

Fill in this information to identify the case:

United States Bankruptcy Court for the:

_____ District of _____
(State)

Case number (if known): _____ Chapter _____

☐ Check if this is an amended filing**Official Form 201****Voluntary Petition for Non-Individuals Filing for Bankruptcy****12/15**

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and the case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name**2. All other names debtor used in the last 8 years**

Include any assumed names, trade names, and *doing business* as names

3. Debtor's federal Employer Identification Number (EIN)**4. Debtor's address****Principal place of business****Mailing address, if different from principal place of business**

Number Street

Number Street

P.O. Box

City State ZIP Code

City State ZIP Code

Location of principal assets, if different from principal place of business

County

Number Street

City State ZIP Code

5. Debtor's website (URL)**6. Type of debtor**☐ Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))☐ Partnership (excluding LLP)☐ Other. Specify: _____

Debtor _____ 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))
- ☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))
- ☐ None of the above

B. Check all that apply:

- ☐ Tax-exempt entity (as described in 26 U.S.C. § 501)
- ☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. § 80a-3)
- ☐ Investment advisor (as defined in 15 U.S.C. § 80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor. See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.

8. Under which chapter of the Bankruptcy Code is the debtor filing?**Check one:**

- ☐ Chapter 7
- ☐ Chapter 9
- ☐ Chapter 11. **Check all that apply:**
- ☐ Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,490,925 (amount subject to adjustment on 4/01/16 and every 3 years after that).
- ☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small business debtor, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- ☐ A plan is being filed with this petition.
- ☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
- ☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *Attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.
- ☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.
- ☐ Chapter 12

9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?☐ No

☐ Yes. District _____ When _____ Case number _____
MM / DD / YYYY

District _____ When _____ Case number _____
MM / DD / YYYY

If more than 2 cases, attach a separate list.

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?☐ No

☐ Yes. Debtor _____ Relationship _____
District _____ When _____
MM / DD / YYYY

Case number, if known _____

List all cases. If more than 1, attach a separate list.

Debtor _____ Case number (if known) _____

Name

11. Why is the case filed in *this* district?*Check all that apply:*

- ☐ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
- ☐ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?

- ☐ No
- ☐ Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.

Why does the property need immediate attention? *(Check all that apply.)*

- ☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.
What is the hazard? _____
- ☐ It needs to be physically secured or protected from the weather.
- ☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related 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 administrative information**13. Debtor's estimation of available funds***Check one:*

- ☐ Funds will be available for distribution to unsecured creditors.
- ☐ After any administrative expenses are paid, no funds will be available for distribution to unsecured creditors.

14. Estimated number of creditors

- | | | |
|----------------------------------|--|--|
| <input type="checkbox"/> 1-49 | <input type="checkbox"/> 1,000-5,000 | <input type="checkbox"/> 25,001-50,000 |
| <input type="checkbox"/> 50-99 | <input type="checkbox"/> 5,001-10,000 | <input type="checkbox"/> 50,001-100,000 |
| <input type="checkbox"/> 100-199 | <input type="checkbox"/> 10,001-25,000 | <input type="checkbox"/> More than 100,000 |
| <input type="checkbox"/> 200-999 | | |

15. Estimated assets

- | | | |
|--|--|--|
| <input type="checkbox"/> \$0-\$50,000 | <input type="checkbox"/> \$1,000,001-\$10 million | <input type="checkbox"/> \$500,000,001-\$1 billion |
| <input type="checkbox"/> \$50,001-\$100,000 | <input type="checkbox"/> \$10,000,001-\$50 million | <input type="checkbox"/> \$1,000,000,001-\$10 billion |
| <input type="checkbox"/> \$100,001-\$500,000 | <input type="checkbox"/> \$50,000,001-\$100 million | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
| <input type="checkbox"/> \$500,001-\$1 million | <input type="checkbox"/> \$100,000,001-\$500 million | <input type="checkbox"/> More than \$50 billion |

Debtor

Name

Case number (if known)

16. Estimated liabilities

- | | | |
|--|--|--|
| <input type="checkbox"/> \$0-\$50,000 | <input type="checkbox"/> \$1,000,001-\$10 million | <input type="checkbox"/> \$500,000,001-\$1 billion |
| <input type="checkbox"/> \$50,001-\$100,000 | <input type="checkbox"/> \$10,000,001-\$50 million | <input type="checkbox"/> \$1,000,000,001-\$10 billion |
| <input type="checkbox"/> \$100,001-\$500,000 | <input type="checkbox"/> \$50,000,001-\$100 million | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
| <input type="checkbox"/> \$500,001-\$1 million | <input type="checkbox"/> \$100,000,001-\$500 million | <input type="checkbox"/> More than \$50 billion |

Request for Relief, Declaration, and Signatures

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

17. Declaration and signature of authorized representative of debtor

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on _____
MM / DD / YYYY

X

Signature of authorized representative of debtor

Printed name

Title

18. Signature of attorney**X**

Signature of attorney for debtor

Date

MM / DD / YYYY

Printed name

Firm name

Number Street

City

State

ZIP Code

Contact phone

Email address

Bar number

State

Fill in this information to identify the case and this filing:

Debtor Name _____

United States Bankruptcy Court for the: _____ District of _____
(State)

Case number (If known): _____

Official Form 202**Declaration Under Penalty of Perjury for Non-Individual Debtors****12/15**

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☐ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☐ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☐ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☐ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☐ *Schedule H: Codebtors* (Official Form 206H)
- ☐ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ Amended Schedule _____
- ☐ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 03/09/2016
MM / DD / YYYY

X**Michael J. Chavez**

Signature of individual signing on behalf of debtor

Printed name

Position or relationship to debtor

Fill in this information to identify the case:

Debtor name _____

United States Bankruptcy Court for the: _____ District of _____
(State)

Case number (If known): _____

☐ Check if this is an amended filing**Official Form 204****Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders****12/15**

A list of creditors holding the 20 largest unsecured claims must be filed in a Chapter 11 or Chapter 9 case. Include claims which the debtor disputes. Do not include claims by any person or entity who is an *insider*, as defined in 11 U.S.C. § 101(31). Also, do not include claims by secured creditors, unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

	Name of creditor and complete mailing address, including zip code	Name, telephone number, and email address of creditor contact	Nature of the claim (for example, trade debts, bank loans, professional services, and government contracts)	Indicate if claim is contingent, unliquidated, or disputed	Amount of unsecured claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
					Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
1							
2							
3							
4							
5							
6							
7							
8							

Debtor

Name

Case number (if known)

	Name of creditor and complete mailing address, including zip code	Name, telephone number, and email address of creditor contact	Nature of the claim (for example, trade debts, bank loans, professional services, and government contracts)	Indicate if claim is contingent, unliquidated, or disputed	Amount of unsecured claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
					Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
9							
10							
11							
12							
13							
14							
15							
16							
17							
18							
19							
20							

Fill in this information to identify the case:

Debtor name _____

United States Bankruptcy Court for the: _____ District of _____
(State)

Case number (if known): _____

☐ Check if this is an amended filing**Official Form 206A/B****Schedule A/B: Assets — Real and Personal Property**

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents**1. Does the debtor have any cash or cash equivalents?**

- ☐ No. Go to Part 2.
- ☐ Yes. Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor**Current value of debtor's interest****2. Cash on hand**

\$ _____

3. Checking, savings, money market, or financial brokerage accounts (Identify all)

Name of institution (bank or brokerage firm) Type of account Last 4 digits of account number

3.1. _____ \$ _____

3.2. _____ \$ _____

4. Other cash equivalents (Identify all)

4.1. _____ \$ _____

4.2. _____ \$ _____

5. Total of Part 1

\$ _____

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

Part 2: Deposits and prepayments**6. Does the debtor have any deposits or prepayments?**

- ☐ No. Go to Part 3.
- ☐ Yes. Fill in the information below.

Current value of debtor's interest**7. Deposits, including security deposits and utility deposits**

Description, including name of holder of deposit

7.1. _____ \$ _____

7.2. _____ \$ _____

Debtor _____ Case number (if known) _____
 Name _____

Part 5: Inventory, excluding agriculture assets**18. Does the debtor own any inventory (excluding agriculture assets)?**

- ☐ No. Go to Part 6.
☐ Yes. Fill in the information below.

General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
19. Raw materials	_____	\$ _____	_____	\$ _____
20. Work in progress	_____	\$ _____	_____	\$ _____
21. Finished goods, including goods held for resale	_____	\$ _____	_____	\$ _____
22. Other inventory or supplies	_____	\$ _____	_____	\$ _____
23. Total of Part 5				\$ _____

Add lines 19 through 22. Copy the total to line 84.

24. Is any of the property listed in Part 5 perishable?

- ☐ No
☐ Yes

25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?

- ☐ No
☐ Yes. Book value _____ Valuation method _____ Current value _____

26. Has any of the property listed in Part 5 been appraised by a professional within the last year?

- ☐ No
☐ Yes

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)**27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?**

- ☐ No. Go to Part 7.
☐ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
28. Crops—either planted or harvested	\$ _____	_____	\$ _____
29. Farm animals <i>Examples:</i> Livestock, poultry, farm-raised fish	\$ _____	_____	\$ _____
30. Farm machinery and equipment (Other than titled motor vehicles)	\$ _____	_____	\$ _____
31. Farm and fishing supplies, chemicals, and feed	\$ _____	_____	\$ _____
32. Other farming and fishing-related property not already listed in Part 6	\$ _____	_____	\$ _____

Debtor

Name

Case number (if known)

33. Total of Part 6.

Add lines 28 through 32. Copy the total to line 85.

\$ _____

34. Is the debtor a member of an agricultural cooperative?

- ☐ No
- ☐ Yes. Is any of the debtor's property stored at the cooperative?
- ☐ No
- ☐ Yes

35. Has any of the property listed in Part 6 been purchased within 20 days before the bankruptcy was filed?

- ☐ No
- ☐ Yes. Book value \$ _____ Valuation method _____ Current value \$ _____

36. Is a depreciation schedule available for any of the property listed in Part 6?

- ☐ No
- ☐ Yes

37. Has any of the property listed in Part 6 been appraised by a professional within the last year?

- ☐ No
- ☐ Yes

Part 7: Office furniture, fixtures, and equipment; and collectibles**38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?**

- ☐ No. Go to Part 8.
- ☐ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39. Office furniture			
_____	\$ _____	_____	\$ _____
40. Office fixtures			
_____	\$ _____	_____	\$ _____
41. Office equipment, including all computer equipment and communication systems equipment and software			
_____	\$ _____	_____	\$ _____
42. Collectibles <i>Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles</i>			
42.1 _____	\$ _____	_____	\$ _____
42.2 _____	\$ _____	_____	\$ _____
42.3 _____	\$ _____	_____	\$ _____

43. Total of Part 7.

Add lines 39 through 42. Copy the total to line 86.

\$ _____

44. Is a depreciation schedule available for any of the property listed in Part 7?

- ☐ No
- ☐ Yes

45. Has any of the property listed in Part 7 been appraised by a professional within the last year?

- ☐ No
- ☐ Yes

Debtor _____ Case number (if known) _____
 Name _____

Part 8: Machinery, equipment, and vehicles**46. Does the debtor own or lease any machinery, equipment, or vehicles?**

- ☐ No. Go to Part 9.
- ☐ Yes. Fill in the information below.

General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles			
47.1 _____	\$ _____	_____	\$ _____
47.2 _____	\$ _____	_____	\$ _____
47.3 _____	\$ _____	_____	\$ _____
47.4 _____	\$ _____	_____	\$ _____
48. Watercraft, trailers, motors, and related accessories Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels			
48.1 _____	\$ _____	_____	\$ _____
48.2 _____	\$ _____	_____	\$ _____
49. Aircraft and accessories			
49.1 _____	\$ _____	_____	\$ _____
49.2 _____	\$ _____	_____	\$ _____
50. Other machinery, fixtures, and equipment (excluding farm machinery and equipment)			
_____	\$ _____	_____	\$ _____
51. Total of Part 8. Add lines 47 through 50. Copy the total to line 87.			\$ _____

52. Is a depreciation schedule available for any of the property listed in Part 8?

- ☐ No
- ☐ Yes

53. Has any of the property listed in Part 8 been appraised by a professional within the last year?

- ☐ No
- ☐ Yes

Debtor

Name

Case number (if known)

Part 9: Real property**54. Does the debtor own or lease any real property?**

- ☐ No. Go to Part 10.
- ☐ Yes. Fill in the information below.

55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest

Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available.	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
55.1 _____	_____	\$ _____	_____	\$ _____
55.2 _____	_____	\$ _____	_____	\$ _____
55.3 _____	_____	\$ _____	_____	\$ _____
55.4 _____	_____	\$ _____	_____	\$ _____
55.5 _____	_____	\$ _____	_____	\$ _____
55.6 _____	_____	\$ _____	_____	\$ _____

56. Total of Part 9.

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets. Copy the total to line 88.

\$ _____

57. Is a depreciation schedule available for any of the property listed in Part 9?

- ☐ No
- ☐ Yes

58. Has any of the property listed in Part 9 been appraised by a professional within the last year?

- ☐ No
- ☐ Yes

Part 10: Intangibles and intellectual property**59. Does the debtor have any interests in intangibles or intellectual property?**

- ☐ No. Go to Part 11.
- ☐ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60. Patents, copyrights, trademarks, and trade secrets _____	\$ _____	_____	\$ _____
61. Internet domain names and websites _____	\$ _____	_____	\$ _____
62. Licenses, franchises, and royalties _____	\$ _____	_____	\$ _____
63. Customer lists, mailing lists, or other compilations _____	\$ _____	_____	\$ _____
64. Other intangibles, or intellectual property _____	\$ _____	_____	\$ _____
65. Goodwill _____	\$ _____	_____	\$ _____

66. Total of Part 10.

Add lines 60 through 65. Copy the total to line 89.

\$ _____

Debtor _____ Case number (if known) _____
 Name _____

67. Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107)?

- ☐ No
☐ Yes

68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?

- ☐ No
☐ Yes

69. Has any of the property listed in Part 10 been appraised by a professional within the last year?

- ☐ No
☐ Yes

Part 11: All other assets

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- ☐ No. Go to Part 12.
☐ Yes. Fill in the information below.

**Current value of
debtor's interest**

71. Notes receivable

Description (include name of obligor)

_____ — _____ = ➔ \$ _____
 Total face amount doubtful or uncollectible amount

72. Tax refunds and unused net operating losses (NOLs)

Description (for example, federal, state, local)

_____	Tax year _____	\$ _____
_____	Tax year _____	\$ _____
_____	Tax year _____	\$ _____

73. Interests in insurance policies or annuities

_____ \$ _____

74. Causes of action against third parties (whether or not a lawsuit has been filed)

_____ \$ _____

Nature of claim _____

Amount requested \$ _____

75. Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims

_____ \$ _____

Nature of claim _____

Amount requested \$ _____

76. Trusts, equitable or future interests in property

_____ \$ _____

77. Other property of any kind not already listed *Examples:* Season tickets, country club membership

_____ \$ _____

_____ \$ _____

78. Total of Part 11.

Add lines 71 through 77. Copy the total to line 90.

\$ _____

79. Has any of the property listed in Part 11 been appraised by a professional within the last year?

- ☐ No
☐ Yes

Debtor

Name

Case number (if known)

Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form.

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1.</i>	\$ _____	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	\$ _____	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	\$ _____	
83. Investments. <i>Copy line 17, Part 4.</i>	\$ _____	
84. Inventory. <i>Copy line 23, Part 5.</i>	\$ _____	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	\$ _____	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	\$ _____	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	\$ _____	
88. Real property. <i>Copy line 56, Part 9.</i> ➔		\$ _____
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	\$ _____	
90. All other assets. <i>Copy line 78, Part 11.</i>	+ \$ _____	
91. Total. Add lines 80 through 90 for each column..... 91a.	\$ _____	+ 91b. \$ _____
92. Total of all property on Schedule A/B. Lines 91a + 91b = 92.		\$ _____

Fill in this information to identify the case:

Debtor name _____
 United States Bankruptcy Court for the: _____ District of _____
 (State)
 Case number (If known): _____

☐ Check if this is an
amended filing

Official Form 206D**Schedule D: Creditors Who Have Claims Secured by Property****12/15****Be as complete and accurate as possible.****1. Do any creditors have claims secured by debtor's property?**

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
☐ Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims**2. List in alphabetical order all creditors who have secured claims.** If a creditor has more than one secured claim, list the creditor separately for each claim.

Column A
Amount of claim
Do not deduct the value
of collateral.

Column B
Value of collateral
that supports this
claim

2.1 Creditor's name**Describe debtor's property that is subject to a lien**

_____ \$ _____ \$ _____

Creditor's mailing address

Describe the lien**Creditor's email address, if known**

Is the creditor an insider or related party?

- ☐ No
☐ Yes

Date debt was incurred _____**Is anyone else liable on this claim?**

- ☐ No
☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

Last 4 digits of account number _____**Do multiple creditors have an interest in the same property?**

- ☐ No
☐ Yes. Specify each creditor, including this creditor, and its relative priority.

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

2.2 Creditor's name**Describe debtor's property that is subject to a lien**

_____ \$ _____ \$ _____

Creditor's mailing address

Describe the lien**Creditor's email address, if known**

Is the creditor an insider or related party?

- ☐ No
☐ Yes

Date debt was incurred _____**Is anyone else liable on this claim?**

- ☐ No
☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

Last 4 digits of account number _____**Do multiple creditors have an interest in the same property?**

- ☐ No
☐ Yes. Have you already specified the relative priority?
☐ No. Specify each creditor, including this creditor, and its relative priority.

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

- ☐ Yes. The relative priority of creditors is specified on lines _____

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

\$ _____

Debtor

Name

Case number (if known)

Part 1: Additional Page

Column A

Amount of claim

Do not deduct the value of collateral.

Column B

Value of collateral that supports this claim

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

2. Creditor's name Creditor's mailing address Creditor's email address, if known Date debt was incurred _____ Last 4 digits of account number _____ Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	Describe debtor's property that is subject to a lien _____ \$ _____ \$ _____ Describe the lien _____ Is the creditor an insider or related party? <input type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
---	--

2. Creditor's name Creditor's mailing address Creditor's email address, if known Date debt was incurred _____ Last 4 digits of account number _____ Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	Describe debtor's property that is subject to a lien _____ \$ _____ \$ _____ Describe the lien _____ Is the creditor an insider or related party? <input type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
---	--

Debtor

Name

Case number (if known)

Part 1: Additional Page

Column A

Amount of claim

Do not deduct the value of collateral.

Column B

Value of collateral that supports this claim

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

2. Creditor's name Creditor's mailing address Creditor's email address, if known Date debt was incurred _____ Last 4 digits of account number _____ Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	Describe debtor's property that is subject to a lien _____ \$ _____ \$ _____ Describe the lien _____ Is the creditor an insider or related party? <input type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
---	--

2. Creditor's name Creditor's mailing address Creditor's email address, if known Date debt was incurred _____ Last 4 digits of account number _____ Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	Describe debtor's property that is subject to a lien _____ \$ _____ \$ _____ Describe the lien _____ Is the creditor an insider or related party? <input type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
---	--

Fill in this information to identify the case:

Debtor _____

United States Bankruptcy Court for the: _____ District of _____
(State)

Case number _____
(If known)

☐ Check if this is an amended filing

Official Form 206E/F**Schedule E/F: Creditors Who Have Unsecured Claims****12/15**

Be as complete and accurate as possible. Use Part 1 for creditors with **PRIORITY** unsecured claims and Part 2 for creditors with **NONPRIORITY** unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with **PRIORITY** Unsecured Claims**1. Do any creditors have priority unsecured claims?** (See 11 U.S.C. § 507).

- ☐ No. Go to Part 2.
- ☐ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.**2.1** Priority creditor's name and mailing address

As of the petition filing date, the claim is: \$ _____

Total claim**Priority amount**

\$ _____

Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number _____

Is the claim subject to offset?

- ☐ No
- ☐ Yes

Specify Code subsection of **PRIORITY** unsecured claim: 11 U.S.C. § 507(a) (____)**2.2** Priority creditor's name and mailing address

As of the petition filing date, the claim is: \$ _____

Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number _____

Is the claim subject to offset?

- ☐ No
- ☐ Yes

Specify Code subsection of **PRIORITY** unsecured claim: 11 U.S.C. § 507(a) (____)**2.3** Priority creditor's name and mailing address

As of the petition filing date, the claim is: \$ _____

Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number _____

Is the claim subject to offset?

- ☐ No
- ☐ Yes

Specify Code subsection of **PRIORITY** unsecured claim: 11 U.S.C. § 507(a) (____)

Part 1. Additional Page

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim

Priority amount

2. Priority creditor's name and mailing address

\$ _____ \$ _____

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account
number _____

Is the claim subject to offset?

- ☐ No
☐ Yes

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) (____)

2. Priority creditor's name and mailing address

\$ _____ \$ _____

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account
number _____

Is the claim subject to offset?

- ☐ No
☐ Yes

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) (____)

2. Priority creditor's name and mailing address

\$ _____ \$ _____

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account
number _____

Is the claim subject to offset?

- ☐ No
☐ Yes

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) (____)

2. Priority creditor's name and mailing address

As of the petition filing date, the claim is: \$ _____ \$ _____

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account
number _____

Is the claim subject to offset?

- ☐ No
☐ Yes

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) (____)

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

page ____ of ____

Part 3:

List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.2. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.3. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.4. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.1. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.5. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.6. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.7. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.8. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.9. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.10. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.11. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _

Part 4:

Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

Total of claim amounts

5a. Total claims from Part 1 5a. \$

5b. Total claims from Part 2 5b. + \$

5c. Total of Parts 1 and 2 5c. \$

Lines 5a + 5b = 5c.

Fill in this information to identify the case:

Debtor name _____

United States Bankruptcy Court for the: _____ District of _____
(State)

Case number (If known): _____ Chapter _____

☐ Check if this is an amended filing**Official Form 206G****Schedule G: Executory Contracts and Unexpired Leases****12/15**

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, numbering the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

- ☐ No. Check this box and file this form with the court with the debtor's other schedules. There is nothing else to report on this form.
- ☐ Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).

2. List all contracts and unexpired leases**State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease****2.1**State what the contract or lease is for and the nature of the debtor's interest _____

State the term remaining _____

List the contract number of any government contract _____
_____**2.2**State what the contract or lease is for and the nature of the debtor's interest _____

State the term remaining _____

List the contract number of any government contract _____
_____**2.3**State what the contract or lease is for and the nature of the debtor's interest _____

State the term remaining _____

List the contract number of any government contract _____
_____**2.4**State what the contract or lease is for and the nature of the debtor's interest _____

State the term remaining _____

List the contract number of any government contract _____
_____**2.5**State what the contract or lease is for and the nature of the debtor's interest _____

State the term remaining _____

List the contract number of any government contract _____

Fill in this information to identify the case:

Debtor name _____

United States Bankruptcy Court for the: _____ District of _____
(State)

Case number (If known): _____

☐ Check if this is an amended filing**Official Form 206Sum****Summary of Assets and Liabilities for Non-Individuals****12/15****Part 1: Summary of Assets****1. Schedule A/B: Assets—Real and Personal Property** (Official Form 206A/B)**1a. Real property:**Copy line 88 from *Schedule A/B*.....

\$ _____

1b. Total personal property:Copy line 91A from *Schedule A/B*.....

\$ _____

1c. Total of all property:Copy line 92 from *Schedule A/B*.....

\$ _____

Part 2: Summary of Liabilities**2. Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of *Schedule D*.....

\$ _____

3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)**3a. Total claim amounts of priority unsecured claims:**Copy the total claims from Part 1 from line 5a of *Schedule E/F*.....

\$ _____

3b. Total amount of claims of nonpriority amount of unsecured claims:Copy the total of the amount of claims from Part 2 from line 5b of *Schedule E/F*.....

+ \$ _____

4. Total liabilities.....

Lines 2 + 3a + 3b

\$ _____

Fill in this information to identify the case:

Debtor name _____

United States Bankruptcy Court for the: _____ District of _____
(State)

Case number (if known): _____

☐ Check if this is an
amended filing

Official Form 207**Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy 12/15**

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part 1: Income**1. Gross revenue from business**

☐ None

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year

Sources of revenue
Check all that apply

Gross revenue
(before deductions and exclusions)

From the beginning of the fiscal year to filing date:

From _____ to Filing date
MM / DD / YYYY

☐ Operating a business
☐ Other _____

\$ _____

For prior year:

From _____ to _____
MM / DD / YYYY MM / DD / YYYY

☐ Operating a business
☐ Other _____

\$ _____

For the year before that:

From _____ to _____
MM / DD / YYYY MM / DD / YYYY

☐ Operating a business
☐ Other _____

\$ _____

2. Non-business revenue

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☐ None

Description of sources of revenue

Gross revenue from each source
(before deductions and exclusions)

From the beginning of the fiscal year to filing date:

From _____ to Filing date
MM / DD / YYYY

_____ \$ _____

For prior year:

From _____ to _____
MM / DD / YYYY MM / DD / YYYY

_____ \$ _____

For the year before that:

From _____ to _____
MM / DD / YYYY MM / DD / YYYY

_____ \$ _____

Debtor _____ Case number (if known) _____
 Name _____

Part 2: List Certain Transfers Made Before Filing for Bankruptcy
3. Certain payments or transfers to creditors within 90 days before filing this case

List payments or transfers—including expense reimbursements—to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$6,225. (This amount may be adjusted on 4/01/16 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☐ None

Creditor's name and address	Dates	Total amount or value	Reasons for payment or transfer <i>Check all that apply</i>
3.1. Creditor's name _____ Street _____ City _____ State _____ ZIP Code _____	_____	\$ _____	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____
3.2. Creditor's name _____ Street _____ City _____ State _____ ZIP Code _____	_____	\$ _____	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____

4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,225. (This amount may be adjusted on 4/01/16 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☐ None

Insider's name and address	Dates	Total amount or value	Reasons for payment or transfer
4.1. Insider's name _____ Street _____ City _____ State _____ ZIP Code _____ Relationship to debtor _____	_____	\$ _____	_____
4.2. Insider's name _____ Street _____ City _____ State _____ ZIP Code _____ Relationship to debtor _____	_____	\$ _____	_____

Debtor _____ Name _____ Case number (if known) _____

5. Repossessions, foreclosures, and returns

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☐ None

Creditor's name and address	Description of the property	Date	Value of property
5.1. Creditor's name _____ Street _____ City _____ State _____ ZIP Code _____	_____	_____	\$ _____
5.2. Creditor's name _____ Street _____ City _____ State _____ ZIP Code _____	_____	_____	\$ _____

6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☐ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
Creditor's name _____ Street _____ City _____ State _____ ZIP Code _____	_____	_____	\$ _____
Last 4 digits of account number: XXXX- ____ _			

Part 3: Legal Actions or Assignments

7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☐ None

Case title	Nature of case	Court or agency's name and address	Status of case
7.1. Case number _____	_____	Name _____ Street _____ City _____ State _____ ZIP Code _____	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.2. Case title _____ Case number _____	_____	Court or agency's name and address _____ Name _____ Street _____ City _____ State _____ ZIP Code _____	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

Debtor _____ Case number (if known) _____
 Name _____

8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☐ None

Custodian's name and address	Description of the property	Value
Custodian's name _____ Street _____ City _____ State _____ ZIP Code _____	Case title _____ Case number _____ Date of order or assignment _____	\$ _____ Court name and address _____ Name _____ Street _____ City _____ State _____ ZIP Code _____

Part 4: Certain Gifts and Charitable Contributions**9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000**

☐ None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
9.1. Recipient's name _____ Street _____ City _____ State _____ ZIP Code _____ Recipient's relationship to debtor _____	_____	_____	\$ _____
9.2. Recipient's name _____ Street _____ City _____ State _____ ZIP Code _____ Recipient's relationship to debtor _____	_____	_____	\$ _____

Part 5: Certain Losses**10. All losses from fire, theft, or other casualty within 1 year before filing this case.**

☐ None

Description of the property lost and how the loss occurred	Amount of payments received for the loss If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received. List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).	Date of loss	Value of property lost
_____	_____	_____	\$ _____

Debtor _____ Case number (if known) _____
 Name

Part 6: Certain Payments or Transfers
11. Payments related to bankruptcy

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None

	Who was paid or who received the transfer?	If not money, describe any property transferred	Dates	Total amount or value
11.1.	<div>_____</div> <div>Address</div> <div>_____</div> <div>Street</div> <div>_____</div> <div>City State ZIP Code</div> <div>Email or website address</div> <div>_____</div> <div>Who made the payment, if not debtor?</div> <div>_____</div>	<div>_____</div> <div>_____</div>	<div>_____</div>	<div>\$ _____</div>
11.2.	<div>_____</div> <div>Address</div> <div>_____</div> <div>Street</div> <div>_____</div> <div>City State ZIP Code</div> <div>Email or website address</div> <div>_____</div> <div>Who made the payment, if not debtor?</div> <div>_____</div>	<div>_____</div> <div>_____</div>	<div>_____</div>	<div>\$ _____</div>

12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

☐ None

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
_____	_____	_____	\$ _____
Trustee	_____		

Debtor

Name

Case number (if known)

13. Transfers not already listed on this statement

List any transfers of money or other property—by sale, trade, or any other means—made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☐ None

Who received transfer?	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
13.1. _____	_____	_____	\$ _____
Address _____ Street _____ _____ City State ZIP Code			
Relationship to debtor _____			
13.2. _____	_____	_____	\$ _____
Address _____ Street _____ _____ City State ZIP Code			
Relationship to debtor _____			

Part 7: Previous Locations**14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☐ Does not apply

Address	Dates of occupancy	
	From	To
14.1. _____ Street _____ _____ City State ZIP Code	_____	_____
14.2. _____ Street _____ _____ City State ZIP Code	_____	_____

Debtor _____ Case number (if known) _____
 Name _____

Part 8: Health Care Bankruptcies
15. Health Care bankruptcies

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

- ☐ No. Go to Part 9.
☐ Yes. Fill in the information below.

Facility name and address	Nature of the business operation, including type of services the debtor provides	If debtor provides meals and housing, number of patients in debtor's care
---------------------------	--	---

15.1. _____
 Facility name _____

 Street _____

 City _____ State _____ ZIP Code _____

Location where patient records are maintained (if different from facility address). If electronic, identify any service provider. _____
How are records kept?
Check all that apply:
☐ Electronically
☐ Paper

Facility name and address	Nature of the business operation, including type of services the debtor provides	If debtor provides meals and housing, number of patients in debtor's care
---------------------------	--	---

15.2. _____
 Facility name _____

 Street _____

 City _____ State _____ ZIP Code _____

Location where patient records are maintained (if different from facility address). If electronic, identify any service provider. _____
How are records kept?
Check all that apply:
☐ Electronically
☐ Paper

Part 9: Personally Identifiable Information
16. Does the debtor collect and retain personally identifiable information of customers?

- ☐ No.
☐ Yes. State the nature of the information collected and retained. _____

Does the debtor have a privacy policy about that information?

- ☐ No
☐ Yes

17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?

- ☐ No. Go to Part 10.
 Yes. Does the debtor serve as plan administrator?

- ☐ No. Go to Part 10.
☐ Yes. Fill in below:

Name of plan	Employer identification number of the plan
_____	EIN: ____ - ____ - ____ - ____ - ____ - ____

Has the plan been terminated?

- ☐ No
☐ Yes

Debtor

Name

Case number (if known)

Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units**18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

☐ None

	Financial institution name and address	Last 4 digits of account number	Type of account	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
18.1.	<div style="border-bottom: 1px solid black; width: 100%;"></div> <div style="border-bottom: 1px solid black; width: 100%;"></div> <div style="border-bottom: 1px solid black; width: 100%;"></div> <div style="display: flex; justify-content: space-between;"> City State ZIP Code </div>	XXXX-____	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	_____	\$ _____
18.2.	<div style="border-bottom: 1px solid black; width: 100%;"></div> <div style="border-bottom: 1px solid black; width: 100%;"></div> <div style="border-bottom: 1px solid black; width: 100%;"></div> <div style="display: flex; justify-content: space-between;"> City State ZIP Code </div>	XXXX-____	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	_____	\$ _____

19. Safe deposit boxes

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

☐ None

Depository institution name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
<div style="border-bottom: 1px solid black; width: 100%;"></div> <div style="border-bottom: 1px solid black; width: 100%;"></div> <div style="border-bottom: 1px solid black; width: 100%;"></div> <div style="display: flex; justify-content: space-between;"> City State ZIP Code </div>	<div style="border-bottom: 1px solid black; width: 100%;"></div> <div style="border-bottom: 1px solid black; width: 100%;"></div>	<div style="border-bottom: 1px solid black; width: 100%;"></div> <div style="border-bottom: 1px solid black; width: 100%;"></div>	<input type="checkbox"/> No <input type="checkbox"/> Yes
<div style="background-color: #f2f2f2; padding: 2px;">Address</div> <div style="border-bottom: 1px solid black; width: 100%;"></div> <div style="border-bottom: 1px solid black; width: 100%;"></div>			

20. Off-premises storage

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

☐ None

Facility name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
<div style="border-bottom: 1px solid black; width: 100%;"></div> <div style="border-bottom: 1px solid black; width: 100%;"></div> <div style="border-bottom: 1px solid black; width: 100%;"></div> <div style="display: flex; justify-content: space-between;"> City State ZIP Code </div>	<div style="border-bottom: 1px solid black; width: 100%;"></div> <div style="border-bottom: 1px solid black; width: 100%;"></div>	<div style="border-bottom: 1px solid black; width: 100%;"></div> <div style="border-bottom: 1px solid black; width: 100%;"></div>	<input type="checkbox"/> No <input type="checkbox"/> Yes
<div style="background-color: #f2f2f2; padding: 2px;">Address</div> <div style="border-bottom: 1px solid black; width: 100%;"></div> <div style="border-bottom: 1px solid black; width: 100%;"></div>			

Debtor _____ Case number (if known) _____
 Name

Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own
21. Property held for another

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☐ None

Owner's name and address	Location of the property	Description of the property	Value
Name			\$ _____
Street			
City State ZIP Code			

Part 12: Details About Environmental Information

For the purpose of Part 12, the following definitions apply:

- *Environmental law* means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).
- *Site* means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.
- *Hazardous material* means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ☐ No
☐ Yes. Provide details below.

Case title	Court or agency name and address	Nature of the case	Status of case
Case number	Name		<input type="checkbox"/> Pending
	Street		<input type="checkbox"/> On appeal
	City State ZIP Code		<input type="checkbox"/> Concluded

23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

- ☐ No
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
Name	Name		
Street	Street		
City State ZIP Code	City State ZIP Code		

Debtor _____ Case number (if known) _____
 Name

24. Has the debtor notified any governmental unit of any release of hazardous material?

- ☐ No
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
Name _____	Name _____	_____	_____
Street _____	Street _____	_____	
_____	_____		
City _____ State _____ ZIP Code _____	City _____ State _____ ZIP Code _____		

Part 13: Details About the Debtor's Business or Connections to Any Business

25. Other businesses in which the debtor has or has had an interest

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

- ☐ None

	Business name and address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
25.1.	Name _____ Street _____ _____	_____ _____ _____	EIN: _____ - _____ Dates business existed From _____ To _____
25.2.	Name _____ Street _____ _____	_____ _____ _____	EIN: _____ - _____ Dates business existed From _____ To _____
25.3.	Name _____ Street _____ _____	_____ _____ _____	EIN: _____ - _____ Dates business existed From _____ To _____

Debtor

Name

Case number (if known)

26. Books, records, and financial statements

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

☐ None**Name and address****Dates of service**

From _____ To _____

26a.1.

Name

Street

City

State

ZIP Code

Name and address**Dates of service**

From _____ To _____

26a.2.

Name

Street

City

State

ZIP Code

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

☐ None**Name and address****Dates of service**

From _____ To _____

26b.1.

Name

Street

City

State

ZIP Code

Name and address**Dates of service**

From _____ To _____

26b.2.

Name

Street

City

State

ZIP Code

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

☐ None**Name and address****If any books of account and records are unavailable, explain why**

26c.1.

Name

Street

City

State

ZIP Code

Debtor

Name

Case number (if known)

Name and address**If any books of account and records are unavailable, explain why**

26c.2.

Name

Street

City

State

ZIP Code

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☐ None
Name and address

26d.1.

Name

Street

City

State

ZIP Code

Name and address

26d.2.

Name

Street

City

State

ZIP Code

27. Inventories

Have any inventories of the debtor's property been taken within 2 years before filing this case?

☐ No

☐ Yes. Give the details about the two most recent inventories.
Name of the person who supervised the taking of the inventory**Date of inventory****The dollar amount and basis (cost, market, or other basis) of each inventory**

\$

Name and address of the person who has possession of inventory records

27.1.

Name

Street

City

State

ZIP Code

Debtor

Name

Case number (if known)

Name of the person who supervised the taking of the inventory

Date of
inventoryThe dollar amount and basis (cost, market, or
other basis) of each inventory

\$

Name and address of the person who has possession of inventory records

27.2.

Name

Street

City

State

ZIP Code

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any interest	% of interest, if any

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

☐ No☐ Yes. Identify below.

Name	Address	Position and nature of any interest	Period during which position or interest was held
			From ____ To ____
			From ____ To ____
			From ____ To ____
			From ____ To ____

30. Payments, distributions, or withdrawals credited or given to insiders

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

☐ No☐ Yes. Identify below.

Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
30.1. Name			
Street			
City			
State			
ZIP Code			
Relationship to debtor			

Debtor _____ Case number (if known) _____
 Name

Name and address of recipient

30.2

Name _____

Street _____

City _____

State _____

ZIP Code _____

Relationship to debtor

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

☐ No☐ Yes. Identify below.**Name of the parent corporation****Employer Identification number of the parent corporation**

EIN: _____ - _____

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

☐ No☐ Yes. Identify below.**Name of the pension fund****Employer Identification number of the pension fund**

EIN: _____ - _____

Part 14: Signature and Declaration

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on _____
 MM / DD / YYYY

X

Signature of individual signing on behalf of the debtor

Printed name _____

Position or relationship to debtor _____

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

☐ No☐ Yes

Debtor: Miami Tees, Inc.

3. Certain payments or transfers to creditors within 90 days before filing this case

Creditor's name and address	Dates	Total amount or value	Reasons for payment or transfer
3.3 <u>Nazdar</u>	01/01/2016	<u>\$46,880.09</u>	<u>Supplier or Vendor</u>
<u>13160 NW 43rd Ave</u>	03/08/2016		
<u>Opa Locka, FL 33054</u>			
3.4 <u>The Realty Associates Fund X, LP</u>	01/01/2016	<u>\$56,357.63</u>	<u>Supplier or Vendor</u>
<u>Landlord, C/O TA Associates Realty</u>	03/08/2016		
<u>28 State Street</u>			
<u>Boston, Massachusetts 02109</u>			
<u>Landlord, C/O PGM Industrial, LLC, 10598 NW South River Drive, Miami, Florida 33178 Attention: Property Manager</u>			
3.5 <u>United States Treasury</u>	01/01/2016	<u>\$47,917.50</u>	<u>Supplier or Vendor</u>
<u>Francis Yanes, R.O. (#0577962)</u>	03/08/2016		
<u>SBSE</u>			
<u>51 SW 1st Ave, Room 700</u>			
<u>Miami, FL 33130</u>			

Form **1120S**Department of the Treasury
Internal Revenue Service**U.S. Income Tax Return for an S Corporation**

Do not file this form unless the corporation has filed or is attaching Form 2553 to elect to be an S corporation.

Information about Form 1120S and its separate instructions is at www.irs.gov/form1120s.

OMB No. 1545-0123

2014

For calendar year 2014 or tax year beginning

2014, ending

A S election effective date 09/01/93	TYPE OR PRINT	Name Miami Tees, Inc.	D Employer identification number 65-0069724
B Business activity code number (see instructions) 323100		Number, street, and room or suite no. If a P.O. box, see instructions. 5120 NW 165th Street, Bay #101	E Date incorporated 09/01/93
C Check if Schedule M-3 attached <input type="checkbox"/>		City or town, state or province, country, and ZIP or foreign postal code Miami Gardens FL 33014	F Total assets (see instructions) \$ 774,684.

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****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	3,134,631.	
	b Returns and allowances	1b		
	c Balance. Subtract line 1b from line 1a	1c		3,134,631.
	2 Cost of goods sold (attach Form 1125-A)	2		861,344.
	3 Gross profit. Subtract line 2 from line 1c	3		2,273,287.
	4 Net gain (loss) from Form 4797, line 17 (attach Form 4797)	4		
DEDUCTIONS SEE INSTRUCTIONS	5 Other income (loss) (see Instrs — all statements)	5		
	6 Total income (loss). Add lines 3 through 5	6		2,273,287.
	7 Compensation of officers (see instructions - attach Form 1125-E)	7		48,400.
	8 Salaries and wages (less employment credits)	8		1,124,648.
	9 Repairs and maintenance	9		26,407.
	10 Bad debts	10		
	11 Rents	11		164,952.
	12 Taxes and licenses	12		148,594.
	13 Interest	13		33,669.
	14 Depreciation not claimed on Form 1125-A or elsewhere on return (attach Form 4562)	14		132,901.
	15 Depletion (Do not deduct oil and gas depletion.)	15		
TAX AND PAYMENTS	16 Advertising	16		1,404.
	17 Pension, profit-sharing, etc. plans	17		
	18 Employee benefit programs	18		
	19 Other deductions (attach statement) STMT	19		486,727.
	20 Total deductions. Add lines 7 through 19	20		2,167,702.
	21 Ordinary business income (loss). Subtract line 20 from line 6	21		105,585.
	22a Excess net passive income or LIFO recapture tax (see instructions)	22a		
	b Tax from Schedule D (Form 1120S)	22b		
	c Add lines 22a and 22b (see instructions for additional taxes)	22c		
	23a 2014 estimated tax payments and 2013 overpayment credited to 2014	23a		
	b Tax deposited with Form 7004	23b		0.
	c Credit for federal tax paid on fuels (attach Form 4136)	23c		
d Add lines 23a through 23c	23d		0.	
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		0.	
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 2015 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/>	27			

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

Date

President

Title

May the IRS discuss this return with the preparer shown below (see instructions)?

Yes ☐ No ☒**Paid Preparer Use Only**

Print/Type preparer's name

Preparer's signature

Date

Check ☒ self-employed

PTIN

S. Alexander Mochadasi, CPA

10/12/15

P00041788

Firm's name Ryan Consulting Group, P.A.

Firm's EIN 38-3906404

Firm's address 8875 Hidden River Parkway, Suite 300

Tampa

FL 33637

Phone no. (813) 367-2350

BAA For Paperwork Reduction Act Notice, see separate instructions.

SPSA0112 00/06/14

Form 1120S (2014)

Form 1120S (2014) Miami Tees, Inc.

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Schedule B Other Information (see instructions)

	Yes	No
1 Check accounting method: a <input type="checkbox"/> Cash b <input type="checkbox"/> Accrual c <input checked="" type="checkbox"/> Other (specify) <u>Modified Cash</u>		
2 See the instructions and enter the: a Business activity: <u>Printing & Manufacturing</u> b Product or service: <u>Apparel</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

	Yes	No
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 % 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.		X
(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? If "Yes," complete lines (i) and (ii) below.		X
(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?		X
7 Check this box if the corporation issued publicly offered debt instruments with original issue discount. If checked, the corporation may have to file Form 8281, Information Return for Publicly Offered Original Issue Discount Instruments.	<input type="checkbox"/>	
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 Enter the accumulated earnings and profits of the corporation at the end of the tax year.	\$	
10 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
11 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
12 During the tax year, was a qualified subchapter S subsidiary election terminated or revoked? If "Yes," see instructions		X
13 a Did the corporation make any payments in 2014 that would require it to file Form(s) 1099?	X	
b If "Yes," did the corporation file or will it file required Forms 1099?	X	

Form 1120S (2014)

Form 1120S (2014) Miami Tees, Inc.

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Schedule K Shareholders' Pro Rata Share Items		Total amount
Income (Loss)	1 Ordinary business income (loss) (page 1, line 21)	1 105,585.
	2 Net rental real estate income (loss) (attach Form 8825)	2
	3 a Other gross rental income (loss)	3 a
	b Expenses from other rental activities (attach statement)	3 b
	c Other net rental income (loss). Subtract line 3b from line 3a	3 c
	4 Interest income	4
	5 Dividends: a Ordinary dividends	5 a
	b Qualified dividends	5 b
	6 Royalties	6
	7 Net short-term capital gain (loss) (attach Schedule D (Form 1120S))	7
8 a Net long-term capital gain (loss) (attach Schedule D (Form 1120S))	8 a	
	b Collectibles (28%) gain (loss)	8 b
	c Unrecaptured section 1250 gain (attach statement)	8 c
	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
	12 a Charitable contributions	12 a
	b Investment interest expense	12 b
	c Section 59(e)(2) expenditures (1) Type ▶ (2) Amount ▶	12 c (2)
d Other deductions (see instructions) Type ▶	12 d	
Credits	13 a Low-income housing credit (section 42(j)(5))	13 a
	b Low-income housing credit (other)	13 b
	c Qualified rehabilitation expenditures (rental real estate) (attach Form 3468, if applicable)	13 c
	d Other rental real estate credits (see instrs) Type ▶	13 d
	e Other rental credits (see instrs) Type ▶	13 e
	f Biofuel producer credit (attach Form 6478)	13 f
	g Other credits (see instructions) Type ▶	13 g
Foreign Transactions	14 a Name of country or U.S. possession	14 a
	b Gross income from all sources	14 b
	c Gross income sourced at shareholder level	14 c
	Foreign gross income sourced at corporate level	
	d Passive category	14 d
	e General category	14 e
	f Other (attach statement)	14 f
	Deductions allocated and apportioned at shareholder level	
	g Interest expense	14 g
	h Other	14 h
	Deductions allocated and apportioned at corporate level to foreign source income	
	i Passive category	14 i
	j General category	14 j
	k Other (attach statement)	14 k
Other information		
l Total foreign taxes (check one): <input type="checkbox"/> Paid <input type="checkbox"/> Accrued	14 l	
m Reduction in taxes available for credit (attach statement)	14 m	
n Other foreign tax information (attach statement)		
Alternative Minimum Tax (AMT) Items	15 a Post-1986 depreciation adjustment	15 a 2,398.
	b Adjusted gain or loss	15 b
	c Depletion (other than oil and gas)	15 c
	d Oil, gas, and geothermal properties — gross income	15 d
	e Oil, gas, and geothermal properties — deductions	15 e
	f Other AMT items (attach statement)	15 f
Items Affecting Shareholder Basis	16 a Tax-exempt interest income	16 a
	b Other tax-exempt income	16 b
	c Nondeductible expenses	16 c 2,215.
	d Distributions (attach stmt if required) (see instrs)	16 d 168,440.
	e Repayment of loans from shareholders	16 e

BAA

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Form 1120S (2014)

Form 1120S (2014) Miami Tees, Inc.

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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 0.
	d Other items and amounts (attach statement)	
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 14l	18 105,585.

Schedule L Balance Sheets per Books		Beginning of tax year		End of tax year	
Assets		(a)	(b)	(c)	(d)
1	Cash		250.		14,189.
2a	Trade notes and accounts receivable				
b	Less allowance for bad debts				
3	Inventories		138,518.		152,879.
4	U.S. government obligations				
5	Tax-exempt securities (see instructions)				
6	Other current assets (attach stmt) Ln 6, St.				1,700.
7	Loans to shareholders				
8	Mortgage and real estate loans				
9	Other investments (attach statement)				
10a	Buildings and other depreciable assets	1,203,021.		1,292,025.	
b	Less accumulated depreciation	627,011.	576,010.	696,799.	595,226.
11a	Depletable assets				
b	Less accumulated depletion				
12	Land (net of any amortization)				
13a	Intangible assets (amortizable only)	56,594.		56,594.	
b	Less accumulated amortization	48,663.	7,931.	54,322.	2,272.
14	Other assets (attach stmt) Ln 14, St.		8,418.		8,418.
15	Total assets		731,127.		774,684.
Liabilities and Shareholders' Equity					
16	Accounts payable		56,779.		75,846.
17	Mortgages, notes, bonds payable in less than 1 year				
18	Other current liabilities (attach stmt) Ln 18, St.		405,753.		589,192.
19	Loans from shareholders				
20	Mortgages, notes, bonds payable in 1 year or more		86,475.		95,853.
21	Other liabilities (attach statement)				
22	Capital stock		5,000.		5,000.
23	Additional paid-in capital		341,276.		69,579.
24	Retained earnings		-164,156.		-60,786.
25	Adjustments to shareholders' equity (all stmt)				
26	Less cost of treasury stock				
27	Total liabilities and shareholders' equity		731,127.		774,684.

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Form 1120S (2014)

Form 1120S (2014) Miami Tees, Inc.

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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	103,370.	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 14i (itemize):		6 Deductions included on Schedule K, lines 1 through 12 and 14i, not charged against book income this year (itemize):	
a Depreciation \$		a Depreciation \$	
b Travel and entertainment \$ 2,215.	2,215.	7 Add lines 5 and 6.	
4 Add lines 1 through 3.	105,585.	8 Income (loss) (Schedule K, ln 18). Ln 4 less ln 7 . . .	105,585.

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

	(a) Accumulated adjustments account	(b) Other adjustments account	(c) Shareholders' undistributed taxable income previously taxed
1 Balance at beginning of tax year	-164,156.	0.	0.
2 Ordinary income from page 1, line 21	105,585.		
3 Other additions			
4 Loss from page 1, line 21			
5 Other reductions * STMT	2,215.		
6 Combine lines 1 through 5	-60,786.	0.	0.
7 Distributions other than dividend distributions	0.	0.	0.
8 Balance at end of tax year. Subtract line 7 from line 6.	-60,786.	0.	0.

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Form 1120S (2014)

Form **1125-A**

(Rev December 2012)

Department of the Treasury
Internal Revenue Service**Cost of Goods Sold**

▶ Attach to Form 1120, 1120-C, 1120-F, 1120S, 1065, or 1065-B.

▶ Information about Form 1125-A and its instructions is at www.irs.gov/form1125a.

OMB No. 1545-2225

Name

Employer identification number

Miami Tees, Inc.

65-0069724

1	Inventory at beginning of year	1	138,518.
2	Purchases	2	875,705.
3	Cost of labor	3	
4	Additional section 263A costs (attach schedule)	4	
5	Other costs (attach schedule)	5	
6	Total. Add lines 1 through 5	6	1,014,223.
7	Inventory at end of year	7	152,879.
8	Cost of goods sold. Subtract line 7 from line 6. Enter here and on Form 1120, page 1, line 2 or the appropriate line of your tax return (see instructions)	8	861,344.

9 a Check all methods used for valuing closing inventory:(i) ☒ Cost(ii) ☐ Lower of cost or market(iii) ☐ Other (Specify method used and attach explanation) . . . ▶**b** Check if there was a writedown of subnormal goods ▶ ☐**c** Check if the LIFO inventory method was adopted this tax year for any goods (if checked, attach Form 970) ▶ ☐**d** If the LIFO inventory method was used for this tax year, enter amount of closing inventory computed under LIFO **9d** **e** If property is produced or acquired for resale, do the rules of section 263A apply to the entity (see instructions)? ☐ Yes ☒ No**f** Was there any change in determining quantities, cost, or valuations between opening and closing inventory? If 'Yes,' attach explanation ☐ Yes ☒ No**BAA** For Paperwork Reduction Act Notice, see instructions.

Form 1125-A (Rev 12-2012)

671113

OMB No. 1545-0123

Schedule K-1
(Form 1120S)Department of the Treasury
Internal Revenue Service**2014**☐ Final K-1☒ Amended K-1

For calendar year 2014, or tax

year beginning _____, 2014

ending _____, 2014

Shareholder's Share of Income, Deductions, Credits, etc ▶ See page 2 of form and separate instructions.**Part I** Information About the Corporation**A** Corporation's employer identification number
65-0069724**B** Corporation's name, address, city, state, and ZIP code
Miami Tees, Inc.
5120 NW 165th Street, Bay #101
Miami Gardens, FL 33014**C** IRS Center where corporation filed return
Cincinnati, OH 45999-0013**Part II** Information About the Shareholder**D** Shareholder's identifying number
[REDACTED]**E** Shareholder's name, address, city, state, and ZIP code
Michael J. Chavez
11515 SW 87th Avenue
Miami, FL 33176**F** Shareholder's percentage of stock ownership for tax year. 100.00000 %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
	105,585.		
2	Net rental real estate income (loss)		
3	Other net rental income (loss)		
4	Interest income		
5 a	Ordinary dividends		
5 b	Qualified dividends	14	Foreign transactions
6	Royalties		
7	Net short-term capital gain (loss)		
8 a	Net long-term capital gain (loss)		
8 b	Collectibles (28%) gain (loss)		
8 c	Unrecaptured section 1250 gain		
9	Net section 1231 gain (loss)		
10	Other income (loss)	15	Alternative minimum tax (AMT) items
		A	2,398.
11	Section 179 deduction	16	Items affecting shareholder basis
12	Other deductions	C	2,215.
		D	168,440.
		17	Other information

*See attached statement for additional information.

This list identifies the codes used on Schedule K-1 for all shareholders and provides summarized reporting information for shareholders who file Form 1040. For detailed reporting and filing information, see the separate Shareholder's Instructions for Schedule K-1 and the instructions for your income tax return.

Instructions for your income tax return			Code	Report on
1	Ordinary business income (loss). Determine whether the income (loss) is passive or nonpassive and enter on your return as follows:	Report on	N Credit for employer social security and Medicare taxes	See the Shareholder's Instructions
	Passive loss	See the Shareholder's Instructions	O Backup withholding	
	Passive income	Schedule E, line 28, column (g)	P Other credits	
	Nonpassive loss	Schedule E, line 28, column (h)		
	Nonpassive income	Schedule E, line 28, column (j)		
2	Net rental real estate income (loss)	See the Shareholder's Instructions	14 Foreign transactions	
3	Other net rental income (loss)		A Name of country or U.S. possession	Form 1116, Part I
	Net income	Schedule E, line 28, column (g)	B Gross income from all sources	
	Net loss	See the Shareholder's Instructions	C Gross income sourced at shareholder level	
4	Interest income	Form 1040, line 8a	Foreign gross income sourced at corporate level	
5 a	Ordinary dividends	Form 1040, line 9a	D Passive category	Form 1116, Part I
5 b	Qualified dividends	Form 1040, line 9b	E General category	
6	Royalties	Schedule E, line 4	F Other	
7	Net short-term capital gain (loss)	Schedule D, line 5	Deductions allocated and apportioned at shareholder level	
8 a	Net long-term capital gain (loss)	Schedule D, line 12	G Interest expense	Form 1116, Part I
8 b	Collectibles (28%) gain (loss)	28% Rate Gain Worksheet, line 4 (Schedule D instructions)	H Other	Form 1116, Part I
8 c	Unrecaptured section 1250 gain	See the Shareholder's Instructions	Deductions allocated and apportioned at corporate level to foreign source income	
9	Net section 1231 gain (loss)	See the Shareholder's Instructions	I Passive category	Form 1116, Part I
10	Other income (loss)		J General category	
	Code		K Other	
	A Other portfolio income (loss)	See the Shareholder's Instructions	Other information	
	B Involuntary conversions	See the Shareholder's Instructions	L Total foreign taxes paid	Form 1116, Part II
	C Sec. 1256 contracts and straddles	Form 6781, line 1	M Total foreign taxes accrued	Form 1116, Part II
	D Mining exploration costs recapture	See Pub 535	N Reduction in taxes available for credit	Form 1116, line 12
	E Other income (loss)	See the Shareholder's Instructions	O Foreign trading gross receipts	Form 8873
11	Section 179 deduction	See the Shareholder's Instructions	P Extraterritorial income exclusion	Form 8873
12	Other deductions		Q Other foreign transactions	See the Shareholder's Instructions
	A Cash contributions (50%)	See the Shareholder's Instructions	15 Alternative minimum tax (AMT) items	
	B Cash contributions (30%)		A Post-1986 depreciation adjustment	See the Shareholder's Instructions and the instructions for Form 6251
	C Noncash contributions (50%)		B Adjusted gain or loss	
	D Noncash contributions (30%)		C Depletion (other than oil & gas)	
	E Capital gain property to a 50% organization (30%)		D Oil, gas, & geothermal — gross income	
	F Capital gain property (20%)		E Oil, gas, & geothermal — deductions	
	G Contributions (100%)		F Other AMT items	
	H Investment interest expense	Form 4952, line 1	16 Items affecting shareholder basis	
	I Deductions — royalty income	Schedule E, line 19	A Tax-exempt interest income	Form 1040, line 8b
	J Section 59(e)(2) expenditures	See the Shareholder's Instructions	B Other tax-exempt income	See the Shareholder's Instructions
	K Deductions — portfolio (2% floor)	Schedule A, line 23	C Nondeductible expenses	
	L Deductions — portfolio (other)	Schedule A, line 28	D Distributions	
	M Preproductive period expenses	See the Shareholder's Instructions	E Repayment of loans from shareholders	
	N Commercial revitalization deduction from rental real estate activities	See Form 8582 instructions	17 Other information	
	O Reforestation expense deduction	See the Shareholder's Instructions	A Investment income	Form 4952, line 4a
	P Domestic production activities information	See Form 8903 instructions	B Investment expenses	Form 4952, line 5
	Q Qualified production activities income	Form 8903, line 7b	C Qualified rehabilitation expenditures (other than rental real estate)	See the Shareholder's Instructions
	R Employer's Form W-2 wages	Form 8903, line 17	D Basis of energy property	See the Shareholder's Instructions
	S Other deductions	See the Shareholder's Instructions	E Recapture of low-income housing credit (section 42(j)(5))	Form 8611, line 8
13	Credits		F Recapture of low-income housing credit (other)	Form 8611, line 8
	A Low-income housing credit (section 42(j)(5)) from pre-2008 buildings	See the Shareholder's Instructions	G Recapture of investment credit	See Form 4255
	B Low-income housing credit (other) from pre-2008 buildings		H Recapture of other credits	See the Shareholder's Instructions
	C Low-income housing credit (section 42(j)(5)) from post-2007 buildings		I Look-back interest — completed long-term contracts	See Form 8697
	D Low-income housing credit (other) from post-2007 buildings		J Look-back interest — income forecast method	See Form 8666
	E Qualified rehabilitation expenditures (rental real estate)		K Dispositions of property with section 179 deductions	See the Shareholder's Instructions
	F Other rental real estate credits		L Recapture of section 179 deduction	
	G Other rental credits		M Section 453(l)(3) information	
	H Undistributed capital gains credit	Form 1040, line 73, box a	N Section 453A(c) information	
	I Biofuel producer credit	See the Shareholder's Instructions	O Section 1260(b) information	
	J Work opportunity credit		P Interest allocable to production expenditures	
	K Disabled access credit		Q CCF nonqualified withdrawals	
	L Empowerment zone employment credit		R Depletion information — oil and gas	
	M Credit for increasing research activities		S Reserved	
			T Section 108(i) information	
			U Net investment income	
			V Other information	

Form **4562****Depreciation and Amortization**
(Including Information on Listed Property)

OMB No. 1545-0172

2014Department of the Treasury
Internal Revenue Service (99)Information about Form 4562 and its separate instructions is at www.irs.gov/form4562.Attachment
Sequence No. **179**

Name(s) shown on return

Miami Tees, Inc.

Identifying number

65-0069724

Business or activity to which this form relates

Form 1120S Line 21

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	500,000.
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	2,000,000.
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions.	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2013 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instrs)	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2015. Add lines 9 and 10, less line 12	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	428.
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)**Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2014	17	125,057.
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input type="checkbox"/>		

Section B — Assets Placed in Service During 2014 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only — see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19 a 3-year property						
b 5-year property		4,797.	5.0 yrs	MQ	200 DB	1,157.
c 7-year property		175,250.	7.0 yrs	MQ	200 DB	6,259.
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property			27.5 yrs	MM	S/L	
i Nonresidential real property			27.5 yrs	MM	S/L	
			39 yrs	MM	S/L	
				MM	S/L	

Section C — Assets Placed in Service During 2014 Tax Year Using the Alternative Depreciation System

20 a Class life					S/L	
b 12-year			12 yrs		S/L	
c 40-year			40 yrs	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations — see instructions	22	132,901.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

Form 4562 (2014) Miami Tees, Inc.

65-0069724

Page 2

Part V Listed Property (include automobiles, certain other vehicles, certain aircraft, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A — Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24 a Do you have evidence to support the business/investment use claimed? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No									24b If 'Yes,' is the evidence written? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost		
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions)								25		
26 Property used more than 50% in a qualified business use:										
27 Property used 50% or less in a qualified business use:										
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1								28		
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1								29		

Section B — Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other more than 5% owner, or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle 1		(b) Vehicle 2		(c) Vehicle 3		(d) Vehicle 4		(e) Vehicle 5		(f) Vehicle 6	
30 Total business/investment miles driven during the year (do not include commuting miles)												
31 Total commuting miles driven during the year												
32 Total other personal (noncommuting) miles driven												
33 Total miles driven during the year. Add lines 30 through 32												
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
34 Was the vehicle available for personal use during off-duty hours?												
35 Was the vehicle used primarily by a more than 5% owner or related person?												
36 Is another vehicle available for personal use?												

Section C — Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions).

	Yes	No
37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?		
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners.		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions.)		

Note: If your answer to 37, 38, 39, 40, or 41 is 'Yes,' do not complete Section B for the covered vehicles.

Part VI Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2014 tax year (see instructions):					
43 Amortization of costs that began before your 2014 tax year				43	5,659
44 Total. Add amounts in column (f). See the instructions for where to report				44	5,659

Form 4562

Miami Tees, Inc.

Form 1120S - Line 21

Depreciation and Amortization Report

Tax Year 2014

► Keep for your records

2014

65-0069724

Asset Description	Code	Date in Service	Cost (net of land)	Land	Business Use %	Section 179	Special Depreciation Allowance	Depreciable Basis	Life	Method/Convention	Prior Depreciation	Current Depreciation
DEPRECIATION												
Computer - HP 19.5"		06/27/14	374		100.00			374	5.00	200DB/MQ		94
Printer - Epson T7000		06/30/14	3,995		100.00			3,995	5.00	200DB/MQ		999
Laptop - ASUS - 15.6"		07/26/14	856		100.00		428	428	5.00	200DB/MQ		64
Direct on Gamet Printer - 9314 Kornit		12/15/14	175,250		100.00			175,250	7.00	200DB/MQ		6,259
SUBTOTAL CURRENT YEAR			180,475	0		0	428	180,047			0	7,416
Screen Exposer		06/17/98	2,800		100.00			2,800	7.00	200DB/HY	2,800	0
Diamond Chase Frames		04/29/02	625		100.00			625	7.00	200DB/HY	625	0
Precision Gas Dryer		04/29/02	4,000		100.00			4,000	7.00	200DB/HY	4,000	0
M&R Challenger		04/29/02	38,000		100.00			38,000	7.00	200DB/HY	38,000	0
Oven		02/25/03	1,500		100.00			1,500	7.00	200DB/HY	1,500	0
Leasehold Improvements		03/10/03	32,644		100.00			32,644	39.00	SL/MM	20,523	430
Ink Mixer		05/12/03	795		100.00			795	7.00	200DB/HY	795	0
Washer & Dryer		09/12/03	2,345		100.00			2,345	7.00	200DB/HY	2,345	0
Printer		11/30/03	7,993		100.00			7,993	7.00	200DB/HY	7,993	0
Machinery		07/30/04	35,000		100.00			35,000	7.00	200DB/HY	35,000	0
Leasehold Improvements		09/01/06	23,950		100.00			23,950	7.00	SL/HY	23,950	0
Machinery		02/18/07	17,935		100.00			17,935	7.00	200DB/HY	17,135	800
Machinery		08/20/07	8,500		100.00			8,500	7.00	200DB/HY	8,121	379
Machinery (DOBBS)		01/08/08	4,500		100.00			4,500	7.00	200DB/HY	3,898	401
Machinery (PRO-Ad Sports)		02/27/08	5,000		100.00			5,000	7.00	200DB/HY	4,331	446
Oven		03/10/08	7,900		100.00			7,900	7.00	200DB/HY	6,843	705
Machinery (Sentech)		05/08/08	10,000		100.00			10,000	7.00	200DB/HY	8,661	893
Equipment		06/30/08	19,750		100.00			19,750	7.00	200DB/HY	17,106	1,763
Oven		09/15/08	5,335		100.00			5,335	7.00	200DB/HY	4,620	477
Machinery		12/03/08	4,549		100.00			4,549	7.00	200DB/HY	3,940	406
Forklift		07/10/10	6,500		100.00			6,500	7.00	200DB/HY	3,454	870
Prism (SCR PR System)		10/08/10	105,499		100.00			105,499	5.00	200DB/HY	105,469	20
Printing Equipment		01/11/11	490,443		100.00			490,443	10.00	200DB/HY	207,948	56,499
Office Furniture		07/01/13	21,750		100.00			21,750	7.00	200DB/HY	3,107	5,327
Computers		07/01/13	28,500		100.00			28,500	5.00	200DB/HY	5,700	9,120
Machinery		07/01/13	90,737		100.00			90,737	7.00	200DB/HY	12,962	22,221
Printing Equipment		07/01/13	135,000		100.00			135,000	10.00	200DB/HY	13,500	24,300
SUBTOTAL PRIOR YEAR			1,111,550	0		0		1,111,550			564,326	125,057

Code: S = Sold, A = Auto, L = Listed, C = COGS

FDIV3601 05/20/14

Page 1 of 2

Form 4562

Miami Tees, Inc.

Tax Year 2014

Form 1120S - Line 21

Alternative Minimum Tax Depreciation Report

► Keep for your records

2014

65-0069724

Asset Description	Code	Date in Service	Cost (net of land)	Land	Business Use %	Section 179	Special Depreciation Allowance	Depreciable Basis	Life	Method/Convention	Prior Depreciation	Current Depreciation	Adjustment/Preference
DEPRECIATION													
Computer - HP 19.5"		06/27/14	374		100.00			374	5.00	150DB/MQ		70	24.
Printer - Epson T7000		06/30/14	3,995		100.00			3,995	5.00	150DB/MQ		749	250.
Laptop - ASUS - 15.6"		07/26/14	856		100.00		428	428	5.00	200DB/MQ		64	0.
Direct to Garment Printer - BIA Enroll		12/15/14	175,250		100.00			175,250	7.00	150DB/MQ		4,694	1,565.
SUBTOTAL CURRENT YEAR			180,475	0	0	0	428	180,447			0	5,577	1,839.
Screen Exposer		06/17/98	2,800		100.00			2,800	12.00	150DB/HY		0	0.
Diamond Chase Frames		04/29/02	625		100.00			625	7.00	150DB/HY		0	0.
Precision Gas Dryer		04/29/02	4,000		100.00			4,000	7.00	150DB/HY		0	0.
M&R Challenger		04/29/02	38,000		100.00			38,000	7.00	150DB/HY		0	0.
Oven		02/25/03	1,500		100.00			1,500	7.00	150DB/HY		0	0.
Leasehold Improvements		03/10/03	32,644		100.00			32,644	39.00	SL/MM		837	-407.
Ink Mixer		05/12/03	795		100.00			795	7.00	150DB/HY		0	0.
Washer & Dryer		09/12/03	2,345		100.00			2,345	7.00	150DB/HY		0	0.
Printer		11/30/03	7,993		100.00			7,993	7.00	150DB/HY		0	0.
Machinery		07/30/04	35,000		100.00			35,000	7.00	150DB/HY		0	0.
Leasehold Improvements		09/01/06	23,950		100.00			23,950	7.00	SL/HY		0	0.
Machinery		02/18/07	17,935		100.00			17,935	7.00	150DB/HY		1,098	-298.
Machinery		08/20/07	8,500		100.00			8,500	7.00	150DB/HY		521	-142.
Machinery (DOBBS)		01/08/08	4,500		100.00			4,500	7.00	150DB/HY		551	-150.
Machinery (PRO-Md Sports)		02/27/08	5,000		100.00			5,000	7.00	150DB/HY		613	-167.
Oven		03/10/08	7,900		100.00			7,900	7.00	150DB/HY		967	-262.
Machinery (Sentech)		05/08/08	10,000		100.00			10,000	7.00	150DB/HY		1,225	-332.
Equipment		06/30/08	19,750		100.00			19,750	7.00	150DB/HY		2,419	-656.
Oven		09/15/08	5,335		100.00			5,335	7.00	150DB/HY		653	-176.
Machinery		12/03/08	4,549		100.00			4,549	7.00	150DB/HY		557	-151.
Forklift		07/10/10	6,500		100.00			6,500	7.00	150DB/HY		796	74.
Prism (SCR PR System)		10/08/10	105,499		100.00			105,499	5.00	150DB/HY		17,576	-17,556.
Printing Equipment		01/11/11	490,443		100.00			490,443	10.00	150DB/HY		49,165	7,334.
Office Furniture		07/01/13	21,750		100.00			21,750	7.00	150DB/HY	2,330	4,161	1,166.
Computers		07/01/13	28,500		100.00			28,500	5.00	150DB/HY	4,275	7,268	1,852.
Machinery		07/01/13	90,737		100.00			90,737	7.00	150DB/HY	9,722	17,360	4,861.
Printing Equipment		07/01/13	135,000		100.00			135,000	10.00	150DB/HY	10,125	18,731	5,569.
SUBTOTAL PRIOR YEAR			1,111,550	0	0	0	0	1,111,550			26,452	124,498	559.

Code: S = Sold, A = Auto, L = Listed, C = COGS

FDIV3701 05/20/14

Page 1 of 2

Miami Tees, Inc. 65-0069724

1

Form 1120S, Page 1, Line 19

Other Deductions

Accounting	106,136.
Amortization	5,659.
Automobile and truck expense	10,617.
Bank charges	15,705.
Commissions	79,186.
Computer services and supplies	3,455.
Dues and subscriptions	2,559.
Insurance	57,106.
Meals and entertainment (50%)	2,215.
Office expense	12,617.
Security	2,813.
Supplies	2,421.
Telephone	11,887.
Travel	5,731.
Utilities	109,149.
Internet	23,344.
Sales Tax	18,224.
Payroll Fees	3,531.
Waste Removal	14,372.
Total	486,727.

Other Current Assets:**1120S, Schedule L, Line 6**

Other Current Assets:	Beginning of tax year	End of tax year
Employee Cash Advance		1,700.
Total		1,700.

Other Assets:**1120S, Schedule L, Line 14**

Other Assets:	Beginning of tax year	End of tax year
Deposits	8,418.	8,418.
Total	8,418.	8,418.

Other Current Liabilities:**1120S, Schedule L, Line 18**

Other Current Liabilities:	Beginning of tax year	End of tax year
AMEX C.C.	6,300.	
Chase Master C.C.	21,263.	
Chase Visa C.C.	18,215.	
Loans	23,307.	32,150.

Miami Tees, Inc. 65-0069724

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Other Current Liabilities:
1120S, Schedule L, Line 18

Continued

Other Current Liabilities:	Beginning of tax year	End of tax year
C.C. Payable		27,502.
Payroll Liabilities	336,668.	
Tangible Tax Payable		21,000.
Loan Payable - Firestone Group (70 Mach. 9314)		173,361.
Sales Tax Payable		1,581.
Payroll Tax Liabilities - 941		300,312.
Payroll Tax Liabilities - FUTA		5,520.
Payroll Tax Liabilities - State		27,766.
Total	405,753.	589,192.

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

Meals and entertainment	2,215.	
Total	2,215.	

Shareholders' Basis Report - 2013
Stock and Loan Basis

Shareholder . . . Michael J. Chavez ID No. [REDACTED]

Basis Type	Beginning Balance	Increases	Decreases	Distributions	Ending Balance
Stock	280,243.	-100,795.	2,215.	168,440.	8,793.
Loan	0.				0.
Total	280,243.	-100,795.	2,215.	168,440.	8,793.

Amended Return Explanation Statement For Electronic Filing Only

[illegible]

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Accrual Basis

MIAMI TEES INC.
Profit & Loss
 January through December 2015

Jan - Dec 15

Ordinary Income/Expense	
Income	
Cash Discrepancies (Cash Discrepancies)	
Overages (Cash Overages)	0.26
Total Cash Discrepancies (Cash Discrepancies)	0.26
SALES	
Charge Backs & Credits Merch.	-5.00
CONTRACT PRINTING SALES	2,412,053.38
FINISHED MER/FULL PACKAG SALES	159.00
INTERNET / WALK IN SALES	457,498.86
SALES - Other	27,105.90
Total SALES	2,896,812.14
Total Income	2,896,812.40
Cost of Goods Sold	
BLANK TEE SHIRTS	136,145.90
CONTRACT ART WORK	
Pixel Master	-606.00
Various Others	38,437.50
CONTRACT ART WORK - Other	23,267.00
Total CONTRACT ART WORK	61,098.50
CONTRACT PRINTERS & EMBROIDERS	
INFINITY	58,489.60
MULTI GRAAPHICS	54.00
PREMIUM PRINTING INC.	2,666.77
Rainbow	413.50
Stunning USA	11,686.95
Van Lex	7,117.20
CONTRACT PRINTERS & EMBROIDERS - Other	2,621.93
Total CONTRACT PRINTERS & EMBROIDERS	83,049.95
COST OF MERCHANDISE SOLD	16,182.19
DISPLAYS (Point Of Sales)	1,120.07
FREIGHT LOCAL/UPS	
Fed-X	65.25
Frank Delivery Service	12,565.00
Major	1,365.00
MISC.	2,238.00
UPS	10,171.05
FREIGHT LOCAL/UPS - Other	1,420.10
Total FREIGHT LOCAL/UPS	27,824.40
FREIGHT OUT OF STATE & INT. 1	
Freight Incomming	52.00
Total FREIGHT OUT OF STATE & INT. 1	52.00
SUPPLIES PRINTING & PACKING	
DTG SUPPLIES	60.00
Packing Supplies (Boxes, Tape, Hangers, etc)	1,992.41
Printing Supplies (Ink, Chemicals, Material, etc)	288,608.67
SUPPLIES PRINTING & PACKING - Other	4,262.72
Total SUPPLIES PRINTING & PACKING	294,923.80
Total COGS	620,396.81
Gross Profit	2,276,415.59

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Accrual Basis

MIAMI TEES INC.

Profit & Loss

January through December 2015

	Jan - Dec 15
Expense	
Adjustments	0.40
ADVERTISING	8,007.11
APPLICATIONS AND FEES	2,344.97
AUTOMOBILE EXPENSES	
Auto Lease Hyundai Mark	179.54
Auto Lease Hyundai Santiago	5,148.00
Gasoline	20.00
Total AUTOMOBILE EXPENSES	5,347.54
BANK CHARGES	
BANK SERVICE CHG.	-4,907.92
Check Printing Chg.	242.96
Misc. Bank Service Charges	981.73
PayPal Fee	19.73
Wire Transfer Fee	3,150.00
BANK CHARGES - Other	172.00
Total BANK CHARGES	-341.50
Bank Service Charges	885.00
BLDG. REPAIR AND MAINTENANCE	
Air Conditioned - Various	804.19
BUILDING ELECTRIC UPGRADE	125.86
Equipment Repairs	23,456.19
Phone/Computer Insta. & Repair	417.30
BLDG. REPAIR AND MAINTENANCE - Other	60.87
Total BLDG. REPAIR AND MAINTENANCE	24,864.41
COMMISSION SALES	
COMMISSION SALES ALOKE BIYANI	2,700.00
FLAB-U-LESS	23,800.00
MEHRAN RAHMANPARAST	1,200.00
Michael Jorge	1,457.55
PROMOTE-A-TEE	
Plug Into my life	38.91
Total PROMOTE-A-TEE	38.91
WAYNE KING	1,000.00
COMMISSION SALES - Other	8,000.00
Total COMMISSION SALES	38,196.46
COMPUTER RELATED	
COMPUTER PROGRAMS	895.03
COMPUTER REPAIR	486.58
COMPUTER RELATED - Other	266.86
Total COMPUTER RELATED	1,648.47
CREDIT CARD PAYMENTS	
Credit Card Service Charges	8,639.01
CREDIT CARD PAYMENTS - Other	940.29
Total CREDIT CARD PAYMENTS	9,579.30
DUES and SUBSCRIPTIONS	29.92
Equipment & Tool Rental (Equipment Rental)	3,988.49
Equipment Maintenance	360.00

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Accrual Basis

MIAMI TEES INC.

Profit & Loss

January through December 2015

	Jan - Dec 15
INSURANCE	
Health Ins. Michael & Family	15,523.85
Health Ins. Santiago & Sandra	2,890.15
Liability Insurance (Liability Insurance)	7,988.17
Life	1,701.00
Worker Compensation	27,496.62
Total INSURANCE	55,599.79
INTEREST EXPENSE	
Equity Line Interest	5,052.43
FACTOR INTEREST	5,914.00
Late Charges	67.99
Loan Interest	87,794.50
INTEREST EXPENSE - Other	19,555.77
Total INTEREST EXPENSE	118,384.69
INTERNET	
BASECAMP	800.00
GO DADDY	288.36
GOOGLE	4,843.86
INKSOFT	1,790.00
INTERNET DESIGN	320.00
SEO	320.00
WEBSITE MAINTENANCE	1,950.00
INTERNET - Other	3,799.00
Total INTERNET	14,111.22
LICENSES AND PERMITS	
IW5 Permit (Derm)	560.00
LICENSES AND PERMITS - Other	587.50
Total LICENSES AND PERMITS	1,147.50
MEDICAL SERVICES VARIOUS	266.90
OFFICE EXPENSE	
Cleaning Supplies	262.90
Office Supplies	4,869.49
Postage and Delivery Service	434.06
OFFICE EXPENSE - Other	56,420.31
Total OFFICE EXPENSE	61,986.76
PAYROLL EXPENSE	
Child Support	16,824.85
Employee Wages	1,037,905.63
Payroll Tax	341,771.10
Total PAYROLL EXPENSE	1,396,501.58
Payroll Processing Fee - ADP	53,404.98
PROFESSIONAL FEES	
Accounting	14,571.93
Cash Advance	0.00
External general services	89,571.51
Legal Fees	30,777.38
Total PROFESSIONAL FEES	134,920.82
Reconciliation Discrepancies (Discrepancies between bank statements and company records)	-172.93
RENT & EQUIPMENT LEASE	
Building Rent	330,670.49
Total RENT & EQUIPMENT LEASE	330,670.49

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Accrual Basis

MIAMI TEES INC.

Profit & Loss

January through December 2015

	Jan - Dec 15
SERVICE COMPANIES	
Alarm System & Service	1,346.81
Fire Protection	185.85
Forklift Propane	851.08
Garbage Pick Up Service	5,152.20
Supreme Coffee Pods	76.80
Waste Chemical Removal	6,736.07
SERVICE COMPANIES - Other	-25.40
Total SERVICE COMPANIES	14,323.41
TAXES	
Corp. Registration	275.00
FL Unemployment	205.34
Local	90.00
Sales Tax Fees and Penalties	4,515.38
Tangible Property Tax	4,273.72
Total TAXES	9,359.44
TELEPHONE	
ATT Cell Phone	7,312.63
ATT Telephone, Fax & DHL	7,153.51
NEXTIVA 866 NO.	406.88
Total TELEPHONE	14,873.02
TRAVEL & ENTERTAINMENT	
Hotel	598.01
Meals	504.35
Tolls	304.80
Travel (Travel)	1,948.65
Total TRAVEL & ENTERTAINMENT	3,355.81
UTILITIES	
City Gas Company	18,189.34
FPL Electricity (101)	37,942.40
FPL Electricity (102)	51,270.93
Total UTILITIES	107,402.67
Warehouse Expense	67,896.17
Total Expense	2,478,942.89
Net Ordinary Income	-202,527.30
Other Income/Expense	
Other Expense	
Other Expenses	2,400.00
Total Other Expense	2,400.00
Net Other Income	-2,400.00
Net Income	-204,927.30

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Accrual Basis

MIAMI TEES INC.
Balance Sheet
 As of March 1, 2016

Mar 1, 16

ASSETS

Current Assets

Checking/Savings

ALL BANK ACCT.

BOA Checking

PAYPAL

PETTY CASH

REGIONS BANK - OPERATING ACCT.

TD (NEW) OPERATING ACCOUNT

TD INTERNET SALES ACCT

2.91

1,586.12

110.60

24,590.07

-17,527.61

30.00

8,792.09

Total ALL BANK ACCT.

8,792.09

Total Checking/Savings

Accounts Receivable

Accounts Receivable

189,891.33

189,891.33

Total Accounts Receivable

Other Current Assets

Employee Cash Advance

Inventory Asset

Prepaid Interest

2,200.00

153,329.17

-1,581.30

153,947.87

Total Other Current Assets

352,631.29

Total Current Assets

Fixed Assets

DEPRECIATION

Accumulated Depreciation ALL

Accumulated Depreciation Improv

-301,316.00

-31,870.00

-333,186.00

Total DEPRECIATION

Miami Tees Furnit. & Equipment

Art Work Equipment

Misc Printing Equipment

Misc. Warehouse Equipment

Office Equipment & Computers

Office Furniture

Printing Equipment

Warehouse Equipment

Miami Tees Furnit. & Equipment - Other

27,862.55

167,051.80

17,289.49

36,461.70

24,193.83

792,797.23

35,039.36

300.00

1,100,995.96

Total Miami Tees Furnit. & Equipment

767,809.96

Total Fixed Assets

Other Assets

Deposit-Electricity

Deposit ATT

Leasehold Improvement

7,914.39

503.49

61,116.37

69,534.25

Total Other Assets

1,189,975.50

TOTAL ASSETS**LIABILITIES & EQUITY**

Liabilities

Current Liabilities

Accounts Payable

Accounts Payable

265,988.83

265,988.83

Total Accounts Payable

Other Current Liabilities

Fed Income Tax Savings

-0.15

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Accrual Basis

MIAMI TEES INC.

Balance Sheet

As of March 1, 2016

	Mar 1, 16
LOANS	
Firestone Grp/Jeff Firestone	39,487.50
HUNTER CAROLINE	59,552.99
IBIS CAPITAL	27,800.00
LOAN IOU CENTRAL	79,721.37
LOAN MARGIE CHAVEZ	9,279.81
YELLOWSTONE CAPITAL	33,042.00
Total LOANS	248,883.67
Payroll Liability 941	114,205.84
Payroll Liability 941 current	338,775.96
Payroll Taxes Paid 1/1-4/11 941	55.99
Sales Tax Payable	11.38
THE FIRESTONE GROUP-FACTOR	29,148.18
Unemployment Tax Payable	17,267.11
Total Other Current Liabilities	748,347.98
Total Current Liabilities	1,014,336.81
Long Term Liabilities	
BANK OF AMERICA	
BOA - Commercial Loan	115,564.38
Total BANK OF AMERICA	115,564.38
Tangible Tax Returns	7,000.00
The Firestone Group70 Mach 9314	211,979.57
Total Long Term Liabilities	334,543.95
Total Liabilities	1,348,880.76
Equity	
Distribution - Shareholder	-136,852.50
M.Ch. Capital Investment	920,889.32
Opening Bal Equity	137,366.70
Retained Earnings	-1,040,856.71
Net Income	-39,452.07
Total Equity	-158,905.26
TOTAL LIABILITIES & EQUITY	1,189,975.50