



DIS Case Number: 18-0388-EL-AGG

Section A: Application Information

A-1. Provider type:

☐ Power Broker ☒ Aggregator ☐ Retail Generation Provider ☐ Power Marketer

A-2. Applicant's legal name and contact information.

Legal Name: YNJ Management LLC **Country:** United States
Phone: 6143942687 **Extension (if applicable):** **Street:** 4055 Jackpot Rd.
Website (if any): www.ynjmanagement.com **City:** Grove City **Province/State:**
Postal Code: 43123

A-3. Names and contact information under which the applicant will do business in Ohio

Provide the names and contact information the business entity will use for business in Ohio. This does not have to be an Ohio address and may be the same contact information given in A-2.

Name	Type	Address	Active?	Proof
YNJ Energy	DBA	4055 Jackpot RD Grove City, OH 43123	No	File

A-4. Names under which the applicant does business in North America

Provide all business names the applicant uses in North America, including the names provided in A-2 and A-3.

Name	Type	Address	Active?	Proof
YNJ Energy	DBA	4055 Jackpot RD Grove City, OH 43123	No	File

A-5. Contact person for regulatory matters



Public Utilities Commission

Nash Patel
4055 Jackpot Rd
Grove City, OH 43123
US
ynjmanagement@yahoo.com
6143942687

A-6. Contact person for PUCO Staff use in investigating consumer complaints

Nash Patel
4055 Jackpot Rd
Grove City, OH 43123
US
ynjmanagement@yahoo.com
6143942687

A-7. Applicant's address and toll-free number for customer service and complaints

Phone: 6143942687	Extension (if applicable):	Country: United States
Fax: 614-871-0740	Extension (if applicable):	Street: 4055 Jackpot RD
Email: ynjmanagement@gmail.com	City: Grove City	Province/State: OH
	Postal Code: 43123	

A-8. Applicant's federal employer identification number

26-3257732

A-9. Applicant's form of ownership

Form of ownership: Limited Liability Company (LLC)

A-10. Identify current or proposed service areas

Identify each service area in which the applicant is currently providing service or intends to provide service and identify each customer class that the applicant is currently serving or intends to serve.

Service area selection

Duke Energy Ohio

FirstEnergy - Ohio Edison
AES Ohio
American Electric Power (AEP)

Class of customer selection

Commercial
Industrial

A-11. Start date

Indicate the approximate start date the applicant began/will begin offering services: 01-01-2020

A-12. Principal officers, directors, and partners

Please provide all contacts that should be listed as an officer, director or partner.

Name	Email	Title	Address
Nash Patel	ynjmanagement@yahoo.com	Manager	4055 Jackpot Rd Grove City, OH 43123 US

A-13. Company history

As active CEO of YNJ MANAGEMENT, LLC. I have now been in business for 14 years. Our Hospitality book of business grew from 1 hotel to 4. Expectations were set slightly higher, but the last two years were unique. We have diversified our business model slightly by putting new ideas and new thoughts that new generation will like and age well. We were thinking on a preparing good budget plan for upcoming years and also hire a Operations Manager that will overlook all the departments. On August 2017, we promoted Mr. Patel as our fill-time Operations manager. He has worked with our company more than 2 years at different position. Looking back at the business we've done in the last two years, we're pleased with the breakthroughs we've made in Increase in Customer service, Occupancy and ADR. Now that we've acquired an asset to manage operations, I will be able to allocate more hours towards business development. In addition to renewing and growing our current book of business, we'd like to build our referral partner network since we have the backend operations to support it. Now that we have the backend operations to manage an influx of leads, and deal flow, we anticipate a 30% growth in our referral partner network. Towards the latter part of 2020, we'd like to eventually build a small sales organization in Ohio, but we want to make sure we're 100% ready with the financial responsibilities and overhead. Over the course of the next couple



of months, we'll begin the stages of developing an equitable compensation packages for 3-4 candidates that would meet the qualifications YNJ is looking for. The goal would be to begin the recruiting and hiring process in Fall, 2021. Otherwise, our next target start would be Spring, 2021. Assuming we hit either of our starts in building a sales organization, a bulk of time and resources will be reinvested between client retention and sustaining the growth of a sales organization in 2021. Additionally, reducing our overhead by with budget plans over the next two years will be a top priority. Ultimately, I feel that the company finally has the appropriate assets in place to grow our organization in a cost-effective approach.

A-14. Secretary of State

Secretary of State Link:

Section B: Applicant Managerial Capability and Experience

B-1. Jurisdiction of operations

List all jurisdictions in which the applicant or any affiliated interest of the applicant is certified, licensed, registered or otherwise authorized to provide retail natural gas service or retail/wholesale electric service as of the date of filing the application..

Jurisdiction of Operation: OHIO

B-2. Experience and plans

Describe the applicant's experience in providing the service(s) for which it is applying (e.g., number and type of customers served, utility service areas, amount of load, etc.). Include the plan for contracting with customers, providing contracted services, providing billing statements and responding to customer inquiries and complaints in accordance with Commission rules adopted pursuant to Sections 4928.10 and/or 4929.22 of the Ohio Revised Code.

Application Experience and Plan Description: As active CEO of YNJ MANAGEMENT, LLC. I have now been in business for 14 years. Our Hospitality book of business grew from 1 hotel to 4. Expectations were set slightly higher, but the last two years were unique. We have diversified our business model slightly by putting new ideas and new thoughts that new generation will like and age well. We were thinking on a preparing good budget plan for upcoming years and also hire a Operations Manager that will overlook all the departments. On August 2017, we promoted Mr. Patel as our full-time Operations manager. He has worked with our company more than 2 years at different position. Looking back at the business we've done in the last two years, we're pleased with the breakthroughs we've made in Increase in Customer service, Occupancy and ADR. Now that we've acquired an asset to manage operations, I will be able to allocate more hours towards business development. In addition to renewing and growing our



current book of business, we'd like to build our referral partner network since we have the backend operations to support it. Now that we have the backend operations to manage an influx of leads, and deal flow, we anticipate a 30% growth in our referral partner network. Towards the latter part of 2020, we'd like to eventually build a small sales organization in Ohio, but we want to make sure we're 100% ready with the financial responsibilities and overhead. Over the course of the next couple of months, we'll begin the stages of developing an equitable compensation packages for 3-4 candidates that would meet the qualifications YNJ is looking for. The goal would be to begin the recruiting and hiring process in Fall, 2021. Otherwise, our next target start would be Spring, 2021. Assuming we hit either of our starts in building a sales organization, a bulk of time and resources will be reinvested between client retention and sustaining the growth of a sales organization in 2021. Additionally, reducing our overhead by with budget plans over the next two years will be a top priority. Ultimately, I feel that the company finally has the appropriate assets in place to grow our organization in a cost-effective approach.

B-3. Disclosure of liabilities and investigations

For the applicant, affiliate, predecessor of the applicant, or any principal officer of the applicant, describe all existing, pending or past rulings, judgments, findings, contingent liabilities, revocation of authority, regulatory investigations, judicial actions, or other formal or informal notices of violations, or any other matter related to competitive services in Ohio or equivalent services in another jurisdiction..

Liability and Investigations Disclosures: None

B-4. Disclosure of consumer protection violations

Has the applicant, affiliate, predecessor of the applicant, or any principal officer of the applicant been convicted or held liable for fraud or for violation of any consumer protection or antitrust laws within the past five years?

No

B-5. Disclosure of certification, denial, curtailment, suspension or revocation

Has the applicant, affiliate, or a predecessor of the applicant had any certification, license, or application to provide retail natural gas or retail/wholesale electric service denied, curtailed, suspended, revoked, or cancelled or been terminated or suspended from any of Ohio's Natural Gas or Electric Utility's Choice programs within the past two years?



No

Section C: Applicant Financial Capability and Experience

C-1. Financial reporting

Provide a current link to the most recent Form 10-K filed with the Securities and Exchange Commission (SEC) or upload the form. If the applicant does not have a Form 10-K, submit the parent company's Form 10-K. If neither the applicant nor its parent is required to file Form 10-K, state that the applicant is not required to make such filings with the SEC and provide an explanation as to why it is not required.

Does not apply

C-2. Financial statements

Provide copies of the applicant's two most recent years of audited financial statements, including a balance sheet, income statement, and cash flow statement. If audited financial statements are not available, provide officer certified financial statements. If the applicant has not been in business long enough to satisfy this requirement, provide audited or officer certified financial statements covering the life of the business. If the applicant does not have a balance sheet, income statement, and cash flow statement, the applicant may provide a copy of its two most recent years of tax returns with **social security numbers and bank account numbers redacted**.

If the applicant is unable to meet the requirement for two years of financial statements, the Staff reviewer may request additional financial information.

File(s) attached

C-3. Forecasted financial statements

Provide two years of forecasted income statements **based solely on the applicant's anticipated business activities in the state of Ohio**.

Include the following information with the forecast: a list of assumptions used to generate the forecast; a statement indicating that the forecast is based solely on Ohio business activities



only; and the name, address, email address, and telephone number of the preparer of the forecast.

The forecast may be in one of two acceptable formats: 1) an annual format that includes the current year and the two years succeeding the current year; or 2) a monthly format showing 24 consecutive months following the month of filing this application broken down into two 12-month periods with totals for revenues, expenses, and projected net incomes for both periods. Please show revenues, expenses, and net income (revenues minus total expenses) that is expected to be earned and incurred in **business activities only in the state of Ohio** for those periods.

If the applicant is filing for both an electric certificate and a natural gas certificate, please provide a separate and distinct forecast for revenues and expenses representing Ohio electric business activities in the application for the electric certificate and another forecast representing Ohio natural gas business activities in the application for the natural gas certificate.

File(s) attached

C-4. Credit rating

Provide a credit opinion disclosing the applicant's credit rating as reported by at least one of the following ratings agencies: Moody's Investors Service, Standard & Poor's Financial Services, Fitch Ratings or the National Association of Insurance Commissioners. If the applicant does not have its own credit ratings, substitute the credit ratings of a parent or an affiliate organization and submit a statement signed by a principal officer of the applicant's parent or affiliate organization that guarantees the obligations of the applicant. If an applicant or its parent does not have such a credit rating, enter 'Not Rated'.

This does not apply

C-5. Credit report

Provide a copy of the applicant's credit report from Experian, Equifax, TransUnion, Dun and Bradstreet or a similar credit reporting organization. If the applicant is a newly formed entity with no credit report, then provide a personal credit report for the principal owner of the entity seeking certification. At a minimum, the credit report must show summary information and an overall credit score. **Bank/credit account numbers and highly sensitive identification information must be redacted.** If the applicant provides an acceptable credit rating(s) in response to C-4, then the applicant may select 'This does not apply' and provide a response in the box below stating that a credit rating(s) was provided in response to C-4.

File(s) attached



C-6. Bankruptcy information

Within the previous 24 months, have any of the following filed for reorganization, protection from creditors or any other form of bankruptcy?

- Applicant
- Parent company of the applicant
- Affiliate company that guarantees the financial obligations of the applicant
- Any owner or officer of the applicant

No

C-7. Merger information

Is the applicant currently involved in any dissolution, merger or acquisition activity, or otherwise participated in such activities within the previous 24 months?

No

C-8. Corporate structure

Provide a graphical depiction of the applicant's corporate structure. Do not provide an internal organizational chart. The graphical depiction should include all parent holding companies, subsidiaries and affiliates as well as a list of all affiliate and subsidiary companies that supply retail or wholesale electricity or natural gas to customers in North America. If the applicant is a stand-alone entity, then no graphical depiction is required, and the applicant may respond by stating that it is a stand-alone entity with no affiliate or subsidiary companies.

Stand-alone entity with no affiliate or subsidiary companies

Section D: Applicant Technical Capacity

D-1. Operations



Operations Description: We are targeting Hospitality business as bulk, we are under communication with national level franchise. Over operation include 365 - 24/7.

D-2. Operations Expertise & Key Technical Personnel

Given the operational nature of the applicant's business, provide evidence of the applicant's experience and technical expertise in performing such operations. Include the names, titles, e-mail addresses, and background of key personnel involved in the operations of the applicant's business.

Operations Expertise & Personnel Description: As active CEO of YNJ MANAGEMENT, LLC. I have now been in business for 14 years. Our Hospitality book of business grew from to 1 hotel to 4. Expectations were set slightly higher, but the last two years were unique. We have diversified our business model slightly by putting new ideas and new thoughts that new generation will like and age well. We were thinking on a preparing good budget plan for upcoming years and also hire a Operations Manager that will overlook all the departments. On August 2017, we promoted Mr. Patel as our fill-time Operations manager. He has worked with our company more than 2 years at different position. Looking back at the business we've done in the last two years, we're pleased with the breakthroughs we've made in Increase in Customer service, Occupancy and ADR. Now that we've acquired an asset to manage operations, I will be able to allocate more hours towards business development. In addition to renewing and growing our current book of business, we'd like to build our referral partner network since we have the backend operations to support it. Now that we have the backend operations to manage an influx of leads, and deal flow, we anticipate a 30% growth in our referral partner network. Towards the latter part of 2020, we'd like to eventually build a small sales organization in Ohio, but we want to make sure we're 100% ready with the financial responsibilities and overhead. Over the course of the next couple of months, we'll begin the stages of developing an equitable compensation packages for 3-4 candidates that would meet the qualifications YNJ is looking for. The goal would be to begin the recruiting and hiring process in Fall, 2021. Otherwise, our next target start would be Spring, 2021. Assuming we hit either of our starts in building a sales organization, a bulk of time and resources will be reinvested between client retention and sustaining the growth of a sales organization in 2020. Additionally, reducing our overhead by with budget plans over the next two years will be a top priority. Ultimately, I feel that the company finally has the appropriate assets in place to grow our organization in a cost-effective approach.



Public Utilities
Commission

Application Attachments



DATE	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
11/18/2022	202232203448	TRADE NAME RENEWAL (RNR)	25.00				0

Receipt

This is not a bill. Please do not remit payment.

**RED ROOF INN GROVE CITY
4055 JACKPOT RD
GROVE CITY, OH, 43123**

STATE OF OHIO CERTIFICATE

**Ohio Secretary of State, Frank LaRose
4153710**

It is hereby certified that the Secretary of State of Ohio has custody of the business records for

YNJ ENERGY

and, that said business records show the filing and recording of:

Document(s)

TRADE NAME RENEWAL

Document No(s):

202232203448

Effective Date: 11/18/2022



United States of America
State of Ohio
Office of the Secretary of State

Witness my hand and the seal of the
Secretary of State at Columbus, Ohio
this 18th day of November, A.D.
2022.

Ohio Secretary of State

Form 523A Prescribed by:



Date Electronically Filed: 11/18/2022

Toll Free: 877.767.3453 | Central Ohio: 614.466.3910

OhioSoS.gov | business@OhioSoS.govFile online or for more information: OhioBusinessCentral.gov

Renewal of Trade Name or Fictitious Name Registration
Filing Fee: \$25
Form Must Be Typed

(CHECK ONLY ONE (1) BOX)☒ Renewal of Trade Name (172-RNR)

Reg. No. 4153710

☐ Renewal of Fictitious Name (159-NFR)

Reg. No.

Trade Name or Fictitious Name to be Renewed

YNJ ENERGY

Name of Registrant Renewing Name

YNJ MANAGEMENT, LLC

Registrant's Entity Number (if registered with Ohio Secretary of State): 1799430

Complete if the registrant is a general partnership and has not provided an entity number above. Registration numbers are assigned to partnerships that have filed a statement under Ohio Revised Code Chapter 1776 OR complete if a partner was listed on the original application and that person/entity is no longer a partner.

Provide the name and address of at least one general partner.

Name**Address**

NOTE: Pursuant to OAG 89-081, if a general partner is a foreign corporation/limited liability company, it must be licensed to transact business in Ohio; if a general partner is a foreign corporation/limited liability company licensed in Ohio under an assumed name, please provide the assumed name and the name as registered in its jurisdiction of formation.

By signing and submitting this form to the Ohio Secretary of State, the undersigned hereby certifies that he or she has the requisite authority to execute this document.

Required

Renewal must be signed by the registrant or authorized representative of the registrant.

If authorized representative is an individual, then they must sign in the "signature" box and print their name in the "Print Name" box.

If authorized representative is a business entity, not an individual, then please print the business name in the "signature" box, an authorized representative of the business entity must sign in the "By" box and print their name in the "Print Name" box.

Signature

By (if applicable)

Print Name

Signature

By (if applicable)

Print Name

AllStates CPA

A Rammohan & Associates Company

6660 N. High Street, Suite 1-H
Worthington, OH 43085
Phone: (614) 854-0850
Fax: (614) 854-0852
www.allstatescpa.com

Personal Financial Statement of Nishitkumar Patel as of Oct 19th, 2022

I have reviewed the accompanying statement of financial condition of as of Oct 19th 2022 and the related notes to the financial statement. A review includes primarily applying analytical procedures to Nishitkumar H Patel financial data and making inquiries of Nishitkumar H Patel. A review is substantially less in scope than an audit, the objective of which is the expression of an opinion regarding the financial statement as a whole. Accordingly, I do not express such an opinion.

Responsibility for the Financial Statement

Nishitkumar H Patel is responsible for the preparation and fair presentation of this financial statement in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of a financial statement that is free from material misstatement whether due to fraud or error.

Accountant's Responsibility

My responsibility is to conduct the review engagement in accordance with Statements on Standards for Accounting and Review Services promulgated by the Accounting and Review Services Committee of the AICPA. Those standards require me to perform procedures to obtain limited assurance as a basis for reporting whether I am aware of any material modifications that should be made to the financial statement for it to be in accordance with accounting principles generally accepted in the United States of America. I believe that the results of my procedures provide a reasonable basis for my conclusion.

Accountant's Conclusion

Based on my (our) review, I am (we are) not aware of any material modifications that should be made to the accompanying financial statement for it to be in accordance with accounting principles generally accepted in the United States of America.

Vasu Varadarajan

Worthington, OH 43085

Oct 19th, 2022

Nishitkumar H Patel

Statement of Financial Condition as of Oct 19th, 2022

ASSETS

Checking	\$144,604.67
Savings	\$1,670.09
Investments	\$124,408.00
Personal Residence	\$330,000.00
Cash Surrender Value Life Insurance	\$14,055.00
Closely Held Businesses	
Dhanlaxmi LLC	\$480,307.72
Gajariya Properties LLC	\$443,372.61
Yana Hotel LLC	\$1,829,882.06
Swami Hotel LLC	\$2,302,765.14
NNR Hospitality LLC	\$0.00
YNJ Management Inc	(\$40,594.16)
HKR Hospitality LLC	244712.62
NNRM Hospitality LLC	\$683,408.94
Household Furnishings	\$4,500.00
Jewelry	\$3,000.00
Vehicles	\$55,000.00
Total Assets	\$6,621,092.69

LIABILITIES

Mortgage on Personal Residence	\$205,267.00
Total Liabilities	\$205,267.00
Net Worth	\$6,415,825.69

Total Liabilities and Net Worth	\$6,621,092.69
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Sources of Income As of Oct 19th, 2022,

Wages	\$158,597.04
Distributions	\$42,600.00
Net Disposable Income	\$201,197.04

See Accountant's Compilation Report

Nishitkumar H Patel

Personal Financial Statement
as of Oct 19th, 2022

Nishitkumar H Patel

Selected Information
Oct 19th, 2022

L Basis of Reportine:

The Accompanying statement of financial condition includes the assets and liabilities of Nishitkumar H Patel. The values of assets of closely held business were provided by Nishitkumar H Patel.

The estimated current Equity value of closely held businesses were determined by Asset Value Less Debts of the entities.

- Personal Guaranty

Personal Guaranty was provided for the Mortgage in the amount of \$233,990.

- Deferred Taxes

The amount of deferred taxes represents timing differences between using cash for Federal tax reporting purposes versus accrual method for book purposes for all entities. There are no material timing differences at this time requiring provision for income taxes.

- Personal Residence

Personal Residence Mortgage located at 1054 Camoustie Circle, Grove City, OH was purchased December 3, 2014 for \$319,000, current value is \$330,000 determined by recent comparable sales in the nearby area.

S. Vehicles, Household, Jewelry

These items are reported based on current Fair Market Value if sold to third party.

Nishitkumar H Patel

cted Information Oct 19th, 2022

Closely Held Businesses

Below is a Summary Balance Sheet and Equity position for all Closely Held Businesses.

Description	Dhanalaxmi	Gajariya	Yana	Swami	NNR	YNJ	HKR	NNRM
Cash	\$125,779.75	\$745,284.07	\$10,586.23	\$358,544.74	\$700,950.47	\$4,034.84	\$251,361.28	\$198,693.62
Trade Receivables								
Affiliate	\$12,217.74	\$54,842.00	\$3,625.00	\$13,720.00				
Receivables	\$656,810.00	\$50,000.00	\$5,500.00	100,000.00	\$100,000.00	\$98,371.00	\$120,000.00	
Land, Building -								
FMV	\$4,850,000.00	5,250,000.00	5,350,000.00	5,350,000.00	\$2,450,000.00	0	\$4,850,000.00	5,250,000.00
Total Assets	\$5,644,807.49	\$6,100,126.07	\$5,369,711.23	\$5,822,264.74	\$3,250,950.47	\$102,405.84	\$5,221,361.28	\$5,448,693.62
Liabilities								
Payables								
Intercompany Loan	\$140,846.42	4,850.65	448,537.57	433,208.00			\$100,000.00	275,000.00
Member Loans			15,000.00			\$2,000.00		
Mortgage Payable	\$3,345,653.35	4,161,885.00	2,926,391.60	2,926,391.60	\$2,450,576.03		\$3,442,007.40	3,771,231.92
EIDL Loan	\$1,678,000.00	159,900.00	149,900.00	159,900.00	\$159,900.00	\$141,000.00	\$149,900.00	159,900.00
Total Liabilities	\$5,164,499.77	\$4,326,635.65	\$3,539,829.17	\$3,519,499.60	\$2,610,476.03	\$143,000.00	\$3,691,907.40	\$4,206,131.92
Equity	\$480,307.72	\$1,773,490.42	\$1,829,882.06	\$2,302,765.14	\$640,474.44	(\$40,594.16)	\$1,529,453.88	\$1,242,561.70
Patel Ownership%								
	100.00%	25.00%	100.00%	100.00%	0%	100.00%	16.00%	55.00%
Patel Equity	\$480,307.72	\$443,372.61	\$1,829,882.06	\$2,302,765.14	\$0.00	(\$40,594.16)	\$244,712.62	\$683,408.94
Total	\$5,943,854.92							

Nishitkumar H Patel

Personal Financial Statement
as of Oct 19th, 2022

7 Mortgage Payable

First Mortgage is 360 month original term, with monthly payments of \$1,513 including escrow for taxes of \$742 and Insurance of \$99, Interest rate 4.38 %

8 Cash Surrender Value of Life Insurance

Cash Surrender Value at December Oct 19th, 2022, was \$14,055 with a Death Benefit of \$1,000,000



ProfilePlusSM Report

as of: 08/16/22 10:16 ET

Ynj Management

Address:	4055 Jackpot Rd Grove City, OH 43123-9739 United States	Experian File Established:	August 2022
Phone:	614-871-9617	Experian Years on File:	2 Years
Experian BIN:	416568859	Years in Business:	More than 2 Years

This location does not yet have an estimated Days Beyond Terms (DBT), or a Payment Trend Indicator. This is often the result of too few Payment Tradelines.

Lowest 6 Month Balance: \$0
Highest 6 Month Balance: \$0
Current Total Account Balance: \$0
Highest Credit Amount Extended: \$0

Payment Tradelines (see charts , detail):	1
UCC Filings:	0
✗ Businesses Scoring Worse:	45%
✓ Bankruptcies:	0
✓ Liens:	0
✓ Judgments Filed:	0
✓ Collections:	0

Credit Summary

Experian Business Credit Score: 76



The objective of the Experian Business Credit Score is to predict payment behavior. High Risk means that there is a significant probability of delinquent payment. Low Risk means that there is a good probability of on-time payment.

Key Score Factors:

- Balance of aged commercial accounts that are current.
- Risk associated with the company's industry.
- Low nbr of commercial accts rptd within the last 12 mos.

Recommended Action: Medium Risk

Payment Summary

Insufficient information to produce
Monthly Payment Trends
chart.

Insufficient information to produce
Quarterly Payment Trends
chart.

Insufficient information to produce
Continuous Payment Trends
chart.

Insufficient information to produce
Newly Reported Payment Trends
chart.

Insufficient information to produce
Combined Payment Trends
chart.

Trade Payment Information

Payment Experiences (Financial Trades)

Supplier Category	Reported Date	Activity Date	Payment Terms	Recent High Credit	Balance	Current	Up to 30 DBT	31-60 DBT	61-90 DBT	>90 DBT	Comments
Fincl Svcs	8/16/22	9/21/22	Rev								Satisfacto

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6:57 PM
02/02/21
Cash Basis

YNJ MANAGEMENT, LLC

Projection-2022

	Jan - Dec 23	Jan - Dec 24
Ordinary Income/Expense		
Income		
Management Fees	265,870.90	278,940.23
Electric Energy Income	9,800.00	10,200.00
Total Income	275,670.90	289,140.23
Gross Profit	275,670.90	289,140.23
Expense		
401 K Contribution-Nash Patel	9,500.05	9,500.05
Accounting	3,500.00	3,500.00
Automobile Expense	25,890.05	25,890.05
BANK CHARGES	1,850.00	1,850.00
Dues and Subscription	5,500.00	7,500.00
Insurance Expense	18,000.00	18,000.00
Interest Expense - EIDL Loan	17,500.00	17,500.00
Marketing Exp	14,500.00	14,500.00
Payroll Expenses		
IRS FORM 941-V	78,000.00	78,000.00
Total Payroll Expenses	78,000.00	78,000.00
Professional Fees	8,500.00	8,500.00
TAXES	14,500.00	14,500.00
Travel & Entertainment	12,500.00	12,500.00
Total Expense	209,740.10	211,740.10
Net Ordinary Income	65,930.80	77,400.13
Net Income	65,930.80	77,400.13

AFFIDAVIT

State of Ohio :

Crook City ss.
(Town)

County of Franklin :

NASH PATEL, Affiant, being duly sworn/affirmed according to law, deposes and says that:

He/She is the MEMBER/CEO (Office of Affiant) of YNT MANAGEMENT (Name of Applicant);

LLC.

That he/she is authorized to and does make this affidavit for said Applicant,

1. The Applicant herein, attests under penalty of false statement that all statements made in the application for certification renewal are true and complete and that it will amend its application while the application is pending if any substantial changes occur regarding the information provided in the application.
2. The Applicant herein, attests it will timely file an annual report with the Public Utilities Commission of Ohio of its intrastate gross receipts, gross earnings, and sales of kilowatt-hours of electricity pursuant to Division (A) of Section 4905.10, Division (A) of Section 4911.18, and Division (F) of Section 4928.06 of the Revised Code.
3. The Applicant herein, attests that it will timely pay any assessments made pursuant to Sections 4905.10, 4911.18, or Division F of Section 4928.06 of the Revised Code.
4. The Applicant herein, attests that it will comply with all Public Utilities Commission of Ohio rules or orders as adopted pursuant to Chapter 4928 of the Revised Code.
5. The Applicant herein, attests that it will cooperate fully with the Public Utilities Commission of Ohio, and its Staff on any utility matter including the investigation of any consumer complaint regarding any service offered or provided by the Applicant.
6. The Applicant herein, attests that it will fully comply with Section 4928.09 of the Revised Code regarding consent to the jurisdiction of Ohio Courts and the service of process.
7. The Applicant herein, attests that it will use its best efforts to verify that any entity with whom it has a contractual relationship to purchase power is in compliance with all applicable licensing requirements of the Federal Energy Regulatory Commission and the Public Utilities Commission of Ohio.
8. The Applicant herein, attests that it will comply with all state and/or federal rules and regulations concerning consumer protection, the environment, and advertising/promotions.
9. The Applicant herein, attests that it will cooperate fully with the Public Utilities Commission of Ohio, the electric distribution companies, the regional transmission entities, and other electric suppliers in the event of an emergency condition that may jeopardize the safety and reliability of the electric service in accordance with the emergency plans and other procedures as may be determined appropriate by the Commission.
10. If applicable to the service(s) the Applicant will provide, the Applicant herein, attests that it will adhere to the reliability standards of (1) the North American Electric Reliability Council (NERC), (2) the appropriate regional reliability council(s), and (3) the Public Utilities Commission of Ohio. (Only applicable if pertains to the services the Applicant is offering)

11. The Applicant herein, attests that it will inform the Commission of any material change to the information supplied in the renewal application within 30 days of such material change, including any change in contact person for regulatory purposes or contact person for Staff use in investigating customer complaints.

That the facts above set forth are true and correct to the best of his/her knowledge, information, and belief and that he/she expects said Applicant to be able to prove the same at any hearing hereof.

Nave Patel member
Signature of Affiant & Title

Sworn and subscribed before me this 6 day of February, 2020
Month

Amy Adkins
Signature of official administering oath

Amy Adkins, notary
Print Name and Title



My commission expires on 9/12/2023

Do not staple or paper clip.

OhioDepartment of
Taxation

Rev. 10/23/20

2020

Ohio IT K-1

10211411

Use only black ink and UPPERCASE letters.

Part I - Investor / Beneficiary and Entity InformationFor calendar year 20 20 or taxable year beginning _____ and ending _____

Amended K-1

Pass-through entity / Fiduciary filing: IT 1140 IT 4708 ☒ Other

Investor's / beneficiary's SSN / FEIN ***-**-****

Entity FEIN 26-3257732 NAICS code 561110Investor's / beneficiary's name and address
NISHITKUMAR PATELEntity name and address Entity type S-CORPORATION
YNJ MANAGEMENT LLC

4055 JCKPOT RD

4055 JACKPOT RD

GROVE CITY OH 43123

JACKPOT RD OH 43123

Foreign State Code _____ Country Code _____

Foreign State Code _____ Country Code _____

Ownership %

Beginning

Ending

Profit-sharing %

Loss-sharing %

Ownership of capital 0.000000 % 0.000000 %

Beneficiary's income distribution % (trust/estates only) _____ %

Apportionment Ratio

Within Ohio

Total Everywhere

Property /

Payroll /

Sales /

Total apportionment ratio 1.000000**Part II - Investor's / Beneficiary's Ohio Depreciation Adjustments**

Total

Ohio

1a. Current year 168(k) & 179 depreciation expense Ohio add-back (fraction used) 1a. _____

b. Total deduction of prior year 168(k) & 179 depreciation Ohio add-backs 1b. _____

Prior year Ohio add-backs and related current year deduction

Year and add-back fraction	20____	20____	20____	20____	20____	20____
Add-back amount						
Related deduction						

Part III - Investor's / Beneficiary's Share of Ohio Income

Total

Ohio

2a. Pass-through entity / trust income 2a. 31820 31820

b. Guaranteed payments or compensation (20% or greater investors only) b. _____

c. Net Ohio depreciation adjustment c. _____

d. Total taxable income (sum of 2a through 2c for each column) d. 31820 31820**Part IV - Investor's / Beneficiary's Share of Ohio Tax Credits**

3. Direct pass-through entity credit (Ohio tax paid by this entity after any refunds) 3. _____

4. Indirect pass-through entity credits or withholding (attach IT K-1/W2/1099) 4. _____

Include the FEIN for any indirect pass-through entities _____

5. Refundable job creation credit & job retention credit (include certificates) - % of credit claimed _____ % 5. _____

6. Refundable Ohio historic preservation credit (include certificates) - % of credit claimed _____ % 6. _____

7. Venture capital credit (include certificates) 7. _____

8. Motion picture & Broadway theatrical production credit (include certificates) - % of credit claimed _____ % 8. _____

9. Nonrefundable business credits (include certificates) 9. _____

List of specific credits _____

Part V - Supplemental Information

AllStates CPA
6660 NORTH HIGH STREET, SUITE 1-H
WORTHINGTON, OH 43085
614-854-0850

September 3, 2021

YNJ MANAGEMENT LLC
4055 JACKPOT RD
JACKPOT RD, OH 43123

Dear :

This letter is to confirm and specify the terms of our engagement with you and to clarify the nature and extent of the services we will provide. In order to ensure an understanding of our mutual responsibilities, we ask all clients for whom returns are prepared to confirm the following arrangements.

We will prepare your 2020 federal and state corporate tax returns from information which you will furnish to us. We will not audit or otherwise verify the data you submit, although it may be necessary to ask you for clarification of some of the information.

It is your responsibility to provide all the information required for the preparation of complete and accurate returns. You should retain all the documents, cancelled checks and other data that form the basis of these returns. These may be necessary to prove the accuracy and completeness of the returns to a taxing authority. You have the final responsibility for the income tax returns and, therefore, you should review them carefully before you sign them.

Our work in connection with the preparation of your income tax returns does not include any procedures designed to discover defalcations and/or other irregularities, should any exist. We will render such accounting and bookkeeping assistance as determined to be necessary for preparation of the income tax returns.

The law provides various penalties that may be imposed when taxpayers understate their tax liability. If you would like information on the amount or the circumstances of these penalties, please contact us.

Your returns may be selected for review by the taxing authorities. Any proposed adjustments by the examining agent are subject to certain rights of appeal. In the event of such government tax examination, we will be available upon request to represent you and will render additional invoices for the time and expenses incurred.

Our fee for these services will be based upon the amount of time required at standard billing rates plus out-of-pocket expenses. All invoices are due and payable upon presentation.

If the foregoing fairly sets forth your understanding, please sign the enclosed copy of this letter in the space indicated and return it to our office. However, if there are other tax returns you expect us to prepare, please inform us by noting so at the end of the return copy of this letter.

We want to express our appreciation for this opportunity to work with you.

Very truly yours,

AllStates CPA

Accepted By: _____

Date: _____

Form 1120-S Return Summary

For calendar year 2020 or tax year beginning , ending
 YNJ MANAGEMENT LLC 26-3257732

Ordinary Business Income (Loss)

Total income	162,565	
Total deductions	<u>130,745</u>	
Ordinary business income (loss)		<u>31,820</u>
Total S Corporation taxes		<u>0</u>

Schedule K, Line 18

Ordinary business income (loss)	31,820	
Net rental real estate income (loss)		
Other net rental income (loss)		
Interest income		
Dividends		
Royalties		
Short-term capital gain (loss)		
Long-term capital gain (loss)		
Net Section 1231 gain (loss)		
Other income (loss)		
Section 179 deduction		
Contributions		
Investment interest expense		
Section 59(e)(2) expenditures		
Other deductions		
Foreign taxes paid or accrued		
Income (loss) reconciliation (Schedule K, Line 18)		<u>31,820</u>

Schedule L

	Prior Year	Current Year
Assets	341,486	293,113
Liabilities	<u>341,486</u>	<u>293,113</u>
Difference	<u>0</u>	<u>0</u>

Schedule M-1

Schedule M-1	31,820
Schedule K, Line 18	<u>31,820</u>
Difference	<u>0</u>

Retained Earnings

Schedule L RE Reconciliation Worksheet

AAA		
UTI		
E&P		
OAA		
Timing	<u>-115,846</u>	<u>-115,846</u>
Total	<u>-115,846</u>	<u>-115,846</u>

Schedule M-3

Schedule M-3	
Schedule K, Line 18	
Difference	<u>0</u>
Total number of shareholders	1
Total ownership percentage	100.000000

Form **8879-S**Department of the Treasury
Internal Revenue Service**IRS e-file Signature Authorization for Form 1120-S**

▶ ERO must obtain and retain completed Form 8879-S.

▶ Go to www.irs.gov/Form8879S for the latest information.

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

OMB No. 1545-0123

2020

Name of corporation

YNJ MANAGEMENT LLC

Employer identification number

26-3257732

Part I Tax Return Information (Whole dollars only)

1	Gross receipts or sales less returns and allowances (Form 1120-S, line 1c)	1	162,565
2	Gross profit (Form 1120-S, line 3)	2	162,565
3	Ordinary business income (loss) (Form 1120-S, line 21)	3	31,820
4	Net rental real estate income (loss) (Form 1120-S, Schedule K, line 2)	4	
5	Income (loss) reconciliation (Form 1120-S, Schedule K, line 18)	5	31,820

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 ALLSTATES CPA ERO firm name to enter my PIN 26325 as my signature
on the corporation's 2020 electronically filed income tax return. Don't 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 ▶ NISHITKUMAR PATEL Date ▶ 08/23/21 Title ▶ PRESIDENT

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.

31197402433Don't 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 ▶ NAT RAMMOHAN Date ▶ 08/23/21

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

For Paperwork Reduction Act Notice, see instructions.

Form **8879-S** (2020)

Form **1120-S****U.S. Income Tax Return for an S Corporation**

OMB No. 1545-0123

2020Department of the Treasury
Internal Revenue Service

Do not file this form unless the corporation has filed or is attaching Form 2553 to elect to be an S corporation.
Go to www.irs.gov/Form1120S for instructions and the latest information.

For calendar year 2020 or tax year beginning , ending

A S election effective date 08/08/08	TYPE OR PRINT	Name YNJ MANAGEMENT LLC	D Employer identification number 26-3257732
B Business activity code number (see instructions) 561110		Number, street, and room or suite no. If a P.O. box, see instructions. 4055 JACKPOT RD	E Date incorporated 08/08/2008
C Check if Sch. M-3 attached <input type="checkbox"/>		City or town, state or province, country, and ZIP or foreign postal code JACKPOT RD OH 43123	F Total assets (see instructions) \$ 293,113

G Is the corporation electing to be an S corporation beginning with this tax year? ☐ Yes ☒ No If "Yes," attach Form 2553 if not already filed

H Check if: (1) ☐ Final return (2) ☐ Name change (3) ☐ Address change (4) ☐ Amended return (5) ☐ S election termination or revocation

I Enter the number of shareholders who were shareholders during any part of the tax year **1**

J Check if corporation: (1) ☐ Aggregated activities for section 465 at-risk purposes (2) ☐ Grouped activities for section 469 passive activity purposes

Caution: Include only trade or business income and expenses on lines 1a through 21. See the instructions for more information.

Income	1a Gross receipts or sales	1a 162,565	1c 162,565
	b Returns and allowances	1b	
	c Balance. Subtract line 1b from line 1a		
	2 Cost of goods sold (attach Form 1125-A)	2	
	3 Gross profit. Subtract line 2 from line 1c	3 162,565	
	4 Net gain (loss) from Form 4797, line 17 (attach Form 4797)	4	
	5 Other income (loss) (see instructions—attach statement)	5	
6 Total income (loss). Add lines 3 through 5	6 162,565		
Deductions (see instructions for limitations)	7 Compensation of officers (see instructions—attach Form 1125-E)	7 60,000	
	8 Salaries and wages (less employment credits)	8 8,462	
	9 Repairs and maintenance	9	
	10 Bad debts	10	
	11 Rents	11	
	12 Taxes and licenses	12 7,905	
	13 Interest (see instructions)	13	
	14 Depreciation not claimed on Form 1125-A or elsewhere on return (attach Form 4562)	14	
	15 Depletion (Do not deduct oil and gas depletion.)	15	
	16 Advertising	16	
	17 Pension, profit-sharing, etc., plans	17	
	18 Employee benefit programs	18	
	19 Other deductions (attach statement) S E E S T M T 1	19 54,378	
	20 Total deductions. Add lines 7 through 19	20 130,745	
	21 Ordinary business income (loss). Subtract line 20 from line 6	21 31,820	
Tax and Payments	22a Excess net passive income or LIFO recapture tax (see instructions)	22a	22c
	b Tax from Schedule D (Form 1120-S)	22b	
	c Add lines 22a and 22b (see instructions for additional taxes)		
	23a 2020 estimated tax payments and 2019 overpayment credited to 2020	23a	23e
	b Tax deposited with Form 7004	23b	
	c Credit for federal tax paid on fuels (attach Form 4136)	23c	
	d Reserved for future use	23d	
	e Add lines 23a through 23d		
	24 Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/>	24	
	25 Amount owed. If line 23e is smaller than the total of lines 22c and 24, enter amount owed	25	
	26 Overpayment. If line 23e is larger than the total of lines 22c and 24, enter amount overpaid	26	
27 Enter amount from line 26: Credited to 2021 estimated tax <input checked="" type="checkbox"/> Refunded <input type="checkbox"/>	27		

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.

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

Sign Here Signature of officer NISHITKUMAR PATEL Date _____ Title PRESIDENT

Paid Preparer Use Only	Print/Type preparer's name NAT RAMMOHAN	Preparer's signature NAT RAMMOHAN	Date 09/03/21	Check <input type="checkbox"/> if self-employed	PTIN P01427445
	Firm's name ALLSTATES CPA	Firm's EIN 11-3664486			
	Firm's address 6660 NORTH HIGH STREET, SUITE 1-H WORTHINGTON, OH 43085	Phone no. 614-854-0850			

For Paperwork Reduction Act Notice, see separate instructions.

Form **1120-S** (2020)

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 ▶ <u>ADMINISTRATIVE</u> b Product or service ▶ <u>FACILITIES SUPPORT</u>		
3 At any time during the tax year, was any shareholder of the corporation a disregarded entity, a trust, an estate, or a nominee or similar person? If "Yes," attach Schedule B-1, Information on Certain Shareholders of an S Corporation		X
4 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 stock issued and outstanding of any foreign or domestic corporation? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (v) below		X

(i) Name of Corporation	(ii) Employer Identification Number (if any)	(iii) Country of Incorporation	(iv) Percentage of Stock Owned	(v) If Percentage in (iv) Is 100%, Enter the Date (if any) a Qualified Subchapter S Subsidiary Election Was Made

b Own directly an interest of 20% or more, or own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital 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 (v) below		X
--	--	---

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

5a At the end of the tax year, did the corporation have any outstanding shares of restricted stock? If "Yes," complete lines (i) and (ii) below. (i) Total shares of restricted stock ▶ (ii) Total shares of non-restricted stock ▶		X
b At the end of the tax year, did the corporation have any outstanding stock options, warrants, or similar instruments? If "Yes," complete lines (i) and (ii) below. (i) Total shares of stock outstanding at the end of the tax year ▶ (ii) Total shares of stock outstanding if all instruments were executed ▶		X
6 Has this corporation filed, or is it required to file, Form 8918 , Material Advisor Disclosure Statement, to provide information on any reportable transaction?		
7 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.		
8 If the corporation (a) was a C corporation before it elected to be an S corporation or the corporation acquired an asset with a basis determined by reference to the basis of the asset (or the basis of any other property) in the hands of a C corporation, and (b) has net unrealized built-in gain in excess of the net recognized built-in gain from prior years, enter the net unrealized built-in gain reduced by net recognized built-in gain from prior years. See instructions ▶ \$		
9 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	
10 Does the corporation satisfy one or more of the following? See instructions 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.		X
11 Does the corporation satisfy both of the following conditions? a The corporation's total receipts (see instructions) for the tax year were less than \$250,000. b The corporation's total assets at the end of the tax year were less than \$250,000. If "Yes," the corporation is not required to complete Schedules L and M-1.		X

Schedule B Other Information (see instructions) (continued)

	Yes	No
12 During the tax year, did the corporation have any non-shareholder debt that was canceled, was forgiven, or had the terms modified so as to reduce the principal amount of the debt?		X
If "Yes," enter the amount of principal reduction ▶ \$		
13 During the tax year, was a qualified subchapter S subsidiary election terminated or revoked? If "Yes," see instructions		X
14a Did the corporation make any payments in 2020 that would require it to file Form(s) 1099?		
b If "Yes," did the corporation file or will it file required Forms 1099?		
15 Is the corporation attaching Form 8996 to certify as a Qualified Opportunity Fund?		X
If "Yes," enter the amount from Form 8996, line 15 ▶ \$		

Schedule K Shareholders' Pro Rata Share Items

Total amount

		Total amount
Income (Loss)	1 Ordinary business income (loss) (page 1, line 21)	1 31,820
	2 Net rental real estate income (loss) (attach Form 8825)	2
	3a Other gross rental income (loss)	3a
	b Expenses from other rental activities (attach statement)	3b
	c Other net rental income (loss). Subtract line 3b from line 3a	3c
	4 Interest income	4
	5 Dividends: a Ordinary dividends	5a
	b Qualified dividends	5b
	6 Royalties	6
	7 Net short-term capital gain (loss) (attach Schedule D (Form 1120-S))	7
8a Net long-term capital gain (loss) (attach Schedule D (Form 1120-S))	8a	
b Collectibles (28%) gain (loss)	8b	
c Unrecaptured section 1250 gain (attach statement)	8c	
9 Net section 1231 gain (loss) (attach Form 4797)	9	
10 Other income (loss) (see instructions).....Type ▶	10	
Deductions	11 Section 179 deduction (attach Form 4562)	11
	12a Charitable contributions	12a
	b Investment interest expense	12b
	c Section 59(e)(2) expenditures Type ▶	12c
	d Other deductions (see instructions).....Type ▶	12d
Credits	13a Low-income housing credit (section 42(j)(5))	13a
	b Low-income housing credit (other)	13b
	c Qualified rehabilitation expenditures (rental real estate) (attach Form 3468, if applicable)	13c
	d Other rental real estate credits (see instructions) Type ▶	13d
	e Other rental credits (see instructions) Type ▶	13e
	f Biofuel producer credit (attach Form 6478)	13f
	g Other credits (see instructions) .....Type ▶	13g
Foreign Transactions	14a Name of country or U.S. possession ▶	
	b Gross income from all sources	14b
	c Gross income sourced at shareholder level	14c
	Foreign gross income sourced at corporate level	
	d Reserved for future use	14d
	e Foreign branch category	14e
	f Passive category	14f
	g General category	14g
	h Other (attach statement)	14h
	Deductions allocated and apportioned at shareholder level	
	i Interest expense	14i
	j Other	14j
	Deductions allocated and apportioned at corporate level to foreign source income	
	k Reserved for future use	14k
	l Foreign branch category	14l
	m Passive category	14m
	n General category	14n
	o Other (attach statement)	14o
	Other information	
	p Total foreign taxes (check one): ▶ <input type="checkbox"/> Paid <input type="checkbox"/> Accrued.....▶	14p
q Reduction in taxes available for credit (attach statement)	14q	
r Other foreign tax information (attach statement)		

Schedule K Shareholders' Pro Rata Share Items (continued)		Total amount	
Alternative Minimum Tax (AMT) Items	15a Post-1986 depreciation adjustment	15a	
	b Adjusted gain or loss	15b	
	c Depletion (other than oil and gas)	15c	
	d Oil, gas, and geothermal properties – gross income	15d	
	e Oil, gas, and geothermal properties – deductions	15e	
	f Other AMT items (attach statement)	15f	
Items Affecting Shareholder Basis	16a Tax-exempt interest income	16a	
	b Other tax-exempt income	16b	2,000
	c Nondeductible expenses	16c	
	d Distributions (attach statement if required) (see instructions)	16d	235,693
	e Repayment of loans from shareholders	16e	
Other Information	17a Investment income	17a	
	b Investment expenses	17b	
	c Dividend distributions paid from accumulated earnings and profits	17c	
	d Other items and amounts (attach statement) S E E S T A T E M E N T 2		
Reconciliation	18 Income (loss) reconciliation. Combine the amounts on lines 1 through 10 in the far right column. From the result, subtract the sum of the amounts on lines 11 through 12d and 14p	18	31,820

Schedule L Balance Sheets per Books		Beginning of tax year		End of tax year	
Assets		(a)	(b)	(c)	(d)
1	Cash		27,000		11,847
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) S T M T 3		305,785		251,056
7	Loans to shareholders				
8	Mortgage and real estate loans				
9	Other investments (attach statement)	30,210		30,210	
10a	Buildings and other depreciable assets	(	21,509	(	8,701
b	Less accumulated depreciation				30,210
11a	Depletable assets	((
b	Less accumulated depletion				
12	Land (net of any amortization)				
13a	Intangible assets (amortizable only)	825		825	
b	Less accumulated amortization	(	825	(	825
14	Other assets (attach statement)				
15	Total assets		341,486		293,113
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				153,500
21	Other liabilities (attach statement) S T M T 4		254,114		254,114
22	Capital stock		1,345		1,345
23	Additional paid-in capital				
24	Retained earnings		86,027		-115,846
25	Adjustments to shareholders' equity (attach statement)				
26	Less cost of treasury stock	((
27	Total liabilities and shareholders' equity		341,486		293,113

Schedule M-1 Reconciliation of Income (Loss) per Books With Income (Loss) per Return**Note:** The corporation may be required to file Schedule M-3. See instructions.

1 Net income (loss) per books	33,820	5 Income recorded on books this year not included on Schedule K, lines 1 through 10 (itemize):	
2 Income included on Schedule K, lines 1, 2, 3c, 4, 5a, 6, 7, 8a, 9, and 10, not recorded on books this year (itemize)		a Tax-exempt interest \$	
		STM T 5	2,000
3 Expenses recorded on books this year not included on Schedule K, lines 1 through 12 and 14p (itemize):		6 Deductions included on Schedule K, lines 1 through 12 and 14p, not charged against book income this year (itemize):	
a Depreciation \$		a Depreciation \$	
b Travel and entertainment \$			
4 Add lines 1 through 3	33,820	7 Add lines 5 and 6	2,000
		8 Income (loss) (Schedule K, line 18). Subtract line 7 from line 4.	31,820

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

	(a) Accumulated adjustments account	(b) Shareholders' undistributed taxable income previously taxed	(c) Accumulated earnings and profits	(d) Other adjustments account
1 Balance at beginning of tax year	86,027			
2 Ordinary income from page 1, line 21	31,820			
3 Other additions				2,000
4 Loss from page 1, line 21	()			
5 Other reductions	()			
6 Combine lines 1 through 5	117,847			2,000
7 Distributions	117,847			2,000
8 Balance at end of tax year. Subtract line 7 from line 6	0			0

Form **1120-S** (2020)

Schedule K-1
(Form 1120-S)
Department of the Treasury
Internal Revenue Service

2020

For calendar year 2020, or tax year

beginning ending

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

See back of form and separate instructions.

Final K-1 Amended K-1

OMB No. 1545-0123

Part I

Information About the Corporation

A

Corporation's employer identification number

26-3257732

B

Corporation's name, address, city, state, and ZIP code

YNJ MANAGEMENT LLC

4055 JACKPOT RD

JACKPOT RD

OH

43123

C

IRS Center where corporation filed return

E-FILE

Part II

Information About the Shareholder

D

Shareholder's identifying number

-**-*

E

Shareholder's name, address, city, state, and ZIP code

NISHITKUMAR PATEL

4055 JCKPOT RD

GROVE CITY

OH

43123

F

Current year allocation percentage

100.000000 %

G

Shareholder's number of shares

Beginning of tax year

End of tax year

H

Loans from shareholder

Beginning of tax year

End of tax year

For IRS Use Only

Part III

Shareholder's Share of Current Year Income, Deductions, Credits, and Other Items

1	Ordinary business income (loss)	13	Credits
	31,820		
2	Net rental real estate income (loss)		
3	Other net rental income (loss)		
4	Interest income		
5a	Ordinary dividends		
5b	Qualified dividends	14	Foreign transactions
6	Royalties		
7	Net short-term capital gain (loss)		
8a	Net long-term capital gain (loss)		
8b	Collectibles (28%) gain (loss)		
8c	Unrecaptured section 1250 gain		
9	Net section 1231 gain (loss)		
10	Other income (loss)	15	Alternative minimum tax (AMT) items
11	Section 179 deduction	16	Items affecting shareholder basis
		B	2,000
12	Other deductions	D	235,693
		17	Other information
		V*	STMT
		AC*	STMT
18	More than one activity for at-risk purposes*		
19	More than one activity for passive activity purposes*		
* See attached statement for additional information.			

Section 199A Information Worksheet

Form **1120-S**

2020

For calendar year 2020 or tax year beginning , ending

Name
YNJ MANAGEMENT LLC

Employer Identification Number
26-3257732

	Activity Description	Pass-Through Entity EIN	PTP	Aggregated	SSTB
Column A	PAGE 1 ACTIVITY				
Column B					
Column C					
Column D					
Column E					

	Column A	Column B	Column C	Column D	Column E
QBI or Qualified PTP items:					
Ordinary business income (loss)	31,820				
Net rental real estate income (loss)					
Other net rental income (loss)					
Royalty income (loss)					
Section 1231 gain (loss)					
Other income (loss)					
Section 179 deduction					
Other deductions					
W-2 wages	68,462				
Qualified property					
Other Information:					
QBI allocable to cooperative pmts received					
W-2 wages allocable to qualified payments					
Section 199A(g) deduction					
Section 199A REIT dividends					

Federal Statements**Statement 1 - Form 1120-S, Page 1, Line 19 - Other Deductions**

<u>Description</u>	<u>Amount</u>
ACCOUNTING FEES	\$
COMPUTER EXPENSE	2,456
LEGAL & PROFESSIONAL FEE	15,632
AUTO EXPENSE	18,025
BANK & CREDIT CARD CHARGES	926
DUES & SUBSCRIPTIONS	200
INSURANCE	7,137
OFFICE SUPPLIES	4,787
PAYROLL FEES	750
POSTAGE & DELIVERY	302
TRAVEL EXPENSE	1,957
UTILITIES	2,206
TOTAL	\$ <u>54,378</u>

Statement 2 - Form 1120-S, Page 4, Schedule K, Line 17d - Other Items and Amounts

<u>Description</u>	<u>Amount</u>
SECTION 199A INFORMATION - SEE ATTACHED WRK	

Statement 3 - Form 1120-S, Page 4, Schedule L, Line 6 - Other Current Assets

<u>Description</u>	<u>Beginning of Year</u>	<u>End of Year</u>
INTERCOMPANY TRANSFERS	\$ 305,785	\$ 251,056
TOTAL	\$ <u>305,785</u>	\$ <u>251,056</u>

Statement 4 - Form 1120-S, Page 4, Schedule L, Line 21 - Other Liabilities

<u>Description</u>	<u>Beginning of Year</u>	<u>End of Year</u>
LOAN:CHIRAG PATEL	\$ 50,000	\$ 50,000
LOAN:DIPESH PATEL	50,000	50,000
LOAN:NISHANT PATEL	80,000	80,000
LOAN:PRAVINKUMAR PATEL	25,000	25,000
LOAN:SIDHARTH PATEL	45,000	45,000
LOAN:NASH PATEL	2,000	2,000
OVERDRAFT PROTECTION	2,114	2,114
TOTAL	\$ <u>254,114</u>	\$ <u>254,114</u>

Federal Statements**Statement 5 - Form 1120-S, Page 5, Schedule M-1, Line 5 - Income on Books Not on Return**

<u>Description</u>	<u>Amount</u>
PPP LOAN FORGIVENESS	\$ <u>2,000</u>
TOTAL	\$ <u><u>2,000</u></u>

Form 1120-S, Page 5, Schedule M-2, Line 5(a) - Other Reductions

<u>Description</u>	<u>Amount</u>
ADJUSTMENT TO EQUITY	\$ <u> </u>
TOTAL	\$ <u><u>0</u></u>

263257732 YNJ MANAGEMENT LLC
26-3257732
FYE: 12/31/2020

Federal Statements
NISHITKUMAR PATEL

Schedule K-1, Box 17, Code AC - Gross Receipts for Section 448(c)

<u>Description</u>		<u>Shareholder Amount</u>
8990	GROSS RECEIPTS FOR 2019	325,033
8990	GROSS RECEIPTS FOR 2018	244,474
8990	GROSS RECEIPTS FOR 2017	241,056

Form 1120-S Schedule K-1		Schedule K-1, Box 17, Code V Shareholder's Section 199A Information	2020
		For calendar year 2020 or tax year beginning , ending	

Name YNJ MANAGEMENT LLC NISHITKUMAR PATEL	Taxpayer Identification Number 26-3257732 ***-**-****
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	Activity Description	Pass-Through Entity EIN	PTP	Aggregated	SSTB
Column A	PAGE 1 ACTIVITY				
Column B					
Column C					
Column D					
Column E					

	Column A	Column B	Column C	Column D	Column E
QBI or Qualified PTP items:					
Ordinary business income (loss)	31,820				
Net rental real estate income (loss)					
Other net rental income (loss)					
Royalty income (loss)					
Section 1231 gain (loss)					
Other income (loss)					
Section 179 deduction					
Other deductions					
W-2 wages	68,462				
Qualified property					
Other Information:					
QBI allocable to cooperative pmts received					
W-2 wages allocable to qualified payments					
Section 199A(g) deduction					
Section 199A REIT dividends					

263257732 YNJ MANAGEMENT LLC

26-3257732

FYE: 12/31/2020

Federal Asset Report**Form 1120-S, Page 1**

<u>Asset</u>	<u>Description</u>	<u>Date</u> <u>In Service</u>	<u>Cost</u>	<u>Bus</u> <u>%</u>	<u>Sec</u> <u>179 Bonus</u>	<u>Basis</u> <u>for Depr</u>	<u>Per Conv Meth</u>	<u>Prior</u>	<u>Current</u>
<u>Listed Property:</u>									
2	2010 Lexus	1/01/15	30,210		X	19,050	5 HY 200DB	18,759	0
	Retired		<u>30,210</u>			<u>19,050</u>		<u>18,759</u>	<u>0</u>
<u>Amortization:</u>									
1	Organizational Cost	8/08/08	<u>825</u>			<u>825</u>	15 MOAmort	<u>825</u>	<u>0</u>
			<u>825</u>			<u>825</u>		<u>825</u>	<u>0</u>
Grand Totals			31,035			19,875		19,584	0
Less: Dispositions and Transfers			0			0		0	0
Less: Start-up/Org Expense			<u>0</u>			<u>0</u>		<u>0</u>	<u>0</u>
Net Grand Totals			<u>31,035</u>			<u>19,875</u>		<u>19,584</u>	<u>0</u>

263257732 YNJ MANAGEMENT LLC

26-3257732

FYE: 12/31/2020

Bonus Depreciation Report

Form 1120-S, Page 1

<u>Asset</u>	<u>Property Description</u>	<u>Date In Service</u>	<u>Tax Cost</u>	<u>Bus Pct</u>	<u>Tax Sec 179 Exp</u>	<u>Current Bonus</u>	<u>Prior Bonus</u>	<u>Tax - Basis for Depr</u>
2	2010 Lexus	1/01/15	30,210	100	0	0	11,160	19,050
Grand Total			<u>30,210</u>		<u>0</u>	<u>0</u>	<u>11,160</u>	<u>19,050</u>

263257732 YNJ MANAGEMENT LLC

26-3257732

FYE: 12/31/2020

AMT Asset Report

Form 1120-S, Page 1

<u>Asset</u>	<u>Description</u>	<u>Date</u> <u>In Service</u>	<u>Cost</u>	<u>Bus</u> <u>%</u>	<u>Sec</u> <u>179 Bonus</u>	<u>Basis</u> <u>for Depr</u>	<u>Per Conv Meth</u>	<u>Prior</u>	<u>Current</u>
Listed Property:									
2	2010 Lexus	1/01/15	30,210		X	19,050	5 HY 200DB	27,600	0
	Retired								
			<u>30,210</u>			<u>19,050</u>		<u>27,600</u>	<u>0</u>
Grand Totals			30,210			19,050		27,600	0
Less: Dispositions and Transfers			<u>0</u>			<u>0</u>		<u>0</u>	<u>0</u>
Net Grand Totals			<u>30,210</u>			<u>19,050</u>		<u>27,600</u>	<u>0</u>

Depreciation Adjustment Report
All Business Activities

Form	Unit	Asset	Description	Tax	AMT	AMT Adjustments/ Preferences
<u>MACRS Adjustments:</u>						
Page 1	1	2	2010 Lexus	<u>0</u>	<u>0</u>	<u>0</u>
				<u>0</u>	<u>0</u>	<u>0</u>

263257732 YNJ MANAGEMENT LLC

26-3257732

Future Depreciation Report

FYE: 12/31/21

FYE: 12/31/2020

Form 1120-S, Page 1

Asset	Description	Date In Service	Cost	Tax	AMT
-------	-------------	-----------------	------	-----	-----

Listed Property:

2	2010 Lexus	1/01/15	<u>30,210</u>	<u>0</u>	<u>0</u>
			<u>30,210</u>	<u>0</u>	<u>0</u>

Amortization:

1	Organizational Cost	8/08/08	<u>825</u>	<u>0</u>	<u>0</u>
			<u>825</u>	<u>0</u>	<u>0</u>

Grand Totals			<u>31,035</u>	<u>0</u>	<u>0</u>
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Form 1120-S	Schedule K-1 Summary Worksheet	2020
Name YNJ MANAGEMENT LLC		Employer Identification Number 26-3257732

	Shareholder Name	SSN/EIN
Column A	NISHITKUMAR PATEL	***-**-****
Column B		
Column C		
Column D		

	Schedule K Items	Column A	Column B	Column C	Column D	SCH K TOTAL
1	Ordinary income	31,820				31,820
2	Net rental RE inc					
3c	Net other rental inc					
4	Interest income					
5a	Ordinary dividends					
5b	Qualified dividends					
6	Royalties					
7	Net ST capital gain					
8a	Net LT capital gain					
8b	Collectibles 28% gain					
8c	Unrecap Sec 1250					
9	Net Sec 1231 gain					
10	Other income (loss)					
11	Sec 179 deduction					
12a	Contributions					
12b	Invest interest exp					
12c	Sec 59(e)(2) exp					
12d	Other deductions					
13a	Low-inc house 42j5					
13b	Low-inc house other					
13c	Qualif rehab exp					
13d	Rental RE credits					
13e	Other rental credits					
13f	Biofuel credit					
13g	Other credits					
14b	Gross inc all src					
14d-f	Total foreign inc					
14g-k	Total foreign deds					
14l	Total foreign taxes					
14m	Reduct in taxes					
15a	Depr adjustment					
15b	Adjusted gain (loss)					
15c	Depletion					
15d	Inc-oil/gas/geoth					
15e	Ded-oil/gas/geoth					
15f	Other AMT items					
16a	Tax-exempt interest					
16b	Other tax-exempt	2,000				2,000
16c	Nonded expense					
16d	Distributions	235,693				235,693
16e	Shr loan repmts					
17a	Investment income					
17b	Investment expense					
18	Income (loss)	31,820				31,820

Form 1120-S		Retained Earnings Reconciliation Worksheet	2020
For calendar year 2020 or tax year beginning		, ending	
Name YNJ MANAGEMENT LLC		Employer Identification Number 26-3257732	

Schedule L - Retained Earnings

Retained Earnings - Unappropriated (Accumulated E&P)	0
Accumulated Adjustments Account	0
Undistributed Previously Taxed Income	0
Other Adjustments Account	0
Retained Earnings Timing Differences	-115,846
Schedule L, Line 24 - Retained Earnings	-115,846

Schedule M-2 - Retained Earnings

	Accumulated Adjustments Account	Undistributed Previously Taxed Income	Accumulated Earnings and Profits	Other Adjustments Account	Retained Earnings Timing Differences	Total Retained Earnings
Beginning of Year	86,027	0	0	0	0	86,027
Ordinary Income (Loss)	31,820					31,820
Other Additions				2,000		2,000
Other Reductions						
Distributions	117,847			2,000	115,846	235,693
End of Year	0	0	0	0	-115,846	-115,846

263257732 YNJ MANAGEMENT LLC

26-3257732

FYE: 12/31/2020

Federal Statements

Form 1120-S, Retained Earnings Reconciliation Worksheet, AAA - Other Reductions

<u>Description</u>	<u>Amount</u>
ADJUSTMENT TO EQUITY	\$ <u> </u>
TOTAL	\$ <u> 0</u>

Form 1120-S, Retained Earnings Reconciliation Worksheet, OAA - Other Additions

<u>Description</u>	<u>Amount</u>
PPP LOAN FORGIVENESS	\$ <u> 2,000</u>
TOTAL	\$ <u> 2,000</u>

Electronic Filing - PDF Attachment Worksheet

Form **1120/1120-S**

2020

For calendar year 2020 or tax year beginning , ending

Name
YNJ MANAGEMENT LLC

Employer Identification Number
26-3257732

Title	Attachment Source	Proforma
AUTOMATICALLY ATTACHED TO RETURN SECTION 199A INFORMATION WORKSHEET	SECTION199AINFORMATIONWORKSHEET.PDF	
SHAREHOLDER SECTION 199A INFORMATION WORKSHEET	SHAREHOLDERSECTION199AINFORMATIONWORKSHEET.PDF	

Form 1120-S	Two Year Comparison Worksheet Page 1	2019 & 2020
Name YNJ MANAGEMENT LLC		Employer Identification Number 26-3257732

		2019	2020	Differences
Income	Gross profit percentage	100.0000	100.0000	
	Net receipts	325,033	162,565	-162,468
	Cost of goods sold			
	Gross profit	325,033	162,565	-162,468
	Net gain (loss) from Form 4797			
	Other income (loss)			
	Total income (loss)	325,033	162,565	-162,468
Deductions	Compensation of officers		60,000	60,000
	Salaries and wages less employment credits	60,000	8,462	-51,538
	Repairs and maintenance			
	Bad debts			
	Rents			
	Taxes and licenses	8,965	7,905	-1,060
	Interest	4,550		-4,550
	Depreciation			
	Depletion			
	Advertising			
	Pension, profit-sharing, etc., plans			
	Employee benefit programs			
	Other deductions	59,988	54,378	-5,610
	Total deductions	133,503	130,745	-2,758
	Ordinary business income (loss)	191,530	31,820	-159,710
Tax and Payments	Excess net passive income or LIFO recapture tax			
	Tax from Schedule D			
	Total tax	0	0	0
	Estimated tax and prior year overpayment credited			
	Tax deposited with Form 7004			
	Credit for federal tax paid on fuels			
	Refund applied for on Form 4466	()	()	
	Total payments and credits			
	Tax due (overpayment)	0	0	0
	Estimated tax penalty from Form 2220			
	Penalties and interest			
	Net tax due (overpayment)	0	0	0
Overpayment credited to next year's estimated tax				
Overpayment refunded				

Form 1120-S	Two Year Comparison Worksheet Page 2	2019 & 2020
Name YNJ MANAGEMENT LLC		Employer Identification Number 26-3257732

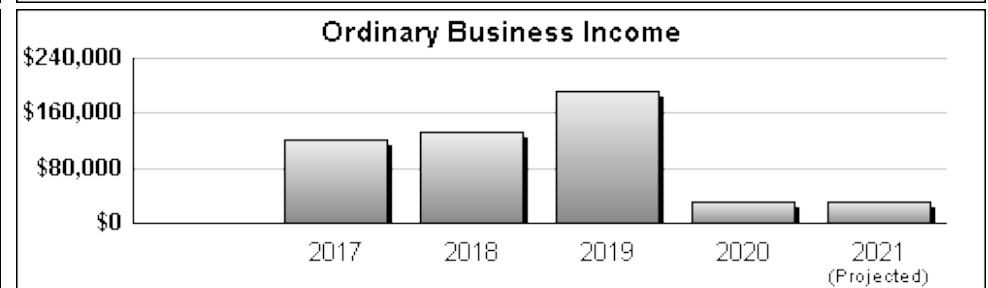
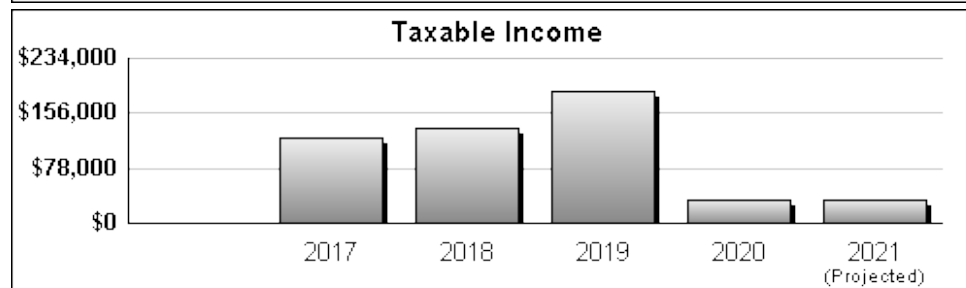
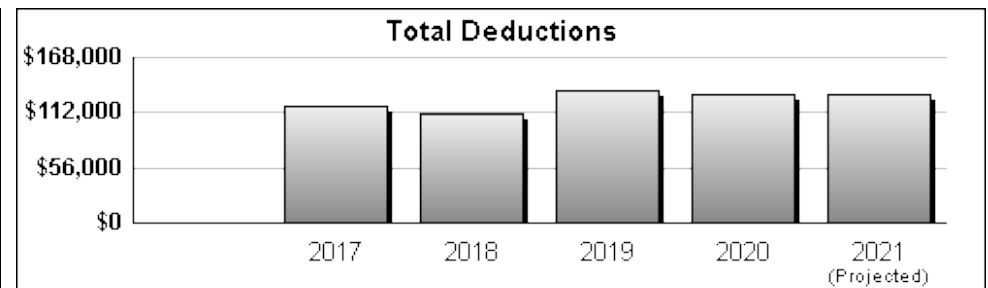
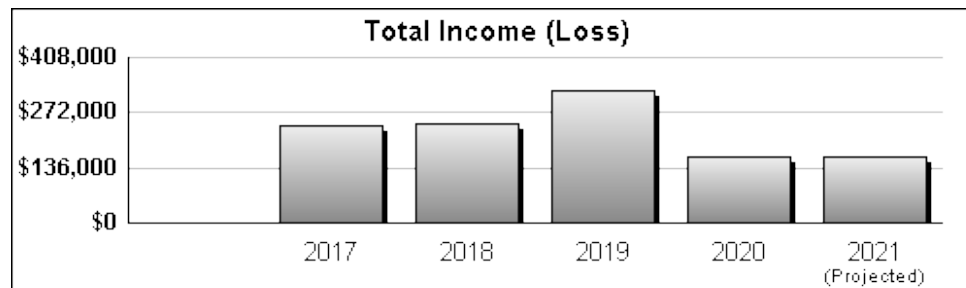
		2019	2020	Differences
Income (Loss)	Ordinary business income (loss)	191,530	31,820	-159,710
	Net rental real estate income (loss)			
	Other net rental income (loss)			
	Interest income			
	Dividends			
	Royalties			
	Net short-term capital gain (loss)			
	Net long-term capital gain (loss)			
	Net Section 1231 gain (loss)			
	Other income (loss)			
Deductions	Section 179 deduction			
	Charitable contributions	4,900		-4,900
	Investment interest expense			
	Section 59(e)(2) expenditures			
	Other deductions			
Credits	Low-income housing credit (Section 42(j)(5))			
	Low-income housing credit (other)			
	Qualified rehabilitation expenditures (rental real estate)			
	Other rental real estate credits			
	Other rental credits			
	Biofuel producer credit			
	Other credits			
Foreign Transactions	Total foreign gross income			
	Total foreign deductions			
	Total foreign taxes			
	Reduction in taxes available for credit			
AMT Items	Post-1986 depreciation adjustment			
	Adjusted gain or loss			
	Depletion (other than oil and gas)			
	Oil, gas, and geothermal properties-gross income			
	Oil, gas, and geothermal properties-deductions			
	Other AMT items			
Items Affecting S/H Basis	Tax-exempt interest income			
	Other tax-exempt income		2,000	2,000
	Nondeductible expenses			
	Distributions	87,174	235,693	148,519
	Repayment of loans from shareholders			
Other Information	Investment income			
	Investment expenses			
	Dividend distributions paid from accumulated E&P			
	Income (loss) (if Schedule M-1 is required)	186,630	31,820	-154,810

Form 1120-S	Two Year Comparison Worksheet Page 3	2019 & 2020
Name YNJ MANAGEMENT LLC		Employer Identification Number 26-3257732

		2019	2020	Differences
Schedule L	Beginning assets	282,901	341,486	58,585
	Beginning liabilities and equity	282,901	341,486	58,585
	Ending assets	341,486	293,113	-48,373
	Ending liabilities and equity	341,486	293,113	-48,373
Schedule M-1	Net income (loss) per books	186,630	33,820	-152,810
	Taxable income not on books			
	Book expenses not deducted			
	Income on books not on return		2,000	2,000
	Return deductions not on books			
	Income (loss) per return	186,630	31,820	-154,810
Schedule M-2 AAA	Balance at beginning of year	254,624	86,027	-168,597
	Ordinary income (loss) from page 1	191,530	31,820	-159,710
	Other additions			
	Other reductions	272,953		-272,953
	Distributions	87,174	117,847	30,673
	Balance at end of year	86,027		-86,027
Schedule M-2 PTI	Balance at beginning of year			
	Distributions			
	Balance at end of year			
Schedule M-2 E&P	Balance at beginning of year			
	Distributions			
	Balance at end of year			
Schedule M-2 OAA	Balance at beginning of year			
	Other additions		2,000	2,000
	Other reductions			
	Distributions		2,000	2,000
	Balance at end of year			
Schedule M-3	Total income (loss) items:			
	Income (loss) per income statement			
	Temporary difference			
	Permanent difference			
	Income (loss) per tax return			
	Total expense/deduction items:			
	Expense per income statement			
	Temporary difference			
	Permanent difference			
	Deduction per tax return			
	Other items with no differences:			
	Income (loss) per income statement			
	Income (loss) per tax return			
	Reconciliation totals:			
	Income (loss) per income statement			
	Temporary difference			
	Permanent difference			
	Income (loss) per tax return			

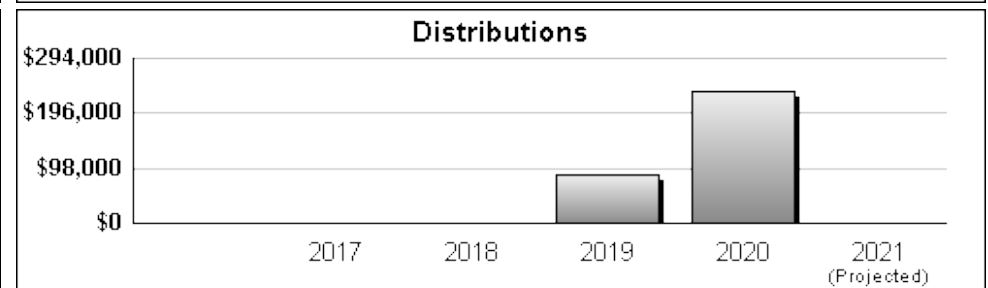
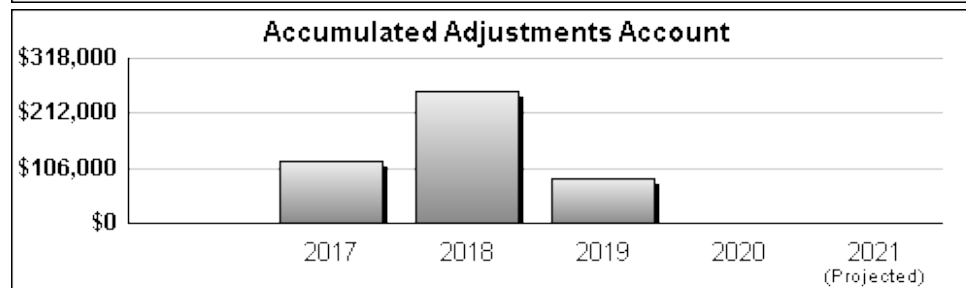
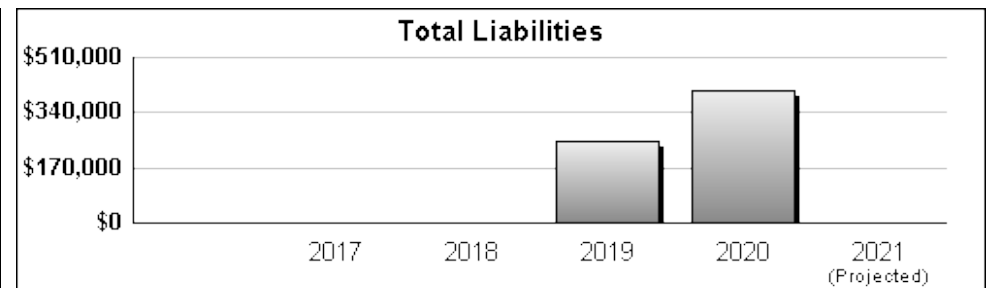
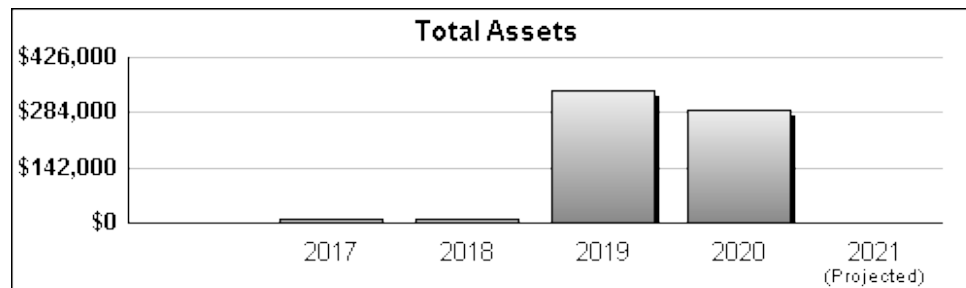
Form **1120-S****Tax Return History Report Page 1****2020**Name
YNJ MANAGEMENT LLCEmployer Identification Number
26-3257732

		2017	2018	2019	2020	2021 PROJECTED
Net receipts		241,056	244,474	325,033	162,565	162,565
Cost of goods sold						
Gross profit		241,056	244,474	325,033	162,565	162,565
Gross profit percentage		100.0000	100.0000	100.0000	100.0000	100.0000
Other income (loss)						
Total income (loss)		241,056	244,474	325,033	162,565	162,565
Officer compensation		42,000	60,000		60,000	60,000
Salaries and wages				60,000	8,462	8,462
Bad debts						
Taxes and licenses		5,008	7,738	8,965	7,905	7,905
Interest		417		4,550		
Depreciation		3,050				
Depletion (other than oil and gas)						
Pension and employee benefits		18,000				
Other deductions		51,066	42,825	59,988	54,378	54,378
Total deductions		119,541	110,563	133,503	130,745	130,745
Ordinary business income (loss)		121,515	133,911	191,530	31,820	31,820



Form **1120-S****Tax Return History Report Page 2****2020**Name
YNJ MANAGEMENT LLCEmployer Identification Number
26-3257732

		2017	2018	2019	2020	2021 PROJECTED
Ordinary business income (loss)		121,515	133,911	191,530	31,820	31,820
Net rental income (loss)						
Interest, dividends and royalties						
Net capital gain (loss)						
Net Section 1231 gain (loss)						
Other income (loss)						
Section 179 deduction						
Charitable contributions			325	4,900		
Other deductions						
Total foreign taxes						
S Corporation taxable income (loss)		121,515	133,586	186,630	31,820	31,820
Total assets		8,701	8,701	341,486	293,113	
Total liabilities				254,114	407,614	
Net equity		8,701	8,701	87,372	-114,501	
S Corporation book income (loss)		118,288	133,586	186,630	33,820	
Accumulated earnings & profits						
Accumulated adjustments account		121,038	254,624	86,027		
Retained earnings timing differences					-115,846	
Distributions from S Corporation earnings				87,174	235,693	
Dividend distributions						



Shareholder's Basis Worksheet Page 1

Form **1120-S**
Schedule K-1

For calendar year 2020 or tax year beginning

, ending

2020Name YNJ MANAGEMENT LLC
NISHITKUMAR PATELTaxpayer Identification Number 26-3257732
-**-***Stock Basis**

1. Beginning of year stock basis 354,080
2. Capital contributions 0
- Additions:**
3. Ordinary business income 31,820
4. Net rental income 0
5. Interest, dividends, royalties and net capital gains 0
6. Net Section 1231 gain 0
7. Tax-exempt interest and other income 2,000
8. Other income 0
9. Gain on disposal of Section 179 assets..... 0
- Total of line 3 through line 9 33,820
10. Other increases 0
11. Subtotal (Add line 1 through line 10) ~~387,900~~
- Subtractions:**
12. Distributions 235,693
13. Total losses and deductions applied against stock basis (See Shareholder's Basis Worksheet Page 2) 0
14. Other decreases 0
15. Amount used to restore loan basis ~~152,207~~
16. End of year stock basis (Subtract the sum of lines 12 through 15 from line 11) 0

Loan Basis

17. Beginning of year loan basis 0
18. Loans to corporation 0
19. Loan basis restored - amount used in prior years to offset losses 0
20. Other increases 0
21. Loan repayments 0
22. Total losses and deductions applied against loan basis (See Shareholder's Basis Worksheet Page 2) 0
23. Other decreases 0
24. End of year loan basis (Subtract the sum of lines 21 through 23 from the sum of lines 17 through 20) 0
25. End of year stock and loan basis (Add line 16 and line 24)..... 152,207
- Principal amount of loan owed to shareholder at end of the year 0

Gain Recognized on Excess Distributions

26. Distributions 235,693
27. Stock basis before distributions and loss items 387,900
28. Gain recognized on excess distributions (Subtract line 27 from line 26) * 0

Gain Recognized on Repayment of Shareholder Loan

29. Loan basis at beginning of tax year 0
30. Loan basis restored - amount used in prior years to offset losses 0
31. Loan basis before loan repayment (Add line 29 and line 30) 0
32. Shareholder loan at beginning of tax year 0
33. Loan repayments to shareholder during tax year 0
34. Nontaxable return of loan basis ((Line 31 divided by line 32) multiplied by line 33) 0
35. Gain recognized on repayment of shareholder loan (Subtract line 34 from line 33) 0

* NO GAIN RECOGNIZED IN CURRENT YEAR.

Note to shareholder: This worksheet was prepared based on corporation records. Please consult with your tax advisor for adjustments.

Federal Statements

FYE: 12/31/2020

Form 1120-S, Page 1, Line 1a - Gross Receipts or Sales

<u>Description</u>	<u>Amount</u>
	\$ <u>162,565</u>
TOTAL	\$ <u><u>162,565</u></u>

Form 1120-S, Page 1, Line 12 - Taxes and Licenses

<u>Description</u>	<u>Amount</u>
PAYROL TAXES	\$ 3,703
CAT TAXES	
OTHER TAXES	<u>4,202</u>
TOTAL	\$ <u><u>7,905</u></u>

Form 1120-S, Page 4, Schedule L, Line 20 - Mortgages, Notes, Bonds Payable in One Year or More

<u>Description</u>	<u>Beginning of Year</u>	<u>End of Year</u>
EIDL LOAN	\$	\$ 141,000
PPP LOAN		<u>12,500</u>
TOTAL	\$ <u><u>0</u></u>	\$ <u><u>153,500</u></u>

Do not staple or paper clip.

OhioDepartment of
Taxation

Rev. 8/24/21

2021

Ohio IT K-1

10211411

Use only black ink and UPPERCASE letters.

Part I - Investor / Beneficiary and Entity InformationFor calendar year 20 21 or taxable year beginning _____ and ending _____

Amended K-1

Pass-through entity / Fiduciary filing: IT 1140 IT 4708 ☒ Other

Investor's / beneficiary's SSN / FEIN ***-**-****

Entity FEIN ***-***7732 NAICS code 561110

Investor's / beneficiary's name and address
NISHITKUMAR PATELEntity name and address Entity type S-CORPORATION
YNJ MANAGEMENT LLC

4055 JCKPOT RD

4055 JACKPOT RD

GROVE CITY OH 43123

JACKPOT RD OH 43123

Foreign State Code _____ Country Code _____

Foreign State Code _____ Country Code _____

Ownership %

Beginning

Ending

Profit-sharing %

Loss-sharing %

Ownership of capital 0.000000 % 0.000000 %

Beneficiary's income distribution % (trust/estates only) %

Apportionment Ratio

Within Ohio

Total Everywhere

Property /

Payroll /

Sales /

Total apportionment ratio 1.000000

Part II - Investor's / Beneficiary's Ohio Depreciation Adjustments

Total

Ohio

1a. Current year 168(k) & 179 depreciation expense Ohio add-back (fraction used) 1a. _____

b. Total deduction of prior year 168(k) & 179 depreciation Ohio add-backs 1b. _____

Prior year Ohio add-backs and related year deduction

Year and add-back fraction	20__	20__	20__	20__	20__	20__
Add-back amount						
Related deduction						

Part III - Investor's / Beneficiary's Share of Ohio Income

Total

Ohio

2a. Pass-through entity / trust income 2a. 139229 139229

b. Guaranteed payments or compensation (20% or greater investors only) b. _____

c. Net Ohio depreciation adjustment c. _____

d. Total taxable income (sum of 2a through 2c for each column) d. 139229 139229

Part IV - Investor's / Beneficiary's Share of Ohio Tax Credits

3. Direct pass-through entity credit (Ohio tax paid by this entity after nonrefundable business credits and refunds) 3. _____

4. Indirect pass-through entity credits or withholding (attach IT K-1/W2/1099) 4. _____

Include the FEIN for any indirect pass-through entities _____

5. Refundable job creation credit & job retention credit (include certificates) - % of credit claimed _____ % ... 5. _____

6. Refundable Ohio historic preservation credit (include certificates) - % of credit claimed _____ % 6. _____

7. Venture capital credit (include certificates) 7. _____

8. Motion picture & Broadway theatrical production credit (include certificates) - % of credit claimed _____ % 8. _____

9. Nonrefundable business credits (include certificates) 9. _____

List of specific credits _____

Part V - Supplemental Information

**AllStates CPA
6660 NORTH HIGH STREET, SUITE 1-H
WORTHINGTON, OH 43085
614-854-0850**

August 25, 2022

YNJ MANAGEMENT LLC
4055 JACKPOT RD
JACKPOT RD, OH 43123

Dear :

This letter is to confirm and specify the terms of our engagement with you and to clarify the nature and extent of the services we will provide. In order to ensure an understanding of our mutual responsibilities, we ask all clients for whom returns are prepared to confirm the following arrangements.

We will prepare your 2021 federal and state corporate tax returns from information which you will furnish to us. We will not audit or otherwise verify the data you submit, although it may be necessary to ask you for clarification of some of the information.

It is your responsibility to provide all the information required for the preparation of complete and accurate returns. You should retain all the documents, cancelled checks and other data that form the basis of these returns. These may be necessary to prove the accuracy and completeness of the returns to a taxing authority. You have the final responsibility for the income tax returns and, therefore, you should review them carefully before you sign them.

Our work in connection with the preparation of your income tax returns does not include any procedures designed to discover defalcations and/or other irregularities, should any exist. We will render such accounting and bookkeeping assistance as determined to be necessary for preparation of the income tax returns.

The law provides various penalties that may be imposed when taxpayers understate their tax liability. If you would like information on the amount or the circumstances of these penalties, please contact us.

Your returns may be selected for review by the taxing authorities. Any proposed adjustments by the examining agent are subject to certain rights of appeal. In the event of such government tax examination, we will be available upon request to represent you and will render additional invoices for the time and expenses incurred.

Our fee for these services will be based upon the amount of time required at standard billing rates plus out-of-pocket expenses. All invoices are due and payable upon presentation.

If the foregoing fairly sets forth your understanding, please sign the enclosed copy of this letter in the space indicated and return it to our office. However, if there are other tax returns you expect us to prepare, please inform us by noting so at the end of the return copy of this letter.

We want to express our appreciation for this opportunity to work with you.

Very truly yours,

AllStates CPA

Accepted By: _____

Date: _____

Form 1120-S Return Summary

For calendar year 2021 or tax year beginning
YNJ MANAGEMENT LLC

, ending
-*7732

Ordinary Business Income (Loss)

Total income	274,329	
Total deductions	<u>135,100</u>	
Ordinary business income (loss)		<u>139,229</u>
Total S Corporation taxes		<u>0</u>

Schedule K, Line 18

Ordinary business income (loss)	139,229	
Net rental real estate income (loss)		
Other net rental income (loss)		
Interest income		
Dividends		
Royalties		
Short-term capital gain (loss)		
Long-term capital gain (loss)		
Net Section 1231 gain (loss)		
Other income (loss)		
Section 179 deduction		
Contributions		
Investment interest expense		
Section 59(e)(2) expenditures		
Other deductions		
Foreign taxes paid or accrued		
Income (loss) reconciliation (Schedule K, Line 18)		<u>139,229</u>

Schedule L

	Prior Year	Current Year
Assets	293,113	632,473
Liabilities	<u>293,113</u>	<u>632,473</u>
Difference	<u>0</u>	<u>0</u>

Schedule M-1

Schedule M-1	139,229
Schedule K, Line 18	<u>139,229</u>
Difference	<u>0</u>

Retained Earnings

Schedule L RE Reconciliation Worksheet

AAA		
UTI		
E&P		
OAA	-15,216	-15,216
Timing	<u>-121,636</u>	<u>-121,636</u>
Total	<u>-136,852</u>	<u>-136,852</u>

Schedule M-3

Schedule M-3	
Schedule K, Line 18	
Difference	<u>0</u>
Total number of shareholders	1
Total ownership percentage	100.000000

Form **8879-S**Department of the Treasury
Internal Revenue Service**IRS e-file Signature Authorization for Form 1120-S**

→ ERO must obtain and retain completed Form 8879-S.

→ Go to www.irs.gov/Form8879S for the latest information.

For calendar year 2021, or tax year beginning , and ending

OMB No. 1545-0123

2021

Name of corporation

YNJ MANAGEMENT LLC

Employer identification number

-*7732

Part I Tax Return Information (whole dollars only)

1	Gross receipts or sales less returns and allowances (Form 1120-S, line 1c)	1	274,329
2	Gross profit (Form 1120-S, line 3)	2	274,329
3	Ordinary business income (loss) (Form 1120-S, line 21)	3	139,229
4	Net rental real estate income (loss) (Form 1120-S, Schedule K, line 2)	4	
5	Income (loss) reconciliation (Form 1120-S, Schedule K, line 18)	5	139,229

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 2021 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 **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 ALLSTATES CPA ERO firm name to enter my PIN 26325 as my signature
on the corporation's 2021 electronically filed income tax return. Don't enter all zeros

☐ As an officer of the corporation, I will enter my PIN as my signature on the corporation's 2021 electronically filed income tax return.

Officer's signature →

NISHITKUMAR PATEL

Date →

08/25/22

Title →

PRESIDENT

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.

Don't enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2021 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 → NAT RAMMOHAN

Date → 08/25/22

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

For Paperwork Reduction Act Notice, see instructions.

Form **8879-S** (2021)

Form **1120-S****U.S. Income Tax Return for an S Corporation**

OMB No. 1545-0123

2021Department of the Treasury
Internal Revenue Service

→ Do not file this form unless the corporation has filed or is attaching Form 2553 to elect to be an S corporation.
→ Go to www.irs.gov/Form1120S for instructions and the latest information.

For calendar year 2021 or tax year beginning , ending

A S election effective date 08/08/08	TYPE OR PRINT	Name YNJ MANAGEMENT LLC	D Employer identification number **-***7732
B Business activity code number (see instructions) 561110		Number, street, and room or suite no. If a P.O. box, see instructions. 4055 JACKPOT RD	E Date incorporated 08/08/2008
C Check if Sch. M-3 attached <input type="checkbox"/>		City or town, state or province, country, and ZIP or foreign postal code JACKPOT RD OH 43123	F Total assets (see instructions) \$ 632,473

G Is the corporation electing to be an S corporation beginning with this tax year? See instructions. ☐ Yes ☒ No

H Check if: (1) ☐ Final return (2) ☐ Name change (3) ☐ Address change (4) ☐ Amended return (5) ☐ S election termination

I Enter the number of shareholders who were shareholders during any part of the tax year → 1

J Check if corporation: (1) ☐ Aggregated activities for section 465 at-risk purposes (2) ☐ Grouped activities for section 469 passive activity purposes

Caution: Include **only** trade or business income and expenses on lines 1a through 21. See the instructions for more information.

Income	1a Gross receipts or sales	1a	274,329	
	b Returns and allowances	1b		
	c Balance. Subtract line 1b from line 1a	1c		274,329
	2 Cost of goods sold (attach Form 1125-A)	2		
	3 Gross profit. Subtract line 2 from line 1c	3		274,329
	4 Net gain (loss) from Form 4797, line 17 (attach Form 4797)	4		
Deductions (see instructions for limitations)	5 Other income (loss) (see instructions—attach statement)	5		
	6 Total income (loss). Add lines 3 through 5	6		274,329
	7 Compensation of officers (see instructions—attach Form 1125-E)	7		73,675
	8 Salaries and wages (less employment credits)	8		
	9 Repairs and maintenance	9		
	10 Bad debts	10		
	11 Rents	11		
	12 Taxes and licenses	12		7,791
	13 Interest (see instructions)	13		12,500
	14 Depreciation not claimed on Form 1125-A or elsewhere on return (attach Form 4562)	14		
	15 Depletion (Do not deduct oil and gas depletion.)	15		
	16 Advertising	16		
	17 Pension, profit-sharing, etc., plans	17		
	18 Employee benefit programs	18		
	19 Other deductions (attach statement) S E E S T M T 1	19		41,134
20 Total deductions. Add lines 7 through 19	20		135,100	
21 Ordinary business income (loss). Subtract line 20 from line 6	21		139,229	
Tax and Payments	22a Excess net passive income or LIFO recapture tax (see instructions)	22a		
	b Tax from Schedule D (Form 1120-S)	22b		
	c Add lines 22a and 22b (see instructions for additional taxes)	22c		
	23a 2021 estimated tax payments and 2020 overpayment credited to 2021	23a		
	b Tax deposited with Form 7004	23b		
	c Credit for federal tax paid on fuels (attach Form 4136)	23c		
	d Add lines 23a through 23c	23d		
	24 Estimated tax penalty (see instructions). Check if Form 2220 is attached	24		
	25 Amount owed. If line 23d is smaller than the total of lines 22c and 24, enter amount owed	25		
	26 Overpayment. If line 23d is larger than the total of lines 22c and 24, enter amount overpaid	26		
27 Enter amount from line 26: Credited to 2022 estimated tax → Refunded →	27			

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 NISHITKUMAR PATEL Date _____ Title PRESIDENT

Paid Preparer Use Only	Print/Type preparer's name NAT RAMMOHAN	Preparer's signature NAT RAMMOHAN	Date 08/25/22	Check <input type="checkbox"/> if self-employed	PTIN *****
	Firm's name → ALLSTATES CPA	Firm's EIN → **-***4486			
	Firm's address → 6660 NORTH HIGH STREET, SUITE 1-H WORTHINGTON, OH 43085	Phone no. 614-854-0850			

For Paperwork Reduction Act Notice, see separate instructions.

Form **1120-S** (2021)

Schedule B 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 ➔ ADMINISTRATIVE b Product or service ➔ FACILITIES SUPPORT		
3 At any time during the tax year, was any shareholder of the corporation a disregarded entity, a trust, an estate, or a nominee or similar person? If "Yes," attach Schedule B-1, Information on Certain Shareholders of an S Corporation		X
4 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 stock issued and outstanding of any foreign or domestic corporation? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (v) below		X

(i) Name of Corporation	(ii) Employer Identification Number (if any)	(iii) Country of Incorporation	(iv) Percentage of Stock Owned	(v) If Percentage in (iv) Is 100%, Enter the Date (if applicable) a Qualified Subchapter S Subsidiary Election Was Made

b Own directly an interest of 20% or more, or own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital 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 (v) below		X
--	--	---

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

5a At the end of the tax year, did the corporation have any outstanding shares of restricted stock? _____ If "Yes," complete lines (i) and (ii) below. (i) Total shares of restricted stock _____ ➔ _____ (ii) Total shares of non-restricted stock _____ ➔ _____		X
b At the end of the tax year, did the corporation have any outstanding stock options, warrants, or similar instruments? _____ If "Yes," complete lines (i) and (ii) below. (i) Total shares of stock outstanding at the end of the tax year _____ ➔ _____ (ii) Total shares of stock outstanding if all instruments were executed _____ ➔ _____		X
6 Has this corporation filed, or is it required to file, Form 8918 , Material Advisor Disclosure Statement, to provide information on any reportable transaction? _____		
7 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.		
8 If the corporation (a) was a C corporation before it elected to be an S corporation or the corporation acquired an asset with a basis determined by reference to the basis of the asset (or the basis of any other property) in the hands of a C corporation, and (b) has net unrealized built-in gain in excess of the net recognized built-in gain from prior years, enter the net unrealized built-in gain reduced by net recognized built-in gain from prior years. See instructions _____ ➔ \$ _____		
9 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	
10 Does the corporation satisfy one or more of the following? See instructions _____ 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.		X
11 Does the corporation satisfy both of the following conditions? _____ a The corporation's total receipts (see instructions) for the tax year were less than \$250,000. b The corporation's total assets at the end of the tax year were less than \$250,000. If "Yes," the corporation is not required to complete Schedules L and M-1.		X

Schedule B Other Information (see instructions) (continued)

	Yes	No
12 During the tax year, did the corporation have any non-shareholder debt that was canceled, was forgiven, or had the terms modified so as to reduce the principal amount of the debt? If "Yes," enter the amount of principal reduction → \$		X
13 During the tax year, was a qualified subchapter S subsidiary election terminated or revoked? If "Yes," see instructions		X
14a Did the corporation make any payments in 2021 that would require it to file Form(s) 1099?		
b If "Yes," did the corporation file or will it file required Forms 1099?		
15 Is the corporation attaching Form 8996 to certify as a Qualified Opportunity Fund?		X
If "Yes," enter the amount from Form 8996, line 15 → \$		

Schedule K Shareholders' Pro Rata Share Items

Total amount

Income (Loss)	1 Ordinary business income (loss) (page 1, line 21)	1	139,229
	2 Net rental real estate income (loss) (attach Form 8825)	2	
	3a Other gross rental income (loss)..... 3a		
	b Expenses from other rental activities (attach statement)..... 3b		
	c Other net rental income (loss). Subtract line 3b from line 3a	3c	
	4 Interest income	4	
	5 Dividends: a Ordinary dividends	5a	
	b Qualified dividends	5b	
	6 Royalties	6	
	7 Net short-term capital gain (loss) (attach Schedule D (Form 1120-S))	7	
Income (Loss)	8a Net long-term capital gain (loss) (attach Schedule D (Form 1120-S)).....	8a	
	b Collectibles (28%) gain (loss)	8b	
	c Unrecaptured section 1250 gain (attach statement)..... 8c		
Income (Loss)	9 Net section 1231 gain (loss) (attach Form 4797)	9	
	10 Other income (loss) (see instructions) Type →	10	
	11 Section 179 deduction (attach Form 4562)	11	
	12a Charitable contributions	12a	
Deduction	b Investment interest expense.....	12b	
	c Section 59(e)(2) expenditures Type →	12c	
	d Other deductions (see instructions) Type →	12d	
Credit	13a Low-income housing credit (section 42(j)(5))	13a	
	b Low-income housing credit (other)	13b	
	c Qualified rehabilitation expenditures (rental real estate) (attach Form 3468, if applicable)	13c	
	d Other rental real estate credits (see instructions) ... Type →	13d	
	e Other rental credits (see instructions) Type →	13e	
	f Biofuel producer credit (attach Form 6478)	13f	
International Transactions	g Other credits (see instructions) Type →	13g	
	14 Attach Schedule K-2 (Form 1120-S), Shareholders' Pro Rata Share Items—International, and check this box to indicate you are reporting items of international tax relevance..... → <input type="checkbox"/>		
Alternative Minimum Tax (AMT)	15a Post-1986 depreciation adjustment	15a	
	b Adjusted gain or loss	15b	
	c Depletion (other than oil and gas)	15c	
	d Oil, gas, and geothermal properties – gross income	15d	
	e Oil, gas, and geothermal properties – deductions	15e	
	f Other AMT items (attach statement)	15f	
Items Affecting Shareholder Basis	16a Tax-exempt interest income	16a	
	b Other tax-exempt income	16b	
	c Nondeductible expenses	16c	15,216
	d Distributions (attach statement if required) (see instructions)	16d	145,019
	e Repayment of loans from shareholders	16e	
	f Foreign taxes paid or accrued	16f	

Schedule K Shareholders' Pro Rata Share Items (continued)		Total amount	
Other Information	17a Investment income	17a	
	b Investment expenses	17b	
	c Dividend distributions paid from accumulated earnings and profits	17c	
	d Other items and amounts (attach statement) S E E S T A T E M E N T 2		
Reconciliation	18 Income (loss) reconciliation. Combine the amounts on lines 1 through 10 in the far right column. From the result, subtract the sum of the amounts on lines 11 through 12d and 16f	18	139,229

Schedule L Balance Sheets per Books		Beginning of tax year		End of tax year	
		(a)	(b)	(c)	(d)
Assets					
1	Cash		11,847		51,756
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) S T M T 3		251,056		550,507
7	Loans to shareholders				
8	Mortgage and real estate loans				
9	Other investments (attach statement)				
		30,210		30,210	
10a	Buildings and other depreciable assets .....	(	30,210	(	30,210
b	Less accumulated depreciation				
11a	Depletable assets	((
b	Less accumulated depletion				
12	Land (net of any amortization)				
		825		825	
13a	Intangible assets (amortizable only) .....	(	825	(	825
b	Less accumulated amortization				
14	Other assets (attach statement)				
15	Total assets		293,113		632,473
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		153,500		499,900
21	Other liabilities (attach statement) S T M T 4		254,114		268,080
22	Capital stock		1,345		1,345
23	Additional paid-in capital				
24	Retained earnings		-115,846		-136,852
25	Adjustments to shareholders' equity (attach statement)				
26	Less cost of treasury stock	((
27	Total liabilities and shareholders' equity		293,113		632,473

Schedule M-1 Reconciliation of Income (Loss) per Books With Income (Loss) per Return**Note:** The corporation may be required to file Schedule M-3. See instructions.

1 Net income (loss) per books	124,013	5 Income recorded on books this year not included on Schedule K, lines 1 through 10 (itemize):	
2 Income included on Schedule K, lines 1, 2, 3c, 4, 5a, 6, 7, 8a, 9, and 10, not recorded on books this year (itemize)		a Tax-exempt interest \$	
3 Expenses recorded on books this year not included on Schedule K, lines 1 through 12 and 16f (itemize):		6 Deductions included on Schedule K, lines 1 through 12 and 16f, not charged against book income this year (itemize):	
a Depreciation \$		a Depreciation \$	
b Travel and entertainment \$			
STMT 5 15,216	15,216	7 Add lines 5 and 6	
4 Add lines 1 through 3	139,229	8 Income (loss) (Schedule K, line 18). Subtract line 7 from line 4.	139,229

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

	(a) Accumulated adjustments account	(b) Shareholders' undistributed taxable income previously taxed	(c) Accumulated earnings and profits	(d) Other adjustments account
1 Balance at beginning of tax year				
2 Ordinary income from page 1, line 21	139,229			
3 Other additions				
4 Loss from page 1, line 21	()			
5 Other reductions	()			(15,216)
6 Combine lines 1 through 5	139,229			-15,216
7 Distributions	139,229			
8 Balance at end of tax year. Subtract line 7 from line 6	0			-15,216

Form **1120-S** (2021)

Schedule K-1
(Form 1120-S)

Department of the Treasury
Internal Revenue Service

2021

For calendar year 2021, or tax year

beginning ending

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

See separate instructions.

☐ Final K-1

☐ Amended K-1

OMB No. 1545-0123

Part III Shareholder's Share of Current Year Income, Deductions, Credits, and Other Items			
1	Ordinary business income (loss) 139,229	13	Credits
2	Net rental real estate income (loss)		
3	Other net rental income (loss)		
4	Interest income		
5a	Ordinary dividends		
5b	Qualified dividends	14	Schedule K-3 is attached if checked <input type="checkbox"/>
6	Royalties	15	Alternative minimum tax (AMT) items
7	Net short-term capital gain (loss)		
8a	Net long-term capital gain (loss)		
8b	Collectibles (28%) gain (loss)		
8c	Unrecaptured section 1250 gain		
9	Net section 1231 gain (loss)	16 C*	Items affecting shareholder basis 15,216
10	Other income (loss)	D	145,019
		17 V*	Other information STMT
11	Section 179 deduction	AC*	STMT
12	Other deductions		
18	More than one activity for at-risk purposes*		
19	More than one activity for passive activity purposes*		
* See attached statement for additional information.			

Part I Information About the Corporation	
A	Corporation's employer identification number **-***7732
B	Corporation's name, address, city, state, and ZIP code YNJ MANAGEMENT LLC 4055 JACKPOT RD JACKPOT RD OH 43123
C	IRS Center where corporation filed return E-FILE
D	Corporation's total number of shares Beginning of tax year End of tax year.....

Part II Information About the Shareholder	
E	Shareholder's identifying number **-***-****
F	Shareholder's name, address, city, state, and ZIP code NISHITKUMAR PATEL 4055 JCKPOT RD GROVE CITY OH 43123
G	Current year allocation percentage 100.000000 %
H	Shareholder's number of shares Beginning of tax year End of tax year.....
I	Loans from shareholder Beginning of tax year \$ <input type="text"/> End of tax year..... \$ <input type="text"/>

For IRS Use Only	

Section 199A Information Worksheet

Form **1120-S**

2021

For calendar year 2021 or tax year beginning , ending

Name

YNJ MANAGEMENT LLC

Employer Identification Number

-*7732

	Activity Description	Pass-Through Entity EIN	PTP	Aggregated	SSTB
Column A	PAGE 1 ACTIVITY				
Column B					
Column C					
Column D					
Column E					

	Column A	Column B	Column C	Column D	Column E
QBI or Qualified PTP items:					
Ordinary business income (loss)	139,229				
Net rental real estate income (loss)					
Other net rental income (loss)					
Royalty income (loss)					
Section 1231 gain (loss)					
Other income (loss)					
Section 179 deduction					
Other deductions					
W-2 wages	73,675				
Qualified property					
Other Information:					
QBI allocable to cooperative pmts received					
W-2 wages allocable to qualified payments					
Section 199A(g) deduction					
Section 199A REIT dividends					

Federal Statements

FYE: 12/31/2021

Statement 1 - Form 1120-S, Page 1, Line 19 - Other Deductions

<u>Description</u>	<u>Amount</u>
ACCOUNTING FEES	\$ 1,500
COMPUTER EXPENSE	
LEGAL & PROFESSIONAL FEE	17,751
AUTO EXPENSE	8,602
BANK & CREDIT CARD CHARGES	102
DUES & SUBSCRIPTIONS	949
INSURANCE	4,766
OFFICE SUPPLIES	2,489
PAYROLL FEES	745
TRAVEL EXPENSE	4,230
TOTAL	\$ <u>41,134</u>

Statement 2 - Form 1120-S, Page 4, Schedule K, Line 17d - Other Items and Amounts

<u>Description</u>	<u>Amount</u>
SECTION 199A INFORMATION - SEE ATTACHED WRK	\$

Statement 3 - Form 1120-S, Page 4, Schedule L, Line 6 - Other Current Assets

<u>Description</u>	<u>Beginning of Year</u>	<u>End of Year</u>
INTERCOMPANY TRANSFERS	\$ 251,056	\$ 550,507
TOTAL	\$ <u>251,056</u>	\$ <u>550,507</u>

Statement 4 - Form 1120-S, Page 4, Schedule L, Line 21 - Other Liabilities

<u>Description</u>	<u>Beginning of Year</u>	<u>End of Year</u>
LOAN:CHIRAG PATEL	\$ 50,000	\$
LOAN:DIPESH PATEL	50,000	4,000
LOAN:NISHANT PATEL	80,000	80,000
LOAN:PRAVINKUMAR PATEL	25,000	
LOAN:SIDHARTH PATEL	45,000	
LOAN:NASH PATEL	2,000	184,080
OVERDRAFT PROTECTION	2,114	
TOTAL	\$ <u>254,114</u>	\$ <u>268,080</u>

Statement 5 - Form 1120-S, Page 5, Schedule M-1, Line 3 - Expenses on Books Not on Return

<u>Description</u>	<u>Amount</u>
OFFICER LIFE INS PREMIUMS	\$ 15,216
TOTAL	\$ <u>15,216</u>

263257732 YNJ MANAGEMENT LLC

**-*7732

Federal Statements

FYE: 12/31/2021

Form 1120-S, Page 5, Schedule M-2, Line 5(a) - Other Reductions

<u>Description</u>	<u>Amount</u>
ADJUSTMENT TO EQUITY	\$ <u> </u>
TOTAL	\$ <u> 0</u>

263257732 YNJ MANAGEMENT LLC

-*7732

FYE: 12/31/2021

Federal Statements

NISHITKUMAR PATEL

Schedule K-1, Box 16, Code C - Nondeductible Expenses

<u>Description</u>	<u>Shareholder Amount</u>
OFFICER LIFE PREMIUMS	\$ 15,216
TOTAL	<u>\$ 15,216</u>

Schedule K-1, Box 17, Code AC - Gross Receipts for Section 448(c)

<u>Description</u>	<u>Shareholder Amount</u>
8990 GROSS RECEIPTS FOR 2020	162,565
8990 GROSS RECEIPTS FOR 2019	325,033
8990 GROSS RECEIPTS FOR 2018	244,474

Schedule K-1, Box 17, Code V	
Form 1120-S Schedule K-1	Shareholder's Section 199A Information
2021	
For calendar year 2021 or tax year beginning , ending	

Name YNJ MANAGEMENT LLC NISHITKUMAR PATEL	Taxpayer Identification Number **-***7732 **-***-***
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Activity Description		Pass-Through Entity EIN	PTP	Aggregated	SSTB
Column A	PAGE 1 ACTIVITY				
Column B					
Column C					
Column D					
Column E					

QBI or Qualified PTP items:	Column A	Column B	Column C	Column D	Column E
Ordinary business income (loss)	139,229				
Net rental real estate income (loss)					
Other net rental income (loss)					
Royalty income (loss)					
Section 1231 gain (loss)					
Other income (loss)					
Section 179 deduction					
Other deductions					
W-2 wages	73,675				
Qualified property					
Other Information:					
QBI allocable to cooperative pmts received					
W-2 wages allocable to qualified payments					
Section 199A(g) deduction					
Section 199A REIT dividends					

Federal Asset Report

Form 1120-S, Page 1

<u>Asset</u>	<u>Description</u>	<u>Date</u> <u>In Service</u>	<u>Cost</u>	<u>Bus</u> <u>%</u>	<u>Sec</u> <u>179</u>	<u>Bonus</u>	<u>Basis</u> <u>for Depr</u>	<u>Per</u> <u>Conv Meth</u>	<u>Prior</u>	<u>Current</u>
<u>Listed Property:</u>										
2	2010 Lexus	1/01/15	30,210			X	19,050	5 HY 200DB	18,759	0
	Retired		<u>30,210</u>				<u>19,050</u>		<u>18,759</u>	<u>0</u>
<u>Amortization:</u>										
1	Organizational Cost	8/08/08	<u>825</u>				<u>825</u>	15 MOAmort	<u>825</u>	<u>0</u>
			<u>825</u>				<u>825</u>		<u>825</u>	<u>0</u>
Grand Totals			31,035				19,875		19,584	0
Less: Dispositions and Transfers			0				0		0	0
Less: Start-up/Org Expense			<u>0</u>				<u>0</u>		<u>0</u>	<u>0</u>
Net Grand Totals			<u>31,035</u>				<u>19,875</u>		<u>19,584</u>	<u>0</u>

263257732 YNJ MANAGEMENT LLC

**-*7732

Bonus Depreciation Report

FYE: 12/31/2021

Form 1120-S, Page 1

Asset	Property Description	Date In Service	Tax Cost	Bus Pct	Tax Sec 179 Exp	Current Bonus	Prior Bonus	Tax - Basis for Depr
2	2010 Lexus	1/01/15	30,210	100	0	0	11,160	19,050
Grand Total			<u>30,210</u>		<u>0</u>	<u>0</u>	<u>11,160</u>	<u>19,050</u>

263257732 YNJ MANAGEMENT LLC

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FYE: 12/31/2021

AMT Asset Report

Form 1120-S, Page 1

<u>Asset</u>	<u>Description</u>	<u>Date</u> <u>In Service</u>	<u>Cost</u>	<u>Bus</u> <u>%</u>	<u>Sec</u> <u>179 Bonus</u>	<u>Basis</u> <u>for Depr</u>	<u>Per Conv Meth</u>	<u>Prior</u>	<u>Current</u>
Listed Property:									
2	2010 Lexus	1/01/15	30,210		X	19,050	5 HY 200DB	27,600	0
	Retired								
			<u>30,210</u>			<u>19,050</u>		<u>27,600</u>	<u>0</u>
Grand Totals			30,210			19,050		27,600	0
Less: Dispositions and Transfers			<u>0</u>			<u>0</u>		<u>0</u>	<u>0</u>
Net Grand Totals			<u>30,210</u>			<u>19,050</u>		<u>27,600</u>	<u>0</u>

263257732 YNJ MANAGEMENT LLC

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FYE: 12/31/2021

Depreciation Adjustment Report

All Business Activities

Form	Unit	Asset	Description	Tax	AMT	AMT Adjustments/ Preferences
<u>MACRS Adjustments:</u>						
Page 1	1	2	2010 Lexus	<u>0</u>	<u>0</u>	<u>0</u>
				<u>0</u>	<u>0</u>	<u>0</u>

<u>Asset</u>	<u>Description</u>	<u>Date In Service</u>	<u>Cost</u>	<u>Tax</u>	<u>AMT</u>
--------------	--------------------	------------------------	-------------	------------	------------

Listed Property:

2	2010 Lexus	1/01/15	<u>30,210</u>	<u>0</u>	<u>0</u>
			<u>30,210</u>	<u>0</u>	<u>0</u>

Amortization:

1	Organizational Cost	8/08/08	<u>825</u>	<u>0</u>	<u>0</u>
			<u>825</u>	<u>0</u>	<u>0</u>

Grand Totals

			<u>31,035</u>	<u>0</u>	<u>0</u>
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Form 1120-S	Schedule K-1 Summary Worksheet	2021
Name YNJ MANAGEMENT LLC		Employer Identification Number **-***7732

	Shareholder Name	SSN/EIN
Column A	NISHITKUMAR PATEL	***-**-****
Column B		
Column C		
Column D		

	Schedule K Items	Column A	Column B	Column C	Column D	SCH K TOTAL
1	Ordinary income	139,229				139,229
2	Net rental RE inc					
3c	Net other rental inc					
4	Interest income					
5a	Ordinary dividends					
5b	Qualified dividends					
6	Royalties					
7	Net ST capital gain					
8a	Net LT capital gain					
8b	Collectibles 28% gain					
8c	Unrecap Sec 1250					
9	Net Sec 1231 gain					
10	Other income (loss)					
11	Sec 179 deduction					
12a	Contributions					
12b	Invest interest exp					
12c	Sec 59(e)(2) exp					
12d	Other deductions					
13a	Low-inc house 42j5					
13b	Low-inc house other					
13c	Qualif rehab exp					
13d	Rental RE credits					
13e	Other rental credits					
13f	Biofuel credit					
13g	Other credits					
15a	Depr adjustment					
15b	Adjusted gain (loss)					
15c	Depletion					
15d	Inc-oil/gas/geoth					
15e	Ded-oil/gas/geoth					
15f	Other AMT items					
16a	Tax-exempt interest					
16b	Other tax-exempt					
16c	Nonded expense	15,216				15,216
16d	Distributions	145,019				145,019
16e	Shr loan repmts					
16f	Foreign taxes					
17a	Investment income					
17b	Investment expense					
18	Income (loss)	139,229				139,229

Form 1120-S		Retained Earnings Reconciliation Worksheet		2021
		For calendar year 2021 or tax year beginning , ending		
Name YNJ MANAGEMENT LLC			Employer Identification Number **-***7732	

Schedule L - Retained Earnings

Retained Earnings - Unappropriated (Accumulated E&P)	0
Accumulated Adjustments Account	0
Undistributed Previously Taxed Income	0
Other Adjustments Account	-15,216
Retained Earnings Timing Differences	-121,636
 Schedule L, Line 24 - Retained Earnings	 -136,852

Schedule M-2 - Retained Earnings

	Accumulated Adjustments Account	Undistributed Previously Taxed Income	Accumulated Earnings and Profits	Other Adjustments Account	Retained Earnings Timing Differences	Total Retained Earnings
Beginning of Year	0	0	0	0	-115,846	-115,846
Ordinary Income (Loss)	139,229					139,229
Other Additions						
Other Reductions				15,216		15,216
Distributions	139,229				5,790	145,019
 End of Year	 0	 0	 0	 -15,216	 -121,636	 -136,852

263257732 YNJ MANAGEMENT LLC

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Federal Statements

FYE: 12/31/2021

Form 1120-S, Retained Earnings Reconciliation Worksheet, AAA - Other Reductions

<u>Description</u>	<u>Amount</u>
ADJUSTMENT TO EQUITY	\$ <u> </u>
TOTAL	\$ <u> 0</u>

Form 1120-S, Retained Earnings Reconciliation Worksheet, OAA - Other Reductions

<u>Description</u>	<u>Amount</u>
OFFICER LIFE INS PREMIUMS	\$ <u> 15,216</u>
TOTAL	\$ <u> 15,216</u>

Electronic Filing - PDF Attachment Worksheet

Form **1120/1120-S**

2021

For calendar year 2021 or tax year beginning , ending

Name
YNJ MANAGEMENT LLC

Employer Identification Number
-*7732

Title	Attachment Source	Proforma
AUTOMATICALLY ATTACHED TO RETURN SECTION 199A INFORMATION WORKSHEET	SECTION199AINFORMATIONWORKSHEET.PDF	
SHAREHOLDER SECTION 199A INFORMATION WORKSHEET	SHAREHOLDERSECTION199AINFORMATIONWORKSHEET.PDF	

Form 1120-S	Two Year Comparison Worksheet Page 1	2020 & 2021
Name YNJ MANAGEMENT LLC		Employer Identification Number **-***7732

		2020	2021	Differences
Income	Gross profit percentage	100.0000	100.0000	
	Net receipts	162,565	274,329	111,764
	Cost of goods sold			
	Gross profit	162,565	274,329	111,764
	Net gain (loss) from Form 4797			
	Other income (loss)			
	Total income (loss)	162,565	274,329	111,764
Deductions	Compensation of officers	60,000	73,675	13,675
	Salaries and wages less employment credits	8,462		-8,462
	Repairs and maintenance			
	Bad debts			
	Rents			
	Taxes and licenses	7,905	7,791	-114
	Interest		12,500	12,500
	Depreciation			
	Depletion			
	Advertising			
	Pension, profit-sharing, etc., plans			
	Employee benefit programs			
	Other deductions	54,378	41,134	-13,244
	Total deductions	130,745	135,100	4,355
	Ordinary business income (loss)	31,820	139,229	107,409
Tax and Payments	Excess net passive income or LIFO recapture tax			
	Tax from Schedule D			
	Total tax	0	0	0
	Estimated tax and prior year overpayment credited			
	Tax deposited with Form 7004			
	Credit for federal tax paid on fuels			
	Refund applied for on Form 4466	()	()	
	Total payments and credits			
	Tax due (overpayment)	0	0	0
	Estimated tax penalty from Form 2220			
	Penalties and interest			
Net tax due (overpayment)	0	0	0	
Overpayment credited to next year's estimated tax				
Overpayment refunded				

Form 1120-S	Two Year Comparison Worksheet Page 2	2020 & 2021
Name YNJ MANAGEMENT LLC		Employer Identification Number **-***7732

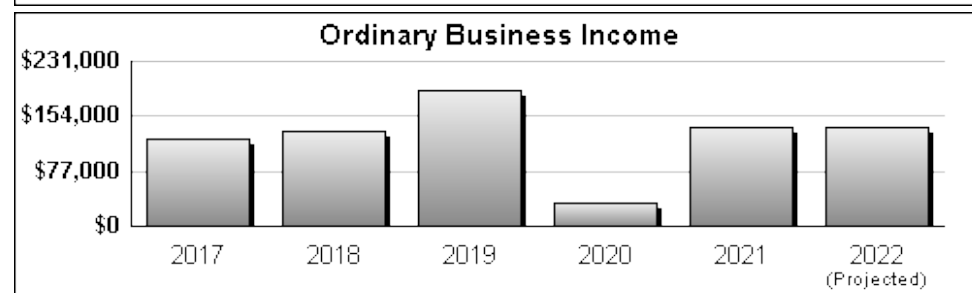
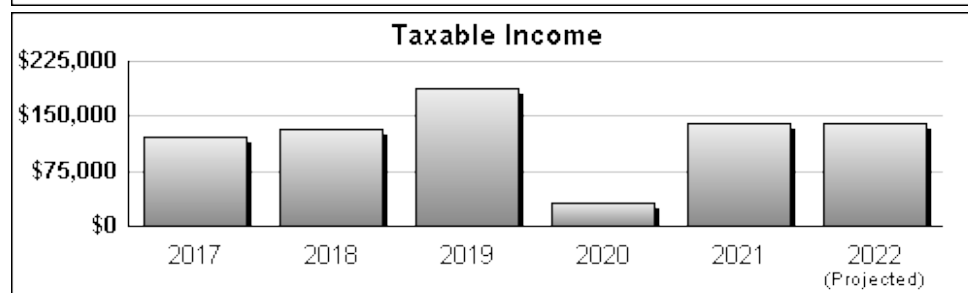
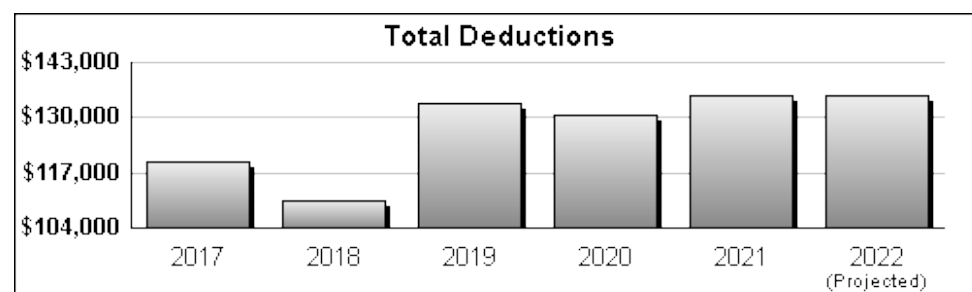
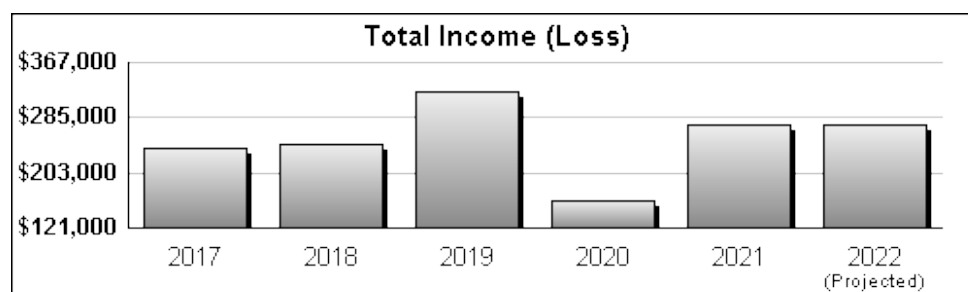
		2020	2021	Differences
Income (Loss)	Ordinary business income (loss)	31,820	139,229	107,409
	Net rental real estate income (loss)			
	Other net rental income (loss)			
	Interest income			
	Dividends			
	Royalties			
	Net short-term capital gain (loss)			
	Net long-term capital gain (loss)			
	Net Section 1231 gain (loss)			
	Other income (loss)			
Deductions	Section 179 deduction			
	Charitable contributions			
	Investment interest expense			
	Section 59(e)(2) expenditures			
	Other deductions			
Credits	Low-income housing credit (Section 42(j)(5))			
	Low-income housing credit (other)			
	Qualified rehabilitation expenditures (rental real estate)			
	Other rental real estate credits			
	Other rental credits			
	Biofuel producer credit			
	Other credits			
AMT Items	Post-1986 depreciation adjustment			
	Adjusted gain or loss			
	Depletion (other than oil and gas)			
	Oil, gas, and geothermal properties-gross income			
	Oil, gas, and geothermal properties-deductions			
	Other AMT items			
Items Affecting S/H Basis	Tax-exempt interest income			
	Other tax-exempt income	2,000		-2,000
	Nondeductible expenses		15,216	15,216
	Distributions	235,693	145,019	-90,674
	Repayment of loans from shareholders			
	Foreign taxes paid or accrued			
Other Information	Investment income			
	Investment expenses			
	Dividend distributions paid from accumulated E&P			
	Income (loss) (if Schedule M-1 is required)	31,820	139,229	107,409

Form 1120-S	Two Year Comparison Worksheet Page 3	2020 & 2021
Name YNJ MANAGEMENT LLC		Employer Identification Number **-***7732

		2020	2021	Differences
Schedule L	Beginning assets	341,486	293,113	-48,373
	Beginning liabilities and equity	341,486	293,113	-48,373
	Ending assets	293,113	632,473	339,360
	Ending liabilities and equity	293,113	632,473	339,360
Schedule M-1	Net income (loss) per books	33,820	124,013	90,193
	Taxable income not on books			
	Book expenses not deducted		15,216	15,216
	Income on books not on return	2,000		-2,000
	Return deductions not on books			
	Income (loss) per return	31,820	139,229	107,409
Schedule M-2 AAA	Balance at beginning of year	86,027		-86,027
	Ordinary income (loss) from page 1	31,820	139,229	107,409
	Other additions			
	Other reductions			
	Distributions	117,847	139,229	21,382
	Balance at end of year			
Schedule M-2 PTI	Balance at beginning of year			
	Distributions			
	Balance at end of year			
Schedule M-2 E&P	Balance at beginning of year			
	Distributions			
	Balance at end of year			
Schedule M-2 OAA	Balance at beginning of year			
	Other additions	2,000		-2,000
	Other reductions		15,216	15,216
	Distributions	2,000		-2,000
	Balance at end of year		-15,216	-15,216
Schedule M-3	Total income (loss) items:			
	Income (loss) per income statement			
	Temporary difference			
	Permanent difference			
	Income (loss) per tax return			
	Total expense/deduction items:			
	Expense per income statement			
	Temporary difference			
	Permanent difference			
	Deduction per tax return			
	Other items with no differences:			
	Income (loss) per income statement			
	Income (loss) per tax return			
	Reconciliation totals:			
	Income (loss) per income statement			
	Temporary difference			
	Permanent difference			
	Income (loss) per tax return			

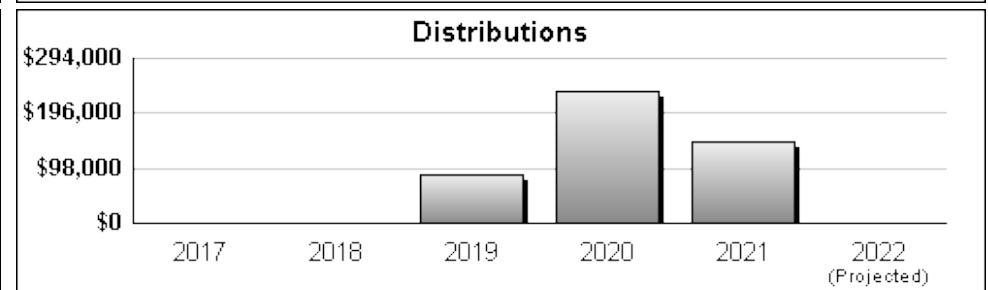
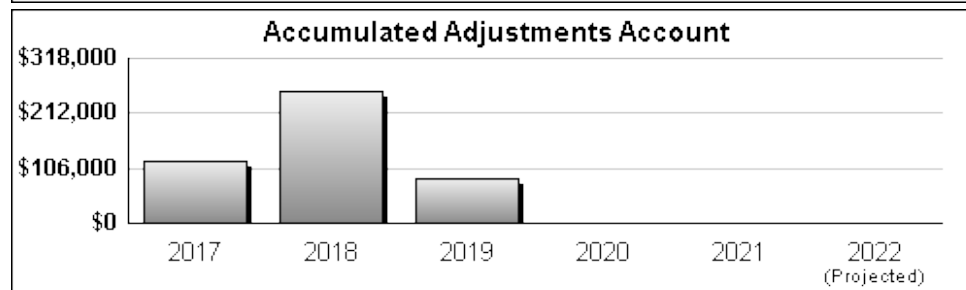
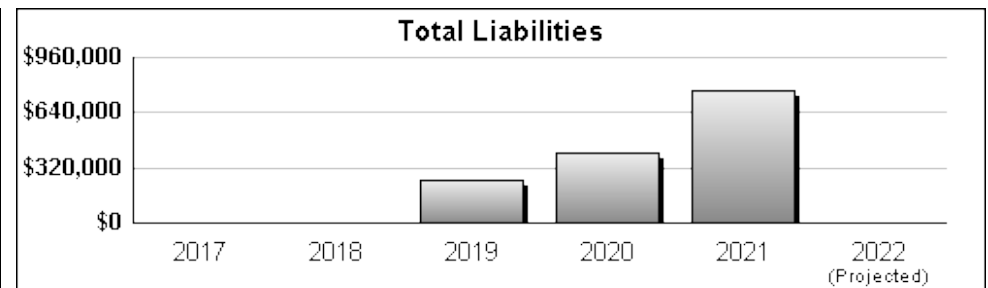
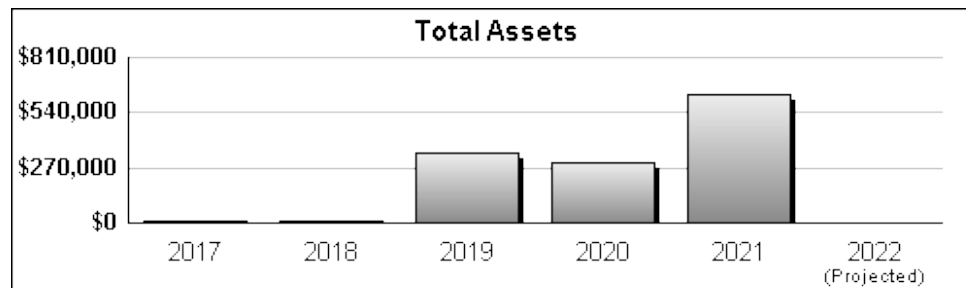
Form **1120-S****Tax Return History Report Page 1****2021**Name
YNJ MANAGEMENT LLCEmployer Identification Number
-*7732

	2017	2018	2019	2020	2021	2022 PROJECTED
Net receipts	241,056	244,474	325,033	162,565	274,329	274,329
Cost of goods sold						
Gross profit	241,056	244,474	325,033	162,565	274,329	274,329
Gross profit percentage	100.0000	100.0000	100.0000	100.0000	100.0000	100.0000
Other income (loss)						
Total income (loss)	241,056	244,474	325,033	162,565	274,329	274,329
Officer compensation	42,000	60,000		60,000	73,675	73,675
Salaries and wages			60,000	8,462		
Bad debts						
Taxes and licenses	5,008	7,738	8,965	7,905	7,791	7,791
Interest	417		4,550		12,500	12,500
Depreciation	3,050					
Depletion (other than oil and gas)						
Pension and employee benefits	18,000					
Other deductions	51,066	42,825	59,988	54,378	41,134	41,134
Total deductions	119,541	110,563	133,503	130,745	135,100	135,100
Ordinary business income (loss)	121,515	133,911	191,530	31,820	139,229	139,229



Form **1120-S****Tax Return History Report Page 2****2021**Name
YNJ MANAGEMENT LLCEmployer Identification Number
-*7732

	2017	2018	2019	2020	2021	2022 PROJECTED
Ordinary business income (loss)	121,515	133,911	191,530	31,820	139,229	139,229
Net rental income (loss)						
Interest, dividends and royalties						
Net capital gain (loss)						
Net Section 1231 gain (loss)						
Other income (loss)						
Section 179 deduction						
Charitable contributions		325	4,900			
Other deductions						
Foreign taxes paid or accrued						
S Corporation taxable income (loss)	121,515	133,586	186,630	31,820	139,229	139,229
Total assets	8,701	8,701	341,486	293,113	632,473	
Total liabilities			254,114	407,614	767,980	
Net equity	8,701	8,701	87,372	-114,501	-135,507	
S Corporation book income (loss)	118,288	133,586	186,630	33,820	124,013	
Accumulated earnings & profits						
Accumulated adjustments account	121,038	254,624	86,027			
Retained earnings timing differences				-115,846	-121,636	
Distributions from S Corporation earnings			87,174	235,693	145,019	
Dividend distributions						



Shareholder's Basis Worksheet Page 1

Form **1120-S**
Schedule K-1

For calendar year 2021 or tax year beginning

, ending

2021Name YNJ MANAGEMENT LLC
NISHITKUMAR PATEL

Taxpayer Identification Number

-*7732
-**-**Stock Basis**

1. Beginning of year stock basis	152,207
2. Capital contributions	
Additions:	
3. Ordinary business income	139,229
4. Net rental income	
5. Interest, dividends, royalties and net capital gains	
6. Net Section 1231 gain	
7. Tax-exempt interest and other income	
8. Other income	
9. Gain on disposal of Section 179 assets.....	
Total of line 3 through line 9	139,229
10. Other increases	
11. Subtotal (Add line 1 through line 10)	291,436
Subtractions:	
12. Distributions	145,019
13. Total losses and deductions applied against stock basis (See Shareholder's Basis Worksheet Page 2)	15,216
14. Other decreases	
15. Amount used to restore loan basis	131,201
16. End of year stock basis (Subtract the sum of lines 12 through 15 from line 11)	

Loan Basis

17. Beginning of year loan basis	
18. Loans to corporation	
19. Loan basis restored - amount used in prior years to offset losses	
20. Other increases	
21. Loan repayments	
22. Total losses and deductions applied against loan basis (See Shareholder's Basis Worksheet Page 2)	
23. Other decreases	
24. End of year loan basis (Subtract the sum of lines 21 through 23 from the sum of lines 17 through 20)	0
25. End of year stock and loan basis (Add line 16 and line 24).....	131,201
Principal amount of loan owed to shareholder at end of the year	0

Gain Recognized on Excess Distributions

26. Distributions	145,019
27. Stock basis before distributions and loss items	291,436
28. Gain recognized on excess distributions (Subtract line 27 from line 26)	* 0

Gain Recognized on Repayment of Shareholder Loan

29. Loan basis at beginning of tax year	
30. Loan basis restored - amount used in prior years to offset losses	
31. Loan basis before loan repayment (Add line 29 and line 30)	
32. Shareholder loan at beginning of tax year	
33. Loan repayments to shareholder during tax year	
34. Nontaxable return of loan basis ((Line 31 divided by line 32) multiplied by line 33)	
35. Gain recognized on repayment of shareholder loan (Subtract line 34 from line 33)	

* NO GAIN RECOGNIZED IN CURRENT YEAR.

Note to shareholder: This worksheet was prepared based on corporation records. Please consult with your tax advisor for adjustments.

Shareholder's Basis Worksheet Page 2

Form **1120-S**
Schedule K-1

For calendar year 2021 or tax year beginning

, ending

2021Name
YNJ MANAGEMENT LLC
NISHITKUMAR PATELTaxpayer Identification Number
-*7732
-**-*

Loss Allocated to Stock and Loan Basis

	Suspended Losses	Current Year Loss	Total Loss	Percent	Allowed Stock Loss	Disallowed Loss	Percent	Allowed Loan Loss	Loss to Carryforward	Total Allowed Loss
Nondeductible noncap expenses		15,216	15,216	100.00	15,216					15,216
Deductible items:										
Ordinary business loss										
Net rental real estate loss										
Other net rental loss										
Short-term capital loss										
Long-term capital loss										
Net Section 1231 loss										
Other portfolio loss										
Other losses										
Section 179 expense										
Cash contributions (60%)										
Cash contributions (30%)										
Noncash contributions (50%)										
Qual conserv contrib (50%)										
Noncash contributions (30%)										
Cap gain prop 50% org (30%)										
Cap gain prop (20%)										
Qual conserv contrib (100%)										
Qual cash contribution										
Portfolio deductions										
Investment interest expense										
Deductions-royalty income										
Section 59(e)(2) expend										
Preproductive period exp										
Reforestation expense ded										
Other deductions										
Foreign taxes										
Loss on disposal of 179 assets										
Total deductible items										
Total nonded and deductible items		15,216	15,216		15,216					15,216

Note to shareholder: This worksheet was prepared based on corporation records. Please consult with your tax advisor for adjustments.

Federal Statements

FYE: 12/31/2021

Form 1120-S, Page 1, Line 1a - Gross Receipts or Sales

<u>Description</u>	<u>Amount</u>
	\$ <u>274,329</u>
TOTAL	\$ <u><u>274,329</u></u>

Form 1120-S, Page 1, Line 12 - Taxes and Licenses

<u>Description</u>	<u>Amount</u>
PAYROL TAXES	\$ 5,768
CAT TAXES	150
OTHER TAXES	<u>1,873</u>
TOTAL	\$ <u><u>7,791</u></u>

Form 1120-S, Page 1, Line 13 - Interest

<u>Description</u>	<u>Amount</u>
	\$ <u>12,500</u>
TOTAL	\$ <u><u>12,500</u></u>

Form 1120-S, Page 3, Schedule K, Line 16c - Nondeductible Expenses

<u>Description</u>	<u>Amount</u>
OFFICER LIFE PREMIUMS	\$ <u>15,216</u>
TOTAL	\$ <u><u>15,216</u></u>

Form 1120-S, Page 4, Schedule L, Line 20 - Mortgages, Notes, Bonds Payable in One Year or More

<u>Description</u>	<u>Beginning of Year</u>	<u>End of Year</u>
EIDL LOAN	\$ 141,000	\$ 499,900
PPP LOAN	<u>12,500</u>	
TOTAL	\$ <u><u>153,500</u></u>	\$ <u><u>499,900</u></u>

Ohio Cities Return Summary

For calendar year 2020, or taxable period beginning
YNJ MANAGEMENT LLC

, and ending
26-3257732

RITA

Taxable Income

Fed taxable income	31,820
Items not deductible	0
Items not taxable	0
Adjusted net income	31,820
Apportionment %	100.0000
Apportioned income	31,820
Pre-2017 NOL ded	0
Taxable Income	<u><u>31,820</u></u>

Taxable Income

Fed taxable income	
Items not deductible	
Items not taxable	
Adjusted net income	
Apportionment %	
Apportioned income	
Pre-2017 NOL ded	
Taxable Income	<u><u></u></u>

Taxable Income

Fed taxable income	
Items not deductible	
Items not taxable	
Adjusted net income	
Apportionment %	
Apportioned income	
Pre-2017 NOL ded	
Taxable Income	<u><u></u></u>

Tax, Payments, Credits

Tax	636
Interest/Penalty	0
Payments applied	3,600
Amount due/(op)	<u><u>-2,964</u></u>
Overpymnt applied	<u><u>2,964</u></u>

Tax, Payments, Credits

Tax	
Interest/Penalty	
Payments applied	
Amount due/(op)	<u><u></u></u>
Overpymnt applied	<u><u></u></u>

Tax, Payments, Credits

Tax	
Interest/Penalty	
Payments applied	
Amount due/(op)	<u><u></u></u>
Overpymnt applied	<u><u></u></u>

Next Year's Estimates

1st estimate	0
2nd estimate	0
3rd estimate	0
4th estimate	0
Total	<u><u>0</u></u>

Next Year's Estimates

1st estimate	
2nd estimate	
3rd estimate	
4th estimate	
Total	<u><u></u></u>

Next Year's Estimates

1st estimate	
2nd estimate	
3rd estimate	
4th estimate	
Total	<u><u></u></u>

Apportionment Percentage

Property	
Payroll	
Sales	
Average	<u><u>100.0000</u></u>

Apportionment Percentage

Property	
Payroll	
Sales	
Average	<u><u></u></u>

Apportionment Percentage

Property	
Payroll	
Sales	
Average	<u><u></u></u>

**FORM
20-EXT**Regional Income Tax Agency
**Net Profit Estimated Income Tax
and/or Extension of Time to File****RITA**

REGIONAL INCOME TAX AGENCY

800.860.7482
TDD 440.526.5332
ritaohio.comFed. ID #: 26-3257732Name: YNJ MANAGEMENT LLCAddress #: 4055 Street: JACKPOT RD Suite: _____City: JACKPOT RD State: OH Zip: 43123Phone #: 614-394-2687☐ Check this box if you are updating your Net Profit Annual Estimated Income Tax Liability and complete Section 1 below. Do NOT check this box if you are only making an Estimated Tax payment.**SECTION 1: ESTIMATED INCOME TAX COMPUTATION and ESTIMATED PAYMENT**

Use this section to report or update Net Profit Estimated Income Tax Liabilities and/or make an estimated payment. If your business anticipates owing \$200 or more in municipal income tax, you must estimate your taxes and make quarterly payments. If your estimated payments are either less than 90% of the tax due, or not equal to or greater than your prior year's total tax liability, you will be subject to penalty and interest.

Tax Year Ending 12/31/211. Total Estimated Tax (distribute to each applicable municipality in Line 5) \$ 636 .00

Note: Line 1 must equal Line 6

2. Less Prior Year Credit \$ 2,964 .003. Total Estimated Tax Due \$ 0 .004. Estimated Payment (not less than 1/4 of Line 3) \$ 0 .00

Note: Make check payable to RITA. See below for mailing address

5. Distribute Estimated Tax from Line 1 above (if additional space is needed, attach a schedule)

► Municipality:	Amount:
<u>GROVE CITY</u>	\$ <u>636</u> .00
_____	\$ _____ .00
_____	\$ _____ .00
_____	\$ _____ .00
_____	\$ _____ .00
_____	\$ _____ .00
_____	\$ _____ .00
_____	\$ _____ .00
_____	\$ _____ .00
6. Total Estimated Tax distribution from Line 5 (Line 6 must equal Line 1)	\$ <u>636</u> .00

Mail to:
REGIONAL INCOME TAX AGENCY
P.O. BOX 94582
CLEVELAND, OH 44101-4582

Fax: 440.922.3536

YNJ MANAGEMENT LLC

Fed. ID #: 26-3257732

Phone #: 614-394-2687

SECTION 2: EXTENSION OF TIME TO FILE

If your business has requested or received an extension to file your federal income tax return, your Net Profit municipal income tax return is extended as well. It is not necessary to file a copy of your federal extension with RITA by the annual filing due date. Attach a copy of the federal extension when filing your Net Profit municipal income tax return on or before the extended due date.

If you have not requested or received a federal income tax filing extension, you may receive a six-month extension for filing your Net Profit municipal income tax return by checking the box below, and submitting this request on or before the filing due date or the 15th day of the fourth month following the taxpayer's fiscal year-end.

An extension to file the annual return is not an extension to pay - the tax owed is still due by the annual filing due date. Please complete Section 3 to pay the tax due for the applicable tax year.

☐ If you have a copy of your federal extension, you do NOT have to fill out this section. Check this box if you have NOT requested or received a federal extension and you are requesting a 6 month extension to file for the tax year ending _____.

SECTION 3: EXTENSION PAYMENT

Tax Year Ending _____

1. Anticipated Tax Balance Due on Net Profit Annual Return \$ _____ .00
(Extension payment)

2. Distribute Tax Balance Due (if additional space is needed, attach a schedule)

Note: Do not include estimated tax payments, see Section 1 for Estimated Tax Computation and Payments

► Municipality:	Amount:
_____	\$ _____ .00
_____	\$ _____ .00
_____	\$ _____ .00
_____	\$ _____ .00
_____	\$ _____ .00
_____	\$ _____ .00
_____	\$ _____ .00

3. Total Tax Balance distribution from Line 2 (Line 3 must equal Line 1) _____ .00

SECTION 4: VERIFICATION

Taxpayer – Under penalties of perjury, I declare that to the best of my knowledge and belief, the statements made herein are true and correct.

Signature: _____ Date: _____
NISHITKUMAR PATEL PRESIDENT

Preparer other than taxpayer – Under penalties of perjury, I declare that to the best of my knowledge and belief, the statements made herein are true and correct, that I am authorized by the taxpayer to prepare this Declaration and/or Extension.

Signature of Preparer: NAT RAMMOHAN Date: 09/03/21

Printed Name of Preparer: NAT RAMMOHAN

May RITA discuss this Declaration/Extension with the preparer above?

☒ Yes ☐ No

Mail to:
REGIONAL INCOME TAX AGENCY
P.O. BOX 94582
CLEVELAND, OH 44101-4582

Fax to: 440.922.3536

Form **7004**(Rev. December 2018)
Department of the Treasury
Internal Revenue Service**Application for Automatic Extension of Time To File Certain
Business Income Tax, Information, and Other Returns**

OMB No. 1545-0233

► **File a separate application for each return.**► **Go to www.irs.gov/Form7004 for instructions and the latest information.****Print
or
Type**

Name

YNJ MANAGEMENT LLC

Identifying number

26-3257732

Number, street, and room or suite no. (If P.O. box, see instructions.)

4055 JACKPOT RD

City, town, state, and ZIP code (If a foreign address, enter city, province or state, and country (follow the country's practice for entering postal code).)

JACKPOT RD

OH 43123

Note: File request for extension by the due date of the return. See instructions before completing this form.**Part I Automatic Extension for Certain Business Income Tax, Information, and Other Returns. See instructions.****1** Enter the form code for the return listed below that this application is for 25

Application Is For:	Form Code	Application Is For:	Form Code
Form 706-GS(D)	01	Form 1120-ND (section 4951 taxes)	20
Form 706-GS(T)	02	Form 1120-PC	21
Form 1041 (bankruptcy estate only)	03	Form 1120-POL	22
Form 1041 (estate other than a bankruptcy estate)	04	Form 1120-REIT	23
Form 1041 (trust)	05	Form 1120-RIC	24
Form 1041-N	06	Form 1120S	25
Form 1041-QFT	07	Form 1120-SF	26
Form 1042	08	Form 3520-A	27
Form 1065	09	Form 8612	28
Form 1066	11	Form 8613	29
Form 1120	12	Form 8725	30
Form 1120-C	34	Form 8804	31
Form 1120-F	15	Form 8831	32
Form 1120-FSC	16	Form 8876	33
Form 1120-H	17	Form 8924	35
Form 1120-L	18	Form 8928	36
Form 1120-ND	19		

Part II All Filers Must Complete This Part**2** If the organization is a foreign corporation that does not have an office or place of business in the United States, check here ► ☐**3** If the organization is a corporation and is the common parent of a group that intends to file a consolidated return, check here ► ☐
If checked, attach a statement listing the name, address, and employer identification number (EIN) for each member covered by this application.**4** If the organization is a corporation or partnership that qualifies under Regulations section 1.6081-5, check here ► ☐**5a** The application is for calendar year 2020, or tax year beginning , and ending .**b Short tax year.** If this tax year is less than 12 months, check the reason: ☐ Initial return ☐ Final return
☐ Change in accounting period ☐ Consolidated return to be filed ☐ Other (See instructions—attach explanation.)**6** Tentative total tax 6 0**7** Total payments and credits. See instructions 7 0**8** Balance due. Subtract line 7 from line 6. See instructions 8 0**For Privacy Act and Paperwork Reduction Act Notice, see separate instructions.**Form **7004** (Rev. 12-2018)

Form **27**

Regional Income Tax Agency

RITA Net Profit Tax Return

2020**RITA**

REGIONAL INCOME TAX AGENCY

800.860.7482

TDD 440.526.5332

ritaohio.com

FOR CALENDAR YEAR **2020** OR FISCAL YEAR BEGINNING AND ENDINGThe federal return **MUST** be attached to be considered a complete tax return. Please also attach all applicable schedules and 1099-NEC to avoid delays.

Check if: Initial RITA Return No longer in RITA ☒ Extension
 Amended Return Out of Business

Consolidated Return (Attach Form 851) Alternate Method Federal Business Activity Code # **561110**

Consolidated filer with 80% ownership of a Pass-Through Entity (see Instructions, Page 3)

Business Activity ADMINISTRATIVE

BUSINESS: C CORPORATION PARTNERSHIP LLC SMALL EMPLOYER:

☒ S CORPORATION ESTATE TRUST

Company Name

YNJ MANAGEMENT LLC

Federal Identification Number:

263257732

Address # Street

Suite #

4055 JACKPOT RD

City

State Zip Code

JACKPOT RD

OH 43123

1. INCOME PER ATTACHED FEDERAL RETURN

(per attached Federal Form 1120 (Line 28), 1120S (Sch. K - Line 18), 990T (Line 30), 1065 (Sch. K - Analysis of Net Income (Loss), Page 5 - Line 1), 1041 (Line 17) or the equivalent)

1 31,820

2. A. ITEMS NOT DEDUCTIBLE (from Page 3, Schedule X, Line G)

Add 2A

B. ITEMS NOT TAXABLE (from Page 3, Schedule X, Line Q)

Deduct 2B

C. ENTER EXCESS OF LINE 2A OR 2B

2C

3. A. ADJUSTED FEDERAL TAXABLE INCOME (Line 1 plus or minus Line 2C)

▶ 3A 31,820

B. PRE-APPORTIONED LOSSES FROM TAX YEARS BEGINNING ON OR AFTER 1/1/17 (subject to 50%)

Check this box if utilizing a NOL incurred prior to 1/1/17 first. See instructions. ▶

Checkbox instructions: If you check the box you must use the Worksheet on Page 4 of the Net Profit Instructions. References for Line 3B(i) through Line 4 are found on the worksheet.

i. TOTAL UNUTILIZED PRE-APPORTIONED LOSSES FROM

TAX YEARS BEGINNING ON OR AFTER 1/1/17 ▶ 3B(i)

ii. PRE-APPORTIONED LOSSES FROM TAX YEARS BEGINNING ON OR AFTER 1/1/17 UTILIZED in TAX YEAR 2020

▶ 3B(ii)

iii. Income/Loss Subject to Apportionment (Line 3A less Line 3B(ii))

▶ 3B(iii) 31,820

C. AMOUNT ALLOCABLE TO RITA

If Schedule Y, Page 4 is used 100.000 % of Line 3b(iii)

3C 31,820

D. LESS POST APPORTIONED LOSSES FOR TAX YEAR BEGINNING PRIOR TO 1/1/17

Per previous Municipal Income Tax Returns (schedule must be submitted)

▶ 3D

4. AMOUNT SUBJECT TO MUNICIPAL INCOME TAX (Line 3C less Line 3D)

▶ 4 31,820

5. MUNICIPAL INCOME TAX DUE (see Instructions) NOTE: Must equal Schedule B on Page 2

▶ 5 636

6. A. PAYMENTS ON DECLARATIONS OF ESTIMATED MUNICIPAL INCOME TAX

6A 3,600

B. AMOUNT OF PREVIOUS YEAR CREDIT

6B

C. TOTAL CREDITS ALLOWABLE (Line 6A + 6B)

▶ 6C 3,600

7. A. BALANCE DUE (Line 5 less Line 6C) AMOUNT PAYABLE TO RITA MUST ACCOMPANY THIS FORM

▶ 7A

B. OVERPAYMENT CLAIMED (If Line 6C exceeds Line 5 enter difference here and check the desired box)

7B 2,964

(Cannot be split between refund and credit) Refund

Credit ☒

1022

FORM 27**SCHEDULE B - DISTRIBUTION OF TAX WITHIN RITA MUNICIPALITIES**

TOTAL TAX DISTRIBUTED BELOW MUST EQUAL AMOUNT FROM PAGE 1, LINE 5

Note: For each separate municipality listed below, if Tax Due is \$10 or less, enter -0-.

(if more space is needed, attach additional schedule)

Municipality Name	Taxable Income / Loss	Tax Rate	Tax Due
GROVE CITY	31,820	2.000	636

COMPUTATION OF ESTIMATED TAX**ESTIMATED TAX DISTRIBUTION TOTAL TO LINE 8A**

(if more space is needed, attach additional schedule)

Municipality Name	Taxable Income / Loss	Tax Rate	Tax Due
GROVE CITY	31,800	2.000	636

8. A. ESTIMATED TAX (from distribution above)	8A	636
B. CREDIT (if any) FROM PRIOR YEAR (7B)	8B	2,964
C. LINE 8A LESS LINE 8B	8C	-2,328
D. AMOUNT PAID (not less than 1/4 of estimated tax) (IF LINE 8A IS LEFT BLANK AN ESTIMATE WILL BE CREATED FOR YOU BASED ON YOUR PRIOR YEAR'S TAX LIABILITY AND MUNICIPAL DISTRIBUTION)	8D	0
9. TOTAL OF 7A + 8D	9	

MAKE CHECKS PAYABLE TO RITAThe federal return **MUST** be attached to be considered a complete tax return. In order to avoid processing delays and notices from RITA, please also attach all applicable schedules and 1099-NEC.

I CERTIFY I HAVE EXAMINED THIS RETURN, INCLUDING ACCOMPANYING SCHEDULES AND STATEMENTS AND TO THE BEST OF MY KNOWLEDGE AND BELIEF, IT IS TRUE, CORRECT, COMPLETE, AND THAT THE FIGURES USED HEREIN ARE THE SAME AS USED FOR FEDERAL INCOME TAX PURPOSES.

SIGNATURE OF OFFICER OR PARTNER

NISHITKUMAR PATEL
 PRINT NAME
 PRESIDENT
 TITLE

614-394-2687
 PHONE

DATE

May RITA discuss this return with the preparer shown above?

☒ Yes ☐ No

REMIT RETURN WITH REFUND TO:
 REGIONAL INCOME TAX AGENCY
 P.O. BOX 94652
 CLEVELAND, OH 44101-4652

REMIT RETURN WITH PAYMENT TO:
 REGIONAL INCOME TAX AGENCY
 P.O. BOX 94582
 CLEVELAND, OH 44101-4582

NAT RAMMOHAN
 PREPARER'S SIGNATURE
 NAT RAMMOHAN
 PRINT NAME
 6660 NORTH HIGH STREET, SUITE 1-H
 WORTHINGTON OH 43085
 PREPARER'S ADDRESS
 614-854-0850
 PREPARER'S PHONE
 ALLSTATES CPA
 FIRM NAME

REMIT RETURN WITHOUT PAYMENT
 TO: REGIONAL INCOME TAX AGENCY
 P.O. BOX 89475
 CLEVELAND, OH 44101-6475

SCHEDULE X – ADJUSTMENT TO FEDERAL INCOME TAX RETURN (attach supporting statement for line items utilized below)

ITEMS NOT DEDUCTIBLE

- A. LOSSES THAT DIRECTLY RELATE TO THE SALE, EXCHANGE, OR OTHER DISPOSITION OF AN ASSET DESCRIBED IN 1221 OR 1231 OF THE IRC
- B. TAXES BASED ON INCOME
- C. 5% OF THE AMOUNT DEDUCTED AS INTANGIBLE INCOME EXCLUDING THE PORTION DIRECTLY RELATED TO THE SALE, EXCHANGE, OR OTHER DISPOSITION OF PROPERTY DESCRIBED IN 1221 OF THE IRC
- D. AMOUNTS PAID OR ACCRUED TO QUALIFIED SELF-EMPLOYED RETIREMENT AND HEALTH AND LIFE INSURANCE PLANS FOR OWNERS OR OWNER-EMPLOYEES OF NON-C CORPORATION ENTITIES
- E. REIT'S AND RIC'S - ALL AMOUNTS WITH RESPECT TO DIVIDENDS, DISTRIBUTIONS, OR AMOUNTS SET ASIDE FOR OR CREDITED TO THE BENEFIT OF INVESTORS AND ALLOWED AS A DEDUCTION
- F. OTHER: (ATTACH EXPLANATION)
- G. TOTAL ADDITIONS (ENTER ON PAGE 1, LINE 2A)

ITEMS NOT TAXABLE

- N. INCOME AND GAINS - FEDERALLY REPORTED INCOME AND GAINS FROM IRC 1221 OR 1231 PROPERTY DISPOSITIONS EXCEPT TO THE EXTENT THE INCOME AND GAINS APPLY TO THOSE DESCRIBED IN 1245 OR 1250 OF THE IRC
- O. INTANGIBLE INCOME SUCH AS INTEREST, DIVIDEND, PATENT, AND COPYRIGHT INCOME ALSO INCLUDE ROYALTY INCOME EXCEPT ROYALTIES DERIVED FROM INTEREST IN LAND (i.e. OIL AND GAS RIGHTS, ETC.)
- P. OTHER: PASS-THROUGH INCOME (LOSS)
- Q. TOTAL DEDUCTIONS (ENTER ON LINE 2B)

AFTI WORKSHEET ADJUSTED FEDERAL TAXABLE INCOME

For use by taxpayers that are NOT C Corporations

- (1) Federal Form 1120S (S Corporations) - Sch. K - Line 18 31,820
- (2) Federal Form 1065 (Partnerships, LLC's, LLP's) - Sch. K - Analysis of Net Income (Loss), Page 5 - Line 1
- (3) Federal Form 1041 (Estates, Trusts) - Page 1 - Line 17

	Form 1120S	Form 1065	Form 1041
a) From Federal Return (above)	\$ 31,820	\$	\$
b) Excess 179 Deduction / Carryover			
c) Charitable Contribution - In Excess of 10% Limitation			
d) Other: _____			
e) "ADJUSTED FEDERAL TAXABLE INCOME"	\$ 31,820	\$	\$

SCHEDULE Y - BUSINESS APPORTIONMENT FORMULA (See Instructions)

	A. LOCATED EVERYWHERE	B. RITA MUNICIPALITY	C. PERCENTAGE (B / A)
STEP 1. AVERAGE ORIGINAL COST OF REAL & TANGIBLE PERSONAL PROPERTY	\$ _____	\$ _____	
GROSS ANNUAL RENTALS MULTIPLIED BY 8	\$ _____	\$ _____	
TOTAL OF STEP 1	\$ _____	\$ _____	_____ %
STEP 2. TOTAL WAGES, SALARIES, COMMISSION AND OTHER			
COMPENSATION PAID TO ALL EMPLOYEES	\$ _____	\$ _____	_____ %
STEP 3. GROSS RECEIPTS FROM SALES AND WORK OR			
SERVICES PERFORMED	\$ _____	\$ _____	_____ %
STEP 4. TOTAL OF PERCENTAGES			_____ %
STEP 5. AVERAGE PERCENTAGE (DIVIDE TOTAL PERCENTAGES BY NUMBER OF PERCENTAGES USED)			_____ %

	A. LOCATED EVERYWHERE	B. RITA MUNICIPALITY	C. PERCENTAGE (B / A)
STEP 1. AVERAGE ORIGINAL COST OF REAL & TANGIBLE PERSONAL PROPERTY	\$ _____	\$ _____	
GROSS ANNUAL RENTALS MULTIPLIED BY 8	\$ _____	\$ _____	
TOTAL OF STEP 1	\$ _____	\$ _____	_____ %
STEP 2. TOTAL WAGES, SALARIES, COMMISSION AND OTHER			
COMPENSATION PAID TO ALL EMPLOYEES	\$ _____	\$ _____	_____ %
STEP 3. GROSS RECEIPTS FROM SALES AND WORK OR			
SERVICES PERFORMED	\$ _____	\$ _____	_____ %
STEP 4. TOTAL OF PERCENTAGES			_____ %
STEP 5. AVERAGE PERCENTAGE (DIVIDE TOTAL PERCENTAGES BY NUMBER OF PERCENTAGES USED)			_____ %

	A. LOCATED EVERYWHERE	B. RITA MUNICIPALITY	C. PERCENTAGE (B / A)
STEP 1. AVERAGE ORIGINAL COST OF REAL & TANGIBLE PERSONAL PROPERTY	\$ _____	\$ _____	
GROSS ANNUAL RENTALS MULTIPLIED BY 8	\$ _____	\$ _____	
TOTAL OF STEP 1	\$ _____	\$ _____	_____ %
STEP 2. TOTAL WAGES, SALARIES, COMMISSION AND OTHER			
COMPENSATION PAID TO ALL EMPLOYEES	\$ _____	\$ _____	_____ %
STEP 3. GROSS RECEIPTS FROM SALES AND WORK OR			
SERVICES PERFORMED	\$ _____	\$ _____	_____ %
STEP 4. TOTAL OF PERCENTAGES			_____ %
STEP 5. AVERAGE PERCENTAGE (DIVIDE TOTAL PERCENTAGES BY NUMBER OF PERCENTAGES USED)			_____ %

TOTAL Sum all STEP 5 percentages for each municipality, enter on Page 1, Line 3C _____ %

SCHEDULE Y-1: RECONCILIATION OF SCHEDULE Y WAGES TO WITHHOLDING RETURNS

- Total workplace RITA wages shown on your withholding tax returns filed for the year covered by this return. \$ _____
- Attach explanation of any difference between total wages remitted and total wages shown on Schedule Y above.
- Provide the Company Name and Federal Identification Number under which the withholding tax was remitted, if different than information on page 1.

Company Name _____

Federal Identification Number _____

SCHEDULE Z: PASS-THROUGH DISTRIBUTIVE SHARES OF NET INCOME

Attach a schedule of each partner's/shareholder's name, social security number, distributive share, guaranteed payments (if applicable) and ownership percentage.

SCHEDULE ZZ: CONSOLIDATED RETURN INFORMATION

If filing a consolidated return, you must attach Federal Form 851 or a schedule listing each name, address and employer identification number.

Computation of Federal Taxable IncomeForm **1120-S****2020**

For calendar year 2020 or tax year beginning , ending

Name

YNJ MANAGEMENT LLC

Employer Identification Number

26-3257732

**Taxable Income of an S Corporation Computed as a C Corporation
Used for State Purposes**

1 Ordinary income (loss)	31,820	
2 Net rental real estate income (loss)		
3 Other net rental income (loss)		
4 Interest and dividend income		
5 Royalties		
6 Net capital gain		
7 Net gain (loss) from Form 4797, part II, line 17		
8 Other income		
9 Total income		31,820
10 Investment interest expense		
11 Section 59(e)(2) expenditures		
12 Other deductions		
13 Total deductions		
14 Income before adjustments		31,820
15 Section 179 expense allowable		
16 Charitable contributions (Limited to 10% of taxable income)		
17 Qualified cash contributions (Limited to 25% of taxable income)		
18 Qualified conservation contributions		
19 Taxable income before special deductions		31,820

Form **1120-S****U.S. Income Tax Return for an S Corporation**

OMB No. 1545-0123

2020Department of the Treasury
Internal Revenue Service

Do not file this form unless the corporation has filed or is attaching Form 2553 to elect to be an S corporation.
Go to www.irs.gov/Form1120S for instructions and the latest information.

For calendar year 2020 or tax year beginning , ending

A S election effective date 08/08/08	TYPE OR PRINT	Name YNJ MANAGEMENT LLC	D Employer identification number 26-3257732
B Business activity code number (see instructions) 561110		Number, street, and room or suite no. If a P.O. box, see instructions. 4055 JACKPOT RD	E Date incorporated 08/08/2008
C Check if Sch. M-3 attached <input type="checkbox"/>		City or town, state or province, country, and ZIP or foreign postal code JACKPOT RD OH 43123	F Total assets (see instructions) \$ 293,113

G Is the corporation electing to be an S corporation beginning with this tax year? ☐ Yes ☒ No If "Yes," attach Form 2553 if not already filed**H** Check if: (1) ☐ Final return (2) ☐ Name change (3) ☐ Address change (4) ☐ Amended return (5) ☐ S election termination or revocation**I** Enter the number of shareholders who were shareholders during any part of the tax year 1**J** Check if corporation: (1) ☐ Aggregated activities for section 465 at-risk purposes (2) ☐ Grouped activities for section 469 passive activity purposes**Caution:** Include only trade or business income and expenses on lines 1a through 21. See the instructions for more information.

Income	1a Gross receipts or sales	1a 162,565	1c 162,565
	b Returns and allowances	1b	
	c Balance. Subtract line 1b from line 1a		
	2 Cost of goods sold (attach Form 1125-A)	2	
	3 Gross profit. Subtract line 2 from line 1c	3 162,565	
	4 Net gain (loss) from Form 4797, line 17 (attach Form 4797)	4	
Deductions (see instructions for limitations)	5 Other income (loss) (see instructions—attach statement)	5	19 54,378
	6 Total income (loss). Add lines 3 through 5	6 162,565	
	7 Compensation of officers (see instructions—attach Form 1125-E)	7 60,000	
	8 Salaries and wages (less employment credits)	8 8,462	
	9 Repairs and maintenance	9	
	10 Bad debts	10	
	11 Rents	11	
	12 Taxes and licenses	12 7,905	
	13 Interest (see instructions)	13	
	14 Depreciation not claimed on Form 1125-A or elsewhere on return (attach Form 4562)	14	
	15 Depletion (Do not deduct oil and gas depletion.)	15	
	16 Advertising	16	
	17 Pension, profit-sharing, etc., plans	17	
	18 Employee benefit programs	18	
	19 Other deductions (attach statement) S E E S T M T 1	19 54,378	
	20 Total deductions. Add lines 7 through 19	20 130,745		23e
21 Ordinary business income (loss). Subtract line 20 from line 6	21 31,820		
Tax and Payments	22a Excess net passive income or LIFO recapture tax (see instructions)	22a	23e
	b Tax from Schedule D (Form 1120-S)	22b	
	c Add lines 22a and 22b (see instructions for additional taxes)		
	23a 2020 estimated tax payments and 2019 overpayment credited to 2020	23a	
	b Tax deposited with Form 7004	23b	
	c Credit for federal tax paid on fuels (attach Form 4136)	23c	
	d Reserved for future use	23d	
	e Add lines 23a through 23d		
	24 Estimated tax penalty (see instructions). Check if Form 2220 is attached	24	
	25 Amount owed. If line 23e is smaller than the total of lines 22c and 24, enter amount owed	25	
26 Overpayment. If line 23e is larger than the total of lines 22c and 24, enter amount overpaid	26	27	
27 Enter amount from line 26: Credited to 2021 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.

May the IRS discuss this return with the preparer shown below? See instructions. ☒ Yes ☐ No**Sign Here**

Signature of officer NISHITKUMAR PATEL

Date

PRESIDENT

Title

Paid Preparer Use Only

Print/Type preparer's name

NAT RAMMOHAN

Preparer's signature

NAT RAMMOHAN

Date

09/03/21

Check ☐ if self-employed

PTIN

P01427445

Firm's name ALLSTATES CPA

Firm's EIN 11-3664486

Firm's address 6660 NORTH HIGH STREET, SUITE 1-H
WORTHINGTON, OH 43085

Phone no. 614-854-0850

For Paperwork Reduction Act Notice, see separate instructions.

Form **1120-S** (2020)

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 ▶ <u>ADMINISTRATIVE</u> b Product or service ▶ <u>FACILITIES SUPPORT</u>		
3 At any time during the tax year, was any shareholder of the corporation a disregarded entity, a trust, an estate, or a nominee or similar person? If "Yes," attach Schedule B-1, Information on Certain Shareholders of an S Corporation		X
4 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 stock issued and outstanding of any foreign or domestic corporation? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (v) below		X

(i) Name of Corporation	(ii) Employer Identification Number (if any)	(iii) Country of Incorporation	(iv) Percentage of Stock Owned	(v) If Percentage in (iv) Is 100%, Enter the Date (if any) a Qualified Subchapter S Subsidiary Election Was Made

b Own directly an interest of 20% or more, or own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital 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 (v) below		X
--	--	---

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

5a At the end of the tax year, did the corporation have any outstanding shares of restricted stock? If "Yes," complete lines (i) and (ii) below. (i) Total shares of restricted stock ▶ (ii) Total shares of non-restricted stock ▶		X
b At the end of the tax year, did the corporation have any outstanding stock options, warrants, or similar instruments? If "Yes," complete lines (i) and (ii) below. (i) Total shares of stock outstanding at the end of the tax year ▶ (ii) Total shares of stock outstanding if all instruments were executed ▶		X
6 Has this corporation filed, or is it required to file, Form 8918 , Material Advisor Disclosure Statement, to provide information on any reportable transaction?		
7 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.		
8 If the corporation (a) was a C corporation before it elected to be an S corporation or the corporation acquired an asset with a basis determined by reference to the basis of the asset (or the basis of any other property) in the hands of a C corporation, and (b) has net unrealized built-in gain in excess of the net recognized built-in gain from prior years, enter the net unrealized built-in gain reduced by net recognized built-in gain from prior years. See instructions ▶ \$		
9 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	
10 Does the corporation satisfy one or more of the following? See instructions 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.		X
11 Does the corporation satisfy both of the following conditions? a The corporation's total receipts (see instructions) for the tax year were less than \$250,000. b The corporation's total assets at the end of the tax year were less than \$250,000. If "Yes," the corporation is not required to complete Schedules L and M-1.		X

Schedule B Other Information (see instructions) (continued)

	Yes	No
12 During the tax year, did the corporation have any non-shareholder debt that was canceled, was forgiven, or had the terms modified so as to reduce the principal amount of the debt?		X
If "Yes," enter the amount of principal reduction ▶ \$		
13 During the tax year, was a qualified subchapter S subsidiary election terminated or revoked? If "Yes," see instructions		X
14a Did the corporation make any payments in 2020 that would require it to file Form(s) 1099?		
b If "Yes," did the corporation file or will it file required Forms 1099?		
15 Is the corporation attaching Form 8996 to certify as a Qualified Opportunity Fund?		X
If "Yes," enter the amount from Form 8996, line 15 ▶ \$		

Schedule K Shareholders' Pro Rata Share Items

Total amount

		Total amount
Income (Loss)	1 Ordinary business income (loss) (page 1, line 21)	1 31,820
	2 Net rental real estate income (loss) (attach Form 8825)	2
	3a Other gross rental income (loss)	3a
	b Expenses from other rental activities (attach statement)	3b
	c Other net rental income (loss). Subtract line 3b from line 3a	3c
	4 Interest income	4
	5 Dividends: a Ordinary dividends	5a
	b Qualified dividends	5b
	6 Royalties	6
	7 Net short-term capital gain (loss) (attach Schedule D (Form 1120-S))	7
8a Net long-term capital gain (loss) (attach Schedule D (Form 1120-S))	8a	
	b Collectibles (28%) gain (loss)	8b
	c Unrecaptured section 1250 gain (attach statement)	8c
	9 Net section 1231 gain (loss) (attach Form 4797)	9
10 Other income (loss) (see instructions).....Type ▶	10	
Deductions	11 Section 179 deduction (attach Form 4562)	11
	12a Charitable contributions	12a
	b Investment interest expense	12b
	c Section 59(e)(2) expenditures .....Type ▶	12c
	d Other deductions (see instructions).....Type ▶	12d
Credits	13a Low-income housing credit (section 42(j)(5))	13a
	b Low-income housing credit (other)	13b
	c Qualified rehabilitation expenditures (rental real estate) (attach Form 3468, if applicable)	13c
	d Other rental real estate credits (see instructions) .....Type ▶	13d
	e Other rental credits (see instructions) .....Type ▶	13e
	f Biofuel producer credit (attach Form 6478)	13f
	g Other credits (see instructions) .....Type ▶	13g
Foreign Transactions	14a Name of country or U.S. possession ▶	14a
	b Gross income from all sources	14b
	c Gross income sourced at shareholder level	14c
	Foreign gross income sourced at corporate level	
	d Reserved for future use	14d
	e Foreign branch category	14e
	f Passive category	14f
	g General category	14g
	h Other (attach statement)	14h
	Deductions allocated and apportioned at shareholder level	
	i Interest expense	14i
	j Other	14j
	Deductions allocated and apportioned at corporate level to foreign source income	
	k Reserved for future use	14k
	l Foreign branch category	14l
	m Passive category	14m
	n General category	14n
	o Other (attach statement)	14o
	Other information	
	p Total foreign taxes (check one): ▶ <input type="checkbox"/> Paid <input type="checkbox"/> Accrued.....▶	14p
q Reduction in taxes available for credit (attach statement)	14q	
r Other foreign tax information (attach statement)	14r	

Schedule K Shareholders' Pro Rata Share Items (continued)		Total amount	
Alternative Minimum Tax (AMT) Items	15a Post-1986 depreciation adjustment	15a	
	b Adjusted gain or loss	15b	
	c Depletion (other than oil and gas)	15c	
	d Oil, gas, and geothermal properties – gross income	15d	
	e Oil, gas, and geothermal properties – deductions	15e	
	f Other AMT items (attach statement)	15f	
Items Affecting Shareholder Basis	16a Tax-exempt interest income	16a	
	b Other tax-exempt income	16b	2,000
	c Nondeductible expenses	16c	
	d Distributions (attach statement if required) (see instructions)	16d	235,693
	e Repayment of loans from shareholders	16e	
Other Information	17a Investment income	17a	
	b Investment expenses	17b	
	c Dividend distributions paid from accumulated earnings and profits	17c	
	d Other items and amounts (attach statement) S E E S T A T E M E N T 2		
Reconciliation	18 Income (loss) reconciliation. Combine the amounts on lines 1 through 10 in the far right column. From the result, subtract the sum of the amounts on lines 11 through 12d and 14p	18	31,820

Schedule L Balance Sheets per Books		Beginning of tax year		End of tax year		
Assets		(a)	(b)	(c)	(d)	
1	Cash		27,000		11,847	
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) S T M T 3		305,785		251,056	
7	Loans to shareholders					
8	Mortgage and real estate loans					
9	Other investments (attach statement)	30,210		30,210		
10a	Buildings and other depreciable assets	(21,509	8,701	(30,210
b	Less accumulated depreciation					
11a	Depletable assets	(
b	Less accumulated depletion					
12	Land (net of any amortization)					
13a	Intangible assets (amortizable only)	825		825		
b	Less accumulated amortization	(825	0	(825
14	Other assets (attach statement)					
15	Total assets		341,486		293,113	
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				153,500	
21	Other liabilities (attach statement) S T M T 4		254,114		254,114	
22	Capital stock		1,345		1,345	
23	Additional paid-in capital					
24	Retained earnings		86,027		-115,846	
25	Adjustments to shareholders' equity (attach statement)					
26	Less cost of treasury stock	((
27	Total liabilities and shareholders' equity		341,486		293,113	

Schedule M-1 Reconciliation of Income (Loss) per Books With Income (Loss) per Return**Note:** The corporation may be required to file Schedule M-3. See instructions.

1 Net income (loss) per books	33,820	5 Income recorded on books this year not included on Schedule K, lines 1 through 10 (itemize):	
2 Income included on Schedule K, lines 1, 2, 3c, 4, 5a, 6, 7, 8a, 9, and 10, not recorded on books this year (itemize)		a Tax-exempt interest \$	
3 Expenses recorded on books this year not included on Schedule K, lines 1 through 12 and 14p (itemize):		STM T 5	2,000
a Depreciation \$		6 Deductions included on Schedule K, lines 1 through 12 and 14p, not charged against book income this year (itemize):	
b Travel and entertainment \$		a Depreciation \$	
4 Add lines 1 through 3	33,820	7 Add lines 5 and 6	2,000
		8 Income (loss) (Schedule K, line 18). Subtract line 7 from line 4.	31,820

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

	(a) Accumulated adjustments account	(b) Shareholders' undistributed taxable income previously taxed	(c) Accumulated earnings and profits	(d) Other adjustments account
1 Balance at beginning of tax year	86,027			
2 Ordinary income from page 1, line 21	31,820			
3 Other additions				2,000
4 Loss from page 1, line 21	()			
5 Other reductions	()			
6 Combine lines 1 through 5	117,847			2,000
7 Distributions	117,847			2,000
8 Balance at end of tax year. Subtract line 7 from line 6	0			0

Form **1120-S** (2020)

Schedule K-1
(Form 1120-S)
Department of the Treasury
Internal Revenue Service

2020

For calendar year 2020, or tax year

beginning ending

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

See back of form and separate instructions.

Final K-1 Amended K-1

OMB No. 1545-0123

Part I

Information About the Corporation

A

Corporation's employer identification number

26-3257732

B

Corporation's name, address, city, state, and ZIP code

YNJ MANAGEMENT LLC

4055 JACKPOT RD

JACKPOT RD OH 43123

C

IRS Center where corporation filed return

E-FILE

Part II

Information About the Shareholder

D

Shareholder's identifying number

--****

E

Shareholder's name, address, city, state, and ZIP code

NISHITKUMAR PATEL

4055 JCKPOT RD

GROVE CITY OH 43123

F

Current year allocation percentage

100.000000 %

G

Shareholder's number of shares

Beginning of tax year

End of tax year

H

Loans from shareholder

Beginning of tax year \$ 0

End of tax year \$ 0

For IRS Use Only

Part III

Shareholder's Share of Current Year Income, Deductions, Credits, and Other Items

1	Ordinary business income (loss)	13	Credits
	31,820		
2	Net rental real estate income (loss)		
3	Other net rental income (loss)		
4	Interest income		
5a	Ordinary dividends		
5b	Qualified dividends	14	Foreign transactions
6	Royalties		
7	Net short-term capital gain (loss)		
8a	Net long-term capital gain (loss)		
8b	Collectibles (28%) gain (loss)		
8c	Unrecaptured section 1250 gain		
9	Net section 1231 gain (loss)		
10	Other income (loss)	15	Alternative minimum tax (AMT) items
11	Section 179 deduction	16	Items affecting shareholder basis
		B	2,000
12	Other deductions	D	235,693
		17	Other information
		V*	STMT
		AC*	STMT
18	More than one activity for at-risk purposes*		
19	More than one activity for passive activity purposes*		
* See attached statement for additional information.			

Section 199A Information Worksheet

Form 1120-S

2020

For calendar year 2020 or tax year beginning , ending

Name
YNJ MANAGEMENT LLC

Employer Identification Number
26-3257732

	Activity Description	Pass-Through Entity EIN	PTP	Aggregated	SSTB
Column A	PAGE 1 ACTIVITY				
Column B					
Column C					
Column D					
Column E					

	Column A	Column B	Column C	Column D	Column E
QBI or Qualified PTP items:					
Ordinary business income (loss)	31,820				
Net rental real estate income (loss)					
Other net rental income (loss)					
Royalty income (loss)					
Section 1231 gain (loss)					
Other income (loss)					
Section 179 deduction					
Other deductions					
W-2 wages	68,462				
Qualified property					
Other Information:					
QBI allocable to cooperative pmts received					
W-2 wages allocable to qualified payments					
Section 199A(g) deduction					
Section 199A REIT dividends					

Federal Statements

FYE: 12/31/2020

Statement 1 - Form 1120-S, Page 1, Line 19 - Other Deductions

<u>Description</u>	<u>Amount</u>
ACCOUNTING FEES	\$
COMPUTER EXPENSE	2,456
LEGAL & PROFESSIONAL FEE	15,632
AUTO EXPENSE	18,025
BANK & CREDIT CARD CHARGES	926
DUES & SUBSCRIPTIONS	200
INSURANCE	7,137
OFFICE SUPPLIES	4,787
PAYROLL FEES	750
POSTAGE & DELIVERY	302
TRAVEL EXPENSE	1,957
UTILITIES	2,206
TOTAL	\$ <u>54,378</u>

Statement 2 - Form 1120-S, Page 4, Schedule K, Line 17d - Other Items and Amounts

<u>Description</u>	<u>Amount</u>
SECTION 199A INFORMATION - SEE ATTACHED WRK	

Statement 3 - Form 1120-S, Page 4, Schedule L, Line 6 - Other Current Assets

<u>Description</u>	<u>Beginning of Year</u>	<u>End of Year</u>
INTERCOMPANY TRANSFERS	\$ 305,785	\$ 251,056
TOTAL	\$ <u>305,785</u>	\$ <u>251,056</u>

Statement 4 - Form 1120-S, Page 4, Schedule L, Line 21 - Other Liabilities

<u>Description</u>	<u>Beginning of Year</u>	<u>End of Year</u>
LOAN:CHIRAG PATEL	\$ 50,000	\$ 50,000
LOAN:DIPESH PATEL	50,000	50,000
LOAN:NISHANT PATEL	80,000	80,000
LOAN:PRAVINKUMAR PATEL	25,000	25,000
LOAN:SIDHARTH PATEL	45,000	45,000
LOAN:NASH PATEL	2,000	2,000
OVERDRAFT PROTECTION	2,114	2,114
TOTAL	\$ <u>254,114</u>	\$ <u>254,114</u>

Federal Statements**Statement 5 - Form 1120-S, Page 5, Schedule M-1, Line 5 - Income on Books Not on Return**

<u>Description</u>	<u>Amount</u>
PPP LOAN FORGIVENESS	\$ <u>2,000</u>
TOTAL	\$ <u><u>2,000</u></u>

Form 1120-S, Page 5, Schedule M-2, Line 5(a) - Other Reductions

<u>Description</u>	<u>Amount</u>
ADJUSTMENT TO EQUITY	\$ <u> </u>
TOTAL	\$ <u><u>0</u></u>

263257732 YNJ MANAGEMENT LLC
26-3257732
FYE: 12/31/2020

Federal Statements
NISHITKUMAR PATEL

Schedule K-1, Box 17, Code AC - Gross Receipts for Section 448(c)

<u>Description</u>		<u>Shareholder Amount</u>
8990	GROSS RECEIPTS FOR 2019	325,033
8990	GROSS RECEIPTS FOR 2018	244,474
8990	GROSS RECEIPTS FOR 2017	241,056

Form 1120-S Schedule K-1		Schedule K-1, Box 17, Code V Shareholder's Section 199A Information	2020
Name		For calendar year 2020 or tax year beginning , ending	

Name YNJ MANAGEMENT LLC NISHITKUMAR PATEL	Taxpayer Identification Number 26-3257732 ***-**-****
---	---

	Activity Description	Pass-Through Entity EIN	PTP	Aggregated	SSTB
Column A	PAGE 1 ACTIVITY				
Column B					
Column C					
Column D					
Column E					

	Column A	Column B	Column C	Column D	Column E
QBI or Qualified PTP items:					
Ordinary business income (loss)	31,820				
Net rental real estate income (loss)					
Other net rental income (loss)					
Royalty income (loss)					
Section 1231 gain (loss)					
Other income (loss)					
Section 179 deduction					
Other deductions					
W-2 wages	68,462				
Qualified property					
Other Information:					
QBI allocable to cooperative pmts received					
W-2 wages allocable to qualified payments					
Section 199A(g) deduction					
Section 199A REIT dividends					

Ohio Cities Return Summary

For calendar year 2021, or taxable period beginning
YNJ MANAGEMENT LLC

, and ending
-*7732

RITA

Taxable Income

Fed taxable income	139,229
Items not deductible	0
Items not taxable	0
Adjusted net income	139,229
Apportionment %	100.0000
Apportioned income	139,229
Pre-2017 NOL ded	0
Taxable Income	<u><u>139,229</u></u>

Taxable Income

Fed taxable income	
Items not deductible	
Items not taxable	
Adjusted net income	
Apportionment %	
Apportioned income	
Pre-2017 NOL ded	
Taxable Income	<u><u> </u></u>

Taxable Income

Fed taxable income	
Items not deductible	
Items not taxable	
Adjusted net income	
Apportionment %	
Apportioned income	
Pre-2017 NOL ded	
Taxable Income	<u><u> </u></u>

Tax, Payments, Credits

Tax	2,785
Interest/Penalty	0
Payments applied	2,964
Amount due/(op)	<u><u>-179</u></u>

Tax, Payments, Credits

Tax	
Interest/Penalty	
Payments applied	
Amount due/(op)	<u><u> </u></u>

Tax, Payments, Credits

Tax	
Interest/Penalty	
Payments applied	
Amount due/(op)	<u><u> </u></u>

Overpymnt applied 179

Overpymnt applied

Overpymnt applied

Next Year's Estimates

1st estimate	0
2nd estimate	0
3rd estimate	1,410
4th estimate	196
Total	<u><u>1,606</u></u>

Next Year's Estimates

1st estimate	
2nd estimate	
3rd estimate	
4th estimate	
Total	<u><u> </u></u>

Next Year's Estimates

1st estimate	
2nd estimate	
3rd estimate	
4th estimate	
Total	<u><u> </u></u>

Apportionment Percentage

Property	
Payroll	
Sales	
Average	<u><u>100.0000</u></u>

Apportionment Percentage

Property	
Payroll	
Sales	
Average	<u><u> </u></u>

Apportionment Percentage

Property	
Payroll	
Sales	
Average	<u><u> </u></u>

**FORM
20-EXT**Regional Income Tax Agency
**Net Profit Estimated Income Tax
and/or Extension of Time to File****RITA**

REGIONAL INCOME TAX AGENCY

800.860.7482
TDD 440.526.5332
ritaohio.com

Fed. ID #: **-***7732

Name: YNJ MANAGEMENT LLC

Address #: 4055 Street: JACKPOT RD Suite: _____

City: JACKPOT RD State: OH Zip: 43123

Phone #: 614-394-2687

☐ Check this box if you are updating your Net Profit Annual Estimated Income Tax Liability and complete Section 1 below. Do NOT check this box if you are only making an Estimated Tax payment.**SECTION 1: ESTIMATED INCOME TAX COMPUTATION and ESTIMATED PAYMENT**

Use this section to report or update Net Profit Estimated Income Tax Liabilities and/or make an estimated payment. If your business anticipates owing \$200 or more in municipal income tax, you must estimate your taxes and make quarterly payments. If your estimated payments are either less than 90% of the tax due, or not equal to or greater than your prior year's total tax liability, you will be subject to penalty and interest.

Tax Year Ending 12/31/22

1. Total Estimated Tax (distribute to each applicable municipality in Line 5) \$ 1,785 .00

Note: Line 1 must equal Line 6

2. Less Prior Year Credit \$ 179 .00

3. Total Estimated Tax Due \$ 1,606 .00

4. Estimated Payment (not less than 1/4 of Line 3) \$ 0 .00

Note: Make check payable to RITA. See below for mailing address

5. Distribute Estimated Tax from Line 1 above (if additional space is needed, attach a schedule)

➔ Municipality:	Amount:
GROVE CITY	\$ 1,785 .00
_____	\$ _____ .00
_____	\$ _____ .00
_____	\$ _____ .00
_____	\$ _____ .00
_____	\$ _____ .00
_____	\$ _____ .00
_____	\$ _____ .00

6. Total Estimated Tax distribution from Line 5 (Line 6 must equal Line 1) \$ 1,785 .00

Mail to:
REGIONAL INCOME TAX AGENCY
P.O. BOX 94582
CLEVELAND, OH 44101-4582

Fax: 440.922.3536

YNJ MANAGEMENT LLC

Fed. ID #: **-***7732

Phone #: 614-394-2687

SECTION 2: EXTENSION OF TIME TO FILE

If your business has requested or received an extension to file your federal income tax return, your Net Profit municipal income tax return is extended as well. It is not necessary to file a copy of your federal extension with RITA by the annual filing due date. Attach a copy of the federal extension when filing your Net Profit municipal income tax return on or before the extended due date.

If you have not requested or received a federal income tax filing extension, you may receive a six-month extension for filing your Net Profit municipal income tax return by checking the box below, and submitting this request on or before the filing due date or the 15th day of the fourth month following the taxpayer's fiscal year-end.

An extension to file the annual return is not an extension to pay - the tax owed is still due by the annual filing due date. Please complete Section 3 to pay the tax due for the applicable tax year.

☐ If you have a copy of your federal extension, you do NOT have to fill out this section. Check this box if you have NOT requested or received a federal extension and you are requesting a 6 month extension to file for the tax year ending _____.

SECTION 3: EXTENSION PAYMENT

Tax Year Ending _____

1. Anticipated Tax Balance Due on Net Profit Annual Return \$ _____ .00
(Extension payment)

2. Distribute Tax Balance Due (if additional space is needed, attach a schedule)

Note: Do not include estimated tax payments, see Section 1 for Estimated Tax Computation and Payments

➔ Municipality:

Amount:

_____	\$ _____ .00
_____	\$ _____ .00
_____	\$ _____ .00
_____	\$ _____ .00
_____	\$ _____ .00
_____	\$ _____ .00
_____	\$ _____ .00

3. Total Tax Balance distribution from Line 2 (Line 3 must equal Line 1) _____ .00

SECTION 4: VERIFICATION

Taxpayer – Under penalties of perjury, I declare that to the best of my knowledge and belief, the statements made herein are true and correct.

Signature: _____ Date: _____

NISHITKUMAR PATEL

PRESIDENT

Preparer other than taxpayer – Under penalties of perjury, I declare that to the best of my knowledge and belief, the statements made herein are true and correct, that I am authorized by the taxpayer to prepare this Declaration and/or Extension.

Signature of Preparer: NAT RAMMOHAN Date: 08/25/22

Printed Name of Preparer: NAT RAMMOHAN

May RITA discuss this Declaration/Extension with the preparer above?

☒ Yes ☐ No

Mail to:

REGIONAL INCOME TAX AGENCY

P.O. BOX 94582

CLEVELAND, OH 44101-4582

Fax to: 440.922.3536

Form **7004**(Rev. December 2018)
Department of the Treasury
Internal Revenue Service**Application for Automatic Extension of Time To File Certain
Business Income Tax, Information, and Other Returns**

OMB No. 1545-0233

→ **File a separate application for each return.**→ **Go to www.irs.gov/Form7004 for instructions and the latest information.****Print
or
Type**

Name

YNJ MANAGEMENT LLC

Identifying number

-*7732

Number, street, and room or suite no. (If P.O. box, see instructions.)

4055 JACKPOT RD

City, town, state, and ZIP code (If a foreign address, enter city, province or state, and country (follow the country's practice for entering postal code).)

JACKPOT RD

OH 43123

Note: File request for extension by the due date of the return. See instructions before completing this form.**Part I Automatic Extension for Certain Business Income Tax, Information, and Other Returns. See instructions.****1** Enter the form code for the return listed below that this application is for 25

Application Is For:	Form Code	Application Is For:	Form Code
Form 706-GS(D)	01	Form 1120-ND (section 4951 taxes)	20
Form 706-GS(T)	02	Form 1120-PC	21
Form 1041 (bankruptcy estate only)	03	Form 1120-POL	22
Form 1041 (estate other than a bankruptcy estate)	04	Form 1120-REIT	23
Form 1041 (trust)	05	Form 1120-RIC	24
Form 1041-N	06	Form 1120S	25
Form 1041-QFT	07	Form 1120-SF	26
Form 1042	08	Form 3520-A	27
Form 1065	09	Form 8612	28
Form 1066	11	Form 8613	29
Form 1120	12	Form 8725	30
Form 1120-C	34	Form 8804	31
Form 1120-F	15	Form 8831	32
Form 1120-FSC	16	Form 8876	33
Form 1120-H	17	Form 8924	35
Form 1120-L	18	Form 8928	36
Form 1120-ND	19		

Part II All Filers Must Complete This Part

- 2** If the organization is a foreign corporation that does not have an office or place of business in the United States, check here ▶ ☐
- 3** If the organization is a corporation and is the common parent of a group that intends to file a consolidated return, check here ▶ ☐
If checked, attach a statement listing the name, address, and employer identification number (EIN) for each member covered by this application.
- 4** If the organization is a corporation or partnership that qualifies under Regulations section 1.6081-5, check here ▶ ☐
- 5a** The application is for calendar year 2021, or tax year beginning , and ending .
- b Short tax year.** If this tax year is less than 12 months, check the reason: ☐ Initial return ☐ Final return
☐ Change in accounting period ☐ Consolidated return to be filed ☐ Other (See instructions—attach explanation.)
- | | | |
|---|----------|---|
| 6 Tentative total tax | 6 | 0 |
| 7 Total payments and credits. See instructions | 7 | 0 |
| 8 Balance due. Subtract line 7 from line 6. See instructions | 8 | 0 |

For Privacy Act and Paperwork Reduction Act Notice, see separate instructions.Form **7004** (Rev. 12-2018)

Form **27**

Regional Income Tax Agency

RITA Net Profit Tax Return

2021**RITA**

REGIONAL INCOME TAX AGENCY

800.860.7482

TDD 440.526.5332

ritaohio.com

FOR CALENDAR YEAR **2021** OR FISCAL YEAR BEGINNING AND ENDINGThe federal return **MUST** be attached to be considered a complete tax return. Please also attach all applicable schedules and 1099-NEC to avoid delays.Check if: Initial RITA Return No longer in RITA ☒ Extension

Amended Return Out of Business

Consolidated Return (Attach Form 851) Alternate Method Federal Business Activity Code # **561110**

Consolidated filer with 80% ownership of a Pass-Through Entity (see Instructions, Page 3)

Business Activity ADMINISTRATIVE

BUSINESS: C CORPORATION PARTNERSHIP LLC SMALL EMPLOYER:

☒ S CORPORATION ESTATE TRUST

Company Name

YNJ MANAGEMENT LLC

Federal Identification Number:

*****7732

Address # Street

Suite #

4055 JACKPOT RD

City

State Zip Code

JACKPOT RD

OH 43123

1. INCOME PER ATTACHED FEDERAL RETURN

(per attached Federal Form 1120 (Line 28), 1120S (Sch. K - Line 18), 990T (Line 30), 1065 (Sch. K - Analysis of Net Income (Loss), Page 5 - Line 1), 1041 (Line 17) or the equivalent)

1 139,229

2. A. ITEMS NOT DEDUCTIBLE (from Page 3, Schedule X, Line G)

Add 2A

B. ITEMS NOT TAXABLE (from Page 3, Schedule X, Line Q)

Deduct 2B

C. ENTER EXCESS OF LINE 2A OR 2B

2C

3. A. ADJUSTED FEDERAL TAXABLE INCOME (Line 1 plus or minus Line 2C)

→ 3A 139,229

B. PRE-APPORTIONED LOSSES FROM TAX YEARS BEGINNING ON OR AFTER 1/1/17 (subject to 50%)

Check this box if utilizing a NOL incurred prior to 1/1/17 first. See instructions.

→ Check instructions: If you check the box you must use the Worksheet on Page 4 of the Net Profit Instructions. References for Line 3B(i) through Line 4 are found on the worksheet.

i. TOTAL UNUTILIZED PRE-APPORTIONED LOSSES FROM

TAX YEARS BEGINNING ON OR AFTER 1/1/17 → 3B(i)

ii. PRE-APPORTIONED LOSSES FROM TAX YEARS BEGINNING ON OR AFTER 1/1/17 UTILIZED IN THIS TAX YEAR

→ 3B(ii)

iii. Income/Loss Subject to Apportionment (Line 3A less Line 3B(ii))

→ 3B(iii) 139,229

C. AMOUNT ALLOCABLE TO RITA

If Schedule Y, Page 4 is used 100.000 % of Line 3b(iii)

3C 139,229

D. LESS POST APPORTIONED LOSSES FOR TAX YEAR BEGINNING PRIOR TO 1/1/17

Per previous Municipal Income Tax Returns (schedule must be submitted)

→ 3D

4. AMOUNT SUBJECT TO MUNICIPAL INCOME TAX

(Line 3C less Line 3D)

→ 4 139,229

5. MUNICIPAL INCOME TAX DUE (see Instructions)

NOTE: Must equal Schedule B on Page 2

→ 5 2,785

6. A. PAYMENTS ON DECLARATIONS OF ESTIMATED MUNICIPAL INCOME TAX

6A

B. AMOUNT OF PREVIOUS YEAR CREDIT

6B 2,964

C. TOTAL CREDITS ALLOWABLE (Line 6A + 6B)

→ 6C 2,964

7. A. BALANCE DUE (Line 5 less Line 6C) AMOUNT PAYABLE TO RITA MUST ACCOMPANY THIS FORM

→ 7A

B. OVERPAYMENT CLAIMED (If Line 6C exceeds Line 5 enter difference here and check the desired box)

7B 179

(Cannot be split between refund and credit) Refund

CreditX

YNJ MANAGEMENT LLC

*****7732

FORM 27**SCHEDULE B - DISTRIBUTION OF TAX WITHIN RITA MUNICIPALITIES**

TOTAL TAX DISTRIBUTED BELOW MUST EQUAL AMOUNT FROM PAGE 1, LINE 5

Note: For each separate municipality listed below, if Tax Due is \$10 or less, enter -0-.

(if more space is needed, attach additional schedule)

Municipality Name	Taxable Income / Loss	Tax Rate	Tax Due
GROVE CITY	139,229	2.000	2,785

COMPUTATION OF ESTIMATED TAX**ESTIMATED TAX DISTRIBUTION TOTAL TO LINE 8A**

(if more space is needed, attach additional schedule)

Municipality Name	Taxable Income / Loss	Tax Rate	Tax Due
GROVE CITY	89,250	2.000	1,785

8. A. ESTIMATED TAX (from distribution above)	→ 8A	1,785
B. CREDIT (if any) FROM PRIOR YEAR (7B)	8B	179
C. LINE 8A LESS LINE 8B	8C	1,606
D. AMOUNT PAID (not less than 1/4 of estimated tax) (IF LINE 8A IS LEFT BLANK AN ESTIMATE WILL BE CREATED FOR YOU BASED ON YOUR PRIOR YEAR'S TAX LIABILITY AND MUNICIPAL DISTRIBUTION)	8D	0
9. TOTAL OF 7A + 8D	9	

MAKE CHECKS PAYABLE TO RITAThe federal return **MUST** be attached to be considered a complete tax return. In order to avoid processing delays and notices from RITA, please also attach all applicable schedules and 1099-NEC.

I CERTIFY I HAVE EXAMINED THIS RETURN, INCLUDING ACCOMPANYING SCHEDULES AND STATEMENTS AND TO THE BEST OF MY KNOWLEDGE AND BELIEF, IT IS TRUE, CORRECT, COMPLETE, AND THAT THE FIGURES USED HEREIN ARE THE SAME AS USED FOR FEDERAL INCOME TAX PURPOSES.

SIGNATURE OF OFFICER OR PARTNER

NISHITKUMAR PATEL
 PRINT NAME
 PRESIDENT
 TITLE

614-394-2687
 PHONE

DATE

May RITA discuss this return with the preparer shown above?

☒ Yes ☐ No

REMIT RETURN WITH REFUND TO:
 REGIONAL INCOME TAX AGENCY
 P.O. BOX 94652
 CLEVELAND, OH 44101-4652

REMIT RETURN WITH PAYMENT TO:
 REGIONAL INCOME TAX AGENCY
 P.O. BOX 94582
 CLEVELAND, OH 44101-4582

NAT RAMMOHAN
 PREPARER'S SIGNATURE
 NAT RAMMOHAN
 PRINT NAME
 6660 NORTH HIGH STREET, SUITE 1-H
 WORTHINGTON OH 43085
 PREPARER'S ADDRESS
 614-854-0850
 PREPARER'S PHONE
 ALLSTATES CPA
 FIRM NAME

REMIT RETURN WITHOUT PAYMENT
 TO: REGIONAL INCOME TAX AGENCY
 P.O. BOX 89475
 CLEVELAND, OH 44101-6475

SCHEDULE X – ADJUSTMENT TO FEDERAL INCOME TAX RETURN
(attach supporting statement for line items utilized below)

ITEMS NOT DEDUCTIBLE

- A. LOSSES THAT DIRECTLY RELATE TO THE SALE, EXCHANGE, OR OTHER DISPOSITION OF AN ASSET DESCRIBED IN 1221 OR 1231 OF THE IRC
- B. TAXES BASED ON INCOME
- C. 5% OF THE AMOUNT DEDUCTED AS INTANGIBLE INCOME EXCLUDING THE PORTION DIRECTLY RELATED TO THE SALE, EXCHANGE, OR OTHER DISPOSITION OF PROPERTY DESCRIBED IN 1221 OF THE IRC
- D. AMOUNTS PAID OR ACCRUED TO QUALIFIED SELF-EMPLOYED RETIREMENT AND HEALTH AND LIFE INSURANCE PLANS FOR OWNERS OR OWNER-EMPLOYEES OF NON-C CORPORATION ENTITIES
- E. REIT'S AND RIC'S - ALL AMOUNTS WITH RESPECT TO DIVIDENDS, DISTRIBUTIONS, OR AMOUNTS SET ASIDE FOR OR CREDITED TO THE BENEFIT OF INVESTORS AND ALLOWED AS A DEDUCTION
- F. OTHER: (ATTACH EXPLANATION)
- G. TOTAL ADDITIONS (ENTER ON PAGE 1, LINE 2A)

ITEMS NOT TAXABLE

- N. INCOME AND GAINS - FEDERALLY REPORTED INCOME AND GAINS FROM IRC 1221 OR 1231 PROPERTY DISPOSITIONS EXCEPT TO THE EXTENT THE INCOME AND GAINS APPLY TO THOSE DESCRIBED IN 1245 OR 1250 OF THE IRC
- O. INTANGIBLE INCOME SUCH AS INTEREST, DIVIDEND, PATENT, AND COPYRIGHT INCOME ALSO INCLUDE ROYALTY INCOME EXCEPT ROYALTIES DERIVED FROM INTEREST IN LAND (i.e. OIL AND GAS RIGHTS, ETC.)
- P. OTHER: PASS-THROUGH INCOME (LOSS)
- Q. TOTAL DEDUCTIONS (ENTER ON LINE 2B)

AFTI WORKSHEET
ADJUSTED FEDERAL TAXABLE INCOME
For use by taxpayers that are NOT C Corporations

- (1) Federal Form 1120S (S Corporations) - Sch. K - Line 18

139,229
- (2) Federal Form 1065 (Partnerships, LLC's, LLP's) - Sch. K - Analysis of Net Income (Loss), Page 5 - Line 1
- (3) Federal Form 1041 (Estates, Trusts) - Page 1 - Line 17

	Form 1120S	Form 1065	Form 1041
a) From Federal Return (above)	\$ 139,229	\$	\$
b) Excess 179 Deduction / Carryover			
c) Charitable Contribution - In Excess of 10% Limitation			
d) Other: _____			
e) "ADJUSTED FEDERAL TAXABLE INCOME"	\$ 139,229	\$	\$

SCHEDULE Y - BUSINESS APPORTIONMENT FORMULA (See Instructions)

	A. LOCATED EVERYWHERE	B. RITA MUNICIPALITY	C. PERCENTAGE (B / A)
STEP 1. AVERAGE ORIGINAL COST OF REAL & TANGIBLE PERSONAL PROPERTY	\$ _____	\$ _____	
GROSS ANNUAL RENTALS MULTIPLIED BY 8	\$ _____	\$ _____	
TOTAL OF STEP 1	\$ _____	\$ _____	_____ %
STEP 2. TOTAL WAGES, SALARIES, COMMISSION AND OTHER			
COMPENSATION PAID TO ALL EMPLOYEES	\$ _____	\$ _____	_____ %
STEP 3. GROSS RECEIPTS FROM SALES AND WORK OR			
SERVICES PERFORMED	\$ _____	\$ _____	_____ %
STEP 4. TOTAL OF PERCENTAGES			_____ %
STEP 5. AVERAGE PERCENTAGE (DIVIDE TOTAL PERCENTAGES BY NUMBER OF PERCENTAGES USED)			_____ %

	A. LOCATED EVERYWHERE	B. RITA MUNICIPALITY	C. PERCENTAGE (B / A)
STEP 1. AVERAGE ORIGINAL COST OF REAL & TANGIBLE PERSONAL PROPERTY	\$ _____	\$ _____	
GROSS ANNUAL RENTALS MULTIPLIED BY 8	\$ _____	\$ _____	
TOTAL OF STEP 1	\$ _____	\$ _____	_____ %
STEP 2. TOTAL WAGES, SALARIES, COMMISSION AND OTHER			
COMPENSATION PAID TO ALL EMPLOYEES	\$ _____	\$ _____	_____ %
STEP 3. GROSS RECEIPTS FROM SALES AND WORK OR			
SERVICES PERFORMED	\$ _____	\$ _____	_____ %
STEP 4. TOTAL OF PERCENTAGES			_____ %
STEP 5. AVERAGE PERCENTAGE (DIVIDE TOTAL PERCENTAGES BY NUMBER OF PERCENTAGES USED)			_____ %

	A. LOCATED EVERYWHERE	B. RITA MUNICIPALITY	C. PERCENTAGE (B / A)
STEP 1. AVERAGE ORIGINAL COST OF REAL & TANGIBLE PERSONAL PROPERTY	\$ _____	\$ _____	
GROSS ANNUAL RENTALS MULTIPLIED BY 8	\$ _____	\$ _____	
TOTAL OF STEP 1	\$ _____	\$ _____	_____ %
STEP 2. TOTAL WAGES, SALARIES, COMMISSION AND OTHER			
COMPENSATION PAID TO ALL EMPLOYEES	\$ _____	\$ _____	_____ %
STEP 3. GROSS RECEIPTS FROM SALES AND WORK OR			
SERVICES PERFORMED	\$ _____	\$ _____	_____ %
STEP 4. TOTAL OF PERCENTAGES			_____ %
STEP 5. AVERAGE PERCENTAGE (DIVIDE TOTAL PERCENTAGES BY NUMBER OF PERCENTAGES USED)			_____ %

TOTAL Sum all STEP 5 percentages for each municipality, enter on Page 1, Line 3C _____ %

SCHEDULE Y-1: RECONCILIATION OF SCHEDULE Y WAGES TO WITHHOLDING RETURNS

- Total workplace RITA wages shown on your withholding tax returns filed for the year covered by this return. \$ _____
- Attach explanation of any difference between total wages remitted and total wages shown on Schedule Y above.
- Provide the Company Name and Federal Identification Number under which the withholding tax was remitted, if different than information on page 1.

Company Name _____

Federal Identification Number _____

SCHEDULE Z: PASS-THROUGH DISTRIBUTIVE SHARES OF NET INCOME

Attach a schedule of each partner's/shareholder's name, social security number, distributive share, guaranteed payments (if applicable) and ownership percentage.

SCHEDULE ZZ: CONSOLIDATED RETURN INFORMATION

If filing a consolidated return, you must attach Federal Form 851 or a schedule listing each name, address and employer identification number.

Computation of Federal Taxable IncomeForm **1120-S****2021**

For calendar year 2021 or tax year beginning , ending

Name

YNJ MANAGEMENT LLC

Employer Identification Number

-*7732

**Taxable Income of an S Corporation Computed as a C Corporation
Used for State Purposes**

1 Ordinary income (loss)	139,229	
2 Net rental real estate income (loss)		
3 Other net rental income (loss)		
4 Interest and dividend income		
5 Royalties		
6 Net capital gain		
7 Net gain (loss) from Form 4797, part II, line 17		
8 Other income		
9 Total income		139,229
10 Investment interest expense		
11 Section 59(e)(2) expenditures		
12 Other deductions		
13 Total deductions		
14 Income before adjustments		139,229
15 Section 179 expense allowable		
16 Charitable contributions		
17 Taxable income before special deductions		139,229

Form **1120-S****U.S. Income Tax Return for an S Corporation**

OMB No. 1545-0123

2021Department of the Treasury
Internal Revenue Service

→ Do not file this form unless the corporation has filed or is attaching Form 2553 to elect to be an S corporation.
→ Go to www.irs.gov/Form1120S for instructions and the latest information.

For calendar year 2021 or tax year beginning , ending

A S election effective date 08/08/08	TYPE OR PRINT	Name YNJ MANAGEMENT LLC	D Employer identification number **-***7732
B Business activity code number (see instructions) 561110		Number, street, and room or suite no. If a P.O. box, see instructions. 4055 JACKPOT RD	E Date incorporated 08/08/2008
C Check if Sch. M-3 attached <input type="checkbox"/>		City or town, state or province, country, and ZIP or foreign postal code JACKPOT RD OH 43123	F Total assets (see instructions) \$ 632,473

G Is the corporation electing to be an S corporation beginning with this tax year? See instructions. ☐ Yes ☒ No

H Check if: (1) ☐ Final return (2) ☐ Name change (3) ☐ Address change (4) ☐ Amended return (5) ☐ S election termination

I Enter the number of shareholders who were shareholders during any part of the tax year → 1

J Check if corporation: (1) ☐ Aggregated activities for section 465 at-risk purposes (2) ☐ Grouped activities for section 469 passive activity purposes

Caution: Include **only** trade or business income and expenses on lines 1a through 21. See the instructions for more information.

Income	1a Gross receipts or sales	1a	274,329	
	b Returns and allowances	1b		
	c Balance. Subtract line 1b from line 1a	1c		274,329
	2 Cost of goods sold (attach Form 1125-A)	2		
	3 Gross profit. Subtract line 2 from line 1c	3		274,329
	4 Net gain (loss) from Form 4797, line 17 (attach Form 4797)	4		
Deductions (see instructions for limitations)	5 Other income (loss) (see instructions—attach statement)	5		
	6 Total income (loss). Add lines 3 through 5	6		274,329
	7 Compensation of officers (see instructions—attach Form 1125-E)	7		73,675
	8 Salaries and wages (less employment credits)	8		
	9 Repairs and maintenance	9		
	10 Bad debts	10		
	11 Rents	11		
	12 Taxes and licenses	12		7,791
	13 Interest (see instructions)	13		12,500
	14 Depreciation not claimed on Form 1125-A or elsewhere on return (attach Form 4562)	14		
	15 Depletion (Do not deduct oil and gas depletion.)	15		
	16 Advertising	16		
	17 Pension, profit-sharing, etc., plans	17		
	18 Employee benefit programs	18		
	19 Other deductions (attach statement) S E E S T M T 1	19		41,134
20 Total deductions. Add lines 7 through 19	20		135,100	
21 Ordinary business income (loss). Subtract line 20 from line 6	21		139,229	
Tax and Payments	22a Excess net passive income or LIFO recapture tax (see instructions)	22a		
	b Tax from Schedule D (Form 1120-S)	22b		
	c Add lines 22a and 22b (see instructions for additional taxes)	22c		
	23a 2021 estimated tax payments and 2020 overpayment credited to 2021	23a		
	b Tax deposited with Form 7004	23b		
	c Credit for federal tax paid on fuels (attach Form 4136)	23c		
	d Add lines 23a through 23c	23d		
	24 Estimated tax penalty (see instructions). Check if Form 2220 is attached → <input type="checkbox"/>	24		
	25 Amount owed. If line 23d is smaller than the total of lines 22c and 24, enter amount owed	25		
	26 Overpayment. If line 23d is larger than the total of lines 22c and 24, enter amount overpaid	26		
27 Enter amount from line 26: Credited to 2022 estimated tax → Refunded →	27			

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.

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

Sign Here	Signature of officer	NISHITKUMAR PATEL	Date		Title	PRESIDENT
	Print/Type preparer's name	NAT RAMMOHAN	Preparer's signature	NAT RAMMOHAN	Date	08/25/22
	Firm's name	→ ALLSTATES CPA			Check <input type="checkbox"/> if self-employed	PTIN *****
Paid Preparer Use Only	Firm's address	→ 6660 NORTH HIGH STREET, SUITE 1-H WORTHINGTON, OH 43085			Firm's EIN	→ **-***4486
	Phone no.	614-854-0850				

For Paperwork Reduction Act Notice, see separate instructions.

Form **1120-S** (2021)

Schedule B	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 ➔ ADMINISTRATIVE b Product or service ➔ FACILITIES SUPPORT					
3	At any time during the tax year, was any shareholder of the corporation a disregarded entity, a trust, an estate, or a nominee or similar person? If "Yes," attach Schedule B-1, Information on Certain Shareholders of an S Corporation					X
4	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 stock issued and outstanding of any foreign or domestic corporation? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (v) below					X
(i) Name of Corporation		(ii) Employer Identification Number (if any)	(iii) Country of Incorporation	(iv) Percentage of Stock Owned	(v) If Percentage in (iv) Is 100%, Enter the Date (if applicable) a Qualified Subchapter S Subsidiary Election Was Made	
b Own directly an interest of 20% or more, or own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital 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 (v) below						X
(i) Name of Entity	(ii) Employer Identification Number (if any)	(iii) Type of Entity	(iv) Country of Organization	(v) Maximum Percentage Owned in Profit, Loss, or Capital		
5a At the end of the tax year, did the corporation have any outstanding shares of restricted stock?						X
If "Yes," complete lines (i) and (ii) below.						
(i) Total shares of restricted stock ➔						
(ii) Total shares of non-restricted stock ➔						
b At the end of the tax year, did the corporation have any outstanding stock options, warrants, or similar instruments?						X
If "Yes," complete lines (i) and (ii) below.						
(i) Total shares of stock outstanding at the end of the tax year ➔						
(ii) Total shares of stock outstanding if all instruments were executed ➔						
6	Has this corporation filed, or is it required to file, Form 8918 , Material Advisor Disclosure Statement, to provide information on any reportable transaction?					
7	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.						
8	If the corporation (a) was a C corporation before it elected to be an S corporation or the corporation acquired an asset with a basis determined by reference to the basis of the asset (or the basis of any other property) in the hands of a C corporation, and (b) has net unrealized built-in gain in excess of the net recognized built-in gain from prior years, enter the net unrealized built-in gain reduced by net recognized built-in gain from prior years. See instructions ➔ \$					
9	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	
10	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.						
11	Does the corporation satisfy both of the following conditions?					X
a The corporation's total receipts (see instructions) for the tax year were less than \$250,000.						
b The corporation's total assets at the end of the tax year were less than \$250,000. If "Yes," the corporation is not required to complete Schedules L and M-1.						

Schedule B Other Information (see instructions) (continued)

	Yes	No
12 During the tax year, did the corporation have any non-shareholder debt that was canceled, was forgiven, or had the terms modified so as to reduce the principal amount of the debt? If "Yes," enter the amount of principal reduction → \$		X
13 During the tax year, was a qualified subchapter S subsidiary election terminated or revoked? If "Yes," see instructions		X
14a Did the corporation make any payments in 2021 that would require it to file Form(s) 1099?		
b If "Yes," did the corporation file or will it file required Forms 1099?		
15 Is the corporation attaching Form 8996 to certify as a Qualified Opportunity Fund?		X
If "Yes," enter the amount from Form 8996, line 15 → \$		

Schedule K Shareholders' Pro Rata Share Items

Total amount

Income (Loss)	1 Ordinary business income (loss) (page 1, line 21)	1 139,229
	2 Net rental real estate income (loss) (attach Form 8825)	2
	3a Other gross rental income (loss)..... 3a	
	b Expenses from other rental activities (attach statement)..... 3b	
	c Other net rental income (loss). Subtract line 3b from line 3a	3c
	4 Interest income	4
	5 Dividends: a Ordinary dividends	5a
	b Qualified dividends	5b
	6 Royalties	6
	7 Net short-term capital gain (loss) (attach Schedule D (Form 1120-S))	7
Income (Loss)	8a Net long-term capital gain (loss) (attach Schedule D (Form 1120-S)).....	8a
	b Collectibles (28%) gain (loss)	8b
	c Unrecaptured section 1250 gain (attach statement).....	8c
Income (Loss)	9 Net section 1231 gain (loss) (attach Form 4797)	9
	10 Other income (loss) (see instructions) Type →	10
	11 Section 179 deduction (attach Form 4562)	11
	12a Charitable contributions	12a
Deduction	b Investment interest expense.....	12b
	c Section 59(e)(2) expenditures Type →	12c
	d Other deductions (see instructions) Type →	12d
Credit	13a Low-income housing credit (section 42(j)(5))	13a
	b Low-income housing credit (other)	13b
	c Qualified rehabilitation expenditures (rental real estate) (attach Form 3468, if applicable)	13c
	d Other rental real estate credits (see instructions) ... Type →	13d
	e Other rental credits (see instructions) Type →	13e
	f Biofuel producer credit (attach Form 6478)	13f
International Transactions	9 Other credits (see instructions) Type →	13g
	14 Attach Schedule K-2 (Form 1120-S), Shareholders' Pro Rata Share Items—International, and check this box to indicate you are reporting items of international tax relevance → <input type="checkbox"/>	
Alternative Minimum Tax (AMT)	15a Post-1986 depreciation adjustment	15a
	b Adjusted gain or loss	15b
	c Depletion (other than oil and gas)	15c
	d Oil, gas, and geothermal properties – gross income	15d
	e Oil, gas, and geothermal properties – deductions	15e
Items Affecting Shareholder Basis	f Other AMT items (attach statement)	15f
	16a Tax-exempt interest income	16a
	b Other tax-exempt income	16b
	c Nondeductible expenses	16c 15,216
	d Distributions (attach statement if required) (see instructions)	16d 145,019
	e Repayment of loans from shareholders	16e
	f Foreign taxes paid or accrued	16f

Schedule K Shareholders' Pro Rata Share Items (continued)		Total amount	
Other Information	17a Investment income	17a	
	b Investment expenses	17b	
	c Dividend distributions paid from accumulated earnings and profits	17c	
	d Other items and amounts (attach statement) S E E S T A T E M E N T 2		
Reconciliation	18 Income (loss) reconciliation. Combine the amounts on lines 1 through 10 in the far right column. From the result, subtract the sum of the amounts on lines 11 through 12d and 16f	18	139,229

Schedule L Balance Sheets per Books		Beginning of tax year		End of tax year	
Assets		(a)	(b)	(c)	(d)
1	Cash		11,847		51,756
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) S T M T 3		251,056		550,507
7	Loans to shareholders				
8	Mortgage and real estate loans				
9	Other investments (attach statement)	30,210		30,210	
10a	Buildings and other depreciable assets	(	30,210	(	30,210
b	Less accumulated depreciation				
11a	Depletable assets	((
b	Less accumulated depletion				
12	Land (net of any amortization)				
13a	Intangible assets (amortizable only)	825		825	
b	Less accumulated amortization	(825	0	(825	0
14	Other assets (attach statement)				
15	Total assets		293,113		632,473
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		153,500		499,900
21	Other liabilities (attach statement) S T M T 4		254,114		268,080
22	Capital stock		1,345		1,345
23	Additional paid-in capital				
24	Retained earnings		-115,846		-136,852
25	Adjustments to shareholders' equity (attach statement)				
26	Less cost of treasury stock	((
27	Total liabilities and shareholders' equity		293,113		632,473

Schedule M-1 Reconciliation of Income (Loss) per Books With Income (Loss) per Return**Note:** The corporation may be required to file Schedule M-3. See instructions.

1 Net income (loss) per books	124,013	5 Income recorded on books this year not included on Schedule K, lines 1 through 10 (itemize):	
2 Income included on Schedule K, lines 1, 2, 3c, 4, 5a, 6, 7, 8a, 9, and 10, not recorded on books this year (itemize)		a Tax-exempt interest \$	
3 Expenses recorded on books this year not included on Schedule K, lines 1 through 12 and 16f (itemize):		6 Deductions included on Schedule K, lines 1 through 12 and 16f, not charged against book income this year (itemize):	
a Depreciation \$		a Depreciation \$	
b Travel and entertainment \$			
STMT 5 15,216	15,216	7 Add lines 5 and 6	
4 Add lines 1 through 3	139,229	8 Income (loss) (Schedule K, line 18). Subtract line 7 from line 4.	139,229

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

	(a) Accumulated adjustments account	(b) Shareholders' undistributed taxable income previously taxed	(c) Accumulated earnings and profits	(d) Other adjustments account
1 Balance at beginning of tax year				
2 Ordinary income from page 1, line 21	139,229			
3 Other additions				
4 Loss from page 1, line 21	()			
5 Other reductions	()			(15,216)
6 Combine lines 1 through 5	139,229			-15,216
7 Distributions	139,229			
8 Balance at end of tax year. Subtract line 7 from line 6	0			-15,216

Form **1120-S** (2021)

Schedule K-1
(Form 1120-S)
Department of the Treasury
Internal Revenue Service

2021

For calendar year 2021, or tax year

beginning ending

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

See separate instructions.

☐ Final K-1 ☐ Amended K-1

OMB No. 1545-0123

Part III Shareholder's Share of Current Year Income, Deductions, Credits, and Other Items			
1	Ordinary business income (loss) 139,229	13	Credits
2	Net rental real estate income (loss)		
3	Other net rental income (loss)		
4	Interest income		
5a	Ordinary dividends		
5b	Qualified dividends	14	Schedule K-3 is attached if checked..... ➡ <input type="checkbox"/>
6	Royalties	15	Alternative minimum tax (AMT) items
7	Net short-term capital gain (loss)		
8a	Net long-term capital gain (loss)		
8b	Collectibles (28%) gain (loss)		
8c	Unrecaptured section 1250 gain		
9	Net section 1231 gain (loss)	16 C*	Items affecting shareholder basis 15,216
10	Other income (loss)	D	145,019
		17 V*	Other information STMT
11	Section 179 deduction	AC*	STMT
12	Other deductions		
18	More than one activity for at-risk purposes*		
19	More than one activity for passive activity purposes*		
* See attached statement for additional information.			

Part I Information About the Corporation

A Corporation's employer identification number
*-***7732

B Corporation's name, address, city, state, and ZIP code
YNJ MANAGEMENT LLC

4055 JACKPOT RD
JACKPOT RD OH 43123

C IRS Center where corporation filed return
E-FILE

D Corporation's total number of shares
Beginning of tax year
End of tax year

Part II Information About the Shareholder

E Shareholder's identifying number
*-***-***

F Shareholder's name, address, city, state, and ZIP code
NISHITKUMAR PATEL
4055 JCKPOT RD

GROVE CITY OH 43123

G Current year allocation percentage 100.000000 %

H Shareholder's number of shares
Beginning of tax year
End of tax year

I Loans from shareholder
Beginning of tax year \$
End of tax year \$

For IRS Use Only

Section 199A Information Worksheet

Form 1120-S

2021

For calendar year 2021 or tax year beginning , ending

Name

YNJ MANAGEMENT LLC

Employer Identification Number

-*7732

	Activity Description	Pass-Through Entity EIN	PTP	Aggregated	SSTB
Column A	PAGE 1 ACTIVITY				
Column B					
Column C					
Column D					
Column E					

	Column A	Column B	Column C	Column D	Column E
QBI or Qualified PTP items:					
Ordinary business income (loss)	139,229				
Net rental real estate income (loss)					
Other net rental income (loss)					
Royalty income (loss)					
Section 1231 gain (loss)					
Other income (loss)					
Section 179 deduction					
Other deductions					
W-2 wages	73,675				
Qualified property					
Other Information:					
QBI allocable to cooperative pmts received					
W-2 wages allocable to qualified payments					
Section 199A(g) deduction					

Section 199A REIT dividends

Federal Statements

FYE: 12/31/2021

Statement 1 - Form 1120-S, Page 1, Line 19 - Other Deductions

<u>Description</u>	<u>Amount</u>
ACCOUNTING FEES	\$ 1,500
COMPUTER EXPENSE	
LEGAL & PROFESSIONAL FEE	17,751
AUTO EXPENSE	8,602
BANK & CREDIT CARD CHARGES	102
DUES & SUBSCRIPTIONS	949
INSURANCE	4,766
OFFICE SUPPLIES	2,489
PAYROLL FEES	745
TRAVEL EXPENSE	4,230
TOTAL	\$ <u>41,134</u>

Statement 2 - Form 1120-S, Page 4, Schedule K, Line 17d - Other Items and Amounts

<u>Description</u>	<u>Amount</u>
SECTION 199A INFORMATION - SEE ATTACHED WRK	\$

Statement 3 - Form 1120-S, Page 4, Schedule L, Line 6 - Other Current Assets

<u>Description</u>	<u>Beginning of Year</u>	<u>End of Year</u>
INTERCOMPANY TRANSFERS	\$ 251,056	\$ 550,507
TOTAL	\$ <u>251,056</u>	\$ <u>550,507</u>

Statement 4 - Form 1120-S, Page 4, Schedule L, Line 21 - Other Liabilities

<u>Description</u>	<u>Beginning of Year</u>	<u>End of Year</u>
LOAN:CHIRAG PATEL	\$ 50,000	\$
LOAN:DIPESH PATEL	50,000	4,000
LOAN:NISHANT PATEL	80,000	80,000
LOAN:PRAVINKUMAR PATEL	25,000	
LOAN:SIDHARTH PATEL	45,000	
LOAN:NASH PATEL	2,000	184,080
OVERDRAFT PROTECTION	2,114	
TOTAL	\$ <u>254,114</u>	\$ <u>268,080</u>

Statement 5 - Form 1120-S, Page 5, Schedule M-1, Line 3 - Expenses on Books Not on Return

<u>Description</u>	<u>Amount</u>
OFFICER LIFE INS PREMIUMS	\$ 15,216
TOTAL	\$ <u>15,216</u>

Form 1120-S, Page 5, Schedule M-2, Line 5(a) - Other Reductions

Description	Amount
ADJUSTMENT TO EQUITY	\$
TOTAL	\$ 0

263257732 YNJ MANAGEMENT LLC

-*7732

FYE: 12/31/2021

Federal Statements

NISHITKUMAR PATEL

*****-**-1374**

Schedule K-1, Box 16, Code C - Nondeductible Expenses

<u>Description</u>	<u>Shareholder Amount</u>
OFFICER LIFE PREMIUMS	\$ 15,216
TOTAL	<u>\$ 15,216</u>

Schedule K-1, Box 17, Code AC - Gross Receipts for Section 448(c)

<u>Description</u>	<u>Shareholder Amount</u>
8990 GROSS RECEIPTS FOR 2020	162,565
8990 GROSS RECEIPTS FOR 2019	325,033
8990 GROSS RECEIPTS FOR 2018	244,474

Form 1120-S Schedule K-1		Schedule K-1, Box 17, Code V Shareholder's Section 199A Information	2021
Name		For calendar year 2021 or tax year beginning , ending	

YNJ MANAGEMENT LLC NISHITKUMAR PATEL	Taxpayer Identification Number **-***7732 ***-**-1374
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	Activity Description	Pass-Through Entity EIN	PTP	Aggregated	SSTB
Column A	PAGE 1 ACTIVITY				
Column B					
Column C					
Column D					
Column E					

QBI or Qualified PTP items:	Column A	Column B	Column C	Column D	Column E
Ordinary business income (loss)	139,229				
Net rental real estate income (loss)					
Other net rental income (loss)					
Royalty income (loss)					
Section 1231 gain (loss)					
Other income (loss)					
Section 179 deduction					
Other deductions					
W-2 wages	73,675				
Qualified property					
Other Information:					
QBI allocable to cooperative pmts received					
W-2 wages allocable to qualified payments					
Section 199A(g) deduction					
Section 199A REIT dividends					

**This foregoing document was electronically filed with the Public Utilities
Commission of Ohio Docketing Information System on**

5/22/2023 9:00:44 AM

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Case No(s). 18-0388-EL-AGG

Summary: In the Matter of the Application of YNJ Management LLC