

California Corporation Franchise or Income Tax Return

2018

100

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

Corporation name **Low Power Company Inc** California corporation number **9364015** FEIN **27-78771**

Additional information. See instructions. California Secretary of State file number

Street address (suite/room no.) **212 Thompson Sq** PMB no.

City (If the corporation has a foreign address, see instructions.) **Mountain View** State **CA** ZIP code **94043**

Foreign country name Foreign province/state/country Foreign postal code

Schedule Q Questions (continued on Side 2)

A FINAL RETURN? Dissolved Surrendered (withdrawn) Merged/Reorganized IRC Section 338 sale QSub election
Enter date (mm/dd/yyyy) **02/28/2024**

B 1. Is income included in a combined report of a unitary group? Yes No
If "Yes," indicate: Wholly within CA (R&TC 25101.15) Within and outside of CA

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

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

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

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

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

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

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

State Adjustments	1 Net income (loss) before state adjustments. See instructions	1	(30,209)	00
	2 Amount deducted for foreign or domestic tax based on income or profits from Schedule A	2		00
	3 Amount deducted for tax under the provisions of the Corporation Tax Law from Schedule A	3		00
	4 Interest on government obligations	4		00
	5 Net California capital gain from Side 6, Schedule D, line 11	5		00
	6 Depreciation and amortization in excess of amount allowed under California law. Attach form FTB 3885	6		00
	7 Net income from corporations not included in federal consolidated return. See instructions.	7		00
	8 Other additions. Attach schedule(s)	8		00
	9 Total. Add line 1 through line 8.	9	(30,209)	00

State Adjustments (cont.)	10	Intercompany dividend elimination. Attach Schedule H (100)	10		00	
	11	Dividends received deduction. Attach Schedule H (100)	11		00	
	12	Additional depreciation allowed under CA law. Attach form FTB 3885	12		00	
	13	Capital gain from federal Form 1120, line 8	13		00	
	14	Charitable Contributions	14		00	
	15	Other deductions. Attach schedule(s)	15		00	
	16	Total. Add line 10 through line 15	16		00	
CA Net Income	17	Net income (loss) after state adjustments. Subtract line 16 from Side 1, line 9	17		(30,209)	00
	18	Net income (loss) for state purposes. Complete Schedule R if apportioning or allocating income. See instructions	18		(30,209)	00
	19	Net operating loss (NOL) deduction. See instructions	19	0	00	
	20	EZ, LARZ, TTA, or LAMBRA NOL carryover deduction. See instructions	20		00	
	21	Disaster loss deduction. See instructions	21	0	00	
	22	Net income for tax purposes. Combine line 19 through line 21. Then, subtract from line 18	22		(30,209)	00
Taxes	23	Tax. <u>8.84</u> % x line 22 (at least minimum franchise tax, if applicable). See instructions	23			00
	24	Credit name _____ code ● _____ amount ▶	24			00
	25	Credit name _____ code ● _____ amount ▶	25			00
	26	To claim more than two credits, see instructions	26			00
	27	Add line 24 through line 26	27			00
	28	Balance. Subtract line 27 from line 23 (at least minimum franchise tax, if applicable)	28			00
Payments	29	Alternative minimum tax. Attach Schedule P (100). See instructions	29			00
	30	Total tax. Add line 28 and line 29	30			00
	31	Overpayment from prior year allowed as a credit	31			00
	32	2018 Estimated tax payments. See instructions	32			00
	33	2018 Withholding (Form 592-B and/or 593). See instructions	33			00
	34	Amount paid with extension of time to file tax return	34			00
Refund or Amount Due	35	Total payments. Add line 31 through line 34	35			00
	36	Use tax. This is not a total line. See instructions	36			00
	37	Payments balance. If line 35 is more than line 36, subtract line 36 from line 35	37			00
	38	Use tax balance. If line 36 is more than line 35, subtract line 35 from line 36	38			00
	39	Franchise or income tax due. If line 30 is more than line 37, subtract line 37 from line 30	39			00
	40	Overpayment. If line 37 is more than line 30, subtract line 30 from line 37	40			00
	41	Amount of line 40 to be credited to 2019 estimated tax	41			00
	42	Refund. Subtract line 41 from line 40. See instructions to have the refund directly deposited.	42			00
	<input type="checkbox"/> Checking					
	<input type="checkbox"/> Savings					
	42a. ● Routing number	42b. ● Type	42c. ● Account number			
	43 a Penalties and interest	43a			00	
	b <input type="checkbox"/> Check if estimate penalty computed using Exception B or C on form FTB 5806. See instructions.					
	44 Total amount due. Add line 38, line 39, line 41, and line 43a. Then, subtract line 40 from the result	44			00	

Schedule Q Questions (continued from Side 1)

D If the corporation filed on a water's-edge basis pursuant to R&TC Sections 25110 and 25113 in previous years, enter the date the water's-edge election ended (mm/dd/yyyy) ● _____

E Was the corporation's income included in a consolidated federal return? ● Yes No

F Principal business activity code. (Do not leave blank): ● 5 4 1 5 1 2

Business activity Production and Development

Product or service Computer Servers

Schedule Q Questions (continued on Side 3)

G Date incorporated (mm/dd/yyyy): 03/22/2010 Where: ● State DE Country _____

H Date business began in California or date income was first derived from California sources (mm/dd/yyyy) ● 03/22/2010

I First return? ● Yes No If "Yes" and this corporation is a successor to a previously existing business, check the appropriate box.
● (1) Sole proprietorship (2) Partnership (3) Joint venture (4) Corporation (5) Other
(Attach statement showing name, address, and FEIN/SSN/ITIN of previous business.)

J "Doing business as" name. See instructions: ● _____

K At any time during the taxable year, was more than 50% of the voting stock:
1. Of the corporation owned by any single interest? ● Yes No
2. Of another corporation owned by this corporation? ● Yes No
3. Of this and one or more other corporations owned or controlled, directly or indirectly, by the same interests? ● Yes No
If 1 or 3 is "Yes," enter the country of the ultimate parent ● _____
If 1, 2, or 3 is "Yes," furnish a statement of ownership indicating pertinent names, addresses, and percentages of stock owned.
If the owner(s) is an individual, provide the SSN/ITIN and see FTB 1131, for more information.

L Has the corporation included a reportable transaction or listed transaction within this return? (See instructions for definitions) ● Yes No
If "Yes," complete and attach federal Form 8886 for each transaction.

M Is this corporation apportioning or allocating income to California using Schedule R? ● Yes No

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

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

P Location of principal accounting records SEE CAC SCHQ FORM

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

R Does this corporation or any of its subsidiaries have a Deferred Intercompany Stock Account (DISA)? ● Yes No
If "Yes," enter the total balance of all DISAs ● \$ _____

S Is this corporation or any of its subsidiaries a RIC? ● Yes No

T Is this corporation treated as a REMIC for California purposes? ● Yes No

U Is this corporation a REIT for California purposes? ● Yes No

V Is this corporation an LLC or limited partnership electing to be taxed as a corporation for federal purposes? ● Yes No
If "Yes," enter the effective date of the election (mm/dd/yyyy): _____

W Is this corporation to be treated as a credit union? ● Yes No

X Is the corporation under audit by the IRS or has it been audited by the IRS in a prior year? ● Yes No

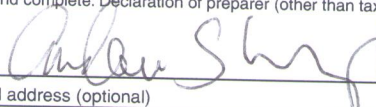
Y Have all required information returns (e.g. federal Forms 1099, 5471, 5472, 8300, 8865, etc.) been filed with the Franchise Tax Board? ● N/A Yes No

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

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

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

CC 1. Did this corporation, or any corporation in a combined reporting group, receive any qualified health care service plan income that is excluded from gross income for state purposes (R&TC Section 24330)? ● Yes No
2. Is this corporation's, or any corporation in a combined reporting group's, only source of income qualified health care service plan income that is excluded from gross income under R&TC Section 24330 for the taxable year? ● Yes No

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.			
	Signature of officer 	Title <u>President</u>	Date <u>02/28/2024</u>	● Telephone ()
Paid Preparer's Use Only	Preparer's signature		Date	● PTIN
	Firm's name (or yours, if self-employed) and address		Check if self-employed <input type="checkbox"/>	● Firm's FEIN
				● Telephone ()
	May the FTB discuss this return with the preparer shown above? See instructions ● <input type="checkbox"/> Yes <input type="checkbox"/> No			