Case:16-20499-EEB Doc#:1 Filed:10/25/16 Entered:10/25/16 16:14:13 Page1 of 9

Fill	in this information to iden	ify your case:		
Uni	ited States Bankruptcy Court	for the:		
DIS	STRICT OF COLORADO			
Ca	se number (if known)	Chapter	<u> 11 </u>	
			-	☐ Check if this an amended filing
	ficial Form 201 Dluntary Petiti	on for Non-Individuals F	iling for Bankı	ruptcv 4/16
if m For	ore space is needed, attach more information, a separa	a separate sheet to this form. On the top of any te document, <i>Instructions for Bankruptcy Forms</i>	additional pages, write the	debtor's name and case number (if known).
1.	Debtor's name	KSM International, LLC		
2.	All other names debtor used in the last 8 years	DBA KSM Membership and Programs		
	Include any assumed names, trade names and doing business as names	DBA KSM Mastery DBA KSM Leadership and Coaching DBA KSM Live		
3.	Debtor's federal Employer Identification Number (EIN)	45-4345151		
4.	Debtor's address	Principal place of business	Mailing addres business	s, if different from principal place of
		3980 North Broadway Suite 103-222 Boulder, CO 80304		
		Number, Street, City, State & ZIP Code	P.O. Box, Numb	per, Street, City, State & ZIP Code
		Boulder County	Location of pri	ncipal assets, if different from principal ess
			Number, Street,	City, State & ZIP Code
5.	Debtor's website (URL)			
6.	Type of debtor	■ Corporation (including Limited Liability Compar	ov / LC and Limited Linklife.	Portnorship (LLD)\
		□ Partnership (excluding LLP)	iy (CCO) and ciffiled ciability	raineisiip (LLT))
		Other. Specify:		

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Deb	Troin internationally D	LC				Case number (if known)					
	Name										
7.	Describe debtor's business	A. Check one:									
		☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))									
		☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))									
		☐ Railroad (as defined in 11 U.S.C. § 101(44))									
		☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))									
		☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))									
				efined in 11 U.S.C. § 781(3)							
		None of the at	,	o	,						
		- None of the at	JUVE								
		B. Check all that a	pply								
		☐ Tax-exempt en	tity (as	s described in 26 U.S.C. §5)1)						
		☐ Investment co	mpan	y, including hedge fund or p	ooled ir	nvestment vehicle (as defined in 15 U.S.C. §80a-3)					
		☐ Investment ad	visor ((as defined in 15 U.S.C. §80	b-2(a)((11))					
) 4-digit code that best describes debtor.					
		See http://www	.usco	urts.gov/four-digit-national-a	ssociat	tion-naics-codes.					
8.	Under which chapter of the	Check one:									
	Bankruptcy Code is the debtor filing?	☐ Chapter 7									
	deplor many:	☐ Chapter 9									
		■ Chapter 11. C	heck a	all that apply:							
		•			ntinaen	nt liquidated debts (excluding debts owed to insiders or affiliates)					
						nt subject to adjustment on 4/01/19 and every 3 years after that).					
				business debtor, attach th	e most i ome tax	ebtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small recent balance sheet, statement of operations, cash-flow ix return or if all of these documents do not exist, follow the (B).					
				A plan is being filed with ti							
					•	licited prepetition from one or more classes of creditors, in					
			_	accordance with 11 U.S.C	. § 1126	6(b).					
			IJ	Exchange Commission ac	cording etition f	odic reports (for example, 10K and 10Q) with the Securities and g to § 13 or 15(d) of the Securities Exchange Act of 1934. File the for Non-Individuals Filing for Bankruptcy under Chapter 11 m.					
				The debtor is a shell comp	any as	s defined in the Securities Exchange Act of 1934 Rule 12b-2.					
		☐ Chapter 12									
9.	Were prior bankruptcy cases filed by or against	■ No.									
	the debtor within the last 8 years?	☐ Yes.									
	If more than 2 cases, attach a	Diotelot		\A/L	on	Case number					
	separate list.	District			ien	Case number					
		District			en	Case number					
10.	Are any bankruptcy cases	■ No				***					
	pending or being filed by a business partner or an	□ Yes.									
	affiliate of the debtor?	□ Tes.									
	List all cases. If more than 1,	Debtor				Relationship					
	attach a separate list			10/1-	en	Case number, if known					
		District		vv:		Case Huttiber, it known					

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Deb	otor KSM international,	, LLC		Case number (if known	n)				
	Name	-							
11.	Why is the case filed in	Check all that apply:							
	this district?		Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediate preceding the date of this petition or for a longer part of such 180 days than in any other district.						
		□ A	bankruptcy case concerning de	btor's affiliate, general partner, or partners	ship is pending in this district.				
12.	Does the debtor own or	■ No							
	have possession of any real property or personal property that needs	☐ Yes.	Answer below for each proper	rty that needs immediate attention. Attach	additional sheets if needed.				
	immediate attention?		Why does the property need	d immediate attention? (Check all that ap	oply.)				
			☐ It poses or is alleged to po What is the hazard?	se a threat of imminent and identifiable ha	•				
				ecured or protected from the weather.	.,				
				ds or assets that could quickly deteriorate of meat, dairy, produce, or securities-related	or lose value without attention (for example, assets or other options).				
			☐ Other						
			Where is the property?						
				Number, Street, City, State & ZIP Code					
			Is the property insured?						
	•		□ No						
			☐ Yes. Insurance agency						
			Contact name						
			Phone						
	Statistical and admin	istrative i	nformation						
13.	Debtor's estimation of	. (Check one:						
	available funds	ı	Funds will be available for dis	stribution to unsecured creditors.					
		_	_	nses are paid, no funds will be available to	o unsecured creditors.				
14.	Estimated number of	■ 1-49		1 ,000-5,000	☐ 25,001-50,000				
	creditors	□ 50-99)	☐ 5001-10,000	☐ 50,001-100,000				
		☐ 100-1		□ 10,001-25,000	☐ More than100,000				
		□ 200-9	999						
15.	Estimated Assets	■ \$0 - \$	50 000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion				
			01 - \$100,000	☐ \$10,000,001 - \$50 million	☐ \$1,000,000,001 - \$10 billion				
			,001 - \$500,000	☐ \$50,000,001 - \$100 million	☐ \$10,000,000,001 - \$50 billion				
		□ \$500,	001 - \$1 million	☐ \$100,000,001 - \$500 million	☐ More than \$50 billion				
16.	Estimated liabilities	□ \$0 - \$	50,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion				
			001 - \$100,000	☐ \$10,000,001 - \$50 million	☐ \$1,000,000,001 - \$10 billion				
		= \$100,	001 - \$500,000	□ \$50,000,001 - \$100 million	☐ \$10,000,000,001 - \$50 billion				
		□ \$500	001 - \$1 million	☐ \$100,000,001 - \$500 million	☐ More than \$50 billion				

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EXE KSM Internation	eal LLC	c	ase marber (Phaem)					
Name		··········						
Request for Relic	f, Declaration, and Signatures							
/ARNING — Bankruptcy fris	ud is a serious crime. Making a false st or up to 20 years, or both, 18 U.S.C. §§	iggement in connection with a b § 152, 1341, 1519, and 3571.	ankruptcy case can result in lines up to \$500,000 or					
7. Decigration and signature of authorized representative of debte	The debtor requests relief in acco	The debtor requests relief in accordance with the chapter of little 11, United States Code, specified in this polition.						
	I have been authorized to lie this	I have been authorized to file this polition on behalf of the debtor. I have examined the information in this perition and have a reasonable belief that the information is frued and correct.						
	(doctoro under penality of perjury	righes the foregoing is true to the foreign in the	correct					
	Executed of 10/04/	NY S						
	5 1/15 FANI	10d//	Kristin S. Morelli					
	Signature of authorized represent	Harve of Games	Preded name					
	Tale Manager							
			101-01					
8. Signature of attorney	X Signature of all officery for observe		Date 10/25/2016 MM/DD/YYYY					
	Loe M. Kutner							
	Printed name							
	Kutner Brinen, P.C.							
	1660 Lincoln Street, Suite 1	1850						
	Denver, CO 80264 Number, Street, City, State & Zil							
	Manney, Cherry Only, Chem we som		lak@kufnerlaw.com					
	Contact phone 303-832-240	IO Email address	IM K (a) KGTNETIGY. CO-					
	10966 Colorado		•					
	Ber number and State							

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United States Bankruptcy Court District of Colorado

		With the Ar state of anna		
În re	KSM International, LLC	Debtor(s)	Case No. Chapter	

VERIFICATION OF CREDITOR MATRIX

I, the Manager of the corporation named as the debtor in this case, hereby verify that the attached list of creditors is true and correct to the best of my knowledge.

Date: 10/024//6

Kristin S. Morelli/Manager

Signer/Title

10/24/2016

Report: Balance Sheet

KSM International BALANCE SHEET

As of July 1, 2016

	TOTAL
ASSETS	
Current Assets	
Bank Accounts	
CO Biz Bank Checking	-19,247.39
KSM Memberships	219.92
OEC - CO Biz Bank	0.00
OEI - CO Biz Bank	0.00
PayPal	3,104.50
US Bank - KSM Intl	8,273.16
Total Bank Accounts	\$ -7,649.81
Total Current Assets	\$ -7,649.81
Fixed Assets	
Accumulated Depreciation	-2,291.00
Fixed Asset- Equipment	2,916.12
Total Fixed Assets	\$625.12
Other Assets	
Due from OEC	0.00
SHAREHOLDER LOAN	0.00
Total Other Assets	\$0.00
TOTAL ASSETS	\$ -7,024.69
LIABILITIES AND EQUITY	
Liabilities	
Current Liabilities	
Accounts Payable	
Accounts Payable	195,822.67
Total Accounts Payable	\$195,822.67
Credit Cards	
American Express	0.00
Credit Card - OEI	16,512.44
Due to OEI Credit Card	0.00
Total Credit Cards	\$16,512.44
Other Current Liabilities	
Due to OEI	0.00
Loan from Kristin Personal	0.00
Total Other Current Liabilities	\$0.00
Total Current Liabilities	\$212,335.11
Total Liabilities	\$212,335.11
Equity	
Distributions	-12,472.31
Members Investment	17,335.48
Opening Bal Equity	0.00

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10/24/2016

TOTAL
-112,537.40
-111,685.57
\$ -219,359.80
\$ -7,024.69

Monday, Oct 24, 2016 11:20:48 AM PDT GMT-6 - Accrual Basis

SCHEDULE C (Form 1040)

Department of the Treasury Internal Revenue Service (99)

Profit or Loss From Business
(Sole Proprietorship)
Information about Schedule C and its separate instructions is at www.irs.gov/schedulec.
Attach to Form 1040, 1040NR, or 1041; partnerships generally must file Form 1065.

OMB No. 1545-0074

Name of proprietor								Social security number (SSN)		
KR:	ISTIN S. MORELLI									
A	Principal business or profession, includi	<u> </u>	Enter c	ode from instructions						
COZ	ACHING			▶ 541990						
C	Business name. If no separate business	Ī) Employ	rer ID number (EIN), (see instr.)						
KSI	M INTERNATIONAL LLC		45	-4345151						
E	Business address (including suite or roo									
	City, town or post office, state, and ZIP code .									
F	Accounting method: (1) L Cas									
G	Did you "materially participate" in the ope									
Н	If you started or acquired this business of	during 2	2014, check here	• • • • • • • • • • • • • • • • • • • •				▶∐		
ľ	Did you make any payments in 2014 that									
J	If "Yes," did you or will you file required F	orms 1	099?					X Yes No		
-	rt I Income									
1	Gross receipts or sales. See instructions				· -	. —	١.	4 055 000		
_	and the "Statutory employee" box on that						1	1,075,803.		
2	Returns and allowances						2	1 075 002		
3	Subtract line 2 from line 1						3	1,075,803.		
4	Cost of goods sold (from line 42)			• • • • • • • • • •		•••••	5	244,395. 831,408.		
5 6	Gross profit. Subtract line 4 from line 3 Other income, including federal and state						6	031,400.		
7							7	831,408.		
	Gross income. Add lines 5 and 6 Till Expenses. Enter expenses.	ene fo	or business use of	vour l	nome only on line 30		' '	031,400.		
8	Advertising	8			Office expense		18	1,105.		
9	Car and truck expenses	-	30,2341	19	Pension and profit-sharing plans		19	5,563.		
v	(see instructions)	9		20	Rent or lease (see instructions):			3,303.		
10	Commissions and fees	10			Vehicles, machinery, and equipment		20a			
11	Contract labor (see instructions)	11	84,808.		Other business property		20b	16,845.		
12	Depletion	12	<u> </u>	21	Repairs and maintenance		21	4,027.		
13	Depreciation and section 179	 -		22	Supplies (not included in Part III)		22			
	expense deduction (not included in			23	Taxes and licenses		23	8,711.		
	Part III) (see instructions)	13	2,216.	24	Travel, meals, and entertainment:		95%	<u> </u>		
14	Employee benefit programs (other		•	a	Travel		24a			
	than on line 19)	14			Deductible meals and					
15	Insurance (other than health)	15			entertainment (see instructions)		24b	5,299.		
16	Interest	Ø. 1371		25	Utilities		25	1,344.		
a	Mortgage (paid to banks, etc.)	16a		26	Wages (less employment credits)		26	88,501.		
b	Other	16b			Other expenses (from line 48)		27a	254,385.		
17	Legal and professional services	17	26,711.	b	Reserved for future use		27b			
28	Total expenses before expenses for bus	iness u	se of home. Add lines 8 th	rough 2	7a	▶	28	529,809.		
29	Tentative profit or (loss). Subtract line 28						29	301,599.		
30	Expenses for business use of your home			sewhere	e. Attach Form 8829					
	unless using the simplified method (see		•							
	Simplified method filers only: enter the			nome:			,			
	and (b) the part of your home used for be					<u> </u>				
04	Use the Simplified Method Worksheet in			ount to e	nter on line 30		30			
31	Net profit or (loss). Subtract line 30 from			\ and an	Cahadula CE lina D	٦				
	 If a profit, enter on both Form 1040, line 12 (or Form 1040NR, line 13) and on Schedule SE, line 2. (If you checked the box on line 1, see instructions). Estates and trusts, enter on Form 1041, line 3. 							301 500		
	 If you checked the box on line 1, see ins If a loss, you must go to line 32. 	a nenot	is). Estates and trusts, em	iei oli Fi	urm 1041, nne s.	ľ	31	301,599.		
32	If you have a loss, check the box that des	eribae :	your investment in this so	tivity (ec	ee instructions)	, ,				
0 2	 If you checked 32a, enter the loss on b 			- •	•	,	32a	All investment		
	(If you checked the box on line 1, see the					}	32b	is at risk. Some investment is not at risk.		
	• If you checked 32b, you must attach F		•		v / v + 1 1111 v v ·	J		io not at risk.		

	le C (Form 1040) 2014 KRISTIN S. MORELLI			Page 2
Part	III Cost of Goods Sold (see instructions)			
33	Method(s) used to value closing inventory: a Cost b Lower of cost or market c	Other (a	attach explanation)	
34	Was there any change in determining quantities, costs, or valuations between opening and closing inventory? If "Yes," attach explanation		Yes	No
35	Inventory at beginning of year. If different from last year's closing inventory, attach explanation	35		
36	Purchases less cost of items withdrawn for personal use	36		
37	Cost of labor. Do not include any amounts paid to yourself	37		
38	Materials and supplies	38		
39	Other costs SEE STATEMENT 20	39	244,	395.
40	Add lines 35 through 39	40	244,	395.
41	Inventory at end of year	41		
42	Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on line 4	42	244,	395.
Part	IV Information on Your Vehicle. Complete this part only if you are claiming car or truck			
	are not required to file Form 4562 for this business. See the instructions for line 13 to Form 4562.			
43	When did you place your vehicle in service for business purposes? (month, day, year)			
44	Of the total number of miles you drove your vehicle during 2014, enter the number of miles you used your vehicle for:			
а	Business b Commuting c Other			
45	Was your vehicle available for personal use during off-duty hours?		. Yes	No
46	Do you (or your spouse) have another vehicle available for personal use?	•••••	Yes [No
47 a b	Do you have evidence to support your deduction? If "Yes," is the evidence written?		Yes Yes	No No
	V Other Expenses. List below business expenses not included on lines 8-26 or line 30.		. 100	1110
	STATEMENT 19		254,	385.
		 -		
				
				
48	Total other expenses. Enter here and on line 27a	₄₈	254	385.