

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

CUTTER RESTAURANT GROUP, LLC
C/O JOHN L. CUTTER, MBR
2253 E. BRIARWOOD AVE, STE 509
LITTLETON, CO 80122-3286

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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

APRIL 6, 2017

CUTTER RESTAURANT GROUP, LLC
C/O JOHN L. CUTTER, MBR
2253 E. BRIARWOOD AVE, STE 509
LITTLETON, CO 80122-3286

DEAR JOHN:

ENCLOSED ARE YOUR 2016 PARTNERSHIP TAX RETURNS, AS FOLLOWS...

2016 U.S. RETURN OF PARTNERSHIP INCOME

2016 COLORADO RETURN OF PARTNERSHIP INCOME

2016 DELAWARE RETURN OF PARTNERSHIP INCOME

WE PREPARED THE RETURNS FROM INFORMATION YOU FURNISHED US WITHOUT VERIFICATION. UPON EXAMINATION OF THE RETURNS BY TAXING AUTHORITIES, REQUESTS MAY BE MADE FOR UNDERLYING DATA. WE THEREFORE RECOMMEND THAT YOU PRESERVE ALL RECORDS WHICH YOU MAY BE CALLED UPON TO PRODUCE IN CONNECTION WITH SUCH AN EXAMINATION.

WE SINCERELY APPRECIATE THE OPPORTUNITY TO SERVE YOU. PLEASE CONTACT US IF YOU HAVE ANY QUESTIONS CONCERNING THE TAX RETURNS.

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

VERY TRULY YOURS,

MEYERS BROTHERS KALICKA, P.C.

2016 TAX RETURN FILING INSTRUCTIONS

U.S. RETURN OF PARTNERSHIP INCOME

FOR THE YEAR ENDING

DECEMBER 31, 2016

Prepared for	CUTTER RESTAURANT GROUP, LLC C/O JOHN L. CUTTER, MBR 2253 E. BRIARWOOD AVE, STE 509 LITTLETON, CO 80122-3286
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 SEPTEMBER 15, 2017.
Special Instructions	DO NOT MAIL THE PAPER COPY OF THE RETURN TO THE IRS.

SUMMARY OF SCHEDULE K-1

[illegible]

Two-Year Comparison - Partnership

2016

Name of partnership CUTTER RESTAURANT GROUP, LLC C/O JOHN L. CUTTER, MBR	Employer identification number 26-0555883
--	--

Description	Prior Year	Current Year	Increase (Decrease)
NUMBER OF PARTNERS	2.	2.	0.
TRADE OR BUSINESS INCOME OR LOSS:			
INCOME:			
GROSS RECEIPTS OR SALES	5,652,309.	5,897,882.	245,573.
LESS RETURNS AND ALLOWANCES	36.	0.	-36.
SUBTOTAL	5,652,273.	5,897,882.	245,609.
COST OF GOODS SOLD:			
INVENTORY AT BEGINNING OF YEAR	31,253.	44,800.	13,547.
PURCHASES LESS ITEMS WITHDRAWN	1,797,345.	1,755,593.	-41,752.
OTHER COSTS	64,713.	52,468.	-12,245.
TOTAL	1,893,311.	1,852,861.	-40,450.
INVENTORY AT END OF YEAR	44,800.	41,366.	-3,434.
COST OF GOODS SOLD	1,848,511.	1,811,495.	-37,016.
GROSS PROFIT	3,803,762.	4,086,387.	282,625.
OTHER INCOME (LOSS)	150.	0.	-150.
TOTAL INCOME (LOSS)	3,803,912.	4,086,387.	282,475.
DEDUCTIONS:			
SALARIES AND WAGES	2,094,935.	2,091,971.	-2,964.
GUARANTEED PAYMENTS TO PARTNERS	57,128.	55,523.	-1,605.
REPAIRS AND MAINTENANCE	120,864.	148,197.	27,333.
RENT	507,032.	613,724.	106,692.
TAXES AND LICENSES	311,983.	298,203.	-13,780.
INTEREST	102,180.	206,829.	104,649.
DEPRECIATION	136,708.	285,564.	148,856.
EMPLOYEE BENEFIT PROGRAMS	48,041.	10,140.	-37,901.
OTHER DEDUCTIONS	1,146,487.	924,221.	-222,266.
TOTAL DEDUCTIONS	4,525,358.	4,634,372.	109,014.
ORDINARY INCOME (LOSS)	-721,446.	-547,985.	173,461.
SCHEDULE K:			
INCOME (LOSS):			
ORDINARY TRADE/BUSINESS INCOME/LOSS	-721,446.	-547,985.	173,461.
GUARANTEED PAYMENTS TO PARTNERS	57,128.	55,523.	-1,605.

Two-Year Comparison - Partnership

2016

Name of partnership CUTTER RESTAURANT GROUP, LLC C/O JOHN L. CUTTER, MBR	Employer identification number 26-0555883
--	--

Description	Prior Year	Current Year	Increase (Decrease)
DEDUCTIONS:			
CHARITABLE CONTRIBUTIONS	4,653.	84.	-4,569.
OTHER DEDUCTIONS	53,083.	51,841.	-1,242.
SELF-EMPLOYMENT:			
EARNINGS/LOSS FROM SELF-EMPLOYMENT	-664,318.	-492,462.	171,856.
GROSS NONFARM INCOME	3,803,912.	4,086,387.	282,475.
ADJUSTMENTS AND TAX PREFERENCES:			
DEPRECIATION ADJUSTMENT	5,556.	42,524.	36,968.
OTHER:			
NONDEDUCTIBLE EXPENSES	10.	0.	-10.
DISTRIBUTIONS OF MONEY	0.	21,030.	21,030.
SCHEDULE M-1:			
NET INCOME (LOSS) PER BOOKS	-730,033.	-548,396.	181,637.
GUARANTEED PAYMENTS	4,045.	3,682.	-363.
TRAVEL AND ENTERTAINMENT	10.	0.	-10.
OTHER BOOK EXPENSES NOT ON SCH K	3,924.	327.	-3,597.
TOTAL- NET BOOK INC THROUGH EXPENSE	-722,054.	-544,387.	177,667.
INCOME (LOSS)	-722,054.	-544,387.	177,667.
SCHEDULE M-2:			
CAPITAL AT BEGINNING OF YEAR	16,923.	-168,110.	-185,033.
CAPITAL CONTRIBUTED DURING YEAR	545,000.	150,000.	-395,000.
NET INCOME (LOSS) PER BOOKS	-730,033.	-548,396.	181,637.
TOTAL- BEGINNING CAP THROUGH INCR	-168,110.	-566,506.	-398,396.
CASH DISTRIBUTIONS	0.	21,030.	21,030.
TOTAL- CASH CONT THROUGH OTHER DECR	0.	21,030.	21,030.

2016

CUTTER RESTAURANT GROUP, LLC
C/O JOHN L. CUTTER, MBR

26-0555883

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COLORADO	Property Apportionment Detail Worksheet	2016
CUTTER RESTAURANT GROUP, LLC C/O JOHN L.		26-0555883

	Within		Everywhere	
	Beginning of Year	End of Year	Beginning of Year	End of Year
Inventories	44,800.	41,366.	44,800.	41,366.
Land				
Buildings				
Buildings - accumulated depreciation				
Machinery				
Equipment	1,283,505.	1,283,505.	1,283,505.	1,283,505.
Machinery and equipment - accumulated depreciation	684,558.	906,826.	684,558.	906,826.
Furniture and fixtures				
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	1,120,644.	1,120,644.	1,120,644.	1,120,644.
Leasehold improvements - accumulated amortization	302,104.	358,388.	302,104.	358,388.
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	1,462,287.	1,180,301.	1,462,287.	1,180,301.
Average property		1,321,294.		1,321,294.
Real property rented - rental expense (multiplied by applicable factor)		4,909,792.		4,909,792.
Tangible property rented - rental expense (multiplied by applicable factor)				
Miscellaneous rental expense (multiplied by applicable factor)				
Total property		6,231,086.		6,231,086.

* - Not Applicable

DELAWARE	Property Apportionment Detail Worksheet	2016
CUTTER RESTAURANT GROUP, LLC C/O JOHN L.		26-0555883

	Within		Everywhere	
	Beginning of Year	End of Year	Beginning of Year	End of Year
Inventories	0 .	0 .	44,800 .	41,366 .
Land				
Buildings				
Buildings - accumulated depreciation				
Machinery				
Equipment	0 .	0 .	1,283,505 .	1,283,505 .
Machinery and equipment - accumulated depreciation				
Furniture and fixtures				
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 .	1,120,644 .	1,120,644 .
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 .	2,448,949 .	2,445,515 .
Average property		0 .		2,447,232 .
Real property rented - rental expense (multiplied by applicable factor)		0 .		4,909,792 .
Tangible property rented - rental expense (multiplied by applicable factor)				
Miscellaneous rental expense (multiplied by applicable factor)				
Total property		0 .		7,357,024 .

* - Not Applicable

COLORADO	Payroll and Sales Apportionment Detail Worksheet	2016
CUTTER RESTAURANT GROUP, LLC C/O JOHN L.		26-0555883

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	2,091,971.	2,091,971.
Repairs		
Others		
Miscellaneous other		
Total payroll	2,091,971.	2,091,971.

Sales Apportionment

	Within	Everywhere
Sales of tangible personal property		5,745,276.
- Returns and allowances		0.
Sales from outside the state to within the state	0.	
Sales from within the state to within the state	5,745,276.	
Sales from within the state to U.S. government	0.	
Sales from within the state to nontaxable jurisdictions	0.	
Interest		
Dividends		
Rents		
Royalties		
Gain from sales of real and tangible personal property		
Gain from sales of intangibles		
Service income		
Other receipts	152,606.	152,606.
Miscellaneous other		
Total sales	5,897,882.	5,897,882.

* - Not Applicable

DELAWARE	Payroll and Sales Apportionment Detail Worksheet	2016
CUTTER RESTAURANT GROUP, LLC C/O JOHN L.		26-0555883

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.	2,091,971.
Repairs		
Others		
Miscellaneous other		
Total payroll	0.	2,091,971.

Sales Apportionment

	Within	Everywhere
Sales of tangible personal property		5,745,276.
- Returns and allowances		0.
Sales from outside the state to within the state	0.	
Sales from within the state to within the state	0.	
Sales from within the state to U.S. 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	0.	152,606.
Miscellaneous other		
Total sales	0.	5,897,882.

* - Not Applicable

SALES FACTOR		Apportionment Summary Worksheet			2016
CUTTER RESTAURANT GROUP, LLC C/O JOHN L.					26-0555883
	WITHIN	EVERYWHERE	UNWEIGHTED	WEIGHTED	
Alabama					
Alaska					
Arizona					
Arkansas					
California					
Colorado	5,745,276.	5,745,276.	1.000000	1.000000	
Connecticut					
Delaware					
District of Columbia					
Florida					
Georgia					
Hawaii					
Idaho					
Illinois					
Indiana					
Iowa					
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					
Virginia					
Washington					
West Virginia					
Wisconsin					
Wyoming					
Foreign					
Other					
Total	N/A	N/A	N/A	1.000000	

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SALES FACTOR	Apportionment Summary Worksheet (Continued)	2016
CUTTER RESTAURANT GROUP, LLC C/O JOHN L.		26-0555883

	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	Apportionment Summary Worksheet			2016
CUTTER RESTAURANT GROUP, LLC C/O JOHN L.			26-0555883	
SUMMARY OF FACTORS	PROPERTY	PAYROLL	SALES	APPORTIONMENT
Alabama				
Alaska				
Arizona				
Arkansas				
California				
Colorado			1.000000	1.000000
Connecticut				
Delaware				
District of Columbia				
Florida				
Georgia				
Hawaii				
Idaho				
Illinois				
Indiana				
Iowa				
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				
Virginia				
Washington				
West Virginia				
Wisconsin				
Wyoming				
Foreign				
Other				
Total			1.000000	1.000000

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04-01-16

SUMMARY	Apportionment Summary Worksheet (Continued)	2016
CUTTER RESTAURANT GROUP, LLC C/O JOHN L.		26-0555883

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

Form **8879-PE**Department of the Treasury
Internal Revenue Service**IRS e-file Signature Authorization
for Form 1065**

OMB No. 1545-0123

2016

▶ Don't send to the IRS. Keep for your records.

▶ Information about Form 8879-PE and its instructions is at www.irs.gov/form8879pe.

For calendar year 2016, or tax year beginning , 2016, ending , 20

Name of partnership **CUTTER RESTAURANT GROUP, LLC**
C/O JOHN L. CUTTER, MBREmployer identification number
26-0555883**Part I Tax Return Information** (Whole dollars only)

1	Gross receipts or sales less returns and allowances (Form 1065, line 1c)	1	5,897,882.
2	Gross profit (Form 1065, line 3)	2	4,086,387.
3	Ordinary business income (loss) (Form 1065, line 22)	3	-547,985.
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 Liability Company Member Manager (Be sure to get a copy of the partnership's return)

Under penalties of perjury, I declare that I am a general partner or limited liability company member manager of the above partnership and that I have examined a copy of the partnership's 2016 electronic return of partnership income and accompanying schedules and statements and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts shown on the copy of the partnership's electronic return of partnership income. I consent to allow my electronic return originator (ERO), transmitter, or intermediate service provider to send the partnership's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission and (b) the reason for any delay in processing the return. I have selected a personal identification number (PIN) as my signature for the partnership's electronic return of partnership income.

General Partner or Limited Liability Company Member Manager's PIN: check one box only

☒ I authorize **MEYERS BROTHERS KALICKA, P.C.** to enter my PIN **80126**
ERO firm name don't enter all zeros

as my signature on the partnership's 2016 electronically filed return of partnership income.

☐ As a general partner or limited liability company member manager of the partnership, I will enter my PIN as my signature on the partnership's 2016 electronically filed return of partnership income.

General partner or limited liability company member manager's signature ▶

Title ▶ **MEMBER MANAGER**

Date ▶

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.

04834701040

don't enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2016 electronically filed return of partnership income for the partnership indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 3112, IRS e-file Application and Participation, and Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature ▶ **MEYERS BROTHERS KALICKA, P.C.**Date ▶ **04/06/17****ERO Must Retain This Form - See Instructions**
Don't Submit This Form to the IRS Unless Requested To Do So

For Paperwork Reduction Act Notice, see instructions.

Form **8879-PE** (2016)

LHA

**Application for Automatic Extension of Time To File Certain
Business Income Tax, Information, and Other Returns**
▶ **File a separate application for each return.**

OMB No. 1545-0233

▶ **Information about Form 7004 and its separate instructions is at www.irs.gov/form7004.**

**Print
or
Type**

Name

CUTTER RESTAURANT GROUP, LLC
C/O JOHN L. CUTTER, MBR

Identifying number

26-0555883

Number, street, and room or suite no. (If P.O. box, see instructions.)

2253 E. BRIARWOOD AVE, STE 509

City, town, state, and ZIP code (If a foreign address, enter city, province or state, and country (follow the country's practice for entering postal code)).

LITTLETON, CO 80122-3286

Note: File request for extension by the due date of the return for which the extension is granted. See instructions before completing this form.

Part I Automatic Extension for C Corporations With Tax Years Ending December 31. See instructions.

1a Enter the form code for the return listed below that this application is for

Application Is For:	Form Code	Application Is For:	Form Code
Form 1120	12	Form 1120-ND (section 4951 taxes)	20
Form 1120-C	34	Form 1120-PC	21
Form 1120-F	15	Form 1120-POL	22
Form 1120-FSC	16	Form 1120-REIT	23
Form 1120-H	17	Form 1120-RIC	24
Form 1120-L	18	Form 1120-SF	26
Form 1120-ND	19		

Part II Automatic Extension for Certain Estates and Trusts. See instructions.

b Enter the form code for the return listed below that this application is for

Application Is For:	Form Code	Application Is For:	Form Code
Form 1041 (estate other than a bankruptcy estate)	04	Form 1041 (trust)	05

Part III Automatic Extension for Entities Not Using Part I, II, or IV. See instructions.

c Enter the form code for the return listed below that this application is for **09**

Application Is For:	Form Code	Application Is For:	Form Code
Form 706-GS(D)	01	Form 1120-ND (section 4951 taxes)	20
Form 706-GS(T)	02	Form 1120-PC	21
Form 1041 (bankruptcy estate only)	03	Form 1120-POL	22
Form 1041-N	06	Form 1120-REIT	23
Form 1041-QFT	07	Form 1120-RIC	24
Form 1042	08	Form 1120S	25
Form 1065	09	Form 1120-SF	26
Form 1065-B	10	Form 3520-A	27
Form 1066	11	Form 8612	28
Form 1120	12	Form 8613	29
Form 1120-C	34	Form 8725	30
Form 1120-F	15	Form 8804	31
Form 1120-FSC	16	Form 8831	32
Form 1120-H	17	Form 8876	33
Form 1120-L	18	Form 8924	35
Form 1120-ND	19	Form 8928	36

Part IV Automatic Extension for C Corporations With Tax Years Ending June 30. See instructions.

d Enter the form code for the return listed below that this application is for

Application Is For:	Form Code	Application Is For:	Form Code
Form 1120	12	Form 1120-ND (section 4951 taxes)	20
Form 1120-C	34	Form 1120-PC	21
Form 1120-F	15	Form 1120-POL	22
Form 1120-FSC	16	Form 1120-REIT	23
Form 1120-H	17	Form 1120-RIC	24
Form 1120-L	18	Form 1120-SF	26
Form 1120-ND	19		

Part V All Filers Must Complete This Part

- 2** If the organization is a foreign corporation that does not have an office or place of business in the United States, check here ☐
- 3** If the organization is a corporation and is the common parent of a group that intends to file a consolidated return, check here ☐
If checked, attach a statement listing the name, address, and Employer Identification Number (EIN) for each member covered by this application.
- 4** If the organization is a corporation or partnership that qualifies under Regulations section 1.6081-5, check here ☐
- 5a** The application is for calendar year 2016, or tax year beginning _____, and ending _____
- b Short tax year.** If this tax year is less than 12 months, check the reason: ☐ Initial return ☐ Final return
☐ Change in accounting period ☐ Consolidated return to be filed ☐ Other (see instructions - attach explanation)

6 Tentative total tax	6	
7 Total payments and credits (see instructions)	7	
8 Balance due. Subtract line 7 from line 6 (see instructions)	8	

Form **7004** (Rev. 12-2016)

DEPARTMENT OF THE TREASURY
INTERNAL REVENUE SERVICE CENTER
OGDEN, UT 84201-0045

<div style="display: flex; justify-content: space-between;"> <div> Form 1065 Department of the Treasury Internal Revenue Service </div> <div style="text-align: center;"> U.S. Return of Partnership Income For calendar year 2016, or tax year beginning _____, ending _____, </div> <div> OMB No. 1545-0123 <div style="font-size: 2em; font-weight: bold;">2016</div> </div> </div>		
EXTENSION GRANTED TO 09/15/17		
A Principal business activity RESTAURANT FRANCHISE	Name of partnership CUTTER RESTAURANT GROUP, LLC C/O JOHN L. CUTTER, MBR	D Employer identification number 26-0555883
B Principal product or service FOOD/BEVERAGE	Type or Print 2253 E. BRIARWOOD AVE, STE 509	E Date business started 10/01/2007
C Business code number 722513	City or town, state or province, country, and ZIP or foreign postal code LITTLETON CO 80122-3286	F Total assets \$ 3,353,841.
G Check applicable boxes: (1) <input type="checkbox"/> Initial return (2) <input type="checkbox"/> Final return (3) <input type="checkbox"/> Name change (4) <input type="checkbox"/> Address change (5) <input type="checkbox"/> Amended return (6) <input type="checkbox"/> Technical termination - also check (1) or (2)		
H Check accounting method: (1) <input type="checkbox"/> Cash (2) <input checked="" type="checkbox"/> Accrual (3) <input type="checkbox"/> Other (specify) _____		
I Number of Schedules K-1. Attach one for each person who was a partner at any time during the tax year 2		
J Check if Schedules C and M-3 are attached <input type="checkbox"/>		

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

Income	1 a Gross receipts or sales	1a	5,897,882.		
	b Returns and allowances	1b			
	c Balance. Subtract line 1b from line 1a			1c	5,897,882.
	2 Cost of goods sold (attach Form 1125-A)			2	1,811,495.
	3 Gross profit. Subtract line 2 from line 1c			3	4,086,387.
	4 Ordinary income (loss) from other partnerships, estates, and trusts (attach statement)			4	
	5 Net farm profit (loss) (attach Schedule F (Form 1040))			5	
	6 Net gain (loss) from Form 4797, Part II, line 17 (attach Form 4797)			6	
7 Other income (loss) (attach statement)			7		
8 Total income (loss). Combine lines 3 through 7			8	4,086,387.	
Deductions (see the instructions for limitations)	9 Salaries and wages (other than to partners) (less employment credits)			9	2,091,971.
	10 Guaranteed payments to partners			10	55,523.
	11 Repairs and maintenance			11	148,197.
	12 Bad debts			12	
	13 Rent			13	613,724.
	14 Taxes and licenses		SEE STATEMENT 1	14	298,203.
	15 Interest			15	206,829.
	16 a Depreciation (if required, attach Form 4562)	16a	285,564.		
	b Less depreciation reported on Form 1125-A and elsewhere on return	16b		16c	285,564.
	17 Depletion (Do not deduct oil and gas depletion.)			17	
	18 Retirement plans, etc.			18	
	19 Employee benefit programs			19	10,140.
	20 Other deductions (attach statement)		SEE STATEMENT 2	20	924,221.
	21 Total deductions. Add the amounts shown in the far right column for lines 9 through 20			21	4,634,372.
22 Ordinary business income (loss). Subtract line 21 from line 8			22	-547,985.	

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than general partner or limited liability company member manager) is based on all information of which preparer has any knowledge.				May the IRS discuss this return with the preparer shown below (see instr.)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
	Signature of general partner or limited liability company member manager _____		Date _____			
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN	
	JAMES BARRETT	JAMES BARRETT	04/06/17		P00382590	
	Firm's name MEYERS BROTHERS KALICKA, P.C.			Firm's EIN 04-2713795		
	Firm's address 330 WHITNEY AVE, SUITE 800 HOLYOKE, MA 01040			Phone no. 413-536-8510		

LHA For Paperwork Reduction Act Notice, see separate instructions. Form **1065** (2016)

Schedule B Other Information

1 What type of entity is filing this return? Check the applicable box:	Yes	No
a <input type="checkbox"/> Domestic general partnership b <input type="checkbox"/> Domestic limited partnership		
c <input checked="" type="checkbox"/> Domestic limited liability company d <input type="checkbox"/> Domestic limited liability partnership		
e <input type="checkbox"/> Foreign partnership f <input type="checkbox"/> Other ▶		
2 At any time during the tax year, was any partner in the partnership a disregarded entity, a partnership (including an entity treated as a partnership), a trust, an S corporation, an estate (other than an estate of a deceased partner), or a nominee or similar person?		X
3 At the end of the tax year:		
a Did any foreign or domestic corporation, partnership (including any entity treated as a partnership), trust, or tax-exempt organization, or any foreign government own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital of the partnership? For rules of constructive ownership, see instructions. If "Yes," attach Schedule B-1, Information on Partners Owning 50% or More of the Partnership		X
b Did any individual or estate own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital of the partnership? For rules of constructive ownership, see instructions. If "Yes," attach Schedule B-1, Information on Partners Owning 50% or More of the Partnership	X	
4 At the end of the tax year, did the partnership:		
a Own directly 20% or more, or own, directly or indirectly, 50% or more of the total voting power of all classes of stock entitled to vote of any foreign or domestic corporation? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (iv) below		X
(i) Name of Corporation	(ii) Employer Identification Number (if any)	(iii) Country of Incorporation
b Own directly an interest of 20% or more, or own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital in any foreign or domestic partnership (including an entity treated as a partnership) or in the beneficial interest of a trust? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (v) below		X
(i) Name of Entity	(ii) Employer Identification Number (if any)	(iii) Type of Entity
(iv) Country of Organization	(v) Maximum Percentage Owned in Profit, Loss, or Capital	
5 Did the partnership file Form 8893, Election of Partnership Level Tax Treatment, or an election statement under section 6231(a)(1)(B)(ii) for partnership-level tax treatment, that is in effect for this tax year? See Form 8893 for more details	Yes	No
		X
6 Does the partnership satisfy all four of the following conditions?		
a The partnership's total receipts for the tax year were less than \$250,000.		
b The partnership's total assets at the end of the tax year were less than \$ 1 million.		
c Schedules K-1 are filed with the return and furnished to the partners on or before the due date (including extensions) for the partnership return.		
d The partnership is not filing and is not required to file Schedule M-3		X
If "Yes," the partnership is not required to complete Schedules L, M-1, and M-2; Item F on page 1 of Form 1065; or Item L on Schedule K-1.		
7 Is this partnership a publicly traded partnership as defined in section 469(k)(2)?		X
8 During the tax year, did the partnership have any debt that was cancelled, was forgiven, or had the terms modified so as to reduce the principal amount of the debt?		X
9 Has this partnership filed, or is it required to file, Form 8918, Material Advisor Disclosure Statement, to provide information on any reportable transaction?		X
10 At any time during calendar year 2016, did the partnership have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). If "Yes," enter the name of the foreign country. ▶		X

Form **1065** (2016)

Schedule B Other Information (continued)

	Yes	No
11 At any time during the tax year, did the partnership receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes," the partnership may have to file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts. See instructions		X
12a Is the partnership making, or had it previously made (and not revoked), a section 754 election? See instructions for details regarding a section 754 election.		X
b Did the partnership make for this tax year an optional basis adjustment under section 743(b) or 734(b)? If "Yes," attach a statement showing the computation and allocation of the basis adjustment. See instructions		X
c Is the partnership required to adjust the basis of partnership assets under section 743(b) or 734(b) because of a substantial built-in loss (as defined under section 743(d)) or substantial basis reduction (as defined under section 734(d))? If "Yes," attach a statement showing the computation and allocation of the basis adjustment. See instructions		X
13 Check this box if, during the current or prior tax year, the partnership distributed any property received in a like-kind exchange or contributed such property to another entity (other than disregarded entities wholly owned by the partnership throughout the tax year) <input type="checkbox"/>		
14 At any time during the tax year, did the partnership distribute to any partner a tenancy-in-common or other undivided interest in partnership property?		X
15 If the partnership is required to file Form 8858, Information Return of U.S. Persons With Respect To Foreign Disregarded Entities, enter the number of Forms 8858 attached. See instructions		
16 Does the partnership have any foreign partners? If "Yes," enter the number of Forms 8805, Foreign Partner's Information Statement of Section 1446 Withholding Tax, filed for this partnership.		X
17 Enter the number of Forms 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships, attached to this return.		
18a Did you make any payments in 2016 that would require you to file Form(s) 1099? See instructions		
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.		
21 During the partnership's tax year, did the partnership make any payments that would require it to file Form 1042 and 1042-S under chapter 3 (sections 1441 through 1464) or chapter 4 (sections 1471 through 1474)?		X
22 Was the partnership a specified domestic entity required to file Form 8938 for the tax year (See the Instructions for Form 8938)?		X

Designation of Tax Matters Partner (see instructions)

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

Name of designated TMP	▶ JOHN L. CUTTER	Identifying number of TMP	▶ 542-50-7455
If the TMP is an entity, name of TMP representative	▶	Phone number of TMP	▶
Address of designated TMP	▶ 2188 WYNTERBROOK DRIVE HIGHLANDS RANCH, CO 80126		

Form **1065** (2016)

Schedule K Partners' Distributive Share Items		Total amount	
Income (Loss)	1 Ordinary business income (loss) (page 1, line 22)	1	-547,985.
	2 Net rental real estate income (loss) (attach Form 8825)	2	
	3 a Other gross rental income (loss)	3a	
	b Expenses from other rental activities (attach statement)	3b	
	c Other net rental income (loss). Subtract line 3b from line 3a	3c	
	4 Guaranteed payments	4	55,523.
	5 Interest income	5	
	6 Dividends: a Ordinary dividends	6a	
	b Qualified dividends	6b	
	7 Royalties	7	
	8 Net short-term capital gain (loss) (attach Schedule D (Form 1065))	8	
9 a Net long-term capital gain (loss) (attach Schedule D (Form 1065))	9a		
	b Collectibles (28%) gain (loss)	9b	
	c Unrecaptured section 1250 gain (attach statement)	9c	
10 Net section 1231 gain (loss) (attach Form 4797)	10		
11 Other income (loss) (see instructions) Type ▶	11		
Deductions	12 Section 179 deduction (attach Form 4562)	12	
	13 a Contributions SEE STATEMENT 3	13a	84.
	b Investment interest expense	13b	
	c Section 59(e)(2) expenditures: (1) Type ▶ (2) Amount ▶	13c(2)	
d Other deductions (see instructions) Type ▶ SEE STATEMENT 4	13d	51,841.	
Self-Employment	14 a Net earnings (loss) from self-employment	14a	-492,462.
	b Gross farming or fishing income	14b	
	c Gross nonfarm income	14c	4,086,387.
Credits	15 a Low-income housing credit (section 42(j)(5))	15a	
	b Low-income housing credit (other)	15b	
	c Qualified rehabilitation expenditures (rental real estate) (attach Form 3468, if applicable)	15c	
	d Other rental real estate credits (see instructions) Type ▶	15d	
	e Other rental credits (see instructions) Type ▶	15e	
	f Other credits (see instructions) Type ▶	15f	
Foreign Transactions	16 a Name of country or U.S. possession ▶		
	b Gross income from all sources	16b	
	c Gross income sourced at partner level	16c	
	Foreign gross income sourced at partnership level		
	d Passive category ▶ e General category ▶ f Other ▶	16f	
	Deductions allocated and apportioned at partner level		
	g Interest expense ▶ h Other ▶	16h	
	Deductions allocated and apportioned at partnership level to foreign source income		
	i Passive category ▶ j General category ▶ k Other ▶	16k	
	l Total foreign taxes (check one): ▶ Paid <input type="checkbox"/> Accrued <input type="checkbox"/> ▶	16l	
	m Reduction in taxes available for credit (attach statement)	16m	
n Other foreign tax information (attach statement)			
Alternative Minimum Tax (AMT) Items	17 a Post-1986 depreciation adjustment	17a	42,524.
	b Adjusted gain or loss	17b	
	c Depletion (other than oil and gas)	17c	
	d Oil, gas, and geothermal properties - gross income	17d	
	e Oil, gas, and geothermal properties - deductions	17e	
	f Other AMT items (attach statement)	17f	
Other Information	18 a Tax-exempt interest income	18a	
	b Other tax-exempt income	18b	
	c Nondeductible expenses	18c	
	19 a Distributions of cash and marketable securities	19a	21,030.
	b Distributions of other property	19b	
	20 a Investment income	20a	
b Investment expenses	20b		
c Other items and amounts (attach statement)			

Analysis of Net Income (Loss)

1 Net income (loss). Combine Schedule K, lines 1 through 11. From the result, subtract the sum of Schedule K, lines 12 through 13d, and 16l						1	-544,387.
2 Analysis by partner type:	(i) Corporate	(ii) Individual (active)	(iii) Individual (passive)	(iv) Partnership	(v) Exempt Organization	(vi) Nominee/Other	
a General partners							
b Limited partners		-544,387.					

Schedule L Balance Sheets per Books

Assets	Beginning of tax year		End of tax year	
	(a)	(b)	(c)	(d)
1 Cash		107,369.		-179,364.
2a Trade notes and accounts receivable	16,778.		53,782.	
b Less allowance for bad debts		16,778.		53,782.
3 Inventories		44,800.		41,366.
4 U.S. government obligations				
5 Tax-exempt securities				
6 Other current assets (attach statement)	STATEMENT 5	2,051,565.		2,017,844.
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	2,404,149.		2,404,149.	
b Less accumulated depreciation	986,662.	1,417,487.	1,265,214.	1,138,935.
10a Depletable assets				
b Less accumulated depletion				
11 Land (net of any amortization)				
12a Intangible assets (amortizable only)	447,631.		447,631.	
b Less accumulated amortization	136,510.	311,121.	166,353.	281,278.
13 Other assets (attach statement)				
14 Total assets		3,949,120.		3,353,841.
Liabilities and Capital				
15 Accounts payable		198,723.		258,684.
16 Mortgages, notes, bonds payable in less than 1 year				
17 Other current liabilities (attach statement)	STATEMENT 6	1,552,490.		1,424,930.
18 All nonrecourse loans				
19a Loans from partners (or persons related to partners)				
b Mortgages, notes, bonds payable in 1 year or more		2,366,017.		2,257,763.
20 Other liabilities (attach statement)				
21 Partners' capital accounts		-168,110.		-587,536.
22 Total liabilities and capital		3,949,120.		3,353,841.

Schedule M-1 Reconciliation of Income (Loss) per Books With Income (Loss) per Return

Note. The partnership may be required to file Schedule M-3 (see instructions).

1 Net income (loss) per books	-548,396.	6 Income recorded on books this year not included on Schedule K, lines 1 through 11 (itemize):	
2 Income included on Schedule K, lines 1, 2, 3c, 5, 6a, 7, 8, 9a, 10, and 11, not recorded on books this year (itemize):		a Tax-exempt interest \$	
3 Guaranteed payments (other than health insurance)	3,682.	7 Deductions included on Schedule K, lines 1 through 13d, and 16l, not charged against book income this year (itemize):	
4 Expenses recorded on books this year not included on Schedule K, lines 1 through 13d, and 16l (itemize):		a Depreciation \$	
STMT 8 327.		8 Add lines 6 and 7	
a Depreciation \$		9 Income (loss) (Analysis of Net Income (Loss), line 1). Subtract line 8 from line 5	-544,387.
b Travel and entertainment \$	327.		
5 Add lines 1 through 4	-544,387.		

Schedule M-2 Analysis of Partners' Capital Accounts

1 Balance at beginning of year	-168,110.	6 Distributions: a Cash	21,030.
2 Capital contributed: a Cash	150,000.	b Property	
b Property		7 Other decreases (itemize):	
3 Net income (loss) per books	-548,396.	8 Add lines 6 and 7	21,030.
4 Other increases (itemize):		9 Balance at end of year. Subtract line 8 from line 5	-587,536.
5 Add lines 1 through 4	-566,506.		

Cost of Goods Sold

(Rev. October 2016)

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

OMB No. 1545-0123

Department of the Treasury
Internal Revenue Service▶ Information about Form 1125-A and its instructions is at www.irs.gov/form1125a.

Name **CUTTER RESTAURANT GROUP, LLC**
C/O JOHN L. CUTTER, MBR

Employer identification number
26-0555883

1	Inventory at beginning of year	1	44,800.
2	Purchases	2	1,755,593.
3	Cost of labor	3	
4	Additional section 263A costs (attach schedule)	4	
5	Other costs (attach schedule) SEE STATEMENT 9	5	52,468.
6	Total. Add lines 1 through 5	6	1,852,861.
7	Inventory at end of year	7	41,366.
8	Cost of goods sold. Subtract line 7 from line 6. Enter here and on Form 1120, page 1, line 2 or the appropriate line of your tax return. See instructions	8	1,811,495.

9 a Check all methods used for valuing closing inventory:

- (i) ☒ Cost
- (ii) ☐ Lower of cost or market
- (iii) ☐ Other (Specify method used and attach explanation) ▶

b Check if there was a writedown of subnormal goods ▶ ☐**c** Check if the LIFO inventory method was adopted this tax year for any goods (if checked, attach Form 970) ▶ ☐**d** If the LIFO inventory method was used for this tax year, enter amount of closing inventory computed under LIFO **9d** **e** If property is produced or acquired for resale, do the rules of Section 263A apply to the entity? See instructions ☐ Yes ☒ No**f** Was there any change in determining quantities, cost, or valuations between opening and closing inventory? ☐ Yes ☒ No
If "Yes," attach explanation.

For Paperwork Reduction Act Notice, see separate instructions.

Form 1125-A (Rev. 10-2016)

**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.**

OMB No. 1545-0099

Name of partnership

**CUTTER RESTAURANT GROUP, LLC
C/O JOHN L. CUTTER, MBR**

Employer identification number

26-0555883**Part I Entities Owning 50% or More of the Partnership** (Form 1065, Schedule B, Question 3a)

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

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

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

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

(i) Name of Individual or Estate	(ii) Identifying Number (if any)	(iii) Country of Citizenship (see instructions)	(iv) Maximum Percentage Owned in Profit, Loss, or Capital
JOHN L. CUTTER	542-50-7455	UNITED STATES	100.00
JAMISON CUTTER	542-90-6514	UNITED STATES	100.00

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

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

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

Name of partnership CUTTER RESTAURANT GROUP, LLC C/O JOHN L. CUTTER, MBR		Employer identification number 26-0555883	
1 a Ordinary income (loss) (Schedule K, line 1)	1a	-547,985.	
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	-547,985.	
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	-547,985.	
b Part of line 3a allocated to limited partners, estates, trusts, corporations, exempt organizations, and IRAs	3b		
c Subtract line 3b from line 3a			3c -547,985.
4 a Guaranteed payments to partners (Schedule K, line 4) derived from a trade or business as defined in section 1402(c)	4a	55,523.	
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 55,523.
5 Net earnings (loss) from self-employment. Combine lines 3c and 4c. Enter here and on Schedule K, line 14a	5		-492,462.

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

Cutter Restaurant Group, LLC
c/o John L. Cutter, Mbr
2253 E. Briarwood Ave, Ste 509
Littleton, CO 80122-3286

Employer Identification Number: 26-0555883

For the Year Ending December 31, 2016

Cutter Restaurant Group, LLC c/o John L. Cutter, Mbr is making
the de minimis safe harbor election under Reg. Sec.
1.263(a)-1(f).

FORM 1065	TAX EXPENSE	STATEMENT	1
DESCRIPTION		AMOUNT	
PAYROLL TAXES		211,511.	
TAXES - OTHER		86,692.	
TOTAL TO FORM 1065, LINE 14		298,203.	

FORM 1065	OTHER DEDUCTIONS	STATEMENT	2
DESCRIPTION		AMOUNT	
ADMIN EXPENSES		9,714.	
ADVERTISING		61,773.	
ALLOCATED EXPENSES		-16,411.	
AMORTIZATION EXPENSE		29,842.	
BANK & CREDIT CARD FEES		148,378.	
BUSINESS TAXES & LICENSES		271.	
CASH/SHORT & OVER		1,282.	
CLEANING SERVICE		45,729.	
CUSTOMER MUSIC		1,800.	
DUES & SUBSCRIPTIONS		3,430.	
EQUIPMENT RENTAL		6,855.	
INSURANCE		84,699.	
LEGAL/ACCOUNTING & PROFESSIONAL		28,812.	
LINENS & UNIFORMS		28,086.	
MEETINGS		2,079.	
MENUS		5,553.	
MISC EXP		179.	
OFFICE SUPPLIES		11,896.	
PARKING		27,265.	
PEST CONTROL		2,508.	
POSTAGE/FREIGHT/COURIER		8,224.	
PRINTING & PAPER		217.	
RECRUITING EXP		35.	
ROYALTIES		255,598.	
SECURITY/ARMORED CAR		8,074.	
TELEPHONE/INTERNET		24,162.	
TRASH SERVICE		19,339.	
TRAVEL		12.	
UTILITIES		115,183.	
VEHICLE EXP		2,558.	
VEHICLE EXP		7,079.	
TOTAL TO FORM 1065, LINE 20		924,221.	

SCHEDULE K	CHARITABLE CONTRIBUTIONS	STATEMENT	3
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DESCRIPTION	TYPE	AMOUNT
DONATIONS	CASH (50%)	84.
TOTALS TO SCHEDULE K, LINE 13A		84.

SCHEDULE K	OTHER DEDUCTIONS	STATEMENT	4
------------	------------------	-----------	---

DESCRIPTION	AMOUNT
HEALTH INSURANCE PREMIUMS	51,841.
TOTAL INCLUDED IN SCHEDULE K, LINE 13D	51,841.

SCHEDULE L	OTHER CURRENT ASSETS	STATEMENT	5
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DESCRIPTION	BEGINNING OF TAX YEAR	END OF TAX YEAR
SHORT TERM NOTE RECEIVABLE	7,500.	
PREPAID RENT	7,322.	0.
PREPAID INSURANCE	44,691.	0.
PREPAID EXPENSE	5,332.	0.
DUE FROM AFFILIATE	1,986,720.	2,017,844.
TOTAL TO SCHEDULE L, LINE 6	2,051,565.	2,017,844.

SCHEDULE L	OTHER CURRENT LIABILITIES	STATEMENT	6
------------	---------------------------	-----------	---

DESCRIPTION	BEGINNING OF TAX YEAR	END OF TAX YEAR
GIFT CERTIFICATES	25,226.	22,124.
ACCRUED PAYROLL	67,328.	0.
PAYROLL TAXES PAYABLE	26,262.	0.
ACCRUED UTILITIES	13,055.	0.
ACCRUED ROYALTIES	30,741.	0.
SALES TAX PAYABLE	35,257.	32,773.
DUE TO AFFILIATE	1,048,776.	1,085,654.
TENNANT ALLOWANCE	305,845.	284,379.
TOTAL TO SCHEDULE L, LINE 17	1,552,490.	1,424,930.

FORM 1065	PARTNERS' CAPITAL ACCOUNT SUMMARY				STATEMENT 7
PARTNER NUMBER	BEGINNING CAPITAL	CAPITAL CONTRIBUTED	SCHEDULE M-2 LNS 3, 4 & 7	WITH- DRAWALS	ENDING CAPITAL
1	-168,110.	150,000.	-548,396.	21,030.	-587,536.
2	0.		0.		0.
TOTAL	-168,110.	150,000.	-548,396.	21,030.	-587,536.

Schedule K-1
(Form 1065)

2016

☐ Final K-1☐ Amended K-1

OMB No. 1545-0123

Department of the Treasury
Internal Revenue Service

For calendar year 2016, or tax

year beginning _____

ending _____

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

▶ See separate instructions.

**Part III Partner's Share of Current Year Income,
Deductions, Credits, and Other Items**

1 Ordinary business income (loss) - 547,985.	15 Credits
2 Net rental real estate income (loss)	16 Foreign transactions
3 Other net rental income (loss)	
4 Guaranteed payments 28,959.	
5 Interest income	
6a Ordinary dividends	17 Alternative min tax (AMT) items
6b Qualified dividends	A 42,524.
7 Royalties	18 Tax-exempt income and nondeductible expenses
8 Net short-term capital gain (loss)	
9a Net long-term capital gain (loss)	
9b Collectibles (28%) gain (loss)	19 Distributions A 21,030.
9c Unrecaptured sec 1250 gain	20 Other information
10 Net section 1231 gain (loss)	
11 Other income (loss)	
12 Section 179 deduction	
13 Other deductions A 84. M 27,637.	
14 Self-employment earnings (loss) A -519,026. C 4,086,387.	

*See attached statement for additional information.

For IRS Use Only

Part I Information About the Partnership**A** Partnership's employer identification number
26-0555883**B** Partnership's name, address, city, state, and ZIP code
CUTTER RESTAURANT GROUP, LLC
C/O JOHN L. CUTTER, MBR
2253 E. BRIARWOOD AVE, STE 509
LITTLETON, CO 80122-3286**C** IRS Center where partnership filed return
E-FILE**D** ☐ Check if this is a publicly traded partnership (PTP)**Part II Information About the Partner****E** Partner's identifying number
542-50-7455**F** Partner's name, address, city, state, and ZIP code
JOHN L. CUTTER
2188 WYNTERBROOK DRIVE
HIGHLANDS RANCH, CO 80126**G** ☒ General partner or LLC member-manager ☐ Limited partner or other LLC member**H** ☒ Domestic partner ☐ Foreign partner**I** What type of entity is this partner? INDIVIDUAL**I2** If this partner is a retirement plan (IRA/SEP/Keogh/etc.), check here ☐**J** Partner's share of profit, loss, and capital:

	Beginning	Ending
Profit	90.00000000%	90.00000000%
Loss	100.00000000%	100.00000000%
Capital	90.00000000%	90.00000000%

K Partner's share of liabilities at year end:

Nonrecourse	\$	
Qualified nonrecourse financing	\$	
Recourse	\$	2,257,763.

L Partner's capital account analysis:

Beginning capital account	\$	-168,110.
Capital contributed during the year	\$	150,000.
Current year increase (decrease)	\$	-548,396.
Withdrawals & distributions	\$(21,030.)
Ending capital account	\$	-587,536.

☒ Tax basis ☐ GAAP ☐ Section 704(b) book
☐ Other (explain)
M Did the partner contribute property with a built-in gain or loss?☐ Yes ☒ No

If "Yes," attach statement (see instructions)

SCHEDULE K-1

CURRENT YEAR INCREASES (DECREASES)

DESCRIPTION	AMOUNT	TOTALS
ORDINARY INCOME (LOSS)	-547,985.	
SCHEDULE K-1 INCOME SUBTOTAL		-547,985.
CHARITABLE CONTRIBUTIONS	-84.	
HEALTH INSURANCE PREMIUMS	27,637.	
OTHER DEDUCTIONS	-27,637.	
SCHEDULE K-1 DEDUCTIONS SUBTOTAL		-84.
NET INCOME (LOSS) PER SCHEDULE K-1		-548,069.
FINES & PENALTIES	-327.	
OTHER INCREASES OR DECREASES SUBTOTAL		-327.
TOTAL TO SCHEDULE K-1, ITEM L		-548,396.

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

1. Ordinary business income (loss). Determine whether the income (loss) is passive or nonpassive and enter on your return as follows.

	Report on
Passive loss	See the Partner's Instructions
Passive income	Schedule E, line 28, column (g)
Nonpassive loss	Schedule E, line 28, column (h)
Nonpassive income	Schedule E, line 28, column (i)
2. Net rental real estate income (loss)	See the Partner's Instructions
3. Other net rental income (loss)	See the Partner's Instructions
Net income	Schedule E, line 28, column (g)
Net loss	See the Partner's Instructions
4. Guaranteed payments	Schedule E, line 28, column (j)
5. Interest income	Form 1040, line 8a
6a. Ordinary dividends	Form 1040, line 9a
6b. Qualified dividends	Form 1040, line 9b
7. Royalties	Schedule E, line 4
8. Net short-term capital gain (loss)	Schedule D, line 5
9a. Net long-term capital gain (loss)	Schedule D, line 12
9b. Collectibles (28%) gain (loss)	28% Rate Gain Worksheet, line 4 (Schedule D Instructions)
9c. Unrecaptured section 1250 gain	See the Partner's Instructions
10. Net section 1231 gain (loss)	See the Partner's Instructions
11. Other income (loss)	See the Partner's Instructions
Code	
A Other portfolio income (loss)	See the Partner's Instructions
B Involuntary conversions	See the Partner's Instructions
C Sec. 1256 contracts & straddles	Form 6781, line 1
D Mining exploration costs recapture	See Pub. 535
E Cancellation of debt	Form 1040, line 21 or Form 982
F Other income (loss)	See the Partner's Instructions
12. Section 179 deduction	See the Partner's Instructions
13. Other deductions	See the Partner's Instructions
A Cash contributions (50%)	See the Partner's Instructions
B Cash contributions (30%)	
C Noncash contributions (50%)	
D Noncash contributions (30%)	
E Capital gain property to a 50% organization (30%)	
F Capital gain property (20%)	Form 4952, line 1
G Contributions (100%)	
H Investment interest expense	Schedule E, line 19
I Deductions - royalty income	See the Partner's Instructions
J Section 59(e)(2) expenditures	Schedule A, line 23
K Deductions - portfolio (2% floor)	Schedule A, line 28
L Deductions - portfolio (other)	Schedule A, line 1 or Form 1040, line 29
M Amounts paid for medical insurance	See the Partner's Instructions
N Educational assistance benefits	Form 2441, line 12
O Dependent care benefits	See the Partner's Instructions
P Preproductive period expenses	See the Partner's Instructions
Q Commercial revitalization deduction from rental real estate activities	See Form 8582 Instructions
R Pensions and IRAs	See the Partner's Instructions
S Reforestation expense deduction	See the Partner's Instructions
T Domestic production activities information	See Form 8903 Instructions
U Qualified production activities income	Form 8903, line 7b
V Employer's Form W-2 wages	Form 8903, line 17
W Other deductions	See the Partner's Instructions

14. Self-employment earnings (loss)

Note: If you have a section 179 deduction or any partner-level deductions, see the Partner's Instructions before completing Schedule SE.

A Net earnings (loss) from self-employment	Schedule SE, Section A or B
B Gross farming or fishing income	See the Partner's Instructions
C Gross non-farm income	See the Partner's Instructions

15. Credits

A Low-income housing credit (section 42(j)(5)) from pre-2008 buildings	See the Partner's Instructions
B Low-income housing credit (other) from pre-2008 buildings	
C Low-income housing credit (section 42(j)(5)) from post-2007 buildings	
D Low-income housing credit (other) from post-2007 buildings	
E Qualified rehabilitation expenditures (rental real estate)	
F Other rental real estate credits	Form 1040, line 73; check box 4
G Other rental credits	
H Undistributed capital gains credit	See the Partner's Instructions
I Biofuel producer credit	
J Work opportunity credit	
K Disabled access credit	

Code	Report on
L Empowerment zone employment credit	See the Partner's Instructions
M Credit for increasing research activities	
N Credit for employer social security and Medicare taxes	
O Backup withholding	
P Other credits	
16. Foreign transactions	
A Name of country or U.S. possession	Form 1116, Part I
B Gross income from all sources	
C Gross income sourced at partner level	
Foreign gross income sourced at partnership level	
D Passive category	Form 1116, Part I
E General category	
F Other	
Deductions allocated and apportioned at partner level	
G Interest expense	Form 1116, Part I
H Other	Form 1116, Part I
Deductions allocated and apportioned at partnership level to foreign source income	
I Passive category	Form 1116, Part I
J General category	
K Other	
Other information	
L Total foreign taxes paid	Form 1116, Part II
M Total foreign taxes accrued	Form 1116, Part II
N Reduction in taxes available for credit	Form 1116, line 12
O Foreign trading gross receipts	Form 8873
P Extraterritorial income exclusion	Form 8873
Q Other foreign transactions	See the Partner's Instructions
17. Alternative minimum tax (AMT) items	
A Post-1986 depreciation adjustment	See the Partner's Instructions and the Instructions for Form 6251
B Adjusted gain or loss	
C Depletion (other than oil & gas)	
D Oil, gas, & geothermal - gross income	
E Oil, gas, & geothermal - deductions	
F Other AMT items	
18. Tax-exempt income and nondeductible expenses	
A Tax-exempt interest income	Form 1040, line 8b
B Other tax-exempt income	See the Partner's Instructions
C Nondeductible expenses	See the Partner's Instructions
19. Distributions	
A Cash and marketable securities	See the Partner's Instructions
B Distribution subject to section 737	
C Other property	
20. Other information	
A Investment income	Form 4952, line 4a
B Investment expenses	Form 4952, line 5
C Fuel tax credit information	Form 4136
D Qualified rehabilitation expenditures (other than rental real estate)	See the Partner's Instructions
E Basis of energy property	See the Partner's Instructions
F Recapture of low-income housing credit (section 42(j)(5))	Form 8611, line 8
G Recapture of low-income housing credit (other)	Form 8611, line 8
H Recapture of investment credit	See Form 4255
I Recapture of other credits	See the Partner's Instructions
J Look-back interest - completed long-term contracts	See Form 8697
K Look-back interest - income forecast method	See Form 8866
L Dispositions of property with section 179 deductions	See the Partner's Instructions
M Recapture of section 179 deduction	
N Interest expense for corporate partners	
O Section 453(l)(3) information	
P Section 453A(c) information	
Q Section 1260(b) information	
R Interest allocable to production expenditures	
S CCF nonqualified withdrawals	
T Depletion information - oil and gas	
U Reserved	
V Unrelated business taxable income	
W Precontribution gain (loss)	
X Section 108(i) information	
Y Net investment income	
Z Other information	

Schedule K-1
(Form 1065)

2016

☐ Final K-1☐ Amended K-1

OMB No. 1545-0123

Department of the Treasury
Internal Revenue Service

For calendar year 2016, or tax

year beginning _____

ending _____

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

▶ See separate instructions.

**Part III Partner's Share of Current Year Income,
Deductions, Credits, and Other Items**

1 Ordinary business income (loss) 0.	15 Credits
2 Net rental real estate income (loss)	16 Foreign transactions
3 Other net rental income (loss)	
4 Guaranteed payments 26,564.	
5 Interest income	
6a Ordinary dividends	17 Alternative min tax (AMT) items
6b Qualified dividends	
7 Royalties	18 Tax-exempt income and nondeductible expenses
8 Net short-term capital gain (loss)	
9a Net long-term capital gain (loss)	
9b Collectibles (28%) gain (loss)	19 Distributions
9c Unrecaptured sec 1250 gain	20 Other information
10 Net section 1231 gain (loss)	
11 Other income (loss)	
12 Section 179 deduction	
13 Other deductions M 24,204.	
14 Self-employment earnings (loss) A 26,564.	

*See attached statement for additional information.

For IRS Use Only

Part I Information About the Partnership**A** Partnership's employer identification number

26-0555883

B Partnership's name, address, city, state, and ZIP codeCUTTER RESTAURANT GROUP, LLC
C/O JOHN L. CUTTER, MBR
2253 E. BRIARWOOD AVE, STE 509
LITTLETON, CO 80122-3286**C** IRS Center where partnership filed return

E-FILE

D ☐ Check if this is a publicly traded partnership (PTP)**Part II Information About the Partner****E** Partner's identifying number

542-90-6514

F Partner's name, address, city, state, and ZIP codeJAMISON CUTTER
731 MUELLER DRIVE
LITTLETON, CO 80129**G** ☐ General partner or LLC

member-manager

☒

Limited partner or other LLC

member

H ☒ Domestic partner☐

Foreign partner

I What type of entity is this partner? INDIVIDUAL**I2** If this partner is a retirement plan (IRA/SEP/Keogh/etc.), check here ☐**J** Partner's share of profit, loss, and capital:

	Beginning	Ending
Profit	10.0000000%	10.0000000%
Loss	0.0000000%	0.0000000%
Capital	10.0000000%	10.0000000%

K Partner's share of liabilities at year end:

Nonrecourse	\$	
Qualified nonrecourse financing	\$	
Recourse	\$	0.

L Partner's capital account analysis:

Beginning capital account	\$	
Capital contributed during the year	\$	
Current year increase (decrease)	\$	
Withdrawals & distributions	\$(
Ending capital account	\$	0.

☒ Tax basis ☐ GAAP ☐ Section 704(b) book
☐ Other (explain)
M Did the partner contribute property with a built-in gain or loss?☐ Yes ☒ No

If "Yes," attach statement (see instructions)

SCHEDULE K-1 CURRENT YEAR INCREASES (DECREASES)		
DESCRIPTION	AMOUNT	TOTALS
HEALTH INSURANCE PREMIUMS	24,204.	
OTHER DEDUCTIONS	-24,204.	
SCHEDULE K-1 DEDUCTIONS SUBTOTAL		0.
TOTAL TO SCHEDULE K-1, ITEM L		0.

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

1. Ordinary business income (loss). Determine whether the income (loss) is passive or nonpassive and enter on your return as follows.

	Report on
Passive loss	See the Partner's Instructions
Passive income	Schedule E, line 28, column (g)
Nonpassive loss	Schedule E, line 28, column (h)
Nonpassive income	Schedule E, line 28, column (i)
2. Net rental real estate income (loss)	See the Partner's Instructions
3. Other net rental income (loss)	See the Partner's Instructions
Net income	Schedule E, line 28, column (g)
Net loss	See the Partner's Instructions
4. Guaranteed payments	Schedule E, line 28, column (j)
5. Interest income	Form 1040, line 8a
6a. Ordinary dividends	Form 1040, line 9a
6b. Qualified dividends	Form 1040, line 9b
7. Royalties	Schedule E, line 4
8. Net short-term capital gain (loss)	Schedule D, line 5
9a. Net long-term capital gain (loss)	Schedule D, line 12
9b. Collectibles (28%) gain (loss)	28% Rate Gain Worksheet, line 4 (Schedule D Instructions)
9c. Unrecaptured section 1250 gain	See the Partner's Instructions
10. Net section 1231 gain (loss)	See the Partner's Instructions
11. Other income (loss)	See the Partner's Instructions
Code	
A Other portfolio income (loss)	See the Partner's Instructions
B Involuntary conversions	See the Partner's Instructions
C Sec. 1256 contracts & straddles	Form 6781, line 1
D Mining exploration costs recapture	See Pub. 535
E Cancellation of debt	Form 1040, line 21 or Form 982
F Other income (loss)	See the Partner's Instructions
12. Section 179 deduction	See the Partner's Instructions
13. Other deductions	See the Partner's Instructions
A Cash contributions (50%)	See the Partner's Instructions
B Cash contributions (30%)	
C Noncash contributions (50%)	
D Noncash contributions (30%)	
E Capital gain property to a 50% organization (30%)	
F Capital gain property (20%)	Form 4952, line 1
G Contributions (100%)	
H Investment interest expense	
I Deductions - royalty income	
J Section 59(e)(2) expenditures	
K Deductions - portfolio (2% floor)	Schedule A, line 23
L Deductions - portfolio (other)	Schedule A, line 28
M Amounts paid for medical insurance	Schedule A, line 1 or Form 1040, line 29
N Educational assistance benefits	See the Partner's Instructions
O Dependent care benefits	Form 2441, line 12
P Preproductive period expenses	See the Partner's Instructions
Q Commercial revitalization deduction from rental real estate activities	See Form 8582 Instructions
R Pensions and IRAs	See the Partner's Instructions
S Reforestation expense deduction	See the Partner's Instructions
T Domestic production activities information	See Form 8903 Instructions
U Qualified production activities income	Form 8903, line 7b
V Employer's Form W-2 wages	Form 8903, line 17
W Other deductions	See the Partner's Instructions

14. Self-employment earnings (loss)

Note: If you have a section 179 deduction or any partner-level deductions, see the Partner's Instructions before completing Schedule SE.

A Net earnings (loss) from self-employment	Schedule SE, Section A or B
B Gross farming or fishing income	See the Partner's Instructions
C Gross non-farm income	See the Partner's Instructions

15. Credits

A Low-income housing credit (section 42(j)(5)) from pre-2008 buildings	See the Partner's Instructions
B Low-income housing credit (other) from pre-2008 buildings	
C Low-income housing credit (section 42(j)(5)) from post-2007 buildings	
D Low-income housing credit (other) from post-2007 buildings	
E Qualified rehabilitation expenditures (rental real estate)	
F Other rental real estate credits	Form 1040, line 73; check box 4
G Other rental credits	
H Undistributed capital gains credit	
I Biofuel producer credit	
J Work opportunity credit	
K Disabled access credit	See the Partner's Instructions

Code	Report on
L Empowerment zone employment credit	See the Partner's Instructions
M Credit for increasing research activities	
N Credit for employer social security and Medicare taxes	
O Backup withholding	
P Other credits	
16. Foreign transactions	
A Name of country or U.S. possession	Form 1116, Part I
B Gross income from all sources	
C Gross income sourced at partner level	
Foreign gross income sourced at partnership level	
D Passive category	Form 1116, Part I
E General category	
F Other	
Deductions allocated and apportioned at partner level	
G Interest expense	Form 1116, Part I
H Other	Form 1116, Part I
Deductions allocated and apportioned at partnership level to foreign source income	
I Passive category	Form 1116, Part I
J General category	
K Other	
Other information	
L Total foreign taxes paid	Form 1116, Part II
M Total foreign taxes accrued	Form 1116, Part II
N Reduction in taxes available for credit	Form 1116, line 12
O Foreign trading gross receipts	Form 8873
P Extraterritorial income exclusion	Form 8873
Q Other foreign transactions	See the Partner's Instructions
17. Alternative minimum tax (AMT) items	
A Post-1986 depreciation adjustment	See the Partner's Instructions and the Instructions for Form 6251
B Adjusted gain or loss	
C Depletion (other than oil & gas)	
D Oil, gas, & geothermal - gross income	
E Oil, gas, & geothermal - deductions	
F Other AMT items	
18. Tax-exempt income and nondeductible expenses	
A Tax-exempt interest income	Form 1040, line 8b
B Other tax-exempt income	See the Partner's Instructions
C Nondeductible expenses	See the Partner's Instructions
19. Distributions	
A Cash and marketable securities	See the Partner's Instructions
B Distribution subject to section 737	
C Other property	
20. Other information	
A Investment income	Form 4952, line 4a
B Investment expenses	Form 4952, line 5
C Fuel tax credit information	Form 4136
D Qualified rehabilitation expenditures (other than rental real estate)	See the Partner's Instructions
E Basis of energy property	See the Partner's Instructions
F Recapture of low-income housing credit (section 42(j)(5))	Form 8611, line 8
G Recapture of low-income housing credit (other)	Form 8611, line 8
H Recapture of investment credit	See Form 4255
I Recapture of other credits	See the Partner's Instructions
J Look-back interest - completed long-term contracts	See Form 8697
K Look-back interest - income forecast method	See Form 8866
L Dispositions of property with section 179 deductions	See the Partner's Instructions
M Recapture of section 179 deduction	
N Interest expense for corporate partners	
O Section 453(l)(3) information	
P Section 453A(c) information	
Q Section 1260(b) information	
R Interest allocable to production expenditures	
S CCF nonqualified withdrawals	
T Depletion information - oil and gas	
U Reserved	
V Unrelated business taxable income	
W Precontribution gain (loss)	
X Section 108(i) information	
Y Net investment income	
Z Other information	

2016 TAX RETURN FILING INSTRUCTIONS

COLORADO FORM 106

FOR THE YEAR ENDING

DECEMBER 31, 2016

Prepared for	CUTTER RESTAURANT GROUP, LLC C/O JOHN L. CUTTER, MBR 2253 E. BRIARWOOD AVE, STE 509 LITTLETON, CO 80122-3286
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 18, 2017.
Special Instructions	DO NOT MAIL THE PAPER COPY OF THE RETURN TO THE CDOR.



168453P 11019

DR 8453P (07/26/16)
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 Retain with your records

Colorado Account Number	FEIN	Tax Year Beginning (MM/DD/YY)	Tax Year End (MM/DD/YY)
04253995	26-0555883	01/01/16	12/31/16
Business Name	Phone Number		
CUTTER RESTAURANT GROUP, LLC C/O JOHN L.			
Address			
2253 E. BRIARWOOD AVE, STE 509			
City	State	ZIP	
LITTLETON	CO	80122-3286	
Part I - Tax Return Information			
1. Total Income, from federal Schedule K	1	\$	-492,462
2. Allowable deductions from federal Schedule K	2	\$	51,841
3. Colorado Tax, line 12 on Colorado Form 106, if applicable	3	\$	
4. Colorado Payments, line 18 on Colorado Form 106	4	\$	
5. Amount You Owe, line 28 on Colorado Form 106	5	\$	
6. Refund, line 31 Colorado Form 106	6	\$	
Part II - Declaration of Tax Payer			
Under penalties of perjury, I declare that I am an officer of the company listed above and the information provided for electronic filing and the amounts shown in Part I above agree with the amounts shown on the company's 2016 Federal/Colorado income tax returns, and that said tax returns, statements, schedules and attachments are true, correct, and complete to the best of my knowledge and belief. I understand that I (or my Electronic Return Originator (ERO) if applicable) may be required to provide paper copies of this declaration, my returns, withholding statements, schedules and attachments upon request by the Colorado Department of Revenue at any time during the period covered by the Colorado statute of limitations.			
Signature	Date (MM/DD/YY)	Title	
		MEMBER MANAGER	
Part III - Declaration of ERO/Preparer/Transmitter			
If the transmitter did not prepare the tax return, check here <input checked="" type="checkbox"/>			
If I am not the preparer, I declare only that the amounts shown in Part I above agree with the amounts shown on the taxpayer's 2016 Federal/Colorado income tax returns. If I am the preparer, under penalties of perjury I declare that I have reviewed the above taxpayer's 2016 Federal/Colorado income tax returns and that the information provided to me by the taxpayer and the amounts shown in Part I above agree with the amounts shown on said tax returns, and that said tax returns, statements, schedules, and attachments are true, correct, and complete to the best of of my knowledge and belief. As preparer, I further declare that I have obtained the taxpayer's signature on this form at the time of filing and have provided the taxpayer with copies of all forms and information filed. I also agree to maintain this signed Form (DR 8453P) for the period covered by the Colorado statute of limitations, and to provide paper copies of this declaration, said returns, withholding statements, schedules, and attachments upon request by the Colorado Department of Revenue at any time during this period.			
ERO's Signature	Preparer Identification Number or Your SSN		
JAMES BARRETT	P00382590		
Check if also Preparer <input checked="" type="checkbox"/>	Date (MM/DD/YY)		
	04/06/17		

Form 106 (09/21/16)
COLORADO DEPARTMENT OF REVENUE

(0043)

2016

Colorado Pass-Through Entity and
Composite Nonresident
Income Tax Form 106

160106 11019

-or-

Fiscal Year Beginning (MM/DD/16): Ending (MM/DD/YY)

• ☐ Mark for Amended Return

Name of Organization		Colorado Account Number	
CUTTER RESTAURANT GROUP, LLC C/O JOHN L. CUTTE		• 04253995	
Doing Business As		Federal Employer ID Number	
		• 26-0555883	
Address	City	State	ZIP
2253 E. BRIARWOOD AVE, STE 509	LITTLETON	CO	80122-3286

If you are attaching a statement disclosing a listed or reportable transaction, mark this box

• ☐

A. This return is being filed for (mark one):

• ☐ Partnership ☐ S Corporation ☒ LLC ☐ LP ☐ LLP ☐ LLLP ☐ Association ☐ Non-Profit

B. Beginning depreciable assets from federal return

C. Ending depreciable assets from federal return

• 2,404,149

• 2,404,149

D. Business or profession

E. Date of organization or incorporation (MM/DD/YY)

RESTAURANT FRANCHISE

10/01/07

F. If this is a final return, mark this box

• ☐

G. If the IRS has made any adjustments to your federal return or have you filed amended federal returns during the last four years, mark this box:

☐

H. Number of partners or shareholders as of year end

Explain:

2

Part I: Computation of Colorado Income

Round to the
nearest dollar

1. Ordinary income from line 1 federal Schedule K	• 1	-547,985	00
2. Total of all other income	• 2	55,523	00
3. Modifications increasing federal income	• 3		00
4. Total of lines 1, 2 and 3	4	-492,462	00
5. Allowable deductions from federal Schedule K	• 5	51,841	00
6. Colorado Marijuana Business Deduction	• 6		00
7. Other modifications decreasing federal income	• 7		00
8. Total of lines 5 through 7	8	51,841	00



160106 21019

Form 106 (09/21/16)
COLORADO DEPARTMENT OF REVENUE**Form 106**
Part II

Name	Account Number
CUTTER RESTAURANT GROUP, LLC C/O JOHN L. CUTT	04253995
9. Line 4 minus line 8	9 -544,303 00
10. Colorado Source Income from (mark one): <input checked="" type="checkbox"/> Part IV <input type="checkbox"/> Other (attach explanation) <input type="checkbox"/> Income is all Colorado Income	10 -544,303 00
File at: www.Colorado.gov/RevenueOnline - or - Mail to and make checks payable to: Colorado Department of Revenue Denver, CO 80261-0006	

Part II: Composite Nonresident Income Tax Return

Do not complete lines 11-31 unless you are filing a composite nonresident return.

11. Colorado-source Income of nonresident partners/shareholders electing to be included in this composite filing	11	00
12. Tax; 4.63% of the amount on line 11	12	00
13. 106CR credits allocated to these partners/shareholders/members (exclude lines 19 through 22, and lines 30 through 32, Form 106CR)	13	00
14. Non-refundable Enterprise Zone credits - as calculated, or from DR 1366 line 87	14	00
15. Certified auction group license fee credit allocated to these partners/shareholders/members	15	00
16. Total of lines 13, 14 and 15	16	00
17. Net tax, line 12 minus line 16	17	00
18. Estimated tax credits and extension payments	18	00
19. Withholding from lottery or gambling winnings	19	00
20. Gross conservation easement credit allocated to these partners/shareholders/members, from DR 1305G Line 33	20	00
21. Innovative Motor Vehicle Credit from form DR 0617 allocated to these partners/shareholders/members	21	00
22. Refundable Renewable Energy Tax Credit from line 88 of form DR 1366	22	00
23. Business Personal Property Credit: Use the worksheet in the DR 106 Book instructions to calculate, submit copy of assessor's statement	23	00
24. Subtotal; add lines 18 to 23	24	00
25. Penalty (include on Line 28)	25	00
26. Interest (include on Line 28)	26	00
27. Estimated tax penalty (include on Line 28)	27	00
28. If line 17 is greater than line 24, enter amount owed	28	00
29. Overpayment, line 24 minus line 17	29	00
30. Overpayment to be credited to 2017 estimated tax	30	00
31. Overpayment to be refunded	31	00



160106 31019

Name			Account Number		
CUTTER RESTAURANT GROUP, LLC C/O JOHN L. CUTT			04253995		
I declare this return to be true, correct and complete under penalty of perjury in the second degree. Declaration of preparer is based on all information of which preparer has any knowledge.					
Direct Deposit	Routing Number	<input type="text"/>		Type:	<input type="checkbox"/> Checking <input type="checkbox"/> Savings
	Account Number	<input type="text"/>			
May the Colorado Department of Revenue discuss this return with the paid preparer shown below (see instructions)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
Signature of partner or signature and title of officer			Date (MM/DD/YY)		
MEMBER MANAGER					
Person or firm preparing return (name and phone number)			Date (MM/DD/YY)		
JAMES BARRETT			4135368510		04/06/17
<small>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.</small>					

New For This Year:If you are filing this return **with** a check or payment,
please mail the return to:COLORADO DEPARTMENT OF REVENUE
Denver, CO 80261-0006If you are filing this return **without** a check or payment,
please mail the return to:COLORADO DEPARTMENT OF REVENUE
Denver, CO 80261-0005



160106 41019

Do not submit federal K-1 schedules

Name		Account Number	
CUTTER RESTAURANT GROUP, LLC C/O JOHN L.		04253995	
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		SSN or Colorado Account Number	
JOHN L. CUTTER		542-50-7455	
Address of Partner, Shareholder or Member		City	State ZIP
2188 WYNTERBROOK DRIVE		HIGHLANDS RA	CO 80126
<input type="checkbox"/> Composite <input type="checkbox"/> 0107 Attached <input type="checkbox"/> 0108 Filed		Profit/Loss or Stock Ownership Percentage	
		90.000000	
Name of Partner, Shareholder or Member		SSN or Colorado Account Number	
JAMISON CUTTER		542-90-6514	
Address of Partner, Shareholder or Member		City	State ZIP
731 MUELLER DRIVE		LITTLETON	CO 80129
<input type="checkbox"/> Composite <input type="checkbox"/> 0107 Attached <input type="checkbox"/> 0108 Filed		Profit/Loss or Stock Ownership Percentage	
		10.000000	
Name of Partner, Shareholder or Member		SSN or Colorado Account Number	
Address of Partner, Shareholder or Member		City	State ZIP
<input type="checkbox"/> Composite <input type="checkbox"/> 0107 Attached <input type="checkbox"/> 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		City	State ZIP
<input type="checkbox"/> Composite <input type="checkbox"/> 0107 Attached <input type="checkbox"/> 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		City	State ZIP
<input type="checkbox"/> Composite <input type="checkbox"/> 0107 Attached <input type="checkbox"/> 0108 Filed		Profit/Loss or Stock Ownership Percentage	



Name		Account Number	
CUTTER RESTAURANT GROUP, LLC C/O JOHN L.		04253995	
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	-544,303 00
Business Income Apportioned to Colorado by use of the Sales Factor Do Not Include Foreign Source Revenues Modified from Line 7, Part I, Page 1, Form 106			
	Colorado	Total	
2. Gross sales of tangible personal property • 2	5,745,276 00	5,745,276 00	
3. Gross revenue from services • 3	0 00	0 00	
4. Gross rents and royalties from real property • 4	0 00	0 00	
5. Gross proceeds from sales of real property • 5	0 00	0 00	
6. Taxable interest and dividend income • 6	0 00	0 00	
7. Gain from the sale of intangible personal property • 7	0 00	0 00	
8. Patent and copyright royalties • 8			00
9. Revenue from the performance of purely personal services • 9			00
10. Total revenue (total of lines 2 through 9 in each column) 10	5,745,276 00	5,745,276 00	
11. Line 10 (Colorado) divided by line 10 (Total) 11		100.0000	%
Complete Lines 12 and 15 only if nonbusiness income is being directly allocated. If all income is being treated as business income, enter 0 (zero) on Lines 12 and 15.			
12. Less income directly allocable (Nonbusiness Income Only):			
(a) Net rents and royalties from real or tangible property •			00
(b) Capital gains and losses •			00
(c) Interest and dividends •			00
(d) Patents and copyright royalties •			00
(e) Other nonbusiness income •			00
(f) Total income directly allocable (add lines (a) through (e)) 12			00
13. Modified federal taxable income subject to apportionment by formula, line 1 less line 12 13		-544,303	00
14. Income apportioned to Colorado by formula, line 11 multiplied by line 13 14		-544,303	00



Name		Account Number	
CUTTER RESTAURANT GROUP, LLC C/O JOHN L.		04253995	
15. Add income directly allocable to Colorado (Nonbusiness Income Only):			
(a) Net rents and royalties from real or tangible property	•		00
(b) Capital gains and losses	•		00
(c) Interest and dividends	•		00
(d) Patents and copyright royalties	•		00
(e) Other nonbusiness income	•		00
(f) Total income directly allocable (add lines (a) through (e))			15 00
16. Total income apportioned to Colorado, line 14 plus line 15. Enter on line 10, Part I, page 1, Form 106			16 -544,303 00
17. <input type="checkbox"/> Pursuant to §39-22-303.5(6) C.R.S., taxpayer elects to treat nonbusiness income as business income for the tax year ending:		Date (MM/DD/YY)	
17			

COLORADO SCHEDULE K-1 EQUIVALENT	Partner's Colorado Information For Calendar Year 2016 or Fiscal Year Beginning _____, 2016; and Ending _____, _____.	2016
Partner's Name, Address and ZIP Code JOHN L. CUTTER 2188 WYNTERBROOK DRIVE HIGHLANDS RANCH, CO 80126		Partner Number <u>1</u> Partner's Identifying Number 542-50-7455 <hr/> Resident <input checked="" type="checkbox"/> Nonresident <input type="checkbox"/> Amended Schedule K-1 <input type="checkbox"/> Final Schedule K-1 <input type="checkbox"/>
Partnership's Name, Address and ZIP Code CUTTER RESTAURANT GROUP, LLC C/O JOHN L. CUTTER, MBR 2253 E. BRIARWOOD AVE, STE 509 LITTLETON, CO 80122-3286		Partnership's Identifying Number 04253995 Partner's Percentage of: Ownership <u>90.00000000%</u> Profit and Loss <u>90.00000000%</u>
Federal income		-546,663.
Modifications increasing federal income		
<div style="border-bottom: 1px solid black; height: 15px; margin-bottom: 5px;"></div> <div style="border-bottom: 1px solid black; height: 15px; margin-bottom: 5px;"></div> <div style="border-bottom: 1px solid black; height: 15px; margin-bottom: 5px;"></div>		
Total modifications increasing federal income		
Modifications decreasing federal income		
<div style="border-bottom: 1px solid black; height: 15px; margin-bottom: 5px;"></div> <div style="border-bottom: 1px solid black; height: 15px; margin-bottom: 5px;"></div> <div style="border-bottom: 1px solid black; height: 15px; margin-bottom: 5px;"></div>		
Total modifications decreasing federal income		
Federal income modified for Colorado		-546,663.
Nonresidents: Colorado source income		

COLORADO SCHEDULE K-1 EQUIVALENT	Partner's Colorado Information For Calendar Year 2016 or Fiscal Year Beginning _____, 2016; and Ending _____, _____.	2016
Partner's Name, Address and ZIP Code JAMISON CUTTER 731 MUELLER DRIVE LITTLETON, CO 80129		Partner Number <u>2</u> Partner's Identifying Number 542-90-6514 <hr/> Resident <input checked="checked" type="checkbox"/> Nonresident <input type="checkbox"/> Amended Schedule K-1 <input type="checkbox"/> Final Schedule K-1 <input type="checkbox"/>
Partnership's Name, Address and ZIP Code CUTTER RESTAURANT GROUP, LLC C/O JOHN L. CUTTER, MBR 2253 E. BRIARWOOD AVE, STE 509 LITTLETON, CO 80122-3286		Partnership's Identifying Number 04253995 Partner's Percentage of: Ownership <u>10.00000000%</u> Profit and Loss <u>10.00000000%</u>
Federal income		2,360.
Modifications increasing federal income		
<div style="display: flex; justify-content: space-between;"> <div>_____</div> <div>_____</div> </div> <div style="display: flex; justify-content: space-between;"> <div>_____</div> <div>_____</div> </div>		
Total modifications increasing federal income		
Modifications decreasing federal income		
<div style="display: flex; justify-content: space-between;"> <div>_____</div> <div>_____</div> </div> <div style="display: flex; justify-content: space-between;"> <div>_____</div> <div>_____</div> </div>		
Total modifications decreasing federal income		
Federal income modified for Colorado		2,360.
Nonresidents: Colorado source income		

2016 TAX RETURN FILING INSTRUCTIONS

DELAWARE FORM 300

FOR THE YEAR ENDING

DECEMBER 31, 2016

Prepared for	CUTTER RESTAURANT GROUP, LLC C/O JOHN L. CUTTER, MBR 2253 E. BRIARWOOD AVE, STE 509 LITTLETON, CO 80122-3286
Prepared by	MEYERS BROTHERS KALICKA, P.C. 330 WHITNEY AVE, SUITE 800 HOLYOKE, MA 01040
To be signed and dated by	NOT APPLICABLE
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 DE DOR, PLEASE CONTACT OUR OFFICE. WE WILL THEN SUBMIT YOUR RETURN TO THE DE DOR.
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 MAY 1, 2017.
Special Instructions	DO NOT MAIL THE PAPER COPY OF THE RETURN TO THE DE DOR.

**Application for Automatic Extension of Time To File Certain
Business Income Tax, Information, and Other Returns**
▶ **File a separate application for each return.**

OMB No. 1545-0233

▶ **Information about Form 7004 and its separate instructions is at www.irs.gov/form7004.**

**Print
or
Type**

Name

CUTTER RESTAURANT GROUP, LLC
C/O JOHN L. CUTTER, MBR

Identifying number

26-0555883

Number, street, and room or suite no. (If P.O. box, see instructions.)

2253 E. BRIARWOOD AVE, STE 509

City, town, state, and ZIP code (If a foreign address, enter city, province or state, and country (follow the country's practice for entering postal code)).

LITTLETON, CO 80122-3286

Note: File request for extension by the due date of the return for which the extension is granted. See instructions before completing this form.

Part I Automatic Extension for C Corporations With Tax Years Ending December 31. See instructions.

1a Enter the form code for the return listed below that this application is for

Application Is For:	Form Code	Application Is For:	Form Code
Form 1120	12	Form 1120-ND (section 4951 taxes)	20
Form 1120-C	34	Form 1120-PC	21
Form 1120-F	15	Form 1120-POL	22
Form 1120-FSC	16	Form 1120-REIT	23
Form 1120-H	17	Form 1120-RIC	24
Form 1120-L	18	Form 1120-SF	26
Form 1120-ND	19		

Part II Automatic Extension for Certain Estates and Trusts. See instructions.

b Enter the form code for the return listed below that this application is for

Application Is For:	Form Code	Application Is For:	Form Code
Form 1041 (estate other than a bankruptcy estate)	04	Form 1041 (trust)	05

Part III Automatic Extension for Entities Not Using Part I, II, or IV. See instructions.

c Enter the form code for the return listed below that this application is for

Application Is For:	Form Code	Application Is For:	Form Code
Form 706-GS(D)	01	Form 1120-ND (section 4951 taxes)	20
Form 706-GS(T)	02	Form 1120-PC	21
Form 1041 (bankruptcy estate only)	03	Form 1120-POL	22
Form 1041-N	06	Form 1120-REIT	23
Form 1041-QFT	07	Form 1120-RIC	24
Form 1042	08	Form 1120S	25
Form 1065	09	Form 1120-SF	26
Form 1065-B	10	Form 3520-A	27
Form 1066	11	Form 8612	28
Form 1120	12	Form 8613	29
Form 1120-C	34	Form 8725	30
Form 1120-F	15	Form 8804	31
Form 1120-FSC	16	Form 8831	32
Form 1120-H	17	Form 8876	33
Form 1120-L	18	Form 8924	35
Form 1120-ND	19	Form 8928	36

Part IV Automatic Extension for C Corporations With Tax Years Ending June 30. See instructions.

d Enter the form code for the return listed below that this application is for

Application Is For:	Form Code	Application Is For:	Form Code
Form 1120	12	Form 1120-ND (section 4951 taxes)	20
Form 1120-C	34	Form 1120-PC	21
Form 1120-F	15	Form 1120-POL	22
Form 1120-FSC	16	Form 1120-REIT	23
Form 1120-H	17	Form 1120-RIC	24
Form 1120-L	18	Form 1120-SF	26
Form 1120-ND	19		

Part V All Filers Must Complete This Part

- 2** If the organization is a foreign corporation that does not have an office or place of business in the United States, check here ☐
- 3** If the organization is a corporation and is the common parent of a group that intends to file a consolidated return, check here ☐
If checked, attach a statement listing the name, address, and Employer Identification Number (EIN) for each member covered by this application.
- 4** If the organization is a corporation or partnership that qualifies under Regulations section 1.6081-5, check here ☐
- 5a** The application is for calendar year 2016, or tax year beginning _____, and ending _____
- b Short tax year.** If this tax year is less than 12 months, check the reason: ☐ Initial return ☐ Final return
☐ Change in accounting period ☐ Consolidated return to be filed ☐ Other (see instructions - attach explanation)

6 Tentative total tax	6	
7 Total payments and credits (see instructions)	7	
8 Balance due. Subtract line 7 from line 6 (see instructions)	8	

Form **7004** (Rev. 12-2016)

DEPARTMENT OF THE TREASURY
INTERNAL REVENUE SERVICE CENTER
OGDEN, UT 84201-0045



DF30016011019

FISCAL YEAR 01 01 16 To 12 31 16

BUSINESS NAME

CUTTER RESTAURANT GROUP, LLC C/O JO

ADDRESS

2253 E. BRIARWOOD AVE, STE 509

CITY

LITTLETON

STATE ZIP CODE

CO 801223286

REV CODE 0006

EMPLOYER IDENTIFICATION NUMBER

2 6 0 5 5 5 8 8 3

NATURE OF BUSINESS (SEE INSTRUCTIONS)

7 2 2 5 1 3

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? ☒ YES NO
DID THE PARTNERSHIP HAVE DELAWARE RESIDENT PARTNERS? YES ☒ NO HOW MANY?
C. TOTAL NUMBER OF PARTNERS: 2
D. YEAR PARTNERSHIP FORMED: 2007

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	-547985	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			
Enter in Column B the amount from Line 3	4	-547985	0
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	55523	0
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		
c. Unrecaptured Section 1250 gain - Fed Form 1065, Sch. K, Line 9c	12c		
13. Net gain (loss) under Section 1231 from Federal Form 1065, Schedule K, Line 10	13		13
14. Other income (loss) (Attach schedule) from Federal Form 1065, Schedule K, Line 11	14		14
15. Total Income (Combine Lines 4 through 12a, Line 13, and Line 14)	15	-492462	0

DEDUCTIONS:

16. Charitable contributions from Federal Form 1065, Schedule K, Line 13(a)	16	84	0
17. Section 179 expense deduction from 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	51841	0

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.

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	
1. Total real and tangible property owned	0	0	2448949	2445515	1
2. Real tangible property rented (eight times annual rent paid)	0	0	4909792	4909792	2
3. Total (Combine Lines 1 and 2)	0	0	7358741	7355307	3
4. Less: value at original cost of real and tangible property (see instructions)					4
5. Net Values (Subtract Line 4 from Line 3)	0	0	7358741	7355307	5
6. Total (Combine Line 5 Beginning and End of Year Totals)		0	14714048		6
7. Average values. (Divide Line 6 by 2)		0	7357024		7

SECTION B - WAGES, SALARIES, AND OTHER COMPENSATION PAID OR ACCRUED TO EMPLOYEES

8. Wages, salaries and other compensation of all employees 0 2091971 8

SECTION C - GROSS RECEIPTS SUBJECT TO APPORTIONMENT

9. Gross receipts from sales of tangible personal property 0 5745276 9
 10. Gross income from other sources (see attachment) 0 152606 10
 11. Total 0 5897882 11

SECTION D - DETERMINATION OF APPORTIONMENT PERCENTAGES

12a. Enter amount from Column A, Line 7 0
 12b. Enter amount from Column B, Line 7 7357024 = .0000 12c
 13a. Enter amount from Column A, Line 8 0
 13b. Enter amount from Column B, Line 8 2091971 = .0000 13c
 14a. Enter amount from Column A, Line 11 0
 14b. Enter amount from Column B, Line 11 5897882 = .0000 14c
 15. Total (Combine Apportionment Percentages on Lines 12c, 13c and 14c)0000 15
 16. Apportionment percentage (see specific instructions)0000 16

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
JAMES BARRETT		P00382590	4135368510
SIGNATURE OF PREPARER		PREPARER'S EIN OR SSN	PREPARER'S PHONE
			04/06/17
			DATE

330 WHITNEY AVE, SUITE 800	HOLYOKE	MA	01040
STREET ADDRESS OF PREPARER	CITY	STATE	ZIP

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



DF30016021019

FORM 300, SCHEDULE K-1
PARTNER'S SHARE OF INCOME

or Fiscal Year beginning 01 01 16 and ending 12 31 16

Partner's Identifying Number ▶ 542507455

EIN ☒ SSN

Partnership's Identifying Number ▶ 260555883

Partner's Business Name

Partner's Address

2188 WYNTERBROOK DRIVE

City

State

ZIP-Code

HIGHLANDS RANCH

CO

80126-

Country

-OR-

Partner's First Name

JOHN L.

Partner's Last Name

CUTTER

Attention

Partner's Share of Profit, Loss and Capital:

Beginning

Ending

Partner's Type of Entity (See Instructions)

Code

Description

Resident

Profit: 90.000000 %

Profit: 90.000000 %

0 1 INDIVIDUAL

Loss: 100.000000 %

Loss: 100.000000 %

☒ Non-Resident

Capital: 90.000000 %

Capital: 90.000000 %

Allocable Share of Income

Column A

Federal 1065, Schedule K-1 Amount

Column B

Portion of Items Derived from Sources in DE

1. Ordinary Income (Loss) from Trade or Business Activities

-547985

2. Net Income (Loss) from Rental Real Estate Activities

3. Net Income (Loss) from Other Rental Activities

4. Guaranteed Payment to Partner

28959

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)

-519026

0

Allocable Share of Deductions

Column A

Federal 1065, Schedule K-1 Amount

Column B

Portion of Items Derived from Sources in DE

13. Charitable Contributions

84

14. Section 179 Expense Deductions

15. Expenses from Portfolio Income

16. Other Deduction/Credits (Attach Schedule) STMT

27637



DE SCHEDULE K-1		OTHER DEDUCTIONS	
DESCRIPTION	COLUMN A AMOUNT	COLUMN B AMOUNT	
AMOUNTS PAID FOR MEDICAL INSURANCE	27,637.	0.	
TOTAL TO SCHEDULE K-1, LINE 16	27,637.	0.	

FORM 300, SCHEDULE K-1
PARTNER'S SHARE OF INCOME

or Fiscal Year beginning 01 01 16 and ending 12 31 16

Partner's Identifying Number ▶ **542906514**

EIN ☒ SSN

Partnership's Identifying Number ▶ **260555883**

Partner's Business Name

Partner's Address

731 MUELLER DRIVE

City

State

ZIP-Code

LITTLETON

CO

80129-

Country

-OR-

Partner's First Name

JAMISON

Partner's Last Name

CUTTER

Attention

Partner's Share of Profit, Loss and Capital:

Beginning

Ending

Partner's Type of Entity (See Instructions)

Code

Description

Resident

Profit:

10.000000 %

Profit:

10.000000 %

Loss:

0.000000 %

Loss:

0.000000 %

Capital:

10.000000 %

Capital:

10.000000 %

0 1

INDIVIDUAL

☒ Non-Resident

Allocable Share of Income

Column A

Federal 1065, Schedule K-1 Amount

Column B

Portion of Items Derived from Sources in DE

1. Ordinary Income (Loss) from Trade or Business Activities

2. Net Income (Loss) from Rental Real Estate Activities

3. Net Income (Loss) from Other Rental Activities

4. Guaranteed Payment to Partner **26564**

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) **26564**

0

Allocable Share of Deductions

Column A

Federal 1065, Schedule K-1 Amount

Column B

Portion of Items Derived from Sources in DE

13. Charitable Contributions

14. Section 179 Expense Deductions

15. Expenses from Portfolio Income

16. Other Deduction/Credits (Attach Schedule) **STMT** **24204**



DF30116011019

DE SCHEDULE K-1		OTHER DEDUCTIONS	
DESCRIPTION	COLUMN A AMOUNT	COLUMN B AMOUNT	
AMOUNTS PAID FOR MEDICAL INSURANCE	24,204.	0.	
TOTAL TO SCHEDULE K-1, LINE 16	24,204.	0.	

1065 Form Department of the Treasury Internal Revenue Service		U.S. Return of Partnership Income For calendar year 2016, or tax year beginning _____, ending _____,		OMB No. 1545-0123 2016	
A Principal business activity RESTAURANT FRANCHISE		Name of partnership CUTTER RESTAURANT GROUP, LLC C/O JOHN L. CUTTER, MBR		D Employer identification number 26-0555883	
B Principal product or service FOOD/BEVERAGE		Number, street, and room or suite no. If a P.O. box, see the instructions. 2253 E. BRIARWOOD AVE, STE 509		E Date business started 10/01/2007	
C Business code number 722513		City or town, state or province, country, and ZIP or foreign postal code LITTLETON CO 80122-3286		F Total assets \$ 3,353,841.	
G Check applicable boxes: (1) <input type="checkbox"/> Initial return (2) <input type="checkbox"/> Final return (3) <input type="checkbox"/> Name change (4) <input type="checkbox"/> Address change (5) <input type="checkbox"/> Amended return (6) <input type="checkbox"/> Technical termination - also check (1) or (2)					
H Check accounting method: (1) <input type="checkbox"/> Cash (2) <input checked="" type="checkbox"/> Accrual (3) <input type="checkbox"/> Other (specify) ▶ _____					
I Number of Schedules K-1. Attach one for each person who was a partner at any time during the tax year ▶ 2					
J Check if Schedules C and M-3 are attached <input type="checkbox"/>					

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

Income	1 a Gross receipts or sales	1a	5,897,882.	
	b Returns and allowances	1b		
	c Balance. Subtract line 1b from line 1a			1c 5,897,882.
	2 Cost of goods sold (attach Form 1125-A)			2 1,811,495.
	3 Gross profit. Subtract line 2 from line 1c			3 4,086,387.
	4 Ordinary income (loss) from other partnerships, estates, and trusts (attach statement)			4
	5 Net farm profit (loss) (attach Schedule F (Form 1040))			5
	6 Net gain (loss) from Form 4797, Part II, line 17 (attach Form 4797)			6
7 Other income (loss) (attach statement)			7	
8 Total income (loss). Combine lines 3 through 7			8 4,086,387.	
Deductions (see the instructions for limitations)	9 Salaries and wages (other than to partners) (less employment credits)			9 2,091,971.
	10 Guaranteed payments to partners			10 55,523.
	11 Repairs and maintenance			11 148,197.
	12 Bad debts			12
	13 Rent			13 613,724.
	14 Taxes and licenses		SEE STATEMENT 1	14 298,203.
	15 Interest			15 206,829.
	16 a Depreciation (if required, attach Form 4562)	16a	285,564.	
	b Less depreciation reported on Form 1125-A and elsewhere on return	16b		16c 285,564.
	17 Depletion (Do not deduct oil and gas depletion.)			17
	18 Retirement plans, etc.			18
	19 Employee benefit programs			19 10,140.
	20 Other deductions (attach statement)		SEE STATEMENT 2	20 924,221.
	21 Total deductions. Add the amounts shown in the far right column for lines 9 through 20			21 4,634,372.
22 Ordinary business income (loss). Subtract line 21 from line 8			22 -547,985.	

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than general partner or limited liability company member manager) is based on all information of which preparer has any knowledge.			
	Signature of general partner or limited liability company member manager		Date	
Paid Preparer Use Only	Print/Type preparer's name JAMES BARRETT		Preparer's signature JAMES BARRETT	Date 04/06/17
	Firm's name ▶ MEYERS BROTHERS KALICKA, P.C.		Check <input type="checkbox"/> if self-employed	PTIN P00382590
	Firm's address ▶ 330 WHITNEY AVE, SUITE 800 HOLYOKE, MA 01040		Firm's EIN ▶ 04-2713795	
			Phone no. 413-536-8510	

LHA For Paperwork Reduction Act Notice, see separate instructions.

Form **1065** (2016)

Schedule B Other Information

1 What type of entity is filing this return? Check the applicable box:				Yes	No
a <input type="checkbox"/> Domestic general partnership b <input type="checkbox"/> Domestic limited partnership c <input checked="" type="checkbox"/> Domestic limited liability company d <input type="checkbox"/> Domestic limited liability partnership e <input type="checkbox"/> Foreign partnership f <input type="checkbox"/> Other					
2 At any time during the tax year, was any partner in the partnership a disregarded entity, a partnership (including an entity treated as a partnership), a trust, an S corporation, an estate (other than an estate of a deceased partner), or a nominee or similar person?					X
3 At the end of the tax year:					
a Did any foreign or domestic corporation, partnership (including any entity treated as a partnership), trust, or tax-exempt organization, or any foreign government own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital of the partnership? For rules of constructive ownership, see instructions. If "Yes," attach Schedule B-1, Information on Partners Owning 50% or More of the Partnership					X
b Did any individual or estate own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital of the partnership? For rules of constructive ownership, see instructions. If "Yes," attach Schedule B-1, Information on Partners Owning 50% or More of the Partnership				X	
4 At the end of the tax year, did the partnership:					
a Own directly 20% or more, or own, directly or indirectly, 50% or more of the total voting power of all classes of stock entitled to vote of any foreign or domestic corporation? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (iv) below					X
(i) Name of Corporation		(ii) Employer Identification Number (if any)	(iii) Country of Incorporation	(iv) Percentage Owned in Voting Stock	
b Own directly an interest of 20% or more, or own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital in any foreign or domestic partnership (including an entity treated as a partnership) or in the beneficial interest of a trust? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (v) below					X
(i) Name of Entity		(ii) Employer Identification Number (if any)	(iii) Type of Entity	(iv) Country of Organization	(v) Maximum Percentage Owned in Profit, Loss, or Capital
5 Did the partnership file Form 8893, Election of Partnership Level Tax Treatment, or an election statement under section 6231(a)(1)(B)(ii) for partnership-level tax treatment, that is in effect for this tax year? See Form 8893 for more details				Yes	No
					X
6 Does the partnership satisfy all four of the following conditions?					
a The partnership's total receipts for the tax year were less than \$250,000.					
b The partnership's total assets at the end of the tax year were less than \$ 1 million.					
c Schedules K-1 are filed with the return and furnished to the partners on or before the due date (including extensions) for the partnership return.					
d The partnership is not filing and is not required to file Schedule M-3					X
If "Yes," the partnership is not required to complete Schedules L, M-1, and M-2; Item F on page 1 of Form 1065; or Item L on Schedule K-1.					
7 Is this partnership a publicly traded partnership as defined in section 469(k)(2)?					X
8 During the tax year, did the partnership have any debt that was cancelled, was forgiven, or had the terms modified so as to reduce the principal amount of the debt?					X
9 Has this partnership filed, or is it required to file, Form 8918, Material Advisor Disclosure Statement, to provide information on any reportable transaction?					X
10 At any time during calendar year 2016, did the partnership have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). If "Yes," enter the name of the foreign country.					X

Form **1065** (2016)

Schedule B Other Information (continued)

	Yes	No
11 At any time during the tax year, did the partnership receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes," the partnership may have to file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts. See instructions		X
12a Is the partnership making, or had it previously made (and not revoked), a section 754 election? See instructions for details regarding a section 754 election.		X
b Did the partnership make for this tax year an optional basis adjustment under section 743(b) or 734(b)? If "Yes," attach a statement showing the computation and allocation of the basis adjustment. See instructions		X
c Is the partnership required to adjust the basis of partnership assets under section 743(b) or 734(b) because of a substantial built-in loss (as defined under section 743(d)) or substantial basis reduction (as defined under section 734(d))? If "Yes," attach a statement showing the computation and allocation of the basis adjustment. See instructions		X
13 Check this box if, during the current or prior tax year, the partnership distributed any property received in a like-kind exchange or contributed such property to another entity (other than disregarded entities wholly owned by the partnership throughout the tax year) <input type="checkbox"/>		
14 At any time during the tax year, did the partnership distribute to any partner a tenancy-in-common or other undivided interest in partnership property?		X
15 If the partnership is required to file Form 8858, Information Return of U.S. Persons With Respect To Foreign Disregarded Entities, enter the number of Forms 8858 attached. See instructions ▶		
16 Does the partnership have any foreign partners? If "Yes," enter the number of Forms 8805, Foreign Partner's Information Statement of Section 1446 Withholding Tax, filed for this partnership. ▶		X
17 Enter the number of Forms 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships, attached to this return. ▶		
18a Did you make any payments in 2016 that would require you to file Form(s) 1099? See instructions		
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. ▶		
21 During the partnership's tax year, did the partnership make any payments that would require it to file Form 1042 and 1042-S under chapter 3 (sections 1441 through 1464) or chapter 4 (sections 1471 through 1474)?		X
22 Was the partnership a specified domestic entity required to file Form 8938 for the tax year (See the Instructions for Form 8938)?		X

Designation of Tax Matters Partner (see instructions)

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

Name of designated TMP ▶ JOHN L. CUTTER	Identifying number of TMP ▶ 542-50-7455
If the TMP is an entity, name of TMP representative ▶	Phone number of TMP ▶
Address of designated TMP ▶ 2188 WYNTERBROOK DRIVE	
HIGHLANDS RANCH, CO 80126	

Form **1065** (2016)

Schedule K Partners' Distributive Share Items		Total amount	
Income (Loss)	1 Ordinary business income (loss) (page 1, line 22)	1	-547,985.
	2 Net rental real estate income (loss) (attach Form 8825)	2	
	3 a Other gross rental income (loss)	3a	
	b Expenses from other rental activities (attach statement)	3b	
	c Other net rental income (loss). Subtract line 3b from line 3a	3c	
	4 Guaranteed payments	4	55,523.
	5 Interest income	5	
	6 Dividends: a Ordinary dividends	6a	
	b Qualified dividends	6b	
	7 Royalties	7	
	8 Net short-term capital gain (loss) (attach Schedule D (Form 1065))	8	
9 a Net long-term capital gain (loss) (attach Schedule D (Form 1065))	9a		
b Collectibles (28%) gain (loss)	9b		
c Unrecaptured section 1250 gain (attach statement)	9c		
10 Net section 1231 gain (loss) (attach Form 4797)	10		
11 Other income (loss) (see instructions) Type ▶	11		
Deductions	12 Section 179 deduction (attach Form 4562)	12	
	13 a Contributions SEE STATEMENT 3	13a	84.
	b Investment interest expense	13b	
	c Section 59(e)(2) expenditures: (1) Type ▶ (2) Amount ▶	13c(2)	
d Other deductions (see instructions) Type ▶ SEE STATEMENT 4	13d	51,841.	
Self-Employment	14 a Net earnings (loss) from self-employment	14a	-492,462.
	b Gross farming or fishing income	14b	
	c Gross nonfarm income	14c	4,086,387.
Credits	15 a Low-income housing credit (section 42(j)(5))	15a	
	b Low-income housing credit (other)	15b	
	c Qualified rehabilitation expenditures (rental real estate) (attach Form 3468, if applicable)	15c	
	d Other rental real estate credits (see instructions) Type ▶	15d	
	e Other rental credits (see instructions) Type ▶	15e	
	f Other credits (see instructions) Type ▶	15f	
Foreign Transactions	16 a Name of country or U.S. possession ▶		
	b Gross income from all sources	16b	
	c Gross income sourced at partner level	16c	
	Foreign gross income sourced at partnership level		
	d Passive category ▶ e General category ▶ f Other ▶	16f	
	Deductions allocated and apportioned at partner level		
	g Interest expense ▶ h Other ▶	16h	
	Deductions allocated and apportioned at partnership level to foreign source income		
	i Passive category ▶ j General category ▶ k Other ▶	16k	
	l Total foreign taxes (check one): ▶ Paid <input type="checkbox"/> Accrued <input type="checkbox"/> ▶	16l	
	m Reduction in taxes available for credit (attach statement)	16m	
n Other foreign tax information (attach statement)			
Alternative Minimum Tax (AMT) Items	17 a Post-1986 depreciation adjustment	17a	42,524.
	b Adjusted gain or loss	17b	
	c Depletion (other than oil and gas)	17c	
	d Oil, gas, and geothermal properties - gross income	17d	
	e Oil, gas, and geothermal properties - deductions	17e	
	f Other AMT items (attach statement)	17f	
Other Information	18 a Tax-exempt interest income	18a	
	b Other tax-exempt income	18b	
	c Nondeductible expenses	18c	
	19 a Distributions of cash and marketable securities	19a	21,030.
	b Distributions of other property	19b	
	20 a Investment income	20a	
b Investment expenses	20b		
c Other items and amounts (attach statement)			

Analysis of Net Income (Loss)

1 Net income (loss). Combine Schedule K, lines 1 through 11. From the result, subtract the sum of Schedule K, lines 12 through 13d, and 16l						1	-544,387.
2 Analysis by partner type:	(i) Corporate	(ii) Individual (active)	(iii) Individual (passive)	(iv) Partnership	(v) Exempt Organization	(vi) Nominee/Other	
a General partners							
b Limited partners		-544,387.					

Schedule L Balance Sheets per Books

Assets	Beginning of tax year		End of tax year	
	(a)	(b)	(c)	(d)
1 Cash		107,369.		-179,364.
2a Trade notes and accounts receivable	16,778.		53,782.	
b Less allowance for bad debts		16,778.		53,782.
3 Inventories		44,800.		41,366.
4 U.S. government obligations				
5 Tax-exempt securities				
6 Other current assets (attach statement)	STATEMENT 5	2,051,565.		2,017,844.
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	2,404,149.		2,404,149.	
b Less accumulated depreciation	986,662.	1,417,487.	1,265,214.	1,138,935.
10a Depletable assets				
b Less accumulated depletion				
11 Land (net of any amortization)				
12a Intangible assets (amortizable only)	447,631.		447,631.	
b Less accumulated amortization	136,510.	311,121.	166,353.	281,278.
13 Other assets (attach statement)				
14 Total assets		3,949,120.		3,353,841.
Liabilities and Capital				
	(a)	(b)	(c)	(d)
15 Accounts payable		198,723.		258,684.
16 Mortgages, notes, bonds payable in less than 1 year				
17 Other current liabilities (attach statement)	STATEMENT 6	1,552,490.		1,424,930.
18 All nonrecourse loans				
19a Loans from partners (or persons related to partners)				
b Mortgages, notes, bonds payable in 1 year or more		2,366,017.		2,257,763.
20 Other liabilities (attach statement)				
21 Partners' capital accounts		-168,110.		-587,536.
22 Total liabilities and capital		3,949,120.		3,353,841.

Schedule M-1 Reconciliation of Income (Loss) per Books With Income (Loss) per Return

Note. The partnership may be required to file Schedule M-3 (see instructions).

1 Net income (loss) per books	-548,396.	6 Income recorded on books this year not included on Schedule K, lines 1 through 11 (itemize):	
2 Income included on Schedule K, lines 1, 2, 3c, 5, 6a, 7, 8, 9a, 10, and 11, not recorded on books this year (itemize):		a Tax-exempt interest \$	
3 Guaranteed payments (other than health insurance)	3,682.	7 Deductions included on Schedule K, lines 1 through 13d, and 16l, not charged against book income this year (itemize):	
4 Expenses recorded on books this year not included on Schedule K, lines 1 through 13d, and 16l (itemize):		a Depreciation \$	
STMT 8 327.		8 Add lines 6 and 7	
a Depreciation \$		9 Income (loss) (Analysis of Net Income (Loss), line 1). Subtract line 8 from line 5	-544,387.
b Travel and entertainment \$	327.		
5 Add lines 1 through 4	-544,387.		

Schedule M-2 Analysis of Partners' Capital Accounts

1 Balance at beginning of year	-168,110.	6 Distributions: a Cash	21,030.
2 Capital contributed: a Cash	150,000.	b Property	
b Property		7 Other decreases (itemize):	
3 Net income (loss) per books	-548,396.	8 Add lines 6 and 7	21,030.
4 Other increases (itemize):		9 Balance at end of year. Subtract line 8 from line 5	-587,536.
5 Add lines 1 through 4	-566,506.		

Cost of Goods Sold

(Rev. October 2016)

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

OMB No. 1545-0123

Department of the Treasury
Internal Revenue Service▶ Information about Form 1125-A and its instructions is at www.irs.gov/form1125a.

Name **CUTTER RESTAURANT GROUP, LLC**
C/O JOHN L. CUTTER, MBR

Employer identification number
26-0555883

1	Inventory at beginning of year	1	44,800.
2	Purchases	2	1,755,593.
3	Cost of labor	3	
4	Additional section 263A costs (attach schedule)	4	
5	Other costs (attach schedule) SEE STATEMENT 9	5	52,468.
6	Total. Add lines 1 through 5	6	1,852,861.
7	Inventory at end of year	7	41,366.
8	Cost of goods sold. Subtract line 7 from line 6. Enter here and on Form 1120, page 1, line 2 or the appropriate line of your tax return. See instructions	8	1,811,495.

9 a Check all methods used for valuing closing inventory:

- (i) ☒ Cost
- (ii) ☐ Lower of cost or market
- (iii) ☐ Other (Specify method used and attach explanation) ▶

b Check if there was a writedown of subnormal goods ▶ ☐**c** Check if the LIFO inventory method was adopted this tax year for any goods (if checked, attach Form 970) ▶ ☐**d** If the LIFO inventory method was used for this tax year, enter amount of closing inventory computed under LIFO **9d****e** If property is produced or acquired for resale, do the rules of Section 263A apply to the entity? See instructions ☐ Yes ☒ No**f** Was there any change in determining quantities, cost, or valuations between opening and closing inventory? ☐ Yes ☒ No
If "Yes," attach explanation.

**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.**

OMB No. 1545-0099

Name of partnership

**CUTTER RESTAURANT GROUP, LLC
C/O JOHN L. CUTTER, MBR**

Employer identification number

26-0555883**Part I Entities Owning 50% or More of the Partnership** (Form 1065, Schedule B, Question 3a)

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

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

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

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

(i) Name of Individual or Estate	(ii) Identifying Number (if any)	(iii) Country of Citizenship (see instructions)	(iv) Maximum Percentage Owned in Profit, Loss, or Capital
JOHN L. CUTTER	542-50-7455	UNITED STATES	100.00
JAMISON CUTTER	542-90-6514	UNITED STATES	100.00

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

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

FORM 1065	TAX EXPENSE	STATEMENT	1
DESCRIPTION		AMOUNT	
PAYROLL TAXES		211,511.	
TAXES - OTHER		86,692.	
TOTAL TO FORM 1065, LINE 14		298,203.	

FORM 1065	OTHER DEDUCTIONS	STATEMENT	2
DESCRIPTION		AMOUNT	
ADMIN EXPENSES		9,714.	
ADVERTISING		61,773.	
ALLOCATED EXPENSES		-16,411.	
AMORTIZATION EXPENSE		29,842.	
BANK & CREDIT CARD FEES		148,378.	
BUSINESS TAXES & LICENSES		271.	
CASH/SHORT & OVER		1,282.	
CLEANING SERVICE		45,729.	
CUSTOMER MUSIC		1,800.	
DUES & SUBSCRIPTIONS		3,430.	
EQUIPMENT RENTAL		6,855.	
INSURANCE		84,699.	
LEGAL/ACCOUNTING & PROFESSIONAL		28,812.	
LINENS & UNIFORMS		28,086.	
MEETINGS		2,079.	
MENUS		5,553.	
MISC EXP		179.	
OFFICE SUPPLIES		11,896.	
PARKING		27,265.	
PEST CONTROL		2,508.	
POSTAGE/FREIGHT/COURIER		8,224.	
PRINTING & PAPER		217.	
RECRUITING EXP		35.	
ROYALTIES		255,598.	
SECURITY/ARMORED CAR		8,074.	
TELEPHONE/INTERNET		24,162.	
TRASH SERVICE		19,339.	
TRAVEL		12.	
UTILITIES		115,183.	
VEHICLE EXP		2,558.	
VEHICLE EXP		7,079.	
TOTAL TO FORM 1065, LINE 20		924,221.	

SCHEDULE K	CHARITABLE CONTRIBUTIONS	STATEMENT	3
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DESCRIPTION	TYPE	AMOUNT
DONATIONS	CASH (50%)	84.
TOTALS TO SCHEDULE K, LINE 13A		84.

SCHEDULE K	OTHER DEDUCTIONS	STATEMENT	4
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DESCRIPTION	AMOUNT
HEALTH INSURANCE PREMIUMS	51,841.
TOTAL INCLUDED IN SCHEDULE K, LINE 13D	51,841.

SCHEDULE L	OTHER CURRENT ASSETS	STATEMENT	5
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DESCRIPTION	BEGINNING OF TAX YEAR	END OF TAX YEAR
SHORT TERM NOTE RECEIVABLE	7,500.	
PREPAID RENT	7,322.	0.
PREPAID INSURANCE	44,691.	0.
PREPAID EXPENSE	5,332.	0.
DUE FROM AFFILIATE	1,986,720.	2,017,844.
TOTAL TO SCHEDULE L, LINE 6	2,051,565.	2,017,844.

SCHEDULE L	OTHER CURRENT LIABILITIES	STATEMENT	6
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DESCRIPTION	BEGINNING OF TAX YEAR	END OF TAX YEAR
GIFT CERTIFICATES	25,226.	22,124.
ACCRUED PAYROLL	67,328.	0.
PAYROLL TAXES PAYABLE	26,262.	0.
ACCRUED UTILITIES	13,055.	0.
ACCRUED ROYALTIES	30,741.	0.
SALES TAX PAYABLE	35,257.	32,773.
DUE TO AFFILIATE	1,048,776.	1,085,654.
TENNANT ALLOWANCE	305,845.	284,379.
TOTAL TO SCHEDULE L, LINE 17	1,552,490.	1,424,930.

FORM 1065	PARTNERS' CAPITAL ACCOUNT SUMMARY				STATEMENT 7
PARTNER NUMBER	BEGINNING CAPITAL	CAPITAL CONTRIBUTED	SCHEDULE M-2 LNS 3, 4 & 7	WITH- DRAWALS	ENDING CAPITAL
1	-168,110.	150,000.	-548,396.	21,030.	-587,536.
2	0.		0.		0.
TOTAL	-168,110.	150,000.	-548,396.	21,030.	-587,536.

SCHEDULE M-1 EXPENSES RECORDED ON BOOKS NOT DEDUCTED IN RETURN STATEMENT 8

DESCRIPTION	AMOUNT
FINES & PENALTIES	327.
TOTAL TO SCHEDULE M-1, LINE 4	327.

FORM 1125-A OTHER COSTS STATEMENT 9

DESCRIPTION	AMOUNT
SMALLWARES	7,247.
OPERATING SUPPLIES	45,221.
TOTAL TO LINE 5	52,468.

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

Cutter Restaurant Group, LLC
c/o John L. Cutter, Mbr
2253 E. Briarwood Ave, Ste 509
Littleton, CO 80122-3286

Employer Identification Number: 26-0555883

For the Year Ending December 31, 2016

Cutter Restaurant Group, LLC c/o John L. Cutter, Mbr is making
the de minimis safe harbor election under Reg. Sec.
1.263(a)-1(f).