

Fill in this information to identify your case:

United States Bankruptcy Court for the:

WESTERN DISTRICT OF TEXAS

Case number (if known) _____ Chapter 11

Check if this an amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

4/16

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). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name TPC Family Medicine and Urgent Care Clinic, PLLC

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) 45-2539631

4. Debtor's address	Principal place of business	Mailing address, if different from principal place of business
	<u>3107 TPC Parkway, Ste #102</u> <u>San Antonio, TX 78259</u> Number, Street, City, State & ZIP Code <u>Bexar</u> County	<u>c/o Christopher Montoya</u> <u>1218 Wilder Pond</u> <u>San Antonio, TX 78260</u> P.O. Box, Number, Street, City, State & ZIP Code <u>Location of principal assets, if different from principal place of business</u> Number, Street, City, State & ZIP Code

5. Debtor's website (URL) www.TPCFamilyMedicine.com

6. Type of debtor
 Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))
 Partnership (excluding LLP)
 Other. Specify: _____

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>.

6211

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 \$2,566,050 (amount subject to adjustment on 4/01/19 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.

If more than 2 cases, attach a separate list.

District _____	When _____	Case number _____
District _____	When _____	Case number _____

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?

- No
- Yes.

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

Debtor _____	Relationship _____
District _____	When _____ Case number, if known _____

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 to unsecured creditors.

14. Estimated number of creditors

- | | | |
|--|--|--|
| <input checked="" 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"/> 5001-10,000 | <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 checked="" 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 |

16. Estimated liabilities

- | | | |
|--|--|--|
| <input type="checkbox"/> \$0 - \$50,000 | <input checked="" 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 TPC Family Medicine and Urgent Care Clinic, PLLC
Name

Case number (if known) _____

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 August 8, 2018
MM / DD / YYYY

/s/ Christopher Montoya
Signature of authorized representative of debtor

Title Managing Member

Christopher Montoya
Printed name

18. Signature of attorney

/s/ H. Anthony Hervol
Signature of attorney for debtor

Date August 8, 2018
MM / DD / YYYY

H. Anthony Hervol
Printed name

Law Office of H. Anthony Hervol
Firm name

4414 Centerview Dr., Suite 200
San Antonio, TX 78228
Number, Street, City, State & ZIP Code

Contact phone (210) 522-9500 Email address hervol@sbcglobal.net

00784264
Bar number and State

Fill in this information to identify the case:

Debtor name TPC Family Medicine and Urgent Care Clinic, PLLC

United States Bankruptcy Court for the: WESTERN DISTRICT OF TEXAS

Case number (if known) _____

Check if this is an amended filing

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 August 8, 2018

X /s/ Christopher Montoya

Signature of individual signing on behalf of debtor

Christopher Montoya

Printed name

Managing Member

Position or relationship to debtor

Fill in this information to identify the case:

Debtor name **TPC Family Medicine and Urgent Care Clinic, PLLC**
 United States Bankruptcy Court for the: **WESTERN DISTRICT OF TEXAS**
 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 claim (for example, trade debts, bank loans, professional services, and government contracts)	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
24 Capital 31-10 37th Ave., Suite 202 Long Island City, NY 11101						\$142,545.26
Benjamin, Vana, Martinez. & Briggs, LLP 2161 NW Military Hwy, Suite 111 San Antonio, TX 78213		Service Fees				\$5,281.74
Can Capital 2015 Vaughn Rd, Ste 500 Kennesaw, GA 30144						\$76,540.00
Christopher Montoya 1218 Wilder Pond San Antonio, TX 78260		Loan to company				\$62,000.00
CR-FED, LLC 103 Biltmore, Suite 210 San Antonio, TX 78213		Interlocutory Judgment	Disputed			\$564,475.41
Direct Allergy LLC 5340 Fryling Road, Suite 205 Erie, PA 16510		Trade debt	Disputed			\$11,437.28
Internal Revenue Service Insolvency II, Stop 5026 AUS 300 E. 8th Steet Austin, TX 78701		2015 - 2018 taxes				\$250,521.94

Debtor **TPC Family Medicine and Urgent Care Clinic, PLLC**
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 claim (for example, trade debts, bank loans, professional services,	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
Jeff Scott 3580 Olde Moss Shertz, TX 78154						\$25,000.00
Jon Disrud Comerica Bank Building 13750 San Pedro, Ste 410 San Antonio, TX 78232		Attorney's Fees				\$5,000.00
Mission Medical 318 W. Nakoma San Antonio, TX 78216-2621		Trade debt	Disputed			\$1,165.37
Sanofi Pasteur, Inc. 12458 Collections Center Dr. Chicago, IL 60693		Trade debt				\$13,479.27
Texas Workforce Commission TWC Building- Bankruptcy 101 East 15th Street Austin, TX 78778		Unemployment taxes				\$9,140.32
TIAA Bank ITAA Commercial Finance, Inc. 10 Waterview Blvd. Parsippany, NJ 07054		Trade debt				\$1,542.60
TriZetto Provider Solutions 3300 Rider Trail South, 6th Floor Earth City, MO 63045		Trade debt				\$3,407.25

**United States Bankruptcy Court
Western District of Texas**

In re TPC Family Medicine and Urgent Care Clinic, PLLC
Debtor(s)

Case No. _____
Chapter 11

LIST OF EQUITY SECURITY HOLDERS

Following is the list of the Debtor's equity security holders which is prepared in accordance with rule 1007(a)(3) for filing in this Chapter 11 Case

Name and last known address or place of business of holder	Security Class	Number of Securities	Kind of Interest
Christopher Montoya 1218 Wilder Pond San Antonio, TX 78260			100% owner

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I, the **Managing Member** of the corporation named as the debtor in this case, declare under penalty of perjury that I have read the foregoing List of Equity Security Holders and that it is true and correct to the best of my information and belief.

Date August 8, 2018

Signature /s/ Christopher Montoya
Christopher Montoya

*Penalty for making a false statement of concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both.
18 U.S.C. §§ 152 and 3571.*

**United States Bankruptcy Court
Western District of Texas**

In re TPC Family Medicine and Urgent Care Clinic, PLLC Case No. _____
Debtor(s) Chapter 11

VERIFICATION OF CREDITOR MATRIX

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

Date: August 8, 2018

/s/ Christopher Montoya
Christopher Montoya/Managing Member
Signer/Title

United States Trustee
P.O. Box 1539
San Antonio, TX 78295-1539

24 Capital
31-10 37th Ave., Suite 202
Long Island City, NY 11101

Attorney General of the United States
Main Justice Building, Room 5111
10th and Constitution Ave., N.W.
Washington, DC 20530

Barnett & Garcia
Attorneys and Counselors at Law
3821 Juniper Trace, Suite 108
Austin, TX 78738

Benjamin, Vana, Martinez. &
Briggs, LLP
2161 NW Military Hwy, Suite 111
San Antonio, TX 78213

Bexar County Tax Assessor-Collector
P.O. Box 839950
San Antonio, TX 78283-3950

Can Capital
2015 Vaughn Rd, Ste 500
Kennesaw, GA 30144

Christopher Montoya
1218 Wilder Pond
San Antonio, TX 78260

CR-FED, LLC
103 Biltmore, Suite 210
San Antonio, TX 78213

Direct Allergy LLC
5340 Fryling Road, Suite 205
Erie, PA 16510

Foss Business Solutions
5001 Mayfield Road, Suite 303
Cleveland, OH 44124

Frost Bank
P.O. Box 1600
San Antonio, TX 78296

Internal Revenue Service
Insolvency II, Stop 5026 AUS
300 E. 8th Steet
Austin, TX 78701

Jeff Scott
3580 Olde Moss
Shertz, TX 78154

Jon Disrud
Comerica Bank Building
13750 San Pedro, Ste 410
San Antonio, TX 78232

Linebarger Goggan Blair & Sampson, LLP
Attn: Mr. Don Stecker
711 Navarro St., Suite 300
San Antonio, TX 78205

Mission Medical
318 W. Nakoma
San Antonio, TX 78216-2621

Ronald J. Shaw
Shaw Law, PLLC
4801 Broadway, Unit 91049
San Antonio, TX 78209-9095

Sanofi Pasteur, Inc.
12458 Collections Center Dr.
Chicago, IL 60693

Texas Workforce Commission
TWC Building- Bankruptcy
101 East 15th Street
Austin, TX 78778

TIAA Bank
ITAA Commercial Finance, Inc.
10 Waterview Blvd.
Parsippany, NJ 07054

TriZetto Provider Solutions
3300 Rider Trail South, 6th Floor
Earth City, MO 63045

United States Attorney/IRS
601 N.W. Loop 410, Suite 600
San Antonio, TX 78216

Vital Recovery Services, LLC
P.O. Box 923747
Norcross, GA 30010-3747

**United States Bankruptcy Court
Western District of Texas**

In re TPC Family Medicine and Urgent Care Clinic, PLLC
Debtor(s)

Case No. _____
Chapter 11

CORPORATE OWNERSHIP STATEMENT (RULE 7007.1)

Pursuant to Federal Rule of Bankruptcy Procedure 7007.1 and to enable the Judges to evaluate possible disqualification or recusal, the undersigned counsel for TPC Family Medicine and Urgent Care Clinic, PLLC in the above captioned action, certifies that the following is a (are) corporation(s), other than the debtor or a governmental unit, that directly or indirectly own(s) 10% or more of any class of the corporation's(s') equity interests, or states that there are no entities to report under FRBP 7007.1:

None [*Check if applicable*]

August 8, 2018

Date

/s/ H. Anthony Hervol

H. Anthony Hervol 00784264

Signature of Attorney or Litigant

Counsel for TPC Family Medicine and Urgent Care Clinic, PLLC

Law Office of H. Anthony Hervol

4414 Centerview Dr., Suite 200

San Antonio, TX 78228

(210) 522-9500 Fax:(210) 522-0205

hervol@sbcglobal.net

**IN THE UNITED STATES BANKRUPTCY COURT
FOR THE WESTERN DISTRICT OF TEXAS
SAN ANTONIO DIVISION**

IN RE:	§	
	§	
TPC FAMILY MEDICINE & URGENT CARE CLINIC, PLLC	§	CASE NO. 18-5_____
	§	
DEBTOR	§	CHAPTER 11

DECLARATION OF CHRISTOPHER MONTOYA

I, Christopher Montoya, declare as follows:

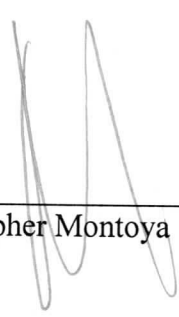
1. My name is Christopher Montoya. I am over 18 years of age and am fully competent to make this Declaration. The facts stated in this Declaration are based upon my personal knowledge and are true and correct. I submit this Declaration as required by 11 U.S.C. §1116(1).

2. Attached hereto is the most recent federal income tax return for TPC Family Medicine and Urgent Care Clinic, PLLC. The most recently prepared statement of operations and balance sheet for the company is contained within the tax return. No cash flow statement has been previously prepared.

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

Executed this 8 day of August, 2018.

Christopher Montoya



U.S. Income Tax Return for an S Corporation

2016

Department of the Treasury
Internal Revenue Service

▶ 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.

For calendar year 2016 or tax year beginning , 2016, ending ,

A S election effective date 6/13/2011	TYPE OR PRINT TPC Family Medicine and Urgent Care Clin 3107 TPC Parkway Suite 102 SAN ANTONIO, TX 78259	D Employer identification number 631
B Business activity code number (see instrs) 621111		E Date incorporated 6/13/2011
C Check if Schedule M-3 attached <input type="checkbox"/>		F Total assets (see instructions) \$ 360,776.

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.

I N C O M E	1 a Gross receipts or sales.....	1 a	1,115,636.		
	b Returns and allowances.....	1 b			
	c Balance. Subtract line 1b from line 1a.....	1 c	1,115,636.		
	2 Cost of goods sold (attach Form 1125-A).....	2	76,938.		
	3 Gross profit. Subtract line 2 from line 1c.....	3	1,038,698.		
	4 Net gain (loss) from Form 4797, line 17 (attach Form 4797).....	4			
5 Other income (loss) (see instrs - att statement).....	5				
6 Total income (loss). Add lines 3 through 5..... ▶	6	1,038,698.			
D E D U C T I O N S S E E I N S T R U C T I O N S	7 Compensation of officers (see instructions - attach Form 1125-E).....	7			
	8 Salaries and wages (less employment credits).....	8	386,141.		
	9 Repairs and maintenance.....	9	12,380.		
	10 Bad debts.....	10			
	11 Rents.....	11	65,827.		
	12 Taxes and licenses.....	12	17,850.		
	13 Interest.....	13	98,958.		
	14 Depreciation not claimed on Form 1125-A or elsewhere on return (attach Form 4562).....	14	4,565.		
	15 Depletion (Do not deduct oil and gas depletion.).....	15			
	16 Advertising.....	16	25,089.		
	17 Pension, profit-sharing, etc, plans.....	17			
	18 Employee benefit programs.....	18			
	19 Other deductions (attach statement)..... See Statement 1	19	346,899.		
	20 Total deductions. Add lines 7 through 19..... ▶	20	957,709.		
21 Ordinary business income (loss). Subtract line 20 from line 6.....	21	80,989.			
T A X A N D P A Y M E N T S	22a Excess net passive income or LIFO recapture tax (see instructions).....	22 a			
	b Tax from Schedule D (Form 1120S).....	22 b			
	c Add lines 22a and 22b (see instructions for additional taxes).....	22 c			
	23a 2016 estimated tax payments and 2015 overpayment credited to 2016.....	23 a			
	b Tax deposited with Form 7004.....	23 b			
	c Credit for federal tax paid on fuels (attach Form 4136).....	23 c			
	d Add lines 23a through 23c.....	23 d			
	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 2017 estimated tax ▶	27	Refunded ▶			

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.

Sign Here	Signature of officer _____ Date _____	President _____ Title _____			
Paid Preparer Use Only	Print/Type preparer's name Robert Roe	Preparer's signature Robert Roe	Date _____	Check <input checked="" type="checkbox"/> if self-employed	PTIN _____
	Firm's name ▶ Robert Roe CPA	Firm's EIN ▶ _____			
	Firm's address ▶ 219 Black Wolf Run AUSTIN, TX 78738	Phone no. 5122929690			
	May the IRS discuss this return with the preparer shown below (see instructions)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				

Schedule B Other Information (see instructions)					Yes	No
1 Check accounting method: a <input checked="" type="checkbox"/> Cash b <input type="checkbox"/> Accrual c <input type="checkbox"/> Other (specify) ▶ _____						
2 See the instructions and enter the:						
a Business activity ▶ <u>Health Care</u> b Product or service... ▶ <u>Urgent Care</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		
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..... <input type="checkbox"/> If checked, the corporation may have to file Form 8281 , Information Return for Publicly Offered Original Issue Discount Instruments.						
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
13a Did the corporation make any payments in 2016 that would require it to file Form(s) 1099?.....						X
b If 'Yes,' did the corporation file or will it file required Forms 1099?.....						

Schedule K Shareholders' Pro Rata Share Items		Total amount	
Income (Loss)	1 Ordinary business income (loss) (page 1, line 21).....	1	80,989.
	2 Net rental real estate income (loss) (attach Form 8825).....	2	
	3a Other gross rental income (loss).....	3a	
	b Expenses from other rental activities (attach statement).....	3b	
	c Other net rental income (loss). Subtract line 3b from line 3a.....	3c	
	4 Interest income.....	4	16.
	5 Dividends: a Ordinary dividends.....	5a	
	b Qualified dividends.....	5b	
	6 Royalties.....	6	
	7 Net short-term capital gain (loss) (attach Schedule D (Form 1120S)).....	7	
Deductions	8a Net long-term capital gain (loss) (attach Schedule D (Form 1120S)).....	8a	
	b Collectibles (28%) gain (loss).....	8b	
	c Unrecaptured section 1250 gain (attach statement).....	8c	
	9 Net section 1231 gain (loss) (attach Form 4797).....	9	
	10 Other income (loss) (see instructions)..... Type ▶	10	
Credits	11 Section 179 deduction (attach Form 4562).....	11	
	12a Charitable contributions.....	12a	
	b Investment interest expense.....	12b	
	c Section 59(e)(2) expenditures (1) Type ▶ (2) Amount ▶	12c (2)	
Foreign Transactions	d Other deductions (see instructions) .. Type ▶	12d	
	13a Low-income housing credit (section 42(j)(5)).....	13a	
	b Low-income housing credit (other).....	13b	
	c Qualified rehabilitation expenditures (rental real estate) (attach Form 3468, if applicable).....	13c	
	d Other rental real estate credits (see instrs) Type ▶	13d	
	e Other rental credits (see instrs) Type ▶	13e	
	f Biofuel producer credit (attach Form 6478).....	13f	
Alternative Minimum Tax (AMT) Items	g Other credits (see instructions)..... Type ▶	13g	
	14a Name of country or U.S. possession ▶		
	b Gross income from all sources.....	14b	
	c Gross income sourced at shareholder level.....	14c	
	Foreign gross income sourced at corporate level		
	d Passive category.....	14d	
	e General category.....	14e	
	f Other (attach statement).....	14f	
	Deductions allocated and apportioned at shareholder level		
	g Interest expense.....	14g	
	h Other.....	14h	
	Deductions allocated and apportioned at corporate level to foreign source income		
	i Passive category.....	14i	
	j General category.....	14j	
Items Affecting Shareholder Basis	k Other (attach statement).....	14k	
	Other information		
	l Total foreign taxes (check one): <input type="checkbox"/> Paid <input type="checkbox"/> Accrued.....	14l	
	m Reduction in taxes available for credit (attach statement).....	14m	
	n Other foreign tax information (attach statement)		
Items Affecting Shareholder Basis	15a Post-1986 depreciation adjustment.....	15a	-1,106.
	b Adjusted gain or loss.....	15b	
	c Depletion (other than oil and gas).....	15c	
	d Oil, gas, and geothermal properties – gross income.....	15d	
	e Oil, gas, and geothermal properties – deductions.....	15e	
	f Other AMT items (attach statement).....	15f	
Items Affecting Shareholder Basis	16a Tax-exempt interest income.....	16a	
	b Other tax-exempt income.....	16b	
	c Nondeductible expenses.....	16c	5,629.
	d Distributions (attach stmt if required) (see instrs).....	16d	
	e Repayment of loans from shareholders.....	16e	

Schedule K Shareholders' Pro Rata Share Items (continued)		Total amount	
Other Information	17a Investment income	17a	16.
	b Investment expenses	17b	
	c Dividend distributions paid from accumulated earnings and profits	17c	
	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 14i	18	81,005.

Schedule L Balance Sheets per Books		Beginning of tax year		End of tax year	
Assets		(a)	(b)	(c)	(d)
1	Cash		61.		7,343.
2a	Trade notes and accounts receivable				
b	Less allowance for bad debts				
3	Inventories				
4	U.S. government obligations				
5	Tax-exempt securities (see instructions)				
6	Other current assets (attach stmt)				
7	Loans to shareholders		167,326.		284,765.
8	Mortgage and real estate loans				
9	Other investments (attach statement)				
10a	Buildings and other depreciable assets	116,398.		116,398.	
b	Less accumulated depreciation	43,169.	73,229.	47,734.	68,664.
11a	Depletable assets				
b	Less accumulated depletion				
12	Land (net of any amortization)				
13a	Intangible assets (amortizable only)				
b	Less accumulated amortization				
14	Other assets (attach stmt) See St. 2.		2.		4.
15	Total assets		240,618.		360,776.
Liabilities and Shareholders' Equity					
16	Accounts payable				
17	Mortgages, notes, bonds payable in less than 1 year				
18	Other current liabilities (attach stmt) . . See St. 3.		206,770.		282,181.
19	Loans from shareholders		90,858.		141,117.
20	Mortgages, notes, bonds payable in 1 year or more		152,173.		71,285.
21	Other liabilities (attach statement)				
22	Capital stock		1,000.		1,000.
23	Additional paid-in capital				
24	Retained earnings		-210,183.		-134,807.
25	Adjustments to shareholders' equity (att stmt)				
26	Less cost of treasury stock				
27	Total liabilities and shareholders' equity		240,618.		360,776.

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)

<p>1 Net income (loss) per books. 75,376.</p> <p>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):</p> <p>3 Expenses recorded on books this year not included on Schedule K, lines 1 through 12, and 14I (itemize):</p> <p style="padding-left: 20px;">a Depreciation. \$ _____</p> <p style="padding-left: 20px;">b Travel and entertainment. \$ 5,121.</p> <p style="padding-left: 40px;">See Statement 4 508.</p> <p>4 Add lines 1 through 3. 81,005.</p>	<p>5</p> <p>6</p> <p>7</p> <p>8</p>	<p>Income recorded on books this year not included on Schedule K, lines 1 through 10 (itemize):</p> <p style="padding-left: 20px;">a Tax-exempt interest. \$ _____</p> <p>Deductions included on Schedule K, lines 1 through 12 and 14I, not charged against book income this year (itemize):</p> <p style="padding-left: 20px;">a Depreciation ... \$ _____</p> <p>Add lines 5 and 6. 0.</p> <p>Income (loss) (Schedule K, Ln 18). Ln 4 less Ln 7. 81,005.</p>
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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.	-53,196.		
2 Ordinary income from page 1, line 21.	80,989.		
3 Other additions. See Statement 5	16.		
4 Loss from page 1, line 21.			
5 Other reductions. See Statement 6	(5,629.)		
6 Combine lines 1 through 5.	22,180.		
7 Distributions other than dividend distributions.			
8 Balance at end of tax year. Subtract line 7 from line 6.	22,180.		

**Schedule K-1
(Form 1120S)**

Department of the Treasury
Internal Revenue Service

2016

For calendar year 2016, or tax
year beginning _____, 2016
ending _____,

Final K-1

Amended K-1

671113

OMB No. 1545-0123

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	██████████631
B Corporation's name, address, city, state, and ZIP code	TPC Family Medicine and Urgent Care Cli 3107 TPC Parkway Suite 102 SAN ANTONIO, TX 78259
C IRS Center where corporation filed return	e-file
Part II Information About the Shareholder	
D Shareholder's identifying number	██████████
E Shareholder's name, address, city, state, and ZIP code	Christopher Montoya 1218 Wilder Pond San Antonio, TX 78260
F Shareholder's percentage of stock ownership for tax year.....	100 %

Part III Shareholder's Share of Current Year Income, Deductions, Credits, and Other Items			
1	Ordinary business income (loss)	13	Credits
		80,989.	
2	Net rental real estate income (loss)		
3	Other net rental income (loss)		
4	Interest income	16.	
5a	Ordinary dividends		
5b	Qualified dividends	14	Foreign transactions
6	Royalties		
7	Net short-term capital gain (loss)		
8a	Net long-term capital gain (loss)		
8b	Collectibles (28%) gain (loss)		
8c	Unrecaptured section 1250 gain		
9	Net section 1231 gain (loss)		
10	Other income (loss)	15	Alternative minimum tax (AMT) items
		A	-1,106.
11	Section 179 deduction	16	Items affecting shareholder basis
		C	5,629.
12	Other deductions		
		17	Other information
		A	16.

*See attached statement for additional information.

FOR IRS USE ONLY

BAA For Paperwork Reduction Act Notice, see Instructions for Form 1120S.

Schedule K-1 (Form 1120S) 2016

Shareholder 1

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.

Code	Report on
1 Ordinary business income (loss). Determine whether the income (loss) is passive or nonpassive and enter on your return as follows:	
<i>Report on</i>	
Passive loss	See the Shareholder's Instructions
Passive income	Schedule E, line 28, column (g)
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
3 Other net rental income (loss)	
Net income	Schedule E, line 28, column (g)
Net loss	See the Shareholder's Instructions
4 Interest income	Form 1040, line 8a
5 a Ordinary dividends	Form 1040, line 9a
5 b Qualified dividends	Form 1040, line 9b
6 Royalties	Schedule E, line 4
7 Net short-term capital gain (loss)	Schedule D, line 5
8 a Net long-term capital gain (loss)	Schedule D, line 12
8 b Collectibles (28%) gain (loss)	28% Rate Gain Worksheet, line 4 (Schedule D instructions)
8 c Unrecaptured section 1250 gain	See the Shareholder's Instructions
9 Net section 1231 gain (loss)	See the Shareholder's Instructions
10 Other income (loss)	
<i>Code</i>	
A Other portfolio income (loss)	See the Shareholder's Instructions
B Involuntary conversions	See the Shareholder's Instructions
C Sec. 1256 contracts and straddles	Form 6781, line 1
D Mining exploration costs recapture	See Pub 535
E Other income (loss)	See the Shareholder's Instructions
11 Section 179 deduction	See the Shareholder's Instructions
12 Other deductions	
A Cash contributions (50%)	See the Shareholder's Instructions
B Cash contributions (30%)	
C Noncash contributions (50%)	
D Noncash contributions (30%)	
E Capital gain property to a 50% organization (30%)	
F Capital gain property (20%)	
G Contributions (100%)	
H Investment interest expense	Form 4952, line 1
I Deductions — royalty income	Schedule E, line 19
J Section 59(e)(2) expenditures	See the Shareholder's Instructions
K Deductions — portfolio (2% floor)	Schedule A, line 23
L Deductions — portfolio (other)	Schedule A, line 28
M Preproductive period expenses	See the Shareholder's Instructions
N Commercial revitalization deduction from rental real estate activities	See Form 8582 instructions
O Reforestation expense deduction	See the Shareholder's Instructions
P Domestic production activities information	See Form 8903 instructions
Q Qualified production activities income	Form 8903, line 7b
R Employer's Form W-2 wages	Form 8903, line 17
S Other deductions	See the Shareholder's Instructions
13 Credits	
A Low-income housing credit (section 42(j)(5)) from pre-2008 buildings	See the Shareholder's Instructions
B Low-income housing credit (other) from pre-2008 buildings	
C Low-income housing credit (section 42(j)(5)) from post-2007 buildings	
D Low-income housing credit (other) from post-2007 buildings	
E Qualified rehabilitation expenditures (rental real estate)	
F Other rental real estate credits	
G Other rental credits	
H Undistributed capital gains credit	Form 1040, line 73, box a
I Biofuel producer credit	See the Shareholder's Instructions
J Work opportunity credit	
K Disabled access credit	
L Empowerment zone employment credit	
M Credit for increasing research activities	
N Credit for employer social security and Medicare taxes	See the Shareholder's Instructions
O Backup withholding	
P Other credits	
14 Foreign transactions	
A Name of country or U.S. possession	Form 1116, Part I
B Gross income from all sources	
C Gross income sourced at shareholder level	
<i>Foreign gross income sourced at corporate level</i>	
D Passive category	Form 1116, Part I
E General category	
F Other	
<i>Deductions allocated and apportioned at shareholder level</i>	
G Interest expense	Form 1116, Part I
H Other	Form 1116, Part I
<i>Deductions allocated and apportioned at corporate level to foreign source income</i>	
I Passive category	Form 1116, Part I
J General category	
K Other	
<i>Other information</i>	
L Total foreign taxes paid	Form 1116, Part II
M Total foreign taxes accrued	Form 1116, Part II
N Reduction in taxes available for credit	Form 1116, line 12
O Foreign trading gross receipts	Form 8873
P Extraterritorial income exclusion	Form 8873
Q Other foreign transactions	See the Shareholder's Instructions
15 Alternative minimum tax (AMT) items	
A Post-1986 depreciation adjustment	See the Shareholder's Instructions and the Instructions for Form 6251
B Adjusted gain or loss	
C Depletion (other than oil & gas)	
D Oil, gas, & geothermal — gross income	
E Oil, gas, & geothermal — deductions	
F Other AMT items	
16 Items affecting shareholder basis	
A Tax-exempt interest income	Form 1040, line 8b
B Other tax-exempt income	See the Shareholder's Instructions
C Nondeductible expenses	
D Distributions	
E Repayment of loans from shareholders	
F Recapture of low-income housing credit (section 42(j)(5))	
17 Other information	
A Investment income	Form 4952, line 4a
B Investment expenses	Form 4952, line 5
C Qualified rehabilitation expenditures (other than rental real estate)	See the Shareholder's Instructions
D Basis of energy property	See the Shareholder's Instructions
E Recapture of low-income housing credit (section 42(j)(5))	Form 8611, line 8
F Recapture of low-income housing credit (other)	Form 8611, line 8
G Recapture of investment credit	See Form 4255
H Recapture of other credits	See the Shareholder's Instructions
I Look-back interest — completed long-term contracts	See Form 8697
J Look-back interest — income forecast method	See Form 8866
K Dispositions of property with section 179 deductions	See the Shareholder's Instructions
L Recapture of section 179 deduction	
M Section 453(l)(3) information	
N Section 453A(c) information	
O Section 1260(b) information	
P Interest allocable to production expenditures	
Q CCF nonqualified withdrawals	
R Depletion information — oil and gas	
S Reserved	
T Section 108(i) information	
U Net investment income	
V Other information	

Form **1125-A**

(Rev October 2016)

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. 1545-0123

Name

Employer identification number

TPC Family Medicine and Urgent Care Clin

631

1	Inventory at beginning of year.....	1	
2	Purchases.....	2	76,938.
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	76,938.
7	Inventory at end of year.....	7	
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	76,938.

9a 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 10-2016)

TPC Family Medicine and Urgent Care Clin

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Statement 1
Form 1120S, Line 19
Other Deductions

Administrative Services.....	\$	10,589.
Auto and Truck Expense.....		18,168.
Bank Charges.....		1,409.
Billing Service.....		46,673.
Consulting.....		12,000.
Continuing Education.....		2,577.
Credit Card Fees.....		3,998.
Dues and Subscriptions.....		6,960.
Insurance.....		25,409.
Internet.....		13,683.
IT Support.....		950.
Legal and Professional.....		5,766.
Meals and Entertainment Expense.....		5,122.
Medical Supervision.....		47,274.
Miscellaneous.....		341.
Office Expense.....		23,787.
Parking and Tolls.....		100.
Payroll Processing.....		12,533.
Pest Control.....		240.
Postage.....		1,398.
Security Expnse.....		660.
Small Tools.....		8,648.
Supplies.....		42,732.
Telephone.....		20,202.
Tolls.....		30.
Travel.....		19,140.
Uniforms.....		8,552.
Utilities.....		7,958.
Total	\$	<u>346,899.</u>

Statement 2
Form 1120S, Schedule L, Line 14
Other Assets

	<u>Beginning</u>	<u>Ending</u>
Rounding.....	\$ 0.	\$ 4.
Rounding.....	2.	0.
Total	<u>\$ 2.</u>	<u>\$ 4.</u>

Statement 3
Form 1120S, Schedule L, Line 18
Other Current Liabilities

	<u>Beginning</u>	<u>Ending</u>
Line of credit.....	\$ 20,000.	\$ 20,000.
Payroll Taxes.....	82,129.	122,894.
Short Term Loans.....	104,641.	139,287.
Total	<u>\$ 206,770.</u>	<u>\$ 282,181.</u>

TPC Family Medicine and Urgent Care Clin

██████████ 631

Statement 4
Form 1120S, Schedule M-1, Line 3
Expenses On Books Not On Schedule K

Penalties..... \$ 508.
Total \$ 508.

Statement 5
Form 1120S, Schedule M-2, Column A, Line 3
Other Additions

Interest Income..... \$ 16.
Total \$ 16.

Statement 6
Form 1120S, Schedule M-2, Column A, Line 5
Other Reductions

Disallowed Meals and Entertainment..... \$ 5,121.
Penalties..... 508.
Total \$ 5,629.