rents | | | |
| | 17 | Taxes and licenses | | | |
| | 18 | Interest (see instructions) | | | |
| | 19 | Charitable contributions | | | |
| | 20 | Depreciation from Form 4562 not claimed on Form 1125-A or elsewhere on return (attach Form 4562) | | | |
| | 21 | Depletion | | | |
| | 22 | Advertising | | | |
| | 23 | Pension, profit-sharing, etc., plans | | | |
| | 24 | Employee benefit programs | | | |
| | 25 | Reserved for future use | | | |
| | 26 | Other deductions (attach statement) Other Deductions Statement | | | 5,111 |
| | 27 | Total deductions. Add lines 12 through 26 | | | 5,211 |
| | 28 | Taxable income before net operating loss deduction and special deductions. Subtract line 27 from line 11. | | | 49,703 |
| 29a | b | Special deductions (Schedule C, line 24, column (c)) | | | |
| | c | Add lines 29a and 29b | | | |
| | 30 | Taxable income. Subtract line 29c from line 28. See instructions | | | 49,703 |
| Tax, Refundable Credits, and Payments | 31 | Total tax (Schedule J, Part I, line 11) | | | 10,438 |
| | 32 | 2018 net 965 tax liability paid (Schedule J, Part II, line 12) | | | |
| | 33 | Total payments, credits, and section 965 net tax liability (Schedule J, Part III, line 23) | | | |
| | 34 | Estimated tax penalty. See instructions. Check if Form 2220 is attached <input checked="" type="checkbox"/> | | | 396 |
| | 35 | Amount owed. If line 33 is smaller than the total of lines 31, 32, and 34, enter amount owed | | | 10,834 |
| | 36 | Overpayment. If line 33 is larger than the total of lines 31, 32, and 34, enter amount overpaid | | | |
| | 37 | Enter amount from line 36 you want: Credited to 2019 estimated tax ▶ Refunded ▶ | | | |

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

| | | | |
|------------------|----------------------|------|--------------------|
| Sign Here | Signature of officer | Date | President Title |
|------------------|----------------------|------|--------------------|

May the IRS discuss this return with the preparer shown below? See instructions. Yes No

| | | | | | |
|-------------------------------|---|---|--------------------|--|-------------------|
| Paid Preparer Use Only | Print/Type preparer's name Daniel Michiels | Preparer's signature Daniel Michiels | Date 03/18/2024 | Check <input checked="" type="checkbox"/> if self-employed | PTIN P02047972 |
| | Firm's name ▶ | Firm's EIN ▶ 84-2249554 | | | |
| | Firm's address ▶ | Phone no. | | | |

| Schedule C Dividends, Inclusions, and Special Deductions (see instructions) | | (a) Dividends and inclusions | (b) % | (c) Special deductions (a) × (b) |
|--|--|------------------------------|------------------|----------------------------------|
| 1 | Dividends from less-than-20%-owned domestic corporations (other than debt-financed stock) | | 50 | |
| 2 | Dividends from 20%-or-more-owned domestic corporations (other than debt-financed stock) | | 65 | |
| 3 | Dividends on certain debt-financed stock of domestic and foreign corporations | | see instructions | |
| 4 | Dividends on certain preferred stock of less-than-20%-owned public utilities | | 23.3 | |
| 5 | Dividends on certain preferred stock of 20%-or-more-owned public utilities | | 26.7 | |
| 6 | Dividends from less-than-20%-owned foreign corporations and certain FSCs | | 50 | |
| 7 | Dividends from 20%-or-more-owned foreign corporations and certain FSCs | | 65 | |
| 8 | Dividends from wholly owned foreign subsidiaries | | 100 | |
| 9 | Subtotal. Add lines 1 through 8. See instructions for limitations | | see instructions | |
| 10 | Dividends from domestic corporations received by a small business investment company operating under the Small Business Investment Act of 1958 | | 100 | |
| 11 | Dividends from affiliated group members | | 100 | |
| 12 | Dividends from certain FSCs | | 100 | |
| 13 | Foreign-source portion of dividends received from a specified 10%-owned foreign corporation (excluding hybrid dividends) (see instructions) | | 100 | |
| 14 | Dividends from foreign corporations not included on line 3, 6, 7, 8, 11, 12, or 13 (including any hybrid dividends) | | | |
| 15 | Section 965(a) inclusion | | see instructions | |
| 16a | Subpart F inclusions derived from the sale by a controlled foreign corporation (CFC) of the stock of a lower-tier foreign corporation treated as a dividend (attach Form(s) 5471) (see instructions) | | 100 | |
| b | Subpart F inclusions derived from hybrid dividends of tiered corporations (attach Form(s) 5471) (see instructions) | | | |
| c | Other inclusions from CFCs under subpart F not included on line 15, 16a, 16b, or 17 (attach Form(s) 5471) (see instructions) | | | |
| 17 | Global Intangible Low-Taxed Income (GILTI) (attach Form(s) 5471 and Form 8992) | | | |
| 18 | Gross-up for foreign taxes deemed paid | | | |
| 19 | IC-DISC and former DISC dividends not included on line 1, 2, or 3 | | | |
| 20 | Other dividends | | | |
| 21 | Deduction for dividends paid on certain preferred stock of public utilities | | | |
| 22 | Section 250 deduction (attach Form 8993) | | | |
| 23 | Total dividends and inclusions. Add lines 9 through 20. Enter here and on page 1, line 4 | | | |
| 24 | Total special deductions. Add lines 9 through 22, column (c). Enter here and on page 1, line 29b | | | |

Schedule J Tax Computation and Payment (see instructions)

Part I—Tax Computation

| | | | | |
|-----------|---|-----------|-----------|--------|
| 1 | Check if the corporation is a member of a controlled group (attach Schedule O (Form 1120)). See instructions ▶ <input type="checkbox"/> | | | |
| 2 | Income tax. See instructions | | 2 | 10,438 |
| 3 | Base erosion minimum tax (attach Form 8991) | | 3 | |
| 4 | Add lines 2 and 3 | | 4 | 10,438 |
| 5a | Foreign tax credit (attach Form 1118) | 5a | | |
| b | Credit from Form 8834 (see instructions) | 5b | | |
| c | General business credit (attach Form 3800) | 5c | | |
| d | Credit for prior year minimum tax (attach Form 8827) | 5d | | |
| e | Bond credits from Form 8912 | 5e | | |
| 6 | Total credits. Add lines 5a through 5e | | 6 | |
| 7 | Subtract line 6 from line 4 | | 7 | 10,438 |
| 8 | Personal holding company tax (attach Schedule PH (Form 1120)) | | 8 | |
| 9a | Recapture of investment credit (attach Form 4255) | 9a | | |
| b | Recapture of low-income housing credit (attach Form 8611) | 9b | | |
| c | Interest due under the look-back method—completed long-term contracts (attach Form 8697) | 9c | | |
| d | Interest due under the look-back method—income forecast method (attach Form 8866) | 9d | | |
| e | Alternative tax on qualifying shipping activities (attach Form 8902) | 9e | | |
| f | Other (see instructions—attach statement) | 9f | | |
| 10 | Total. Add lines 9a through 9f | | 10 | |
| 11 | Total tax. Add lines 7, 8, and 10. Enter here and on page 1, line 31 | | 11 | 10,438 |

Part II—Section 965 Payments (see instructions)

| | | | | |
|-----------|---|-----------|--|--|
| 12 | 2018 net 965 tax liability paid from Form 965-B, Part II, column (k), line 2. Enter here and on page 1, line 32 | 12 | | |
|-----------|---|-----------|--|--|

Part III—Payments, Refundable Credits, and Section 965 Net Tax Liability

| | | | | |
|-----------|--|------------|---|---|
| 13 | 2017 overpayment credited to 2018 | 13 | | |
| 14 | 2018 estimated tax payments | 14 | | |
| 15 | 2018 refund applied for on Form 4466 | 15 | (|) |
| 16 | Combine lines 13, 14, and 15 | 16 | | |
| 17 | Tax deposited with Form 7004 | 17 | | |
| 18 | Withholding (see instructions) | 18 | | |
| 19 | Total payments. Add lines 16, 17, and 18 | 19 | | |
| 20 | Refundable credits from: | | | |
| a | Form 2439 | 20a | | |
| b | Form 4136 | 20b | | |
| c | Form 8827, line 8c | 20c | | |
| d | Other (attach statement—see instructions) | 20d | | |
| 21 | Total credits. Add lines 20a through 20d | 21 | | |
| 22 | 2018 net 965 tax liability from Form 965-B, Part I, column (d), line 2. See instructions | 22 | | |
| 23 | Total payments, credits, and section 965 net tax liability. Add lines 19, 21, and 22. Enter here and on page 1, line 33 | 23 | | |

Schedule K Other Information (see instructions)

| | | | |
|----------|---|-----|----|
| 1 | Check accounting method: a <input checked="" type="checkbox"/> Cash b <input type="checkbox"/> Accrual c <input type="checkbox"/> Other (specify) ▶ _____ | Yes | No |
| 2 | See the instructions and enter the: | | |
| a | Business activity code no. ▶ <u>813319</u> | | |
| b | Business activity ▶ <u>Nonprofit Organization</u> | | |
| c | Product or service ▶ <u>Nonprofit Organization</u> | | |
| 3 | Is the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? If "Yes," enter name and EIN of the parent corporation ▶ _____ | | X |
| 4 | At the end of the tax year: | | |
| a | Did any foreign or domestic corporation, partnership (including any entity treated as a partnership), trust, or tax-exempt organization own directly 20% or more, or own, directly or indirectly, 50% or more of the total voting power of all classes of the corporation's stock entitled to vote? If "Yes," complete Part I of Schedule G (Form 1120) (attach Schedule G) | | X |
| b | Did any individual or estate own directly 20% or more, or own, directly or indirectly, 50% or more of the total voting power of all classes of the corporation's stock entitled to vote? If "Yes," complete Part II of Schedule G (Form 1120) (attach Schedule G) | | X |
| 5 | At the end of the tax year, did the corporation: | | |
| a | Own directly 20% or more, or own, directly or indirectly, 50% or more of the total voting power of all classes of stock entitled to vote of any foreign or domestic corporation not included on Form 851 , Affiliations Schedule? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (iv) below. | | X |

| (i) Name of Corporation | (ii) Employer Identification Number (if any) | (iii) Country of Incorporation | (iv) Percentage Owned in Voting Stock |
|-------------------------|--|--------------------------------|---------------------------------------|
| | | | |
| | | | |
| | | | |

| | | | |
|----------|---|--|---|
| b | Own directly an interest of 20% or more, or own, directly or indirectly, an interest of 50% or more in any foreign or domestic partnership (including an entity treated as a partnership) or in the beneficial interest of a trust? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (iv) below. | | X |
|----------|---|--|---|

| (i) Name of Entity | (ii) Employer Identification Number (if any) | (iii) Country of Organization | (iv) Maximum Percentage Owned in Profit, Loss, or Capital |
|--------------------|--|-------------------------------|---|
| | | | |
| | | | |
| | | | |

| | | | |
|-----------|--|--|---|
| 6 | During this tax year, did the corporation pay dividends (other than stock dividends and distributions in exchange for stock) in excess of the corporation's current and accumulated earnings and profits? See sections 301 and 316 If "Yes," file Form 5452 , Corporate Report of Nondividend Distributions. See the instructions for Form 5452. If this is a consolidated return, answer here for the parent corporation and on Form 851 for each subsidiary. | | X |
| 7 | At any time during the tax year, did one foreign person own, directly or indirectly, at least 25% of the total voting power of all classes of the corporation's stock entitled to vote or at least 25% of the total value of all classes of the corporation's stock? For rules of attribution, see section 318. If "Yes," enter: (a) Percentage owned ▶ _____ and (b) Owner's country ▶ _____ (c) The corporation may have to file Form 5472 , Information Return of a 25% Foreign-Owned U.S. Corporation or a Foreign Corporation Engaged in a U.S. Trade or Business. Enter the number of Forms 5472 attached ▶ _____ | | X |
| 8 | Check this box if the corporation issued publicly offered debt instruments with original issue discount ▶ <input type="checkbox"/> If checked, the corporation may have to file Form 8281 , Information Return for Publicly Offered Original Issue Discount Instruments. | | |
| 9 | Enter the amount of tax-exempt interest received or accrued during the tax year ▶ \$ _____ | | |
| 10 | Enter the number of shareholders at the end of the tax year (if 100 or fewer) ▶ _____ | | |
| 11 | If the corporation has an NOL for the tax year and is electing to forego the carryback period, check here (see instructions) ▶ <input type="checkbox"/> If the corporation is filing a consolidated return, the statement required by Regulations section 1.1502-21(b)(3) must be attached or the election will not be valid. | | |
| 12 | Enter the available NOL carryover from prior tax years (do not reduce it by any deduction reported on page 1, line 29a.) ▶ \$ _____ | | |

Schedule K **Other Information** (continued from page 4)

| | | Yes | No |
|------------|--|-----|----|
| 13 | Are the corporation's total receipts (page 1, line 1a, plus lines 4 through 10) for the tax year and its total assets at the end of the tax year less than \$250,000? | X | |
| | If "Yes," the corporation is not required to complete Schedules L, M-1, and M-2. Instead, enter the total amount of cash distributions and the book value of property distributions (other than cash) made during the tax year ► \$ _____ 0 . | | |
| 14 | Is the corporation required to file Schedule UTP (Form 1120), Uncertain Tax Position Statement? See instructions | | X |
| | If "Yes," complete and attach Schedule UTP. | | |
| 15a | Did the corporation make any payments in 2018 that would require it to file Form(s) 1099? | | X |
| b | If "Yes," did or will the corporation file required Forms 1099? | | |
| 16 | During this tax year, did the corporation have an 80% or more change in ownership, including a change due to redemption of its own stock? | | X |
| 17 | During or subsequent to this tax year, but before the filing of this return, did the corporation dispose of more than 65% (by value) of its assets in a taxable, non-taxable, or tax deferred transaction? | | X |
| 18 | Did the corporation receive assets in a section 351 transfer in which any of the transferred assets had a fair market basis or fair market value of more than \$1 million? | | X |
| 19 | During the corporation's tax year, did the corporation 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) of the Code? | | X |
| 20 | Is the corporation operating on a cooperative basis? | | X |
| 21 | During the tax year, did the corporation pay or accrue any interest or royalty for which the deduction is not allowed under section 267A? See instructions | | X |
| | If "Yes," enter the total amount of the disallowed deductions ► \$ _____ | | |
| 22 | Does the corporation have gross receipts of at least \$500 million in any of the 3 preceding tax years? (See sections 59A(e)(2) and (3)) | | X |
| | If "Yes," complete and attach Form 8991. | | |
| 23 | Did the corporation have an election under section 163(j) for any real property trade or business or any farming business in effect during the tax year? See instructions | | X |
| 24 | Does the corporation satisfy one of the following conditions and the corporation does not own a pass-through entity with current year, or prior year carryover, excess business interest expense? See instructions | | X |
| a | The corporation's aggregate average annual gross receipts (determined under section 448(c)) for the 3 tax years preceding the current tax year do not exceed \$25 million, and the corporation is not a tax shelter, or | | |
| b | The corporation only has business interest expense from (1) an electing real property trade or business, (2) an electing farming business, or (3) certain utility businesses under section 163(j)(7). If "No," complete and attach Form 8990. | | |
| 25 | Is the corporation attaching Form 8996 to certify as a Qualified Opportunity Fund? | | X |
| | If "Yes," enter amount from Form 8996, line 13 ► \$ _____ | | |

| Schedule L Balance Sheets per Books | | Beginning of tax year | | End of tax year | |
|---|--|-----------------------|-----|-----------------|---------|
| | | (a) | (b) | (c) | (d) |
| Assets | | | | | |
| 1 | Cash | | | | 49,703. |
| 2a | Trade notes and accounts receivable | | | | |
| b | Less allowance for bad debts | () | | () | |
| 3 | Inventories | | | | |
| 4 | U.S. government obligations | | | | |
| 5 | Tax-exempt securities (see instructions) | | | | |
| 6 | Other current assets (attach statement) | | | | |
| 7 | Loans to shareholders | | | | |
| 8 | Mortgage and real estate loans | | | | |
| 9 | Other investments (attach statement) | | | | |
| 10a | Buildings and other depreciable assets | | | | |
| b | Less accumulated depreciation | () | | () | |
| 11a | Depletable assets | | | | |
| b | Less accumulated depletion | () | | () | |
| 12 | Land (net of any amortization) | | | | |
| 13a | Intangible assets (amortizable only) | | | | |
| b | Less accumulated amortization | () | | () | |
| 14 | Other assets (attach statement) | | | | |
| 15 | Total assets | | | | 49,703. |
| Liabilities and Shareholders' Equity | | | | | |
| 16 | Accounts payable | | | | |
| 17 | Mortgages, notes, bonds payable in less than 1 year | | | | |
| 18 | Other current liabilities (attach statement) | | | | |
| 19 | Loans from shareholders | | | | |
| 20 | Mortgages, notes, bonds payable in 1 year or more | | | | |
| 21 | Other liabilities (attach statement) | | | | |
| 22 | Capital stock: a Preferred stock | | | | |
| | b Common stock | | | | |
| 23 | Additional paid-in capital | | | | |
| 24 | Retained earnings—Appropriated (attach statement) | | | | |
| 25 | Retained earnings—Unappropriated | | | | 49,703. |
| 26 | Adjustments to shareholders' equity (attach statement) | | | | |
| 27 | Less cost of treasury stock | | () | | () |
| 28 | Total liabilities and shareholders' equity | | | | 49,703. |

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

Note: The corporation may be required to file Schedule M-3. See instructions.

| | | | | | |
|----------|---|---------|-----------|--|---------|
| 1 | Net income (loss) per books | 49,703. | 7 | Income recorded on books this year not included on this return (itemize): | |
| 2 | Federal income tax per books | | | Tax-exempt interest \$ _____ | |
| 3 | Excess of capital losses over capital gains | | | _____ | |
| 4 | Income subject to tax not recorded on books this year (itemize): _____ | | 8 | Deductions on this return not charged against book income this year (itemize): | |
| 5 | Expenses recorded on books this year not deducted on this return (itemize): | | | a Depreciation . . . \$ _____ | |
| a | Depreciation \$ _____ | | | b Charitable contributions \$ _____ | |
| b | Charitable contributions . . . \$ _____ | | | _____ | |
| c | Travel and entertainment . . . \$ _____ | | 9 | Add lines 7 and 8 | |
| 6 | Add lines 1 through 5 | 49,703. | 10 | Income (page 1, line 28)—line 6 less line 9 | 49,703. |

Schedule M-2 Analysis of Unappropriated Retained Earnings per Books (Line 25, Schedule L)

| | | | | | |
|----------|--|---------|----------|---|---------|
| 1 | Balance at beginning of year | | 5 | Distributions: a Cash | |
| 2 | Net income (loss) per books | 49,703. | | b Stock | |
| 3 | Other increases (itemize): _____ | | | c Property | |
| | _____ | | 6 | Other decreases (itemize): _____ | |
| | _____ | | 7 | Add lines 5 and 6 | |
| 4 | Add lines 1, 2, and 3 | 49,703. | 8 | Balance at end of year (line 4 less line 7) | 49,703. |

Underpayment of Estimated Tax by Corporations

Department of the Treasury
Internal Revenue Service

▶ **Attach to the corporation's tax return.**

2018

▶ **Go to www.irs.gov/Form2220 for instructions and the latest information.**

| | |
|-----------------|--|
| Name Dzokden | Employer identification number 83-0930746 |
|-----------------|--|

Note: Generally, the corporation is not required to file Form 2220 (see Part II below for exceptions) because the IRS will figure any penalty owed and bill the corporation. However, the corporation may still use Form 2220 to figure the penalty. If so, enter the amount from page 2, line 38, on the estimated tax penalty line of the corporation's income tax return, but **do not** attach Form 2220.

Part I Required Annual Payment

| | | | |
|--|-----------|-----------|---------|
| 1 Total tax (see instructions) | | 1 | 10,438. |
| 2a Personal holding company tax (Schedule PH (Form 1120), line 26) included on line 1 | 2a | | |
| b Look-back interest included on line 1 under section 460(b)(2) for completed long-term contracts or section 167(g) for depreciation under the income forecast method | 2b | | |
| c Credit for federal tax paid on fuels (see instructions) | 2c | | |
| d Total. Add lines 2a through 2c | | 2d | |
| 3 Subtract line 2d from line 1. If the result is less than \$500, do not complete or file this form. The corporation does not owe the penalty | | 3 | 10,438. |
| 4 Enter the tax shown on the corporation's 2017 income tax return. See instructions. Caution: If the tax is zero or the tax year was for less than 12 months, skip this line and enter the amount from line 3 on line 5 | | 4 | |
| 5 Required annual payment. Enter the smaller of line 3 or line 4. If the corporation is required to skip line 4, enter the amount from line 3 | | 5 | 10,438. |

Part II Reasons for Filing—Check the boxes below that apply. If any boxes are checked, the corporation **must** file Form 2220 even if it does not owe a penalty. See instructions.

- 6 The corporation is using the adjusted seasonal installment method.
- 7 The corporation is using the annualized income installment method.
- 8 The corporation is a "large corporation" figuring its first required installment based on the prior year's tax.

Part III Figuring the Underpayment

| | | (a) | (b) | (c) | (d) |
|--|-----------|----------|----------|----------|----------|
| 9 Installment due dates. Enter in columns (a) through (d) the 15th day of the 4th (Form 990-PF filers: Use 5th month), 6th, 9th, and 12th months of the corporation's tax year | 9 | 04/15/18 | 06/15/18 | 09/15/18 | 12/15/18 |
| 10 Required installments. If the box on line 6 and/or line 7 above is checked, enter the amounts from Schedule A, line 38. If the box on line 8 (but not 6 or 7) is checked, see instructions for the amounts to enter. If none of these boxes are checked, enter 25% (0.25) of line 5 above in each column | 10 | 2,608. | 2,610. | 2,610. | 2,610. |
| 11 Estimated tax paid or credited for each period. For column (a) only, enter the amount from line 11 on line 15. See instructions | 11 | | | | |
| Complete lines 12 through 18 of one column before going to the next column. | | | | | |
| 12 Enter amount, if any, from line 18 of the preceding column | 12 | | | | |
| 13 Add lines 11 and 12 | 13 | | | | |
| 14 Add amounts on lines 16 and 17 of the preceding column | 14 | | 2,608. | 5,218. | 7,828. |
| 15 Subtract line 14 from line 13. If zero or less, enter -0- | 15 | | 0. | 0. | 0. |
| 16 If the amount on line 15 is zero, subtract line 13 from line 14. Otherwise, enter -0- | 16 | | 2,608. | 5,218. | |
| 17 Underpayment. If line 15 is less than or equal to line 10, subtract line 15 from line 10. Then go to line 12 of the next column. Otherwise, go to line 18 | 17 | 2,608. | 2,610. | 2,610. | 2,610. |
| 18 Overpayment. If line 10 is less than line 15, subtract line 10 from line 15. Then go to line 12 of the next column | 18 | | | | |

Go to Part IV on page 2 to figure the penalty. Do not go to Part IV if there are no entries on line 17—no penalty is owed.

For Paperwork Reduction Act Notice, see separate instructions.

Part IV Figuring the Penalty

| | (a) | (b) | (c) | (d) |
|--|--------------------|----------|--------------|----------|
| 19 Enter the date of payment or the 15th day of the 4th month after the close of the tax year, whichever is earlier. (C corporations with tax years ending June 30 and S corporations: Use 3rd month instead of 4th month. Form 990-PF and Form 990-T filers: Use 5th month instead of 4th month.) See instructions | 19 04/15/19 | 04/15/19 | 04/15/19 | 04/15/19 |
| 20 Number of days from due date of installment on line 9 to the date shown on line 19 | 20 365 | 304 | 212 | 121 |
| 21 Number of days on line 20 after 4/15/2018 and before 7/1/2018 | 21 76 | 15 | | |
| 22 Underpayment on line 17 × $\frac{\text{Number of days on line 21}}{365} \times 5\% (0.05)$ | 22 \$ 27. | \$ 5. | \$ | \$ |
| 23 Number of days on line 20 after 6/30/2018 and before 10/1/2018 | 23 92 | 92 | 15 | |
| 24 Underpayment on line 17 × $\frac{\text{Number of days on line 23}}{365} \times 5\% (0.05)$ | 24 \$ 33. | \$ 33. | \$ 5. | \$ |
| 25 Number of days on line 20 after 9/30/2018 and before 1/1/2019 | 25 92 | 92 | 92 | 16 |
| 26 Underpayment on line 17 × $\frac{\text{Number of days on line 25}}{365} \times 5\% (0.05)$ | 26 \$ 33. | \$ 33. | \$ 33. | \$ 6. |
| 27 Number of days on line 20 after 12/31/2018 and before 4/1/2019 | 27 90 | 90 | 90 | 90 |
| 28 Underpayment on line 17 × $\frac{\text{Number of days on line 27}}{365} \times 6\% (0.06)$ | 28 \$ 39. | \$ 39. | \$ 39. | \$ 39. |
| 29 Number of days on line 20 after 3/31/2019 and before 7/1/2019 | 29 15 | 15 | 15 | 15 |
| 30 Underpayment on line 17 × $\frac{\text{Number of days on line 29}}{365} \times *%$ | 30 \$ 8. | \$ 8. | \$ 8. | \$ 8. |
| 31 Number of days on line 20 after 6/30/2019 and before 10/1/2019 | 31 | | | |
| 32 Underpayment on line 17 × $\frac{\text{Number of days on line 31}}{365} \times *%$ | 32 \$ | \$ | \$ | \$ |
| 33 Number of days on line 20 after 9/30/2019 and before 1/1/2020 | 33 | | | |
| 34 Underpayment on line 17 × $\frac{\text{Number of days on line 33}}{365} \times *%$ | 34 \$ | \$ | \$ | \$ |
| 35 Number of days on line 20 after 12/31/2019 and before 3/16/2020 | 35 | | | |
| 36 Underpayment on line 17 × $\frac{\text{Number of days on line 35}}{366} \times *%$ | 36 \$ | \$ | \$ | \$ |
| 37 Add lines 22, 24, 26, 28, 30, 32, 34, and 36 | 37 \$ 140. | \$ 118. | \$ 85. | \$ 53. |
| 38 Penalty. Add columns (a) through (d) of line 37. Enter the total here and on Form 1120, line 34; or the comparable line for other income tax returns. | | | 38 \$ | 396. |

*Use the penalty interest rate for each calendar quarter, which the IRS will determine during the first month in the preceding quarter. These rates are published quarterly in an IRS News Release and in a revenue ruling in the Internal Revenue Bulletin. To obtain this information on the Internet, access the IRS website at www.irs.gov. You can also call 1-800-829-4933 to get interest rate information.

Schedule A Adjusted Seasonal Installment Method and Annualized Income Installment Method

See instructions.

Form 1120S filers: For lines 1, 2, 3, and 21 "taxable income" refers to excess net passive income or the amount on which tax is imposed under section 1374(a), whichever applies.

Part I Adjusted Seasonal Installment Method

Caution: Use this method only if the base period percentage for any 6 consecutive months is at least 70%. See instructions.

| | | (a) | (b) | (c) | (d) |
|------------|---|----------------|----------------|----------------|-----------------|
| | | First 3 months | First 5 months | First 8 months | First 11 months |
| 1 | Enter taxable income for the following periods. | | | | |
| a | Tax year beginning in 2015 | | | | |
| b | Tax year beginning in 2016 | | | | |
| c | Tax year beginning in 2017 | | | | |
| 2 | Enter taxable income for each period for the tax year beginning in 2018. See the instructions for the treatment of extraordinary items | | | | |
| 3 | Enter taxable income for the following periods. | First 4 months | First 6 months | First 9 months | Entire year |
| a | Tax year beginning in 2015 | | | | |
| b | Tax year beginning in 2016 | | | | |
| c | Tax year beginning in 2017 | | | | |
| 4 | Divide the amount in each column on line 1a by the amount in column (d) on line 3a | | | | |
| 5 | Divide the amount in each column on line 1b by the amount in column (d) on line 3b | | | | |
| 6 | Divide the amount in each column on line 1c by the amount in column (d) on line 3c | | | | |
| 7 | Add lines 4 through 6 | | | | |
| 8 | Divide line 7 by 3.0 | | | | |
| 9a | Divide line 2 by line 8 | | | | |
| b | Extraordinary items (see instructions) | | | | |
| c | Add lines 9a and 9b | | | | |
| 10 | Figure the tax on the amount on line 9c using the instructions for Form 1120, Schedule J, line 2, or comparable line of corporation's return | | | | |
| 11a | Divide the amount in columns (a) through (c) on line 3a by the amount in column (d) on line 3a | | | | |
| b | Divide the amount in columns (a) through (c) on line 3b by the amount in column (d) on line 3b | | | | |
| c | Divide the amount in columns (a) through (c) on line 3c by the amount in column (d) on line 3c | | | | |
| 12 | Add lines 11a through 11c | | | | |
| 13 | Divide line 12 by 3.0 | | | | |
| 14 | Multiply the amount in columns (a) through (c) of line 10 by columns (a) through (c) of line 13. In column (d), enter the amount from line 10, column (d) | | | | |
| 15 | Enter any alternative minimum tax for each payment period. See instructions | | | | |
| 16 | Enter any other taxes for each payment period. See instructions | | | | |
| 17 | Add lines 14 through 16 | | | | |
| 18 | For each period, enter the same type of credits as allowed on Form 2220, lines 1 and 2c. See instructions | | | | |
| 19 | Total tax after credits. Subtract line 18 from line 17. If zero or less, enter -0- | | | | |

Part II Annualized Income Installment Method

| | | (a) | (b) | (c) | (d) |
|------------|---|-----------------------|-----------------------|-----------------------|-----------------------|
| | | First _____ months | First _____ months | First _____ months | First _____ months |
| 20 | Annualization periods (see instructions) | 20 | | | |
| 21 | Enter taxable income for each annualization period. See instructions for the treatment of extraordinary items | 21 | | | |
| 22 | Annualization amounts (see instructions) | 22 | | | |
| 23a | Annualized taxable income. Multiply line 21 by line 22 | 23a | | | |
| b | Extraordinary items (see instructions) | 23b | | | |
| c | Add lines 23a and 23b | 23c | | | |
| 24 | Figure the tax on the amount on line 23c using the instructions for Form 1120, Schedule J, line 2, or comparable line of corporation's return | 24 | | | |
| 25 | Enter any alternative minimum tax for each payment period (see instructions) | 25 | | | |
| 26 | Enter any other taxes for each payment period. See instructions | 26 | | | |
| 27 | Total tax. Add lines 24 through 26 | 27 | | | |
| 28 | For each period, enter the same type of credits as allowed on Form 2220, lines 1 and 2c. See instructions | 28 | | | |
| 29 | Total tax after credits. Subtract line 28 from line 27. If zero or less, enter -0- | 29 | | | |
| 30 | Applicable percentage | 30 | 25% | 50% | 75% |
| 31 | Multiply line 29 by line 30 | 31 | | | |

Part III Required Installments

| | | 1st | 2nd | 3rd | 4th |
|-----------|--|-------------|-------------|-------------|-------------|
| | | installment | installment | installment | installment |
| | Note: Complete lines 32 through 38 of one column before completing the next column. | | | | |
| 32 | If only Part I or Part II is completed, enter the amount in each column from line 19 or line 31. If both parts are completed, enter the smaller of the amounts in each column from line 19 or line 31 | 32 | | | |
| 33 | Add the amounts in all preceding columns of line 38. See instructions | 33 | | | |
| 34 | Adjusted seasonal or annualized income installments. Subtract line 33 from line 32. If zero or less, enter -0- | 34 | | | |
| 35 | Enter 25% (0.25) of line 5 on page 1 of Form 2220 in each column. Note: "Large corporations," see the instructions for line 10 for the amounts to enter | 35 | | | |
| 36 | Subtract line 38 of the preceding column from line 37 of the preceding column | 36 | | | |
| 37 | Add lines 35 and 36 | 37 | | | |
| 38 | Required installments. Enter the smaller of line 34 or line 37 here and on page 1 of Form 2220, line 10. See instructions | 38 | | | |

Additional information from your 2018 Federal Corporation Tax Return**Form 1120: US Corporation Income Tax Return****Other Deductions****Continuation Statement**

| Description | Amount |
|----------------|--------------|
| Bank charges | 34 |
| Office expense | 2,937 |
| Postage | 137 |
| Supplies | 600 |
| Merchant Fees | 1,403 |
| Total | 5,111 |