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

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

Haldlamillaldaldladl

Caution: Forms printed from within Adobe Acrobat products may not meet IRS or state taxing agency specifications. When using Acrobat 9.x products and later products, select "None"in the "Page Scaling" selection box in the Adobe "Print" dialog.

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

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

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

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

YOUR COPY SHOULD BE RETAINED FOR YOUR FILES.

VERY TRULY YOURS,

MEYERS BROTHERS KALICKA, P.C.

2016 TAX RETURN FILING INSTRUCTIONS

U.S. RETURN OF PARTNERSHIP INCOME

FOR THE YEAR ENDING

DECEMBER 31, 2016

| D | |
|-------------------------------------|--|
| Prepared for | CUTTER HIGHLANDS RANCH, LLC 2253 E. BRIARWOOD AVE, STE 509 LITTLETON, CO 80122 |
| Prepared by | |
| , , | MEYERS BROTHERS KALICKA, P.C. 330 WHITNEY AVE, SUITE 800 HOLYOKE, MA 01040 |
| To be signed and dated by | A MEMBER MANAGER OF THE LLC |
| Amount of tax | NOT APPLICABLE |
| Mail tax return to | THIS RETURN HAS BEEN PREPARED FOR ELECTRONIC FILING. TO HAVE IT TRANSMITTED ELECTRONICALLY TO THE IRS, PLEASE SIGN, DATE, AND RETURN FORM 8879-PE TO OUR OFFICE. WE WILL THEN SUBMIT YOUR ELECTRONIC RETURN. |
| Forms to be distributed to partners | ENCLOSED ARE COPIES OF SCHEDULE K-1 TO BE DISTRIBUTED TO THE MEMBERS. |
| Return must be mailed on or before | RETURN FEDERAL FORM 8879-PE TO US BY SEPTEMBER 15, 2017. |
| Special Instructions | DO NOT MAIL THE PAPER COPY OF THE RETURN TO THE IRS. |

SUMMARY OF SCHEDULE K-1

| Entity Name: | Number 1 | Number 2 | Number | Number | Number | Number | Number |
|---|----------------|-------------|------------|--------|--------|--------|--------|
| CUTTER HIGHLANDS RANCH, LLC | Name: | Name: | Name: | Name: | Name: | Name: | Name: |
| Schedule K-1 Line/Item Description | JAMISON CUTTER | JOHN CUTTER | K-1 TOTALS | | | | |
| 1 - ORDINARY BUSINESS INCOME (LOSS) | -23,266. | -4,106. | -27,372. | | | | |
| 13(A) - CASH CONTRIBUTIONS (50%) | 234. | 41. | 275. | | | | |
| 14(A) - NET EARNINGS(LOSS) FROM SELF-EMPLOYMENT | -23,266. | -4,106. | -27,372. | | | | |
| 14(C) - GROSS NONFARM INCOME | 1,881,573. | 332,042. | 2,213,615. | | | | |
| 17(A) - AMT - POST-1986 DEPRECIATION ADJUSTMENT | -14,748. | -2,602. | -17,350. | | | | |
| CAPITAL ACCOUNTS | | | | | | | |
| BEGINNING OF YEAR | -735,207. | -113,454. | -848,661. | | | | |
| CONTRIBUTIONS | 23,500. | | 23,500. | | | | |
| CURRENT YEAR INCREASES (DECREASES) | -24,895. | -4,393. | -29,288. | | | | |
| WITHDRAWALS & DISTRIBUTIONS | | | 0. | | | | |
| END OF YEAR | -736,602. | -117,847. | -854,449. | | | | |
| LIABILITIES - RECOURSE | 1,161,308. | 1,121,036. | 2,282,344. | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

Name of partnership

Employer identification number

CUTTER HIGHLANDS RANCH, LLC

26-3047014

| Description | Prior Year | Current Year | Increase (Decrease) |
|--|-----------------------------------|-----------------------------------|------------------------|
| NUMBER OF PARTNERS | 2. | 2. | 0. |
| TRADE OR BUSINESS INCOME OR LOSS: | | | |
| INCOME: | | | |
| GROSS RECEIPTS OR SALES COST OF GOODS SOLD: INVENTORY AT BEGINNING OF YEAR | 3,496,957. 26,901. | 3,122,638. 24,313. | - |
| PURCHASES LESS ITEMS WITHDRAWN OTHER COSTS | 1,061,483. | 910,858. 130. 935,301. | -150,625. 130. |
| TOTAL INVENTORY AT END OF YEAR | 1,088,384. 24,313. | 26,278. | 1,965. |
| COST OF GOODS SOLD GROSS PROFIT | 1,064,071. 2,432,886. | | |
| TOTAL INCOME (LOSS) | 2,432,886. | 2,213,615. | -219,271. |
| DEDUCTIONS: | | | |
| SALARIES AND WAGES REPAIRS AND MAINTENANCE RENT | 1,009,572. 51,977. 275,572. | 1,054,627. 36,903. 337,830. | -15,074. |
| TAXES AND LICENSES INTEREST | 179,263. 23,168. | 143,085. 31,239. | -36,178. 8,071. |
| DEPRECIATION | 140,926. | 110,063. | -30,863. |
| EMPLOYEE BENEFIT PROGRAMS OTHER DEDUCTIONS | 30,578. 753,022. | | |
| TOTAL DEDUCTIONS | 2,464,078. | 2,240,987. | -223,091. |
| ORDINARY INCOME (LOSS) | -31,192. | -27,372. | 3,820. |
| SCHEDULE K: | | | |
| INCOME (LOSS): | | | |
| ORDINARY TRADE/BUSINESS INCOME/LOSS | -31,192. | -27,372. | 3,820. |
| DEDUCTIONS: | | | |
| CHARITABLE CONTRIBUTIONS | 3,316. | 275. | -3,041. |
| SELF-EMPLOYMENT: | | | |
| | | | |

611811 04-01-16

Name of partnership

Employer identification number

CUTTER HIGHLANDS RANCH, LLC

26-3047014

| Description | Prior Year | Current Year | Increase (Decrease) |
|--|-----------------------------|--------------|------------------------|
| EARNINGS/LOSS FROM SELF-EMPLOYMENT GROSS NONFARM INCOME | -31,192. 2,432,886. | | |
| ADJUSTMENTS AND TAX PREFERENCES: | | | |
| DEPRECIATION ADJUSTMENT | -26,728. | -17,350. | 9,378. |
| SCHEDULE M-1: | | | |
| NET INCOME (LOSS) PER BOOKS OTHER BOOK EXPENSES NOT ON SCH K | -39,938. 5,430. | | |
| TOTAL- NET BOOK INC THROUGH EXPENSE | -34,508. | -27,647. | 6,861. |
| INCOME (LOSS) | -34,508. | -27,647. | 6,861. |
| SCHEDULE M-2: | | | |
| CAPITAL AT BEGINNING OF YEAR CAPITAL CONTRIBUTED DURING YEAR NET INCOME (LOSS) PER BOOKS | -808,723. 0. -39,938. | 23,500. | 23,500. |
| TOTAL- BEGINNING CAP THROUGH INCR | -848,661. | -854,449. | -5,788. |
| TOTAL- CASH CONT THROUGH OTHER DECR | 0. | 0. | |
| CAPITAL BALANCE AT END OF YEAR | -848,661. | -854,449. | -5,788. |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

| | | Expanded | Capital Account Summ | ary | |
|------------------------|-----------------------------------|---|---|-------------|---|
| lame CU' | TTER HIGHLA | NDS RANCH, LLC | | I.D. Nu | umber 26-3047014 |
| Partner Number 1 | 731 MUELLER DRIVE | | 29 | | Partner's Identification Number 542-90-6514 |
| | Beginning Capital -735,207. | Capital Contributed 23,500. | Schedule M-2, Lines 3, 4 & 7 - 24,895. | Withdrawals | Ending Capital -736,602. |
| Partner Number 2 | | HN CUTTER 88 WYNTERBROOK D GHLANDS RANCH, C | | | Partner's Identification Number 542-50-7455 |
| | Beginning Capital -113,454. | Capital Contributed | Schedule M-2, Lines 3, 4 & 7 - 4 , 3 9 3 • | Withdrawals | Ending Capital — 117,847. |
| Partner Number | | | | | Partner's Identification Number |
| | Beginning Capital | Capital Contributed | Schedule M-2, Lines 3, 4 & 7 | Withdrawals | Ending Capital |
| Partner Number | | | | | Partner's Identification Number |
| | Beginning Capital | Capital Contributed | Schedule M-2, Lines 3, 4 & 7 | Withdrawals | Ending Capital |
| | | Total Fo | or All Partner's Capital Accounts | | |
| | Beginning Capital -848,661. | Capital Contributed 23,500. | Schedule M-2, Lines 3, 4 & 7 - 29, 288. | Withdrawals | Ending Capital - 854,449 • |

Property Apportionment Detail Worksheet COLORADO CUTTER HIGHLANDS RANCH, LLC

26-3047014

2016

| | Withi | n | Everywh | nere |
|---|-------------------|-------------|-------------------|-------------|
| | Beginning of Year | End of Year | Beginning of Year | End of Year |
| Inventories | 24,313. | 26,278. | 24,313. | 26,278. |
| Land | | | | |
| Buildings | | | | |
| Buildings - accumulated depreciation | | | | |
| Machinery | | | | |
| Equipment | 378,097. | 378,097. | 378,097. | 378,097. |
| Machinery and equipment - accumulated | | | | |
| depreciation | 358,130. | 370,689. | 358,130. | 370,689. |
| Furniture and fixtures | 383,844. | 383,844. | 383,844. | 383,844. |
| Furniture and fixtures - accumulated depreciation | 338,781. | 368,747. | 338,781. | 368,747. |
| Transportation/delivery equipment | | | | |
| Transportation/delivery equipment - accumulated depreciation | | | | |
| Other depreciable assets | | | | |
| Other depreciable assets - accumulated | | | | |
| depreciation | | | | |
| Depletable assets | | | | |
| Depletable assets - accumulated depletion | | | | |
| Leasehold improvements | 1,250,823. | 1,250,823. | 1,250,823. | 1,250,823. |
| Leasehold improvements - accumulated amortization | 704,272. | 771,810. | 704,272. | 771,810. |
| Supplies | | , | , | <u> </u> |
| 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 | | | | |
| | 635,894. | 527,796. | 635,894. | 527,796. |
| Subtotals Average property | 03370311 | 581,845. | 03370311 | 581,845. |
| Real property rented - rental expense (multiplied | | 2,702,640. | | 2,702,640. |
| by applicable factor) Tangible property rented - rental expense | | 2,102,040• | | 2,102,040. |
| (multiplied by applicable factor) | - | | - | |
| Miscellaneous rental expense (multiplied by applicable factor) | | | | |
| Total property | | 3,284,485. | | 3,284,485. |

^{* -} Not Applicable

DELAWARE Property Apportionment Detail Worksheet 2016
CUTTER HIGHLANDS RANCH, LLC 26-3047014

| | Withi | n | Everywhere | | |
|---|-------------------|-------------|-------------------|-------------|--|
| | Beginning of Year | End of Year | Beginning of Year | End of Year | |
| Inventories | 0. | 0. | 24,313. | 26,278. | |
| Land | | | | · | |
| Buildings | | | | | |
| Buildings - accumulated depreciation | | | | | |
| Machinery | | | | | |
| Equipment | 0. | 0. | 378,097. | 378,097. | |
| Machinery and equipment - accumulated depreciation | | | | | |
| Furniture and fixtures | 0. | 0. | 383,844. | 383,844. | |
| 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. | 1,250,823. | 1,250,823. | |
| 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. | 2,037,077. | 2,039,042. | |
| Average property | | 0. | | 2,038,060. | |
| Real property rented - rental expense (multiplied by applicable factor) | | 0. | | 2,702,640. | |
| Tangible property rented - rental expense (multiplied by applicable factor) | | | ļ | = | |
| Miscellaneous rental expense (multiplied by | | | ţ | | |
| applicable factor) | _ | | | | |
| Total property | | 0. | | 4,740,700. | |

^{* -} Not Applicable

| COLORADO | Payroll and Sales Apportionment Detail Worksheet | 2016 |
|-------------------|--|------------|
| CITMMED UTCUT AND | C DANCH IIC | 26 2017011 |

| Payroll Apportionment | Within | Everywhere |
|---|------------|------------|
| Cost of goods sold | | |
| Cost of operations | | |
| Compensation of officers | | |
| Salesmen's salaries | | |
| Salesmen's commissions | | |
| General and administrative wages and salaries | 1,054,627. | 1,054,627. |
| Repairs | | |
| Others | | |
| Miscellaneous other | | |
| Total payroll | 1,054,627. | 1,054,627. |
| Sales Apportionment | | |
| | Within | Everywhere |
| Sales of tangible personal property | | 3,112,301. |
| - Returns and allowances | | |
| Sales from outside the state to within the state | 0. | |
| Sales from within the state to within the state | 3,112,301. | |
| 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 | | |
| Miscellaneous other | | |
| Total sales | 3,112,301. | 3,112,301. |

^{* -} Not Applicable

| DELAWAR | E | Pay | roll and Sales Apportionment Detail Worksheet | 2016 |
|---------|-----------|-------|---|------------|
| כנוששהצ | HTCHT.AND | RANCH | I.I.C | 26-3047014 |

| Payroll Apportionment | Within | Everywhere |
|---|--------|------------|
| Cost of goods sold | | |
| Cost of operations | | |
| Compensation of officers | | |
| Salesmen's salaries | | |
| Salesmen's commissions | | |
| General and administrative wages and salaries | 0. | 1,054,627. |
| Repairs | | |
| Others | | |
| Miscellaneous other | | |
| Total payroll | 0. | 1,054,627. |
| | | |
| Sales Apportionment | Within | Everywhere |
| Sales of tangible personal property | | 3,112,301. |
| - Returns and allowances | | |

| Cales Apportionment | Within | Everywhere |
|---|--------|------------|
| Sales of tangible personal property | | 3,112,301. |
| - Returns and allowances | | |
| 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 | | |
| Miscellaneous other | | |
| Total calca | 0 | 3 112 301 |

^{* -} Not Applicable

| SALES FACTOR | Apportionment : | Apportionment Summary Worksheet | | | |
|--------------------------|-----------------|---------------------------------|------------|------------|--|
| CUTTER HIGHLANDS F | RANCH, LLC | | | 26-3047014 | |
| | WITHIN | EVERYWHERE | UNWEIGHTED | WEIGHTED | |
| Alabama | | | | | |
| Alaska | | | | | |
| Arizona | | | | | |
| Arkansas | | | | | |
| California | | | | | |
| Colorado | 3 112 301 | 3,112,301. | 1.000000 | 1.000000 | |
| Connecticut | | .,, | | | |
| Delaware | | | | | |
| District of Columbia | | | | | |
| Florida | | | | | |
| Georgia | | | | | |
| Hawaii | | | | | |
| Idaho | | | | | |
| Illinois | | | | | |
| Indiana | | | | | |
| lowa | | | | | |
| Kansas | | | | | |
| Kentucky | | | | | |
| Louisiana | | | | | |
| Maine | | | | | |
| Maryland | | | | | |
| Massachusetts | | | | | |
| A Control or con- | | | | | |
| Minnesota | | | | | |
| Missississi | | | | | |
| Miccouri | | | | | |
| Montono | | | | | |
| Nebusaka | | | | | |
| Name de | | | | | |
| Navy Hannahina | | | | | |
| NI I | | | | | |
| Name Manda | | | | | |
| Name Value | | | | | |
| North Carolina | | | | | |
| North Dakota | | | | | |
| Ohia | | | | | |
| | | | | | |
| Oklahoma Oregon | | | | | |
| Oregon Pennsylvania | | | | | |
| Rhode Island | | | | | |
| South Carolina | | | | | |
| Courth Dalcata | | | | | |
| | | | | | |
| Tennessee | | | | | |
| Texas Utah | | | | | |
| | | | | | |
| Vermont | | | | | |
| Virginia | | | | | |
| Washington West Virginia | | | | | |
| West Virginia | | | | | |
| Wyoming | | | | | |
| Wyoming | | | | | |
| Foreign | | | | | |
| Other | | | | | |
| Total | N/A | N/A | N/A | 1.000000 | |
| Total 610731 | N/A | N/A | IN / A | 1.000000 | |
| 04-01-16 | | | | | |

| SALES | FACTOR | Apportionment Summary Worksheet (Continued) | 2016 |
|--------|-------------|---|------------|
| CUTTER | R HTGHLANDS | S RANCH LLC | 26-3047014 |

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

^{*} Not included in everywhere totals

| SUMMARY Apportionment Summary Worksheet | | 2016 | | | |
|---|--------|----------|---------|----------|---------------|
| CUTTER HIGHLANDS | RANCH, | LLC | | | 26-3047014 |
| SUMMARY OF FACTO | | PROPERTY | PAYROLL | SALES | APPORTIONMENT |
| Alabama | İ | | | | |
| Alaska | | | | | |
| Arizona | | | | | |
| Arkansas | | | | | |
| California | İ | | | | |
| Colorado | İ | | | 1.000000 | 1.00000 |
| Connecticut | | | | | |
| Delaware | | | | | |
| District of Columbia | | | | | |
| Florida | Ī | | | | |
| Georgia | | | | | |
| Hawaii | | | | | |
| Idaho | | | | | |
| Illinois | | | | | |
| Indiana | | | | | |
| lowa | | | | | |
| Kansas | | | | | |
| Kentucky | | | | | |
| Louisiana | | | | | |
| Maine | | | | | |
| Maryland | | | | | |
| Massachusetts | | | | | |
| Michigan | Ī | | | | |
| Minnesota | | | | | |
| Mississippi | | | | | |
| Missouri | | | | | |
| Montana | Ī | | | | |
| Nebraska | İ | | | | |
| Nevada | Ī | | | | |
| New Hampshire | Ī | | | | |
| New Jersey | Ī | | | | |
| New Mexico | Ī | | | | |
| New York | Ī | | | | |
| 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 | Ī | | | | |
| Other | T T | | | | 1 |
| | | | | | 1 |
| Total | | | | 1.000000 | 1.000000 |
| 610731 04-01-16 | [| | 1 | | |

| SUMMARY | Apportionment Summary Worksheet (Continued) | 2016 |
|-----------------|---|------------|
| CUTTER HIGHLAND | S RANCH. LLC | 26-3047014 |

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

^{*} Not included in everywhere totals

IRS e-file Signature Authorization for Form 1065

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

Department of the Treasury Internal Revenue Service For calendar year 2016, or tax year beginning

▶ Information about Form 8879-PE and its instructions is at www.irs.gov/form8879pe. , 2016, ending

OMB No. 1545-0123

| Name of partnership | | Employer identification number | | | | |
|---|-------------------------------------|--|--|--|--|--|
| CUTTER HIGHLANDS RANCH, LLC | 26-3 | 047014 | | | | |
| Part I Tax Return Information (Whole dollars only) | | | | | | |
| 1 Gross receipts or sales less returns and allowances (Form 1065, line 1c) | 1 | 3,122,638. | | | | |
| 2 Gross profit (Form 1065, line 3) | 2 | 2,213,615. | | | | |
| 3 Ordinary business income (loss) (Form 1065, line 22) | 3 | -27,372. | | | | |
| 4 Net rental real estate income (loss) (Form 1065, Schedule K, line 2) | | | | | | |
| 5 Other net rental income (loss) (Form 1065, Schedule K, line 3c) | 5 | | | | | |
| Part II Declaration and Signature Authorization of General Partner or Limited Liab | oility Co | mpany Member | | | | |
| Manager (Be sure to get a copy of the partnership's return) | | | | | | |
| examined a copy of the partnership's 2016 electronic return of partnership income and accompanying schedules amy knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the the partnership's electronic return of partnership income. I consent to allow my electronic return originator (ERO), to provider to send the partnership's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt transmission and (b) the reason for any delay in processing the return. I have selected a personal identification nur partnership's electronic return of partnership income. General Partner or Limited Liability Company Member Manager's PIN: check one box only | e amounts ransmitte or reasor | shown on the copy of r, or intermediate service n for rejection of the | | | | |
| X authorize MEYERS BROTHERS KALICKA, P.C. to | enter my | PIN 80126 | | | | |
| ERO firm name as my signature on the partnership's 2016 electronically filed return of partnership income. | Í | don't enter all zeros | | | | |
| As a general partner or limited liability company member manager of the partnership, I will enter my PIN a partnership's 2016 electronically filed return of partnership income. | as my sigr | nature on the | | | | |
| General partner or limited liability company member manager's signature ▶ | | | | | | |
| Title MEMBER | Da | ite 🕨 | | | | |
| 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 part indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 3112 , IRS earned Pub. 4163 , Modernized e-File (MeF) Information for Authorized IRS <i>e-file</i> 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

(Rev. December 2016) Department of the Treasury Internal Revenue Service

Application for Automatic Extension of Time To File Certain Business Income Tax, Information, and Other Returns ► File a separate application for each return. ► Information about Form 7004 and its separate instructions is at www.irs.gov/form7004

OMB No. 1545-0233

Name Identifying number 26-3047014 CUTTER HIGHLANDS RANCH, LLC **Print** Number, street, and room or suite no. (If P.O. box, see instructions.) 2253 E. BRIARWOOD AVE, STE 509 **Type** 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 | | | |
|--|-------------------|--|-----------|
| Note: File request for extension by the due date of the retu | rn for which the | e extension is granted. See instructions before completing the | nis form. |
| Part I Automatic Extension for C Corporation | ons With Ta | x Years Ending December 31. See instructions | |
| 1a Enter the form code for the return listed below that this | application is fo | or | |
| Application | Form | Application | Form |
| Is For: | Code | Is For: | 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 Est | tates and Tr | rusts. See instructions. | |
| b Enter the form code for the return listed below that this | application is fo | or | |
| Application | Form | Application | Form |
| Is For: | Code | Is For: | Code |
| Form 1041 (estate other than a bankruptcy estate) | 04 | Form 1041 (trust) | 05 |
| Part III Automatic Extension for Entities No | ot Using Pa | rt I, II, or IV. See instructions. | |
| c Enter the form code for the return listed below that this | application is fo | <u>or</u> | 09 |
| Application | Form | Application | Form |
| Is For: | Code | Is For: | 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 Corpora | tions With | Tax Years Ending June 30. See instructions. | |
| d Enter the form code for the return listed below that this | application is fo | or | |
| Application | Form | Application | Form |
| Is For: | Code | Is For: | 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-ND 619741 01-18-17 LHA For Privacy Act and Paperwork Reduction Act Notice, see separate instructions.

17

18

19

Form 1120-RIC

Form 1120-SF

Form 7004 (Rev. 12-2016)

24

26

Form 1120-H

Form 1120-L

| Fo | orm 7004 (Rev. 12-2016) | Page 2 |
|----|---|---------------|
| P | 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 | J 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | ▶ Ш |
| 5a | a The application is for calendar year $\frac{2016}{}$, or tax year beginning, and ending | |
| b | 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 | |
| 7 | Total payments and credits (see instructions) | |
| 8 | Balance due. Subtract line 7 from line 6 (see instructions) | |
| | | Rev. 12-2016) |

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

| | 1 | N65 | | U.S. F | Return of Partn | ership | o Inco | ome | | | OMB No. 1545-0123 |
|-------------------------------|------------------|---|---------------|---|---|-----------------|--------------|----------------|-----------------|---------------|--|
| Forr | m partment of | the Treasury | For calendar | year 2016, or tax year | beginning | , | , ending | | , | | 2016 |
| | | ue Service | EXTEN | NSION GRA | NTED TO 09/15 | / 1 / | | | | | |
| •• | | ousiness activity | | Name of partnership | | | | | | | D Employer identification number |
| | RANCI | URANT | | CIIMMED U | TOUT ANDS DANCE | u тт <i>с</i> | , | | | | 26-3047014 |
| | | oroduct or service | Туре | Number street and | IGHLANDS RANCI room or suite no. If a P.O. box, see | the instruction | <u>,</u> | | | | E Date business started |
| В | · moipai p | 700000000000000000000000000000000000000 | | | BRIARWOOD AVE | | | | | | 10/13/2008 |
| FC | ו/ מסכ | BEVERAGE | | | province, country, and ZIP or foreign | | | | | | F Total assets |
| | | code number | | | | | | | | | |
| 72 | 2251 | 3 | | LITTLETO | N | | | CO 80 | 122 | | \$ 1,801,732. |
| | | applicable boxes: | (1) | | | Nan | ne change | | | nange (| 5) Amended return |
| | | | ` ' — | _ | ation - also check (1) or (2) | | J | (, | | , | · , — |
| Н | Check a | accounting metho | ` ' — | | | Oth | er (specify) | > | | | |
| ı | Number | r of Schedules K- | -1. Attach o | one for each person | who was a partner at any time | | ax year | — | 2 | | |
| J | Check it | f Schedules C an | d M-3 are a | ttached | | | | | | | |
| | ution /c | aduda anl u trad | do or buoir | and income and | expenses on lines 1a throug | ah 22 halai | u Soo the | o inatruatio | no for mor | o infor | mation |
| <u></u> | | iciude drily trac | de or busii | less income and e | expenses on lines ra unoug | gii 22 belol | w. see in | | | | таноп. |
| | 1 | Gross receipts or | | | | | 1a | 3,122 | 2,638. | | |
| | | | | | | | | | | | 2 100 620 |
| | | | | | | | | | | 1c | 3,122,638. |
| e | 2 (| Cost of goods so | ld (attach Fo | orm 1125-A) | | | | | | 2 | 909,023. |
| Income | | | | | | | | | | 3 | 2,213,615. |
| <u>=</u> | | | | | estates, and trusts (attach sta | | | | | 4 | |
| | | | | Schedule F (Form 1 | | | | | | 6 | |
| | | | | | attach Form 4797) | | | | | 7 | |
| | | Other income (los | , , | , | | | | | | 8 | 2,213,615. |
| _ | | | | | employment credits) | | | | | 9 | 1,054,627. |
| JS) | | | | | | | | | | 10 | 1,031,0270 |
| atio | | | | | | | | | | 11 | 36,903. |
| miţ | | | | | | | | | | 12 | |
| or ii | | | | | | | | | | 13 | 337,830. |
| instructions for limitations) | 14 7 | Taxes and license | es | | | SEE S | STATE | MENT 1 | _ | 14 | 143,085. |
| ξį | | | | | | | | | | 15 | 31,239. |
| ţŗ | 16 a [| Depreciation (if re | equired, atta | ach Form 4562) | | | 16a | 110 | 0,063. | | |
| | | | | | elsewhere on return | | 16b | | | 16c | 110,063. |
| the the | 17 [| Depletion (Do no | t deduct oil | and gas depletion. |) | | | | | 17 | |
| see | 18 F | Retirement plans, | , etc | | | | | | | 18 | |
| us (| 19 E | Employee benefit | programs | | | | | | | 19 | 43,450. |
| Deductions (see the | 20 (| Other deductions | (attach stat | tement) | | SEE S | STATE | MENT 2 | 2 | 20 | 483,790. |
| Ded | | | ` | , | | | | | | | |
| _ | | | | | ne far right column for lines 9 to | | | | | 21 | 2,240,987. |
| _ | 22 (| | | loss). Subtract line I declare that I have exa | 21 from line 8mined this return, including accomper than general partner or limited lia | | | ements, and to | o the best of n | 22 ny know | |
| ei. | ın | correct, and c knowledge. | omplete. Decl | laration of preparer (other | er than general partner or limited lia | bility company | member ma | nager) is base | d on all inform | | which preparer has any electrical leads to the last section with t |
| Sig | | | | | | | | | | • | preparer shown below |
| | | Signature | of general pa | rtner or limited liability | company member manager | | — P r | Date | | (see ins | tr.)? X Yes No |
| _ | | Print/Type prepa | arer's name | | Preparer's signature | | Date | | Check | if | PTIN |
| | | Time Type prepa | 51 5 1141110 | | opai oi o oignaturo | | Date | | self-employ | | , |
| Pai | id | JAMES E | BARRE1 | ГT | JAMES BARRET | Г | 04 | /06/17 | | | P00382590 |
| Pre | eparer | Firm's name | > | | | | | • | • | | |
| Us | e Only | | | | ICKA, P.C. | | | | Firm's EIN | ≥ 04 | -2713795 |
| | | | | | AVE, SUITE 80 | 0 | | | | | |
| | | HOLYOF | KE, MA | A 01040 | | | | | Phone no. | 413 | -536-8510 |

LHA For Paperwork Reduction Act Notice, see separate instructions.

Form **1065** (2016)

| Sc | hedule B Other Information | | | | | |
|--|---|-----------------------------------|---------------------------------|--|---------------------------------|-----------------|
| 1 What type of entity is filing this return? Check the applicable box: | | | | | | |
| а | | omestic limited partnershi | | | | |
| C | | omestic limited liability pa | rtnership | | | |
| е | | her > | | | | |
| 2 | At any time during the tax year, was any partner in the | | | | | 37 |
| | partnership), a trust, an S corporation, an estate (oth | ier than an estate of a dec | eased partner), or a nomi | nee or similar person? | | X |
| | At the end of the tax year: | (including any antity trac | stad oo o nortnorobin) trus | at artay ayamat arganization or | | |
| а | Did any foreign or domestic corporation, partnership any foreign government own, directly or indirectly, a | , | | | | |
| | constructive ownership, see instructions. If "Yes," att | | | - | | x |
| h | Did any individual or estate own, directly or indirectly | | - | | | + |
| - | constructive ownership, see instructions. If "Yes," att | | • | | X | |
| 4 | At the end of the tax year, did the partnership: | , | | , | | |
| а | Own directly 20% or more, or own, directly or indirectly | ctly, 50% or more of the t | otal voting power of all cla | asses of stock entitled to vote of any foreign | | |
| | or domestic corporation? For rules of constructive o | wnership, see instruction | s. If "Yes," complete (i) thr | ough (iv) below | | X |
| | (i) Name of Corporation | | (ii) Employer Identification | (iii) Country of | (iv) Perce | |
| | | | Number (if any) | Incorporation | Voting S | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| h | Own directly an interest of 20% or more, or own, dir | ectly or indirectly, an inter | Lest of 50% or more in the | p profit loss or capital in any foreign or | | |
| | domestic partnership (including an entity treated as | | | | | |
| | instructions. If "Yes," complete (i) through (v) below | a par moromp) or mr and or | | | | Х |
| | (i) Name of Entity | (ii) Employer | (iii) Type of Entity | (iv) Country of | (v) Maxi | mum |
| | | Identification Number (if any) | , , , , , | Organization | Percentage 0 Profit, Loss, o | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | 1 // | 1 |
| _ | Did the partnership file Form 8893, Election of Partn | orabin Laval Tay Traatma | nt or an alastian atatamar | t under | Yes | No |
| 5 | section 6231(a)(1)(B)(ii) for partnership-level tax tre | • | • | | | |
| | for more details | attriont, that is in choct to | i tilis tax year: occi oilii | 0030 | | х |
| 6 | Does the partnership satisfy all four of the following | conditions? | | | | |
| а | The partnership's total receipts for the tax year were | | | | | |
| b | The partnership's total assets at the end of the tax ye | ear were less than \$ 1 mill | lion. | | | |
| C | Schedules K-1 are filed with the return and furnished | I to the partners on or bef | fore the due date (includin | g extensions) for the partnership | | |
| | return. | | | | | |
| d | The partnership is not filing and is not required to file | | | | | X |
| | If "Yes," the partnership is not required to complete S | Schedules L, M-1, and M- | 2; Item F on page 1 of For | m 1065; | | |
| | or Item L on Schedule K-1. | f. 11 100.01.10 | | | | 177 |
| | Is this partnership a publicly traded partnership as d | | | | | X |
| 8 | During the tax year, did the partnership have any del | | | | | x |
| 9 | principal amount of the debt? Has this partnership filed, or is it required to file, For | m 8018 Material Advisor | Disclosura Statement to | nrovide information on any | | ^ |
| J | reportable transaction? | | | - | | X |
| 10 | At any time during calendar year 2016, did the partn | | | | | 1 |
| . • | foreign country (such as a bank account, securities | · | - | - | | |
| | requirements for FinCEN Form 114, Report of Foreig | | , | | | |
| | ▶ | | | | | Х |

| 30 | chedule B Other Information (continued) | | |
|--------|--|------|--------|
| | | Yes | No |
| 11 | At any time during the tax year, did the partnership receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes," | | |
| | the partnership may have to file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts. | | |
| | See instructions | | Х |
| 12a | Is the partnership making, or had it previously made (and not revoked), a section 754 election? | | Х |
| | See instructions for details regarding a section 754 election. | | |
| b | Did the partnership make for this tax year an optional basis adjustment under section 743(b) or 734(b)? If "Yes," attach a statement showing | | |
| | the computation and allocation of the basis adjustment. See instructions | | Х |
| C | | | |
| | under section 743(d)) or substantial basis reduction (as defined under section 734(d))? If "Yes," attach a statement showing the computation and | | |
| | allocation of the basis adjustment. See instructions | | Х |
| 13 | Check this box if, during the current or prior tax year, the partnership distributed any property received in a like-kind exchange or contributed such | | |
| | property to another entity (other than disregarded entities wholly owned by the partnership throughout the tax year) | | |
| 14 | At any time during the tax year, did the partnership distribute to any partner a tenancy-in-common or other undivided interest in partnership | | |
| | property? | | X |
| 15 | If the partnership is required to file Form 8858, Information Return of U.S. Persons With Respect To Foreign Disregarded Entities, enter the | | |
| | number of Forms 8858 attached. See instructions | | |
| 16 | Does the partnership have any foreign partners? If "Yes," enter the number of Forms 8805, Foreign Partner's Information Statement of | | |
| | Section 1446 Withholding Tax, filed for this partnership. | | Х |
| 17 | Enter the number of Forms 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships, attached to this return. | | |
| | 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)? | | Х |
| | gnation of Tax Matters Partner (see instructions) | | |
| Enter | below the general partner or member-manager designated as the tax matters partner (TMP) for the tax year of this return: | | |
| | nated TMP ► JAMISON CUTTER number of TMP ► 542-90-6 | 514 | |
| entity | TMP is an t, name of TMP sentative Phone number of TMP number of TMP number of TMP | | |
| | 731 MUELLER DRIVE | | |
| | nated TMP LITTLETON, CO 80129 | | |
| | · | 1065 | (2016) |

| Scl | hed | ule K Partners' Distributive Share Items | | Total amount |
|---|-----|--|------------|--------------|
| | 1 | Ordinary business income (loss) (page 1, line 22) | 1 | -27,372. |
| | 2 | Net rental real estate income (loss) (attach Form 8825) | 2 | |
| | 3 | a Other gross rental income (loss) | | |
| | | b Expenses from other rental activities (attach statement) 3b | | |
| | | c Other net rental income (loss). Subtract line 3b from line 3a | 3c | |
| | 4 | Guaranteed payments | 4 | |
| Income (Loss) | 5 | Interest income | 5 | |
| e (L | 6 | Dividends: a Ordinary dividends | 6a | |
| ē | | b Qualified dividends 6b | | |
| <u>၁</u> | 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) | | |
| | 10 | Net section 1231 gain (loss) (attach Form 4797) | 10 | |
| | 11 | Other income (loss) (see instructions) Type | 11 | |
| w | 12 | Section 179 deduction (attach Form 4562) | 12 | |
| Deductions | 13 | a Contributions SEE STATEMENT 3 | 13a | 275. |
| ucti | | b Investment interest expense | 13b | |
| ed | | c Section 59(e)(2) expenditures: (1) Type ► (2) Amount ► | 13c(2) | |
| | | d Other deductions (see instructions) Type ▶ | 13d | |
| Self- Employ- ment | 14 | a Net earnings (loss) from self-employment | 14a | -27,372. |
| 추절 | | b Gross farming or fishing income | 14b | |
| <u>В</u> Е | | c Gross nonfarm income | 14c | 2,213,615. |
| | | a Low-income housing credit (section 42(j)(5)) | 15a | |
| v | | b Low-income housing credit (other) | 15b | |
| Credits | | c Qualified rehabilitation expenditures (rental real estate) (attach Form 3468, if applicable) | 15c | |
| ဝိ | l | d Other rental real estate credits (see instructions) Type ▶ | 15d | |
| | l | e Other rental credits (see instructions) Type | 15e | |
| | | f Other credits (see instructions) Type | 15f | |
| | 16 | a Name of country or U.S. possession ► | | |
| | | b Gross income from all sources | 16b | |
| us | | c Gross income sourced at partner level | 16c | |
| įį | | Foreign gross income sourced at partnership level | 404 | |
| ansactions | | d Passivie d category d Category f Other f Other f Other | 16f | |
| | | Deductions allocated and apportioned at partner level | 406 | |
| Foreign Tr | | g Interest expense h Other | 16h | |
| eig | | Deductions allocated and apportioned at partnership level to foreign source income | 164 | |
| For | | i Passive | 16k 16l | |
| | | mReduction in taxes available for credit (attach statement) | 16m | |
| | | n Other foreign tax information (attach statement) | 10111 | |
| | | a Post-1986 depreciation adjustment | 17a | -17,350. |
| × " | | b Adjusted gain or loss | 17b | 27,73300 |
| em S | | c Depletion (other than oil and gas) | 17c | |
| Alternative Minimum Tax (AMT) Items | | d Oil, gas, and geothermal properties - gross income | 17d | |
| Aire | | e Oil, gas, and geothermal properties - deductions | 17e | |
| ₹≅ | | f Other AMT items (attach statement) | 17f | |
| | _ | a Tax-exempt interest income | 18a | |
| Ē | | b Other tax-exempt income | 18b | |
| Other Information | | c Nondeductible expenses | 18c | |
| Ĕ | | a Distributions of cash and marketable securities | 19a | |
| nfo | | b Distributions of other property | 19b | |
| ē | | a Investment income | 20a | |
| oth | | 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 | | | | | | | | | |
| 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 | | -27,647. | | | | | | | |
| | | | | | | | | | |

| · · · · · · · · · · · · · · · · · · · | ' | • | ' | ' |
|---|-----------------------------|------------------------------|----------------------------|----------------|
| Schedule L Balance Sheets per | Books | | | |
| Assets | Beginning | of tax year | End of to | ax year |
| Assets | (a) | (b) | (c) | (d) 31,715. |
| 1 Cash | | 57,402. | | 31,715. |
| 2a Trade notes and accounts receivable | 29,936. | | 32,862. | |
| b Less allowance for bad debts | | 29,936. | | 32,862. |
| 3 Inventories | | 24,313. | | 26,278. |
| 4 U.S. government obligations | | | | |
| 5 Tax-exempt securities | CM2 MEMERIM 4 | 1 065 051 | | 1 006 064 |
| | STATEMENT 4 | 1,065,851. | | 1,086,064. |
| 7a Loans to partners (or persons related to partners) | | | | |
| b Mortgage and real estate loans | | | | |
| Other investments (attach statement) Buildings and other depreciable assets | 2,012,765. | | 2,012,764. | |
| b Less accumulated depreciation | 1,401,183. | 611,582. | 1,511,246. | 501,518. |
| 10a Depletable assets | 1,401,103. | 011,302. | 1,311,240. | 301,310. |
| b Less accumulated depletion | | | | |
| 11 Land (net of any amortization) | | | | |
| 12a Intangible assets (amortizable only) | 244,463. | | 244,732. | |
| b Less accumulated amortization | 105,034. | 139,429. | 121,437. | 123,295. |
| 13 Other assets (attach statement) | | | | |
| 14 Total assets | | 1,928,513. | | 1,801,732. |
| Liabilities and Capital | | , | | <u> </u> |
| 15 Accounts payable | | 81,482. | | 134,026. |
| 16 Mortgages, notes, bonds payable in less than 1 year | | - | | |
| | STATEMENT 5 | 341,449. | | 239,811. |
| 18 All nonrecourse loans | | | | |
| 19a Loans from partners (or persons related to partners) | | | | |
| b Mortgages, notes, bonds payable in 1 year or more | | 367,524. | | 264,500. |
| 20 Other liabilities (attach statement) | STATEMENT 6 | 1,986,719. | | 2,017,844. |
| 21 Partners' capital accounts | | -848,661. | | -854,449. |
| 22 Total liabilities and capital | | 1,928,513. | | 1,801,732. |
| Schedule M-1 Reconciliation of | | | | |
| Note. The partnership | may be required to file Sch | | | |
| 1 Net income (loss) per books | 29,28 | 8 • 6 Income recorded on | | |
| 2 Income included on Schedule K, lines 1, 2, 3c, | | | 1 through 11 (itemize): | |
| 5, 6a, 7, 8, 9a, 10, and 11, not recorded on boo | oks | a Tax-exempt interest | \$ | |
| this year (itemize): | _ | — - | | |
| 3 Guaranteed payments (other than health | | 7 Deductions included | · · | |
| insurance) | | | l, not charged against | |
| 4 Expenses recorded on books this year not included on | | book income this yea | , | |
| Schedule K, lines 1 through 13d, and 16l (itemize): STMT 7 1, 64 | <u>1</u> . | a Depreciation \$ | | |
| a Depreciation \$ | _ | | | |
| b Travel and entertainment \$ | 1,64 | | rsis of Net Income (Loss), | 00.645 |
| 5 Add lines 1 through 4 | | | 8 from line 5 | -27,647. |
| Schedule M-2 Analysis of Partne | | | , , | |
| 1 Balance at beginning of year | | _ | h | |
| 2 Capital contributed: a Cash | | | perty | |
| b Property | | Notiner decreases (iter | mize): | |
| 3 Net income (loss) per books 4 Other increases (itemize): | 29,20 | 8 Add lines 6 and 7 | | |

611042 01-05-17

5 Add lines 1 through 4

-854,449. 9 Balance at end of year. Subtract line 8 from line 5

-854,449. Form **1065** (2016)

Form 1125-A

(Rev. October 2016)

Department of the Treasury Internal Revenue Service Name

Cost of Goods Sold

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

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

OMB No. 1545-0123

| Name | | Employer Identification number |
|---|----|-----------------------------------|
| CUTTER HIGHLANDS RANCH, LLC | | 26-3047014 |
| 1 Inventory at beginning of year | 1 | 24,313. |
| 2 Purchases | 2 | 910,858. |
| 3 Cost of labor | 3 | |
| 4 Additional section 263A costs (attach schedule) | 4 | |
| 5 Other costs (attach schedule) SEE STATEMENT 8 | 5 | 130. |
| 6 Total. Add lines 1 through 5 | 6 | 935,301. |
| 7 Inventory at end of year | 7 | 26,278. |
| 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 | 909,023. |
| 9 a Check all methods used for valuing closing inventory: (i) | | |
| 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 | | |
| f Was there any change in determining quantities, cost, or valuations between opening and closing inventory? If "Yes," attach explanation. | | |
| For Paperwork Reduction Act Notice, see separate instructions. | | Form 1125-A (Rev. 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.

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

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

OMB No. 1545-0099

Name of partnership

Part I

Employer identification number

| CUTTER | HIGHLANDS | RANCH, | LL(|
|--------|-----------|--------|-----|
|--------|-----------|--------|-----|

26-3047014

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

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

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

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

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

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

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

| Name of partnership | | | | Employer identification number |
|--|----------------|----------|----|--------------------------------|
| CUTTER HIGHLANDS RANCH, LLC | | | | 26-3047014 |
| 1 a Ordinary income (loss) (Schedule K, line 1) | 1a | -27,372. | | |
| 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 | -27,372. | | |
| 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 | -27,372. | | |
| 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 | -27,372. |
| 4 a Guaranteed payments to partners (Schedule K, line 4) derived from a trade or business | | | | |
| as defined in section 1402(c) | 4a | | | |
| b Part of line 4a allocated to individual limited partners for other than services and to | | | | |
| estates, trusts, corporations, exempt organizations, and IRAs | 4b | | | |
| c Subtract line 4b from line 4a | | | 4c | |
| 5 Net earnings (loss) from self-employment. Combine lines 3c and 4c. Enter here and on Sch | nedule K, line | 14a | 5 | -27,372. |

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

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

Employer Identification Number: 26-3047014

For the Year Ending December 31, 2016

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

| FORM 1065 | TAX EXPENSE | STATEMENT 1 |
|-----------------------------|------------------|----------------|
| DESCRIPTION | | AMOUNT |
| TAXES - PAYROLL | | 89,003. |
| TAXES - OTHER | | 48,677. |
| TAXES - SALES | | 5,405. |
| TOTAL TO FORM 1065, LINE 14 | | 143,085. |
| | | |
| FORM 1065 | OTHER DEDUCTIONS | STATEMENT 2 |
| DESCRIPTION | | AMOUNT |
| ACCOUNTING | | 17,588. |
| ADVERTISING | | 32,095. |
| ALLOCATED G&A | | 16,411. |
| AMORTIZATION EXPENSE | | 16,404. |
| AUTOMOBILE | | 8,458. |
| BANK & CREDIT CARD FEES | | 58,759. |
| BUILDING INSURANCE | | 25,658. |
| CASH SHORT & OVER | | -52. |
| COMPUTER SUPPLIES | | 903. |
| CONTRACT MAINTENANCE | | 10,863. |
| DUES AND SUBSCRIPTIONS | | 2,817. |
| EQUIPMENT RENTAL | | 2,409. |
| INSURANCE - AUTO | | 3,957. |
| INSURANCE - LIABILITY | | 21,257. |
| INSURANCE - WORKERS COMP | | 8,410. |
| JANITORIAL & CLEANING | | 18,303. |
| LINEN | | 6,914. |
| MENUS | | 341. |
| MUSIC | | 360. |
| OFFICE SUPPLIES | | 4,376. |
| OPERATING SUPPLIES | | 22,748. |
| PARKING | | 30. |
| PEST CONTROL | | 1,747. |
| POSTAGE/FREIGHT/COURIER | | 2,333. |
| ROYALTY GEOUDING GEOVICES | | 132,904. |
| SECURITY SERVICES | | 345. |
| SMALLWARES TEAM MEETINGS | | 4,007. 314. |
| TELEPHONE | | 14,192. |
| UNIFORMS & LAUNDRY | | 4,431. |
| UTILITIES | | 44,508. |
| TOTAL TO FORM 1065, LINE 20 | | 483,790. |

10

| SCHEDULE K | CHARITABLE CON | NTRIBUTION | IS | STATEMENT | 3 |
|--|-----------------|------------|---|--------------------------|------------|
| DESCRIPTION | | | TYPE | AMOUNT | |
| DONATIONS | | CASH (50 | 용) | 2' | 75. |
| TOTALS TO SCHEDULE K, LINE | E 13A | | | 2' | 75. |
| SCHEDULE L | OTHER CURRENT | T ASSETS | | STATEMENT | 4 |
| DESCRIPTION | | | BEGINNING OF TAX YEAR | END OF TAX | X |
| A/R - EMPLOYEES DUE FROM AFFILIATE PREPAID EXPENSES | | _ | 423. 1,048,776. 16,652. | 1,085,6 | 10. 54. |
| TOTAL TO SCHEDULE L, LINE | 6 | = | 1,065,851. | 1,086,0 | 64. |
| SCHEDULE L | OTHER CURRENT I | LIABILITIE | 'S | STATEMENT | 5 |
| DESCRIPTION | | | BEGINNING OF TAX YEAR | END OF TAX | X |
| ACCRUED PAYROLL ACCRUED EXPENSES PAYROLL TAXES PAYABLE SALES TAX PAYABLE GIFT CERTIFICATES PAYABLE RENOVATIONS CREDIT PERSONAL PROPERTY TAXES PA | AYABLE | | 28,364. 18,324. 14,824. 16,476. 27,367. 227,791. 8,303. | 14,6; 22,6; 202,5; | 72. |
| TOTAL TO SCHEDULE L, LINE | 17 | _ | 341,449. | 239,83 | 11. |

| SCHEDULE L | OTHER LIABILITIES | | STATEMENT | 6 |
|--|---------------------------|--------------------------|-----------|------------|
| DESCRIPTION | | BEGINNING OF TAX YEAR | END OF TA | X |
| DUE TO AFFILIATE | | 1,986,719. | 2,017,8 | 44. |
| TOTAL TO SCHEDULE L, I | INE 20 | 1,986,719. | 2,017,8 | 44. |
| | | | | |
| SCHEDULE M-1 EXPENSES | RECORDED ON BOOKS NOT DEI | DUCTED IN RETURN | STATEMENT | 7 |
| DESCRIPTION | | | AMOUNT | |
| LIFE INSURANCE FINES, VIOLATIONS & PE | ENALTY | | 1,4 | 63. 78. |
| TOTAL TO SCHEDULE M-1, | LINE 4 | | 1,6 | 41. |
| FORM 1125-A | OTHER COSTS | | STATEMENT | 8 |
| DESCRIPTION | | | AMOUNT | |
| COS - OTHER | | | 1 | 30. |
| TOTAL TO LINE 5 | | | 1 | 30. |

| Schedule K-1 (Form 1065) 2016 | Final K-1 Amended K-1 | OMB No. 1545-0123 |
|--|---|------------------------------|
| (Form 1065) Por calendar year 2016, or tax Department of the Treasury year beginning | Part III Partner's Share of Curren Deductions, Credits, and | |
| Internal Revenue Service ending | 1 Ordinary business income (loss) 15 Credits | |
| Partner's Share of Income, Deductions, | -23,266. | |
| Credits, etc. ► See separate instructions. | 2 Net rental real estate income (loss) | 41 |
| Part I Information About the Partnership | 3 Other net rental income (loss) | ISACTIONS |
| A Partnership's employer identification number 26-3047014 | 4 Guaranteed payments | |
| B Partnership's name, address, city, state, and ZIP code | 5 Interest income | |
| CUTTER HIGHLANDS RANCH, LLC 2253 E. BRIARWOOD AVE, STE 509 LITTLETON, CO 80122 | 6a Ordinary dividends 17 Alternative | min tax (AMT) items -14,748. |
| C IRS Center where partnership filed return | Ob Qualified dividends | 11,/10. |
| E-FILE | 7 Royalties 18 Tax-exempt | tincome and |
| D Check if this is a publicly traded partnership (PTP) | | ble expenses |
| Part II Information About the Partner | 9a Net long-term capital gain (loss) | |
| E Partner's identifying number 542-90-6514 | 9b Collectibles (28%) gain (loss) 19 Distribution | S |
| F Partner's name, address, city, state, and ZIP code | 9c Unrecaptured sec 1250 gain | mation |
| JAMISON CUTTER 731 MUELLER DRIVE | 10 Net section 1231 gain (loss) | nation |
| LITTLETON, CO 80129 G General partner or LLC X Limited partner or other LLC | 11 Other income (loss) | |
| member-manager member | | |
| H X Domestic partner | | |
| I1 What type of entity is this partner? INDIVIDUAL | 12 Section 179 deduction | |
| 12 If this partner is a retirement plan (IRA/SEP/Keogh/etc.), check here J Partner's share of profit, loss, and capital: | 13 Other deductions | |
| Beginning Ending | A 234. | |
| Profit 85.000000% 85.000000% | | |
| Loss 85.000000% 85.000000% | | |
| Capital 85.000000% 85.000000% | 14 Self-employment earnings (loss) | |
| K Partner's share of liabilities at year end: | A -23,266. | |
| Nonrecourse \$ | C 1,881,573. | |
| Qualified nonrecourse financing \$ Recourse \$ 1,161,308. | *See attached statement for additional information. | |
| | | |
| L Partner's capital account analysis: | | |
| Beginning capital account $$-735,207$. Capital contributed during the year $$23,500$. | Aino Aino | |
| Capital contributed during the year \$ 23,500 \\ Current year increase (decrease) \$ -24,895 \\ | es S | |
| Withdrawals & distributions \$(| ິດ ທ | |
| Ending capital account \$ -736,602 | or IRS | |
| X Tax basis GAAP Section 704(b) book Other (explain) | | |
| M Did the partner contribute property with a built-in gain or loss? Yes X No | | |
| If "Yes." attach statement (see instructions) | | |

| SCHEDULE K-1 CURRENT YEAR INC | REASES (DECREASES) | |
|---|--------------------|----|
| DESCRIPTION | AMOUNT TOTALS | |
| ORDINARY INCOME (LOSS) | -23,266. | |
| SCHEDULE K-1 INCOME SUBTOTAL | -23,26 | 6. |
| CHARITABLE CONTRIBUTIONS | -234. | |
| SCHEDULE K-1 DEDUCTIONS SUBTOTAL | -23 | 4. |
| NET INCOME (LOSS) PER SCHEDULE K-1 | -23,50 | 0. |
| FINES, VIOLATIONS & PENALTY LIFE INSURANCE | -1,256. -139. | |
| OTHER INCREASES OR DECREASES SUBTO | TAL -1,39 | 5. |
| TOTAL TO SCHEDULE K-1, ITEM L | -24,89 | 5. |

| Schedule K-1 (Form 1065) 2016 | | ded K-1 OMB No. 1545-0123 |
|--|---|---|
| Department of the Treasury year beginning | | e of Current Year Income, redits, and Other Items |
| Internal Revenue Service ending | 1 Ordinary business income (loss) | 15 Credits |
| Partner's Share of Income, Deductions, | -4,106. | |
| Credits, etc. ► See separate instructions. | 2 Net rental real estate income (loss) | 40 Faraian transactions |
| Part I Information About the Partnership | 3 Other net rental income (loss) | 16 Foreign transactions |
| A Partnership's employer identification number 26-3047014 | 4 Guaranteed payments | |
| B Partnership's name, address, city, state, and ZIP code | 5 Interest income | |
| CUTTER HIGHLANDS RANCH, LLC 2253 E. BRIARWOOD AVE, STE 509 LITTLETON, CO 80122 | 6a Ordinary dividends 6b Qualified dividends | 17 Alternative min tax (AMT) items A -2,602. |
| C IRS Center where partnership filed return | | 2,002. |
| E-FILE | 7 Royalties | |
| D Check if this is a publicly traded partnership (PTP) | 9 Not short term conite asin (less) | 18 Tax-exempt income and |
| D Check if this is a publicly traded partnership (PTP) | 8 Net short-term capital gain (loss) | nondeductible expenses |
| Part II Information About the Partner | 9a Net long-term capital gain (loss) | |
| E Partner's identifying number 542-50-7455 | 9b Collectibles (28%) gain (loss) | 19 Distributions |
| F Partner's name, address, city, state, and ZIP code | 9c Unrecaptured sec 1250 gain | |
| JOHN CUTTER | 10 Net section 1231 gain (loss) | 20 Other information |
| 2188 WYNTERBROOK DRIVE | | |
| HIGHLANDS RANCH, CO 80126 | 11 Other income (loss) | |
| G General partner or LLC X Limited partner or other LLC | | |
| member-manager member | | |
| H X Domestic partner Foreign partner I1 What type of entity is this partner? INDIVIDUAL | 12 Section 179 deduction | |
| 12 If this partner is a retirement plan (IRA/SEP/Keogh/etc.), check here | 12 Section 179 deduction | |
| J Partner's share of profit, loss, and capital: | 13 Other deductions | |
| Beginning Ending | A 41. | |
| Profit 15.000000% 15.000000% | | |
| Loss 15.000000% 15.000000% | | |
| Capital 15.000000% 15.000000% | 14 Self-employment earnings (loss) | |
| K Partner's share of liabilities at year end: | A $-4,106$. C $332,042$. | |
| Nonrecourse \$ Qualified nonrecourse financing \$ | *See attached statement for addition | nal information |
| Recourse \$ 1,121,036. | See attached statement for addition | onai information. |
| Ψ | | |
| L Partner's capital account analysis: | 1 | |
| Beginning capital account $\qquad \qquad | Only | |
| Capital contributed during the year \$ | O o | |
| Current year increase (decrease) \$ -4,393. | n Cse | |
| Withdrawals & distributions \$() Ending capital account \$ -117,847. | For IRS | |
| Ending capital account \$\$\$ | Ā | |
| Tax basis GAAP Section 704(b) book Other (explain) | | |
| M Did the partner contribute property with a built-in gain or loss? Yes X No | | |
| If "Yes." attach statement (see instructions) | | |

| SCHEDULE K-1 CURRENT YEAR INCREASES (D | ECREASES) | |
|---|---------------|---------|
| DESCRIPTION | AMOUNT | TOTALS |
| ORDINARY INCOME (LOSS) | -4,106. | |
| SCHEDULE K-1 INCOME SUBTOTAL | | -4,106. |
| CHARITABLE CONTRIBUTIONS | -41. | |
| SCHEDULE K-1 DEDUCTIONS SUBTOTAL | | -41. |
| NET INCOME (LOSS) PER SCHEDULE K-1 | | -4,147. |
| FINES, VIOLATIONS & PENALTY LIFE INSURANCE | -222. -24. | |
| OTHER INCREASES OR DECREASES SUBTOTAL | | -246. |
| TOTAL TO SCHEDULE K-1, ITEM L | | -4,393. |

2016 TAX RETURN FILING INSTRUCTIONS

COLORADO FORM 106

FOR THE YEAR ENDING

DECEMBER 31, 2016

| Prepared for | |
|--|--|
| | CUTTER HIGHLANDS RANCH, LLC 2253 E. BRIARWOOD AVE, STE 509 LITTLETON, CO 80122 |
| Prepared by | |
| | MEYERS BROTHERS KALICKA, P.C. 330 WHITNEY AVE, SUITE 800 HOLYOKE, MA 01040 |
| To be signed and dated by | A MEMBER OF THE LLC |
| Amount of tax | Total tax \$ 0.00 Less: payments and credits \$ 0.00 Plus: other amount \$ 0.00 Plus: interest and penalties \$ 0.00 NO PMT REQUIRED \$ |
| Overpayment | Credited to your estimated tax \$ 0.00 Other amount \$ 0.00 Refunded to you \$ 0.00 |
| Mail tax return and check (if applicable) to | THIS RETURN HAS BEEN PREPARED FOR ELECTRONIC FILING. IF YOU WISH TO HAVE IT TRANSMITTED TO THE CDOR, PLEASE SIGN, DATE AND RETURN DR-8453P TO OUR OFFICE. WE WILL THEN SUBMIT THE ELECTRONIC RETURN TO THE CDOR. |
| Forms to be distributed to partners | ENCLOSED ARE COPIES OF SCHEDULE K-1 TO BE DISTRIBUTED TO THE MEMBERS. |
| Return must be mailed on or before | RETURN DR-8453P TO US BY APRIL 18, 2017. |
| Special Instructions | DO NOT MAIL THE PAPER COPY OF THE RETURN TO THE CDOR. |



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 Departn | <u>ient of Reven</u> | ue Retain with y | our records | | | | | |
|---|--|---|---|---|--|--|---|--|
| Colorado Account Nu | mber | FEIN | | Tax Year Beginning (MM/DD/ | YY) Tax Ye | ear End (MM/DD/YY) | | |
| 26397027 | | 26-304701 | 4 | 01/01/16 | 12/ | 31/16 | | |
| Business Name | | | | | Phone | Number | | |
| CUTTER HIG | HLANDS R | ANCH, LLC | | | | | | |
| Address | | | | | • | | | |
| 2253 E. BR | IARWOOD 2 | AVE, STE 50 | 9 | | | | | |
| City | | | | | State | ZIP | | |
| LITTLETON CO 80122 | | | | | | | | |
| Part I - Tax Return Information | | | | | | | | |
| d Tatal Income from | todoval Cabadu | I- 1/ | | | 4 | -27,3 | 372 | |
| 1. Total Income, from | tederal Schedul | ie K | | | 1 \$ | -21, | <i>5 1 </i> | |
| 2. Allowable deduction | ons from federal | Schedule K | | | 2 \$ | | | |
| 3. Colorado Tax, line | 12 on Colorado | Form 106, if applicab | le | | 3 \$ | | | |
| | | | 4 \$ | 4 | | | | |
| | | | | | | | | |
| 5. Amount You Owe, | line 28 on Colora | ado Form 106 | | | 5 \$ | <u></u> \$ | | |
| 6. Refund, line 31 Co | lorado Form 106 | | II. Daalawatian | | 6 \$ | \$ | | |
| 11 1 12 6 | | | II - Declaration | | | | | |
| and the amounts sho and that said tax retu belief. I understand the | wn in Part I abov rns, statements, nat I (or my Electr ns, withholding st | re agree with the amo schedules and attach ronic Return Originato tatements, schedules | unts shown on the comments are true, comor (ERO) if applicable and attachments up | bove and the information prompany's 2016 Federal/Corect, and complete to the been may be required to provide pon request by the Colorad | lorado ince est of my k e paper co | ome tax returns, nowledge and pies of this | | |
| | | | , , , | | | | | |
| | | Dowt III Dool | aretian of FDO | MEMBER /Preparer/Transmitte | | | | |
| | | Part III - Deci | aration of ERO/ | Preparer/Transmitte | | | | |
| If the transmitter did | not prepare the t | ax return, check here | X | | | | | |
| 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 | | | | Pr | eparer Ide | ntification Number or You | r SSN | |
| JAMES BARR | ETT | | | | 00382 | | | |
| | _ | | | Da | ate (MM/D | D/YY) | | |
| Check if als | o Preparer | X | | | 4/06/ | 17 | | |

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

(0043)

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

8



Fiscal Year Beginning (MM/DD/16): Ending (MM/DD/YY) Mark for Amended Return Name of Organization Colorado Account Number 26397027 CUTTER HIGHLANDS RANCH, LLC Federal Employer ID Number Doing Business As 26-3047014 Address City State ZIP LITTLETON 80122 2253 E. BRIARWOOD AVE, STE 509 CO If you are attaching a statement disclosing a listed or reportable transaction, mark this box A. This return is being filed for (mark one): X LLC Partnership S Corporation LLP Association Non-Profit B. Beginning depreciable assets from federal return C. Ending depreciable assets from federal return 2,012,765 2,012,764 E. Date of organization or incorporation (MM/DD/YY) **D.** Business or profession RESTAURANT FRANCHISE 10/13/08 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: Round to the Part I: Computation of Colorado Income nearest dollar lo 0 -27,3721. Ordinary income from line 1 federal Schedule K • 1 00 2. Total of all other income 00 3. Modifications increasing federal income • 3 lo 0 -27,3724. Total of lines 1, 2 and 3 lo o **5.** Allowable deductions from federal Schedule K • 5 00 6. Colorado Marijuana Business Deduction • 6 0 0 7. Other modifications decreasing federal income • 7

8. Total of lines 5 through 7



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

Form 106 Part II



| Name | Account | Number | | |
|---|---------|---------------------|-----------------|----------|
| CUTTER HIGHLANDS RANCH, LLC | 2639 | 7027 | | |
| 9. Line 4 minus line 8 | | 9 | -27,372 | 00 |
| 10. Colorado Source Income from (mark one): | | | · | |
| | | | | |
| Part IV Other (attach explanation) Income is all Colorado | | - 40 | -27,372 | 00 |
| File at: www.Colorado.gov/RevenueOnline - or - Mail to and make checks payable to: | | ● 10 lo Denart | ment of Revenue | ۰۰ |
| The da www.solorado.gov/nove.ndco/mine of Main to and make checks payable to. | | , CO 8026 | | |
| 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 | | | | Т |
| 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 | | | | 00 |
| (exclude lines 19 through 22, and lines 30 through 32, Form 106CR) | | 9 13 | | " |
| 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 | | - 14 | | |
| partners/shareholders/members | • | 1 5 | | 00 |
| | | | | |
| 16. Total of lines 13, 14 and 15 | | 16 | | 00 |
| L | | | | 00 |
| 17. Net tax, line 12 minus line 16 | | 17 | | |
| 18. Estimated tax credits and extension payments | | 18 | | 00 |
| Lottinated tax ordate and extension paymone | | | | |
| 19. Withholding from lottery or gambling winnings | • | • 19 | | 00 |
| 20. Gross conservation easement credit allocated to these | | | | 00 |
| partners/shareholders/members, from DR 1305G Line 33 | | • 20 | | 00 |
| 21. Innovative Motor Vehicle Credit from form DR 0617 allocated to these | _ | | | 00 |
| partners/shareholders/members | • | 9 21 | | + |
| 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 | | | | <u> </u> |
| instructions to calculate, submit copy of assessor's statement | • | 23 | | 00 |
| | | | | 00 |
| 24. Subtotal; add lines 18 to 23 | | 24 | | 00 |
| 25 Panalty (include on Line 29) | _ | 25 | | 00 |
| 25. Penalty (include on Line 28) | | 25 | | + |
| 26. Interest (include on Line 28) | | ● 26 | | 00 |
| | | | | |
| 27. Estimated tax penalty (include on Line 28) | • | ● 27 | | 00 |
| | | | | 00 |
| 28. If line 17 is greater than line 24, enter amount owed | | ● 28 | | 00 |
| 20 Overnovment line 24 minus line 17 | | 20 | | 00 |
| 29. Overpayment, line 24 minus line 17 | | 29 | | T |
| 30. Overpayment to be credited to 2017 estimated tax | | • 30 | | 00 |
| | | | | • |
| 31. Overpayment to be refunded | ● 31 | | 0 0 | _ |



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

Form 106 Part II



| Name | | | Account Number | | |
|---|--|---|----------------|-----------------|--|
| CUTTER H | HIGHLANDS RANCH, LI | LC | 26397027 | | |
| | , , , , , , , , , , , , , , , , , , , | lete under penalty of perjury in the se | • | | |
| Declaration of | oreparer is based on all informatio | on of which preparer has any knowled | ge. | | |
| Direct Routing Number Type: Checking Savings | | | | | |
| Deposit | Account Number | | | | |
| May the Colorado Department of Revenue discuss this return with the paid preparer shown below (see instructions)? • X Yes No | | | | | |
| Signature of par | tner or signature and title of officer | | | Date (MM/DD/YY) | |
| | | | MEMBER | | |
| Person or firm p | reparing return (name and phone nu | ımber) | | Date (MM/DD/YY) | |
| JAMES BA | ARRETT | 413 | 5368510 | 04/06/17 | |
| 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. | | | | | |
| | | | | | |

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 80261-0006

If you are filing this return without a check or payment,

please mail the return to:

COLORADO DEPARTMENT OF REVENUE

Denver, CO 80261-0005



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

Form 106 Part III



Do not submit federal K-1 schedules

| Name | Α | ccount Number | | |
|---|--------------------------------|-------------------------|-----------|------------|
| CUTTER HIGHLANDS RANCH, LLC | | 26397027 | | |
| Part III: Identification of Partners, Shareholders or Members | | | | |
| Part III must be completed for each partner/shareholder/member. DO No | IOT s | ubmit federal K-1 | schedi | ules. |
| Name of Partner, Shareholder or Member | S | SSN or Colorado Accou | ınt Num | ber |
| JAMISON CUTTER | | 542-90-6514 | | |
| Address of Partner, Shareholder or Member | City | | State | ZIP |
| 731 MUELLER DRIVE | LI | TTLETON | СО | 80129 |
| | F | Profit/Loss or Stock Ow | nership | Percentage |
| Composite 0107 Attached 0108 Filed | | | | 85.000000 |
| Name of Partner, Shareholder or Member | S | SSN or Colorado Accou | ınt Num | ber |
| JOHN CUTTER | | 542-50-7455 | | |
| Address of Partner, Shareholder or Member | City | | State | ZIP |
| 2188 WYNTERBROOK DRIVE | ні | GHLANDS RA | СО | 80126 |
| | F | Profit/Loss or Stock Ow | /nership | Percentage |
| Composite 0107 Attached 0108 Filed | | | | 15.000000 |
| Name of Partner, Shareholder or Member | SSN or Colorado Account Number | | ber | |
| | | | | |
| | | | | |
| Address of Partner, Shareholder or Member | City | | State | ZIP |
| | | | | |
| | <u> F</u> | Profit/Loss or Stock Ow | nership | Percentage |
| Composite 0107 Attached 0108 Filed | | | | |
| Name of Partner, Shareholder or Member | | SSN or Colorado Accou | unt Nicon | bor |
| Name of Partner, Snareholder of Member | | SIN or Colorado Accol | ınt Num | iber |
| | | | | |
| Address of Partner, Shareholder or Member | City | | State | ZIP |
| | | | | |
| | <u> </u> | | | |
| | F | Profit/Loss or Stock Ow | nership | Percentage |
| Composite 0107 Attached 0108 Filed | | | | |
| Name of Darkov Charakaldar av Marskav | | CON au Calaurada Assau | | de au |
| Name of Partner, Shareholder or Member | 8 | SSN or Colorado Accou | int inum | ibei (|
| | | | | |
| Address of Partner, Shareholder or Member | City | | State | ZIP |
| , | 1, | | | |
| | | | | |
| | F | Profit/Loss or Stock Ow | nership | Percentage |
| Composite 0107 Attached 0108 Filed | | | | |



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



| Name | | | | Account Number | | | |
|--------------|---|--|-----------|---------------------------------------|-----|----------|--------------|
| CU | TTER HIGHLANDS RANCH, I | LLC | | 26397027 | | | |
| | IV - Business Income Apportione | | f the S | | | | - |
| | at send federal return forms or schedules wit | • | i tile e | | | | |
| DOTIC | it send rederal return forms of scriedules wit | ii tiiis retuiri | | | | | \top |
| 4 7 | Fotal modified federal taxable income from lin | ne 0 Part I nage 1 Form 106 | | | 1 | -27,372 | 0 0 |
| | Business Income Apportioned to Colorado | | o Not | | • | 2,73,2 | |
| | nclude Foreign Source Revenues Modified | = | | | | | |
| • | notate i oreign cource nevenues mounie | Colorado | 1 | Total | | | |
| 2. (| Gross sales of tangible | Colorado | 1 | Total | | | |
| | personal property | 2 3,112,301 | 0 0 | 3,112,301 | 0 0 | | |
| | | | 1 1 | · · · · · · · · · · · · · · · · · · · | | | |
| 3. (| Gross revenue from services • | 3 0 | 0 0 | 0 | 0 0 | | |
| | Gross rents and royalties | | | | | | |
| | rom real property | 4 0 | 0 0 | 0 | 0 0 | | |
| | Gross proceeds from sales | | | | | | |
| | of real property • | 5 0 | 0 0 | 0 | 00 | | |
| 6. 7 | Taxable interest and dividend | | | | | | |
| i | ncome | 6 0 | 0 0 | 0 | 00 | | |
| 7. (| Gain from the sale of intangible | | | | | | |
| ŗ | personal property • | 7 0 | 0 0 | 0 | 00 | | |
| | | | | | | | |
| 8. F | Patent and copyright royalties | 8 | 00 | | 00 | | |
| | Revenue from the performance | | 0 0 | | | | |
| | of purely personal services | 9 | 100 | | 00 | | |
| | Total revenue (total of lines 2 | 2 110 201 | 0 0 | 2 110 201 | 00 | | |
| t | hrough 9 in each column) | 3,112,301 | 100 | 3,112,301 | 00 | | |
| 11. L | Line 10 (Colorado) divided by line 10 (Total) | | 11 | 100.0000 | % | | |
| | plete Lines 12 and 15 only if nonbusiness inc | ome is being directly allocated | | | | | |
| | ncome is being treated as business income, | | | | | | |
| | , | , , | | | | | |
| 12. L | ess income directly allocable (Nonbusiness | Income Only): | | | | | |
| | | | | | | | |
| (| a) Net rents and royalties from real or tangib | le property | • | | 00 | | |
| | | | | | | | |
| (| b) Capital gains and losses | | • | | 00 | | |
| | | | | | | | |
| (| c) Interest and dividends | | • | | 00 | | |
| | | | | | 0 0 | | |
| (| d) Patents and copyright royalties | | • | | ۲۷ | | |
| | | | | | 00 | | |
| (| e) Other nonbusiness income | | • | | ٥٧ | | \dashv |
| | <u>, </u> | | | | | | 00 |
| (| f) Total income directly allocable (add lines (| a) through (e)) | | | 12 | | ~ ~ |
| 40 . | Analista di Santanal Annala III | an anti-manage to the state of | Land P | - 40 | | _ 27 272 | 00 |
| 13. | Modified federal taxable income subject to a | oportionment by formula, line 1 | iess line | 9 12 | 13 | -27,372 | ┯┩ |
| | manage amparation and to Oale | Barrier 4.4 manufation to a 1 to 1 to 1 to 1 to 1 to 1 to 1 to | | | ارر | -27,372 | 0 0 |
| 14. | ncome apportioned to Colorado by formula, | line 11 multiplied by line 13 | | | 14 | -21,312 | ۲۷ |



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

Form 106 Part IV



| Nan | ne | | Account Number | | | |
|-----|---|---|----------------|--------|------------|-----|
| Ct | JTTER HIGHLANDS RANCH, LLC | | 26397027 | | | |
| 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 | | 0 0 |
| 16. | Total income apportioned to Colorado, line 14 plus line 15. Enter on line 10, | | | | | |
| | Part I, page 1, Form 106 | | | 16 | -27,372 | 0 0 |
| | | | D | ate (N | /IM/DD/YY) | |
| 17. | Pursuant to §39-22-303.5(6) C.R.S., taxpayer elects to treat | | | | | |
| | nonbusiness income as business income for the tax year ending: | | 17 | | | |

COLORADO

Partner's Colorado Information

For Calendar Year 2016 or Fiscal Year 2016 **SCHEDULE K-1 EQUIVALENT** Beginning _____, 2016; and Ending Partner Number Partner's Name, Address and ZIP Code Partner's Identifying Number JAMISON CUTTER 542-90-6514 731 MUELLER DRIVE X LITTLETON, CO 80129 Resident Nonresident Amended Schedule K-1 Final Schedule K-1 Partnership's Identifying Number Partnership's Name, Address and ZIP Code 26397027 CUTTER HIGHLANDS RANCH, LLC Partner's Percentage of: Ownership 85.000000%2253 E. BRIARWOOD AVE, STE 509 LITTLETON, CO 80122 Profit and Loss 85.000000% -23,266. Federal income Modifications increasing federal income Total modifications increasing federal income Modifications decreasing federal income Total modifications decreasing federal income

Federal income modified for Colorado

Nonresidents: Colorado source income

-23,266.

COLORADO SCHEDULE K-1 EQUIVALENT

Partner's Colorado Information

For Calendar Year 2016 or Fiscal Year

| | Tor Gardinaar Toar 2010 or Tio | oui ioui | | |
|-----------|--------------------------------|----------|---|--|
| Beginning | , 2016; and Ending | , | | |
| | | - | | |
| | | | 7 | |

2016

| LQOIVALLIVI | Beginning, 2010, and | |
|---|---|--|
| Partner's Name, Address and JOHN CUTTER 2188 WYNTERB | | Partner Number 2 Partner's Identifying Number 542-50-7455 |
| | NCH, CO 80126 | Resident X Nonresident Amended Schedule K-1 Final Schedule K-1 |
| | ANDS RANCH, LLC RWOOD AVE, STE 509 | Partnership's Identifying Number |
| Federal income | deral income | |
| Total modifications in Modifications decreasing fe | creasing federal income deral income | |
| Total modifications de | ecreasing federal income r Colorado | -4,106. |
| Nonresidents: Colorado sou | urce income | <u></u> |

2016 TAX RETURN FILING INSTRUCTIONS

DELAWARE FORM 300

FOR THE YEAR ENDING

DECEMBER 31, 2016

| Prepared for | |
|--|--|
| Frepared for | CUTTER HIGHLANDS RANCH, LLC |
| | 2253 E. BRIARWOOD AVE, STE 509 |
| | LITTLETON, CO 80122 |
| Prepared by | |
| | MEYERS BROTHERS KALICKA, P.C. 330 WHITNEY AVE, SUITE 800 |
| | HOLYOKE, MA 01040 |
| To be signed and dated by | NOT APPLICABLE |
| Amount of tax | Total tax \$ |
| | Less: payments and credits \$ U • U U |
| | 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. |
| | |
| | |
| | |
| | |
| | |
| | |
| | |

(Rev. December 2016) Department of the Treasury Internal Revenue Service

Application for Automatic Extension of Time To File Certain Business Income Tax, Information, and Other Returns ► File a separate application for each return. ► Information about Form 7004 and its separate instructions is at www.irs.gov/form7004

OMB No. 1545-0233

Name Identifying number 26-3047014 CUTTER HIGHLANDS RANCH, LLC **Print** Number, street, and room or suite no. (If P.O. box, see instructions.) or 2253 E. BRIARWOOD AVE, STE 509 **Type**

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)).

| City, town, state, and ZIP code (If a foreign ad | dress, enter city, province or state, | and country (follow the country's practice for entering postal code)). | |
|---|---|--|----------|
| LITTLETON, CO 80 | 122 | | |
| | | e extension is granted. See instructions before comp | |
| Part I Automatic Extension for C C | orporations With Ta | x Years Ending December 31. See instru | ctions. |
| 1a Enter the form code for the return listed belo | w that this application is fo | | <u></u> |
| Application | Form | Application | Form |
| Is For: | Code | Is For: | 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 | Landa Osa isatawatiana | |
| Part II Automatic Extension for Ce | | | |
| b Enter the form code for the return listed belo | • | | <u> </u> |
| Application | Form | Application | Form |
| Is For: | Code | Is For: | Code |
| Form 1041 (estate other than a bankruptcy esta | | Form 1041 (trust) | 05 |
| Part III Automatic Extension for E | | | |
| c Enter the form code for the return listed belo | · · · · · · · · · · · · · · · · · · · | | |
| Application | Form | Application | Form |
| Is For: | Code | Is For: | 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 Form 1120-FSC | 15 | Form 8804 | 31 |
| | 16 | Form 8831 | 33 |
| Form 1120 H | 17 18 | Form 8876 | |
| Form 1120 ND | 19 | Form 8924 Form 8928 | 35 |
| Form 1120-ND Part IV Automatic Extension for C | | ■ Form 8928 Fax Years Ending June 30. See instruction | |
| d Enter the form code for the return listed belo | • | | л IS. |
| Application | Form | Application | Form |
| Is For: | Code | Is For: | 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 |
| | 19 | 7 5 1 120 61 | |

619741 01-18-17 LHA For Privacy Act and Paperwork Reduction Act Notice, see separate instructions.

19

Form 7004 (Rev. 12-2016)

Form 1120-ND

| Fo | orm 7004 (Rev. 12-2016) | Page 2 |
|----|---|---------------|
| P | 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 | J 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | ▶ Ш |
| 5a | a The application is for calendar year 2016 , or tax year beginning, and ending | |
| b | 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 | |
| 7 | Total payments and credits (see instructions) | |
| 8 | Balance due. Subtract line 7 from line 6 (see instructions) | |
| | | Rev. 12-2016) |

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

2016 **DELAWARE**

FORM 300 PARTNERSHIP RETURN

DO NOT WRITE OR STAPLE IN THIS AREA

Page 1

REV CODE 0006

FISCAL YEAR **BUSINESS NAME**

CUTTER HIGHLANDS RANCH, LLC

2253 E. BRIARWOOD AVE, STE 509 STATE ZIP CODE

LITTLETON

CO 80122 **EMPLOYER IDENTIFICATION NUMBER** 2 6 3 0 4 7 0 1 4

NATURE OF BUSINESS (SEE INSTRUCTIONS)

1 2 2 5 3

A. CHECK APPLICABLE BOX: CHANGE OF ADDRESS AMENDED RETURN PARTNERSHIP DISSOLVED OR INACTIVE IF THE PARTNERSHIP ADDRESS HAS CHANGED, WHICH ADDRESS IS AFFECTED? LOCATION BILLING MAILING

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

X YES

NO

DID THE PARTNERSHIP HAVE DELAWARE RESIDENT PARTNERS?

 \mathbf{X}_{NO} YES

HOW MANY?

2 C. TOTAL NUMBER OF PARTNERS: 2008 D. YEAR PARTNERSHIP FORMED:

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:

| | UINIE. | | | 27272 | |
|-----|---|-----|-------------------|-----------------------------|-----|
| 1. | . , , | | | -27372 | 1 |
| 2. | | | | .0000 | 2 |
| 3. | Ordinary income apportioned to Delaware. Multiply Line 1 times Line 2 | | 3 | 0 | 3 |
| | | | Column A Total | Column B Within Delaware | |
| 4. | Enter in Column A the amount from Line 1 | | | _ | |
| | Enter in Column B the amount from Line 3 | 4 | -27372 | 0 | 4 |
| 5. | Net income (loss) from rental real estate activities, | | | | |
| | Federal Form 1065, Schedule K, Line 2 | 5 | | | 5 |
| 6. | Net income (loss) from other rental activities, | | | | |
| | Federal Form 1065, Schedule K, Line 3c | | | | 6 |
| 7. | Guaranteed payments from Federal Form 1065, Schedule K, Line 4 | 7 | | | 7 |
| 8. | Interest income from Federal Form 1065, Schedule K, Line 5 | 8 | | | 8 |
| 9. | Dividend income from Federal Form 1065, Schedule K, Line 6(a) | 9 | | | 9 |
| 10. | Royalty income from Federal Form 1065, Schedule K, Line 7 | 10 | | | 10 |
| 11. | Net short term capital gain (loss) from Federal Form 1065, | | | | |
| | Schedule K, Line 8 | 11 | | | 11 |
| 12a | Net long term capital gain (loss) from Federal Form 1065, | | | | |
| | Schedule K, Line 9(a) | 12a | | | 12a |
| | b. Collectible gain (loss) - Fed Form 1065, Sch. K, Line 9b | 12b | | | |
| | 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 though 12a, Line 13, and Line 14) | | -27372 | 0 | 15 |
| | DUCTIONS: | | | | |
| 16. | Charitable contributions from | | | | |
| | Federal Form 1065, Schedule K, Line 13(a) | 16 | 275 | 0 | 16 |
| 17. | Section 179 expense deduction from | | | | |
| | Federal Form 1065, Schedule K, Line 12 | 17 | | | 17 |
| 18. | | | | | |
| | Federal Form 1065, Schedule K, Line 13(b) and 13(c) | 18 | | | 18 |
| 19. | | | | | 19 |
| | , | | | | |

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

FORM 300

| SECTION A - GROSS REAL AND TANGIBLE PERSONAL PROPERTY | | | | | | |
|--|---------------------|-------------|---|------------------------|-------------|-----------------------|
| | COLUM Delaware S | | | COLUN Total Sourced | | ces) |
| | Beginning of Year | End of Year | | Beginning of Year | End | of Year |
| Total real and tangible property owned | 0 | | 0 | 2037077 | 20 | 39042 1 |
| Real tangible property rented (eight times annual rent paid) | 0 | | 0 | 2702640 | 27 | 02640 2 |
| 3. Total (Combine Lines 1 and 2) | 0 | | 0 | 4739717 | 47 | 41682 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 | 4739717 | 47 | 41682 5 |
| 6. Total (Combine Line 5 Beginning and End of Year Totals) | | 0 | | 948 | 139 | 9 ₆ |
| 7. Average values. (Divide Line 6 by 2) | | 0 | | 474 | 070 | 0 7 |
| | | | | | | • |
| SECTION B - WAGES, SALARIES, AND OTHER COMPENSATION PAID OF | R ACCRUED TO EMI | PLOYEES | | | | |
| Wages, salaries and other compensation of all employees | | 0 | | 105 | 162 | 7 . |
| o. wayes, salaties and other compensation of all employees | | U | | 103 | 4 02 | , 0 |
| SECTION C - GROSS RECEIPTS SUBJECT TO APPORTIONMENT | | | | | | |
| Gross receipts from sales of tangible personal property | | 0 | | 311 | 230 | 1 q |
| Gross income from other sources (see attachment) | | · | | 0 | | 10 |
| 11. Total | | 0 | | 311 | 230 | |
| | | | | - | | |
| SECTION D - DETERMINATION OF APPORTIONMENT PERCENTAGES | | | | | | |
| 12a. Enter amount from Column A, Line 7 | | 0 | | .00 | 00 | 12c |
| 12b. Enter amount from Column B, Line 7 | | 0700 | = | | | |
| , | | | | | | |
| 13a. Enter amount from Column A, Line 8 | | 0 | | .00 | 00 | 13c |
| 13b. Enter amount from Column B, Line 8 | | 4627 | = | | | |
| , | | | | | | |
| 14a. Enter amount from Column A, Line 11 | | 0 | | .00 | 00 | 14c |
| 14b. Enter amount from Column B, Line 11 | 211 | 2301 | = | | | |
| | | | | | | |
| 15. Total (Combine Apportionment Percentages on Lines 12c, 13c and 14c) | | | | • | 000 | 0 15 |
| 16. Apportionment percentage (see specific instructions) | | | | | 00 | 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 DAT | TELEPHO | ONE NUMBER | EMAIL ADDRESS | | | _ |
|----------------------------|---------|----------------------|------------------|-------|----------|---|
| JAMES BARRETT | PO | 00382590 | 4135368510 | (| 04/06/17 | |
| SIGNATURE OF PREPARER | PI | REPARER'S EIN OR SSN | PREPARER'S PHONE | | DATE | |
| 330 WHITNEY AVE, SUITE | E 800 | HOLYOKE | | MA | 01040 | |
| STREET ADDRESS OF PREPARER | | | CITY | STATE | ZIP | |

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



1019 (Revised 07/2016) 642202 01-19-17

2

FORM 300, SCHEDULE K-1

PARTNER'S SHARE OF INCOME

Page 1

or Fiscal Year beginning

and ending

| Partner's Identifying Number ► 542906514 | EIN | X SSN | Partnersh | ip's Identifying Number | r▶ 263047 | 014 |
|--|---------------|-----------|------------------------------|---------------------------------|-------------------------|-------------------------------------|
| Partner's Business Name -OR- Partner's First Name JAMISON | | | City | Address MUELLER DR: LETON | IVE Stat CC | |
| Partner's Last Name | | | Attention | | | |
| CUTTER | | | | Partner's Sha | are of Profit, Loss and | Capital: |
| Partner's Type of Entity (See Instructions) | | | | Beginning | | Ending |
| Code Description | Resident | t | Profit: | 85.000000 | | 85.000000 % |
| 0 1 INDIVIDUAL | X Non-Res | eident | Loss: Capital: | 85.000000 85.000000 | | 85.000000 % 85.000000 % |
| | == 11011 1103 | nuoni | | | · | |
| Allocable Share of Income | | Federal 1 | Column 065, Schedi | A ule K-1 Amount | | olumn B rived from Sources in DE |
| Ordinary Income (Loss) from Trade or Business Activities | s | | | -23266 | | |
| 2. Net Income (Loss) from Rental Real Estate Activities | | | | | | |
| 3. Net Income (Loss) from Other Rental Activities | | | | | | |
| 4. Guaranteed Payment to Partner | | | | | | |
| 5. Interest | | | | | | |
| 6. Dividends | | | | | | |
| 7. Royalties | | | | | | |
| 8. Net Short-term Capital Gain (Loss) | | | | | | |
| 9. Net Long-term Capital Gain (Loss) 10. Net Gain (Loss) under 1231 (other than Due to Casualty and Theft) | | | | | | |
| 11. Other Income (Loss) | | | | | | |
| 12. Total Income (Combine Line 1 to Line 11) | | | | -23266 | | 0 |
| Allocable Share of Deductions | | Federal 1 | Column 065, Schedi | A ule K-1 Amount | | olumn B rived from Sources in DE |
| 13. Charitable Contributions | | | | 234 | | |
| 14. Section 179 Expense Deductions | | | | | | |
| 15. Expenses from Portfolio Income | | | | | | |
| 16. Other Deduction/Credits (Attach Schedule) | | | | | | |

FORM 300, SCHEDULE K-1

Page 1

PARTNER'S SHARE OF INCOME

or Fiscal Year beginning

and ending

| Partne | er's Identifying Number > 542507455 | EIN | X SSN | Partnersh | ip's Identify | ing Number ► | 2630470 |)14 |
|--------|--|----------|-----------|------------------------------|---------------------------|------------------|-----------------------|--|
| | er's Business Name -OR- er's First Name IN | | | City | WYNTE | ERBROOK RANCH | DRIVE State CO | ZIP-Code 80126- |
| | er's Last Name | | | Attention | | | | |
| CUI | TER | | | | Pa | artner's Share o | of Profit, Loss and C | apital: |
| Partn | ner's Type of Entity (See Instructions) | | | | Beginı | ning | • | Ending |
| _ | Code Description | Resider | nt | Profit: | | 00000 % | Profit: | 15.000000 % |
| 0 | 1 INDIVIDUAL | X Non-Re | sident | Loss: Capital: | | 00000 % | Loss: Capital: | 15.000000 % 15.000000 % |
| | Allocable Share of Income | 11011110 | | Column | | | Coli | umn B ved from Sources in DE |
| 1. 0 | rdinary Income (Loss) from Trade or Business Activities | · | | | - 4 | 1106 | | |
| 2. N | et Income (Loss) from Rental Real Estate Activities | | | | | | | |
| 3. N | et Income (Loss) from Other Rental Activities | | | | | | | |
| 4. G | uaranteed Payment to Partner | | | | | | | |
| 5. In | nterest | | | | | | | |
| 6. D | ividends | | | | | | | |
| 7. R | oyalties | | | | | | | |
| 8. N | et Short-term Capital Gain (Loss) | | | | | | | |
| 10. N | et Long-term Capital Gain (Loss) et Gain (Loss) under 1231 other than Due to Casualty and Theft) | | | | | | | |
| 11. 0 | ther Income (Loss) | | | | | | | |
| 12. To | otal Income (Combine Line 1 to Line 11) | | | | - 4 | 1106 | | 0 |
| | Allocable Share of Deductions | | Federal 1 | Colum r 065, Sched | ı A ule K-1 Amo | unt Po | | umn B ved from Sources in DE |
| 13. C | haritable Contributions | | | | | 41 | | |
| 14. S | ection 179 Expense Deductions | | | | | | | |
| 15. E | xpenses from Portfolio Income | | | | | | | |
| 16. 0 | ther Deduction/Credits (Attach Schedule) | | | | | | | |

| | 1 | N65 | | U.S. F | Return of Partn | ership | o Inco | ome | | | OMB No. 1545-0123 |
|-------------------------------|------------------|---|---------------|---|---|-----------------|--------------|----------------|-----------------|---------------|---|
| Forr | m partment of | the Treasury | For calendar | year 2016, or tax year | beginning | , | , ending | | , | | 2016 |
| | | ue Service | EXTEN | NSION GRA | NTED TO 09/15 | / 1 / | | | | | |
| •• | | ousiness activity | | Name of partnership | | | | | | | D Employer identification number |
| | RANCI | URANT | | CIIMMED U | TOUT ANDS DANCE | u тт <i>с</i> | , | | | | 26-3047014 |
| | | oroduct or service | Туре | Number street and | IGHLANDS RANCI room or suite no. If a P.O. box, see | the instruction | <u>,</u> | | | | E Date business started |
| В | · moipai p | 700000000000000000000000000000000000000 | | | BRIARWOOD AVE | | | | | | 10/13/2008 |
| FC | ו/ מסכ | BEVERAGE | | | province, country, and ZIP or foreign | | | | | | F Total assets |
| | | code number | | | | | | | | | |
| 72 | 2251 | 3 | | LITTLETO | N | | | CO 80 | 122 | | \$ 1,801,732. |
| | | applicable boxes: | (1) | | | Nan | ne change | | | nange (| 5) Amended return |
| | | | ` ' — | _ | ation - also check (1) or (2) | | J | (, | | , | · , — |
| Н | Check a | accounting metho | ` ' — | | | Oth | er (specify) | > | | | |
| ı | Number | r of Schedules K- | -1. Attach o | one for each person | who was a partner at any time | | ax year | — | 2 | | |
| J | Check it | f Schedules C an | d M-3 are a | ttached | | | | | | | |
| | ution /c | aduda anl u trad | do or buoir | acco income and | expenses on lines 1a throug | ah 22 halai | u Soo the | o inatruatio | no for mor | o infor | mation |
| <u></u> | | iciude only trac | de or busii | less income and e | expenses on lines ra unoug | gii 22 belol | w. see in | | | | таноп. |
| | 1 | Gross receipts or | | | | | 1a | 3,122 | 2,638. | | |
| | | | | | | | | | | | 2 100 620 |
| | | | | | | | | | | 1c | 3,122,638. |
| e | 2 (| Cost of goods so | ld (attach Fo | orm 1125-A) | | | | | | 2 | 909,023. |
| Income | | | | | | | | | | 3 | 2,213,615. |
| <u>=</u> | | | | | estates, and trusts (attach sta | | | | | 4 | |
| | | | | Schedule F (Form 1 | | | | | | 6 | |
| | | | | | attach Form 4797) | | | | | 7 | |
| | | Other income (los | , , | , | | | | | | 8 | 2,213,615. |
| _ | | | | | employment credits) | | | | | 9 | 1,054,627. |
| JS) | | | | | | | | | | 10 | 1,031,0270 |
| atio | | | | | | | | | | 11 | 36,903. |
| miţ | | | | | | | | | | 12 | |
| or ii | | | | | | | | | | 13 | 337,830. |
| instructions for limitations) | 14 7 | Taxes and license | es | | | SEE S | STATE | MENT 1 | _ | 14 | 143,085. |
| ξį | | | | | | | | | | 15 | 31,239. |
| ţŗ | 16 a [| Depreciation (if re | equired, atta | ach Form 4562) | | | 16a | 110 | 0,063. | | |
| | | | | | elsewhere on return | | 16b | | | 16c | 110,063. |
| the the | 17 [| Depletion (Do no | t deduct oil | and gas depletion. |) | | | | | 17 | |
| see | 18 F | Retirement plans, | , etc | | | | | | | 18 | |
| us (| 19 E | Employee benefit | programs | | | | | | | 19 | 43,450. |
| Deductions (see the | 20 (| Other deductions | (attach stat | tement) | | SEE S | STATE | MENT 2 | 2 | 20 | 483,790. |
| Ded | | | ` | , | | | | | | | |
| _ | | | | | ne far right column for lines 9 to | | | | | 21 | 2,240,987. |
| _ | 22 (| | | loss). Subtract line I declare that I have exa | 21 from line 8mined this return, including accomper than general partner or limited lia | | | ements, and to | o the best of n | 22 ny know | |
| ei. | ın | correct, and c knowledge. | omplete. Decl | laration of preparer (other | er than general partner or limited lia | bility company | member ma | nager) is base | d on all inform | | which preparer has any eller than the IRS discuss this return |
| Sig | | | | | | | | | | • | preparer shown below |
| | | Signature | of general pa | rtner or limited liability | company member manager | | — P r | Date | | (see ins | tr.)? X Yes No |
| _ | | Print/Type prepa | arer's name | | Preparer's signature | | Date | | Check | if | PTIN |
| | | Time Type prepa | 51 5 1141110 | | opai oi o oignaturo | | Date | | self-employ | | , |
| Pai | id | JAMES E | BARRE1 | ГT | JAMES BARRET | Г | 04 | /06/17 | | | P00382590 |
| Pre | eparer | Firm's name | > | | | | | • | • | | |
| Us | e Only | | | | ICKA, P.C. | | | | Firm's EIN | ≥ 04 | -2713795 |
| | | | | | AVE, SUITE 80 | 0 | | | | | |
| | | HOLYOF | KE, MA | A 01040 | | | | | Phone no. | 413 | -536-8510 |

LHA For Paperwork Reduction Act Notice, see separate instructions.

Form **1065** (2016)

| Sc | hedule B Other Information | | | | | |
|--------|---|--------------------------------|-----------------------------------|--|----------------------|---------|
| 1 | What type of entity is filing this return? Check the ap | pplicable box: | | | Yes | No |
| a | Domestic general partnership b Domestic | omestic limited partnershi | p | | | |
| C | X Domestic limited liability company d Do | omestic limited liability pa | rtnership | | | |
| е | | her > | | | | |
| 2 | At any time during the tax year, was any partner in the \ensuremath{t} | ie partnership a disregard | ed entity, a partnership (i | ncluding an entity treated as a | | |
| | partnership), a trust, an S corporation, an estate (oth | er than an estate of a dec | eased partner), or a nom | inee or similar person? | | X |
| 3 | At the end of the tax year: | | | | | |
| а | Did any foreign or domestic corporation, partnership | , | | | | |
| | any foreign government own, directly or indirectly, a | | | | | 7.7 |
| | constructive ownership, see instructions. If "Yes," att | | | | | Х |
| D | Did any individual or estate own, directly or indirectly | | | | x | |
| 4 | constructive ownership, see instructions. If "Yes," att At the end of the tax year, did the partnership: | acii Schedule B-1, illionii | auon on Parmers Owning | 3 50% of More of the Partnership | · A | |
| 7 2 | Own directly 20% or more, or own, directly or indire | ctly 50% or more of the t | otal voting nower of all cl | asses of stock entitled to vote of any foreign | | |
| u | or domestic corporation? For rules of constructive o | | | | | х |
| | (i) Name of Corporation | Wildiamp, acc mediaedicin | (ii) Employer | (iii) Country of | (iv) Perce | ntage |
| | (1) | | Identification Number (if any) | Incorporation | Owned Voting St | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| b | Own directly an interest of 20% or more, or own, dir | | | | | |
| | domestic partnership (including an entity treated as | a partnership) or in the be | eneficial interest of a trust | ? For rules of constructive ownership, see | | X |
| | instructions. If "Yes," complete (i) through (v) below | (ii) Employer | (!!!) Type of Entity | (in) Country of | (v) _{Maxim} | |
| | (i) Name of Entity | Identification Number (if any) | (iii) Type of Entity | | Percentage Ov | wned in |
| | | (ii diriy) | | Organization | Profit, Loss, or | Сарна |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | Yes | No |
| 5 | Did the partnership file Form 8893, Election of Partn | · | | | | |
| | section 6231(a)(1)(B)(ii) for partnership-level tax tre | , | • | | | 77 |
| | for more details | | | | - | X |
| Ď. | Does the partnership satisfy all four of the following | | | | | |
| a b | The partnership's total receipts for the tax year were The partnership's total assets at the end of the tax year | | ion | | | |
| C | Schedules K-1 are filed with the return and furnished | | | ng extensions) for the partnership | | |
| v | return. | pararoro on or bor | aso dato (moidum | .g | | |
| d | The partnership is not filing and is not required to fil | e Schedule M-3 | | | | Х |
| | If "Yes," the partnership is not required to complete S | | | | | |
| | or Item L on Schedule K-1. | | | | | |
| 7 | Is this partnership a publicly traded partnership as d | | | | | X |
| 8 | During the tax year, did the partnership have any del | ot that was cancelled, was | forgiven, or had the term | ns modified so as to reduce the | | |
| | | | | | | X |
| 9 | Has this partnership filed, or is it required to file, For | | | | | 177 |
| | reportable transaction? | | | | | X |
| 10 | At any time during calendar year 2016, did the partn | • | | | | |
| | foreign country (such as a bank account, securities | | • | - | | |
| | requirements for FinCEN Form 114, Report of Foreig | ii balik aliu Filialiciai Acci | ounto (1 DAN). II 165, 611 | ter the name of the foreign country. | | х |
| | | | | | | |

Form **1065** (2016)

Form **1065** (2016)

| Sc | hedule B Other Information (continued) | | |
|--------|--|-----|----|
| | | Yes | No |
| 11 | At any time during the tax year, did the partnership receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes," | | |
| | the partnership may have to file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts. | | |
| | See instructions | | Х |
| 12a | Is the partnership making, or had it previously made (and not revoked), a section 754 election? | | Х |
| | See instructions for details regarding a section 754 election. | | |
| b | Did the partnership make for this tax year an optional basis adjustment under section 743(b) or 734(b)? If "Yes," attach a statement showing | | |
| | the computation and allocation of the basis adjustment. See instructions | | Х |
| C | Is the partnership required to adjust the basis of partnership assets under section 743(b) or 734(b) because of a substantial built-in loss (as defined | | |
| | under section 743(d)) or substantial basis reduction (as defined under section 734(d))? If "Yes," attach a statement showing the computation and | | |
| | allocation of the basis adjustment. See instructions | | Х |
| 13 | Check this box if, during the current or prior tax year, the partnership distributed any property received in a like-kind exchange or contributed such | | |
| | property to another entity (other than disregarded entities wholly owned by the partnership throughout the tax year) | | |
| 14 | At any time during the tax year, did the partnership distribute to any partner a tenancy-in-common or other undivided interest in partnership | | |
| | property? | | Х |
| 15 | If the partnership is required to file Form 8858, Information Return of U.S. Persons With Respect To Foreign Disregarded Entities, enter the | | |
| | number of Forms 8858 attached. See instructions 🕨 | | |
| 16 | Does the partnership have any foreign partners? If "Yes," enter the number of Forms 8805, Foreign Partner's Information Statement of | | |
| | Section 1446 Withholding Tax, filed for this partnership. | | X |
| 17 | Enter the number of Forms 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships, attached to this return. | | |
| 18a | Did you make any payments in 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)? | | Х |
| Desi | gnation of Tax Matters Partner (see instructions) | | |
| Enter | below the general partner or member-manager designated as the tax matters partner (TMP) for the tax year of this return: | | |
| Name | of Identifying | | |
| | nated TMP ► JAMISON CUTTER number of TMP ► 542-90-6 | 514 | |
| | TMP is an , name of TMP Phone | | |
| repres | sentative number of TMP | | |
| Addre | 731 MUELLER DRIVE | | |
| desig | nated TMP LITTLETON, CO 80129 | | |

611021 01-05-17

| Scl | hed | ule K Partners' Distributive Share Items | | | | Total amount |
|---|------|--|-------------------|------------|--------|--------------|
| | 1 | Ordinary business income (loss) (page 1, line 22) | | | 1 | -27,372. |
| | 2 | Net rental real estate income (loss) (attach Form 8825) | | | 2 | |
| | 3 8 | a Other gross rental income (loss) | | | | |
| | l t | Expenses from other rental activities (attach statement) | 3b | | | |
| | | Other net rental income (loss). Subtract line 3b from line 3a | | | 3c | |
| | 4 | Guaranteed payments | | | 4 | |
| ncome (Loss) | 5 | Interest income | | | 5 | |
| Ţ | 6 | Dividends: a Ordinary dividends | | | 6a | |
| Ψ | ` | b Qualified dividends | | | | |
| S | 7 | Royalties | | | 7 | |
| _ | 8 | Net short-term capital gain (loss) (attach Schedule D (Form 1065)) | | | 8 | |
| | l | a Net long-term capital gain (loss) (attach Schedule D (Form 1065)) | | | 9a | |
| | | o Collectibles (28%) gain (loss) | | | | |
| | ; | unrecaptured section 1250 gain (attach statement) | 9c | | 1 | |
| | 10 | Net section 1231 gain (loss) (attach Form 4797) | | | 10 | |
| | 11 | Other income (loss) (ass instructions) Type | | | 11 | |
| | | | | | 12 | |
| us | | Section 179 deduction (attach Form 4562) a Contributions | СЕЕ СПАПЕМЕМ | ш З | - | 275. |
| Deductions | 1 | | | | 13a | 2/3• |
| 윩 | | o Investment interest expense | | | 13b | |
| Ď | 1 | | | (2) Amount | 13c(2) | |
| | | | | | 13d | 27 272 |
| Self- Employ- ment | 14 8 | a Net earnings (loss) from self-employment | | | 14a | -27,372. |
| ent- | ' | Gross farming or fishing income | | | 14b | 2 212 615 |
| <u> ўш Е</u> | | Gross nonfarm income | | | 14c | 2,213,615. |
| | 15 8 | a Low-income housing credit (section 42(j)(5)) | | | 15a | |
| Ŋ | ' | b Low-income housing credit (other) | 15b | | | |
| Credits | | c Qualified rehabilitation expenditures (rental real estate) (attach Form 3468 | 3, if applicable) | | 15c | |
| ວັ | 1 | 1 Other rental real estate credits (see instructions) Type | | | 15d | |
| | 1 | e Other rental credits (see instructions) Type | | | 15e | |
| | _ | Other credits (see instructions) Type | | | 15f | |
| | | a Name of country or U.S. possession ▶ | | | | |
| | t | o Gross income from all sources | | | 16b | |
| SI | ' | Gross income sourced at partner level | | | 16c | |
| ţio | | Foreign gross income sourced at partnership level | | | | |
| gac | (| d Passive category ► e General category ► | f 01 | ther ► | 16f | |
| ansactions | | Deductions allocated and apportioned at partner level | | | | |
| _ | (| | | | 16h | |
| Foreign T | | Deductions allocated and apportioned at partnership level to foreign sour | | | | |
| Ö | i | Passive category j General category | k 0 | ther ► | 16k | |
| ш | 1 | | | | 161 | |
| | | | | | 16m | |
| | | Other foreign tax information (attach statement) | | | | 10 252 |
| | 17 a | a Post-1986 depreciation adjustment | | | 17a | -17,350. |
| Alternative Minimum Tax (AMT) Items | t | o Adjusted gain or loss | | | 17b | |
| 를 를 를 | (| Depletion (other than oil and gas) | | | 17c | |
| E E E | (| d Oil, gas, and geothermal properties - gross income | | | 17d | |
| ₹ | | e Oil, gas, and geothermal properties - deductions | | | 17e | |
| ~~ | | Other AMT items (attach statement) | | | 17f | |
| | | a Tax-exempt interest income | | | 18a | |
| o L | | o Other tax-exempt income | | | 18b | |
| Other Information | 0 | Nondeductible expenses | | | 18c | |
| orn | | a Distributions of cash and marketable securities | | | 19a | |
| <u>=</u> | | Distributions of other property | | | 19b | |
| her | | a Investment income | | | 20a | |
| ₹ | | nvestment expenses | | | 20b | |
| | | Other items and amounts (attach statement) | | | | |

Analysis of Net Income (Loss)

| AII | nalysis of Net Income (Loss) | | | | | | | | | |
|------|---|---------------|-----------------|------------------|-------------------|------------------|-------|---------------|--|--|
| 1 Ne | 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 | | | | | | | -27,647. | | |
| 2 | Analysis by | (i) Corporate | (ii) Individual | (iii) Individual | (iv) Partnership | (v) Exe | | (vi) | | |
| | partner type: | (i) Corporate | (active) | (passive) | (IV) Partifership | Organiz | ation | Nominee/Other | | |
| а | General partners | | | | | | | | | |
| b | Limited partners | | -27,647. | | | | | | | |

| 2 Emilion partition | , , , | | | |
|--|----------------------------|---|------------------------------|------------|
| Schedule L Balance Sheets per I | Books | | | |
| • | Beginning | of tax year | End of t | ax vear |
| Assets | (a) | (b) | (c) | (4) |
| 1 Cach | (α) | 57,402. | (0) | 31,715. |
| 1 Cash | 29,936. | 37,402. | 32,862. | 31,713. |
| 2a Trade notes and accounts receivable | 49,930. | 29,936. | 32,002. | 22 062 |
| b Less allowance for bad debts | | | | 32,862. |
| 3 Inventories | | 24,313. | | 26,278. |
| 4 U.S. government obligations | | | | |
| 5 Tax-exempt securities | | | | |
| | STATEMENT 4 | 1,065,851. | | 1,086,064. |
| 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 | 2,012,765. | | 2,012,764. | |
| b Less accumulated depreciation | 1,401,183. | 611,582. | 1,511,246. | 501,518. |
| 10a Depletable assets | | | | |
| b Less accumulated depletion | | | | |
| 11 Land (net of any amortization) | | | | |
| 12a Intangible assets (amortizable only) | 244,463. | | 244,732. | |
| b Less accumulated amortization | 105,034. | 139,429. | 121,437. | 123,295. |
| 13 Other assets (attach statement) | 103,034. | 135,425 | 121, 137 • | 123,233 |
| | | 1,928,513. | | 1,801,732. |
| 14 Total assets | | 1,720,313. | | 1,001,732. |
| Liabilities and Capital | | 01 402 | | 124 026 |
| 15 Accounts payable | | 81,482. | | 134,026. |
| Mortgages, notes, bonds payable in less than 1 year | (mampagam F | 241 440 | | 020 011 |
| ` / ··· | STATEMENT 5 | 341,449. | | 239,811. |
| 18 All nonrecourse loans | | | | |
| 19a Loans from partners (or persons related to partners) | | | | |
| b Mortgages, notes, bonds payable in 1 year or more | | 367,524. | | 264,500. |
| 20 Other liabilities (attach statement) | STATEMENT 6 | 1,986,719. | | 2,017,844. |
| 21 Partners' capital accounts | | -848,661. | | -854,449. |
| 22 Total liabilities and capital | | 1,928,513. | | 1,801,732. |
| Schedule M-1 Reconciliation of I | ncome (Loss) per B | Books With Income (| Loss) per Return | |
| Note. The partnership m | ay be required to file Sch | edule M-3 (see instruction | s). | |
| 1 Net income (loss) per books | _ 29,28 | 8 • 6 Income recorded on | books this year not included | |
| 2 Income included on Schedule K, lines 1, 2, 3c, | | on Schedule K, lines | 1 through 11 (itemize): | |
| 5, 6a, 7, 8, 9a, 10, and 11, not recorded on book | s | a Tax-exempt interest | \$ | |
| this year (itemize): | | | | |
| 3 Guaranteed payments (other than health | | 7 Deductions included | on Schedule K, lines 1 | |
| insurance) | | | l, not charged against | |
| 4 Expenses recorded on books this year not included on | | book income this yea | · | |
| Schedule K, lines 1 through 13d, and 16l (itemize): | | a Depreciation \$ | , , | |
| STMT 7 1,641 | - | | | |
| a Depreciation \$ | - | 8 Add lines 6 and 7 | | |
| b Travel and entertainment \$ | 1,64 | _ | rsis of Net Income (Loss), | |
| F A 1112 4 11 1 4 | 27 64 | | 8 from line 5 | -27,647. |
| Schedule M-2 Analysis of Partne | | | 0 ir 0iii iiii0 0 | 21,0416 |
| 1 Balance at beginning of year | | | h | |
| 2 Capital contributed: a Cash | · | | | |
| | · <u> </u> | | perty | |
| b Property | | Q / Other decreases (iter | mize): | |
| 3 Net income (loss) per books | - 49, 48 | | | |
| 4 Other increases (itemize): | OF A AA | 8 Add lines 6 and 7 | | 054 440 |
| 5 Add lines 1 through 4 | -854,44 | 9 Balance at end of year. | Subtract line 8 from line 5 | -854,449. |

Form 1125-A

(Rev. October 2016)

Department of the Treasury Internal Revenue Service

Cost of Goods Sold

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

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

OMB No. 1545-0123

| Name | | | | | | | |
|---|---|------|------------|--|--|--|--|
| CUTTER HIGHLA | ANDS RANCH, LLC | | 26-3047014 | | | | |
| 1 Inventory at beginning of year | | . 1 | 24,313. | | | | |
| • • • | | | 910,858. | | | | |
| 3 Cost of labor | | . 3 | | | | | |
| 4 Additional section 263A costs (a | (attach schedule) | . 4 | | | | | |
| 5 Other costs (attach schedule) | SEE STATEMENT 8 | . 5 | 130. | | | | |
| 6 Total. Add lines 1 through 5 | | . 6 | 935,301. | | | | |
| | | | 26,278. | | | | |
| 8 Cost of goods sold. Subtract li | line 7 from line 6. Enter here and on Form 1120, page 1, line 2 or the urn. See instructions | | 909,023. | | | | |
| , , | arket hod used and attach explanation) of subnormal goods | | ▶ | | | | |
| | thod was adopted this tax year for any goods (if checked, attach Form 970) | | | | | | |
| d If the LIFO inventory method was under LIFO e If property is produced or acqui | vas used for this tax year, enter amount of closing inventory computed uired for resale, do the rules of Section 263A apply to the entity? See instructions | . 9d | Yes X No | | | | |
| f Was there any change in determ If "Yes," attach explanation. For Paperwork Reduction Act Notic | mining quantities, cost, or valuations between opening and closing inventory? | | Yes X No | | | | |
| | aperwork neduction Act Notice, see separate instructions. | | | | | | |

624441 11-21-16 JWA

SCHEDULE B-1 (Form 1065)

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

Information on Partners Owning 50% or More of the Partnership

► Attach to Form 1065. See instructions.

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

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

OMB No. 1545-0099

Name of partnership

Part I

Employer identification number

| CUTTER HIGHLA | NDS RANCH, | $\Gamma\Gamma$ |
|---------------|------------|----------------|
|---------------|------------|----------------|

26-3047014

| tax-exempt organization, or any foreign government t partnership (see instructions). | hat owns, directly or indirectly | y, an interest of 50% o | or more in the profit, loss, o | or capital of the |
|--|--|-------------------------|---------------------------------|---|
| (i) Name of Entity | (ii) Employer Identification Number (if any) | (iii) Type of Entity | (iv) Country of Organization | (v) Maximum Percentage Owned in Profit, Loss, or Capital |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

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

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

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

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

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

| FORM 1065 | TAX | EXPENSE | STATEMENT 1 | |
|----------------------------|-------|------------|-------------|--|
| DESCRIPTION | | AMOUNT | | |
| TAXES - PAYROLL | | | 89,003. | |
| TAXES - OTHER | | | 48,677. | |
| TAXES - SALES | | | 5,405. | |
| TOTAL TO FORM 1065, LINE 1 | 4 | | 143,085 | |
| FORM 1065 | OTHER | DEDUCTIONS | STATEMENT 2 | |
| | | | | |
| DESCRIPTION | | | AMOUNT | |
| ACCOUNTING | | | 17,588. | |
| ADVERTISING | | | 32,095. | |
| ALLOCATED G&A | | | 16,411. | |
| AMORTIZATION EXPENSE | | | 16,404. | |
| AUTOMOBILE | | | 8,458. | |
| BANK & CREDIT CARD FEES | | | 58,759. | |
| BUILDING INSURANCE | | | 25,658. | |
| CASH SHORT & OVER | | | -52. | |
| COMPUTER SUPPLIES | | | 903. | |
| CONTRACT MAINTENANCE | | | 10,863. | |
| DUES AND SUBSCRIPTIONS | | | 2,817. | |
| EQUIPMENT RENTAL | | | 2,409. | |
| INSURANCE - AUTO | | | 3,957. | |
| INSURANCE - LIABILITY | | | 21,257. | |
| INSURANCE - WORKERS COMP | | | 8,410. | |
| JANITORIAL & CLEANING | | | 18,303. | |
| LINEN | | | 6,914. | |
| MENUS | | | 341. | |
| MUSIC | | | 360. | |
| OFFICE SUPPLIES | | | 4,376. | |
| OPERATING SUPPLIES | | | 22,748. | |
| PARKING | | | 30. | |
| PEST CONTROL | | | 1,747. | |
| POSTAGE/FREIGHT/COURIER | | | 2,333. | |
| ROYALTY | | | 132,904. | |
| SECURITY SERVICES | | | 345. | |
| SMALLWARES | | | 4,007. | |
| TEAM MEETINGS | | | 314. | |
| TELEPHONE | | | 14,192. | |
| UNIFORMS & LAUNDRY | | | 4,431. | |
| UTILITIES | | | 44,508. | |
| TOTAL TO FORM 1065, LINE 2 | 0 | | 483,790. | |

| SCHEDULE K | CHARITABLE CON | ARITABLE CONTRIBUTIONS | | STATEMENT | 3 |
|--|-----------------|------------------------|---|--------------------------|------------|
| DESCRIPTION | | | TYPE | AMOUNT | |
| DONATIONS | | CASH (50 | 용) | 2' | 75. |
| TOTALS TO SCHEDULE K, LINE | E 13A | | | 2' | 75. |
| SCHEDULE L | OTHER CURRENT | T ASSETS | | STATEMENT | 4 |
| DESCRIPTION | | | BEGINNING OF TAX YEAR | END OF TAX | X |
| A/R - EMPLOYEES DUE FROM AFFILIATE PREPAID EXPENSES | | _ | 423. 1,048,776. 16,652. | 1,085,6 | 10. 54. |
| TOTAL TO SCHEDULE L, LINE | 6 | = | 1,065,851. | 1,086,0 | 64. |
| SCHEDULE L | OTHER CURRENT I | LIABILITIE | 'S | STATEMENT | 5 |
| DESCRIPTION | | | BEGINNING OF TAX YEAR | END OF TAX | X |
| ACCRUED PAYROLL ACCRUED EXPENSES PAYROLL TAXES PAYABLE SALES TAX PAYABLE GIFT CERTIFICATES PAYABLE RENOVATIONS CREDIT PERSONAL PROPERTY TAXES PA | AYABLE | | 28,364. 18,324. 14,824. 16,476. 27,367. 227,791. 8,303. | 14,6; 22,6; 202,5; | 72. |
| TOTAL TO SCHEDULE L, LINE | 17 | _ | 341,449. | 239,83 | 11. |

| SCHEDULE L | OTHER LIABILITIES | | STATEMENT | 6 |
|---|-----------------------|--------------------------|-----------|------------|
| DESCRIPTION | | BEGINNING OF TAX YEAR | END OF TA | X |
| DUE TO AFFILIATE | | 1,986,719. | 2,017,8 | 44. |
| TOTAL TO SCHEDULE L, LINE 2 | 0 | 1,986,719. | 2,017,8 | 44. |
| | | | | |
| SCHEDULE M-1 EXPENSES RECO | RDED ON BOOKS NOT DED | UCTED IN RETURN | STATEMENT | 7 |
| DESCRIPTION | | | TRUOMA | |
| LIFE INSURANCE FINES, VIOLATIONS & PENALTY | | | 1,4 | 63. 78. |
| TOTAL TO SCHEDULE M-1, LINE | 4 | | 1,6 | 41. |
| FORM 1125-A | OTHER COSTS | | STATEMENT | 8 |
| DESCRIPTION | | | AMOUNT | |
| COS - OTHER | | | 1 | 30. |
| TOTAL TO LINE 5 | | | 1 | 30. |

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

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

Employer Identification Number: 26-3047014

For the Year Ending December 31, 2016

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