MEYERS BROTHERS KALICKA, P.C. 330 WHITNEY AVE, SUITE 800 HOLYOKE, MA 01040

MR. JAMISON CUTTER CUTTER HIGHLANDS RANCH, LLC 2253 E. BRIARWOOD AVE, STE 509 LITTLETON, CO 80122

Haldlamillaldaldladl

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CLIENT'S COPY



330 Whitney Avenue, Suite 800 • Holyoke, Massachusetts 01040 Telephone 413-536-8510 • Facsimile 413-533-8399 www.mbkcpa.com

MARCH 20, 2015

CUTTER HIGHLANDS RANCH, LLC 2253 E. BRIARWOOD AVE, STE 509 LITTLETON, CO 80122

DEAR JOHN:

ENCLOSED ARE YOUR 2014 PARTNERSHIP TAX RETURNS, AS FOLLOWS...

2014 U.S. RETURN OF PARTNERSHIP INCOME

2014 COLORADO RETURN OF PARTNERSHIP INCOME

2014 DELAWARE RETURN OF PARTNERSHIP INCOME

THE RETURNS WERE PREPARED FROM THE INFORMATION FURNISHED BY YOU. PLEASE REVIEW BEFORE FILING TO ENSURE THERE ARE NO OMISSIONS OR MISSTATEMENTS OF MATERIAL FACTS.

PRE-ADDRESSED ENVELOPES ARE ENCLOSED FOR YOUR CONVENIENCE IN FILING THE RETURNS.

WE HAVE ASSUMED YOU HAVE FILED ALL APPLICABLE STATE ANNUAL REPORTS.

YOUR COPY SHOULD BE RETAINED FOR YOUR FILES.

VERY TRULY YOURS,

MEYERS BROTHERS KALICKA, P.C.

2014 TAX RETURN FILING INSTRUCTIONS

U.S. RETURN OF PARTNERSHIP INCOME

FOR THE YEAR ENDING

DECEMBER 31, 2014

Dueneyed for	
Prepared for	CUTTER HIGHLANDS RANCH, LLC 2253 E. BRIARWOOD AVE, STE 509 LITTLETON, CO 80122
Prepared by	
	MEYERS BROTHERS KALICKA, P.C. 330 WHITNEY AVE, SUITE 800 HOLYOKE, MA 01040
To be signed and dated by	A MEMBER MANAGER OF THE LLC
Amount of tax	NOT APPLICABLE
Mail tax return to	THIS RETURN HAS BEEN PREPARED FOR ELECTRONIC FILING. TO HAVE IT TRANSMITTED ELECTRONICALLY TO THE IRS, PLEASE SIGN, DATE, AND RETURN FORM 8879-PE TO OUR OFFICE. WE WILL THEN SUBMIT YOUR ELECTRONIC RETURN.
Forms to be distributed to partners	ENCLOSED ARE COPIES OF SCHEDULE K-1 TO BE DISTRIBUTED TO THE MEMBERS.
Return must be mailed on or before	RETURN FEDERAL FORM 8879-PE TO US BY APRIL 15, 2015.
Special Instructions	DO NOT MAIL THE PAPER COPY OF THE RETURN TO THE IRS.

SUMMARY OF SCHEDULE K-1

Entity Name:	Number 1	Number 2	Number	Number	Number	Number	Number
CUTTER HIGHLANDS RANCH, LLC	Name:	Name:	Name:	Name:	Name:	Name:	Name:
Schedule K-1 Line/Item Description	JAMISON CUTTER	JOHN CUTTER	K-1 TOTALS				
1 - ORDINARY BUSINESS INCOME (LOSS)	-86,949.	-15,344.	-102,293.				
13(A) - CASH CONTRIBUTIONS (50%)	2,564.	453.	3,017.				
14(A) - NET EARNINGS(LOSS) FROM SELF-EMPLOYMENT	-86,949.	-15,344.	-102,293.				
14(C) - GROSS NONFARM INCOME	2,121,216.	374,332.	2,495,548.				
17(A) - AMT - POST-1986 DEPRECIATION ADJUSTMENT	-12,302.	-2,171.	-14,473.				
18(C) - NONDEDUCTIBLE EXPENSES	12.	2.	14.				
CAPITAL ACCOUNTS							
BEGINNING OF YEAR	-610,753.	-91,492.	-702,245.				
CONTRIBUTIONS			0.				
CURRENT YEAR INCREASES (DECREASES)	-90,506.	-15,972.	-106,478.				
WITHDRAWALS & DISTRIBUTIONS			0.				
END OF YEAR	-701,259.	-107,464.	-808,723.				
LIABILITIES - RECOURSE	465,549.	1,808,210.	2,273,759.				

Name of partnership

Employer identification number

CUTTER HIGHLANDS RANCH, LLC

26-3047014

Description	Prior Year	Current Year	Increase (Decrease)
NUMBER OF PARTNERS	2.	2.	0.
TRADE OR BUSINESS INCOME OR LOSS:			
INCOME:			
GROSS RECEIPTS OR SALES COST OF GOODS SOLD: INVENTORY AT BEGINNING OF YEAR PURCHASES LESS ITEMS WITHDRAWN TOTAL INVENTORY AT END OF YEAR COST OF GOODS SOLD GROSS PROFIT	3,281,765. 18,608. 949,792. 968,400. 20,748. 947,652. 2,334,113.	20,748. 1,064,583. 1,085,331. 26,901. 1,058,430.	2,140. 114,791. 116,931. 6,153. 110,778.
TOTAL INCOME (LOSS)	2,334,113.	2,495,548.	161,435.
DEDUCTIONS:			
SALARIES AND WAGES REPAIRS AND MAINTENANCE RENT TAXES AND LICENSES INTEREST DEPRECIATION EMPLOYEE BENEFIT PROGRAMS OTHER DEDUCTIONS	920,092. 34,901. 315,987. 137,703. 62,760. 212,759. 34,010. 621,325.	55,035. 348,297. 142,073. 52,151. 180,556. 24,417.	20,134. 32,310. 4,370. -10,609. -32,203. -9,593.
TOTAL DEDUCTIONS	2,339,537.	2,597,841.	258,304.
ORDINARY INCOME (LOSS)	-5,424.	-102,293.	-96,869.
SCHEDULE K:			
INCOME (LOSS):			
ORDINARY TRADE/BUSINESS INCOME/LOSS	-5,424.	-102,293.	-96,869.
DEDUCTIONS:			
CHARITABLE CONTRIBUTIONS	2,685.	3,017.	332.
SELF-EMPLOYMENT:			

411811 05-01-14

Name of partnership

Employer identification number

CUTTER HIGHLANDS RANCH, LLC

26-3047014

Description	Prior Year	Current Year	Increase (Decrease)
EARNINGS/LOSS FROM SELF-EMPLOYMENT GROSS NONFARM INCOME	-5,424. 2,334,113.		
ADJUSTMENTS AND TAX PREFERENCES:			
DEPRECIATION ADJUSTMENT	1,101.	-14,473.	-15,574.
OTHER:			
NONDEDUCTIBLE EXPENSES	25.	14.	-11.
SCHEDULE M-1:			
NET INCOME (LOSS) PER BOOKS TRAVEL AND ENTERTAINMENT OTHER BOOK EXPENSES NOT ON SCH K	-8,334. 25. 200.	14.	-11.
TOTAL- NET BOOK INC THROUGH EXPENSE	-8,109.		
INCOME (LOSS)	-8,109.	-105,310.	-97,201.
SCHEDULE M-2:			
CAPITAL AT BEGINNING OF YEAR NET INCOME (LOSS) PER BOOKS	-693,911. -8,334.		
TOTAL- BEGINNING CAP THROUGH INCR	-702,245.	-808,723.	-106,478.
TOTAL- CASH CONT THROUGH OTHER DECR	0.	0.	
CAPITAL BALANCE AT END OF YEAR	-702,245.	-808,723.	-106,478.

		Expanded	d Capital Account Summ	ary	
ame CU'	TTER HIGHLAN	DS RANCH, LLC		I.D. Num	ber 26-3047014
Partner Number 1	731	ISON CUTTER MUELLER DRIVE TLETON, CO 801	129		Partner's Identification Number
	Beginning Capital -610,753.	Capital Contributed	Schedule M-2, Lines 3, 4 & 7 - 9 0 , 5 0 6 •	Withdrawals	Ending Capital -701,259
Partner Number 2	218	N CUTTER 8 WYNTERBROOK I HLANDS RANCH, C			Partner's Identification Number
	Beginning Capital – 91,492.	Capital Contributed	Schedule M-2, Lines 3, 4 & 7 -15, 972.	Withdrawals	Ending Capital -107,464
Partner Number					Partner's Identificatior Number
	Beginning Capital	Capital Contributed	Schedule M-2, Lines 3, 4 & 7	Withdrawals	Ending Capital
Partner Number					Partner's Identificatior Number
	Beginning Capital	Capital Contributed	Schedule M-2, Lines 3, 4 & 7	Withdrawals	Ending Capital
		Total F	For All Partner's Capital Accounts		
	Beginning Capital -702,245.	Capital Contributed	Schedule M-2, Lines 3, 4 & 7 - 106, 478.	Withdrawals	Ending Capital - 808,723

COLORADO

Property Apportionment Detail Worksheet

2014

CUTTER HIGHLANDS RANCH, LLC

26-3047014

	Withir	Within		Everywhere		
	Beginning of Year	End of Year	Beginning of Year	End of Year		
Inventories	20,748.	26,901.	20,748.	26,901.		
Land	,	,		,		
Buildings						
Buildings - accumulated depreciation						
Machinery						
Equipment	357,666.	377,502.	357,666.	377,502.		
Machinery and equipment - accumulated	,	,	,	,		
depreciation	272,009.	330,186.	272,009.	330,186.		
Furniture and fixtures	369,321.	379,861.	369,321.	379,861.		
Furniture and fixtures - accumulated depreciation	231,154.	298,904.	231,154.	298,904.		
Transportation/delivery equipment	,	,		,		
Transportation/delivery equipment - accumulated						
depreciation						
Other depreciable assets						
Other depreciable assets - accumulated						
depreciation						
Depletable assets						
Depletable assets - accumulated depletion						
Leasehold improvements	1,238,172.	1,238,172.	1,238,172.	1,238,172.		
Leasehold improvements - accumulated	,,	, ,	, , , ,	, ,		
amortization	565,652.	631,167.	565,652.	631,167.		
Supplies	,	,	,	,		
Other tangible property						
Buildings - construction in progress						
Machinery - construction in progress						
Equipment - construction in progress						
Transportation/delivery - construction in progress						
Other - construction in progress						
Less: Total construction in progress						
Miscellaneous other						
Subtotals	917,092.	762,179.	917,092.	762,179.		
Average property		839,636.		839,636.		
Real property rented - rental expense (multiplied						
by applicable factor)		2,786,376.		2,786,376.		
Tangible property rented - rental expense						
(multiplied by applicable factor)						
Miscellaneous rental expense (multiplied by						
applicable factor)						
Total property		3,626,012.		3,626,012.		

^{* -} Not Applicable

DELAWARE

Property Apportionment Detail Worksheet

2014

CUTTER HIGHLANDS RANCH, LLC

26-3047014

	With	in	Everywhere		
	Beginning of Year	End of Year	Beginning of Year	End of Year	
Inventories	0.	0.	20,748.	26,901.	
Land		-	,	, , ,	
Buildings					
Buildings - accumulated depreciation					
Machinery					
Equipment	0.	0.	357,666.	377,502.	
Machinery and equipment - accumulated depreciation				-	
Furniture and fixtures	0.	0.	369,321.	379,861.	
Furniture and fixtures - accumulated depreciation		-	, ,	, , , ,	
Transportation/delivery equipment					
Transportation/delivery equipment - accumulated					
depreciation					
Other depreciable assets					
Other depreciable assets - accumulated					
depreciation					
Depletable assets					
Depletable assets - accumulated depletion					
Leasehold improvements	0.	0.	1,238,172.	1,238,172.	
Leasehold improvements - accumulated					
amortization					
Supplies					
Other tangible property					
Buildings - construction in progress					
Machinery - construction in progress					
Equipment - construction in progress					
Transportation/delivery - construction in progress					
Other - construction in progress					
Less: Total construction in progress					
Miscellaneous other					
Subtotals	0.	0.	1,985,907.	2,022,436.	
Average property		0.		2,004,172.	
Real property rented - rental expense (multiplied		2		2 706 276	
by applicable factor)		0.		2,786,376.	
Tangible property rented - rental expense					
(multiplied by applicable factor)	L				
Miscellaneous rental expense (multiplied by					
applicable factor)	L		_		
Total property		0.		4,790,548.	

^{* -} Not Applicable

COLORADO	Payroll and Sales Apportionment Detail Worksheet	2014
CITEMPED BECREE	C DANCH IIC	26 2017011

COTTER HIGHLANDS RANCH, LLC		20-304/014
Payroll Apportionment	Within	Everywhere
Cost of goods sold		
Cost of operations		
Compensation of officers		
Salesmen's salaries		
Salesmen's commissions		
General and administrative wages and salaries	1,006,393.	1,006,393.
Repairs		
Others		
Miscellaneous other		
Total payroll	1,006,393.	1,006,393.
Sales Apportionment		
	Within	Everywhere
Sales of tangible personal property		3,553,978.
- Returns and allowances		
Sales from outside the state to within the state	0.	
Sales from within the state to within the state	3,553,978.	
Sales from within the state to U.S. government		
Sales from within the state to nontaxable jurisdictions		
Interest		
Dividends		
Rents	I	
Royalties		
Gain from sales of real and tangible personal property		
Gain from sales of intangibles		
Service income		
Other receipts		
Miscellaneous other		
Total sales	3,553,978.	3,553,978.

^{* -} Not Applicable

DELAWARE	Payroll and Sales Apportionment Detail Worksheet	2014
CITUTED HIGHIAND	S BANCH I.I.C	26-3047014

Payroll Apportionment	Within	Everywhere
Cost of goods sold		
Cost of operations		
Compensation of officers		
Salesmen's salaries		
Salesmen's commissions		
General and administrative wages and salaries	0.	1,006,393.
Repairs		
Others		
Miscellaneous other		
Total payroll	0.	1,006,393.
Sales Apportionment	Within	Everywhere
Salas of tangible paraonal property	vvidilli	3,553,978.
Sales of tangible personal property		3,333,370.
- Returns and allowances	0.	
Sales from outside the state to within the state Sales from within the state to within the state	0.	
Sales from within the state to Within the state Sales from within the state to U.S. government		
Sales from within the state to o.o. government Sales from within the state to nontaxable jurisdictions		
Interest		
Dividends		
Rents		
Royalties		
Gain from sales of real and tangible personal property		
Gain from sales of intangibles		
Service income		
Other receipts		
Miscellaneous other		

Total sales

0.

3,553,978.

^{* -} Not Applicable

SALES FACTOR		Apportionment S	2014		
CUTTER HIGHLANDS	RANCH,	LLC		26-3047014	
	ÍΓ	WITHIN	EVERYWHERE	UNWEIGHTED	WEIGHTED
Alabama					
Alaska					
Arizona					
Arkansas					
California					
Colorado		3,553,978.	3,553,978.	1.00000	1.000000
Connecticut	-	.,,.	, ,		
Delaware					+
District of Columbia	-				
Florida					+
Georgia	_				+
"					+
	<u> </u>				+
Idaho					
Illinois					-
Indiana					_
lowa					+
Kansas					+
Kentucky	-				_
Louisiana					
Maine					
Maryland	-				
Massachusetts					+
Michigan					
Minnesota					
Mississippi					
Missouri					
Montana					
Nebraska	·····				
Nevada					
New Hampshire					
New Jersey					
New Mexico					
New York					
North Carolina					
North Dakota					
Ohio					
Oklahoma					
Oregon					
Pennsylvania					
Rhode Island					
South Carolina					
South Dakota					
Tennessee					
Texas					
Utah					
Vermont	Г				
Virginia	Г				
Washington	1				
West Virginia	-				
Wisconsin					
Wyoming					1
Foreign					1
Other					†
					†
Total		N/A	N/A	N/A	1.000000
410731 05-01-14		·	•	· · · · · · · · · · · · · · · · · · ·	

SALES	FACTOR	Apportionment Summary Worksheet (Continued)	2014
CUTTER	R HTGHLANDS	S RANCH LLC	26-3047014

	WITHIN	EVERYWHERE	UNWEIGHTED	WEIGHTED
* Battle Creek				
* Detroit				
* Flint				
* Grand Rapids				
* Highland Park				
* Lansing				
* Pontiac				
* Port Huron				
* Saginaw				
* New York City				
* New York - MCTD				
* Muskegon				
* Muskegon Heights				

^{*} Not included in everywhere totals

SUMMARY	JMMARY Apportionment Summary Worksheet			et	2014		
CUTTER HIGHLANDS RANCH,		LLC		26-3047014			
SUMMARY OF FACTO		PROPERTY	PAYROLL	SALES	APPORTIONMENT		
Alabama							
Alaska							
Arizona							
Arkansas							
California	i						
Colorado	i			1.00000	1.000000		
Connecticut							
Delaware							
District of Columbia							
Florida	ī						
Georgia	Î						
Hawaii							
Idaho	Î						
Illinois							
Indiana							
lowa							
Kansas							
Kentucky							
Louisiana	Î						
Maine	i						
Maryland							
Massachusetts							
Michigan	i i						
Minnesota							
Mississippi							
Missouri							
Montana	i						
Nebraska	i						
Nevada	i						
New Hampshire							
New Jersey							
New Mexico	i						
New York	i						
North Carolina							
North Dakota							
Ohio							
Oklahoma							
Oregon							
Pennsylvania							
Rhode Island	Î						
South Carolina							
South Dakota							
Tennessee	Î						
Texas							
Utah							
Vermont							
Virginia	Î						
Washington							
West Virginia							
Wisconsin							
Wyoming							
Foreign	i						
Other	1						
Total				1.00000	1.00000		
410731 05-01-14			•	•			

SUMMARY	Apportionment Summary Worksheet (Continued)	2014
CUTTER HIGHLAND	S RANCH, LLC	26-3047014

SUMMARY OF FACTORS	PROPERTY	PAYROLL	SALES	APPORTIONMENT
* Battle Creek				
* Detroit				
* Flint				
* Grand Rapids				
* Highland Park				
* Lansing				
* Pontiac				
* Port Huron				
* Saginaw				
* New York City				
* New York - MCTD				
* Muskegon				
* Muskegon Heights				

^{*} Not included in everywhere totals

8879-PE

IRS e-file Signature Authorization for Form 1065

▶ Do not send to the IRS. Keep for your records.

OMB No. 1545-0123

Department of the Treasury Internal Revenue Service

▶ Information about Form 8879-PE and its instructions is at www.irs.gov/form8879pe. For calendar year 2014, or tax year beginning , 2014, ending

Name of partnership		er identification number
CUTTER HIGHLANDS RANCH, LLC	26-3	047014
Part I Return Information (Whole dollars only)		
1 Gross receipts or sales less returns and allowances (Form 1065, line 1c)	1	3,553,978.
2 Gross profit (Form 1065, line 3)	2	2,495,548.
3 Ordinary business income (loss) (Form 1065, line 22)	3	-102,293.
4 Net rental real estate income (loss) (Form 1065, Schedule K, line 2)	4	
5 Other net rental income (loss) (Form 1065, Schedule K, line 3c)	5	
Part II Declaration and Signature Authorization of General Partner or Limited Liab Manager (Be sure to get a copy of the partnership's return)	ility Co	mpany Member
examined a copy of the partnership's 2014 electronic return of partnership income and accompanying schedules a my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the the partnership's electronic return of partnership income. I consent to allow my electronic return originator (ERO), to provider to send the partnership's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt transmission and (b) the reason for any delay in processing the return. I have selected a personal identification numpartnership's electronic return of partnership income. General Partner or Limited Liability Company Member Manager's PIN: check one box only	amounts ansmitter or reasor	shown on the copy of r, or intermediate service n for rejection of the
X lauthorize MEYERS BROTHERS KALICKA, P.C. to	enter my	PIN 80126 do not enter all zeros
as my signature on the partnership's 2014 electronically filed return of partnership income.		
As a general partner or limited liability company member manager of the partnership, I will enter my PIN a partnership's 2014 electronically filed return of partnership income.	s my sigr	nature on the
General partner or limited liability company member manager's signature ► Title ► MEMBER	Da	te >
Part III Certification and Authentication		
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 04072701040 do not enter all zeros		
I certify that the above numeric entry is my PIN, which is my signature on the 2014 electronically filed return of part indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 3112 , IRS e and Pub. 4163 , Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.		
ERO's signature ▶ Date ▶ <u>03/</u>	20/15	
ERO Must Retain This Form - See Instructions Do Not Submit This Form to the IRS Unless Requested To Do	So	
For Paperwork Reduction Act Notice, see instructions. LHA		Form 8879-PE (2014)

421031 10-27-14

	1	1165		U.S.	Return of Part	tnership	o Inco	me			OMB No. 1545-0123
Fori Dep Inte	m partment of ernal Revenu	the Treasury ue Service	For calendar	year 2014, or tax yea		_			,		2014
Α	Principal b	usiness activity		Name of partnersh	ip						D Employer identification number
		JRANT					_				
	RANCI		Туре	CUTTER I	HIGHLANDS RAN d room or suite no. If a P.O. box, s	CH, LLC	2				26-3047014 E Date business started
В	Principal p	roduct or service			BRIARWOOD AV						10/13/2008
F	OOD/F	BEVERAGE			or province, country, and ZIP or fo						F Total assets
		code number									ľ
72	22513	3		LITTLETO	ON			CO 80	122		\$ 1,963,030.
G H		pplicable boxes: accounting methor	(6)	☐ Initial return ☐ Technical term ☐ Cash	ination <u>- als</u> o check (1) or (2	(3)		()		nange	(5) Amended return
I	Number	of Schedules K-	-1. Attach o	ne for each perso	n who was a partner at any ti	me during the t	ax year		2		
J	Check if	Schedules C an	d M-3 are at	ttached							<u></u>
Ca	ution. In	clude only tra	de or busir	ness income and	d expenses on lines 1a thi	rough 22 belo	w. See the	instructio	ons for moi	re info	rmation.
	1 a G	Gross receipts or	sales					3,553	3,978.		
	b R	Returns and allow	vances				1b				
	c B	Balance. Subtract	t line 1b fron	n line 1a						1c	3,553,978.
e										2	1,058,430. 2,495,548.
Income					a satatas and trusts (attach					3	4,495,546.
٤					s, estates, and trusts (attach					5	
	6 1	let nain (loss) fro	om Form 47	97 Part II line 17	1040)) (attach Form 4797)					6	
		Other income (los								7	
		,	, ,	,	7					8	2,495,548.
_					ss employment credits)					9	1,006,393.
limitations)										10	
itati										11	55,035.
<u>=</u>										12	240 207
ξ	13 R	Rent				CEE C	ישא שביא			13	348,297. 142,073.
instructions for									.	14	52,151.
ruct									,556.		JZ, IJI•
inst	10 a b	ess depreciation	reported or	n Form 1125-A an	d elsewhere on return		16b		,,550	16c	180,556.
the					n.)					17	
see		Retirement plans,			,					18	
S) Su	19 E	mployee benefit	programs							19	24,417.
Deductions (see the	20 C	Other deductions	(attach state	ement)		SEE S	STATEM	ENT 2	2	20	788,919.
Δ	21 T	Total deductions	. Add the a	mounts shown in	the far right column for lines	9 through 20				21	2,597,841.
	22 (oss). Subtract lin						22	-102,293.
		correct, and co	es of perjury, I omplete. Decla	declare that I have e aration of preparer (o	xamined this return, including acc ther than general partner or limited	ompanying sched d liability company	ules and state member man	ments, and to ager) is based	o the best of n d on all inform	ny know ation of	ledge and belief, it is true, which preparer has any
Sig He		knowledge.							ſ	•	e IRS discuss this return e preparer shown below
116	16	Signature	of general par	tner or limited liabilit	y company member manager		— Da	ate		(see ins	
		Print/Type prepa	arer's name		Preparer's signature		Date		Check	if	PTIN
Pa	id	JAMES E	2 <u>7</u> 5554	ıф			03/	20/15	self-employ	red	P00382590
	eparer	Firm's name		_	1		037	10/13	<u>′I </u>		1 100302330
	e Only	_		HERS KAI	LICKA, P.C.				Firm's FIN	▶ 04	-2713795
		Firm's address	▶330	WHITNEY	AVE, SUITE 8	00)		
		I HOLYOR	KE. MA	01040					Phone no	413	3-536-8510

LHA For Paperwork Reduction Act Notice, see separate instructions.

Form **1065** (2014)

Sc	hedule B Other Information							
1	What type of entity is filing this return? Check the app	plicable box:			Yes	No		
а	a Domestic general partnership b Domestic limited partnership							
C	c X Domestic limited liability company d Domestic limited liability partnership							
е	e ☐ Foreign partnership f ☐ Other ►							
2	At any time during the tax year, was any partner in the	e partnership a disregard	led entity, a partnership (i	ncluding an entity treated as a				
	partnership), a trust, an S corporation, an estate (other	er than an estate of a dec	ceased partner), or a nom	inee or similar person?		X		
3	At the end of the tax year:							
а	Did any foreign or domestic corporation, partnership	(including any entity trea	ated as a partnership), tru	st, or tax-exempt organization, or				
	any foreign government own, directly or indirectly, an	interest of 50% or more	e in the profit, loss, or cap	ital of the partnership? For rules of				
	constructive ownership, see instructions. If "Yes," atta					X		
b	Did any individual or estate own, directly or indirectly,							
	constructive ownership, see instructions. If "Yes," atta	ich Schedule B-1, Inform	nation on Partners Owning	g 50% or More of the Partnership	X	\bot		
4	At the end of the tax year, did the partnership:							
а	Own directly 20% or more, or own, directly or indirect					١		
	or domestic corporation? For rules of constructive ow	vnership, see instruction				X		
	(i) Name of Corporation		(ii) Employer Identification	(iii) Country of	(iV) Perd Owne	d in		
			Number (if any)	Incorporation	Voting 9	itock		
	Ours dispath, an interest of 000/ as many as as as disp	ath, an indinath, an inte	wash of FOO/ ou was us in the	nuafit loca ou conital in any favoire ou				
D	Own directly an interest of 20% or more, or own, dire domestic partnership (including an entity treated as a	•						
		parmership) or in the bi	enenciai interest of a trust	? For fules of constructive ownership, see		Х		
	instructions. If "Yes," complete (i) through (v) below (i) Name of Entity	(ii) Employer	(iii) Type of Entity	(iv) Country of	(v) _{Max}			
	(1) Name of Entity	Identification Number (if any)	(III) Type of Littly	Organization	Percentage ()wned in		
		(ii diry)		9	FIUIII, LUSS,	л оарна		
			l .		Yes	No		
5	Did the partnership file Form 8893, Election of Partne	rship Level Tax Treatme	nt, or an election stateme	nt under				
	section 6231(a)(1)(B)(ii) for partnership-level tax trea	•	·					
	for more details					Х		
6	Does the partnership satisfy all four of the following of	conditions?						
а	The partnership's total receipts for the tax year were I	ess than \$250,000.						
b	The partnership's total assets at the end of the tax year	ar were less than \$ 1 mil	lion.					
C	Schedules K-1 are filed with the return and furnished	to the partners on or be	fore the due date (includir	ng extensions) for the partnership				
	return.							
d	The partnership is not filing and is not required to file					X		
	If "Yes," the partnership is not required to complete Set	chedules L, M-1, and M-	2; Item F on page 1 of Fo	rm 1065;				
	or Item L on Schedule K-1.							
7	Is this partnership a publicly traded partnership as de					X		
8								
	principal amount of the debt?							
9	Has this partnership filed, or is it required to file, Form	n 8918, Material Advisor	Disclosure Statement, to	provide information on any				
	reportable transaction?					X		
10	At any time during calendar year 2014, did the partne	•	-	-				
	foreign country (such as a bank account, securities a							
	requirements for FinCEN Form 114, Report of Foreign	n Bank and Financial Acc	ounts (FBAR). If "Yes," en	ter the name of the foreign country.				
	•					X		

Form **1065** (2014)

Sc	nedule 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		Х					
12a	Is the partnership making, or had it previously made (and not revoked), a section 754 election?		Х					
	See instructions for details regarding a section 754 election.							
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		Х					
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 instructions		Х					
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)							
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?		Х					
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.							
18a	Did you make any payments in 2014 that would require you to file Form(s) 1099? See instructions		Х					
b	If "Yes," did you or will you file required Form(s) 1099?							
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.							
Desi	gnation 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 Identifying							
	nated TMP ► JAMISON CUTTER number of TMP ► 542-90-6	514						
	TMP is an page of TMP Phone							
repres	name of TMP Prone number of TMP							
Addre	ss of 731 MUELLER DRIVE							
desig	nated TMP LITTLETON, CO 80129							
	Form 1	1065	(2014)					

Sc	hed	ule K Partners' Distributive Share Items		Total amount
	1	Ordinary business income (loss) (page 1, line 22)	1	-102,293.
	2	Net rental real estate income (loss) (attach Form 8825)	2	
)		a Other gross rental income (loss)		
		b Expenses from other rental activities (attach statement) 3b		
		c Other net rental income (loss). Subtract line 3b from line 3a	3c	
	4		4	
Income (Loss)	5	Interest income	5	
Ĩ	6	Dividends: a Ordinary dividends	6a	
шe	ľ	b Qualified dividends 6b		
ည	7	Royalties	7	
-	8	Net short-term capital gain (loss) (attach Schedule D (Form 1065))	8	
	l	a Net long-term capital gain (loss) (attach Schedule D (Form 1065))	9a	
		b Collectibles (28%) gain (loss) (attach Schedule B (1911 1965)) 9b	Ja	
		c Unrecaptured section 1250 gain (attach statement)	-	
	10	Net section 1231 gain (loss) (attach Form 4797)	10	
	11	Other income (loss) (see instructions) Type	11	
			12	
пs		Section 179 deduction (attach Form 4562) a Contributions SEE STATEMENT 3	13a	3,017.
Deductions	ı		13b	3,017
ap		b Investment interest expense		
De		c Section 59(e)(2) expenditures: (1) Type ► (2) Amount ►	13c(2)	
		d Other deductions (see instructions) Type	13d 14a	-102,293.
Self- Employ- ment	14	a Net earnings (loss) from self-employment		102,275.
elf-		b Gross farming or fishing income	14b	2,495,548.
<u>от</u> Е	45	c Gross nonfarm income	14c	2,493,340.
ts		a Low-income housing credit (section 42(j)(5))	15a	
		b Low-income housing credit (other)	15b	
Credits		c Qualified rehabilitation expenditures (rental real estate) (attach Form 3468, if applicable)	15c	
Ö	ı	d Other rental real estate credits (see instructions) Type ▶	15d	
	ı	e Other rental credits (see instructions) Type	15e	
		f Other credits (see instructions) Type	15f	
	16	a Name of country or U.S. possession ►	106	
		b Gross income from all sources	16b 16c	
ns		c Gross income sourced at partner level	100	
ë		Foreign gross income sourced at partnership level d Passive category e General category f Other f Other f	164	
ansactions			16f	
		Deductions allocated and apportioned at partner level g Interest expense ► h Other ►	16h	
Foreign Tr		Deductions allocated and apportioned at partnership level to foreign source income	16h	
ēig		Dessitue	16k	
For		i Passive	161	
			16m	
		mReduction in taxes available for credit (attach statement) n Other foreign tax information (attach statement)	10111	
	_		17a	-14,473.
×		a Post-1986 depreciation adjustment	17b	11,170
Alternative Minimum Tax (AMT) Items		b Adjusted gain or loss c Depletion (other than oil and gas)	17c	
E E			17d	
Zira Ağır		d Oil, gas, and geothermal properties - gross income	17 u	
₹≣₹		e Oil, gas, and geothermal properties - deductions f. Other AMT items (attach ctatement)	17f	
	_	f Other AMT items (attach statement)	171 18a	
_		a Tax-exempt interest income	18b	
ţi		b Other tax-exempt income c Nondeductible expenses SEE STATEMENT 4	18c	14.
шa		a Distributions of cash and marketable securities	19a	T-1.
for			19a	
Other Information		b Distributions of other property	20a	
ţţ		a Investment income h Investment expenses	20a	
0		b Investment expenses c Other items and amounts (attach statement)	200	

Analysis of Net Income (Loss)									
1 Net income (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								
2 Analysis partner t	,	(i) Corporate	(ii) Individual (active)	(iii) Individual (passive)	(iv) Partnership	(v) Exe Organiz			(vi) Nominee/Other
a General	oartners								
h Limited i	nartners		-105.310.						

Schedule L Balance Sheets per	Books			
Balance Chects per	Beginning (of tay year	End of t	ay vear
Assets	(a)	(b)	(c)	(d)
1 Cash	(α)	83,242.	(0)	133,295.
2a Trade notes and accounts receivable	14,145.	00,12121	17,301.	
b Less allowance for bad debts		14,145.		17,301.
3 Inventories		20,748.		26,901.
4 U.S. government obligations				·
5 Tax-exempt securities				
6 Other current assets (attach statement)	STATEMENT 5	841,227.		894,422.
7a Loans to partners (or persons related to partners)		-		
b Mortgage and real estate loans				
8 Other investments (attach statement)				
9a Buildings and other depreciable assets	1,965,159.		1,995,536.	
b Less accumulated depreciation	1,068,815.	896,344.	1,260,258.	735,278.
10a Depletable assets				
b Less accumulated depletion				
11 Land (net of any amortization)				
12a Intangible assets (amortizable only)	244,463.		244,463.	
b Less accumulated amortization	72,226.	172,237.	88,630.	155,833.
13 Other assets (attach statement)				
14 Total assets		2,027,943.		1,963,030.
Liabilities and Capital				
15 Accounts payable		91,508.		89,865.
16 Mortgages, notes, bonds payable in less than 1 year				
(,	STATEMENT 6	384,966.		408,129.
18 All nonrecourse loans				
19a Loans from partners (or persons related to partners)				
b Mortgages, notes, bonds payable in 1 year or more	_	1,018,023.		465,549.
, , , , , , , , , , , , , , , , , , , ,	STATEMENT 7	1,235,691.		1,808,210.
21 Partners' capital accounts		-702,245.		-808,723.
22 Total liabilities and capital		2,027,943.		1,963,030.
Schedule M-1 Reconciliation of	I ncome (Loss) per B nay be required to file Sch			
		8 • 6 Income recorded on		
Net income (loss) per books Income included on Schedule K, lines 1, 2, 3c,	100,47		1 through 11 (itemize):	
5, 6a, 7, 8, 9a, 10, and 11, not recorded on boo	ke	a Tax-exempt interest	· '	
this year (itemize):	NO	a rax exempt interest	Ψ	
3 Guaranteed payments (other than health	_	7 Deductions included	on Schedule K lines 1	
insurance)			I, not charged against	
4 Expenses recorded on books this year not included on		book income this yea		
Schedule K, lines 1 through 13d, and 16l (itemize):		a Depreciation \$		
STMT 8 $1,\overline{15}$	$\overline{4}$.			
a Depreciation \$	-	8 Add lines 6 and 7		
b Travel and entertainment \$ 1.	$\overline{4}$. 1,16		sis of Net Income (Loss),	
5 Add lines 1 through 4			8 from line 5	-105,310.
Schedule M-2 Analysis of Partne	rs' Capital Account	S	***	-
1 Balance at beginning of year			h	
2 Capital contributed: a Cash			perty	
b Property		7 Other decreases (iter		
3 Net income (loss) per books		8.		
4 Other increases (itemize):		8 Add lines 6 and 7		
5 Add lines 1 through 4	-808,72	3 • 9 Balance at end of year.	Subtract line 8 from line 5	-808,723.

5

Form 1125-A

(Rev. December 2012)

Department of the Treasury Internal Revenue Service

Cost of Goods Sold

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

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

OMB No. 1545-2225

ame		Employer Identification number
CUTTER HIGHLANDS RANCH, LLC		26-3047014
1 Inventory at beginning of year	1	20,748.
2 Purchases	2	1,064,583.
3 Cost of labor	3	
4 Additional section 263A costs (attach schedule)	4	
5 Other costs (attach schedule)	5	
Total. Add lines 1 through 5	6	1,085,331.
7 Inventory at end of year	7	26,901.
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	1,058,430.
Ga Check all methods used for valuing closing inventory: (i) X 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)		ightharpoonup
d If the LIFO inventory method was used for this tax year, enter amount of closing inventory computed under LIFO		
e If property is produced or acquired for resale, do the rules of Section 263A apply to the corporation?		Yes X No
f Was there any change in determining quantities, cost, or valuations between opening and closing inventory?		
If "Yes," attach explanation.		
or Paperwork Reduction Act Notice, see separate instructions.		Form 1125-A (Rev. 12-2012)

SCHEDULE B-1 (Form 1065)

(Rev. December 2011) Department of the Treasury Internal Revenue Service

Information on Partners Owning 50% or More of the Partnership

► Attach to Form 1065. See instructions.

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,

OMB No. 1545-0099

Name of partnership

Part I

Employer identification number

CUTTER HIGHLANDS RANCH, LI	CUTTER	HIGHLANDS	RANCH.	LL(
----------------------------	--------	-----------	--------	-----

26-3047014

tax-exempt organization, or any foreign government that	owns, directly or indirectly	y, an interest of 50%	or more in the profit, loss, o	or capital of the
partnership (see instructions).		1		1
(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
JAMISON CUTTER	542-90-6514	UNITED STATES	100.00
JOHN CUTTER	542-50-7455	UNITED STATES	100.00

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 1065.

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

Depreciation and Amortization (Including Information on Listed Property)

► Attach to your tax return.

OTHER

Attachment Sequence No. **179**

OMB No. 1545-0172

Department of the Treasury Internal Revenue Service (99)

► Information about Form 4562 and its separate instructions is at www.irs.gov/form4562.

Business or activity to which this form relates Name(s) shown on return

Identifying number

CU	TTER HIGHLANDS RANC	H, LLC					26-3047014
Pai	t Election To Expense Certain Prope	erty Under Section 1	79 Note: If you have any l	sted property, c	complete Par	t V before yo	u complete Part I.
1 N	Maximum amount (see instructions)					1	500,000.
2 T	otal cost of section 179 property place	ced in service (see	instructions)			2	
3 T	hreshold cost of section 179 property	y before reduction	in limitation			3	2,000,000.
4 F	Reduction in limitation. Subtract line 3	from line 2. If zero	or less, enter -0-			4	
5 D	ollar limitation for tax year. Subtract line 4 from lin	e 1. If zero or less, enter	-0 If married filing separately, se	ee instructions		5	
6	(a) Description of p	roperty	(b) Cost (bus	iness use only)	(c) Electe	ed cost	
	isted property. Enter the amount fron						
	otal elected cost of section 179 prop						
	entative deduction. Enter the smaller						
	Carryover of disallowed deduction from						
	Business income limitation. Enter the s						
	Section 179 expense deduction. Add I					12	
	Carryover of disallowed deduction to 2 : Do not use Part II or Part III below for			13			
Pai				ıda liatad arana	urtu 1		
	Special depreciation allowance for qua		-				
	• .				·	14	8,876.
	ne tax year Property subject to section 168(f)(1) el						0,070.
	Other depreciation (including ACRS)					16	
_	t III MACRS Depreciation (Do no		operty.) (See instructions			10	
	С д оргосии.с. (д с н	or mendad neted p.	Section A				
17 N	MACRS deductions for assets placed	in service in tax ve	ears beginning before 20	14		17	170,663.
	you are electing to group any assets placed in ser						, , , , , , ,
			e During 2014 Tax Year			iation Syste	m
	(a) Classification of property	(b) Month and year placed	(c) Basis for depreciation (business/investment use	(d) Recovery	(e) Convention		(g) Depreciation deduction
	(a) Glassification of property	in service	only - see instructions)	period	(c) Convention	(i) Wictiod	(g) Depreciation deduction
19a	3-year property						
b	5-year property		6,008		MQ	200DB	300.
С	7-year property		2,868	• 7	MQ	200DB	717.
d	10-year property						
e	15-year property						
f	20-year property						
g	25-year property			25 yrs.		S/L	
h	Residential rental property	/		27.5 yrs.	MM	S/L	
	nesidential rental property	/		27.5 yrs.	MM	S/L	
i	Nonresidential real property	/		39 yrs.	MM	S/L	
		/			MM	S/L	
		Placed in Service	During 2014 Tax Year U	Jsing the Alteri	native Depre	 -	tem
<u>20a</u>	Class life					S/L	
b	12-year			12 yrs.		S/L	
С	40-year	/		40 yrs.	MM	S/L	
	T IV Summary (See instructions.)						
	isted property. Enter amount from lin					21	
	otal. Add amounts from line 12, lines						100 EE <i>c</i>
	inter here and on the appropriate line			ations - see inst	r	22	180,556.
	or assets shown above and placed in	-	e current year, enter the				
	aution of the besie stude whele to	tion 000 /		00			
41625 01-08-	ortion of the basis attributable to sec			23			Form 4562 (2014)

Dart V | Liete

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

	Note: For any v through (c) of S	vehicle for wi Section A, all	hich you are us of Section B.	sing the and Sec	standar	d mileag applica	ie rate oi ble.	dedu	cting lease	expens	se, comp	^{lete} only	. 24a, 24	1b, colun	nns (a)
			on and Other					nstruc	tions for li	mits for	oasseng	er auton	nobiles.)		
248	Do you have evidence to s	support the bu	siness/investme	nt use cla	aimed?	Y	es	No	24b If "Y	es," is th	ne evide	nce writt	ten?	Yes	No
	(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentag	_{je} ot	(d) Cost or ther basis	(hu	(e) sis for depre siness/inve use only	eciation stment	(f) Recovery period	Me	(g) thod/ vention	(Depre	h) eciation uction	Elec sectio	(i) cted on 179 ost
25	Special depreciation alloused more than 50% in				-		-	-	-		25				
26	Property used more than										. 25	<u> </u>			
20	Property used more tha		i									l .			
		: :		6											
		: :	9												
27	Property used 50% or le	es in a gual								l					
21	Froperty used 50% or it	· ·	ı	6						S/L -		1			
		1 1		6						S/L -					
			9,							S/L -					
20	Add amounts in column	(h) lines 25			e and or	line 21	nage 1				28				
	Add amounts in column												29		
23	Add amounts in column	(1), 11116 20. L					on Use						. 23		
Co	mplete this section for ve	hiclos usod					_			or rolato	d norcon	lf vou	providos	Lyohiolog	•
	our employees, first ans														5
				(;	a)	(b)		(c)	(d)	(4	e)	(f)
30	Total business/investment	miles driven d	uring the	Veh	nicle	Vel	nicle	V	/ehicle	Vel	nicle	Veh	nicle	Veh	icle
	year (do not include comr	nuting miles)													
31	Total commuting miles of														
	Total other personal (no														
	driven														
33	Total miles driven during														
	Add lines 30 through 32) ·													
34	Was the vehicle availab			Yes	No	Yes	No	Yes	No No	Yes	No	Yes	No	Yes	No
	during off-duty hours?														
35	Was the vehicle used po	rimarily by a	more												
	than 5% owner or relate	ed person?													
36	Is another vehicle availa	ble for perso	onal												
	use?														
		Section C	- Questions f	or Empl	loyers V	Vho Pro	vide Vel	nicles	for Use b	y Their I	Employe	ees			
Ans	swer these questions to d	determine if	you meet an e	xceptior	n to com	pleting	Section I	B for v	ehicles us	ed by e	mployee	s who a ı	r e not m	ore than	5%
ow	ners or related persons.													_	
37	Do you maintain a writte	en policy stat	tement that pro	ohibits a	all perso	nal use o	of vehicle	es, inc	luding cor	nmuting	, by you	r		Yes	No
	employees?														
38	Do you maintain a writte	en policy stat	tement that pro	ohibits p	personal	use of v	ehicles,	excep	ot commut	ing, by y	our/				
	employees? See the ins					fficers, c	lirectors	or 1%	6 or more	owners					
	Do you treat all use of ve													-	
40	Do you provide more that		-					-							
	the use of the vehicles,														
41	Do you meet the require														
_	Note: If your answer to	37, 38, 39, 4	0, or 41 is "Yes	s," do no	ot comp	lete Sec	tion B fo	r the c	covered ve	hicles.					
P	art VI Amortization		<u> </u>	/I \										(6)	
	(a) Description of	f costs		(b) amortization begins		(c) Amortizat amount	ole t		(d) Code section		(e) Amortiza period or per		Ar fo	(f) nortization r this year	
42	Amortization of costs th	at begins du	ring your 2014	tax yea	ar:										
				: :											
				: :											16:
43	Amortization of costs th	at began be	fore your 2014	tax yea	ar							43		16,	404.

Form **4562** (2014)

416252 01-08-15

44 Total. Add amounts in column (f). See the instructions for where to report

Worksheet for Figuring Net Earnings (Loss) From Self-Employment

Name of partnership				Employer identification number
CUTTER HIGHLANDS RANCH, LLC				26-3047014
1 a Ordinary income (loss) (Schedule K, line 1)	1a	-102,293.		
b Net income (loss) from CERTAIN rental real estate activities	1b			
c Net income (loss) from other rental activities (Schedule K, line 3c)	1c			
d Net loss from Form 4797, Part II, line 17, included on line 1a above. Enter as a positive amount	1d			
e Other additions	1e			
f Combine lines 1a through 1e	1f	-102,293.		
2 a Net gain from Form 4797, Part II, line 17, included on line 1a above	2a			
b Other subtractions	2b			
c Add lines 2a and 2b	2c			
3 a Subtract line 2c from line 1f. If line 1f is a loss, increase the loss on line 1f by the amount on line 2c	3a	-102,293.		
b Part of line 3a allocated to limited partners, estates, trusts, corporations, exempt organizations, and IRAs	3b			
c Subtract line 3b from line 3a			3с	-102,293.
4 a Guaranteed payments to partners (Schedule K, line 4) derived from a trade or business				
as defined in section 1402(c)	4a			
b Part of line 4a allocated to individual limited partners for other than services and to				
estates, trusts, corporations, exempt organizations, and IRAs	4b			
c Subtract line 4b from line 4a			4c	
5 Net earnings (loss) from self-employment. Combine lines 3c and 4c. Enter here and on Sch	edule K, lin	e 14a	5	-102,293.

Section 1.263(a)-1(f) De Minimis Safe Harbor Election

Cutter Highlands Ranch, LLC 2253 E. Briarwood Ave, Ste 509 Littleton, CO 80122

Employer Identification Number: 26-3047014

For the Year Ending December 31, 2014

Cutter Highlands Ranch, LLC is making the de minimis safe harbor election under Reg. Sec. 1.263(a)-1(f).

			
FORM 1065	TAX	EXPENSE	STATEMENT 1
DESCRIPTION			AMOUNT
TAXES - PAYROLL			92,236.
TAXES - OTHER			10,476.
TAXES - SALES			1,978.
TAXES - REAL ESTATE			37,383.
TOTAL TO FORM 1065, LINE 14			142,073.
FORM 1065	OTHER	DEDUCTIONS	STATEMENT 2
DESCRIPTION			AMOUNT
ACCOUNTING			32,179.
ADVERTISING			131,336.
ALLOCATED G&A			61,329.
AMORTIZATION EXPENSE			16,404.
AUTOMOBILE			15,531.
BANK & CREDIT CARD FEES			95,570.
BUILDING INSURANCE			933.
CASH SHORT & OVER			7,587.
COMPUTER SUPPLIES			23,998.
CONTRACT MAINTENANCE			12,541.
DUES AND SUBSCRIPTIONS			9,362.
EQUIPMENT RENTAL			3,204.
INSURANCE - AUTO			2,806.
INSURANCE - LIABILITY			14,512.
INSURANCE - WORKERS COMP			25,824.
JANITORIAL & CLEANING			14,369.
LINEN			4,168.
MEALS AND ENTERTAINMENT			15.
MENUS			6,730.
MUSIC			1,147.
OFFICE SUPPLIES			6,978.
OPERATING SUPPLIES			35,128.
PARKING			833.
PEST CONTROL			3,166.
POSTAGE/FREIGHT/COURIER			6,440.
ROYALTY SAFETY SHOES			172,194.
SECURITY SERVICES			2. 2,506.
SMALLWARES			8,542.
TEAM MEETINGS			962.
TELEPHONE			9,692.
TRAVEL			246.
UNIFORMS & LAUNDRY			4,417.
UTILITIES			58,268.
TOTAL TO FORM 1065, LINE 20			788,919.

SCHEDULE K CHARITABLE CO	ONTRIBUTIONS	STATEMENT	3
DESCRIPTION	TYPE	AMOUNT	
DONATIONS	CASH (50%)	3,0	17.
TOTALS TO SCHEDULE K, LINE 13A		3,0	17.
SCHEDULE K NONDEDUCTIBE	LE EXPENSE	STATEMENT	4
DESCRIPTION		AMOUNT	
EXCLUDED MEALS AND ENTERTAINMENT EXPENSE	ES		14.
TOTAL TO SCHEDULE K, LINE 18C			14.
SCHEDULE L OTHER CURREN	NT ASSETS	STATEMENT	5
DESCRIPTION	BEGINNING OF TAX YEAR	END OF TA	x
A/R - EMPLOYEES DUE FROM AFFILIATE PREPAID EXPENSES	225. 828,768. 12,234.	885,1 8,8	
TOTAL TO SCHEDULE L, LINE 6	841,227.	894,4	22.
SCHEDULE L OTHER CURRENT	LIABILITIES	STATEMENT	6
DESCRIPTION	BEGINNING OF TAX YEAR	END OF TA	x
ACCRUED PAYROLL ACCRUED EXPENSES PAYROLL TAXES PAYABLE SALES TAX PAYABLE GIFT CERTIFICATES PAYABLE RENOVATIONS CREDIT PERSONAL PROPERTY TAXES PAYABLE OTHER PAYROLL LIABILITIES	27,812. 15,087. 11,090. 14,607. 26,252. 278,341. 11,777.	29,4 57,3 12,5 13,8 31,8 253,0 9,6	47. 33. 13. 63.
TOTAL TO SCHEDULE L, LINE 17	384,966.	408,1	20

SCHEDULE L		OTHER	LIABILITI	ES			STATEMENT	7
DESCRIPTION						NING OF YEAR	END OF TA. YEAR	X
DUE TO AFFILI	ATE				1,2	235,691.	1,808,2	10.
TOTAL TO SCHE	DULE L				1,2	235,691.	1,808,2	10.
SCHEDULE M-1	EXPENSES RECORD	ED ON	BOOKS NOT	DEDU	JCTED II	N RETURN	STATEMENT	8
DESCRIPTION							AMOUNT	
FINES, VIOLAT	IONS & PENALTY						1,1	54.
TOTAL TO SCHE	DULE M-1, LINE 4						1,1	54.

Schedule K-1 (Form 1055) 2014	Final K-1
(Form 1065) For calendar year 2014, or tax Department of the Treasury year beginning	Part III Partner's Share of Current Year Income, Deductions, Credits, and Other Items
Internal Revenue Service ending	1 Ordinary business income (loss) 15 Credits
Partner's Share of Income, Deductions,	-86,949.
Credits, etc. ► See separate instructions.	2 Net rental real estate income (loss)
Part I Information About the Partnership	3 Other net rental income (loss)
A Partnership's employer identification number 26-3047014	4 Guaranteed payments
B Partnership's name, address, city, state, and ZIP code	5 Interest income
CUTTER HIGHLANDS RANCH, LLC 2253 E. BRIARWOOD AVE, STE 509 LITTLETON, CO 80122	6a Ordinary dividends 17 Alternative min tax (AMT) items 6b Qualified dividends A -12,302.
C IRS Center where partnership filed return	dualified dividends A -12,302.
E-FILE	7 Royalties
D Check if this is a publicly traded partnership (PTP)	8 Net short-term capital gain (loss) nondeductible expenses C* 12.
Part II Information About the Partner	9a Net long-term capital gain (loss)
E Partner's identifying number $542-90-6514$	9b Collectibles (28%) gain (loss) 19 Distributions
F Partner's name, address, city, state, and ZIP code	9c Unrecaptured sec 1250 gain
JAMISON CUTTER 731 MUELLER DRIVE	10 Net section 1231 gain (loss)
LITTLETON, CO 80129	11 Other income (loss)
G General partner or LLC X Limited partner or other LLC member-manager member	
H X Domestic partner Foreign partner	
I1 What type of entity is this partner?INDIVIDUAL	12 Section 179 deduction
12 If this partner is a retirement plan (IRA/SEP/Keogh/etc.), check here	
J Partner's share of profit, loss, and capital:	13 Other deductions
Beginning Ending	A 2,564.
Loss 85.000000% 85.000000%	
Capital 85.000000% 85.000000%	14 Self-employment earnings (loss)
K Partner's share of liabilities at year end:	A -86,949.
Nonrecourse\$	C 2,121,216.
Qualified nonrecourse financing \$	*See attached statement for additional information.
Recourse \$ 465,549.	
L Partner's capital account analysis: Beginning capital account\$	
Capital contributed during the year \$	δίς O
Current year increase (decrease) $\qquad \qquad \qquad$	es n
Withdrawals & distributions \$(ာ ဇွ
Ending capital account \$ -701,259	For IRS
X Tax basis GAAP Section 704(b) book Other (explain)	
M Did the partner contribute property with a built-in gain or loss? Yes X No	
If "Yes", attach statement (see instructions)	

SCHEDULE K-1 NONDEDUCT:	IBLE EXPENSES, BOX	18, CODE C	
DESCRIPTION	PARTNER FILING IN	STRUCTIONS	AMOUNT
EXCLUDED MEALS AND ENTERTAINMENT EXPENSES	NONDEDUCTIBLE POR	TION	12.
TOTAL TO SCHEDULE K-1, BOX 18,	CODE C	=	12.
SCHEDULE K-1 CURRENT	YEAR INCREASES (DEC	CREASES)	
DESCRIPTION		AMOUNT	TOTALS
ORDINARY INCOME (LOSS)	-	-86,949.	
SCHEDULE K-1 INCOME SUBTO	ral		-86,949.
CHARITABLE CONTRIBUTIONS		-2,564.	
SCHEDULE K-1 DEDUCTIONS SU	UBTOTAL		-2,564.
NET INCOME (LOSS) PER SCH	EDULE K-1	_	-89,513.
NONDEDUCTIBLE EXPENSES FINES, VIOLATIONS & PENALTY		-12. -981.	
OTHER INCREASES OR DECREAS	SES SUBTOTAL		-993.
TOTAL TO SCHEDULE K-1, ITEM L			-90,506.

Schedule K-1 (Form 1065) 2014	Final K-1 Amended K-1 OMB No. 1545-012
(Form 1065) For calendar year 2014, or tax Department of the Treasury year beginning	Part III Partner's Share of Current Year Income Deductions, Credits, and Other Items
Internal Revenue Service ending	1 Ordinary business income (loss) 15 Credits
Partner's Share of Income, Deductions,	-15,344.
Credits, etc. ► See separate instructions.	2 Net rental real estate income (loss)
Part I Information About the Partnership	3 Other net rental income (loss)
A Partnership's employer identification number 26-3047014	4 Guaranteed payments
B Partnership's name, address, city, state, and ZIP code	5 Interest income
CUTTER HIGHLANDS RANCH, LLC 2253 E. BRIARWOOD AVE, STE 509 LITTLETON, CO 80122	6a Ordinary dividends 17 Alternative min tax (AMT) items 6b Qualified dividends A -2,171.
C IRS Center where partnership filed return	dualilled dividends A 2,171.
E-FILE	7 Royalties
D Check if this is a publicly traded partnership (PTP)	8 Net short-term capital gain (loss) nondeductible expenses C* 2.
Part II Information About the Partner	9a Net long-term capital gain (loss)
E Partner's identifying number 542-50-7455	9b Collectibles (28%) gain (loss) 19 Distributions
F Partner's name, address, city, state, and ZIP code	9c Unrecaptured sec 1250 gain
JOHN CUTTER	10 Net section 1231 gain (loss)
2188 WYNTERBROOK DRIVE	10 Net Section 1231 gain (1033)
HIGHLANDS RANCH, CO 80126	11 Other income (loss)
G General partner or LLC X Limited partner or other LLC	
member-manager member	
H X Domestic partner Foreign partner I1 What type of entity is this partner? INDIVIDUAL	12 Section 179 deduction
12 If this partner is a retirement plan (IRA/SEP/Keogh/etc.), check here	12 Section 173 deduction
J Partner's share of profit, loss, and capital:	13 Other deductions
Beginning Ending	A 453.
Profit 15.000000% 15.000000%	
Loss 15.000000% 15.000000%	
Capital 15.000000% 15.000000%	14 Self-employment earnings (loss)
K Partner's share of liabilities at year end:	A -15,344.
Nonrecourse \$	C 374,332.
Qualified nonrecourse financing \$ Recourse \$ 1,808,210.	*See attached statement for additional information.
Recourse \$ 1,808,210.	
L Partner's capital account analysis:	
Beginning capital account $\qquad \qquad \qquad$	Only
Capital contributed during the year \$	Ο ψ
Current year increase (decrease) \$ -15,972.	S .
Withdrawals & distributions $\$(__)$ Ending capital account $\$_$ -107 , 464 •	For IRS
Ending capital account $\qquad \qquad \qquad$	P
X Tax basis GAAP Section 704(b) book Other (explain)	
M Did the partner contribute property with a built-in gain or loss? Yes X No	
If "Yes", attach statement (see instructions)	

SCHEDULE K-1 NONDEDUCTIN	BLE EXPENSES, BOX	18, CODE C	
DESCRIPTION	PARTNER FILING IN	ISTRUCTIONS	AMOUNT
EXCLUDED MEALS AND ENTERTAINMENT EXPENSES	NONDEDUCTIBLE POF	RTION	2.
TOTAL TO SCHEDULE K-1, BOX 18, 0	CODE C	=	2.
SCHEDULE K-1 CURRENT Y	YEAR INCREASES (DE	CCREASES)	
DESCRIPTION		AMOUNT	TOTALS
ORDINARY INCOME (LOSS)		-15,344.	
SCHEDULE K-1 INCOME SUBTOTA	AL		-15,344.
CHARITABLE CONTRIBUTIONS		-453.	
SCHEDULE K-1 DEDUCTIONS SUR	BTOTAL		-453.
NET INCOME (LOSS) PER SCHEI	DULE K-1		-15,797.
NONDEDUCTIBLE EXPENSES FINES, VIOLATIONS & PENALTY		-2. -173.	
OTHER INCREASES OR DECREASE	ES SUBTOTAL		-175.
TOTAL TO SCHEDULE K-1, ITEM L		_	-15,972.

2014 TAX RETURN FILING INSTRUCTIONS

COLORADO FORM 106

FOR THE YEAR ENDING

DECEMBER 31, 2014

Prepared for	
	CUTTER HIGHLANDS RANCH, LLC 2253 E. BRIARWOOD AVE, STE 509 LITTLETON, CO 80122
Prepared by	
	MEYERS BROTHERS KALICKA, P.C. 330 WHITNEY AVE, SUITE 800 HOLYOKE, MA 01040
To be signed and dated by	A MEMBER OF THE LLC
Amount of tax	Total tax \$ 0.00 Less: payments and credits \$ 0.00 Plus: other amount \$ 0.00 Plus: interest and penalties \$ 0.00 NO PMT REQUIRED \$
Overpayment	Credited to your estimated tax \$ 0.00 Other amount \$ 0.00 Refunded to you \$ 0.00
Mail tax return and check (if applicable) to	THIS RETURN HAS BEEN PREPARED FOR ELECTRONIC FILING. IF YOU WISH TO HAVE IT TRANSMITTED TO THE CDOR, PLEASE SIGN, DATE AND RETURN DR-8453P TO OUR OFFICE. WE WILL THEN SUBMIT THE ELECTRONIC RETURN TO THE CDOR.
Forms to be distributed to partners	ENCLOSED ARE COPIES OF SCHEDULE K-1 TO BE DISTRIBUTED TO THE MEMBERS.
Return must be mailed on or before	RETURN DR-8453P TO US BY APRIL 15, 2015.
Special Instructions	DO NOT MAIL THE PAPER COPY OF THE RETURN TO THE CDOR.



DR 8453P (08/07/14)

COLORADO DEPARTMENT OF REVENUE
Denver, CO 80261-0006

www.TaxColorado.com

State of Colorado Partnership/S-Corp Income Tax Declaration for Electronic Filing

When feasible attach in PDF format to your e-filed return

Do not mail this form to the IRS					
or the Colorado Department of Revenue	Γz	v Voor Poo	inning (MM/DD/VV)	_	Tax Year End (MM/DD/YY)
Retain with your records	12	Tax Year Beginning (MM/DD/YY) 01/01/14			12/31/14
Business Name CUTTER HIGHLANDS RANCH, LLC	•				Colorado Account Number
Street Address 2253 E. BRIARWOOD AVE, STE 509					Federal Identification Number 26-3047014
City LITTLETON	St	ate CO	ZIP 80122		Phone Number
Part I - Tax	x Return Inf	ormation	1		
1. Total Income, from federal Schedule K				1	s -102,293
2. Allowable deductions from federal Schedule K			:	2	\$
3. Colorado Tax, line 12 on Colorado Form 106, if applicable			;	3	\$
4. Colorado Payments, line 19 on Colorado Form 106				4	\$
5. Amount You Owe, line 27 on Colorado Form 106				5	\$
6. Refund, line 30 Colorado Form 106				6	\$
Part II - Dec	claration of	Taxpaye	er		
Under penalties of perjury, I declare that I am an officer of the compa	any listed abov	e and the ir	nformation provided f	for (electronic filing and the
amounts shown in Part I above agree with the amounts shown on th	ne company's 2	2014 Federa	ıl/Colorado income ta	ax r	eturns, and that said tax
returns, statements, schedules and attachments are true, correct, are					
Electronic Return Originator (ERO) if applicable) may be required to p					
schedules and attachments upon request by the Colorado Departme	ent of Revenue	e at any time	e during the period co	ove	red by the Colorado statute
of limitations. Signature	ate (MM/DD/Y	Y) Title			
Digitaturo	atc (MINI/DD/ 1	1) 11110	MEMBER		
Part III - Declaration	of ERO/Pr	eparer/T			
		-			
If the transmitter did not prepare the tax return, check here	X				
If I am not the preparer, I declare only that the amounts shown in Pa	art I above agre	e with the a	mounts shown on th	e ta	axpayer's 2014 Federal/
Colorado income tax returns. If I am the preparer, under penalties of	f perjury I decla	re that I hav	ve reviewed the abov	e ta	axpayer's 2014 Federal/
Colorado income tax returns and that the information provided to me	e by the taxpay	yer and the	amounts shown in Pa	art	I above agree with the
amounts shown on said tax returns, and that said tax returns, staten	•		•		•
of my knowledge and belief. As preparer, I further declare that I have	e obtained the	taxpayer's	signature on this form	n at	the time of filing and have
provided the taxpayer with copies of all forms and information filed.	I also agree to	maintain thi	s signed Form (DR 8	453	3P) for the period covered

by the Colorado statute of limitations, and to provide paper copies of this declaration, said returns, withholding statements, schedules, and

Preparer Identification Number or Your SSN

P00382590

Date (MM/DD/YY)

03/20/15

attachments upon request by the Colorado Department of Revenue at any time during this period.

X

Check if also Preparer

ERO's Signature

Form 106 (09/08/14) **COLORADO DEPARTMENT OF REVENUE** Denver, CO 80261-0006

(0043)

Colorado

Pass-Through Entity and Composite Nonresident Income Tax Form 106

Denver, CO 80261-0006



Fiscal Year Begin	ning (MM/DD):	2014	Ending (N	/M/DD/YYYY):	│ •	Mark for Amended Return
		12011			Account	: Number
-			ı			
509	City LITTLE	TON	I			ZIP 80122
reportable trans	action, mark t	his box			•	
LLC	LP	LLP	LL	LP	Asso	ciation Non-Profit
	C. End				ı federal	return
	E. Date	e of orga			ration (M	1M/DD/YY)
_						· —
Explai	n:					
						Round to the nearest dollar
					• 1	-102,29300
					• 2	0 0
					• 3	0 0
					4	-102,29300
					• 5	0 0
					• 6	0 0
					• 7	0 0
					8	0 0
					9	-102,29300
	Income is al	l Colorad	do Incom	ne	•10	-102,29300
	509 reportable trans LLC	City LITTLE reportable transaction, mark to the control of the con	City IITTLETON reportable transaction, mark this box LLC	City Interest Line State City Line Line Line Co. Ending depreciable a 1,995 E. Date of organization 10/3 G. If the IRS has made any adjustments filed amended federal returns during Explain:	Colorado / Federal Er 20 509 City LITTLETON reportable transaction, mark this box LLC LP LLP LLLP C. Ending depreciable assets from 1,995,536. E. Date of organization or incorpor 10/13/08 G. If the IRS has made any adjustments to your fe filed amended federal returns during the last for	Colorado Account Federal Employer

File at: www.Colorado.gov/RevenueOnline - or - Mail to and make checks payable to: Colorado Department of Revenue



Form 106 (09/08/14) COLORADO DEPARTMENT OF REVENUE Denver, CO 80261-0006 Form 106 Part II

Pai	rt II: Composite Nonresident Income Tax Return				
Do r	not complete lines 11-27 unless you are filing a composite nonresident return.				
11.	Colorado-source Income of nonresident partners/shareholders electing to be included				0.0
	in this composite filing	11			- 0
	Toward COOK of the acceptable line did				0.0
	Tax; 4.63% of the amount on line 11 106CR credits allocated to these partners/shareholders/members	12	\vdash		
13.	·	13			0.0
	(exclude lines 19 tillough 25, 1 offit 1000h)	10			
14.	Gross conservation easement credit allocated to these partners/shareholders/members	14			0 (
	·				
15.	Total Enterprise Zone credits - as calculated, or from DR 1366 line 77	15			0 (
16.	Certified auction group license fee credit allocated to these				0.0
	partners/shareholders/members	16			- 01
					0.0
17.	Total of lines 13, 14, 15 and 16	17	 		
۱.	Not toy line 10 minus line 17	40			0.0
18.	Net tax, line 12 minus line 17	18			
19	Estimated tax credits and extension payments	19			0.0
<u> </u>	Estimated tax stoute and extension paymonte				
20.	Withholding from lottery or gambling winnings	20			0 (
	Innovative Motor Vehicle Credit from form DR 0617 allocated to these				
	partners/shareholders/members	21			0 (
22.	Authorized Instream Flow Incentive Credit allocated to these				0.0
	partners/shareholders/members	22			0 (
					0.0
23.	Subtotal; add lines 19 to 22	23	 		- 0
	Denethy (include on line 97)	04			0.0
24.	Penalty (include on line 27)	24			
25	Interest (include on line 27)	25			0.0
	Therest (molade on the 27)				
26.	Estimated tax penalty (include on line 27)	26			0 (
27.	If line 18 is greater than line 23, enter amount owed	27			0 (
28.	Overpayment, line 23 minus line 18	28			0 (
					0.0
29.	Overpayment to be credited to estimated tax	29			- 0
	Output and the least total and				0.0
	1 7	30			
	eclare this return to be true, correct and complete under penalty of perjury in the second deg claration of preparer is based on all information of which preparer has any knowledge.	ı ee.			
<u> </u>	cial auton of preparer is based on all information of which preparer has any knowledge.				
	Direct Routing Number Type: Checking	9	Savir	ngs	
	Deposit		_		
	Account Number]		
Mar	with Colorado Donartment of Royanua discuss this return with the paid preparer shows		R2		
1 1	y the Colorado Department of Revenue discuss this return with the paid preparer shown ow (see instructions)?		• X Y	es/	No
	· · · · · · · · · · · · · · · · · · ·	د م حاد		Det '	NANA/DD 222
Sigr	nature of partner or signature and title of officer Date (MM/DD/YY) Person or firm preparing return (name and F MEMBER JAMES BARRETT 4135368				MM/DD/YY) /20/15
I				00/	

The State may convert your check to a one time electronic banking transaction. Your bank account may be debited as early as the same day received by the State. If converted, your check will not be returned. If your check is rejected due to insufficient or uncollected funds, the Department of Revenue may collect the payment amount directly from your bank account electronically.



Form 106 (09/08/14) COLORADO DEPARTMENT OF REVENUE Denver, CO 80261-0006

_{NUE} Form 106 Part III	
Do not submit federal K-1 schedules	

Part III: Identification of Partners, Shareholders or Members					
Part III must be completed for each partner/shareholder/member. DO NOT submit federal K-1 schedules.					
Name of Partner, Shareholder or Member JAMISON CUTTER	SSN or Colorado Account Number 542-90-6514				
Address of Partner, Shareholder or Member 731 MUELLER DRIVE, LITTLETON, CO 80129					
Composite 0107 Attached 0108 Filed	Profit/Loss or Stock Ownership Percentage				
	85.000000				
Name of Partner, Shareholder or Member JOHN CUTTER	SSN or Colorado Account Number 542-50-7455				
Address of Partner, Shareholder or Member 2188 WYNTERBROOK DRIVE, HIGHLANDS RANCH, CO 8	0126				
Composite 0107 Attached 0108 Filed	Profit/Loss or Stock Ownership Percentage				
	15.0000000				
Name of Partner, Shareholder or Member	SSN or Colorado Account Number				
Address of Partner, Shareholder or Member					
Composite 0107 Attached 0108 Filed	Profit/Loss or Stock Ownership Percentage				
Name of Partner, Shareholder or Member	SSN or Colorado Account Number				
Address of Partner, Shareholder or Member					
Composite 0107 Attached 0108 Filed	Profit/Loss or Stock Ownership Percentage				
Name of Partner, Shareholder or Member	SSN or Colorado Account Number				
Address of Partner, Shareholder or Member					
Composite 0107 Attached 0108 Filed	Profit/Loss or Stock Ownership Percentage				
Name of Partner, Shareholder or Member	SSN or Colorado Account Number				
Address of Partner, Shareholder or Member					
Composite 0107 Attached 0108 Filed	Profit/Loss or Stock Ownership Percentage				
Name of Partner, Shareholder or Member	SSN or Colorado Account Number				
Address of Partner, Shareholder or Member	1				
Composite 0107 Attached 0108 Filed	Profit/Loss or Stock Ownership Percentage				
Photocopy this page for additional partners as	needed.				



Form 106 (09/08/14)
COLORADO DEPARTMENT OF REVENUE
Denver, CO 80261-0006

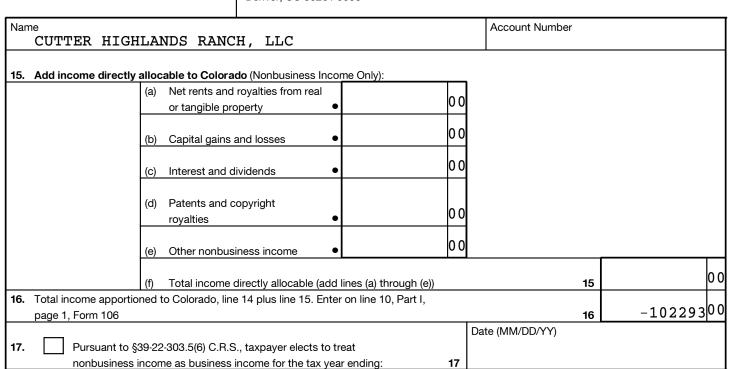
Form 106 Part IV



Par	Part IV - Business Income Apportioned to Colorado by use of the Sales Factor							
Do not send federal return forms or schedules with this return								
1.	Total modified federal	taxable income from line 9, Part I	, page	1, Form 106			1	-10229300
	Business Income Ap	portioned to Colorado by use of	the S	ales Factor				
	Do Not Include Forei	gn Source Revenues						
	Modified from Line 7,	Part I, Page 1, Form 106		Colorado		Total		,
2.	Gross sales of tangible	e personal property	2	• 3553978	0 0	• 3553978	00	
3.	Gross revenue from se	ervices	3	• 0	0 0	• 0	00	
4.	Gross rents and royal	ties from real property	4	• 0	00	• 0	00	
5.	Gross proceeds from	sales of real property	5	• 0	0 0	• 0	00	
6.	Taxable interest and c	lividend income	6	• 0	0 0	• 0	00	
7.	Gain from the sale of i	ntangible personal property	7	• 0	00	• 0	00	
8.	Patent and copyright	royalties	8	•	00	•	00	
9.	Revenue from the per	formance of purely personal servi	ces 9	•	0 0	•	00	
10.	Total revenue (total of	lines 2 through 9 in each column	10	3553978	0 0	3553978	00	
	Line 10 (Colorado) div	ided by line 10 (Total) d 15 only if nonbusiness income	a is he		11	100.0000	ક્ર	
		reated as business income, ent			5 .			
		allocable (Nonbusiness Income O						
	,	(a) Net rents and royalties from r		tangible property	•		00	
		(b) Capital gains and losses			•		00	
		(c) Interest and dividends			•		00	
		(d) Patents and copyright royalti	es		•		00	
		(e) Other nonbusiness income			•		00	
		(f) Total income directly allocable	e (add	lines (a) through (e))			12	0 0
13. Modified federal taxable income subject to apportionment by formula, line 1 less line 12 13 -102						-10229300		
14. Income apportioned to Colorado by formula, line 11 multiplied by line 13 14 -102293						-10229300		



Form 106 (09/08/14) COLORADO DEPARTMENT OF REVENUE Denver, CO 80261-0006 Form 106 Part IV



Partner's Colorado Information

COLORADO SCHEDULE K-1 EQUIVALENT	7 01 0 01 01 01 01 01	r 2014 or Fiscal Year nd Ending ,	2014			
Partner's Name, Address an JAMISON CUTTI 731 MUELLER I	£ R	Partner Number 1 Partner's Identifying Number 542-90-6514				
LITTLETON, CO		Resident X Nonresident Amended Schedule K-1 Final Schedule K-				
	ANDS RANCH, LLC RWOOD AVE, STE 509	Partnership's Identifying Number $26-3047014$ Partner's Percentage of: Ownership 85.00000 Profit and Loss				
Federal income	eral income		-86,949.			
Modifications decreasing fed	reasing federal income deral income					
Total modifications de Federal income modified for	creasing federal income Colorado		-86,949.			

Nonresidents: Colorado source income

COLORADO SCHEDULE K-1

Partner's Colorado Information

For Calendar Year 2014 or Fiscal Year

2014

Beginning	, 2014; and Ending	,	
<u>'</u>			

EQUIVALENT Beginning, 2014; and Ending	,
Partner's Name, Address and ZIP Code JOHN CUTTER 2188 WYNTERBROOK DRIVE HIGHLANDS RANCH, CO 80126	Partner Number 2 Partner's Identifying Number 542-50-7455 Resident X Nonresident Amended Schedule K-1 Final Schedule K-1
Partnership's Name, Address and ZIP Code CUTTER HIGHLANDS RANCH, LLC 2253 E. BRIARWOOD AVE, STE 509 LITTLETON, CO 80122	$\begin{array}{c} \text{Partnership's Identifying Number} \\ \underline{26-3047014} \\ \hline \textbf{Partner's Percentage of:} \\ \text{Ownership} \\ \text{Profit and Loss} \\ \underline{15.0000000} \\ \end{array} \%$
Federal income	
Total modifications increasing federal income Modifications decreasing federal income	
Total modifications decreasing federal income Federal income modified for Colorado Nonresidents: Colorado source income	-15,344.

2014 TAX RETURN FILING INSTRUCTIONS

DELAWARE FORM 300

FOR THE YEAR ENDING

DECEMBER 31, 2014

Prepared for	
	CUTTER HIGHLANDS RANCH, LLC 2253 E. BRIARWOOD AVE, STE 509 LITTLETON, CO 80122
Prepared by	
	MEYERS BROTHERS KALICKA, P.C. 330 WHITNEY AVE, SUITE 800 HOLYOKE, MA 01040
To be signed and dated by	A MEMBER OF THE LLC
Amount of tax	Total tax \$ 0.00 Less: payments and credits \$ 0.00 Plus: other amount \$ 0.00 Plus: interest and penalties \$ 0.00 NO PMT REQUIRED \$
Overpayment	Credited to your estimated tax \$ 0.00 Other amount \$ 0.00 Refunded to you \$ 0.00
Mail tax return and check (if applicable) to	DELAWARE DIVISION OF REVENUE P.O. BOX 8703 WILMINGTON, DE 19899-8703
Forms to be distributed to partners	ENCLOSED ARE COPIES OF SCHEDULE K-1 TO BE DISTRIBUTED TO THE MEMBERS.
Return must be mailed on or before	APRIL 30, 2015
Special Instructions	

FORM 300 PARTNERSHIP RETURN

Page 1

DO NOT WRITE OR STAPLE IN THIS AREA

REV CODE 006

FISCAL YEAR **BUSINESS NAME**

CUTTER HIGHLANDS RANCH, LLC

2253 E. BRIARWOOD AVE, STE 509

STATE ZIP CODE LITTLETON CO

80122

EMPLOYER IDENTIFICATION NUMBER 2 6 3 0 4 7 0 1 4

NATURE OF BUSINESS (SEE INSTRUCTIONS)

722513

A. CHECK APPLICABLE BOX:

AMENDED RETURN

PARTNERSHIP DISSOLVED OR INACTIVE

CHANGE OF ADDRESS

IF THE PARTNERSHIP ADDRESS HAS CHANGED, WHICH ADDRESS IS AFFECTED?

LOCATION

MAILING BILLING

B. DID THE PARTNERSHIP HAVE INCOME DERIVED FROM OR CONNECTED WITH SOURCES IN DELAWARE?

X YES

NO

DID THE PARTNERSHIP HAVE DELAWARE RESIDENT PARTNERS?

YES

X _{NO} HOW MANY?

C. TOTAL NUMBER OF PARTNERS:

2

D. YEAR PARTNERSHIP FORMED:

2008

ATTACH COMPLETED COPY OF U.S. PARTNERSHIP RETURN OF INCOME FORM 1065 AND ALL SCHEDULES.

SCHEDULE 1 - PARTNERSHIP SHARE OF INCOME AND DEDUCTIONS WITHIN AND WITHOUT DELAWARE INCOME:

1.	Ordinary income (loss) from Federal Form 1065, Schedule K, Line 1		1	-102,293	1
2.	Apportionment percentage from Delaware Form 300, Schedule 2, Line 16		2	.0000	2
3.	Ordinary income apportioned to Delaware. Multiply Line 1 times Line 2		3	0	3
4.	Enter in Column A the amount from Line 1		Column A Total	Column B Within Delaware	
	Enter in Column B the amount from Line 3		-102,293	0	4
5.	Net income (loss) from rental real estate activities,				
	Federal Form 1065, Schedule K, Line 2	5			5
6.	Net income (loss) from other rental activities,				
	Federal Form 1065, Schedule K, Line 3c	6			6
7.	Guaranteed payments from Federal Form 1065, Schedule K, Line 4	7			7
8.	Interest income from Federal Form 1065, Schedule K, Line 5	8			8
9.	Dividend income from Federal Form 1065, Schedule K, Line 6(a)	9			9
10.	Royalty income from Federal Form 1065, Schedule K, Line 7	10			10
11.	Net short term capital gain (loss) from Federal Form 1065, Schedule K, Line 8	11			11
12a	Net long term capital gain (loss) from Federal Form 1065, Schedule K, Line 9(a)	12a			12a
	b. Collectible gain (loss) - Fed Form 1065, Sch. K, Line 9b	12b			
13.	c. Unrecaptured Section 1250 gain - Fed Form 1065, Sch. K, Line 9c Net gain (loss) under Section 1231 from Federal Form 1065,	12c			
10.	Schedule K, Line 10	13			13
14.					10
	Schedule K, Line 11	14			14
15.	Total Income (Combine Lines 4 though 12a, Line 13, and Line 14)		-102,293	0	15
	OUCTIONS:		,		
16.	Charitable contributions from				
	Federal Form 1065, Schedule K, Line 13(a)	16	3,017	0	16
17.					
	Federal Form 1065, Schedule K, Line 12	17			17
18.	Expenses related to portfolio income (loss) from				
	Federal Form 1065, Schedule K, Line 13(b) and 13(c)	18			18
19.	Other deductions from Federal Form 1065, Schedule K, Line 13(d)				19

Page 2

SCHEDULE 2 - APPORTIONMENT PERCENTAGE. COMPLETE ONLY IF PARTNERSHIP HAS INCOME DERIVED FROM OR CONNECTED WITH SOURCES IN DELAWARE AND AT LEAST ONE OTHER STATE, AND IF IT HAS ONE OR MORE PARTNERS WHO ARE NOT RESIDENTS IN DELAWARE.

2014

SECTION A - GROSS REAL AND TANGIBLE PERSONAL PROPERTY

SECTION A - GROSS REAL AND TANGIBLE PERSONAL PROPERTY		
	COLUMN A Delaware Sourced	COLUMN B Total Sourced (All Sources)
	Beginning of Year End of Year	Beginning of Year End of Year
Total real and tangible property owned	0	01,985,9072,022,436 1
Real tangible property rented (eight times annual rent paid)	0	02,786,3762,786,3762
3. Total (Combine Lines 1 and 2)	0	04,772,2834,808,8123
4. Less: value at original cost of real and tangible property (see instructions)		4
5. Net Values (Subtract Line 4 from Line 3)	0	04,772,2834,808,8125
6. Total (Combine Line 5 Beginning and End of Year Totals)	0	9,581,095 6
7. Average values. (Divide Line 6 by 2)		4,790,5487
• , , , , , , , , , , , , , , , , , , ,		
SECTION B - WAGES, SALARIES, AND OTHER COMPENSATION PAID OF	R ACCRUED TO EMPLOYEES	
8. Wages, salaries and other compensation of all employees	0	1,006,3938
SECTION C - GROSS RECEIPTS SUBJECT TO APPORTIONMENT		
9. Gross receipts from sales of tangible personal property		3,553,978 9
10. Gross income from other sources (see attachment)		10
11. Total	0	3,553,978 ₁₁
SECTION D - DETERMINATION OF APPORTIONMENT PERCENTAGES		
12a. Enter amount from Column A, Line 7	0	• 0 0 0 0 % 12c
12b. Enter amount from Column B, Line 7		=
	_	
13a. Enter amount from Column A, Line 8		• 0 0 0 0 % 13c
13b. Enter amount from Column B, Line 8	1,006,393	-
440. February with from Orlings A. Line 44	٥	• 0 0 0 0 % 14c
14a. Enter amount from Column A, Line 11		• 0 0 0 0 % 14C =
14b. Enter amount from Column B, Line 11	3,333,310	
15. Total (Combine Apportionment Percentages on Lines 12c, 13c and 14c)		.0000 15
16. Apportionment percentage (see specific instructions)		
10. Apportionment percentage (see specific filsu actions)		

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. IF PREPARED BY A PERSON OTHER THAN TAXPAYER, THIS DECLARATION IS BASED ON ALL INFORMATION OF WHICH HE/SHE HAS ANY KNOWLEDGE.

SIGNATURE OF PARTNER	DATE	TELEPHONE NUMBER	EMAIL ADDRESS			
		P00382590	413-536-8510		03/20/15	
		P00302390	413-330-0310		03/20/13	
SIGNATURE OF PREPARER		PREPARER'S EIN OR SSN	PREPARER'S PHONE		DATE	
330 WHITNEY AVE,	SULTE 800	HOLYOKE		MA	01040	
	DOTIE OUG	<u></u>				
STREET ADDRESS OF PREPARER			CITY	STATE	ZIP	

MAIL TO: DIVISION OF REVENUE, P.O. BOX 8703, WILMINGTON, DELAWARE 19899-8703



1019 (Revised 10/27/14) 4422 01-13





FORM 300, SCHEDULE K-1

PARTNER'S SHARE OF INCOME

Page 1



or Fiscal Year beginning

442511 01-13-15

1019 (Rev. 10/27/14)

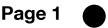
and ending

Partner's Identifying Number ► 542-90-6514	IN X SSN	Partnership's Identifying Number	▶ 26-3047014
Partner's Business Name -OR- Partner's First Name JAMISON		Partner's Address 731 MUELLER DRI City LITTLETON Country	IVE State ZIP-Code CO 80129-
Partner's Last Name CUTTER		Attention	
Partner's Type of Entity (See Instructions) Code Description Res 0 1 INDIVIDUAL	sident n-Resident	Partner's Sha Beginning Profit: 85.0000000 Loss: 85.0000000 Capital: 85.0000000	% Loss: 85.0000000 %
Allocable Share of Income	Federal 1	Column A 065, Schedule K-1 Amount	Column B Portion of Items Derived from Sources in DE
Ordinary Income (Loss) from Trade or Business Activities		-86,949	
2. Net Income (Loss) from Rental Real Estate Activities			
3. Net Income (Loss) from Other Rental Activities			
4. Guaranteed Payment to Partner			
5. Interest			
6. Dividends			
7. Royalties			
8. Net Short-term Capital Gain (Loss)			
9. Net Long-term Capital Gain (Loss) 10. Net Gain (Loss) under 1231 (other than Due to Casualty and Theft)			
11. Other Income (Loss)			
12. Total Income (Combine Line 1 to Line 11)		-86,949	O Column B
Allocable Share of Deductions	Federal 1	065, Schedule K-1 Amount	Portion of Items Derived from Sources in DE
13. Charitable Contributions		2,564	
14. Section 179 Expense Deductions			
15. Expenses from Portfolio Income			
16. Other Deduction/Credits (Attach Schedule)			
1019 (Rev. 10/27/14) 442511 01-13-15			DF30114011019

1019 (Rev. 10/27/14)

FORM 300, SCHEDULE K-1

PARTNER'S SHARE OF INCOME



.,.......

or Fiscal Year beginning

nd endin

Partner's Identifying Number $\triangleright 542-50-7455$ 26-3047014 X SSN Partnership's Identifying Number Partner's Business Name Partner's Address 2188 WYNTERBROOK DRIVE ZIP-Code State -0R-CO HIGHLANDS RANCH 80126-Partner's First Name Country JOHN Partner's Last Name Attention CUTTER Partner's Share of Profit, Loss and Capital: Partner's Type of Entity (See Instructions) Beginning **Ending** Profit: 15.000000 % 15.0000000 % Code Description Resident Profit: Loss: 15.0000000 % 0 1 INDIVIDUAL Loss: 15.0000000 % X Non-Resident Capital: 15.000000 % 15.0000000 % Capital: Column A Column B Allocable Share of Income Federal 1065, Schedule K-1 Amount Portion of Items Derived from Sources in DE Ordinary Income (Loss) from Trade or Business Activities -15,344Net Income (Loss) from Rental Real Estate Activities Net Income (Loss) from Other Rental Activities Guaranteed Payment to Partner Interest Net Short-term Capital Gain (Loss) Net Long-term Capital Gain (Loss) 10. Net Gain (Loss) under 1231 (other than Due to Casualty and Theft) 11. Other Income (Loss) -15,3440 12. Total Income (Combine Line 1 to Line 11) Column A Column B Allocable Share of Deductions Federal 1065, Schedule K-1 Amount Portion of Items Derived from Sources in DE 453 13. Charitable Contributions 14. Section 179 Expense Deductions 15. Expenses from Portfolio Income 16. Other Deduction/Credits (Attach Schedule)

	1	1165		U.S.	Return of Part	tnership	o Inco	me			OMB No. 1545-0123
Fori Dep Inte	m partment of ernal Revenu	the Treasury ue Service	For calendar	year 2014, or tax yea		_			,		2014
Α	Principal b	usiness activity		Name of partnersh	ip						D Employer identification number
		JRANT					_				
	RANCI		Туре	CUTTER I	HIGHLANDS RAN d room or suite no. If a P.O. box, s	CH, LLC	2				26-3047014 E Date business started
В	Principal p	roduct or service			BRIARWOOD AV						10/13/2008
F	OOD/F	BEVERAGE			or province, country, and ZIP or fo						F Total assets
		code number									ľ
72	22513	3		LITTLETO	ON			CO 80	122		\$ 1,963,030.
G H		pplicable boxes: accounting methor	(6)	☐ Initial return ☐ Technical term ☐ Cash	ination <u>- als</u> o check (1) or (2	(3)		()		nange	(5) Amended return
I	Number	of Schedules K-	-1. Attach o	ne for each perso	n who was a partner at any ti	me during the t	ax year		2		
J	Check if	Schedules C an	d M-3 are at	ttached							<u></u>
Ca	ution. In	clude only tra	de or busir	ness income and	d expenses on lines 1a thi	rough 22 belo	w. See the	instructio	ons for moi	re info	rmation.
	1 a G	Gross receipts or	sales					3,553	3,978.		
	b R	Returns and allow	vances				1b				
	c B	Balance. Subtract	t line 1b fron	n line 1a						1c	3,553,978.
e										2	1,058,430. 2,495,548.
Income					a satatas and trusts (attach					3	4,495,546.
٤					s, estates, and trusts (attach					5	
	6 1	let nain (loss) fro	om Form 47	97 Part II line 17	1040)) (attach Form 4797)					6	
		Other income (los								7	
		,	, ,	,	7					8	2,495,548.
_					ss employment credits)					9	1,006,393.
limitations)										10	
itati										11	55,035.
<u>=</u>										12	240 207
ξ	13 R	Rent				CEE C	ישא שביא			13	348,297. 142,073.
instructions for									.	14	52,151.
ruct									,556.		JZ, IJI•
inst	10 a b	ess depreciation	reported or	n Form 1125-A an	d elsewhere on return		16b		,,550	16c	180,556.
the					n.)					17	
see		Retirement plans,			,					18	
S (s	19 E	mployee benefit	programs							19	24,417.
Deductions (see the	20 C	Other deductions	(attach state	ement)		SEE S	STATEM	ENT 2	2	20	788,919.
Δ	21 T	Total deductions	. Add the a	mounts shown in	the far right column for lines	9 through 20				21	2,597,841.
	22 (oss). Subtract lin						22	-102,293.
		correct, and co	es of perjury, I omplete. Decla	declare that I have e aration of preparer (o	xamined this return, including acc ther than general partner or limited	ompanying sched d liability company	ules and state member man	ments, and to ager) is based	o the best of n d on all inform	ny know ation of	ledge and belief, it is true, which preparer has any
Sig He		knowledge.							ſ	•	e IRS discuss this return e preparer shown below
116	16	Signature	of general par	tner or limited liabilit	y company member manager		— Da	ate		(see ins	
		Print/Type prepa	arer's name		Preparer's signature		Date		Check	if	PTIN
Pa	id	JAMES E	2 <u>7</u> 5554	ıф			03/	20/15	self-employ	red	P00382590
	eparer	Firm's name		_	1		037	10/13	<u>′I </u>		1 100302330
	e Only	_		HERS KAI	LICKA, P.C.				Firm's FIN	▶ 04	-2713795
		Firm's address	▶330	WHITNEY	AVE, SUITE 8	00)		
		I HOLYOR	KE. MA	01040					Phone no	413	3-536-8510

LHA For Paperwork Reduction Act Notice, see separate instructions.

Sc	hedule B Other Information							
1	What type of entity is filing this return? Check the ap	oplicable box:			Ye	s No		
a Domestic general partnership b Domestic limited partnership								
C	c X Domestic limited liability company d Domestic limited liability partnership							
e ☐ Foreign partnership f ☐ Other ►								
2	At any time during the tax year, was any partner in the	ne partnership a disregard	led entity, a partnership (i	ncluding an entity treated as a				
	partnership), a trust, an S corporation, an estate (oth	ner than an estate of a dec	eased partner), or a nomi	nee or similar person?		X		
3	At the end of the tax year:							
а	Did any foreign or domestic corporation, partnership	(including any entity trea	ited as a partnership), trus	st, or tax-exempt organization, or				
	any foreign government own, directly or indirectly, a	n interest of 50% or more	in the profit, loss, or cap	ital of the partnership? For rules of				
	constructive ownership, see instructions. If "Yes," att		-			X		
b	Did any individual or estate own, directly or indirectly							
	constructive ownership, see instructions. If "Yes," att	ach Schedule B-1, Inform	nation on Partners Owning	50% or More of the Partnership	X			
4	At the end of the tax year, did the partnership:							
а	Own directly 20% or more, or own, directly or indirectly							
	or domestic corporation? For rules of constructive o	wnership, see instruction				X		
	(i) Name of Corporation		(ii) Employer Identification	(iii) Country of	(IV) Per Own	centage ed in		
			Number (if any)	Incorporation	Voting	Stock		
	Our directly as interest of 000/	and the state of t						
D	Own directly an interest of 20% or more, or own, dir							
	domestic partnership (including an entity treated as	a partnership) or in the be	eneliciai interest of a trust	? For rules of constructive ownership, see		x		
	instructions. If "Yes," complete (i) through (v) below (i) Name of Entity	(ii) Employer	(iii) Type of Entity	(iv) Country of	(v) _M	ximum		
	(i) Name of Entity	Identification Number (if any)	(III) Type of Entity	Organization	Percentage	Owned in		
		(ii diriy)		o.gamzanon	PIUIII, LUSS	, or Capital		
					Ye	s No		
5	Did the partnership file Form 8893, Election of Partn	ership Level Tax Treatmer	nt, or an election statemer	nt under		-		
	section 6231(a)(1)(B)(ii) for partnership-level tax tre	•	•					
	for more details					Х		
6	Does the partnership satisfy all four of the following	conditions?						
а	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 ye	ear were less than \$ 1 mill	lion.					
C	Schedules K-1 are filed with the return and furnished	d to the partners on or bef	fore the due date (includin	g extensions) for the partnership				
	return.							
d	The partnership is not filing and is not required to file	e Schedule M-3				X		
	If "Yes," the partnership is not required to complete ${\bf S}$	Schedules L, M-1, and M-	2; Item F on page 1 of For	rm 1065;				
	or Item L on Schedule K-1.							
7	Is this partnership a publicly traded partnership as d	, , ,	<u>'</u>			X		
8	During the tax year, did the partnership have any del	ot that was cancelled, was	forgiven, or had the term	s modified so as to reduce the				
						X		
9	Has this partnership filed, or is it required to file, For $$	m 8918, Material Advisor	Disclosure Statement, to	provide information on any				
						X		
10	At any time during calendar year 2014, did the partn	•	-	-				
	foreign country (such as a bank account, securities							
	requirements for FinCEN Form 114, Report of Foreig	n Bank and Financial Acc	ounts (FBAR). If "Yes," ent	ter the name of the foreign country.		×		
	_					ı X		

Sc	chedule 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		Х
12a	Is the partnership making, or had it previously made (and not revoked), a section 754 election?		Х
	See instructions for details regarding a section 754 election.		
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		Х
C			
	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 instructions		Х
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)		
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.		
18a	Did you make any payments in 2014 that would require you to file Form(s) 1099? See instructions		Х
b	If "Yes," did you or will you file required Form(s) 1099?		
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.		
Desi	gnation 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	e of Identifying		
	nated TMP ► JAMISON CUTTER number of TMP ► 542-90-6	5514	
	TMP is an phone Phone		
repre	sentative number of TMP		
	ess of 731 MUELLER DRIVE		
desig	nated TMP LITTLETON, CO 80129		

Scl	hedu	Ile K Partners' Distributive Share Items			Total amount
	1	Ordinary business income (loss) (page 1, line 22)		1	-102,293.
	2	Net rental real estate income (loss) (attach Form 8825)		2	
	3 a	Other gross rental income (loss)	3a		
	Ь	Expenses from other rental activities (attach statement)	3b		
		Other net rental income (loss). Subtract line 3b from line 3a		3c	
<u></u>	4	Guaranteed payments		4	
Income (Loss)	5	Interest income		5	
Ĵ	6	Dividends: a Ordinary dividends		6a	_
E E	-	b Qualified dividends			
ü	7	Royalties		7	
_	8	Net short-term capital gain (loss) (attach Schedule D (Form 1065))		8	
	I -	Net long-term capital gain (loss) (attach Schedule D (Form 1065))		9a	
		Collectibles (28%) gain (loss)			
	ءَ ا	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	
		Section 179 deduction (attach Form 4562)		12	
us		Contributions S	SEE STATEMENT 3	13a	3,017.
Deductions	l	Investment interest expense		13b	3,02,0
ğ		01	/O\ A 1	13c(2)	
De	l	Other deductions (see instructions) Type	(2) Amount	13d	
		Net earnings (loss) from self-employment		14a	-102,293.
Self- Employ- ment	'			14b	102,233
en elf-	ן ו	Gross farming or fishing income		140	2,495,548.
<u>ош ⊱</u>	15 0	Gross nonfarm income		15a	2,473,340.
	10 0	Low-income housing credit (section 42(j)(5))		15a	
ţ		Low-income housing credit (other)		15c	
Credits	l	Qualified rehabilitation expenditures (rental real estate) (attach Form 3468, if a	аррисавие)	15d	
Ō	l	Other rental real estate credits (see instructions) Type		15u	
	l	Other rental credits (see instructions) Other credits (see instructions) Type		15f	
		Other credits (see instructions) Name of country or U.S. procession		101	
				106	
		Gross income from all sources		16b	
ns	، ا	Gross income sourced at partner level Foreign gross income sourced at partnership level		16c	
ansactions	ا ا		6 Other	104	
sac	ľ		f Other	16f	
_	ا ۔	Deductions allocated and apportioned at partner level Interest expense ► h Other	_	16h	
Foreign T	9	Interest expense h Other Deductions allocated and apportioned at partnership level to foreign source in		1011	
eig				164	
For		Passive j General category ► Total foreign taxes (check one): ► Paid Accrued	k Other	16k	
				16I 16m	
		Reduction in taxes available for credit (attach statement)		10111	
		Other foreign tax information (attach statement)		17a	-14,473.
×		Post-1986 depreciation adjustment		17a	14,475
Alternative Minimum Tax (AMT) Items	ן ן	Adjusted gain or loss		17c	
E H	ا ا	Depletion (other than oil and gas)		17d	
er i	١	Oil, gas, and geothermal properties - gross income		17u	
₹≣₹		Oil, gas, and geothermal properties - deductions		-	
		Other AMT items (attach statement)		17f	
_		Tax-exempt interest income		18a	
Other Information	"	Other tax-exempt income	FF CTATEMENT 1	18b	14.
nat		Nondeductible expenses S		18c	14.
for	19 a	Distributions of cash and marketable securities		19a	
드		Distributions of other property		19b	
the		Investment income		20a	
Ó		Investment expenses		20b	
	l C	Other items and amounts (attach statement)			

_	3	U	4	7	O	1	4	Page	5
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Analysis of Net	Income (Loss)									
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										
2 Analysis by partner type:	(i) Corporate	(ii) Individual (active)	(iii) Individual (passive)	(iv) Partnership	(v) Exe Organiz		(vi) Nominee/Other			
a General partners										
b Limited partners		-105,310.								

U	Limited partifers	103,310.	L		
S	chedule L Balance Sheets per	Books			
_		Beginning	of tay year	End of t	ay vear
	Assets	(a)	(b)	(c)	
4	Cook	(a)	83,242.	(6)	(d) 133,295.
0-	Cash	14,145.	05,242.	17,301.	133,233.
	Trade notes and accounts receivable	14,143.	1111	17,301.	17 201
	Less allowance for bad debts		14,145.		17,301.
	Inventories		20,748.		26,901.
	U.S. government obligations				
	Tax-exempt securities				
6	Other current assets (attach statement)	STATEMENT 5	841,227.		894,422.
7a	Loans to partners (or persons related to partners)				
b	Mortgage and real estate loans				
	Other investments (attach statement)				
9a	Buildings and other depreciable assets	1,965,159.		1,995,536.	
b	Less accumulated depreciation	1,068,815.	896,344.	1,260,258.	735,278.
10a	Depletable assets				
	Less accumulated depletion				
	Land (net of any amortization)				
	Intangible assets (amortizable only)	244,463.		244,463.	
	Less accumulated amortization	72,226.	172,237.	88,630.	155,833.
	Other assets (attach statement)		,		•
	Total assets		2,027,943.		1,963,030.
•	Liabilities and Capital		, , , , , , , , , , , , , , , , , , , ,		, ,
15	Accounts payable		91,508.		89,865.
	Mortgages, notes, bonds payable in less than 1 year		5=7000		
	Other current liabilities (attach statement)	STATEMENT 6	384,966.		408,129.
	A.II.	0 1111 21121(1 0	331/3331		100/110
	All nonrecourse loans Loans from partners (or persons related to partners)				
	Mortgages, notes, bonds payable in 1 year or more		1,018,023.		465,549.
	Other liabilities (attach statement)	STATEMENT 7	1,235,691.		1,808,210.
		DIMILIMIT /	-702,245.		-808,723.
	Partners' capital accounts		2,027,943.		1,963,030.
	Total liabilities and capital	Income (Lega) per B		Local par Baturn	1,903,030.
<u> </u>		may be required to file Sch			
1	Net income (loss) per books		8 • 6 Income recorded on		
2	Income included on Schedule K, lines 1, 2, 3c,		 1	1 through 11 (itemize):	
-	5, 6a, 7, 8, 9a, 10, and 11, not recorded on boo		a Tax-exempt interest	- , ,	
	this year (itemize):		a rax oxomprimorost	Ψ	
3	Guaranteed payments (other than health		7 Deductions included	on Schedule K lines 1	
	insurance)			l, not charged against	
	Expenses recorded on books this year not included on		book income this yea		
	,		a Depreciation \$	` '	
	Schedule K, lines 1 through 13d, and 16l (itemize): STMT 8 1, 15	<u>.a</u>	a Depreciation 5		
•	Depreciation \$	<u>-</u> 1	Add lines 6 and 7		
		$\frac{1}{4}$. 1,16		rsis of Net Income (Loss),	
	Add lines 1 through 4			8 from line 5	-105,310.
	chedule M-2 Analysis of Partn			ט ווטווו ווווכ ט	100,010.
	Balance at beginning of year		_	h	
	Capital contributed: a Cash			perty	
_	b Property			nize):	
,	Net income (loss) per books		8 - Ciliei decieases (ilei	11120).	
			_		
	Other increases (itemize):		Aud lilles 0 allu /	Subtract line 8 from line 5	-808,723.
อ	Add lines 1 through 4	-000,72	ا ا ا ا ا ا ا ا ا ا ا ا ا ا ا ا ا ا ا	Dubitact little 5 IfOH HITE 5	000,743.

Form 1125-A

(Rev. December 2012)

Department of the Treasury Internal Revenue Service

Cost of Goods Sold

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

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

OMB No. 1545-2225

vame		Employer Identification number
CUTTER HIGHLANDS RANCH, LLC		26-3047014
1 Inventory at beginning of year	1	20,748.
2 Purchases		1,064,583.
3 Cost of labor	. 3	
4 Additional section 263A costs (attach schedule)		
5 Other costs (attach schedule)		
6 Total. Add lines 1 through 5		1,085,331.
7 Inventory at end of year	7	26,901.
8 Cost of goods sold. Subtract line 7 from line 6. Enter here and on Form 1120, page 1, line 2 or the		1 050 420
appropriate line of your tax return (see instructions) 9 a Check all methods used for valuing closing inventory:	8	1,058,430.
(i) X 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		
e If property is produced or acquired for resale, do the rules of Section 263A apply to the corporation?		Yes X No
f Was there any change in determining quantities, cost, or valuations between opening and closing inventory?		
If "Yes," attach explanation.		
For Paperwork Reduction Act Notice, see separate instructions.		Form 1125-A (Rev. 12-2012)

SCHEDULE B-1 (Form 1065)

(Rev. December 2011) Department of the Treasury Internal Revenue Service

Information on Partners Owning 50% or More of the Partnership

► Attach to Form 1065. See instructions.

Complete columns (i) through (v) below for any foreign or domestic corporation, partnership (including any entity treated as a partnership), trust,

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

OMB No. 1545-0099

Name of partnership

Employer identification number

CUTTER	HIGHLANDS	RANCH,	ЪЪС

26-3047014

:ax-exempt organization, or any foreign government that ow partnership (see instructions).	ns, directly or indirectly	y, an interest of 50% o	r more in the profit, loss, o	r capital of the
(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
JAMISON CUTTER	542-90-6514	UNITED STATES	100.00
JOHN CUTTER	542-50-7455	UNITED STATES	100.00

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 1065.

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

4562 Form

Depreciation and Amortization (Including Information on Listed Property)

Attach to your tax return.

OTHER

2014

Attachment

Form 4562 (2014)

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return ► Information about Form 4562 and its separate instructions is at www.irs.gov/form4562.

Business or activity to which this form relates

Identifying number

CU	TTER HIGHLANDS RANCH	, LLC							26-3047014
Pa	rt Election To Expense Certain Propert	y Under Section 1	79 Note: If you have	any list	ed pr	operty, c	omplete Part	V before y	ou complete Part I.
1	Maximum amount (see instructions)							1	500,000.
2	Total cost of section 179 property place	2							
	Threshold cost of section 179 property I		2,000,000.						
	Reduction in limitation. Subtract line 3 fr								
_	Dollar limitation for tax year. Subtract line 4 from line								
6	(a) Description of prop	perty	(b) Cos	st (busine	ess use	only)	(c) Elected	d cost	
7	Listed property. Enter the amount from I	line 29	•			7			
	Total elected cost of section 179 proper							8	
	Tentative deduction. Enter the smaller of								
	Carryover of disallowed deduction from								
	Business income limitation. Enter the sm								
	Section 179 expense deduction. Add lin		•		•				
	Carryover of disallowed deduction to 20								
	e: Do not use Part II or Part III below for								
Pa	rt II Special Depreciation Allowan	ce and Other D	epreciation (Do not	t includ	le liste	ed prope	rty.)		
14	Special depreciation allowance for quali	fied property (oth	ner than listed prope	rty) pla	aced i	n service	during		
	the tax year			• • •			· ·	14	8,876.
	Property subject to section 168(f)(1) elec								
	rt III MACRS Depreciation (Do not								
			Section A	\					
17	MACRS deductions for assets placed in	service in tax ye	ears beginning before	e 2014				17	170,663.
	If you are electing to group any assets placed in servi								
	Section B - Assets I	Placed in Servic	e During 2014 Tax	Year L	Jsing	the Gen	eral Deprecia	ation Syst	em
	(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciat (business/investment only - see instruction	use		Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a	3-year property								
b	5-year property		6,0	08.	5		MQ	200DB	300.
С	7-year property		2,8	68.	7		MQ	200DB	717.
d	10-year property								
е	15-year property								
f	20-year property								
g	25-year property				2	5 yrs.		S/L	
		/				.5 yrs.	MM	S/L	
h	Residential rental property	/				.5 yrs.	MM	S/L	
		/				9 yrs.	MM	S/L	
i	Nonresidential real property	/					MM	S/L	
	Section C - Assets PI	aced in Service	During 2014 Tax Y	ear Us	ing th	ne Alterr	native Depre	ciation Sys	stem
20a	Class life							S/L	
b	12-year				1	2 yrs.		S/L	
С	40-year	/			4	0 yrs.	MM	S/L	
Pa	rt IV Summary (See instructions.)								
21	Listed property. Enter amount from line	28						21	
22	Total. Add amounts from line 12, lines 1	4 through 17, lin	es 19 and 20 in colu	ımn (g)	, and	line 21.			
	Enter here and on the appropriate lines				ions -	see insti	·	22	180,556.
	For assets shown above and placed in s								
	portion of the basis attributable to section	on 263A costs				23			

LHA For Paperwork Reduction Act Notice, see separate instructions.

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

248								_	tions for li						Т.
	Do you have evidence to s			it use cia	umea?	<u> </u>		_ No	24b If "Y			nce writt	ten? L	」Yes ∟	<u> </u>
	(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentag	e ot	(d) Cost or her basis		(e) s for depre iness/inve use only	stment	(f) Recovery period	Met	g) :hod/ ention	Depre	h) eciation uction	Ele sectio	(i) cted on 179 ost
5	Special depreciation allo	owance for q	ualified listed p	roperty	placed	n servic	e durinç	the ta	ax year an	d					
	used more than 50% in	a qualified b	usiness use								25				
26	Property used more tha														
		: :	%	5											
		: :	%	5											
		: :	%	5											
27	Property used 50% or le	ess in a quali	fied business ι	ıse:											
		: :	%	5						S/L -					
		: :	%	ó						S/L -					
		: :	%	ó						S/L -					
28	Add amounts in column	(h), lines 25	through 27. Er	nter here	e and on	line 21,	page 1				28				
29	Add amounts in column	(i), line 26. E	nter here and	on line 7	, page 1								. 29		
			S	ection E	3 - Infor	mation (on Use	of Veh	icles						
_	Total business/investment	milas drivan d	uring the	(a	a)	(k Veh			(c)		d)		e) nicle	(1 Veh	
U	year (do not include comr		ĭ ŀ	vei	licie	Ven	icie	V	ehicle	Veh	licie	Vei	licie	Vei	licie
. 1	Total commuting miles of														
	Total other personal (no		· .												
2		_	·												
13	driven Total miles driven during														
	Add lines 30 through 32														
	Was the vehicle availab		Г	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	N
24		ic for person		100	-110		110	100	110	100	110	1.00	''	100	- ``
34												1			
	during off-duty hours?														
	during off-duty hours? Was the vehicle used p	rimarily by a	more												
35	during off-duty hours? Was the vehicle used potential than 5% owner or related	rimarily by a ed person?	more												
5	during off-duty hours? Was the vehicle used po than 5% owner or relate Is another vehicle availa	rimarily by a ed person? ble for perso	more nal												
5	during off-duty hours? Was the vehicle used potential than 5% owner or related	rimarily by a ed person? .ble for perso	more onal	or Empl	oyers W	ho Prov	ride Vel	nicles	for Use b	v Their E	Employe	ees			
5	during off-duty hours? Was the vehicle used po than 5% owner or relate Is another vehicle availa	rimarily by a ed person? ble for person	more nnal - Questions fo		-				-				re not m	ore than	1 5%
35 6	during off-duty hours? Was the vehicle used posterior or related in the second	rimarily by a ed person? ble for person	more nnal - Questions fo		-				-				re not m	ore than	n 5%
35 36	during off-duty hours? Was the vehicle used properties than 5% owner or related its another vehicle availates? wer these questions to describe the second in the second i	rimarily by a ed person? ble for person Section C determine if y	more nal Questions for you meet an expressions.	ception	to com	oleting S	Section I	B for v	ehicles us	ed by er	nployee	es who a ı	re not m	ore than	n 5%
35 36 	during off-duty hours? Was the vehicle used posterior than 5% owner or related is another vehicle availates? wer these questions to deers or related persons. Do you maintain a written	rimarily by a ed person? ble for person Section C determine if y	more nnal Questions for you meet an exement that pro-	ception ohibits a	to comp	oleting S al use o	Section f vehicle	B for v	ehicles us	ed by er	nployee	es who a i	re not m		_
6 .ns	during off-duty hours? Was the vehicle used position 5% owner or related its another vehicle availates? wer these questions to deers or related persons.	rimarily by a ed person? ble for person Section C determine if yen policy state	more nnal - Questions for you meet an ex	ception	l to comp	oleting S al use o	Section	B for vo	ehicles us	ed by er	nployee	es who a i	re not m		_
6 .ns	during off-duty hours? Was the vehicle used position of the vehicle availates. Is another vehicle availates? were these questions to deep or related persons. Do you maintain a writteemployees?	rimarily by a ed person? ble for person Section C determine if yen policy state	nore - Questions for you meet an exement that pro-	ception ohibits a	l to comp Il persor personal	al use o	f vehicles,	B for votes, included excep	ehicles us luding cor t commut	ed by ernmuting,	, by you	es who a ı		Yes	_
5 6 w 7	during off-duty hours? Was the vehicle used posterior of than 5% owner or related is another vehicle available. Were these questions to deers or related persons. Do you maintain a writted employees? Do you maintain a writted	rimarily by a ed person? ble for person Section C determine if y en policy state en policy state tructions for	- Questions for you meet an exement that provehicles used	ohibits a	Ito composition to co	al use o	f vehicle ehicles,	es, incl	luding cor	nmuting, ing, by y	, by you	es who a ı		Yes	_
5 6 .n: <u>w</u> 7	during off-duty hours? Was the vehicle used position to see the see th	rimarily by a ed person? Able for person Section C determine if y en policy state tructions for ehicles by er an five vehicle	- Questions for you meet an exement that provenicles used inployees as peles to your emp	chibits a chibits p by corpersonal	Il persor personal porate of use?, obtain i	al use o	f vehicles, rectors	es, incl excep or 1%	luding cor	nmuting, ing, by y owners	, by you	es who a ı		Yes	_
5 6 .n: <u>w</u> 7	during off-duty hours? Was the vehicle used position than 5% owner or related is another vehicle availaduse? were these questions to diers or related persons. Do you maintain a writted employees? Do you maintain a writted employees? See the instance of very solution and the semployees of very solution and the semployees of very solution.	rimarily by a ed person? Able for person Section C determine if y en policy state tructions for ehicles by er an five vehicle	- Questions for you meet an exement that provenicles used inployees as peles to your emp	chibits a chibits p by corpersonal	Il persor personal porate of use?, obtain i	al use o	f vehicles, rectors	es, incl excep or 1%	luding cor	nmuting, ing, by y owners	, by you	es who a ı		Yes	_
5 6 7 8	during off-duty hours? Was the vehicle used position to see the see th	rimarily by a ed person? she for person Section C determine if y en policy state tructions for ehicles by er an five vehic and retain the	- Questions for you meet an expense that provenicles used inployees as personal to your empty of the provenicles to your empty of the your end y	chibits a	Ito composition in the compositi	al use of versions of the control of	f vehicle ehicles, rectors	es, incl excep or 1%	luding cor t commut o or more o	nmuting, ing, by y owners	, by you	es who a		Yes	_
5 6 .n: w/7 8 9 0	during off-duty hours? Was the vehicle used potential than 5% owner or related is another vehicle available. Were these questions to overs or related persons. Do you maintain a writted employees? Do you maintain a writted employees? See the inseemployees? See the inseemployees and the use of the vehicles, because of the vehicles of the v	rimarily by a ed person? Ible for person Section C determine if yen policy state tructions for ehicles by er an five vehicle and retain the ements concerts.	ement that provehicles used information remaining qualified	ohibits a ohibits p by corpersonal obloyees received autom	Il person Il personal Personal Porate of Use? Obtain i	al use of wase of ordered to the control of the con	f vehicles, rectors, on from	excep or 1%	luding cor t commut o or more	nmuting, ing, by y owners	, by you	es who a		Yes	_
5 6 7 8 9 0	during off-duty hours? Was the vehicle used potential than 5% owner or related is another vehicle available. Were these questions to diers or related persons. Do you maintain a writted employees? Do you maintain a writted employees? See the insection both the use of the vehicles, bo you meet the require that your answer to surt VI Amortization	rimarily by a ed person? Ible for person Section C determine if yen policy state tructions for ehicles by er an five vehicle and retain the ements concerts.	ement that provehicles used inployees as peles to your emperent qualified 0, or 41 is "Yes"	ohibits a ohibits p by corp ersonal obloyees received autom	Il person Il personal Personal Porate of Use? Obtain i	oleting S al use of verticers, di information monstratete Sect	f vehicles, rectors, on from tion use	excep or 1%	luding con t commut or more employees	nmuting, ing, by y owners	, by you	es who an		Yes	N
5 6 .n: w/7 8 9 0	during off-duty hours? Was the vehicle used posterior than 5% owner or related is another vehicle available. Were these questions to overs or related persons. Do you maintain a writted employees? Do you maintain a writted employees? See the insection poor you provide more that the use of the vehicles, Do you meet the requirement of the vehicles of your meet the requirement of the vehicles of the vehicles of the vehicles of the vehicles of your meet the requirement of the vehicles	sed person? Able for person Section C determine if y en policy state tructions for ehicles by er an five vehic and retain the ements conce 37, 38, 39, 4	ement that provehicles used inployees as pees to your emperiment qualified 0, or 41 is "Yes	ohibits a ohibits p by corp ersonal i obloyees eceived autom c, " do no	Il person Il personal Personal Porate of Use? Obtain i	oleting S al use of verticers, di information monstratete Sect	f vehicles, rectors, on from tion use	excep or 1%	luding con t commut or more employees	nmuting, ing, by y owners	, by you our	es who al		Yes	N
5 6 ns w/7 8 9 0 1 1 P	during off-duty hours? Was the vehicle used posterior than 5% owner or related is another vehicle available. Were these questions to deers or related persons. Do you maintain a writted employees? Do you maintain a writted employees? See the insection pool of the vehicles, is posterior to surt VI Amortization (a) Description of	rimarily by a ed person? Ible for person Section C determine if y en policy state tructions for ehicles by er an five vehic and retain the ements concessor, 38, 39, 40 f costs	ement that provehicles used information remaining qualified 0, or 41 is "Yes	contions and the continuous conti	ll persor ersonal porate of use? obtain i	al use of wase of ordered to the control of the con	f vehicles, rectors, on from tion use	excep or 1%	luding cor t commut o or more	nmuting, ing, by y owners s about	, by you	es who an		Yes	N
5 6 6 7 8 8 9 0 1 1 P	during off-duty hours? Was the vehicle used posterior than 5% owner or related is another vehicle available. Were these questions to overs or related persons. Do you maintain a writted employees? Do you maintain a writted employees? See the insection poor you provide more that the use of the vehicles, Do you meet the requirement of the vehicles of your meet the requirement of the vehicles of the vehicles of the vehicles of the vehicles of your meet the requirement of the vehicles	rimarily by a ed person? Ible for person Section C determine if y en policy state tructions for ehicles by er an five vehic and retain the ements concessor, 38, 39, 40 f costs	ement that provehicles used information remaining qualified 0, or 41 is "Yes	contions and the continuous conti	ll persor ersonal porate of use? obtain i	use of victors, di	f vehicles, rectors, on from tion use	excep or 1%	duding cor t commut o or more of employees	nmuting, ing, by y owners s about	(e)	es who an		Yes (f) nortization	N
5 6 	during off-duty hours? Was the vehicle used posterior than 5% owner or related is another vehicle available. Were these questions to deers or related persons. Do you maintain a writted employees? Do you maintain a writted employees? See the insection pool of the vehicles, is posterior to surt VI Amortization (a) Description of	rimarily by a ed person? Ible for person Section C determine if y en policy state tructions for ehicles by er an five vehic and retain the ements concessor, 38, 39, 40 f costs	ement that provehicles used information remaining qualified 0, or 41 is "Yes	contions and the continuous conti	ll persor ersonal porate of use? obtain i	use of victors, di	f vehicles, rectors, on from tion use	excep or 1%	duding cor t commut o or more of employees	nmuting, ing, by y owners s about	(e)	es who an		Yes (f) nortization	N

			
FORM 1065	TAX	EXPENSE	STATEMENT 1
DESCRIPTION			AMOUNT
TAXES - PAYROLL			92,236.
TAXES - OTHER			10,476.
TAXES - SALES			1,978.
TAXES - REAL ESTATE			37,383.
TOTAL TO FORM 1065, LINE	14		142,073.
	14444444444		
FORM 1065	OTHER	DEDUCTIONS	STATEMENT 2
DESCRIPTION			AMOUNT
ACCOUNTING			32,179.
ADVERTISING			131,336.
ALLOCATED G&A			61,329.
AMORTIZATION EXPENSE			16,404.
AUTOMOBILE			15,531.
BANK & CREDIT CARD FEES			95,570.
BUILDING INSURANCE			933.
CASH SHORT & OVER			7,587.
COMPUTER SUPPLIES			23,998.
CONTRACT MAINTENANCE DUES AND SUBSCRIPTIONS			12,541. 9,362.
EQUIPMENT RENTAL			3,204.
INSURANCE - AUTO			2,806.
INSURANCE - LIABILITY			14,512.
INSURANCE - WORKERS COMP			25,824.
JANITORIAL & CLEANING			14,369.
LINEN			4,168.
MEALS AND ENTERTAINMENT			15.
MENUS			6,730.
MUSIC			1,147.
OFFICE SUPPLIES			6,978.
OPERATING SUPPLIES			35,128.
PARKING			833.
PEST CONTROL			3,166.
POSTAGE/FREIGHT/COURIER ROYALTY			6,440. 172,194.
SAFETY SHOES			2.
SECURITY SERVICES			2,506.
SMALLWARES			8,542.
TEAM MEETINGS			962.
TELEPHONE			9,692.
TRAVEL			246.
UNIFORMS & LAUNDRY			4,417.
UTILITIES			58,268.
TOTAL TO FORM 1065, LINE	20		788,919.

SCHEDULE K	CHARITABLE CON	TRIBUTIONS	STATEMENT	3
DESCRIPTION		TYPE	AMOUNT	
DONATIONS		CASH (50%)	3,0	17.
TOTALS TO SCHEDULE K, L	INE 13A		3,0	17.
SCHEDULE K	NONDEDUCTIBLE	E EXPENSE	STATEMENT	4
DESCRIPTION			AMOUNT	
EXCLUDED MEALS AND ENTE	RTAINMENT EXPENSES	3		14.
TOTAL TO SCHEDULE K, LI	NE 18C			14.
SCHEDULE L	OTHER CURRENT	ASSETS	STATEMENT	5
DESCRIPTION		BEGINNING OF TAX YEAR	END OF TA. YEAR	X
A/R - EMPLOYEES DUE FROM AFFILIATE PREPAID EXPENSES		225. 828,768. 12,234.	885,1	
TOTAL TO SCHEDULE L, LI	NE 6	841,227.	894,4	22.
SCHEDULE L	OTHER CURRENT I	JIABILITIES	STATEMENT	6
DESCRIPTION		BEGINNING OF TAX YEAR	END OF TA	X
ACCRUED PAYROLL ACCRUED EXPENSES PAYROLL TAXES PAYABLE SALES TAX PAYABLE GIFT CERTIFICATES PAYAB: RENOVATIONS CREDIT PERSONAL PROPERTY TAXES OTHER PAYROLL LIABILITIE	PAYABLE	27,812. 15,087. 11,090. 14,607. 26,252. 278,341. 11,777.	57,3 12,5 13,8 31,8 253,0 9,6	47. 33. 13. 63.
TOTAL TO SCHEDULE L, LI	NE 17	384,966.	408,1	29.

SCHEDULE L	ľO	HER LIAB	ILITIES		STATEMENT	7
DESCRIPTION				BEGINNING OF TAX YEAR	END OF TAX	X
DUE TO AFFILIZ	ATE			1,235,691.	1,808,21	10.
TOTAL TO SCHE	OULE L			1,235,691.	1,808,21	10.
						_
SCHEDULE M-1	EXPENSES RECORDED	ON BOOKS	NOT DED	UCTED IN RETURN	STATEMENT	8
DESCRIPTION					AMOUNT	
FINES, VIOLAT	IONS & PENALTY				1,15	54.
TOTAL TO SCHE	OULE M-1, LINE 4				1,15	54.

Section 1.263(a)-1(f) De Minimis Safe Harbor Election

Cutter Highlands Ranch, LLC 2253 E. Briarwood Ave, Ste 509 Littleton, CO 80122

Employer Identification Number: 26-3047014

For the Year Ending December 31, 2014

Cutter Highlands Ranch, LLC is making the de minimis safe harbor election under Reg. Sec. 1.263(a)-1(f).