1100X 2020 AMENDED DELAWARE CORPORATION INCOME TAX RETURN

(a) Foreign dividends, interest and royalties 2a 0a 0a 0a (b) Net interest from JLS securities (Schedule 1, Column 2)	For Fiscal year beginning BB and en Name of Corporation	ding MM DD							
City Sate Zp Cole VES Detecter address, if different than above. Did you file a Federal Amended Return? Is this Return being filed due to an IRS audit? City Sate Zp Cole Nature of Business: Operation of the Cole of				EMPLOYER IDENTIFICATION NUMBER					
Delever address, fidtheret hum above: Did you file a Federal Amended Return? Delever address, fidtheret hum above: Is this Return being filed due to an IRS audit? Div State of Incorporation: Nature of Business: ImpORTANT - ALL Schedules and lines MUST be completed. Adduety Net C-NANCE Conference 1. Federal Taxable Income 1 00 </th <th></th> <th colspan="5"></th>									
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19. Total payments and credits (Less refunds and carry-overs) 19 00 20. (a) If Line 13 is greater than Line 19 enter BALANCE DUE 20a 00 (b) Interest at 1/2% per month 20b 00							00 18b		
20. (a) If Line 13 is greater than Line 19 enter BALANCE DUE 20a 00 (b) Interest at 1/2% per month 20b 00							00 19		
(b)Interest at 1/2% per month							00 20 a		
(a) Tatal Tau and latera et Due	(b)Interest at 1/2% per month				20b		00 20b		
(c) Total Tax and Interest Due	(c) Total Tax and Interest Due				20c		00 20c		
21. If Line 19 is greater than Line 13 enter OVERPAYMENT (a) TOTAL OVERPAYMENT 21a 00	. If Line 19 is greater than Line 13 enter OVERPAYMEN	· · /					00 21a		
(b)to be REFUNDED		(b)to be REFUN					00 21b		
(c) to be CREDITED TO TENTATIVE TAX 21c 00		(c) to be CREDI	IED TO _	TENTATIVE	IAX 21c		00 21c		

SCHEDULE 1 - INTEREST INCOME

2020 FORM 1100X

	Description of Interest	Column 1 Foreign Interest	Column 2 Interest Received From U.S. Securities		Column 3 erest Received Fro filiated Companie		Column 4 Interest Received From State Obligation		Column 5 Other Interest Income		
1					(
2											
3											
4											
5											
6	TOTALS										
	SCHEDULE 2 - NON	I-APPORTIONAB	LE INCOME ALLO	OCAI	TED WITHIN A	ND	WITHOUT DE	LAV	VARE		
	Description		Column 1 Within Delaware	•	Co Withou	lumi It De			Column 3 Total		
1	Rents and royalties from tangible prope	erty									
2	Royalties from patents and copyrights										
3	Gains or (losses) from sale of real prop	erty									
4	Gains or (losses) from sale of depreciable	le tangible property									
5	Interest income from Schedule 1, Colum	ns 4 and 5, Line 6									
6	Total										
7	Less: Applicable expenses (Attach state	ment)									
3	Total non-apportionable income										
	SCHEDULE 3 - APPORTIO										
	Schedule 3-A - Gros	ss Receipts Subj	ect to Apportionr	nent							
	Description				Within Dela	awar		Vithir	n and Without Delay	ware	
1	Gross receipts from sales of tangible p						00			0	
2	Gross income from other sources (Atta	ch statement)					00				
3	Total						00				
	Schedule 3-B - Dete		portionment Perc	entag	ge						
1	Gross receipts and gross income from wit						= 00				
2	Gross receipts and gross income from wit	nin and without Delawa	re								
3	Apportionment percentage (see instruction	ns)									
	Schedule 3-C - Gros	ss Real and Tang	ible Personal Pro	opert	y						
Description		Within De	Within Delaware		Within and Without Delawa		ut Delaware				
			Beginning of Year		End of Year		Beginning of Year	r	End of Year		
1	Real and tangible property owned										
2	Real and tangible property rented (Eight tin	nes annual rental paid)									
3	Total										

4	Less: Value at original cost of real and tangible property, the income from which is separately allocated (See instructions)				00 4
5	Total	00			00 5
6	Average value (See instructions)				00 6
	Schedule 3-D - Wages, Salaries, and Oth	er Compensation Pai	d or Accrued to Emp	loyees	
	Schedule 3-D - Wages, Salaries, and Oth Description	er Compensation Pai	d or Accrued to Emp Within Delaware	-	ithout Delaware
1	•	er Compensation Pai		-	ithout Delaware
1 2	Description			-	ithout Delaware



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. If prepared by a person other than the taxpayer, the declaration is based on all information of which the preparer has any knowledge.

Date	Signature of Officer	Title	Email Address
Date	Signature of individual or firm preparing the return	Addre	SS
MAKE CHECK	PAYABLE AND MAIL TO: Delaware Division of Revenue, P.O. Bo	x 2044, Wilmington, DE 19899-2044	

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