



PRAKASH CHAVDA CPA P C
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July 8, 2021

SILVER TOUCH TECHNOLOGIES INC.
256-06 HILLSIDE AVE
GLEN OAKS, NY 11004

Dear Client,

Enclosed is the 2020 Form 1120, U.S. Corporation Income Tax Return, for SILVER TOUCH TECHNOLOGIES INC. for the tax year ending March 31, 2021.

Your 2020 Form 1120, U.S. Corporation Income Tax Return, for SILVER TOUCH TECHNOLOGIES INC. will be electronically filed.

Your balance due of \$315.00 will be automatically withdrawn from your Checking Account on 07/08/2021.

Enclosed is the 2020 Form CBT-100, New Jersey Corporation Business Tax Return for SILVER TOUCH TECHNOLOGIES INC..

Your 2020 Form CBT-100, New Jersey Corporation Business Tax Return for SILVER TOUCH TECHNOLOGIES INC. will be electronically filed.

Your balance due of \$975.00 will be automatically withdrawn from your Checking Account on 07/08/2021.

The due dates and required payments for the 2021 New Jersey Corporation Business Tax Return estimated income tax are as follows:

Installment #1 by	07/15/21	375
Installment #2 by	09/15/21	375
Installment #3 by	12/15/21	375
Installment #4 by	03/15/22	375

We very much appreciate the opportunity to serve you. If you have any questions regarding this return, please do not hesitate to call.

Sincerely,

PRAKASH CHAVDA, CPA

Form 1120 Department of the Treasury Internal Revenue Service		U.S. Corporation Income Tax Return For calendar year 2020 or tax year beginning <u>Apr 1</u> , 2020, ending <u>Mar 31</u> , 20 <u>21</u> ▶ Go to www.irs.gov/Form1120 for instructions and the latest information.		OMB No. 1545-0123 <div style="font-size: 2em; font-weight: bold;">2020</div>	
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 <u>SILVER TOUCH TECHNOLOGIES INC.</u> Number, street, and room or suite no. If a P.O. box, see instructions. <u>256-06 HILLSIDE AVE</u> City or town, state or province, country, and ZIP or foreign postal code <u>GLEN OAKS NY 11004</u>		B Employer identification number <u>45-4584052</u> C Date incorporated <u>01/10/2012</u> D Total assets (see instructions) <u>\$ 163,340</u>	
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	1a	955,892		
	b Returns and allowances	1b			
	c Balance. Subtract line 1b from line 1a		1c	955,892	
	2 Cost of goods sold (attach Form 1125-A)		2	830,188	
	3 Gross profit. Subtract line 2 from line 1c		3	125,704	
	4 Dividends and inclusions (Schedule C, line 23)		4		
	5 Interest		5		
	6 Gross rents		6		
	7 Gross royalties		7		
	8 Capital gain net income (attach Schedule D (Form 1120))		8		
	9 Net gain or (loss) from Form 4797, Part II, line 17 (attach Form 4797)		9		
10 Other income (see instructions—attach statement) <u>Other Income Statement</u>		10	718		
11 Total income. Add lines 3 through 10		11	126,422		
Deductions (See instructions for limitations on deductions.)	12 Compensation of officers (see instructions—attach Form 1125-E)		12		
	13 Salaries and wages (less employment credits)		13		
	14 Repairs and maintenance		14		
	15 Bad debts		15	23,733	
	16 Rents		16		
	17 Taxes and licenses		17		
	18 Interest (see instructions)		18		
	19 Charitable contributions		19		
	20 Depreciation from Form 4562 not claimed on Form 1125-A or elsewhere on return (attach Form 4562)		20		
	21 Depletion		21		
	22 Advertising		22		
	23 Pension, profit-sharing, etc., plans		23		
	24 Employee benefit programs		24		
	25 Reserved for future use		25		
	26 Other deductions (attach statement) <u>Other Deductions Statement</u>		26	101,188	
	27 Total deductions. Add lines 12 through 26		27	124,921	
	28 Taxable income before net operating loss deduction and special deductions. Subtract line 27 from line 11.		28	1,501	
29a Net operating loss deduction (see instructions)	29a				
b Special deductions (Schedule C, line 24)	29b				
c Add lines 29a and 29b		29c			
Tax, Refundable Credits, and Payments	30 Taxable income. Subtract line 29c from line 28. See instructions		30	1,501	
	31 Total tax (Schedule J, Part I, line 11)		31	315	
	32 2020 net 965 tax liability paid (Schedule J, Part II, line 12)		32		
	33 Total payments, credits, and section 965 net tax liability (Schedule J, Part III, line 23)		33		
	34 Estimated tax penalty. See instructions. Check if Form 2220 is attached <input type="checkbox"/>		34		
	35 Amount owed. If line 33 is smaller than the total of lines 31, 32, and 34, enter amount owed		35	315	
	36 Overpayment. If line 33 is larger than the total of lines 31, 32, and 34, enter amount overpaid		36		
37 Enter amount from line 36 you want: Credited to 2021 estimated tax ▶ Refunded ▶		37			
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 _____		Title <u>PRESIDENT</u>			
May the IRS discuss this return with the preparer shown below? See instructions. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
Paid Preparer Use Only	Print/Type preparer's name		Preparer's signature		Date
	<u>PRAKASH CHAVDA, CPA</u>		<u>PRAKASH CHAVDA, CPA</u>		<u>07/08/2021</u>
	Firm's name ▶ <u>PRAKASH CHAVDA CPA P C</u>		Firm's EIN ▶ <u>45-4768536</u>		PTIN <u>P01069041</u>
Firm's address ▶ <u>256-06 Hillside Ave., 1st Floor Floral Park NY 11004</u>					Phone no. <u>(718)831-6300</u>

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 column (a), lines 9 through 20. Enter here and on page 1, line 4			
24	Total special deductions. Add column (c), lines 9 through 22. 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	315
3	Base erosion minimum tax amount (attach Form 8991)	3	
4	Add lines 2 and 3	4	315
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	315
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	Interest/tax due under Section 453A(c) and/or Section 453(l)	9f	
g	Other (see instructions—attach statement)	9g	
10	Total. Add lines 9a through 9g	10	
11	Total tax. Add lines 7, 8, and 10. Enter here and on page 1, line 31	11	315

Part II—Section 965 Payments (see instructions)

12	2020 net 965 tax liability paid from Form 965-B, Part II, column (k), line 4. Enter here and on page 1, line 32	12	
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Part III—Payments, Refundable Credits, and Section 965 Net Tax Liability

13	2019 overpayment credited to 2020	13	
14	2020 estimated tax payments	14	
15	2020 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	Reserved for future use	20c	
d	Other (attach statement—see instructions)	20d	
21	Total credits. Add lines 20a through 20d	21	
22	2020 net 965 tax liability from Form 965-B, Part I, column (d), line 4. 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 type="checkbox"/> Cash b <input checked="" type="checkbox"/> Accrual c <input type="checkbox"/> Other (specify) ▶ _____	Yes	No
2	See the instructions and enter the:		
a	Business activity code no. ▶ <u>541519</u>		
b	Business activity ▶ <u>COMPUTER CONSULTING</u>		
c	Product or service ▶ <u>COMPUTER CONSULTING</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
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(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 ▶ <u>100.</u> and (b) Owner’s country ▶ <u>IN</u> (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 ▶ <u>1</u>	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 ► \$ _____		
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 2020 that would require it to file Form(s) 1099?		X
b If "Yes," did or will the corporation file required Form(s) 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 or more of the following? See instructions		X
a The corporation owns a pass-through entity with current, or prior year carryover, excess business interest expense.		
b The corporation's aggregate average annual gross receipts (determined under section 448(c)) for the 3 tax years preceding the current tax year are more than \$26 million and the corporation has business interest expense.		
c The corporation is a tax shelter and the corporation has business interest expense.		
If "Yes," 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 15 ► \$ _____		
26 Since December 22, 2017, did a foreign corporation directly or indirectly acquire substantially all of the properties held directly or indirectly by the corporation, and was the ownership percentage (by vote or value) for purposes of section 7874 greater than 50% (for example, the shareholders held more than 50% of the stock of the foreign corporation)? If "Yes," list the ownership percentage by vote and by value. See instructions		X
Percentage: By Vote		
By Value		

Schedule L Balance Sheets per Books		Beginning of tax year		End of tax year	
Assets		(a)	(b)	(c)	(d)
1	Cash		65,858.		34,578.
2a	Trade notes and accounts receivable	322,894.		125,375.	
b	Less allowance for bad debts	()	322,894.	()	125,375.
3	Inventories				
4	U.S. government obligations				
5	Tax-exempt securities (see instructions)				
6	Other current assets (attach statement)		3,534.		3,087.
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)		800.		300.
15	Total assets		393,086.		163,340.
Liabilities and Shareholders' Equity					
16	Accounts payable		295,530.		105,000.
17	Mortgages, notes, bonds payable in less than 1 year				
18	Other current liabilities (attach statement)		81,960.		41,042.
19	Loans from shareholders		100.		616.
20	Mortgages, notes, bonds payable in 1 year or more				
21	Other liabilities (attach statement)				
22	Capital stock: a Preferred stock				
	b Common stock	500.	500.	500.	500.
23	Additional paid-in capital				
24	Retained earnings—Appropriated (attach statement)				
25	Retained earnings—Unappropriated		14,996.		16,182.
26	Adjustments to shareholders' equity (attach statement)				
27	Less cost of treasury stock		()		()
28	Total liabilities and shareholders' equity		393,086.		163,340.

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	1,186.	7	Income recorded on books this year not included on this return (itemize):	
2	Federal income tax per books	315.		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	1,501.	10	Income (page 1, line 28)—line 6 less line 9	1,501.

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

1	Balance at beginning of year	14,996.	5	Distributions: a Cash	
2	Net income (loss) per books	1,186.		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	16,182.	8	Balance at end of year (line 4 less line 7)	16,182.

(Rev. November 2018)
Department of the Treasury
Internal Revenue Service▶ **Attach to Form 1120, 1120-C, 1120-F, 1120S, or 1065.**
▶ **Go to www.irs.gov/Form1125A for the latest information.**

Name SILVER TOUCH TECHNOLOGIES INC.		Employer identification number 45-4584052	
1	Inventory at beginning of year	1	
2	Purchases	2	830,188
3	Cost of labor	3	
4	Additional section 263A costs (attach schedule)	4	
5	Other costs (attach schedule)	5	
6	Total. Add lines 1 through 5	6	830,188
7	Inventory at end of year	7	
8	Cost of goods sold. Subtract line 7 from line 6. Enter here and on Form 1120, page 1, line 2 or the appropriate line of your tax return. See instructions	8	830,188

9a Check all methods used for valuing closing inventory:

(i) ☐ Cost

(ii) ☐ Lower of cost or market

(iii) ☐ Other (Specify method used and attach explanation.) ▶ _____

b Check if there was a writedown of subnormal goods ▶ ☐

c Check if the LIFO inventory method was adopted this tax year for any goods (if checked, attach Form 970) ▶ ☐

d If the LIFO inventory method was used for this tax year, enter amount of closing inventory computed under LIFO **9d** _____

e If property is produced or acquired for resale, do the rules of section 263A apply to the entity? See instructions . . . ☐ Yes ☐ No

f Was there any change in determining quantities, cost, or valuations between opening and closing inventory? If "Yes," attach explanation ☐ Yes ☐ No

Section references are to the Internal Revenue Code unless otherwise noted.

What's New**Small business taxpayers.** For tax years beginning after December 31, 2017, the following apply.

- A small business taxpayer (defined below), may use a method of accounting for inventories that either: (1) treats inventories as nonincidental materials and supplies, or (2) conforms to the taxpayer's financial accounting treatment of inventories.
- A small business taxpayer is not required to capitalize costs under section 263A.

General Instructions**Purpose of Form**

Use Form 1125-A to calculate and deduct cost of goods sold for certain entities.

Who Must File

Filers of Form 1120, 1120-C, 1120-F, 1120S, or 1065, must complete and attach Form 1125-A if the applicable entity reports a deduction for cost of goods sold.

Inventories

Generally, inventories are required at the beginning and end of each tax year if the production, purchase, or sale of

merchandise is an income-producing factor. See Regulations section 1.471-1. If inventories are required, you generally must use an accrual method of accounting for sales and purchases of inventory items.

Exception for certain taxpayers. A small business taxpayer (defined below), can adopt or change its accounting method to account for inventories in the same manner as material and supplies that are non-incidental, or conform to its treatment of inventories in an applicable financial statement (as defined in section 451(b)(3)), or if it does not have an applicable financial statement, the method of accounting used in its books and records prepared in accordance with its accounting procedures. See section 471(c)(3).

A small business taxpayer claiming exemption from the requirement to keep inventories is changing its method of accounting for purposes of section 481. For additional guidance on this method of accounting, see Pub. 538, Accounting Periods and Methods. For guidance on changing to this method of accounting, see Form 3115 and the Instructions for Form 3115.

Small business taxpayer. A small business taxpayer is a taxpayer that (a) has average annual gross receipts of \$25 million or less (indexed for inflation) for the 3 prior tax years, and (b) is not a tax shelter (as defined in section 448(d)(3)). See Pub. 538.**Uniform capitalization rules.** The uniform capitalization rules of section 263A generally require you to capitalize, or include in inventory, certain costs incurred in connection with the following.

- The production of real property and tangible personal property held in inventory or held for sale in the ordinary course of business.
- Real property or personal property (tangible and intangible) acquired for resale.
- The production of real property and tangible personal property for use in its trade or business or in an activity engaged in for profit.

A small business taxpayer (defined above) is not required to capitalize costs under section 263A. See section 263A(i).

See the discussion on section 263A uniform capitalization rules in the instructions for your tax return before completing Form 1125-A. Also see Regulations sections 1.263A-1 through 1.263A-3. See Regulations section 1.263A-4 for rules for property produced in a farming business.

Information Return of a 25% Foreign-Owned U.S. Corporation or a Foreign Corporation Engaged in a U.S. Trade or Business
(Under Sections 6038A and 6038C of the Internal Revenue Code)

OMB No. 1545-0123

► Go to www.irs.gov/Form5472 for instructions and the latest information.Department of the Treasury
Internal Revenue ServiceFor tax year of the reporting corporation beginning Apr 1, 2020, and ending Mar 31, 2021**Note:** Enter all information in English and money items in U.S. dollars.**Part I Reporting Corporation** (see instructions). All reporting corporations must complete Part I.

1a Name of reporting corporation SILVER TOUCH TECHNOLOGIES INC.		1b Employer identification number 45-4584052
Number, street, and room or suite no. (if a P.O. box, see instructions) 256-06 HILLSIDE AVE		1c Total assets \$ 163,340.
City or town, state, and ZIP code (if a foreign address, see instructions) GLEN OAKS, NY 11004		
1d Principal business activity ► COMPUTER CONSULTING		1e Principal business activity code ► 541519
1f Total value of gross payments made or received reported on this Form 5472. See instructions. \$	1g Total number of Forms 5472 filed for the tax year 1	1h Total value of gross payments made or received reported on all Forms 5472. See instructions. \$
1i Check here if this is a consolidated filing of Form 5472 <input type="checkbox"/>	1j Check here if this is the initial year for which the U.S. reporting corporation is filing a Form 5472 . . <input type="checkbox"/>	1k Country of incorporation US
1l Country(ies) under whose laws the reporting corporation files an income tax return as a resident US		1m Principal country(ies) where business is conducted US
2 Check here if, at any time during the tax year, any foreign person owned, directly or indirectly, at least 50% of (a) the total voting power of all classes of the stock of the reporting corporation entitled to vote, or (b) the total value of all classes of stock of the reporting corporation ► <input type="checkbox"/>		
3 Check here if the reporting corporation is a foreign-owned domestic disregarded entity (foreign-owned U.S. DE) treated as a corporation for purposes of section 6038A. See instructions ► <input type="checkbox"/>		

Part II 25% Foreign Shareholder (see instructions)Check here if any direct (or ultimate indirect) 25% foreign shareholder listed in Part II is a surrogate foreign corporation under section 7874(a)(2)(B). ► ☐

1a Name and address of direct 25% foreign shareholder SILVER TOUCH TECHNOLOGIES LTD. 2nd Floor Safron, Nr. Pan AHMEDABAD, IN		
1b(1) U.S. identifying number, if any FOREIGNUS	1b(2) Reference ID number (see instructions) NA	1b(3) Foreign taxpayer identification number (FTIN), if any (see instructions)
1c Principal country(ies) where business is conducted IN	1d Country of citizenship, organization, or incorporation IN	1e Country(ies) under whose laws the direct 25% foreign shareholder files an income tax return as a resident IN
2a Name and address of direct 25% foreign shareholder		
2b(1) U.S. identifying number, if any	2b(2) Reference ID number (see instructions)	2b(3) FTIN, if any (see instructions)
2c Principal country(ies) where business is conducted	2d Country of citizenship, organization, or incorporation	2e Country(ies) under whose laws the direct 25% foreign shareholder files an income tax return as a resident
3a Name and address of ultimate indirect 25% foreign shareholder		
3b(1) U.S. identifying number, if any	3b(2) Reference ID number (see instructions)	3b(3) FTIN, if any (see instructions)
3c Principal country(ies) where business is conducted	3d Country of citizenship, organization, or incorporation	3e Country(ies) under whose laws the ultimate indirect 25% foreign shareholder files an income tax return as a resident
4a Name and address of ultimate indirect 25% foreign shareholder		
4b(1) U.S. identifying number, if any	4b(2) Reference ID number (see instructions)	4b(3) FTIN, if any (see instructions)
4c Principal country(ies) where business is conducted	4d Country of citizenship, organization, or incorporation	4e Country(ies) under whose laws the ultimate indirect 25% foreign shareholder files an income tax return as a resident

Part III Related Party (see instructions). All reporting corporations must complete this question and the rest of Part III.
Check applicable box: Is the related party a ☒ foreign person or ☐ U.S. person?

1a Name and address of related party SILVER TOUCH TECHNOLOGIES L 2nd Floor Safron, Nr. Pan Ahmedabad, IN		
1b(1) U.S. identifying number, if any FOREIGNUS	1b(2) Reference ID number (see instructions) FOREIGNUS	1b(3) FTIN, if any (see instructions)
1c Principal business activity ► COMPUTER CONSULTING		1d Principal business activity code ► 541519
1e Relationship—Check boxes that apply: <input checked="" type="checkbox"/> Related to reporting corporation <input checked="" type="checkbox"/> Related to 25% foreign shareholder <input type="checkbox"/> 25% foreign shareholder		
1f Principal country(ies) where business is conducted IN	1g Country(ies) under whose laws the related party files an income tax return as a resident IN	

Part IV Monetary Transactions Between Reporting Corporations and Foreign Related Party (see instructions)
Caution: Part IV must be completed if the “foreign person” box is checked in the heading for Part III.
If estimates are used, check here. ► ☐

1	Sales of stock in trade (inventory)	1	
2	Sales of tangible property other than stock in trade	2	
3	Platform contribution transaction payments received	3	
4	Cost-sharing transaction payments received	4	
5a	Rents received (for other than intangible property rights)	5a	
b	Royalties received (for other than intangible property rights)	5b	
6	Sales, leases, licenses, etc., of intangible property rights (for example, patents, trademarks, secret formulas)	6	
7	Consideration received for technical, managerial, engineering, construction, scientific, or like services	7	
8	Commissions received	8	
9	Amounts borrowed (see instructions) a Beginning balance _____ b Ending balance or monthly average ►	9b	
10	Interest received	10	
11	Premiums received for insurance or reinsurance	11	
12	Other amounts received (see instructions)	12	
13	Total. Combine amounts on lines 1 through 12	13	
14	Purchases of stock in trade (inventory)	14	
15	Purchases of tangible property other than stock in trade	15	
16	Platform contribution transaction payments paid	16	
17	Cost-sharing transaction payments paid	17	
18a	Rents paid (for other than intangible property rights)	18a	
b	Royalties paid (for other than intangible property rights)	18b	
19	Purchases, leases, licenses, etc., of intangible property rights (for example, patents, trademarks, secret formulas)	19	
20	Consideration paid for technical, managerial, engineering, construction, scientific, or like services	20	830,188.
21	Commissions paid	21	
22	Amounts loaned (see instructions) a Beginning balance _____ b Ending balance or monthly average ►	22b	
23	Interest paid	23	
24	Premiums paid for insurance or reinsurance	24	
25	Other amounts paid (see instructions)	25	
26	Total. Combine amounts on lines 14 through 25	26	830,188.

Part V Reportable Transactions of a Reporting Corporation That is a Foreign-Owned U.S. DE (see instructions)
Describe on an attached separate sheet any other transaction as defined by Regulations section 1.482-1(i)(7), such as amounts paid or received in connection with the formation, dissolution, acquisition, and disposition of the entity, including contributions to and distributions from the entity, and check here. ► ☐

Part VI Nonmonetary and Less-Than-Full Consideration Transactions Between the Reporting Corporation and the Foreign Related Party (see instructions)

Describe these transactions on an attached separate sheet and check here. ► ☐

Part VII Additional Information. All reporting corporations must complete Part VII.

- 1** Does the reporting corporation import goods from a foreign related party? ☐ Yes ☒ No
- 2a** If "Yes," is the basis or inventory cost of the goods valued at greater than the customs value of the imported goods? ☐ Yes ☐ No
- b** If "Yes," attach a statement explaining the reason or reasons for such difference.
- c** If the answers to questions 1 and 2a are "Yes," were the documents used to support this treatment of the imported goods in existence and available in the United States at the time of filing Form 5472? ☐ Yes ☐ No
- 3** During the tax year, was the foreign parent corporation a participant in any cost-sharing arrangement? ☐ Yes ☒ No
- 4** During the course of the tax year, did the foreign parent corporation become a participant in any cost-sharing arrangement? ☐ Yes ☒ No
- 5a** During the tax year, did the reporting corporation pay or accrue any interest or royalty, to the related party, for which the deduction is not allowed under section 267A? See instructions ☐ Yes ☒ No
- b** If "Yes," enter the total amount of the disallowed deductions \$ _____
- 6a** Does the reporting corporation claim a foreign-derived intangible income (FDII) deduction (under section 250) with respect to amounts listed in Part IV? ☐ Yes ☒ No
- b** If "Yes," enter the amount of gross income derived from sales, leases, exchanges, or other dispositions (but not licenses) of property to the foreign related party that the reporting corporation included in its computation of foreign-derived deduction eligible income (FDDEI). See instructions \$ _____
- c** If "Yes," enter the amount of gross income derived from a license of property to the foreign related party that the reporting corporation included in its computation of FDDEI. See instructions. \$ _____
- d** If "Yes," enter the amount of gross income derived from services provided to the foreign related party that the reporting corporation included in its computation of FDDEI. See instructions \$ _____

Part VIII Base Erosion Payments and Base Erosion Tax Benefits Under Section 59A (see instructions)

- 1** Amounts defined as base erosion payments under section 59A(d) \$ _____
- 2** Amount of base erosion tax benefits under section 59A(c)(2) \$ _____
- 3** Amount of total qualified derivative payments as described in section 59A(h) made by the reporting corporation \$ _____
- 4** Reserved for future use ☐

Form **8879-C****IRS e-file Signature Authorization for Form 1120**

OMB No. 1545-0123

Department of the Treasury
Internal Revenue ServiceFor calendar year 2020, or tax year beginning Apr 1, 2020, ending Mar 31, 20 21**2020**▶ **Do not send to the IRS. Keep for your records.**
▶ **Go to www.irs.gov/Form8879C for the latest information.**

Name of corporation

SILVER TOUCH TECHNOLOGIES INC.

Employer identification number

45-4584052

Part I Tax Return Information (Whole dollars only)

1	Total income (Form 1120, line 11)	1	126,422.
2	Taxable income (Form 1120, line 30)	2	1,501.
3	Total tax (Form 1120, line 31)	3	315.
4	Amount owed (Form 1120, line 35)	4	315.
5	Overpayment (Form 1120, line 36)	5	

Part II Declaration and Signature Authorization of Officer. Be sure to get a copy of the corporation's return.

Under penalties of perjury, I declare that I am an officer of the above corporation and that I have examined a copy of the corporation's 2020 electronic income tax return and accompanying schedules and statements and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts shown on the copy of the corporation's electronic income tax return. I consent to allow my electronic return originator (ERO), transmitter, or intermediate service provider to send the corporation's return to the IRS and to receive from the IRS **(a)** an acknowledgement of receipt or reason for rejection of the transmission, **(b)** the reason for any delay in processing the return or refund, and **(c)** the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the corporation's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at **1-888-353-4537** no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the corporation's electronic income tax return and, if applicable, the corporation's consent to electronic funds withdrawal.

Officer's PIN: check one box only

☐ I authorize _____ to enter my PIN

--	--	--	--	--

 as my signature
ERO firm name
on the corporation's 2020 electronically filed income tax return.
do not enter all zeros

☒ As an officer of the corporation, I will enter my PIN as my signature on the corporation's 2020 electronically filed income tax return.

Officer's signature ▶ _____ Date ▶ _____ Title ▶ PRESIDENT

Part III Certification and Authentication**ERO's EFIN/PIN.** Enter your six-digit EFIN followed by your five-digit self-selected PIN.

1	2	1	4	3	2	5	4	3	2	1
---	---	---	---	---	---	---	---	---	---	---

do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2020 electronically filed income tax return for the corporation indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 3112**, IRS e-file Application and Participation, and **Pub. 4163**, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature ▶ _____ Date ▶ 07/08/2021

ERO Must Retain This Form — See Instructions
Do Not Submit This Form to the IRS Unless Requested To Do So

For Paperwork Reduction Act Notice, see instructions.
BAA

REV 05/18/21 PRO

Form **8879-C** (2020)

**Form 1120
Schedule L**

Other Assets

2020

Name as Shown on Return
SILVER TOUCH TECHNOLOGIES INC.

Employer Identification No.
45-4584052

Other Current Assets:	Beginning of tax year	End of tax year
DUTIES & TAXES	1,048.	0.
PAYROLL TAXES	2,486.	3,087.
Totals to Form 1120, Schedule L, line 6 ▶	3,534.	3,087.

Other Investments:	Beginning of tax year	End of tax year
Totals to Form 1120, Schedule L, line 9 ▶		

Other Assets:	Beginning of tax year	End of tax year
RENT DEPOSIT	300.	300.
LOAN & ADVANCES	500.	0.
Totals to Form 1120, Schedule L, line 14 ▶	800.	300.

Form 1120
Schedule LOther Liabilities
and Adjustments to Shareholders' Equity

2020

Name
SILVER TOUCH TECHNOLOGIES INC.Employer Identification No.
45-4584052

Other Current Liabilities:	Beginning of tax year	End of tax year
INCOME TAX PAYABLE	295.	315.
CBT PAYABLE	526.	
CUSTOMER ADVANCE	80,524.	36,410.
DUTIES & TAXES	615.	817.
PROVISION EXP		3,400.
DEPOSIT		100.
Totals to Form 1120, Schedule L, line 18 ▶	81,960.	41,042.
Other Liabilities:	Beginning of tax year	End of tax year
Totals to Form 1120, Schedule L, line 21 ▶		
Retained Earnings — Appropriated:	Beginning of tax year	End of tax year
Totals to Form 1120, Schedule L, line 24 ▶		
Adjustments to Shareholders' Equity:	Beginning of tax year	End of tax year
Totals to Form 1120, Schedule L, line 26 ▶		

Smart Worksheets from your 2020 Federal Corporation Tax Return

SMART WORKSHEET FOR: Form 1120: US Corporation Income Tax Return

Filing Address Smart Worksheet	
Mail return to:	<div>Department of the Treasury</div> <div>Internal Revenue Service Center</div> <div>Kansas City, MO 64999-0012</div>

SMART WORKSHEET FOR: Form 1120: US Corporation Income Tax Return

Schedule K, Line 7 (c) Smart Worksheet	
A	<div>Do you need to complete Form 5472?</div> <div>QuickZoom here to Form 5472 ➡</div>
	<div>Yes <input checked="" type="checkbox"/></div> <div>No <input type="checkbox"/></div>

Additional information from your 2020 Federal Corporation Tax Return**Form 1120: US Corporation Income Tax Return****Other Income****Continuation Statement**

Description	Amount
GOOGLE DES	118
OTHER INCOME	600
Total	718

Form 1120: US Corporation Income Tax Return**Other Deductions****Continuation Statement**

Description	Amount
BANK CHARGES	4,819
DISCOUNTS	33,020
INSURANCE	756
LEGAL AND PROFESSIONAL	2,420
CONSULTING FOR SOLUTION DEVELOPMENT	50,864
MARKETING EXPS.	1,948
MEMBERSHIP FEES	69
PROFESSIONAL FEES	2,000
PAYPAL CHARGES	581
SAP SOFTWARE	4,211
TRAVELLING EXP	500
Total	101,188

**CORPORATION BUSINESS TAX
ESTIMATED PAYMENT WORKSHEET**

CBT-150C

**BEGINNING TAX YEAR 2016, YOU NEED TO PAY YOUR NEW JERSEY
CORPORATION BUSINESS TAX ELECTRONICALLY**

You need to pay the tax by one of these methods:

1. **Electronic Check or Credit Card:** Visit www.njtaxation.org and select "Make a Payment."
2. **Electronic Funds Transfer (EFT):** To register visit www.nj.gov/treasury/revenue/efl.shtml

If you do not have access to the internet, call our Customer Service Center at 609-292-6400 to make a payment.

DO NOT CUT THIS PAGE – DO NOT MAIL – FOR REFERENCE ONLY

REV 04/15/21 PRO

Corporation Business Tax Statement of Estimated Tax Worksheet
CBT-150C

Due Date: 07/15/21 Voucher #: 1 Beginning 04/01/2021 and ending 03/31/2022
1030 2020
45-4584052 SILV

SILVER TOUCH TECHNOLOGIES I
256-06 HILLSIDE AVE
GLEN OAKS NY 11004

1. Amount of this installment	1.	375.00
2. Amount of overpayment credit (See instruction 5)	2.	0.00
3. Amount of this installment payment	3.	375.00
(Line 1 minus Line 2)		

Payments should be made electronically.

**CORPORATION BUSINESS TAX
ESTIMATED PAYMENT WORKSHEET**

CBT-150C

**BEGINNING TAX YEAR 2016, YOU NEED TO PAY YOUR NEW JERSEY
CORPORATION BUSINESS TAX ELECTRONICALLY**

You need to pay the tax by one of these methods:

1. **Electronic Check or Credit Card:** Visit www.njtaxation.org and select "Make a Payment."
2. **Electronic Funds Transfer (EFT):** To register visit www.nj.gov/treasury/revenue/efl.shtml

If you do not have access to the internet, call our Customer Service Center at 609-292-6400 to make a payment.

DO NOT CUT THIS PAGE – DO NOT MAIL – FOR REFERENCE ONLY

REV 04/15/21 PRO

Corporation Business Tax Statement of Estimated Tax Worksheet
CBT-150C

Due Date: 09/15/21 Voucher #: 2 Beginning 04/01/2021 and ending 03/31/2022
1030 2020
45-4584052 SILV

SILVER TOUCH TECHNOLOGIES I
256-06 HILLSIDE AVE
GLEN OAKS NY 11004

1. Amount of this installment	1.	375.00
2. Amount of overpayment credit (See instruction 5)	2.	0.00
3. Amount of this installment payment	3.	375.00
(Line 1 minus Line 2)		

Payments should be made electronically.

**CORPORATION BUSINESS TAX
ESTIMATED PAYMENT WORKSHEET**

CBT-150C

**BEGINNING TAX YEAR 2016, YOU NEED TO PAY YOUR NEW JERSEY
CORPORATION BUSINESS TAX ELECTRONICALLY**

You need to pay the tax by one of these methods:

1. **Electronic Check or Credit Card:** Visit www.njtaxation.org and select "Make a Payment."
2. **Electronic Funds Transfer (EFT):** To register visit www.nj.gov/treasury/revenue/efl.shtml

If you do not have access to the internet, call our Customer Service Center at 609-292-6400 to make a payment.

DO NOT CUT THIS PAGE – DO NOT MAIL – FOR REFERENCE ONLY

REV 04/15/21 PRO

Corporation Business Tax Statement of Estimated Tax Worksheet
CBT-150C

Due Date: 12/15/21 Voucher #: 3 Beginning 04/01/2021 and ending 03/31/2022
1030 2020
45-4584052 SILV

SILVER TOUCH TECHNOLOGIES I
256-06 HILLSIDE AVE
GLEN OAKS NY 11004

1. Amount of this installment	1.	375.00
2. Amount of overpayment credit (See instruction 5)	2.	0.00
3. Amount of this installment payment	3.	375.00
(Line 1 minus Line 2)		

Payments should be made electronically.

**CORPORATION BUSINESS TAX
ESTIMATED PAYMENT WORKSHEET**

CBT-150C

**BEGINNING TAX YEAR 2016, YOU NEED TO PAY YOUR NEW JERSEY
CORPORATION BUSINESS TAX ELECTRONICALLY**

You need to pay the tax by one of these methods:

1. **Electronic Check or Credit Card:** Visit www.njtaxation.org and select "Make a Payment."
2. **Electronic Funds Transfer (EFT):** To register visit www.nj.gov/treasury/revenue/efl.shtml

If you do not have access to the internet, call our Customer Service Center at 609-292-6400 to make a payment.

DO NOT CUT THIS PAGE – DO NOT MAIL – FOR REFERENCE ONLY

REV 04/15/21 PRO

Corporation Business Tax Statement of Estimated Tax Worksheet
CBT-150C

Due Date: 03/15/22 Voucher #: 4 Beginning 04/01/2021 and ending 03/31/2022
1030 2020
45-4584052 SILV

SILVER TOUCH TECHNOLOGIES I
256-06 HILLSIDE AVE
GLEN OAKS NY 11004

1. Amount of this installment	1.	375.00
2. Amount of overpayment credit (See instruction 5)	2.	0.00
3. Amount of this installment payment	3.	375.00
(Line 1 minus Line 2)		

Payments should be made electronically.

New Jersey Corporation Business Tax Return
For Tax Years Ending On or After July 31, 2020, Through June 30, 2021

Tax year beginning 04/01, 2020, and ending 03/31, 2021

FEDERAL EMPLOYER I.D. NUMBER 45-4584052	N.J. CORPORATION NUMBER 0400-4631-53	State and date of incorporation <u>NJ 01/10/2012</u>
CORPORATION NAME SILVER TOUCH TECHNOLOGIES INC.		Date authorized to do business in New Jersey <u>01/10/2012</u>
MAILING ADDRESS 256-06 HILLSIDE AVE		Federal business activity code <u>541519</u>
CITY GLEN OAKS	STATE NY	ZIP CODE 11004
Check applicable return type: <input type="checkbox"/> Initial <input type="checkbox"/> Amended		Corporation books are in the care of <u>CORPORATION</u> at <u>256-06 HILLSIDE AVE., 1ST FLOOR, FLORAL PARK, NY 11004</u> Phone Number (<u>718</u>) <u>831-6300</u>
		Check if applicable (see instructions): <input type="checkbox"/> Professional Corporation <input type="checkbox"/> Investment Company <input type="checkbox"/> Regulated Invest. Company <input type="checkbox"/> Real Estate Investment Trust <input type="checkbox"/> Federal 1120-S Filer

1. Tax Base – Enter amount from line 4 of Schedule A, Part III.....	1.	1,501.
2. Amount of Tax – Multiply line 1 by the applicable tax rate (see instructions)	2.	98.
3. Tax Credits – Enter amount from Schedule A-3, Part I, line 28 (see instructions).....	3.	0.
4. CBT TAX LIABILITY – Subtract line 3 from line 2.....	4.	98.
5. a. Surtax on taxable net income – Multiply the amount on Schedule A, Part III, line 2a, 2b, or 2c (whichever is applicable) by the applicable surtax rate (see instructions).....	5a.	
b. Pass-Through Business Alternative Income Tax Credit from Form 329, line xx (see instructions) (Amount entered cannot be more than amount on line 5a)	5b.	
c. Balance of surtax – Subtract line 5b from line 5a.....	5c.	
6. Tax Due – Add line 5c to the greater of line 4 or minimum tax due from Schedule A-GR (see instructions)...	6.	1,500.
7. Installment Payment – Only applies if line 6 is \$500 or less (see instructions).....	7.	
8. Professional Corporation Fees (from Schedule PC, line 7)	8.	
9. TOTAL TAX AND PROFESSIONAL CORPORATION FEES – Add lines 6, 7, and 8.....	9.	1,500.
10. a. Payments and Credits (see instructions)	10a.	525.
b. Payments made by partnerships on behalf of taxpayer (include copies of all NJK-1s).....	10b.	
c. Refundable Tax Credits from Schedule A-3, Part II, line 5 (see instructions).....	10c.	
d. Total Payments and Credits – Add lines 10a, 10b, and 10c.....	10d.	525.
11. Balance of Tax Due – If line 10d is less than line 9, subtract line 10d from line 9.....	11.	975.
12. Penalty and Interest Due (see instructions)	12.	
13. Total Balance Due – Add line 11 and line 12	13.	975.
14. Amount Overpaid – If line 10d is greater than the sum of line 9 and 12, enter amount of overpayment	14.	
15. Amount of line 14 to be Refunded	15.	
16. Amount of line 14 to be Credited to 2021 Tax Return	16.	
17. Amount of line 14 to be Credited to a Combined Group and tax year to which it is to be applied <input type="checkbox"/> 2020 or <input type="checkbox"/> 2021.....	17.	

CERTIFICATION OF INACTIVITY (See Instructions)	<p>If the corporation is inactive, page 1, the Annual General Questionnaire, and Schedules A (Parts I, II, and III), A-2, A-3, A-4, and A-GR must be completed. A corporate officer must sign and certify below:</p> <p><input type="checkbox"/> By marking the check box to the left, I certify that the corporation did not conduct any business, did not have any income, receipts, or expenses, and did not own any assets during the entire period covered by the tax return.</p>		
	(Date)	(Signature of Corporate Officer)	(Title)
SIGNATURE AND VERIFICATION (See Instructions)	<p>Under penalties of perjury, I declare that I have examined this return, including accompanying schedules, forms, and statements, and to the best of my knowledge and belief, it is true, correct, and complete. If prepared by a person other than the taxpayer, this declaration is based on all information of which the preparer has any knowledge.</p>		
	(Date)	(Signature of Duly Authorized Officer of Taxpayer) 256-06 HILLSIDE AVE., 1ST FLOOR PRAKASH CHAVDA, CPA FLORAL PARK NY 11004	(Title) PRESIDENT P01069041
	(Date)	(Signature of Individual Preparing Return)	(Address) PRAKASH CHAVDA CPA P C 256-06 HILLSIDE AVE., 1ST FLOOR FLORAL PARK NY 11004
	(Name of Tax Preparer's Employer)	(Address)	(Employer's ID Number) 45-4768536

NAME AS SHOWN ON RETURN SILVER TOUCH TECHNOLOGIES INC.	FEDERAL ID NUMBER 45-4584052
---	---------------------------------

ANNUAL GENERAL QUESTIONNAIRE (See Instructions)**PART I** All taxpayers must answer the following questions. Riders must be provided where necessary.

1. Type of business COMPUTER CONSULTING
Principal products handled COMPUTER CONSULTING
2. State the location of the actual seat of management or control of the corporation NJ
3. Did one or more other corporations own beneficially, or control, a majority of the stock of taxpayer corporation or did the same interests own beneficially, or control, a majority of the stock of taxpayer corporation and of one or more other corporations? ☐ Yes. Provide a rider indicating the name and FEIN of the controlled corporation, the name and FEIN of the controlling/parent corporation, and the percentage of stock owned or controlled. OR ☒ No.
4. These questions must be answered by corporations with a controlling interest in certain commercial property.
 - a. During the period covered by the return, did the taxpayer acquire or dispose of directly or indirectly a controlling interest in certain commercial property? ☐ Yes. Answer question 4b below. OR ☒ No.
 - b. Was the CITT-1, *Controlling Interest Transfer Tax*, or CITT-1E, *Statement of Waiver of Transfer Tax*, filed with the Division of Taxation? ☐ Yes. Provide a rider indicating the information and include a copy of the CITT-1 or CITT-1E filed. OR ☐ No. Provide a rider indicating the name and FEIN of the transferee, the name and FEIN of the transferor, and the assessed value of the property.
5. Does this corporation own any Qualified Subchapter S Subsidiaries (QSSS)? ☐ Yes. Provide a rider indicating the name, address, and FEIN of the subsidiary, whether the subsidiary made a New Jersey QSSS election, and whether the activities of the subsidiary are included in this return. OR ☒ No.
6. Did the taxpayer receive any deemed repatriation dividends reported under IRC §965 from a subsidiary in the taxpayer's federal tax year 2017 or 2018 for which the taxpayer files a New Jersey 2017, 2018, or 2019 tax return? ☐ Yes. Provide a rider indicating the name and FEIN of the subsidiary, the amount of deemed repatriation dividends, and indicate on which New Jersey return the income was included. OR ☒ No.
7. If the taxpayer is a unitary subsidiary of a combined group filing a New Jersey combined return from which the taxpayer is excluded, did the taxpayer distribute dividends or deemed dividends in the current tax year? ☐ Yes. Provide a rider indicating the name and FEIN of the entity to which the dividends were paid (deemed), the amount of dividends, and unitary ID number of the combined group. OR ☒ No.
8. Is the taxpayer an intangible holding company or is the taxpayer's income, directly or indirectly, from intangible property or related service activities that are deductible against the income of members of a combined group? ☐ Yes. Provide a rider indicating the names and ID numbers of the combined group or the related members and detail the taxpayer's income that is deductible against their income. OR ☒ No.
9. Is income from sources outside the United States included in taxable net income on Schedule A?
☐ Yes ☒ No ☐ NA
If yes, provide a rider indicating such items of gross income, the source, the deductions and the amount of foreign taxes paid. Enter on Schedule A, Part II, line 10, the difference between the net of such income and the amount of foreign taxes paid not previously deducted (include a rider).
10. Does the taxpayer have related parties or affiliates that file combined returns in New Jersey? ☐ Yes. OR ☒ No.
11. Does the taxpayer file as part of a group filing combined returns/reports in other states with corporations that either do not file New Jersey returns or file separate New Jersey returns? ☐ Yes. OR ☒ No.
12. Is the taxpayer part of a group that files a New Jersey combined return, but is excluded from the combined return? ☐ Yes. Provide information below. OR ☒ No.
Name of the managerial member of the combined group: _____
13. Has the taxpayer or the preparer completing this return on the taxpayer's behalf taken any uncertain tax positions when filing this return or their federal tax return? ☐ Yes. Include a rider detailing the information. OR ☒ No.
For more information see Financial Accounting Standards Board (FASB) Accounting Standards Codification (ASC) 740-10, formerly FASB Interpretation No. 48 (FIN 48).
14. Does the taxpayer own or lease real or tangible property:
 - a. In New Jersey? ☐ Yes. OR ☒ No.
 - b. Outside New Jersey? ☐ Yes. Provide information below. OR ☒ No.
List the states, political subdivisions, and foreign nations (as applicable): _____
15. What percentage of the taxpayer's worldwide property, real or tangible, is inside the United States? _____
16. Does the taxpayer have payroll:
 - a. In New Jersey? ☐ Yes. OR ☒ No.
 - b. Outside New Jersey? ☐ Yes. Provide information below. OR ☒ No.
List the states, political subdivisions, and foreign nations (as applicable): _____
17. What percentage of the taxpayer's worldwide payroll is inside the United States? _____
18. Is 20 percent or more of either or both the taxpayer's property and payroll inside the United States? ☐ Yes. OR ☒ No.
19. Does the taxpayer own a disregarded entity or utilize a disregarded entity of a related party? ☐ Yes. Include a rider with the entity's name and tax ID number. OR ☒ No.

NAME AS SHOWN ON RETURN

FEDERAL ID NUMBER

SILVER TOUCH TECHNOLOGIES INC.

45-4584052

ANNUAL GENERAL QUESTIONNAIRE (Continued)**PART II REGULATED INVESTMENT COMPANIES** (Riders must be provided where necessary)

1. Is this taxpayer registered and regulated under the Federal Investment Company Act of 1940 (54 Stat. 789, as amended)? ☐ Yes. Provide information below (include rider if necessary). ☒ No.

Securities and Exchange Commission Information

Registration Number	Registration Date

IMPORTANT NOTE: If the taxpayer's certificate under the Act was not obtained prior to the commencement of the period covered in the return or if such authority was not continued during such entire period, then the taxpayer is not entitled to report as a Regulated Investment Company.

2. Has the taxpayer satisfied the requirements of IRC § 852(a)? ☐ Yes OR ☒ No. If no, taxpayer cannot file as a Regulated Investment Company.
3. Every taxpayer seeking to report as a regulated investment company **MUST SUBMIT WITH THIS RETURN ITS PRINTED ANNUAL REPORT TO STOCKHOLDERS** for the period covered by this return together with all other stockholder reports issued by the company during such period.

NAME AS SHOWN ON RETURN

SILVER TOUCH TECHNOLOGIES INC.

FEDERAL ID NUMBER

45-4584052

Schedule A**CALCULATION OF NEW JERSEY TAXABLE NET INCOME (SEE INSTRUCTIONS)
EVERY CORPORATION MUST COMPLETE PARTS I, II, AND III OF THIS SCHEDULE****PART I – COMPUTATION OF ENTIRE NET INCOME** (All data must match the federal pro forma or federal return, whichever is applicable.)

Income			
1.	a. Gross receipts or sales	1a.	955,892.
	b. Less: Returns and allowances	1b.	
	c. Total – Subtract line 1b from line 1a.....	1c.	955,892.
2.	Less: Cost of goods sold (from Schedule A-2, line 8)	2.	830,188.
3.	Gross profit – Subtract line 2 from line 1c	3.	125,704.
4.	a. Dividends	4a.	
	b. Gross Foreign Derived Intangible Income (see instructions) (include copy of federal Form 8993).....	4b.	
	c. Gross Global Intangible Low-Taxed Income (see instructions) (include copy of federal Form 8992)	4c.	
5.	Interest.....	5.	
6.	Gross rents	6.	
7.	Gross royalties.....	7.	
8.	Capital gain net income (include a copy of federal Schedule D).....	8.	
9.	Net gain or (loss) (from federal Form 4797, include a copy)	9.	
10.	Other income (include schedule(s))..... See Statement	10.	718.
11.	Total Income – Add lines 3 through 10.....	11.	126,422.
Deductions			
12.	Compensation of officers (from Schedule F)	12.	
13.	Salaries and wages (less employment credits)	13.	
14.	Repairs (Do not include capital expenditures)	14.	
15.	Bad debts	15.	23,733.
16.	Rents	16.	
17.	Taxes	17.	
18.	Interest.....	18.	
19.	Charitable contributions.....	19.	
20.	Depreciation (from federal Form 4562, include a copy) less depreciation claimed elsewhere on return.....	20.	
21.	Depletion	21.	
22.	Advertising.....	22.	
23.	Pension, profit-sharing plans, etc	23.	
24.	Employee benefit programs.....	24.	
25.	Reserved for future use.....	25.	
26.	Other deductions (include schedule)	26.	101,188.
27.	Total Deductions - Add lines 12 through 26.....	27.	124,921.
28.	Taxable income before federal net operating loss deductions and federal special deductions – Subtract line 27 from line 11 (Must agree with line 28, page 1 of the Unconsolidated federal Form 1120, or the appropriate line of any other federal corporate return filed) (See instructions)	28.	1,501.

PART II – NEW JERSEY MODIFICATIONS TO ENTIRE NET INCOME

1.	Taxable income/(loss) before federal net operating loss deductions and special deductions (from Schedule A, Part I, line 28).....	1.	1,501.
Additions			
2.	Reserved for future use	2.	
3.	Other federally exempt income not included in line 1 (see instructions)	3.	
4.	Interest on federal, state, municipal, and other obligations not included in line 1 (see instructions).....	4.	
5.	New Jersey State and other states taxes deducted in line 1 (see instructions)	5.	
6.	Related party interest addback (from Schedule G, Part I)	6.	
7.	Related party intangible expenses and costs addback (from Schedule G, Part II).....	7.	
8.	Reserved for future use	8.	
9.	Depreciation modification being added to income (from Schedule S)	9.	
10.	Other additions. Explain on separate rider (see instructions).....	10.	
11.	Taxable income/(loss) with additions – Add line 1 through line 10 and enter the total	11.	1,501.

NAME AS SHOWN ON RETURN

SILVER TOUCH TECHNOLOGIES INC.

FEDERAL ID NUMBER

45-4584052

Schedule A**CALCULATION OF NEW JERSEY TAXABLE NET INCOME (SEE INSTRUCTIONS)
EVERY CORPORATION MUST COMPLETE PARTS I, II AND III OF THIS SCHEDULE****Deductions**

12. Depreciation modification being subtracted from income (from Schedule S)	12.	
13. Previously Taxed Dividends (from Schedule PT)	13.	
14. a. Enter the I.R.C. § 250(a) deduction amount allowed federally for GILTI if GILTI income is included on line 1	14a.	
b. Enter the I.R.C. § 250(a) deduction amount allowed federally for FDII if FDII income is included on line 1	14b.	
c. Net GILTI previously taxed by New Jersey not deducted or excluded elsewhere	14c.	
15. I.R.C. § 78 Gross-up included in line 1 (do not include dividends that were excluded/deducted elsewhere)	15.	
16. Reserved for future use	16.	
17. a. Elimination of nonoperational activity (from Schedule O, Part I)	17a.	
b. Elimination of nonunitary partnership income/loss (from Schedule P-1, Part II, line 4)	17b.	
18. Other deductions. Explain on separate rider (see instructions)	18.	
19. Total deductions – Add line 12 through line 18 and enter the total	19.	

Taxable Net Income/(Loss) Calculation

20. Entire Net Income/(Loss) Subtotal – Subtract line 19 from line 11	20.	1,501.
21. Allocation factor from Schedule J (if all receipts were derived from only New Jersey sources, enter 1.000000)	21.	1.000000
22. Allocated entire net income/(loss) before net operating loss deductions and dividend exclusion – Multiply line 20 by line 21 and enter the result here (if zero or less, enter zero on line 29)	22.	1,501.
23. Prior year net operating loss (PNOL) deduction (from Form 500, Section A) (Amount entered cannot be more than amount on line 22)	23.	0.
24. Allocated entire net income before post allocation net operating loss deduction – Subtract line 23 from line 22 (If zero or less, enter zero here and on line 29)	24.	1,501.
25. Post allocation net operating loss (NOL) deduction (from Form 500, Section B) (Amount entered cannot be more than amount on line 24)	25.	0.
26. Allocated entire net income before allocated dividend exclusion – Subtract line 25 from line 24 (If zero or less, enter zero here and on line 29)	26.	1,501.
27. Allocated Dividend Exclusion (from Schedule R) (see instructions)	27.	0.
28. Reserved for future use	28.	
29. Taxable net income – Subtract line 27 from line 26	29.	1,501.

Did the taxpayer have any discharge of indebtedness excluded from federal taxable income in the current tax year pursuant to subparagraph (A), (B), or (C) of paragraph (1) of subsection (a) of IRC § 108 ☐ Yes. See instructions for Form 500. OR ☐ No.

PART III – COMPUTATION OF NEW JERSEY TAX BASE

1. Enter taxable net income from Schedule A, Part II, line 29	1.	1,501.
2. a. Investment Company – Enter 40% of line 1	2a.	
b. Real Estate Investment Trust – Enter 4% of line 1	2b.	
c. All Others – Enter the amount from line 1	2c.	1,501.
3. a. New Jersey Nonoperational Income (from Schedule O, Part III) (if zero or less, enter zero)	3a.	0.
b. Nonunitary Partnership Income (from Schedule P-1, Part II, line 5) (if zero or less, enter zero)	3b.	0.
4. Tax Base – Add lines 3a and 3b to line 2a, 2b, or 2c, whichever is applicable. Enter total here and on line 1, page 1	4.	1,501.

NAME AS SHOWN ON RETURN

SILVER TOUCH TECHNOLOGIES INC.

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45-4584052

Schedule A-2**COST OF GOODS SOLD (See Instructions)** All data must match amounts reported on federal Form 1125-A of the federal pro forma or federal return, whichever is applicable.

1. Inventory at beginning of year	1.	
2. Purchases.....	2.	830,188.
3. Cost of labor	3.	
4. Additional section 263A costs.....	4.	
5. Other costs (include schedule)	5.	
6. Total – Add lines 1 through 5	6.	830,188.
7. Inventory at end of year.....	7.	
8. Cost of goods sold – Subtract line 7 from line 6. Include here and on Schedule A, Part I, line 2.....	8.	830,188.

Schedule A-3**SUMMARY OF TAX CREDITS (See Instructions)****PART I – Tax Credits Used Against Liability**

1. New Jobs Investment Tax Credit from Form 304	1.	
2. Angel Investor Tax Credit from Form 321.....	2.	
3. Business Employment Incentive Program Tax Credit from Form 324	3.	
4. EITHER: a) Urban Enterprise Zone Employee Tax Credit from Form 300	4.	
OR b) Urban Enterprise Zone Investment Tax Credit from Form 301.....		
5. Redevelopment Authority Project Tax Credit from Form 302	5.	
6. Manufacturing Equipment and Employment Investment Tax Credit from Form 305	6.	
7. Research and Development Tax Credit from Form 306	7.	
8. Neighborhood Revitalization State Tax Credit from Form 311.....	8.	
9. Effluent Equipment Tax Credit from Form 312	9.	
10. Economic Recovery Tax Credit from Form 313.....	10.	
11. AMA Tax Credit from Form 315	11.	
12. Business Retention and Relocation Tax Credit from Form 316.....	12.	
13. Sheltered Workshop Tax Credit from Form 317	13.	
14. Film Production Tax Credit from Form 318.....	14.	
15. Urban Transit Hub Tax Credit from Form 319.....	15.	
16. Grow NJ Tax Credit from Form 320.....	16.	
17. Wind Energy Facility from Form 322	17.	
18. Residential Economic Redevelopment and Growth Tax Credit from Form 323	18.	
19. Public Infrastructure Tax Credit from Form 325.....	19.	
20. Reserved for future use.....	20.	
21. Film and Digital Media Tax Credit from Form 327	21.	
22. Tax Credit for Employers of Employees With Impairments from Form 328.....	22.	
23. Pass-Through Business Alternative Income Tax Credit from Form 329	23.	
24. Apprenticeship Program Tax Credit from Form 330	24.	
25. Tax Credit for Employer of Organ/Bone Marrow Donor from Form 331	25.	
26. Tiered Subsidiary Dividend Pyramid Tax Credit from Form 332.....	26.	
27. Other Tax Credit (see instructions).....	27.	
28. Total tax credits – Add lines 1 through 27. Enter here and on page 1, line 3	28.	

PART II – Refundable Tax Credits

1. Refundable portion of New Jobs Investment Tax Credit from Form 304	1.	
2. Refundable portion of Angel Investor Tax Credit from Form 321.....	2.	
3. Refundable portion of Business Employment Incentive Program Tax Credit from Form 324...	3.	
4. Other Tax Credit to be refunded	4.	
5. Total amount of tax credits to be refunded. Enter here and on page 1, line 10c.....	5.	

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SILVER TOUCH TECHNOLOGIES INC.

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Schedule A-4**SUMMARY SCHEDULE (See Instructions)**

PNOL Deduction and Carryover 1. Form 500, Section A, line 5 minus line 7 ...	1.	0.	Net Operational Income Information 8. Schedule O, Part III,	8.	0.
NOL Deduction and Carryover 2. Form 500, Section B, line 6 minus line 8 ...	2.	0.	Schedule A-GR Information 9. Schedule A-GR, line 6	9.	955,892.
Interest and Intangible Costs and Expenses 3. Schedule G, Part I, line b.....	3.	0.	Dividend Exclusion Information 10. Schedule R, line 7	10.	0.
4. Schedule G, Part II, line b.....	4.	0.	11. Schedule R, line 9	11.	0.
Schedule J Information 5. Schedule J, line 1f	5.	0.	12. Schedule R, line 11	12.	0.
6. Schedule J, line 1g	6.	0.	Schedule P Information 13. Schedule P, Part III, line 1	13.	0.
7. Schedule J, line 1h	7.	0.000000	14. Schedule P, Part III, line 2	14.	0.

Schedule A-GR**COMPUTATION OF NEW JERSEY GROSS RECEIPTS AND MINIMUM TAX (See Instructions)**

Complete this schedule only if the amount reported on page 1, line 4 is less than \$2,000.

1. Enter sales of tangible personal property shipped to points within New Jersey	1.	
2. Enter services if the benefit of the service is received in New Jersey	2.	
3. Enter rentals of property situated in New Jersey	3.	
4. Enter royalties for the use in New Jersey of patents, copyrights, and trademarks	4.	
5. Enter all other business receipts earned in New Jersey	5.	955,892.
6. Total New Jersey Gross Receipts	6.	955,892.
7. Enter minimum tax per instructions. Include here and on page 1, line 6	7.	1,500.

REV 04/15/21 PRO

NAME AS SHOWN ON RETURN
SILVER TOUCH TECHNOLOGIES INC.

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45-4584052

Schedule C

RECONCILIATION OF INCOME PER BOOKS WITH INCOME PER RETURN (See Instructions)

Data must match amounts reported on Schedule M-1 of the federal pro forma or federal return, whichever is applicable.

If the taxpayer completed federal Schedule M-3 (Form 1120 /1120-F), include a copy.

1. Net income per books	1,186.	7. Income recorded on books this year not included in this return (itemize)	
2. Federal income tax per books	315.	a. Tax-exempt interest \$_____	
3. Excess of capital losses over capital gains		b. _____	
4. Income subject to tax not recorded on books this year (itemize)		c. _____	
5. Expenses recorded on books this year not deducted in this return (itemize)		8. Deductions in this tax return not charged against book income this year (itemize)	
a. Depreciation \$_____		a. Depreciation \$_____	
b. Contributions Carryover \$_____		b. Contributions Carryover \$_____	
c. Other (itemize) \$_____			
6. Total of lines 1 through 5	1,501.	9. Total of lines 7 and 8	
		10. Income (Schedule A, Part I, line 28) – line 6 less 9	1,501.

Schedule C-1

ANALYSIS OF UNAPPROPRIATED RETAINED EARNINGS PER BOOKS (See Instructions)

Data must match amounts reported on Schedule M-2 of the federal pro forma or federal return, whichever is applicable.

1. Balance at beginning of year	14,996.	5. Distributions	
2. Net income per books	1,186.	a. Cash \$_____	
3. Other increases (itemize)		b. Stock \$_____	
		c. Property \$_____	
		6. Other decreases (itemize)	
		7. Total of lines 5 and 6	
4. Total of lines 1, 2, and 3	16,182.	8. Balance end of year (line 4 less 7)	16,182.

Schedule F

CORPORATE OFFICERS – GENERAL INFORMATION AND COMPENSATION (See Instructions)

Data must match amounts reported on federal Form 1125-E of the federal pro forma or federal return, whichever is applicable.

(1) Name and Current Address of Officer	(2) Social Security Number	(3) Title	(4) Dates Employed in this position		(5) Percentage of Corporation Stock Owned		(6) Amount of Compensation
			From	To	Common	Preferred	
a. Total compensation of officers							
b. Less: Compensation of officers claimed elsewhere on the return							
c. Balance of compensation of officers (include here and on Schedule A, Part I, line 12)							

NAME AS SHOWN ON RETURN SILVER TOUCH TECHNOLOGIES INC.	FEDERAL ID NUMBER 45-4584052
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Schedule G – Part I INTEREST (See Instructions)

Was interest paid, accrued, or incurred to a related member(s) deducted from entire net income?

☐ Yes. Fill out the following schedule. ☒ No.

Name of Related Member	Federal ID Number	Relationship to Taxpayer	Amounts
a. Total amount of interest deducted.....			
b. Subtract: Exceptions (see instructions)			()
c. Related Party Interest Expenses Disallowed for New Jersey Purposes (include here and on Schedule A, Part II, line 6)			

Schedule G – Part II INTEREST EXPENSES AND COSTS AND INTANGIBLE EXPENSES AND COSTS (See Instr.)Were intangible expenses and costs, including intangible interest expenses and costs, paid, accrued or incurred to related members, deducted from entire net income? ☐ Yes. Fill out the following schedule. ☒ No.

Name of Related Member	Federal ID Number	Relationship to Taxpayer	Type of Intangible Expense Deducted	Amounts
a. Total amount of intangible expenses and costs deducted				
b. Subtract: Exceptions (see instructions)				()
c. Related Party Intangible Expenses and Costs addback (include here and on Schedule A, Part II, line 7)				

NOTE: For tax years beginning on or after January 1, 2018, the treaty exceptions have been limited pursuant to P.L. 2018, c. 48. See Schedule G-2 instructions for more information.

NAME AS SHOWN ON RETURN

SILVER TOUCH TECHNOLOGIES INC.

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Schedule H**TAXES (See Instructions)**

Include all taxes paid or accrued during the accounting period wherever deducted on Schedule A.

	(a) Corporation Franchise Business Taxes	(b) Corporation Business/ Occupancy Taxes	(c) Property Taxes	(d) U.C.C. or Payroll Taxes	(e) Other Taxes/ Licenses (include schedule)	(f) Total
1. New Jersey Taxes						
2. Other States & U.S. Possessions						
3. City and Local Taxes						
4. Taxes Paid to Foreign Countries*						
5. Total						
6. Combine lines 5(a) and 5(b)						
7. Sales & Use Taxes Paid by a Utility Vendor						
8. Add lines 6 and 7						
9. Federal Taxes						
10. Total (Combine line 5 and line 9)						

* Include on line 4 taxes paid or accrued to any foreign country, state, province, territory, or subdivision thereof.

Schedule J**COMPUTATION OF ALLOCATION FACTOR (See Instructions)**

All taxpayers, regardless of entire net income reported on Schedule A, Part II, line 20, Form CBT-100, must complete Schedule J. This schedule can be omitted if the taxpayer does not have receipts outside New Jersey, in which case the allocation factor will be 100% (1.000000).

For tax years ending on and after July 31, 2019, services are sourced based on market sourcing not cost of performance.

1. Receipts:	AMOUNTS (omit cents)
a. From sales of tangible personal property shipped to points within New Jersey	a.
b. From services if the benefit of the service is received in New Jersey	b.
c. From rentals of property situated in New Jersey	c.
d. From royalties for the use in New Jersey of patents, copyrights, and trademarks	d.
e. All other business receipts earned in New Jersey (See instructions)	e.
f. Total New Jersey receipts (Total of lines 1a to 1e, inclusive)	f.
g. Total receipts from all sales, services, rentals, royalties, and other business transactions everywhere	g.
h. Allocation Factor (Percentage in New Jersey (line 1f) divided by line 1g). Carry the fraction 6 decimal places. Do not express as a percent. Include here and on Schedule A, Part II, line 21	h.

NOTE: Include the GILTI and the receipts attributable to the FDII, net of the respective allowable IRC §250(a) deductions, in the allocation factor. The net amount of GILTI (i.e., the GILTI reduced by the I.R.C. § 250(a) GILTI deduction) and the net FDII (i.e., the receipts attributable to the FDII reduced by the I.R.C. § 250(a) FDII deduction) amounts are included in the numerator (if applicable) and the denominator.

NAME AS SHOWN ON RETURN

SILVER TOUCH TECHNOLOGIES INC.

FEDERAL ID NUMBER

45-4584052

Schedule P-1**PARTNERSHIP INVESTMENT ANALYSIS (See Instructions)****Part I – Partnership Information**

(1) Partnership, LLC, or Other Entity Information		(2) Date and State where Organized	(3) Percentage of Ownership	(4)		(5) Tax Accounting Method		(6) New Jersey Nexus		(7) Tax Payments Made on Behalf of Taxpayer by Partnerships
Name	Federal ID Number			Limited Partner	General Partner	Flow Through	Separate Accounting*	Yes	No	

Enter total of column 7 here and on page 1, line 10b.....

*Taxpayers using a separate accounting method must complete Part II.

Part II – Separate Accounting of Nonunitary Partnership Income

(1) Nonunitary Partnership's Federal ID Number	(2) Distributive Share of Income/Loss from Nonunitary Partnership	(3) Partnership's Allocation Factor (See Instructions)	(4) Taxpayer's Share of Income Allocated to New Jersey (Multiply Column 2 by Column 3)
1.			
2.			
3.			
4.	Total column 2. Enter amount here and Schedule A, Part II, line 17b		
5.	Total column 4. Enter amount here and Schedule A, Part III, line 3b		

If additional space is needed, include a rider.

Schedule PC**PER CAPITA LICENSED PROFESSIONAL FEE (See Instructions)**

1. Is the corporation a Professional Corporations (PC) formed pursuant to N.J.S.A. 14A:17-1 et seq. or any similar law from a possession or territory of the United States, a state, or political subdivision thereof? ☐ Yes. This schedule must be included with the return. ☐ No.
2. How many licensed professionals are owners, shareholders, and/or employees from this Professional Corporation (PC) as of the first day of the privilege period? ☐ 2 or less, complete Part I. ☐ More than 2, complete Part I and Part II (if additional space is needed, include a rider).

Part I – Provide the following information for each of the licensed professionals in the PC. Include a rider if additional space is needed.

Name	Address	FID/SSN
1.		
2.		
3.		
4.		
5.		

Part II – Complete only if there are more than 2 licensed professional listed above.

1. Enter number of resident and nonresident professionals with physical nexus with New Jersey _____ x \$150	1.	
2. Enter number of nonresident professionals without physical nexus with New Jersey _____ x \$150 x allocation factor of the PC	2.	
3. Total Fee Due – Add line 1 and line 2.....	3.	
4. Installment Payment – 50% of line 3.....	4.	
5. Total Fee Due (line 3 plus line 4).....	5.	
6. Less prior year 50% installment payment and credit (if applicable)	6.	()
7. Balance of Fee Due (line 5 minus line 6). If the result is zero or more, include the amount here and on Form CBT-100, page 1, line 8	7.	
8. Credit to next year's Professional Corporation Fee (if line 7 is less than zero, enter the amount here)	8.	

NAME AS SHOWN ON RETURN
SILVER TOUCH TECHNOLOGIES INC.

FEDERAL ID NUMBER
45-4584052

Schedule S – Part I DEPRECIATION AND SAFE HARBOR LEASING (See Instructions)

1. IRC § 179 Deduction	1.	
2. Special Depreciation Allowance – for qualified property placed in service during the tax year	2.	
3. MACRS	3.	
4. ACRS	4.	
5. Other Depreciation	5.	
6. Listed Property	6.	
7. Total depreciation claimed in arriving at Schedule A, Part II, line 1	7.	

Include Federal Form 4562 and Federal Depreciation Worksheet

Modification at Schedule A, Part II, line 9 or line 12 – Depreciation and Certain Safe Harbor Lease Transactions

Additions

8. Amounts from lines 3, 4, 5, and 6 above	8.	
9. Special Depreciation Allowance from line 2 above	9.	
10. Distributive share of the special depreciation allowance from a partnership	10.	
11. Distributive share of ACRS, MACRS, and other depreciation from a partnership	11.	
12. Deductions on federal return resulting from an election made pursuant to IRC § 168(f)(8) exclusive of elections made with respect to mass commuting vehicles		
a. Interest	12a.	
b. Rent	12b.	
c. Amortization of Transactional Costs	12c.	
d. Other Deductions	12d.	
13. IRC § 179 depreciation in excess of New Jersey allowable deduction	13.	
14. Other additions (include an explanation/reconciliation)	14.	
15. Total lines 8 through 14	15.	

Deductions

16. New Jersey depreciation	16.	
17. Recomputed depreciation attributable to distributive share of recovery property from a partnership	17.	
18. Any income included in the return with respect to property solely as a result of an IRC § 168(f)(8) election ..	18.	
19. The lessee/user should enter the amount of depreciation that would have been allowable under the Internal Revenue Code on December 31, 1980, had there been no safe harbor lease election	19.	
20. Excess of accumulated ACRS, MACRS, or bonus depreciation over accumulated New Jersey depreciation on physical disposal of recovery property (include computations)	20.	
21. Other deductions (include an explanation/reconciliation)	21.	
22. Total lines 16 through 21	22.	
23. ADJUSTMENT – Subtract line 22 from line 15 and enter the result. (If line 23 is positive, enter at Schedule A, Part II, line 9. If line 23 is negative, enter as a positive number at Schedule A, Part II, line 12) ..	23.	

Schedule S – Part II NEW JERSEY DEPRECIATION FOR GAS, ELECTRIC, AND GAS AND ELECTRIC PUBLIC UTILITIES (See Instructions)

1. Total depreciation claimed in arriving at Schedule A, Part II, line 1	1.	
2. Federal depreciation for assets placed in service after January 1, 1998	2.	
3. Net – Subtract line 2 from line 1	3.	
4. New Jersey depreciation allowable on the Single Asset Account (Assets placed in service prior to January 1, 1998)		
a. Total adjusted federal depreciable basis as of December 31, 1997	4a.	
b. Excess book depreciable basis over federal tax basis as of December 31, 1997	4b.	
c. Less accumulated federal basis for all Single Asset Account property sold, retired or disposed of to date...	4c.	
d. Total (line 4a plus line 4b less line 4c)	4d.	
5. New Jersey Depreciation – Divide line 4d by 30	5.	
6. New Jersey Adjustment		
a. Depreciation adjustment for assets placed in service prior to Jan. 1, 1998 – Subtract line 5 from line 3 ...	6a.	
b. Special bonus depreciation adjustment from Schedule S, Part I, line 23 (see instructions)	6b.	
7. Total Adjustment – Add lines 6a and 6b and enter the result. (If line 7 is positive, enter at Schedule A, Part II, line 9. If line 7 is negative, enter as a positive number at Schedule A, Part II, line 12)	7.	

**Form CBT-100
Schedule B**

Other Assets

2020

Name SILVER TOUCH TECHNOLOGIES INC.	Employer Identification No. 45-4584052
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All other intangible personal property:	Beginning of tax year	End of tax year
DUTIES & TAXES	1,048.	0.
PAYROLL TAXES	2,486.	3,087.
RENT DEPOSIT	300.	300.
LOAN & ADVANCES	500.	0.
Totals to Form CBT-100, Schedule B, line 12. ▶	4,334.	3,387.

All other tangible personalty (net):	Beginning of tax year	End of tax year
Totals to Form CBT-100, Schedule B, line 18 ▶		

**Form CBT-100
Schedule B**

Other Liabilities and Equity

2020

Name SILVER TOUCH TECHNOLOGIES INC.	Employer Identification No. 45-4584052
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Mortgages, notes, bonds payable in less than 1 year:	Beginning of tax year	End of tax year
Totals to Form CBT-100, Schedule B, line 22 ▶		

Other current liabilities:	Beginning of tax year	End of tax year
INCOME TAX PAYABLE	295.	315.
CBT PAYABLE	526.	
CUSTOMER ADVANCE	80,524.	36,410.
DUTIES & TAXES	615.	817.
PROVISION EXP		3,400.
DEPOSIT		100.
Totals to Form CBT-100, Schedule B, line 23 ▶	81,960.	41,042.

Mortgages, notes, bonds payable in 1 year or more:	Beginning of tax year	End of tax year
Totals to Form CBT-100, Schedule B, line 25 ▶		

	Beginning of tax year	End of tax year
Other liabilities:		
Totals to Form CBT-100, Schedule B, line 26 ▶		
Retained earnings – appropriated:	Beginning of tax year	End of tax year
Totals to Form CBT-100, Schedule B, line 29 ▶		
Adjustments to shareholders' equity:	Beginning of tax year	End of tax year
Totals to Form CBT-100, Schedule B, line 31 ▶		

Smart Worksheets from your 2020 New Jersey Corporation Tax Return

SMART WORKSHEET FOR: CBT-100: Corporation Business Return

Payments and Credits Smart Worksheet	
A	Estimated tax payments made with Form CBT-150 525 .
B	Extension payment with Form CBT-200-T
C	Overpayment from prior year return
D	Installment payment made with prior year return
Amended Return Smart Worksheet (Payment with Original Return)	
E	Amount paid with a previously filed return (Amended Return Only)

Additional information from your 2020 New Jersey Corporation Tax Return**CBT-100: Corporation Business Return****Sch A, Other Income Statement****Continuation Statement**

Desc	Amt
GOOGLE DES	118.
OTHER INCOME	600.
Total	718.

CBT-100: Corporation Business Return**Sch A, Other Deductions Statement****Continuation Statement**

Desc	Amt
BANK CHARGES	4,819.
DISCOUNTS	33,020.
INSURANCE	756.
LEGAL AND PROFESSIONAL	2,420.
CONSULTING FOR SOLUTION DEVELOPMENT	50,864.
MARKETING EXPS.	1,948.
MEMBERSHIP FEES	69.
PROFESSIONAL FEES	2,000.
PAYPAL CHARGES	581.
SAP SOFTWARE	4,211.
TRAVELLING EXP	500.
Total	101,188.