

BI (Official Form 1) (4/10)

<b>UNITED STATES BANKRUPTCY COURT</b> Eastern District of Tennessee		<b>VOLUNTARY PETITION</b>
Name of Debtor (if individual, enter Last, First, Middle): <b>Rushing Rivers, LLC</b>		Name of Joint Debtor (Spouse) (Last, First, Middle):
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):		All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN)/Complete EIN (if more than one, state all): <b>45-4115667</b>		Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN)/Complete EIN (if more than one, state all):
Street Address of Debtor (No. and Street, City, and State): <b>2 Jones Branch Road</b> <b>Erwin, Tennessee</b> <div style="text-align: right;">ZIP CODE <b>37650</b></div>		Street Address of Joint Debtor (No. and Street, City, and State): <div style="text-align: right;">ZIP CODE</div>
County of Residence or of the Principal Place of Business: <b>Unicoi County</b>		County of Residence or of the Principal Place of Business:
Mailing Address of Debtor (if different from street address): <div style="text-align: right;">ZIP CODE</div>		Mailing Address of Joint Debtor (if different from street address): <div style="text-align: right;">ZIP CODE</div>
Location of Principal Assets of Business Debtor (if different from street address above): <div style="text-align: right;">ZIP CODE</div>		
<b>Type of Debtor</b> (Form of Organization) (Check <b>one</b> box.)  <input type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input checked="" type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)	<b>Nature of Business</b> (Check <b>one</b> box.)  <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101(51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input checked="" type="checkbox"/> Other  <hr/> <b>Tax-Exempt Entity</b> (Check box, if applicable.)  <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).	<b>Chapter of Bankruptcy Code Under Which the Petition is Filed</b> (Check <b>one</b> box.)  <input type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input checked="" type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13  <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding  <hr/> <b>Nature of Debts</b> (Check <b>one</b> box.)  <input type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." <input checked="" type="checkbox"/> Debts are primarily business debts.
<b>Filing Fee</b> (Check one box)  <input checked="" type="checkbox"/> Full Filing Fee attached. <input type="checkbox"/> Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. <input type="checkbox"/> Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.		<b>Chapter 11 Debtors</b>  <b>Check one box:</b> <input checked="" type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). <input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D).  <b>Check if:</b> <input checked="" type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,343,300 (amount subject to adjustment on 4/01/13 and every three years thereafter).  <b>Check all applicable boxes:</b> <input type="checkbox"/> A plan is being filed with this petition. <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
<b>Statistical/Administrative Information</b>  <input checked="" type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.		<b>THIS SPACE IS FOR COURT USE ONLY</b>
<b>Estimated Number of Creditors</b> <input checked="" type="checkbox"/> 1-49 <input type="checkbox"/> 50-99 <input type="checkbox"/> 100-199 <input type="checkbox"/> 200-999 <input type="checkbox"/> 1,000-5,000 <input type="checkbox"/> 5,001-10,000 <input type="checkbox"/> 10,001-25,000 <input type="checkbox"/> 25,001-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> Over 100,000		
<b>Estimated Assets</b> <input type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input checked="" type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion		
<b>Estimated Liabilities</b> <input type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input checked="" type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion		

<b>Voluntary Petition</b> <i>(This page must be completed and filed in every case.)</i>		Name of Debtor(s): <b>Rushing Rivers, LLC</b>	
<b>All Prior Bankruptcy Cases Filed Within Last 8 Years</b> (If more than two, attach additional sheet.)			
Location Where Filed:	Case Number:	Date Filed:	
Location Where Filed:	Case Number:	Date Filed:	
<b>Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor</b> (If more than one, attach additional sheet.)			
Name of Debtor:	Case Number:	Date Filed:	
District: <b>Eastern District of Tennessee</b>	Relationship:	Judge:	
<p style="text-align: center;"><b>Exhibit A</b></p> <p>(To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)</p> <p><input type="checkbox"/> Exhibit A is attached and made a part of this petition.</p>	<p style="text-align: center;"><b>Exhibit B</b></p> <p>(To be completed if debtor is an individual whose debts are primarily consumer debts.)</p> <p>I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I have delivered to the debtor the notice required by 11 U.S.C. § 342(b)</p> <p>X _____ Signature of Attorney for Debtor(s) (Date)</p>		
<b>Exhibit C</b>			
Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety?			
<input type="checkbox"/> Yes, and Exhibit C is attached and made a part of this petition.			
<input checked="" type="checkbox"/> No.			
<b>Exhibit D</b>			
(To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.)			
<input type="checkbox"/> Exhibit D completed and signed by the debtor is attached and made a part of this petition.			
If this is a joint petition:			
<input type="checkbox"/> Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.			
<b>Information Regarding the Debtor - Venue</b> (Check any applicable box.)			
<input checked="" type="checkbox"/> Debtor has been domiciled or has had a residence, 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.			
<input checked="" type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.			
<input type="checkbox"/> Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.			
<b>Certification by a Debtor Who Resides as a Tenant of Residential Property</b> (Check all applicable boxes.)			
<input type="checkbox"/> Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)			
_____			
(Name of landlord that obtained judgment)			
_____			
(Address of landlord)			
<input type="checkbox"/> Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and			
<input type="checkbox"/> Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.			
<input type="checkbox"/> Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).			

<p><b>Voluntary Petition</b> <i>(This page must be completed and filed in every case.)</i></p>	<p>Name of Debtor(s): <b>Rushing Rivers, LLC</b></p>
<b>Signatures</b>	
<p style="text-align: center;"><b>Signature(s) of Debtor(s) (Individual/Joint)</b></p> <p>I declare under penalty of perjury that the information provided in this petition is true and correct. [If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b).</p> <p>I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.</p> <p>X _____ Signature of Debtor</p> <p>X _____ Signature of Joint Debtor</p> <p>_____ Telephone Number (if not represented by attorney)</p> <p>_____ Date</p>	<p style="text-align: center;"><b>Signature of a Foreign Representative</b></p> <p>I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.</p> <p>(Check only one box.)</p> <p><input type="checkbox"/> I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. § 1515 are attached.</p> <p><input type="checkbox"/> Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.</p> <p>X _____ (Signature of Foreign Representative)</p> <p>_____ (Printed Name of Foreign Representative)</p> <p>_____ Date</p>
<p style="text-align: center;"><b>Signature of Attorney*</b></p> <p>X <u>Mark S. Dessauer</u> Signature of Attorney for Debtor(s) <b>Mark S. Dessauer</b></p> <p>_____ Printed Name of Attorney for Debtor(s) <b>HUNTER, SMITH &amp; DAVIS, LLP</b></p> <p>_____ Firm Name</p> <p>_____ <b>P.O. Box 3740, 1212 N. Eastman Rd.</b></p> <p>_____ <b>Kingsport, TN 37664</b></p> <p>_____ Address <b>(423) 378-8840</b></p> <p>_____ Telephone Number <b>09/02/2015</b></p> <p>_____ Date</p> <p><small>*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.</small></p>	<p style="text-align: center;"><b>Signature of Non-Attorney Bankruptcy Petition Preparer</b></p> <p>I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.</p> <p>_____ Printed Name and title, if any, of Bankruptcy Petition Preparer</p> <p>_____ Social-Security number (If the bankruptcy petition preparer is not an individual, state the Social-Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)</p> <p>_____ Address</p> <p>X _____ Date</p> <p>Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social-Security number is provided above.</p> <p>Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual.</p> <p>If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.</p> <p><small>A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.</small></p>
<p style="text-align: center;"><b>Signature of Debtor (Corporation/Partnership)</b></p> <p>I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.</p> <p>The debtor requests the relief in accordance with the chapter of title 11, United States Code, specified in this petition.</p> <p>X <u>Matthew P. Moses</u> Signature of Authorized Individual <b>Matthew P. Moses</b></p> <p>_____ Printed Name of Authorized Individual <b>Member/Manager</b></p> <p>_____ Title of Authorized Individual <b>09/02/2015</b></p> <p>_____ Date</p>	

Re: Rushing Rivers, LLC, Case No. \_\_\_\_\_

I, Matthew P. Moses, am the member/manager of Rushing Rivers, LLC, a North Carolina corporation. Attached hereto is a copy of Rushing Rivers, LLC's most recent filed Federal Income Tax Return. No balance sheet, statement of operation or cash-flow statement has been prepared for Rushing Rivers, LLC.

The foregoing statement is made under penalty of perjury.

Matthew P. Moses  
Matthew P. Moses

SWORN TO AND SUBSCRIBED before me, this the 4<sup>th</sup> day of September, 2015.

Mark S. Dessauer  
Notary Public

My commission expires:  
10/23/18



Re: **Rushing Rivers, LLC, Case No.** \_\_\_\_\_

I, Matthew P. Moses, am the member/manager of Rushing Rivers, LLC, a North Carolina corporation. Attached hereto is a copy of Rushing Rivers, LLC's most recent filed Federal Income Tax Return. No balance sheet, statement of operation or cash-flow statement has been prepared for Rushing Rivers, LLC.

The foregoing statement is made under penalty of perjury.

\_\_\_\_\_  
Matthew P. Moses

**SWORN TO AND SUBSCRIBED** before me, this the \_\_\_\_ day of September, 2015.

\_\_\_\_\_  
Notary Public

**My commission expires:**

\_\_\_\_\_

**2013 U.S. Return of Partnership Income**  
prepared for:

**Rushing Rivers, LLC**  
2519 Walker Ave  
Greensboro, NC 27403

**Robert Core CPA, PC**  
1009 W Market St  
Greensboro, NC 27401

**Robert Core CPA, PC  
1009 W Market St  
Greensboro, NC 27401  
(336) 274-4412**

September 10, 2014

Rushing Rivers, LLC  
2519 Walker Ave  
Greensboro, NC 27403

Dear Client,

We have prepared and enclosed your 2013 Form 1065, U.S. Return of Partnership Income for Rushing Rivers, LLC for the tax year ending December 31, 2013.

The return was prepared from information furnished to us. Please review to ensure there are no omissions or misstatements of material facts.

The return should be signed and dated by a limited liability company member and mailed on or before September 15, 2014. Retain the duplicate copy for your records indefinitely.

We recommend you use certified mail, return receipt requested. Mail your return to:

Department of the Treasury  
Internal Revenue Service Center  
Cincinnati, OH 45999-0011

Enclosed is the 2013 Form D-403, Partnership Income Tax Return for Rushing Rivers, LLC.

The return should be signed and dated by a limited liability company member and mailed on or before October 15, 2014 to:

North Carolina Department of Revenue  
P.O. Box 25000  
Raleigh, NC 27640-0640

Along with the tax return, enclose a check or money order, payable to "North Carolina Department of Revenue," in the amount of \$187 for the balance of tax due. Write your North Carolina secretary of state ID number on the check.

Enclosed is the 2013 Form FAE 170, Tennessee Franchise, Excise Tax Return for Rushing Rivers, LLC.

The return should be signed and dated by a limited liability company member and mailed on or before April 15, 2014 to:

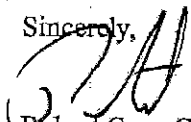
Tennessee Department of Revenue  
Andrew Jackson State Office Building

500 Deaderick Street  
Nashville, TN 37242

Along with the tax return, enclose a check or money order, payable to "Tennessee Department of Revenue," in the amount of \$1,110 for the balance of tax due. Write your TN account number, or federal EIN on the check.

We appreciate this opportunity to serve you. If you have any questions, please contact us.

Sincerely,



Robert Core, CPA



Form **1065** U.S. Return of Partnership Income  
 For calendar year 2013, or tax year beginning \_\_\_\_\_, 2013, ending \_\_\_\_\_, 20  
 OMB No. 1545-0099  
**2013**  
 Department of the Treasury Internal Revenue Service  
 Information about Form 1065 and its separate instructions is at [www.irs.gov/form1065](http://www.irs.gov/form1065).

**A** Principal business activity: Real Estate  
**B** Principal product or service: Rental  
**C** Business code number: 531190  
**D** Employer identification number: 45-4115667  
**E** Date business started: 12/16/11  
**F** Total assets (see Instrs): \$ 312,278.  
**G** Check applicable boxes: (1)  Initial return (2)  Final return (3)  Name change (4)  Address change (5)  Amended return (6)  Technical termination — also check (1) or (2)  
**H** Check accounting method: (1)  Cash (2)  Accrual (3)  Other (specify) \_\_\_\_\_  
**I** Number of Schedules K-1. Attach one for each person who was a partner at any time during the tax year: 2  
**J** Check if Schedules C and M-3 are attached:

Caution. Include only trade or business income and expenses on lines 1a through 22 below. See the instructions for more information.

INCOME	1 a	Gross receipts or sales	1 a	
	b	Returns and allowances	1 b	
	c	Balance. Subtract line 1b from line 1a	1 c	
	2	Cost of goods sold (attach Form 1125-A)	2	
	3	Gross profit. Subtract line 2 from line 1c	3	
	4	Ordinary income (loss) from other partnerships, estates, and trusts (attach statement)	4	
	5	Net farm profit (loss) (attach Schedule F (Form 1040))	5	
	6	Net gain (loss) from Form 4797, Part II, line 17 (attach Form 4797)	6	
DEDUCTIONS FOR LIMITATIONS	7	Other income (loss) (attach statement)	7	
	8	<b>Total income (loss).</b> Combine lines 3 through 7	8	
	9	Salaries and wages (other than to partners) (less employment credits)	9	
	10	Guaranteed payments to partners	10	
	11	Repairs and maintenance	11	
	12	Bad debts	12	
	13	Rent	13	
	14	Taxes and licenses	14	
	15	Interest	15	
	16 a	Depreciation (if required, attach Form 4562)	16 a	
	b	Less depreciation reported on Form 1125-A and elsewhere on return	16 b	
	16 c		16 c	
	17	Depletion (Do not deduct oil and gas depletion.)	17	
	18	Retirement plans, etc.	18	
19	Employee benefit programs	19		
20	Other deductions (attach statement)	20		
21	<b>Total deductions.</b> Add the amounts shown in the far right column for lines 9 through 20	21		
22	<b>Ordinary business income (loss).</b> Subtract line 21 from line 8	22		

**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 general partner or limited liability company member manager) is based on all information of which preparer has any knowledge.  
 Signature of general partner or limited liability company member manager: Robert Core, CPA Date: 09/10/14  
 May the IRS discuss this return with the preparer shown below (see Instrs)?  Yes  No  
**Paid Preparer Use Only**  
 Preparer's name: Robert Core, CPA Preparer's signature: [Signature] Date: 09/10/14 Check  if self-employed PTIN: P00083495  
 Firm's name: Robert Core CPA, PC Firm's EIN: 46-1817194  
 Firm's address: 1009 W Market St Greensboro NC 27401 Phone no.: (336) 274-4412

**Schedule B Other Information**

<b>1</b> What type of entity is filing this return? Check the applicable box:				Yes	No
a <input type="checkbox"/> Domestic general partnership	b <input type="checkbox"/> Domestic limited partnership				
c <input checked="" type="checkbox"/> Domestic limited liability company	d <input type="checkbox"/> Domestic limited liability partnership				
e <input type="checkbox"/> Foreign partnership	f <input type="checkbox"/> Other . . . . .				
<b>2</b> At any time during the tax year, was any partner in the partnership a disregarded entity, a partnership (including an entity treated as a partnership), a trust, an S corporation, an estate (other than an estate of a deceased partner), or a nominee or similar person?				X	
<b>3</b> At the end of the tax year:					
a Did any foreign or domestic corporation, partnership (including any entity treated as a partnership), trust, or tax-exempt organization, or any foreign government own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital of the partnership? For rules of constructive ownership, see instructions. If 'Yes,' attach Schedule B-1, Information on Partners Owning 50% or More of the Partnership.					X
b Did any individual or estate own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital of the partnership? For rules of constructive ownership, see instructions. If 'Yes,' attach Schedule B-1, Information on Partners Owning 50% or More of the Partnership.				X	
<b>4</b> At the end of the tax year, did the partnership:					
a Own directly 20% or more, or own, directly or indirectly, 50% or more of the total voting power of all classes of stock entitled to vote of any foreign or domestic corporation? For rules of constructive ownership, see instructions. If 'Yes,' complete (i) through (iv) below.					X
(i) Name of Corporation	(ii) Employer Identification Number (if any)	(iii) Country of Incorporation	(iv) Percentage Owned in Voting Stock		
<b>b</b> Own directly an interest of 20% or more, or own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital in any foreign or domestic partnership (including an entity treated as a partnership) or in the beneficial interest of a trust? For rules of constructive ownership, see instructions. If 'Yes,' complete (i) through (v) below.					X
(i) Name of Entity	(ii) Employer Identification Number (if any)	(iii) Type of Entity	(iv) Country of Organization	(v) Maximum Percentage Owned in Profit, Loss, or Capital	
				Yes	No
<b>5</b> Did the partnership file Form 8893, Election of Partnership Level Tax Treatment, or an election statement under section 6231(a)(1)(B)(ii) for partnership-level tax treatment, that is in effect for this tax year? See Form 8893 for more details.					X
<b>6</b> Does this partnership satisfy all four of the following conditions?					
a The partnership's total receipts for the tax year were less than \$250,000.					
b The partnership's total assets at the end of the tax year were less than \$1 million.					
c Schedules K-1 are filed with the return and furnished to the partners on or before the due date (including extensions) for the partnership return.					
d The partnership is not filing and is not required to file Schedule M-3.				X	
If 'Yes,' the partnership is not required to complete Schedules L, M-1, and M-2; Item F on page 1 of Form 1065; or Item L on Schedule K-1.					
<b>7</b> Is this partnership a publicly traded partnership as defined in section 469(k)(2)?					X
<b>8</b> During the tax year, did the partnership have any debt that was cancelled, was forgiven, or had the terms modified so as to reduce the principal amount of the debt?					X
<b>9</b> Has this partnership filed, or is it required to file, Form 8918, Material Advisor Disclosure Statement, to provide information on any reportable transaction?					X
<b>10</b> At any time during calendar year 2013, did the partnership have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) (formerly TD F 90-22-1). If 'Yes,' enter the name of the foreign country.					X

**Schedule B** Other Information (continued)

	Yes	No
11 At any time during the tax year, did the partnership receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If 'Yes,' the partnership may have to file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts. See instructions.		X
12 a Is the partnership making, or had it previously made (and not revoked), a section 754 election? See instructions for details regarding a section 754 election.		X
b Did the partnership make for this tax year an optional basis adjustment under section 743(b) or 734(b)? If 'Yes,' attach a statement showing the computation and allocation of the basis adjustment. See instructions.		X
c Is the partnership required to adjust the basis of partnership assets under section 743(b) or 734(b) because of a substantial built-in loss (as defined under section 743(d)) or substantial basis reduction (as defined under section 734(d))? If 'Yes,' attach a statement showing the computation and allocation of the basis adjustment. See instrs.		X
13 Check this box if, during the current or prior tax year, the partnership distributed any property received in a like-kind exchange or contributed such property to another entity (other than disregarded entities wholly-owned by the partnership throughout the tax year) <input type="checkbox"/>		
14 At any time during the tax year, did the partnership distribute to any partner a tenancy-in-common or other undivided interest in partnership property?		X
15 If the partnership is required to file Form 8858, Information Return of U.S. Persons With Respect To Foreign Disregarded Entities, enter the number of Forms 8858 attached. See instructions		
16 Does the partnership have any foreign partners? If 'Yes,' enter the number of Forms 8805, Foreign Partner's Information Statement of Section 1446 Withholding Tax, filed for this partnership.		X
17 Enter the number of Forms 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships, attached to this return		
18 a Did you make any payments in 2013 that would require you to file Form(s) 1099? See instructions	X	
b If 'Yes,' did you or will you file all required Form(s) 1099?	X	
19 Enter the number of Form(s) 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations, attached to this return		
20 Enter the number of partners that are foreign governments under section 892		

**Designation of Tax Matters Partner** (see instructions)

Enter below the general partner or member-manager designated as the tax matters partner (TMP) for the tax year of this return:

Name of designated TMP	▶ Deborah W Calhoun	Identifying number of TMP	▶ 241-04-7337
If the TMP is an entity, name of TMP representative	▶	Phone number of TMP	▶
Address of designated TMP	▶ 2519 Walker Ave Greensboro, NC 27403		

Schedule K Partners' Distributive Share Items		Total amount	
Income (Loss)	1 Ordinary business income (loss) (page 1, line 22)	1	
	2 Net rental real estate income (loss) (attach Form 8825)	2	16,959.
	3a Other gross rental income (loss)	3a	
	b Expenses from other rental activities (attach stmt)	3b	
	c Other net rental income (loss). Subtract line 3b from line 3a	3c	
	4 Guaranteed payments	4	
	5 Interest income	5	
	6 Dividends: a Ordinary dividends	6a	
	b Qualified dividends	6b	
	7 Royalties	7	
	8 Net short-term capital gain (loss) (attach Schedule D (Form 1065))	8	
Income (Loss)	9a Net long-term capital gain (loss) (attach Schedule D (Form 1065))	9a	
	b Collectibles (28%) gain (loss)	9b	
	c Unrecaptured section 1250 gain (attach statement)	9c	
10 Net section 1231 gain (loss) (attach Form 4797)	10		
11 Other income (loss) (see instructions) Type ▶	11		
Deductions	12 Section 179 deduction (attach Form 4562)	12	
	13a Contributions	13a	
	b Investment interest expense	13b	
	c Section 59(e)(2) expenditures: (1) Type ▶ (2) Amount ▶	13c (2)	
d Other deductions (see instructions) Type ▶	13d		
Self-Employment	14a Net earnings (loss) from self-employment	14a	
	b Gross farming or fishing income	14b	
	c Gross nonfarm income	14c	
Credits	15a Low-income housing credit (section 42(j)(5))	15a	
	b Low-income housing credit (other)	15b	
	c Qualified rehabilitation expenditures (rental real estate) (attach Form 3468)	15c	
	d Other rental real estate credits (see instructions) Type ▶	15d	
	e Other rental credits (see instructions) Type ▶	15e	
	f Other credits (see instructions) Type ▶	15f	
Foreign Transactions	16a Name of country or U.S. possession ▶		
	b Gross income from all sources	16b	
	c Gross income sourced at partner level	16c	
	Foreign gross income sourced at partnership level		
	d Passive category ▶ e General category ▶ f Other ▶	16f	
	Deductions allocated and apportioned at partner level		
	g Interest expense ▶ h Other ▶	16h	
	Deductions allocated and apportioned at partnership level to foreign source income		
	i Passive category ▶ j General category ▶ k Other ▶	16k	
	l Total foreign taxes (check one): ▶ Paid <input type="checkbox"/> Accrued <input type="checkbox"/>	16l	
m Reduction in taxes available for credit (attach statement)	16m		
n Other foreign tax information (attach statement)			
Alternative Minimum Tax (AMT) Items	17a Post-1986 depreciation adjustment	17a	
	b Adjusted gain or loss	17b	
	c Depletion (other than oil and gas)	17c	
	d Oil, gas, and geothermal properties – gross income	17d	
	e Oil, gas, and geothermal properties – deductions	17e	
	f Other AMT items (attach stmt)	17f	
Other Information	18a Tax-exempt interest income	18a	
	b Other tax-exempt income	18b	
	c Nondeductible expenses	18c	
	19a Distributions of cash and marketable securities	19a	1,192.
	b Distributions of other property	19b	
	20a Investment income	20a	
b Investment expenses	20b		
c Other items and amounts (attach stmt)			

**Analysis of Net Income (Loss)**

1	Net income (loss). Combine Schedule K, lines 1 through 11. From the result, subtract the sum of Schedule K, lines 12 through 13d, and 16l					1	16,959.
2	Analysis by partner type:						
	(i) Corporate	(ii) Individual (active)	(iii) Individual (passive)	(iv) Partnership	(v) Exempt Organization	(vi) Nominee/Other	
a	General partners						
b	Limited partners						16,959.

Schedule L: Balance Sheets per Books		Beginning of tax year		End of tax year	
Assets		(a)	(b)	(c)	(d)
1	Cash		377.		144.
2a	Trade notes and accounts receivable				
b	Less allowance for bad debts				
3	Inventories				
4	U.S. government obligations				
5	Tax-exempt securities				
6	Other current assets (attach stmt)				
7a	Loans to partners (or persons related to partners)				
b	Mortgage and real estate loans				
8	Other investments (attach stmt)				
9a	Buildings and other depreciable assets				
b	Less accumulated depreciation				
10a	Depletable assets				
b	Less accumulated depletion				
11	Land (net of any amortization)		312,134.		312,134.
12a	Intangible assets (amortizable only)				
b	Less accumulated amortization				
13	Other assets (attach stmt)				
14	<b>Total assets</b>		<b>312,511.</b>		<b>312,278.</b>
<b>Liabilities and Capital</b>					
15	Accounts payable				
16	Mortgages, notes, bonds payable in less than 1 year				
17	Other current liabilities (attach stmt)				
18	All nonrecourse loans				
19a	Loans from partners (or persons related to partners)				
b	Mortgages, notes, bonds payable in 1 year or more		144,000.		128,000.
20	Other liabilities (attach stmt)				
21	Partners' capital accounts		168,511.		184,278.
22	<b>Total liabilities and capital</b>		<b>312,511.</b>		<b>312,278.</b>

**Schedule M-1: Reconciliation of Income (Loss) per Books With Income (Loss) per Return**  
 Note. Schedule M-3 may be required instead of Schedule M-1 (see instructions).

1	Net income (loss) per books	16,959.	6	Income recorded on books this year not included on Schedule K, lines 1 through 11 (itemize):	
2	Income included on Schedule K, lines 1, 2, 3c, 5, 6a, 7, 8, 9a, 10, and 11, not recorded on books this year (itemize):		a	Tax-exempt interest . . . \$	
3	Guaranteed prints (other than health insurance)		7	Deductions included on Schedule K, lines 1 through 13d, and 16l, not charged against book income this year (itemize):	
4	Expenses recorded on books this year not included on Schedule K, lines 1 through 13d, and 16l (itemize):		a	Depreciation . . . \$	
	a Depreciation . . . \$		8	Add lines 6 and 7.	
	b Travel and entertainment . . . \$		9	Income (loss) (Analysis of Net Income (Loss), line 1). Subtract line 8 from line 5.	16,959.
5	Add lines 1 through 4.	16,959.			

**Schedule M-2: Analysis of Partners' Capital Accounts**

1	Balance at beginning of year	168,511.	6	Distributions: a Cash . . . . .	1,192.
2	Capital contributed: a Cash . . . . .		b	Property . . . . .	
	b Property . . . . .		7	Other decreases (itemize):	
3	Net income (loss) per books	16,959.	8	Add lines 6 and 7.	1,192.
4	Other increases (itemize):		9	Balance at end of year. Subtract line 8 from line 5.	184,278.
5	Add lines 1 through 4.	185,470.			

Form **8825**  
(Rev. December 2010)

**Rental Real Estate Income and Expenses of a Partnership or an S Corporation**

OMB No. 1545-1186

Department of the Treasury  
Internal Revenue Service

▶ See instructions.  
▶ Attach to Form 1065, Form 1065-B, or Form 1120S.

Name: Rushing Rivers, LLC Employer identification number: 45-4115667

1 Show the type and address of each property. For each rental real estate property listed, report the number of days rented at fair rental value and days with personal use. See instructions. See page 2 to list additional properties.				
	Physical address of each property -- street, city, state, ZIP code	Type -- Enter code 1-8; see page 2 for list	Fair Rental Days	Personal Use Days
A	<u>13490 US Hwy 25/70</u> <u>Marshall, NC 28753</u>	<u>4</u>	<u>365</u>	<u>0</u>
B	<u>2 Jones Branch Rd</u> <u>Erwin, TN 37650</u>	<u>4</u>	<u>365</u>	<u>0</u>
C				
D				

Rental Real Estate Income	Properties			
	A	B	C	D
2 Gross rents	13,000.	13,000.		
<b>Rental Real Estate Expenses</b>				
3 Advertising				
4 Auto and travel				
5 Cleaning and maintenance				
6 Commissions				
7 Insurance				
8 Legal and other professional fees				
9 Interest	2,276.	5,884.		
10 Repairs				
11 Taxes		881.		
12 Utilities				
13 Wages and salaries				
14 Depreciation (see instructions)				
15 Other (list) ▶ <u>Office Supplies</u> <u>Rental</u>				
16 Total expenses for each property. Add lines 3 through 15	2,276.	6,765.		
17 Income or (Loss) from each property. Subtract line 16 from line 2	10,724.	6,235.		

18a Total gross rents. Add gross rents from line 2, columns A through H	18a	26,000.
18b Total expenses. Add total expenses from line 16, columns A through H	18b	-9,041.
19 Net gain (loss) from Form 4797, Part II, line 17, from the disposition of property from rental real estate activities	19	
20a Net income (loss) from rental real estate activities from partnerships, estates, and trusts in which this partnership or S corporation is a partner or beneficiary (from Schedule K-1)	20a	
b Identify below the partnerships, estates, or trusts from which net income (loss) is shown on line 20a. Attach a schedule if more space is needed: (1) Name (2) Employer identification number		
21 Net rental real estate income (loss). Combine lines 18a through 20a. Enter the result here and on: • Form 1065 or 1120S: Schedule K, line 2, or • Form 1065-B: Part I, line 4	21	16,959.

Document Page 15 of 32  
**Information on Partners Owning 50% or More of the Partnership**

**SCHEDULE B-1**  
 (Form 1065)  
 (December 2011)

Department of the Treasury  
 Internal Revenue Service

OMB No. 1545-0099

▶ Attach to Form 1065. See instructions.

Name of partnership

Rushing Rivers, LLC

Employer identification number (EIN)

45-4115667

**Part I** **Entities Owning 50% or More of the Partnership** (Form 1065, Schedule B, Question 3a)

Complete columns (i) through (v) below for any foreign or domestic corporation, partnership (including any entity treated as a partnership), trust, tax-exempt organization, or any foreign government that owns, directly or indirectly, an interest of 50% or more in the profit, loss, or capital of the partnership (see instructions).

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

**Part II** **Individuals or Estates Owning 50% or More of the Partnership** (Form 1065, Schedule B, Question 3b)

Complete columns (i) through (iv) below for any individual or estate that owns, directly or indirectly, an interest of 50% or more in the profit, loss, or capital of the partnership (see instructions).

(i) Name of Individual or Estate	(ii) Identifying Number (if any)	(iii) Country of Citizenship (see instructions)	(iv) Maximum Percentage Owned in Profit, Loss, or Capital
Deborah W Calhoun	241-04-7337	US	50.0000
Matthew P Moses	241-47-8009	US	50.0000

BAA For Paperwork Reduction Act Notice, see the instructions for Form 1065.

Schedule B-1 (Form 1065) (12-2011)

Final K-1  Amended K-1

**Schedule K-1**  
(Form 1065)

**2013**

For calendar year 2013, or tax

year beginning \_\_\_\_\_, 2013  
ending \_\_\_\_\_

Department of the Treasury  
Internal Revenue Service

**Partner's Share of Income, Deductions, Credits, etc.**

▶ See separate instructions.

**Part I Information About the Partnership**

**A** Partnership's employer identification number  
45-4115667

**B** Partnership's name, address, city, state, and ZIP code  
Rushing Rivers, LLC  
2519 Walker Ave  
Greensboro, NC 27403

**C** IRS Center where partnership filed return  
Cincinnati, OH

**D**  Check if this is a publicly traded partnership (PTP)

**Part II Information About the Partner**

**E** Partner's identifying number  
241-04-7337

**F** Partner's name, address, city, state, and ZIP code  
Deborah W Calhoun  
2519 Walker Ave  
Greensboro, NC 27403

**G**  General partner or LLC member-manager  Limited partner or other LLC member

**H**  Domestic partner  Foreign partner

**I1** What type of entity is this partner? . . . . Individual

**I2** If this partner is a retirement plan (IRA/SEP/Keogh/etc), check here (see instructions) . . . . .

**J** Partner's share of profit, loss, and capital (see instructions):

	Beginning	Ending
Profit	50.00000 %	50.00000 %
Loss	50.00000 %	50.00000 %
Capital	50.00000 %	50.00000 %

**K** Partner's share of liabilities at year end:

Nonrecourse . . . . . \$ \_\_\_\_\_

Qualified nonrecourse financing . . . . . \$ 64,000.

Recourse . . . . . \$ \_\_\_\_\_

**L** Partner's capital account analysis:

Beginning capital account . . . . . \$ 84,255.

Capital contributed during the year . . . \$ \_\_\_\_\_

Current year increase (decrease) . . . . \$ 8,479.

Withdrawals and distributions . . . . . \$ 596.

Ending capital account . . . . . \$ 92,138.

Tax basis  GAAP  Section 704(b) book  
 Other (explain)

**M** Did the partner contribute property with a built-in gain or loss?  
 Yes  No  
If 'Yes', attach statement (see instructions)

<b>Part III Partner's Share of Current Year Income, Deductions, Credits, and Other Items</b>			
1	Ordinary business income (loss)	15	Credits
2	Net rental real estate income (loss) 8,479.		
3	Other net rental income (loss)	16	Foreign transactions
4	Guaranteed payments		
5	Interest income		
6 a	Ordinary dividends		
6 b	Qualified dividends		
7	Royalties		
8	Net short-term capital gain (loss)		
9 a	Net long-term capital gain (loss)	17	Alternative minimum tax (AMT) items
9 b	Collectibles (28%) gain (loss)		
9 c	Unrecaptured section 1250 gain		
10	Net section 1231 gain (loss)	18	Tax-exempt income and nondeductible expenses
11	Other income (loss)		
		19	Distributions
12	Section 179 deduction	A	596.
13	Other deductions	20	Other information
14	Self-employment earnings (loss)		
*See attached statement for additional information.			
FOR IRS USE ONLY			



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

	Code	Report on
<b>1</b> Ordinary business income (loss). Determine whether the income (loss) is passive or nonpassive and enter on your return as follows.		
Passive loss		
Passive income		
Nonpassive loss		
Nonpassive income		
<b>2</b> Net rental real estate income (loss)		
<b>3</b> Other net rental income (loss)		
Net income		
Net loss		
<b>4</b> Guaranteed payments		
<b>5</b> Interest income		
<b>6 a</b> Ordinary dividends		
<b>6 b</b> Qualified dividends		
<b>7</b> Royalties		
<b>8</b> Net short-term capital gain (loss)		
<b>9 a</b> Net long-term capital gain (loss)		
<b>9 b</b> Collectibles (28%) gain (loss)		
<b>9 c</b> Unrecaptured section 1250 gain		
<b>10</b> Net section 1231 gain (loss)		
<b>11</b> Other income (loss)		
Code		
<b>A</b> Other portfolio income (loss)		
<b>B</b> Involuntary conversions		
<b>C</b> Section 1256 contracts and straddles		
<b>D</b> Mining exploration costs recapture		
<b>E</b> Cancellation of debt		
<b>F</b> Other income (loss)		
<b>12</b> Section 179 deduction		
<b>13</b> Other deductions		
<b>A</b> Cash contributions (50%)		
<b>B</b> Cash contributions (30%)		
<b>C</b> Noncash contributions (50%)		
<b>D</b> Noncash contributions (30%)		
<b>E</b> Capital gain property to a 50% organization (30%)		
<b>F</b> Capital gain property (20%)		
<b>G</b> Contributions (100%)		
<b>H</b> Investment interest expense		
<b>I</b> Deductions — royalty income		
<b>J</b> Section 59(e)(2) expenditures		
<b>K</b> Deductions — portfolio (2% floor)		
<b>L</b> Deductions — portfolio (other)		
<b>M</b> Amounts paid for medical insurance		
<b>N</b> Educational assistance benefits		
<b>O</b> Dependent care benefits		
<b>P</b> Preproductive period expenses		
<b>Q</b> Commercial revitalization deduction from rental real estate activities		
<b>R</b> Pensions and IRAs		
<b>S</b> Reforestation expense deduction		
<b>T</b> Domestic production activities information		
<b>U</b> Qualified production activities income		
<b>V</b> Employer's Form W-2 wages		
<b>W</b> Other deductions		
<b>14</b> Self-employment earnings (loss)		
<i>Note. If you have a section 179 deduction or any partner-level deductions, see the Partner's instructions before completing Schedule SE.</i>		
<b>A</b> Net earnings (loss) from self-employment		
<b>B</b> Gross farming or fishing income		
<b>C</b> Gross non-farm income		
<b>15</b> Credits		
<b>A</b> Low-income housing credit (section 42(j)(5)) from pre-2008 buildings		
<b>B</b> Low-income housing credit (other) from pre-2008 buildings		
<b>C</b> Low-income housing credit (section 42(j)(5)) from post-2007 buildings		
<b>D</b> Low-income housing credit (other) from post-2007 buildings		
<b>E</b> Qualified rehabilitation expenditures (rental real estate)		
<b>F</b> Other rental real estate credits		
<b>G</b> Other rental credits		
<b>H</b> Undistributed capital gains credit		
<b>I</b> Biofuel producer credit		
<b>J</b> Work opportunity credit		
<b>K</b> Disabled access credit		
<b>L</b> Empowerment zone and renewal community employment credit		
<b>M</b> Credit for increasing research activities		
<b>N</b> Credit for employer social security and Medicare taxes		
<b>O</b> Backup withholding		
<b>P</b> Other credits		
<b>16</b> Foreign transactions		
<b>A</b> Name of country or U.S. possession		
<b>B</b> Gross income from all sources		
<b>C</b> Gross income sourced at partner level		
<i>Foreign gross income sourced at partnership level</i>		
<b>D</b> Passive category		
<b>E</b> General category		
<b>F</b> Other		
<i>Deductions allocated and apportioned at partner level</i>		
<b>G</b> Interest expense		
<b>H</b> Other		
<i>Deductions allocated and apportioned at partnership level to foreign source income</i>		
<b>I</b> Passive category		
<b>J</b> General category		
<b>K</b> Other		
<i>Other information</i>		
<b>L</b> Total foreign taxes paid		
<b>M</b> Total foreign taxes accrued		
<b>N</b> Reduction in taxes available for credit		
<b>O</b> Foreign trading gross receipts		
<b>P</b> Extraterritorial income exclusion		
<b>Q</b> Other foreign transactions		
<b>17</b> Alternative minimum tax (AMT) items		
<b>A</b> Post-1996 depreciation adjustment		
<b>B</b> Adjusted gain or loss		
<b>C</b> Depletion (other than oil & gas)		
<b>D</b> Oil, gas, & geothermal — gross income		
<b>E</b> Oil, gas, & geothermal — deductions		
<b>F</b> Other AMT items		
<b>18</b> Tax-exempt income and nondeductible expenses		
<b>A</b> Tax-exempt interest income		
<b>B</b> Other tax-exempt income		
<b>C</b> Nondeductible expenses		
<b>19</b> Distributions		
<b>A</b> Cash and marketable securities		
<b>B</b> Distribution subject to section 737		
<b>C</b> Other property		
<b>20</b> Other information		
<b>A</b> Investment income		
<b>B</b> Investment expenses		
<b>C</b> Fuel tax credit information		
<b>D</b> Qualified rehabilitation expenditures (other than rental real estate)		
<b>E</b> Basis of energy property		
<b>F</b> Recapture of low-income housing credit (section 42(j)(5))		
<b>G</b> Recapture of low-income housing credit (other)		
<b>H</b> Recapture of investment credit		
<b>I</b> Recapture of other credits		
<b>J</b> Look-back interest — completed long-term contracts		
<b>K</b> Look-back interest — income forecast method		
<b>L</b> Dispositions of property with section 179 deductions		
<b>M</b> Recapture of section 179 deduction		
<b>N</b> Interest expense for corporate partners		
<b>O</b> Section 453(l)(3) information		
<b>P</b> Section 453A(c) information		
<b>Q</b> Section 1260(b) information		
<b>R</b> Interest allocable to production expenditures		
<b>S</b> CCF nonqualified withdrawals		
<b>T</b> Depletion information — oil and gas		
<b>U</b> Amortization of reforestation costs		
<b>V</b> Unrelated business taxable income		
<b>W</b> Precontribution gain (loss)		
<b>X</b> Section 108(i) information		
<b>Y</b> Net investment income		
<b>Z</b> Other information		

Sch K-1, Credit Details  
Sch K-1, Supporting Details

**Form 8825 Rental Income/Loss Details  
For Reporting Purposes**

Rental Land - NC	
Property type: 4 Commercial	5,362.
Rental Land - TN	
Property type: 4 Commercial	3,117.

Schedule K-1  
(Form 1065)

2013

Final K-1  Amended K-1

Department of the Treasury  
Internal Revenue Service

For calendar year 2013, or tax  
year beginning \_\_\_\_\_, 2013  
ending \_\_\_\_\_

**Partner's Share of Income, Deductions, Credits, etc.**  
▶ See separate instructions.

**Part I Information About the Partnership**

**A** Partnership's employer identification number  
45-4115667

**B** Partnership's name, address, city, state, and ZIP code  
Rushing Rivers, LLC  
2519 Walker Ave  
Greensboro, NC 27403

**C** IRS Center where partnership filed return  
Cincinnati, OH

**D**  Check if this is a publicly traded partnership (PTP)

**Part II Information About the Partner**

**E** Partner's identifying number  
241-47-8009

**F** Partner's name, address, city, state, and ZIP code  
Matthew P Moses  
2 Jones Branch Rd  
Erwin, TN 37650

**G**  General partner or LLC member-manager  Limited partner or other LLC member

**H**  Domestic partner  Foreign partner

**I1** What type of entity is this partner? . . . . Individual

**I2** If this partner is a retirement plan (IRA/SEP/Kaogh/etc), check here (see instructions) . . . .

**J** Partner's share of profit, loss, and capital (see instructions):

	Beginning	Ending
Profit	50.00000 %	50.00000 %
Loss	50.00000 %	50.00000 %
Capital	50.00000 %	50.00000 %

**K** Partner's share of liabilities at year end:

Nont recourse . . . . . \$ \_\_\_\_\_

Qualified nont recourse financing . . . . . \$ 64,000.

Recourse . . . . . \$ \_\_\_\_\_

**L** Partner's capital account analysis:

Beginning capital account . . . . . \$ 84,256.

Capital contributed during the year . . . . \$ \_\_\_\_\_

Current year increase (decrease) . . . . \$ 8,480.

Withdrawals and distributions . . . . . \$ 596.

Ending capital account . . . . . \$ 92,140.

Tax basis  GAAP  Section 704(b) book  
 Other (explain)

**M** Did the partner contribute property with a built-in gain or loss?  
 Yes  No  
If 'Yes', attach statement (see instructions)

Part III Partner's Share of Current Year Income, Deductions, Credits, and Other Items			
1	Ordinary business income (loss)	15	Credits
2	Net rental real estate income (loss) 8,480.		
3	Other net rental income (loss)	16	Foreign transactions
4	Guaranteed payments		
5	Interest income		
6a	Ordinary dividends		
6b	Qualified dividends		
7	Royalties		
8	Net short-term capital gain (loss)		
9a	Net long-term capital gain (loss)	17	Alternative minimum tax (AMT) items
9b	Collectibles (28%) gain (loss)		
9c	Unrecaptured section 1250 gain		
10	Net section 1231 gain (loss)	18	Tax-exempt income and nondeductible expenses
11	Other income (loss)		
12	Section 179 deduction	19	Distributions A 596.
13	Other deductions	20	Other information
14	Self-employment earnings (loss)		

\*See attached statement for additional information.

FOR USE ONLY

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

	Report on	Code	Report on
<b>1 Ordinary business income (loss).</b> Determine whether the income (loss) is passive or nonpassive and enter on your return as follows.			
Passive loss	See the Partner's Instructions	<b>L</b> Empowerment zone and renewal community employment credit	See the Partner's Instructions
Passive income	Schedule E, line 26, column (g)	<b>M</b> Credit for increasing research activities	
Nonpassive loss	Schedule E, line 26, column (h)	<b>N</b> Credit for employer social security and Medicare taxes	See the Partner's Instructions
Nonpassive income	Schedule E, line 28, column (j)	<b>O</b> Backup withholding	
<b>2 Net rental real estate income (loss)</b>	See the Partner's Instructions	<b>P</b> Other credits	
<b>3 Other net rental income (loss)</b>		<b>16 Foreign transactions</b>	
Net income	Schedule E, line 28, column (g)	<b>A</b> Name of country or U.S. possession	Form 1116, Part I
Net loss	See the Partner's Instructions	<b>B</b> Gross income from all sources	
<b>4 Guaranteed payments</b>	Schedule E, line 28, column (j)	<b>C</b> Gross income sourced at partner level	Foreign gross income sourced at partnership level
<b>5 Interest income</b>	Form 1040, line 8a	<b>D</b> Passive category	
<b>6 a Ordinary dividends</b>	Form 1040, line 9a	<b>E</b> General category	Form 1116, Part I
<b>6 b Qualified dividends</b>	Form 1040, line 9b	<b>F</b> Other	
<b>7 Royalties</b>	Schedule E, line 4	<i>Deductions allocated and apportioned at partner level</i>	
<b>8 Net short-term capital gain (loss)</b>	Schedule D, line 5	<b>G</b> Interest expense	Form 1116, Part I
<b>9 a Net long-term capital gain (loss)</b>	Schedule D, line 12	<b>H</b> Other	Form 1116, Part I
<b>9 b Collectibles (28%) gain (loss)</b>	28% Rate Gain Worksheet, line 4 (Schedule D Instructions)	<i>Deductions allocated and apportioned at partnership level to foreign source income</i>	
<b>9 c Unrecaptured section 1250 gain</b>	See the Partner's Instructions	<b>I</b> Passive category	Form 1116, Part I
<b>10 Net section 1231 gain (loss)</b>	See the Partner's Instructions	<b>J</b> General category	
<b>11 Other Income (loss)</b>		<b>K</b> Other	
<b>Code</b>		<i>Other information</i>	
<b>A</b> Other portfolio income (loss)	See the Partner's Instructions	<b>L</b> Total foreign taxes paid	Form 1116, Part II
<b>B</b> Involuntary conversions	See the Partner's Instructions	<b>M</b> Total foreign taxes accrued	Form 1116, Part II
<b>C</b> Section 1256 contracts and straddles	Form 6781, line 1.	<b>N</b> Reduction in taxes available for credit	Form 1116, line 12
<b>D</b> Mining exploration costs recapture	See Pub 535	<b>O</b> Foreign trading gross receipts	Form 8879
<b>E</b> Cancellation of debt	Form 1040, line 21 or Form 982	<b>P</b> Extraterritorial income exclusion	Form 8873
<b>F</b> Other Income (loss)	See the Partner's Instructions	<b>Q</b> Other foreign transactions	See the Partner's Instructions
<b>12 Section 179 deduction</b>	See the Partner's Instructions	<b>17 Alternative minimum tax (AMT) items</b>	
<b>13 Other deductions</b>		<b>A</b> Post-1986 depreciation adjustment	See the Partner's Instructions and the Instructions for Form 6251
<b>A</b> Cash contributions (50%)	See the Partner's Instructions	<b>B</b> Adjusted gain or loss	
<b>B</b> Cash contributions (30%)			
<b>C</b> Noncash contributions (50%)			
<b>D</b> Noncash contributions (30%)			
<b>E</b> Capital gain property to a 50% organization (30%)			
<b>F</b> Capital gain property (20%)			
<b>G</b> Contributions (100%)		<b>18 Tax-exempt income and nondeductible expenses</b>	
<b>H</b> Investment interest expense	Form 4952, line 1	<b>A</b> Tax-exempt interest income	Form 1040, line 8b
<b>I</b> Deductions — royalty income	Schedule E, line 19	<b>B</b> Other tax-exempt income	See the Partner's Instructions
<b>J</b> Section 59(e)(2) expenditures	See the Partner's Instructions	<b>C</b> Nondeductible expenses	See the Partner's Instructions
<b>K</b> Deductions — portfolio (2% floor)	Schedule A, line 23	<b>19 Distributions</b>	
<b>L</b> Deductions — portfolio (other)	Schedule A, line 28	<b>A</b> Cash and marketable securities	See the Partner's Instructions
<b>M</b> Amounts paid for medical insurance	Schedule A, line 1 or Form 1040, line 29	<b>B</b> Distribution subject to section 737	
<b>N</b> Educational assistance benefits	See the Partner's Instructions	<b>C</b> Other property	
<b>O</b> Dependent care benefits	Form 2441, line 12	<b>20 Other information</b>	
<b>P</b> Preproductive period expenses	See the Partner's Instructions	<b>A</b> Investment income	Form 4952, line 4a
<b>Q</b> Commercial revitalization deduction from rental real estate activities	See Form 8582 Instructions	<b>B</b> Investment expenses	Form 4952, line 5
<b>R</b> Pensions and IRAs	See the Partner's Instructions	<b>C</b> Fuel tax credit information	Form 4136
<b>S</b> Reforestation expense deduction	See the Partner's Instructions	<b>D</b> Qualified rehabilitation expenditures (other than rental real estate)	See the Partner's Instructions
<b>T</b> Domestic production activities information	See Form 8903 Instructions	<b>E</b> Basis of energy property	See the Partner's Instructions
<b>U</b> Qualified production activities income	Form 8903, line 7b	<b>F</b> Recapture of low-income housing credit (section 42(j)(5))	Form 8611, line 8
<b>V</b> Employer's Form W-2 wages	Form 8903, line 17	<b>G</b> Recapture of low-income housing credit (other)	Form 8611, line 8
<b>W</b> Other deductions	See the Partner's Instructions	<b>H</b> Recapture of investment credit	See Form 4255
<b>14 Self-employment earnings (loss)</b>		<b>I</b> Recapture of other credits	See the Partner's Instructions
<i>Note. If you have a section 179 deduction or any partner-level deductions, see the Partner's Instructions before completing Schedule SE.</i>			
<b>A</b> Net earnings (loss) from self-employment	Schedule SE, Section A or B	<b>J</b> Look-back interest — completed long-term contracts	See Form 8697
<b>B</b> Gross farming or fishing income	See the Partner's Instructions	<b>K</b> Look-back interest — income forecast method	See Form 8666
<b>C</b> Gross non-farm income	See the Partner's Instructions	<b>L</b> Dispositions of property with section 179 deductions	See the Partner's Instructions
<b>15 Credits</b>		<b>M</b> Recapture of section 179 deduction	
<b>A</b> Low-income housing credit (section 42(j)(5)) from pre-2008 buildings	See the Partner's Instructions	<b>N</b> Interest expense for corporate partners	
<b>B</b> Low-income housing credit (other) from pre-2008 buildings			
<b>C</b> Low-income housing credit (section 42(j)(5)) from post-2007 buildings			
<b>D</b> Low-income housing credit (other) from post-2007 buildings			
<b>E</b> Qualified rehabilitation expenditures (rental real estate)			
<b>F</b> Other rental real estate credits		<b>O</b> Section 453(i)(3) information	
<b>G</b> Other rental credits		<b>P</b> Section 453A(c) information	
<b>H</b> Undistributed capital gains credit	Form 1040, line 71; check box a	<b>Q</b> Section 1260(b) information	
<b>I</b> Biofuel producer credit	See the Partner's Instructions	<b>R</b> Interest allocable to production expenditures	
<b>J</b> Work opportunity credit			
<b>K</b> Disabled access credit			
		<b>S</b> CCF nonqualified withdrawals	
		<b>T</b> Depletion information — oil and gas	
		<b>U</b> Amortization of reforestation costs	
		<b>V</b> Unrelated business taxable income	
		<b>W</b> Precontribution gain (loss)	
		<b>X</b> Section 103(i) information	
		<b>Y</b> Net investment income	
		<b>Z</b> Other information	

Sch K-1, Credit Details

Sch K-1, Supporting Details

**Form 8825 Rental Income/Loss Details  
For Reporting Purposes**

<u>Rental Land - NC</u>	
<u>Property type: 4 Commercial</u>	<u>5,362.</u>
<u>Rental Land - TN</u>	
<u>Property type: 4 Commercial</u>	<u>3,118.</u>

Document Page 22 of 32  
2013 Partnership Income Tax Return

D-403(50)

10-24-13

North Carolina Department of Revenue

For calendar year 2013 or	<input type="checkbox"/>	fiscal year beginning	13	and ending
RUSHING RIVERS LLC		Federal Employer ID Number: 454115667		
2519 WALKER AVE		If LLC, Secretary of State JD Number: 1234581		
GREENSBORO		NC 27403		

Filing Information:  Initial Return  Final Return  Entity is LLC  NC-NPA Forms attached  
 Amended Return  Entity is Partnership  Entity has Nonresident Owners  NC-478 is attached

Enter the amount of bonus depreciation from Schedule NC K-1, Line 2a for all nonresident partners 0

RUSH	2519	27403	IR	N	AR	N	FR	N	PA	N	LLC	Y	NO	Y	NPA	N
RUSHING RIVERS LLC											454115667	1234581	NC	N		
2519 WALKER AVE											GREENSBORO	NC	27403			
01	16959	04	0	12	187	18B	0									
02	0	06	0	13	0	19	187									
		08	10724	14	0	20	0									
		09	6235	15	0	TN										
		10	187	17	187	PN	3362744412									
		11	0	18A	0	BD	0									



Part 1. Computation of Income Tax Due or Refund			
1	Enter the total income or loss from Form 1065	16959	12 Net tax due for nonresident partners 187
2	Guaranteed payments to partners	0	13 Tax paid with extension 0
3	Line 1 minus Line 2	16959	14 Other prepayments of tax 0
4	Additions to income	0	15 Tax paid by other partnerships or by S Corporations and tax withheld from personal services income 0
5	Add Lines 3 and 4	16959	16 Add Lines 13 through 15 0
6	Deductions from income	0	17 Total tax due for nonresident partners 187
7	Line 5 minus Line 6	16959	18 a. Penalties 0
8	Net distributive partnership income apportioned to N.C.	10724	b. Interest 0
9	Net distributive partnership income solely from business activities in N.C.	6235	c. Add Lines 18a and 18b and enter total 0
10	Tax due for nonresident partners	187	19 Total Due for nonresident partners 187
11	Tax credits allocated to nonresident partners	0	20 Amount to be Refunded 0

Sign Return Below	Refund Due	0	<input checked="" type="checkbox"/>	Payment Due	187
I certify that, to the best of my knowledge, this return is accurate and complete.			If prepared by a person other than the managing partner, this certification is based on all information of which the preparer has any knowledge.		
Signature of Managing Partner		Date	Signature of Preparer Other than Managing Partner		Date
					09-10-2014
			1009 W MARKET ST		
			GREENSBORO		NC 27401
Telephone Number (Area code required)		Address			
<input type="checkbox"/> If entity is an LLC and it converted to an LLC during the tax year, enter entity name prior to conversion:		(336) 274-4412			
		Preparer's Telephone Number (Area code required)			
NCPAD101 11/25/13					
MAIL TO: North Carolina Department of Revenue, P.O. Box 25000, Raleigh, North Carolina 27640-0540					

**Part 2. Apportionment % for Partnerships with at least One Nonresident Partner Operating in N.C. and in at least One Other State**

	1. Within North Carolina		2. Total Everywhere		
	(a) Beginning Period	(b) Ending Period	(a) Beginning Period	(b) Ending Period	
1 Land	0	0	0	0	
2 Buildings	0	0	0	0	
3 Inventories	0	0	0	0	
4 Other property	0	0	0	0	
5 Total	0	0	0	0	
6 Average value of property		0		0	
7 Rented Property		0		0	<b>Factor</b>
8 Property Factor		0		0	0.0000 %
9 Gross Payroll		0		0	
10 Compensation of general executive officers		0		0	
11 Payroll Factor		0		0	0.0000 %
12 Sales Factor		0		0	0.0000 %
13 Sales Factor					0.0000 %
14 Total of Factors					0.0000 %
15 N.C. Apportionment Percentage					0.0000 %

**Part 3. A. Partners' Shares of Income, Adjustments, Tax Credits, and Other Items**

**B. Computation of North Carolina Taxable Income for Nonresident Partners**

**C. Computation of Tax Due for Nonresident Partners on Whose Behalf the Partnership Pays the Tax**

A	Partner 1	Partner 2	Partner 3
1 Identifying Number	241047337	241478009	
2 Name	DEBORAH W CALHO	MATTHEW P MOSES	
3 Address	2519 WALKER AVE GREENSBOR NC	2 JONES BRANCH ERWIN TN	
4 Partner's share percentage	50.0000 %	50.0000 %	0.0000 %
5 Type of partner	INDIVIDUAL	INDIVIDUAL	
6 Additions to Income (loss)	0	0	0
7 Deductions from income (loss)	0	0	0
8 Share of Tax Credits	0	0	0
<b>B</b> 9 Guaranteed payments to nonresident partners	0	0	0
10 Percentage from Line 4 times amount on Part 1, Line 8	0	5362	0
11 Add Lines 9 and 10	0	5362	0
12 Apportionment percentage from Part 2, Line 15	0.0000 %	0.0000 %	0.0000 %
13 Multiply Line 11 by Line 12	0	0	0
14 Guaranteed payments to nonresident partners	0	0	0
15 Percentage from Line 4 times amount on Part 1, Line 9	0	3118	0
16 Separately stated items of income of nonresident partners	0	0	0
17 N.C. taxable income	0	3118	0
<b>C</b> 18 Tax Due	0	187	0
19 Tax credits allocated to nonresident partners	0	0	0
20 Net Tax Due	0	187	0

D-403 2013 Page 3 (50) Last Name (First 10 Characters) RUSHING RI Federal Employer ID Number 454115667

Part 4. North Carolina Adjustments to Income

Additions to Income

1	Interest income from obligations of states other than N.C.	0
2	State, local or foreign income taxes deducted on the federal return	0
3	Adjustment for Bonus Depreciation	
4	Other additions to income	0
5	Total additions to income	0

Deductions from Income

6	Interest income from obligations of the United States or United States' possessions	0
7	State, local, or foreign income tax refunds reported as income on federal return	0
8	Adjustments for bonus depreciation added back in 2008, 2009, 2010, 2011, and 2012	
	a 2008	0
	b 2009	0
	c 2010	
	d 2011	
	e 2012	
	f Add Lines 8a, 8b, 8c, 8d, and 8e and enter on Line 8f	0
9	Other deductions from income	0
10	Total deductions from income	0

Tax Rate Schedule:

If the amount of each nonresident partner's share of N.C. taxable income (from Part 3, Line 17) is more than	\$ 0	But not	\$ 12,750	6% of the taxable income
	\$ 12,750	over	\$ 60,000	The tax is \$765 + 7% of the amount over \$12,750
	\$ 60,000			\$ 4,072.50 + 7.75% of the amount over \$60,000



NC K-1 (50)

(D-403)

10-23-13

Document Page 25 of 32

2013 Partner's Share of  
N.C. Income, Adjustments, and Credits

North Carolina Department of Revenue

For calendar year 2013 or fiscal year beginning and ending

Partner's Identifying Number  
241047337

Federal Employer ID Number  
454115667

Partner's Name, Address, and Zip Code  
DEBORAH W CALHOUN  
2519 WALKER AVE  
GREENSBORO NC 27403

Partnership's Name, Address, and Zip Code  
RUSHING RIVERS LLC  
2519 WALKER AVE  
GREENSBORO NC 27403

Partnership's Pro Rata Share Items	Amount	Individuals Filing Form D-400 Enter Amount on:
<b>All Partners</b>		
1 Share of partnership income (loss)	8479	
2 Additions to income (loss)		
a Addition for bonus depreciation		Page 2, Line 35
b Other additions to income (loss)	0	Page 2, Line 38
3 Deductions from income (loss)		
a Deduction for bonus depreciation	0	Page 2, Line 46
b Other deductions from income (loss)		Page 2, Line 51
4 Share of tax credits	0	Form D-400TC
5 Share of tax withheld from nonwage compensation paid for personal services performed in N.C.	0	Page 2, Line 23
<b>Nonresidents Only</b>		
6 Nonresident's share of N.C. taxable income (loss)	0	Page 2, Line 53
7 Nonresident's share of net tax paid by the manager of the partnership	0	Page 2, Line 24c

NC K-1 (50)

(D-403)

10-23-13

Document Page 26 of 32

2013 Partner's Share of  
N.C. Income, Adjustments, and Credits

North Carolina Department of Revenue

For calendar year 2013 or fiscal year beginning and ending

Partner's Identifying Number  
241478009

Federal Employer ID Number  
454115667

Partner's Name, Address, and Zip Code  
MATTHEW P MOSES  
2 JONES BRANCH RD  
ERWIN TN 37650

Partnership's Name, Address, and Zip Code  
RUSHING RIVERS LLC  
2519 WALKER AVE  
GREENSBORO NC 27403

Partnership's Pro Rata Share Items	Amount	Individuals Filing Form D-400 Enter Amount on:
<b>All Partners</b>		
1 Share of partnership income (loss)	8480	
2 Additions to income (loss)		
a Addition for bonus depreciation		Page 2, Line 35
b Other additions to income (loss)	0	Page 2, Line 38
3 Deductions from income (loss)		
a Deduction for bonus depreciation	0	Page 2, Line 46
b Other deductions from income (loss)		Page 2, Line 51
4 Share of tax credits	0	Form D-400TC
5 Share of tax withheld from nonwage compensation paid for personal services performed in N.C.	0	Page 2, Line 23
<b>Nonresidents Only</b>		
6 Nonresident's share of N.C. taxable income (loss)	3118	Page 2, Line 53
7 Nonresident's share of net tax paid by the manager of the partnership	187	Page 2, Line 24c



TAXABLE YEAR 12-31-2013	TAXPAYER NAME Rushing Rivers, LLC	ACCOUNT NO./FEIN/SSN 45-4115667
----------------------------	--------------------------------------	------------------------------------

**Schedule D – SCHEDULE OF CREDITS**

1	Gross Premiums tax credit (cannot exceed Schedule C, Line 8)	1	
2	Tennessee Income Tax (cannot exceed Schedule B, Line 5)	2	
3	Green Energy Tax Credit	3	
4	Carbon Charge Credit	4	
5	Brownfield Property Credit	5	
6	Qualified Headquarters Relocation Expense Credit	6	
7	Industrial Machinery Credit from Schedule T, Line 11	7	
8	Jobs Tax Credit from Schedule X, Line 16	8	
9	Jobs Tax Credit computed in accordance with Tenn. Code Ann. Section 67-4-2109(b)(2) from Schedule X, Line 21	9	
10	Total Credit – Add lines 1 through 9 (Enter here and on Schedule C, Line 9)	10	

**Schedule E – SCHEDULE OF PAYMENTS**

1	Overpayment from previous year if available	1	
2	First quarterly estimated payment	2	
3	Second quarterly estimated payment	3	
4	Third quarterly estimated payment	4	
5	Fourth quarterly estimated payment	5	
6	Extension payment	6	
7	Total payments – Add lines 1 through 6 (Enter here and on Schedule C, Line 11)	7	

**COMPUTATION OF FRANCHISE TAX**

**Schedule F1 – NON-CONSOLIDATED NET WORTH**

1	Net Worth (total assets less total liabilities)	1	184278
2	Indebtedness to or guaranteed by parent or affiliated corporation (Cannot be a deduction)	2	
3	Total lines 1 and 2	3	184278
4	Ratio (Schedules N, O, P, or R if applicable or 100%)	4	71.0525 %
5	Total – Line 3 multiplied by Line 4 (Enter here and on Schedule A, Line 1)	5	130934

**Schedule F2 – CONSOLIDATED NET WORTH**

1	Consolidated Net Worth (total assets less total liabilities)	1	
2	Ratio (Schedule 170NC or 170SF)	2	%
3	Total – Line 1 multiplied by Line 2 (Enter here and on Schedule A, Line 1)	3	

**NOTE:** Schedule F2 is to be completed *only* if the consolidated net worth election has been made.

**Schedule G – DETERMINATION OF REAL AND TANGIBLE PROPERTY**

BOOK VALUE OF PROPERTY OWNED – Cost less accumulated depreciation				In Tennessee
1	Land	1		
2	Buildings, leaseholds, and Improvements	2		
3	Machinery, equipment, furniture, and fixtures	3		
4	Automobiles and trucks	4		
5	Prepaid supplies and other tangible personal property	5		
6	Share of partnership real and tangible property provided that the partnership does not file a return	6		
7	Inventories and work in progress	7		
a	Deduct exempt inventory in excess of \$30 million (Tenn. Code Ann. Section 67-4-2108(a)(6)(B))	7 a		
8 a	Deduct value of certified pollution control equipment (include copy of certificate (Tenn. Code Ann. Section 67-5-604)) and	8		
b	equipment used to produce electricity at a Certified Green Energy Production Facility	8		
9	Deduct exempt required capital investments (Tenn. Code Ann. Section 67-4-2108(a)(6)(G))	9		
10	SUBTOTAL – Add lines 1 through 7, less Line 7a through Line 9	10		
Rental Value of Property Used but not Owned				(C)
Net Annual Rental Paid for:				
11	Real property	x8	11	
12	Machinery and equipment used in manufacturing and processing	x3	12	
13	Furniture, office machinery, and equipment	x2	13	
14	Delivery or mobile equipment	x1	14	
15	TENNESSEE TOTAL – Add lines 10 - 14 (Enter total here and on Schedule A, Line 2)	15		

TAXABLE YEAR 12-31-2013	TAXPAYER NAME Rushing Rivers, LLC	ACCOUNT NO./FEIN/SSN 45-4115667
----------------------------	--------------------------------------	------------------------------------

**COMPUTATION OF EXCISE TAX**

**Schedule J-1 – COMPUTATION OF NET EARNINGS FOR ENTITIES TREATED AS PARTNERSHIPS**

1	Ordinary Income or Loss from Federal Form 1065, Line 22 . . . . .	1	
<b>Additions:</b>			
2	Additional income items specifically allocated to partners, including guaranteed payments to partners (Federal 1065 – Schedule K) . . . . .	2	16959
3	Any net loss or expense received from a 'pass-through' entity subject to the excise tax, or any net loss or expense distributed to a publicly traded REIT. Include schedule of entities and FEINs . . . . .	3	
4	Total – Add lines 1, 2, and 3 . . . . .	4	16959
<b>Deductions:</b>			
5	Additional expense items specifically allocated to partners (Federal 1065 – Schedule K) . . . . .	5	
6	Amount subject to self-employment taxes distributable or paid to each partner or member net of medical insurance payments previously deducted to determine Ordinary Income (Loss) on Form 1065 (If negative, enter zero) (Include on Schedule K, Line 3) . . . . .	6	
7	Amount of contribution, not previously deducted, to qualified pension or benefit plans of any partner or member, including all IRC 401 plans (Include on Schedule K, Line 3) . . . . .	7	
8	Any net gain or income received from a 'pass-through' entity subject to the excise tax, or any net gain or income distributed to a publicly traded REIT. Include schedule of entities and FEINs . . . . .	8	
9	Total deductions – Add lines 5 through 8 . . . . .	9	
10	Total – Line 4 less Line 9 (Enter here and on Schedule J, Line 1) . . . . .	10	16959

**Schedule J-2 – COMPUTATION OF NET EARNINGS FOR A SINGLE MEMBER LLC FILING AS AN INDIVIDUAL**

<b>Additions:</b>			
1	Business Income from Form 1040, Schedule C . . . . .	1	
2	Business Income from Form 1040, Schedule D . . . . .	2	
3	Business Income from Form 1040, Schedule E . . . . .	3	
4	Business Income from Form 1040, Schedule F . . . . .	4	
5	Business Income from Form 4797 . . . . .	5	
6	Other: Form _____, Schedule _____ . . . . .	6	
7	Any net loss or expense received from a 'pass-through' entity subject to the excise tax . . . . .	7	
8	Total – Add lines 1 through 7 . . . . .	8	
<b>Deductions:</b>			
9	Amount subject to self-employment taxes distributable or paid to the single member (If negative, enter zero) (Include on Schedule K, Line 3) . . . . .	9	
10	Any net gain or income received from a 'pass-through' entity subject to the excise tax . . . . .	10	
11	Total deductions – Add lines 9 and 10 . . . . .	11	
12	Total – Line 8 less Line 11 (Enter here and on Schedule J, Line 1) . . . . .	12	

**Schedule J-3 – COMPUTATION OF NET EARNINGS FOR ENTITIES TREATED AS SUBCHAPTER S CORPORATIONS**

1	Ordinary Income or Loss from Federal Form 1120S, Line 21 . . . . .	1	
<b>Additions:</b>			
2	Income items to extent includable in federal income were it not for 'S' status election (Fed 1120S – Schedule K) . . . . .	2	
3	Any net loss or expense received from a 'pass-through' entity subject to the excise tax . . . . .	3	
4	Total – Add lines 1, 2 and 3 . . . . .	4	
<b>Deductions:</b>			
5	Expense items to extent includable in federal expenses were it not for 'S' status election (Fed 1120S – Schedule K) . . . . .	5	
6	Any net gain or income received from a 'pass-through' entity subject to the excise tax . . . . .	6	
7	Total deductions – Add lines 5 and 6 . . . . .	7	
8	Total – Line 4 less Line 7 (Enter here and on Schedule J, Line 1) . . . . .	8	

**Schedule J-4 – COMPUTATION OF NET EARNINGS FOR ENTITIES TREATED AS CORPORATIONS AND 'OTHER' ENTITIES**

Enter the amount of income (loss) from the applicable federal return to Schedule J, Line 1

1	Federal Form 1120 – Line 28 (Taxable income or loss before net operating loss deduction and special deductions) . . . . .	1	
2	Federal Form 990-T, Line 30 (unrelated business taxable income) . . . . .	2	
3	Other: Form _____, Schedule _____ . . . . .	3	
<b>Additions:</b>			
4	Any net loss or expense received from a 'pass-through' entity subject to the excise tax . . . . .	4	
<b>Deductions:</b>			
5	Any net gain or income received from a 'pass-through' entity subject to the excise tax . . . . .	5	
6	Total – Lines 1 through 4 less Line 5 (Enter here and on Schedule J, Line 1) . . . . .	6	

TAXABLE YEAR 12-31-2013	TAXPAYER NAME Rushing Rivers, LLC	ACCOUNT NO./FEIN/SSN 45-4115667
----------------------------	--------------------------------------	------------------------------------

**Schedule J – COMPUTATION OF NET EARNINGS SUBJECT TO EXCISE TAX**

1	Federal income or loss (Enter amount from Schedule J-1, J-2, J-3, or J-4)	1	16959
<b>ADDITIONS:</b>			
2	Intangible Expenses paid, accrued, or incurred to an affiliated business entity or entities deducted for federal income tax purposes	2	
3	Any depreciation under the provisions of IRC Section 168 not permitted for excise tax purposes due to Tennessee permanently decoupling from federal bonus depreciation and any expense/depreciation deducted as a result of 'safe harbor' lease elections	3	
4	Any deduction for domestic production activities under the provisions of IRC Section 199	4	
5	Any gain on the sale of an asset sold within twelve months after the date of distribution to a nontaxable entity	5	
6	Tennessee excise tax expense (to the extent reported for federal purposes)	6	
7	Gross premiums tax deducted in determining federal income and used as an excise tax credit	7	
8	Interest income on obligations of states and their political subdivisions, less allowable amortization	8	
9	Depletion not based on actual recovery of cost	9	
10	Contribution carryover from prior period(s)	10	
11	Capital gains offset by capital loss carryover or carryback	11	
12	Excess fair market value over book value of property donated	12	
13	Excess rent to/from an affiliate. A taxpayer paying excess rent enters a positive amount on this line. A taxpayer receiving excess rent, to the extent added back to net earnings by its affiliate, enters a negative amount on this line	13	
14	Total additions – Add lines 2 through 13	14	
<b>DEDUCTIONS:</b>			
15	Any depreciation under the provisions of IRC Section 168 permitted for excise tax purposes due to Tennessee permanently decoupling from federal bonus depreciation	15	
16	Any excess gain (or loss) from the basis adjustment resulting from Tennessee permanently decoupling from federal bonus depreciation	16	
17	Any loss on the sale of an asset sold within twelve months after the date of distribution to a nontaxable entity	17	
18	Dividends received from corporations, at least 80% owned	18	
19	Contributions in excess of amount allowed by federal government	19	
20	Donations to Qualified Public School Support Groups and nonprofit organizations	20	
21	Portion of current year's capital loss not included in federal taxable income	21	
22	Any expense other than income taxes, not deducted in determining federal taxable income for which a credit against the federal income tax is allowable	22	
23	Any income included for federal tax purposes and any depreciation or other expense that could have been deducted for 'safe harbor' lease elections	23	
24	Nonbusiness earnings – Schedule M, Line 8	24	
25	Intangible Expenses paid, accrued, or incurred to an affiliated entity or entities. The applicable box must be checked in order to take this deduction (check all that apply):		
	<input type="checkbox"/> A) Form IE-N; Attached		
	<input type="checkbox"/> B) Form IE-A; Previously Submitted, Approval/Denial Pending		
	<input type="checkbox"/> C) Form IE-A; Previously Submitted and Approved		
25		25	
26	Intangible income from an affiliated business entity or entities if the corresponding intangible expenses have not been deducted by the affiliate(s) under Tenn. Code Ann. Section 67-4-2006(b)(2)(N)	26	
27	TOTAL deductions – Add lines 15 through 26	27	
<b>COMPUTATION OF TAXABLE INCOME</b>			
28	Total Business Income (Loss) – Add lines 1 and 14, less Line 27 (If loss, complete Schedule K)	28	16959
29	Apportionment Ratio (Schedules N, O, P, or R if applicable or 100%)	29	71.0525 %
30	Apportioned business income (Loss) (Line 28 multiplied by Line 29)	30	12050
31	Add: Nonbusiness earnings directly allocated to Tennessee (From Schedule M, Line 9)	31	
32	Deduct: Loss carryover from prior years (From Schedule U)	32	
33	Subject to excise tax ( 6.5 %) (Line 30 plus Line 31, less Line 32) (enter here and on Schedule B, Line 4)	33	12050

**Schedule K – DETERMINATION OF LOSS CARRYOVER AVAILABLE – See Rule 1320-6-1-.24 of Departmental Rules and Regulations**

1	Net loss from Schedule J, Line 28	1	
<b>ADD:</b>			
2	Amounts reported on Schedule J, lines 18 and 24	2	
3	Amounts reported on Schedule J-1, lines 6 and 7, and Schedule J-2, Line 9	3	
4	Reduced loss – Add lines 1 through 3 (if net amount is positive, enter '0')	4	
5	Excise Tax ratio (Schedules N, O, P, or R if applicable or 100%)	5	0%
6	Current year loss carryover available (Line 4 multiplied by Line 5)	6	

1030



**ALLOCATION AND APPORTIONMENT SCHEDULES**

**SCHEDULES M THROUGH R**  
 (FORM FAE 170)

TAXABLE YEAR	TAXPAYER NAME	ACCOUNT NUMBER/FEIN/SSN
12/31/13	Rushing Rivers, LLC	321903857

**IMPORTANT: IF YOU USE THIS FORM, ATTACH IT TO YOUR FRANCHISE, EXCISE TAX RETURN.**  
 Allocation and apportionment schedules may be used only by taxpayers doing business outside the state of Tennessee within the meaning of Tenn. Code Ann. Sections 67-4-2010 and 67-4-2110. The burden is upon the taxpayer to show that the taxpayer has the right to apportion.

**SCHEDULE M – Schedule of Nonbusiness Earnings**

Note – If all earnings are business earnings as defined below, do not complete this schedule. Any nonbusiness earnings, less related expenses, are subject to direct allocation and should be reported in this schedule.

Definitions: 'Business Earnings' means (1) earnings arising from transactions and activity in the regular course of the taxpayer's trade or business or (2) earnings from tangible and intangible property if the acquisition, use, management, or disposition of the property constitutes an integral part of the taxpayer's regular trade or business operations. In essence, earnings which arise from the conduct of the trade or trades or business operations of a taxpayer are business earnings, and the taxpayer must show by clear and cogent evidence that particular earnings are classifiable as nonbusiness earnings. A taxpayer may have more than one regular trade or business in determining whether income is business earnings.

'Nonbusiness Earnings' means all earnings other than business earnings.

Description (If further description is necessary see below)	Gross Amounts	*Less Related Expenses	Net Amounts	Net Amounts Allocated Directly to Tennessee
1				
2				
3				
4				
5				
6				
7				
8 Total nonbusiness earnings (Transfer to Schedule J, Line 24) . . . . .				
9 Nonbusiness earnings allocated directly (Transfer to Schedule J, Line 31) . . . . .				

If necessary, describe source of nonbusiness earnings and explain why such earnings do not constitute business earnings as defined above. Enumerate these items to correspond with items listed above.

\*As a general rule, the allowable deductions for expenses of a taxpayer are related to both business and nonbusiness earnings. Such items as administrative costs, taxes, insurance, repairs, maintenance, and depreciation are to be considered. In the absence of evidence to the contrary, it is assumed that the expenses related to nonbusiness rental earnings will be an amount equal to 50 percent of such earnings and that expenses related to other nonbusiness earnings will be an amount equal to 5 percent of such earnings. (See regulation 1320-6-1.23(3))

TAXABLE YEAR 12/31/2013	TAXPAYER NAME Rushing Rivers, LLC	ACCOUNT NUMBER/FEIN/SSN 321903857
----------------------------	--------------------------------------	--------------------------------------

**APPORTIONMENT SCHEDULES FOR TAXPAYERS DOING BUSINESS OUTSIDE THE STATE OF TENNESSEE**  
Franchise and excise tax ratios are obtained by using the arithmetical average of the following ratios. If a factor's denominator (everywhere value) is zero, that factor is to be eliminated entirely and the average is to be computed from the remaining factor or factors.

**SCHEDULE N – APPORTIONMENT – STANDARD (Manufacturers, retailers, wholesalers, etc)**

Property	In Tennessee		Total Everywhere	
	a Beginning of Taxable year	b End of Taxable year	a Beginning of Taxable year	b End of Taxable year
<b>NOTE: USE ORIGINAL COST OF ASSETS</b>				
1 Land, buildings, leaseholds, and improvements	221,779.	221,779.	312,134.	312,134.
2 Machinery, equipment, furniture, and fixtures				
3 Automobiles and trucks				
4 Inventories and work in progress				
5 Prepaid supplies and other property				
6 Share of partnership property (if partnership is not taxable)				
7 Excise tax total (Lines 1 through 6)	a 221,779.	b 221,779.	a 312,134.	b 312,134.
8 Less exempt inventory (see Tenn. Code Ann. Section 67-4-211(b)(1))				
9 Franchise tax total (Line 7 minus Line 8)	a 221,779.	b 221,779.	a 312,134.	b 312,134.
10 Excise tax average value (add Line 7a and b, divide by 2)		221,779.		312,134.
11 Franchise tax average value (add Line 9a and b, divide by 2)		221,779.		312,134.
12 Add: Rented property (rent paid X 8)				
<b>NOTE: Double Weighted Sales Factor</b>	a In Tennessee	b Total Everywhere	c Franchise Ratio (Column a divided by Column b)	d Excise Ratio (Column a divided by Column b)
13 Excise Tax property factor (Line 10 plus Line 12)	221,779.	312,134.		71.0525 %
14 Franchise Tax property factor (Line 11 plus Line 12)	221,779.	312,134.	71.0525 %	
15 Payroll factor			%	%
16 Sales factor – (Business Gross Receipts)			%	%
17 Total Ratios			71.0525 %	71.0525 %
18 Apportionment Ratio (Line 17 divided by 4) (Enter Franchise Ratio to Schedule F1, Line 4, Enter Excise ratio to Schedule J, Line 29)			71.0525 %	71.0525 %

**SCHEDULE O – APPORTIONMENT – COMMON CARRIERS (Railroads, motor carriers, pipelines and barges)**

	In Tennessee	Total Everywhere	Ratio
1 Total franchise mileage (odometer miles)			%
2 Tennessee intrastate receipts – Interstate gross receipts everywhere			%
3 Total Ratios			%
4 Apportionment Ratio (Line 3 divided by two; transfer ratio to Schedule F1, Line 4 and Schedule J, Line 29)			%

**SCHEDULE P – APPORTIONMENT – AIR CARRIERS**

	In Tennessee	Total Everywhere	Ratio
1 Originating revenue			%
2 Airmiles flown (Include in Tennessee column only airmiles flown on flights either originating from or ending in Tennessee or both)			%
3 Total Ratios			%
4 Apportionment Ratio (Line 3 divided by two; transfer ratio to Schedule F1, Line 4 and Schedule J, Line 29)			%

**SCHEDULE R – APPORTIONMENT – AIR EXPRESS CARRIERS**

	In Tennessee	Total Everywhere	Ratio
1 Originating revenue			%
2 Airmiles flown and groundmiles traveled (Include in Tennessee column only airmiles flown on flights either originating from or ending in Tennessee or both. Include only groundmiles traveled with respect to actual common carriage of persons or property for hire)			%
3 Total Ratios			%
4 Apportionment Ratio (Line 3 divided by two; transfer ratio to Schedule F1, Line 4 and Schedule J, Line 29)			%