U.S. Income Tax Return for an S Corporation

Do not file this form unless the corporation has filed or is attaching Form 2553 to elect to be an S corporation.

▶ Information about Form 1120S and its separate instructions is at www.irs.gov/form1120s.

OMB No. 1545-0123 2014

Department of the Treasury Internal Revenue Service

A Settlement activity cure of Soft 16 / 0.8 Description activity				ear 2014 or	tax year beg	ginning	, ending					
Total process and provides manner (see historical process) Total process (see instructions) Total process (see ins	Α										D En	nployer identification number
PRINT PRI	В				TYPE	FIRESTOR	M CAFE,	LLC			2	6-2625465
Total Income (loss) Add lines 3 through 5 Total Income (loss). Add lines 3 through 5 Total Income 6 Total Income		numb	er (see in	nstructions)	OR	Number, street, and r	oom or suite no. If a l	P.O. box, see instruction	ons.			
Signature Sate Sat		72	251 3	3	•••						0	5/16/2008
Second collecting to be an S corporation beginning with this tax year? Yes X No If Yes, *statch Form 2553 if not already filled in Check if: (1) Final return (2) Name change (3) X Address change (4) Amended return (5) Selection termination or revocation Enter the number of shareholders who were shareholders during any part of the tax year X Address change (4) Amended return (5) Selection termination or revocation Enter the number of shareholders who were shareholders during any part of the tax year X Amended return (5) Selection termination or revocation X Amended return (5) Selection termination X Amended return (5) Selection X Amended ret	С	Checl	k if Sch. N	M-3	PRINT						F To	otal assets (see instructions)
Gestifue Concertation electring to be an S corporation beginning with this tax year?		attach	ned			ASHEVILL	ıΕ	NC 2	8806			
H. Check	_				<u> </u>				leel		т.	
Enter the number of shareholders who were shareholders during any part of the tax year Castion. Include only trade of tousiness income and expenses on lines 1a through 21. See the instructions for more information. Tax Gross receipts or sales				_								•
Tax Gross receipts or sales Tax T	Н									d return (5)	S election	
1a 37,093 1b 1c 37,093 1c	<u>_</u>										<u> </u>	
B Returns and allowances 1b	Ca											on. T
Section Sec		_							37,09.	2		
Cost of goods sold (attach Form 1125-A) 2 2 2 1,78 3 15,915 3 3 15,915 3 3 15,915 3 3 15,915 3 3 15,915 3 3 15,915 3 3 15,915 3 3 3 15,915 3 3 3 3 3 3 3 3 3						. P 4 .						27 002
Total income (loss) (see instructions—attach statement) SEE STMT 1 5 1.36	ne	_										21 170
Total income (loss) (see instructions—attach statement) SEE STMT 1 5 1.36	Ö		Crass	or goods son	u (allach Fo	analina 1a					2	
Total income (loss) (see instructions—attach statement) SEE STMT 1 5 1.36	<u>=</u>	_					707					13,913
6 Total income (loss). Add lines 3 through 5			Other	ain (ioss) iro	ni Form 478	ar, line ir (attach i	-01111 4797)		C T T	стит 1		126
7		_	Tatal	income (los	s) (see msu	a 2 through 5	atement)		SEE	DIMI I		
8 Salaries and wages (less employment credits) 9 Repairs and maintenance 9 9 3332 10 Bad debts 11 Rents 12 Rents 13 Repose 14 Depreciation not claimed on Form 1125-A or elsewhere on return (attach Form 4562) 15 Depletion (Do not deduct oil and gas depletion.) 16 Advertising 17 Pension, profit-sharing, etc., plans 18 Employee benefit programs 19 Other deductions (attach statement) 19 Other deductions (attach statement) 19 Other deductions, Add lines 7 through 19 21 Total deductions. Add lines 7 through 19 22 Excess net passive income (loss). Subtract line 20 from line 6 21 71.7 22a Excess net passive income of LIFO recapture tax (see instructions) 22b	_											
21 Ordinary business income (loss). Subtract line 20 from line 6	ns)	_			,		,					
21 Ordinary business income (loss). Subtract line 20 from line 6	imitation	_										
21 Ordinary business income (loss). Subtract line 20 from line 6		_										332
21 Ordinary business income (loss). Subtract line 20 from line 6	for											4 846
21 Ordinary business income (loss). Subtract line 20 from line 6	ons											
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21 Ordinary business income (loss). Subtract line 20 from line 6	Š											426
21 Ordinary business income (loss). Subtract line 20 from line 6	<u>o</u>			•								
21 Ordinary business income (loss). Subtract line 20 from line 6	귤		Emplo	vee benefit	programs							
21 Ordinary business income (loss). Subtract line 20 from line 6	g					ement)			SEE	STMT 2		4,894
21 Ordinary business income (loss). Subtract line 20 from line 6	Ö	20	Total	deductions	. Add lines 7	7 through 19				•		
22a Excess net passive income or LIFO recapture tax (see instructions) b Tax from Schedule D (Form 1120S) c Add lines 22a and 22b (see instructions for additional taxes) 23a 2014 estimated tax payments and 2013 overpayment credited to 2014 b Tax deposited with Form 7004 c Credit for federal tax paid on fuels (attach Form 4136) d Add lines 23a through 23c 24 Estimated tax penalty (see instructions). Check if Form 2220 is attached 25 Amount owed. If line 23d is smaller than the total of lines 22c and 24, enter amount owed 26 Overpayment. If line 23d is larger than the total of lines 22c and 24, enter amount overpaid 27 Enter amount from line 26 Credited to 2015 estimated tax ▶ Refunded ▶ 28 Sign Here Print/Type preparer's name Preparer's signature of officer CHAD T. STORCK, CPA Print/Type preparer's name STORCK CPA, P.C. Firm's address ▶ PO BOX 1373			Ordina	ary busines	s income (loss). Subtract line	20 from line 6					
b Tax from Schedule D (Form 1120S) c Add lines 22a and 22b (see instructions for additional taxes) 23a 2014 estimated tax payments and 2013 overpayment credited to 2014 b Tax deposited with Form 7004 c Credit for federal tax paid on fuels (attach Form 4136) d Add lines 23a through 23c 24 Estimated tax penalty (see instructions). Check if Form 2220 is attached 25 Amount owed. If line 23d is larger than the total of lines 22c and 24, enter amount owed 26 Overpayment. If line 23d is larger than the total of lines 22c and 24, enter amount overpaid 27 Enter amount from line 26 Credited to 2015 estimated tax Under penalties of perjuy, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Print/Type preparer's name Preparer's signature CHAD T. STORCK, CPA Preparer Firm's name STORCK CPA, P.C. Firm's address PO BOX 1373		22a										
c Add lines 22a and 22b (see instructions for additional taxes) 23a 2014 estimated tax payments and 2013 overpayment credited to 2014 b Tax deposited with Form 7004 c Credit for federal tax paid on fuels (attach Form 4136) d Add lines 23a through 23c 24 Estimated tax penalty (see instructions). Check if Form 2220 is attached 25 Amount owed. If line 23d is smaller than the total of lines 22c and 24, enter amount ower 26 Overpayment. If line 23d is larger than the total of lines 22c and 24, enter amount overpaid 27 Enter amount from line 26 Credited to 2015 estimated tax Print/Type preparer's name Print/Type preparer's name Print/Type preparer's name Preparer's signature Date Date Oda/21/15 self-employed PO0955658 Preparer Use Only Firm's address PO BOX 1373		b	Tax fro	om Schedule	D (Form 1	120S)			22b			
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Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) May the IRS discuss this return with the preparer shown below (see instructions)?				-		•		l 24, enter amour	nt overpaid	Defended N		
Sign Here Signature of officer LIBERTIE VALANCE Date Da		21						nnanving schedules ar	nd statements			
Here Signature of officer LIBERTIE VALANCE Date Print/Type preparer's name CHAD T. STORCK, CPA Preparer Firm's name ▶ STORCK CPA, P.C. Firm's address ▶ PO BOX 1373 DIRECTOR Title Oate Oate Oate Oate Oate Oate Oate Oate	Q:	an	and to t	the best of my kr	nowledge and be	elief, it is true, correct, ar	nd complete. Declarat					
Signature of officer LIBERTIE VALANCE Print/Type preparer's name Preparer's signature Preparer's signature Preparer's signature Date O3/21/15 self-employed P00955658 Preparer Use Only Firm's address ▶ PO BOX 1373	H	ere	is base	u on an miornau	ion or which pre	parer has any knowledge	5.		1	<u> </u>		
Paid Print/Type preparer's name Preparer's signature Date 03/21/15 Check if PTIN 90955658 PTIN 90955658 Preparer Use Only Firm's name Preparer Prim's eddress Proparer Preparer Prim's eddress PROPERTY Preparer's signature Preparer	•••	0.0	_	ignature of office	. I.TB	ERTTE VALAN	CE		Doto	_ /	30101	
Paid CHAD T. STORCK, CPA 03/21/15 self-employed P00955658 Preparer Use Only Firm's name STORCK CPA, P.C. Firm's EIN ► 26-4129801			3		•			ire	Date		Check	if PTIN
Preparer Use Only Firm's name STORCK CPA, P.C. Firm's EIN 26-4129801 Firm's address PO BOX 1373	Pa	id				K, CPA						□
Use Only Firm's address ▶ PO BOX 1373			rer				P.C.					
ASHEVILLE, NC 28802-1373 Phone no. 828-505-3791	Us	se O	nly	Firm's address								
					ASH	EVILLE, N	C	28802	2-1373	Phone	no. 82	8-505-3791

	Otner Information (see instruc	_						
1	Check accounting method: a Cash b	X Accrual				Yes	No	
	c Other (spec	ify) ▶						
2	See the instructions and enter the:							
	a Business activity ► CAFE & BOOK SALES b Product or service ► FOOD & BOOKS							
3								
	nominee or similar person? If "Yes," attach Schedule	B-1, Information	on Certain Sharehold	ers of an S Corporation			X	
4	At the end of the tax year, did the corporation:							
а	Own directly 20% or more, or own, directly or indirectly	•		= -				
	foreign or domestic corporation? For rules of constru	•		,				
	below						X	
	(i) Name of Corporation	(ii) Employer Identification	(iii) Country of Incorporation		(v) If Percentage in Enter the Date			
	(i) Name of Corporation	Number (if any)	incorporation	Glock Owned	a Qualified Sul	chapter	S	
					Subsidiary Election	n Was IV	/lade	
	0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	d - 1 P - d		r d r r				
b	Own directly an interest of 20% or more, or own, directly and an interest of 20% or more, or own, directly and an interest of 20% or own, directly an interest of 20% or own, directly an interest of 20% or own, directly and an interest of 20% or own, directly and an interest of 20% or own, directly and 20% or own, directly			•	. _			
	capital in any foreign or domestic partnership (includ	-			та		X	
	trust? For rules of constructive ownership, see instru	Ctions. If "Yes," co	ompiete (i) through (v)	below				
	(i) Name of Entity	(ii) Employer	(iii) Tune of Entity	(iv) Country of	(v) Maxim		-	
	(i) Name of Entity	Identification Number (if any)	(iii) Type of Entity	Organization		ed in Pro , or Capit		
		` ','				•		
	At the end of the tax year, did the corporation have a	nv outstanding sh	nares of restricted stor	:k?	l .		Х	
-	If "Yes," complete lines (i) and (ii) below.	ary outstarium g of		Λf				
				>				
	(ii) Total shares of non-restricted stock			••••••				
b	At the end of the tax year, did the corporation have a	nv outstanding st	ock options, warrants.	or similar instruments?			Х	
-	If "Yes," complete lines (i) and (ii) below.	,g						
	(i) Total shares of stock outstanding at the end of the	ne tax year		>				
	(ii) Total shares of stock outstanding if all instrumen	ts were executed		• · · · · · · · · · · · · · · · · · · ·				
6	Has this corporation filed, or is it required to file, For							
	information on any reportable transaction?						X	
7	Check this box if the corporation issued publicly offe	red debt instrume	nts with original issue	discount	▶ □			
	If checked, the corporation may have to file Form 82	281 , Information R	eturn for Publicly Offe	red Original Issue Discount	<u> </u>			
	Instruments.							
8	If the corporation: (a) was a C corporation before it e	lected to be an S	corporation or the co	rporation acquired an				
	asset with a basis determined by reference to the ba	sis of the asset (o	or the basis of any other	er property) in				
	the hands of a C corporation and (b) has net unreali	_						
	from prior years, enter the net unrealized built-in gain	•	•					
	instructions)			\$				
9	Enter the accumulated earnings and profits of the co		nd of the tax year	\$				
10	Does the corporation satisfy both of the following co							
	The corporation's total receipts (see instructions) for					7.7		
b	The corporation's total assets at the end of the tax y					X		
	If "Yes," the corporation is not required to complete \$							
11	During the tax year, did the corporation have any no						v	
	terms modified so as to reduce the principal amount						X	
40	If "Yes," enter the amount of principal reduction	Lateria de etc.		\$			X	
	During the tax year, was a qualified subchapter S su					x	Λ	
	Did the corporation make any payments in 2014 that	•				X		
b	If "Yes," did the corporation file or will it file required	rorms 1099?				Λ		

	Shareholders' Pro Rata Share Items	Tot	al amount
	1 Ordinary business income (loss) (page 1, line 21)	1	717
	2 Net rental real estate income (loss) (attach Form 8825)		
	3a Other gross rental income (loss) 3a		
	b Expenses from other rental activities (attach statement) 3b		
(S	c Other net rental income (loss). Subtract line 3b from line 3a	3c	
Income (Loss)	4 Interest income		2
	5 Dividends:a Ordinary dividends		
Ĕ	b Qualified dividends 5b		
ĕ	6 Royalties	6	
_	7 Net short-term capital gain (loss) (attach Schedule D (Form 1120S))	7	
	8a Net long-term capital gain (loss) (attach Schedule D (Form 1120S))		
	b Collect bles (28%) gain (loss)		
	c Unrecaptured section 1250 gain (attach statement)		
	9 Net section 1231 gain (loss) (attach Form 4797)	9	-887
	10 Other income (loss) (see instructions)	10	
	11 Section 179 deduction (attach Form 4562)		
Deductions	12a Charitable contributions SEE STMT	Г 3 12а	389
čţi	b Investment interest expense	12b	303
n Di			
۵	c Section 59(e)(2) expenditures(1) Type ► (2) Am d Other deductions (see instructions) Type ►	12d	
	13a Low-income housing credit (section 42(j)(5))		
Credits	h Lauringama harraing aradit (athan)	426	
	c Qualified rehabilitation expenditures (rental real estate) (attach Form 3468, if applicable)		
	d Other rental real estate credits (see instructions) Type ▶	13d	
ē	e Other rental credits (see instructions) Type ▶	13e	
	Riofuel producer credit (attach Form 6478)	13f	
	f Biofuel producer credit (attach Form 6478) g Other credits (see instructions)	13g	
	14a Name of country or U.S. possession ▶		
	h Cross income from all sources	4.41-	
	c Gross income sourced at shareholder level		
	Foreign gross income sourced at corporate level		
		14d	
us	d Passive category e General category		
뜷	= :		
Transactions	f Other (attach statement) Deductions allocated and apportioned at shareholder level		
ran		140	
	g Interest expense h Other		
Foreign	Deductions allocated and apportioned at corporate level to foreign source income	14h	
وَّ		14i	
-	i Passive category		
	j General category		
	k Other (attach statement) Other information	14K	
		4.41	
		141	
	m Reduction in taxes available for credit (attach statement)	14m	
	n Other foreign tax information (attach statement)		
Alternative Minimum Tax (AMT) Items	15a Post-1986 depreciation adjustment	15a 15b	
ati ten	b Adjusted gain or loss	150	
arm T)	c Depletion (other than oil and gas)	15c	
A Tite	d Oil, gas, and geothermal proporties – gross income	15u	
	e Oil, gas, and geothermal properties – deductions	15e	
<u>6</u> -	f Other AMT items (attach statement)		
Items Affecting Shareholder Basis	16a Tax-exempt interest income	16a	
\ffe ho sis	b Other tax-exempt income	40-	
s A are Ba	c Nondeductible expenses	16c	
Sh	d Distributions (attach statement if required) (see instructions)		100
=	e Repayment of loans from shareholders	16e	T00

400

298

-5,245

17,826

Form **1120S** (2014)

217

-5,802

16,983

21

22

23

24 25

26

Other liabilities (attach statement) **STMT** 7

Capital stock

Additional paid-in capital

Retained earnings

Less cost of treasury stock

Total liabilities and shareholders' equity .

Adjustments to shareholders' equity (attach statement)

	Reconciliation of Inco	me (Loss) per Boo	ks	With Income (Loss) per Return					
	Note. The corporation may be required to file Schedule M-3 (see instructions)								
1	Net income (loss) per books	-557	5	Income recorded on books this year not included					
2	Income included on Schedule K, lines 1, 2, 3c, 4,			on Schedule K, lines 1 through 10 (itemize):					
	5a, 6, 7, 8a, 9, and 10, not recorded on books this year (itemize)		а	Tax-exempt interest \$					
3	Expenses recorded on books this year not		6	Deductions included on Schedule K, lines					
	included on Schedule K, lines 1 through 12			1 through 12 and 14l, not charged					
	and 14l (itemize):			against book income this year (itemize):					
a b	Depreciation \$ Travel and entertainment \$		а	Depreciation \$					
			7	Add lines 5 and 6	·				
4	Add lines 1 through 3	-557	8	Income (loss) (Schedule K, line 18). Line 4 less line 7	-55	7			
	Analysis of Accumula	ted Adjustments A	100	ount Other Adjustments Account a	nd Shareholders				

Analysis of Accumulated Adjustments Account, Other Adjustments Account, and Shareholders' Undistributed Taxable Income Previously Taxed (see instructions)

				(a) Accumulated adjustments account	(b) Other adjustments account	(c) Shareholders' undistributed taxable income previously taxed
1	Balance at beginning of tax y	year		-5,245		
2	Ordinary income from page	1, line 21		717		
3	Other additions	STMT	8	2		
4	Loss from page 1, line 21			(
5	Other reductions	STMT		1,276	(
6	Combine lines 1 through 5			-5,802		
7	Distributions other than divid	lend distrib	utions			
8	Balance at end of tax year. Subtra	act line 7 fro	m line	-5,802		

Form **1120S** (2014)

Form 1125-A

(Rev. December 2012)
Department of the Treasury
Internal Revenue Service

Cost of Goods Sold

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

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

OMB No. 1545-2225

Employer identification number FIRESTORM CAFE, LLC 26-2625465 14,500 Inventory at beginning of year 1 18,878 Purchases 2 2 3 3 Cost of labor Additional section 263A costs (attach schedule) Other costs (attach schedule) 6 Total. Add lines 1 through 5 6 33,378 7 12,200 Inventory at end of year 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) 21,178 Check all methods used for valuing closing inventory: X Cost (i) (ii) Lower of cost or market Other (Specify method used and attach explanation.) ▶ Check if there was a writedown of subnormal goods Check if the LIFO inventory method was adopted this tax year for any goods (if checked, attach Form 970) С If the LIFO inventory method was used for this tax year, enter the amount of closing inventory computed under LIFO 9d If property is produced or acquired for resale, do the rules of section 263A apply to the entity (see instructions)? Yes 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 instructions.

Form **1125-A** (Rev. 12-2012)

Form **4797**

Sales of Business Property (Also Involuntary Conversions and Recapture Amounts Under Sections 179 and 280F(b)(2))

► Attach to your tax return.

OMB No. 1545-0184 **2014**

Attachment Sequence No. 27

Department of the Treasury
Internal Revenue Service
Name(s) shown on return

► Information about Form 4797 and its separate instructions is at www.irs.gov/form4797.

Identifying number

F	TREST	ORM CAFE,	LLC			26-	-262	5465
1				inges reported to you for 2 in line 2, 10, or 20 (see ins			1	
	Substitute	Sales or Excl	nanges of Pro	perty Used in a Trac	de or Business and	Involuntary (rsions From Other
				ost Property Held N				
2 (1	a) Description of property	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)	(d) Gross sales price	(e) Depreciation allowed or allowable since acquisition	(f) Cost or other basis, plus improvements and expense of sale		(g) Gain or (loss) Subtract (f) from the sum of (d) and (e)
	SINK		ER HEATER 03/08/14	S	268		700	-432
	CONVE		N & STAND		200		, 00	152
	COLVE		03/08/14	500	593	1	548	-455
3	Gain if a	ny, from Form 468		500		_	3	155
4		•		Form 6252, line 26 or 37			4	
5							5	
_			om other than cas	hanges from Form 8824			6	
6		•		(loss) here and on the app	roprieto lino ao followe:		7	-887
7	Partners	hips (except elec	ting large partne	rships) and S corporatio 0, or Form 1120S, Sched	ns. Report the gain or (lo		_	-867
8 9	losses, o Schedule Nonrecap Subtract 9 is more	r they were recapt D filed with your otured net section line 8 from line 7. than zero, enter tain on the Schedul	ured in an earlier y return and skip line 1231 losses from plf zero or less, ente he amount from line D filed with your	If line 7 is a gain and you year, enter the gain from lines 8, 9, 11, and 12 below. orior years (see instructioner -0 If line 9 is zero, enter 8 on line 12 below and oreturn (see instructions)	ne 7 as a long-term capit ns) er the gain from line 7 on enter the gain from line 9	al gain on theline 12 below. If lin as a long-term	8 ne 9	
				s (see instructions)				
10	Ordinary	gains and losses	not included on line	es 11 through 16 (include	property held 1 year or le	ess):		
11	Loss, if a	nv. from line 7					11 ()
12	Gain, if a	ny, from line 7 or a	amount from line 8	, if applicable			12	<u>,</u>
13							13	
14	Net gain	or (loss) from Forr	n 4684. lines 31 ar	nd 38a			14	
15	Ordinary	gain from installm	ent sales from For	m 6252, line 25 or 36			15	
16							16	
17							17	
18		•		ount from line 17 on the a			1	
		•		lines a and b below:				
а			· ·	n 4684, line 35, column (b)(ii), enter that part of the	loss here. Enter t		
_				rty on Schedule A (Form 1				
	-			(Form 1040), line 23. Ide				
							18a	
b				uding the loss, if any, on li			-	
			Notice, see separa		ca. Enter nore and t	31111 10 10, 11110		Form 4797 (2014)
	p-31 11 311		, 200 copui					(2014)

THERE ARE NO AMOUNTS FOR PAGE 2

Section 179 Disposal Worksheet

Form **1120S**

2014

For calendar ye	ar 2014 or tax year	beginning	, (ending					
lame FIRESTORM CAFE, LLC								Employer Ider 26-262	ntification Numbe
Asset Description A DECK FURNITURE B BAR STOOLS C BATHROOM SIGNAGE D E			Date Acqu 10/18/ 10/11/ 05/01/	$\frac{11}{12} \frac{03/08}{03/08}$	<u>/14</u> /14	Casualty Occurrence	e Description		
F									
Sale Information:	Property A	Property B	Property C	Property D	Property E	Property F	Property G	Property H	Property I
Gross sales price Cost or basis Commissions/other expenses Accumulated depr excluding Sec 179	127	50	207						
Section 179 AMT gain/loss adjustment Sale to related party	127	50	207						
Casualty gain on Form 4797, Part III Section 1250 property	NO	NO	NO	<u> </u>	-		<u> </u>	<u> </u>	
Installment Sale Information:									
Mortgage and other debts Current year payments received									
Prior year payments received Installment Sale Related Party Info:									
Casualty / Theft Information: Total net reimbursement Cost or basis									
Accumulated depr excluding Sec 179 Section 179									
FMV before loss FMV after loss									
AMT gain/loss adjustment Property type									
Gain (loss)									
Net gain (loss) on disposal of 179 assets	•								

Federal Statements

Statement 1 - Form 1120S, Page 1, Line 5 - Other Income (Loss)

Description	Ar	nount
INSURANCE REFUND	\$	136
TOTAL	\$	136

Statement 2 - Form 1120S, Page 1, Line 19 - Other Deductions

Description	Aı	mount
BANK SERVICE CHARGES	\$	200
CAFE EXPENSES		320
CREDIT CARD MERCHANT FEES		714
DUES & SUBSCRIPTIONS		160
OFFICE SUPPLIES		79
POSTAGE		207
PRINTING & REPRODUCTION		69
PROFESSIONAL FEES		825
TELEPHONE		696
TRAVEL		411
UTILITIES		1,213
TOTAL	\$	4,894

Statement 3 - Form 1120S, Page 3, Schedule K, Line 12a - Cash Contributions

Description	Cash trib 50%	ash rib 30%	 Total
MISCELLANEOUS CONTRIBUTIONS	\$ 389	\$ 	\$ 389
TOTAL	\$ 389	\$ 0	\$ 389

Statement 4 - Form 1120S, Page 4, Schedule K, Line 17d - Other Items and Amounts

Description Amount

DISPOSAL OF SECTION 179 PROPERTY - SEE ATTACHED WRK

Statement 5 - Form 1120S, Page 4, Schedule L, Line 14 - Other Assets

Description		nning Year	(⊨nd of Year
RENT & UTILITY DEPOSITS INVESTMENT IN NCDF	\$	·	\$	2,940 150
TOTAL	\$	0	\$	3,090
IOIVI	٧		٧	

Federal Statements

Statement 6 - Form 1120S, Page 4, Schedule L, Line 18 - Other Current Liabilities

Description	B	End of Year			
ACCRUED PAYROLL TAX GIFT CERTIFICATES SALES TAX PAYABLE	\$	441 3,634 747	\$	47 3,315	
TOTAL	\$	4,822	\$	3,362	

Statement 7 - Form 1120S, Page 4, Schedule L, Line 21 - Other Liabilities

Description	ginning Year	End Year
DUE TO EMPLOYEES DUE TO KILA	\$ 200 200	\$
TOTAL	\$ 400	\$ 0

Statement 8 - Form 1120S, Page 5, Schedule M-2, Line 3(a) - Other Additions

Description	Am	ount
INTEREST INCOME	\$	2
TOTAL	\$	2

Statement 9 - Form 1120S, Page 5, Schedule M-2, Line 5(a) - Other Reductions

Description	<u>A</u>	mount
NET SECTION 1231 LOSS	\$	887
CHARITABLE CONTRIBUTIONS		389
TOTAL	\$	1,276

CD-401S (42)

S Corporation Tax Return 2014

	OR Use Only
For calendar year 2014, or other tax year beginning 14 and ending	
	Employer ID Number 52625465
Initial Return Amended Return Fed Schedule M-3 is attached N.C. Secret	ary of State ID Number
	NAICS Code 722513
FIRE 68 H 28806 262625465 1042479 722513 IR	N FR N
SR N AR N 478 N 479 N M3 N LLC Y EP	N QSSS N
FIRESTORM CAFE LLC	
68 HAYWOOD RD ASHEVILLE NC	28806
GR 37093 07 35 16 -168 24	C 0
TA 16983 08 0 17 0 24	D 0
01 0 09 0 19 0 24	E 0
HCE N 10 -168 20 0 26	0
02 12470 11 0 21 0 27	0
03 8064 13 0 22 0 31	A 0
9 05 35 14 -168 24A 0 31	В 0
0 15 1000000 24B 0 33	0
PFSP P P00955658 TN	
Sch. A Computation of Franchise Tax Sch. B Computation of Corpora	ate Income Tax
Sch. A Computation of Franchise Tax Sch. B Computation of Corpora 1. Capital Stock, Surplus, & Undivided Profits -5585 10. Shareholder's Shares of	-168
Holding Company Exception IN Corporate Income (Loss)	•
2. Investment in N.C. Tangible Property 12470 11. Adjustments to Corporation Income (Loss)	160
3. Appraised Value of N.C. Tangible Property 8064 12. N.C. Taxable Income 12470 13. Nonapportionable Income	-168 0
4. Taxable Amount 12.4.7.0 13. Nonapportionable income 5. Total Franchise Tax Due 35 14. Apportionable Income	-168
6. Application for Franchise Tax Extension 0 15. Apportionment Factor	100.0000%
7. Tax Credits 35 16. Income Apportioned to N.C.	-168
8. Franchise Tax Due 0 17. Nonapportionable Income Allocated to N.C.	160
9. Franchise Tax Overpaid 0 18. Total Net Taxable Income Sign Return Below Refund Due 0 Payment Due	
DIRECTOR	O
Signature and Title of Officer Corporate Telephone Number Date	
	55658
Signature of Paid Preparer Preparer's Telephone Number Preparer's FE I certify that, to the best of my knowledge, this return is accurate and complete. FEIN	EIN, SSN, or PTIN SSN X PTIN

Legal Name (First 10 Characters) FIRESTORM Federal Employer ID Number 262625465

CD-401S	Line-by	/-l ine	Infor	mation
55 40 10		y -1110	1111011	HALIOH

Sc	h. B Computation of Corporate Income Tax		Acc. depreciation, depletion, and amortization
	Amount of Line 18 Attributable to Nonresidents	\dashv	with respect to N.C. tangible property 16229
13.	Filing Composite)	7. Debts existing for N.C. real estate
20	Separately Stated Items of Income Attributable	'	8. Investment in N.C. Tangible Property 12470
20.	· · · · · · · · · · · · · · · · · · ·	١	6. Investment in N.C. Tangible Property
24			Sch. F. Appraised Value of N.C. Tangible Property
			Sch. E Appraised Value of N.C. Tangible Property 1. County tax value of N.C. tangible property 14662
22.			0064
23.		,	2. Appraised value of N.C. tangible property 8 U 6 4
24.	Payments and Credits	, ,	Sah F. Other Information All Torrescent Must Complete Schoolede
	a. Application for Income Tax Extension		Sch. F Other Information - All Taxpayers Must Complete Schedule
	b. Other Prepayments of Tax		1. a. State of incorporation NC
)	b. Date incorporated 05 16 08
	d. Nonresident W/holding (Include 1099/W-2))	2. Date of N.C. Certificate of Authority 05 16 08
	e. Tax Credits Attributable to Nonresidents		3. Trade or business: a. In N.C. CAFE & BOOK SA
	Filing Composite		b. Everywhere CAFE & BOOK SA
25.	•)	4. Principal place of business ASHEVILLE NC
26.)	5. a. What was the last year the IRS redetermined
27.	Income Tax Overpaid)	the corporation's federal taxable income?
			b. Were adjustments reported to N.C.?
Ta	x Due or Refund	\square	c. If so, when?
28.	Franchise Tax Due or Overpayment		6. Is corporation subject to franchise tax but not N.C. income tax because its'
29.)	income tax activities are protected? (If yes, attach explanation) ${f N}$
30.)	
31.	a. Interest) [Sch. G Ordinary Income (Loss) from Trade or Business Activities
	b. Penalties)	1. a. Gross receipts or sales 37093
	c. Add Lines 31a and 31b)	b. Returns and allowances
32.	Total Due)	c. Balance - Line 1a minus Line 1b 37093
33.	Amount to be Refunded)	2. Cost of goods sold (Attach schedule) STMT 1 21178
			3. Gross Profit (Line 1c minus Line 2) 15915
Sc	h. C Capital Stock, Surplus, and Undivided Profits		4. Net gain (loss) (Attach schedule)
1.	Total capital stock outstanding less cost		5. Other income (loss) (Attach schedule) STMT 2 136
	of treasury stock 21'	7	6. Total Income (Loss) 16051
2.	Paid-in or capital surplus)	7. Compensation of officers (Attach schedule) STMT 3 3138
3.	Retained earnings -5802	2	8. Salaries and wages (less employment credits) 784
4.	Other surplus)	9. Repairs and maintenance 332
5.	Deferred or unearned income) 1	10. Bad debts
6.	Allowance for bad debts) 1	11. Rents 4846
	LIFO reserves		12. Taxes and licenses STMT 4 818
	Other reserves that do not represent definite		13. Interest 40
	and accrued legal liabilities (Attach schedule)	、 l	14. a. Depreciation 56
9.	Add Lines 1 through 8 -558		b. Depreciation included in cost of goods sold
10.		Ó	
	,		c. Balance - Line 14a minus 14b
11.	Line 9 plus (or minus) Line 10 -558!	5 1	15. Depletion
12.	Apportionment factor 100.0000		16. Advertising 426
13.	Capital Stock, Surplus, and Undivided Profits -558!		17. Pension, profit-sharing, and similar plans
13.	330.		18. Employee benefit programs
Sc	h. D Investment in N.C. Tangible Property		19. Other deductions (Attach schedule) STMT 5 4894
	202		15224
4	1000		D1 D
	1.6404		21. Ordinary Business Income (Loss)
2.			Sah H. Computation of Income (I)
3.	Total land and buildings located in N.C.		Sch. H Computation of Income (Loss)
4.	`	,	1. Ordinary business income (loss) 717
	other N.C. tangible property		2. Net rental real estate income (loss)
5.	Add Lines 1 through 4 28699		
			This page must be filed with the first page of Form CD-401S.

CD-401S 2014 Page 3 (42)

	egal Name (First 10 Characters)	FIRESTORM	Federal Employer ID Number	262625465
Scl	n. H Computation of Income (Lo	ss)		
3.	Other net rental income (loss)			0
4.	Interest income			2
5.	Ordinary dividends			0
6.	Royalties			0
7.	Net short-term capital gain (loss)			0
8.	Net long-term capital gain (loss)			0
9.	Net section 1231 gain (loss)			-887
10.	Other income (loss) (Attach Schedule)			0
11.	Total Income (Loss)			-168
Scl	n. I Adjustments to Income (Los	ss)		
1.	Additions to Federal Adjusted Gross Income (Le	oss)		0
3.	Deductions from Federal Adjusted Gross Incom	e (Loss)		0
5.	Adjustments to Income (Loss)			0
Scl	n. J Explanation of Changes for	Amended Return		

Sch. K Shareholders' Pro Rata Share Items

	_	Shareholder 1	Shareholder 2	Shareholder 3	Shareholder 4
1.	Identifying Number				
2.	Name	LIBERTIE	TRAVIS	JULIE	MATTHEW
3.	Address				
		ASHEVILLE NC	ASHEVILLE NC	ASHEVILLE NC	ASHEVILLE NC
4.	Ownership %	29.1324%	29.1324%	29.1324%	12.6027%
5.	Share of income (loss)	-49	-49	-49	-21
6.	Additions to income (loss)	0	0	0	0
7.	Deductions from income (loss)	0	0	0	0
8.	Income subject to N.C. tax	-49	-49	-49	-21
9.	Share of tax credits	0	0	0	0
10.	Tax withheld from nonwage compensation	0	0	0	0
11.	Amount of Line 8 apportioned or allocated				
	to N.C. (nonresidents only)	0	0	0	0
12.	Separately stated items of income				
	(nonresidents only)	0	0	0	0
13.	Net tax paid for shareholder by				
	corporation (nonresidents only)	0	0	0	0
	<u>-</u>	Shareholder 5	Shareholder 6	Shareholder 7	Shareholders' Total
1.	Identifying Number				
2.	Name				
3.	Address				
4.	Ownership %	%	%	%	100.0000%
5.	Share of income (loss)	0	0	0	-168
6.	Additions to income (loss)	0	0	0	0
7.	Deductions from income (loss)	0	0	0	0
8.	Income subject to N.C. tax	0	0	0	-168
9.	Share of tax credits	0	0	0	0
10.	Tax withheld from nonwage compensation	0	0	0	0
11.	Amount of Line 8 apportioned or allocated				
	to N.C. (nonresidents only)	0	0	0	0
12.	Separately stated items of income				
	(nonresidents only)	0	0	0	0
13.	Net tax paid for shareholder by				
	corporation (nonresidents only)	0	0	0	0
TI	nis page must be filed with the	first page of Form CD-401	IS.		

Legal Name (First 10 Characters)

FIRESTORM

Federal Employer ID Number 262625465

	h. L Balance Sheet per Books	Beginning	of Tax Year			End of Tax Ye	ar
	Assets	(a)	(l	0)		(c)	(d)
1.	Cash			1613			1424
2.	Trade notes and accounts receivable	0				0	
	b. Less allowance for bad debts (0)		0	(0)	0
3.	Inventories			14500			12200
4.	a. U.S. government obligations			0			0
	b. State and other obligations			0			0
5.	Tax-exempt securities			0			0
6.	Other current assets (Attach schedule)			0			0
7.	Loans to shareholders			0			0
8.	Mortgage and real estate loans			0			0
9.	Other investments (Attach schedule)			0			0
Э.	Buildings and other depreciable assets	19131				16502	
	b. Less accumulated depreciation (17418)		1713	(16233)	269
١.	a. Depletable assets	0				0	
	b. Less accumulated depletion (0)		0	(0)	0
	Land (net of any amortization)			0			0
3.	Intangible assets (amortizable only)	0				0	
	b. Less accumulated amortization (0)		0	(0)	0
ŀ.	Other assets (Attach schedule)	STMT 7		0			3090
5.	Total Assets			17826			16983
	Liabilities and Sharehold	ers' Equity					
6.	Accounts payable			2664			178
7.	Mortgages, notes, and bonds payable in less	than 1 year		0			0
3.	Other current liabilities (Attach schedule)	STMT 8		4822			3362
9.	Loans from shareholders			14887			19028
).	Mortgages, notes, and bonds payable in 1 years	ear or more		0			0
1.	Other liabilities (Attach schedule)	STMT 9		400			0
2.	Capital stocks			298			217
3.	Additional paid-in capital			0			0
4.	Retained earnings			-5245			-5802
5.	Adjustments to shareholders' equity (Attach schedule)			0			0
6.	Less cost of treasury stock		(0)	(0)
7.	Total Liabilities and Shareholders' Equity			17826			16983
_	h M.A. Fadaral Cabadrda						
	h. M-1 Federal Schedule Net income (loss) per books		-557	5. Income rec	orded on bo	oks this year not included on	
	Income included on Federal Sch. K, Lines 1,	2 3c 4 5a	33,			through 10 (itemize):	
	6, 7, 8a, 9 and 10 not recorded on books this			Tax-exemp		0	
	o, r, oa, o and ro not recorded on books and	your (normzo).		Tax exemp	i intorest	0	0
			0	6. Deductions	s included on	Federal Sch. K, Lines 1 through	O
3	Expenses recorded on books this year not in	cluded on	0			inst book income	
٠.	Federal Sch. K, Lines 1 through 12, and 14l (this year (it		III OC DOOK III OOTII C	
		0		•		0	
	a. Depreciation	0		Depreciation	л	0	0
	b. Travel and entertainment	_	Λ	7 T-4-1		U	0
	A.I.I.	0	0 -557	7. Total		1. 17. 1. (10)	-557
4.	Add Lines 1 through 3		-357	Income or	Loss (Fed. S	ch. K, Line 18)	-557

Legal Name (First 10 Characters)

FIRESTORM

Federal Employer ID Number

262625465

Sch. M-2	Analysis	of N.C.	AAA
----------	-----------------	---------	-----

	N.C. Accumulated	N.C. Other	Undistributed Taxable
	Adjustments	Adjustments	Income Previously Taxed
Balance at beginning of year	-5245	0	0
2. Ordinary income from Sch. G, Line 21	717		
3. Other additions SEE STMT 10	2	0	
4. Loss from Sch. G, Line 21	(0)		
5. Other reductions SEE STATEMENT 11	(1276)	(0)	0
6. Compute Lines 1 through 5	-5802	0	0
7. Distributions other than dividend distributions	0	0	0
8. Balance at end of tax year	-5802	0	0

Sch. N Nonapportionable Income

och. N Nohapportionable inc	Joine			
Nonapportionable Income	Gross Amounts	Related Expenses	Net Amounts	Net Amounts Allocated
				Directly to N.C.
	0	0	0	0
	0	0	0	0
	0	0	0	0
	0	0	0	0
	0	0	0	0
	0	0	0	0
	0	0	0	0
Nonapportionable Income			0	
2. Nonapportionable Income Allocated	I to N.C.			0

Explanation of why income listed is nonapportionable income rather than apportionable income:

Sch. O Computation of Apportionment Factor

Part 1.	Domestic Corporations and Other (Corporations Not Ap	portionin	g Franchise or Income Outside N.C.	100.0000%
---------	-----------------------------------	---------------------	-----------	------------------------------------	-----------

Part 2. Corporations Apportioning Franchise or Income to N.C. and to Other States

	1. Within North	n Carolina	2. Total E	2. Total Everywhere		
	(a) Beginning Period	(b) Ending Period	(a) Beginning Period	(b) Endi	ng Period	
1. Land	0	(0		0	
2. Buildings	0	(0		0	
3. Inventories	0	(0		0	
4. Other property	0	(0		0	
5. Total	0	(0		0	
6. Average value of property		0		0		
7. Rented property		0		0	Factor	
8. Property Factor		0		0	0.0000%	
9. Gross payroll		0		0		
10. Compensation of general executive officers		0		0		
11. Payroll Factor		0		0	0.0000%	
12. Sales Factor		0		0	0.0000%	
13. Sales Factor					0.0000%	
14. Total of Factors					0.0000%	
15. N.C. Apportionment Factor	15. N.C. Apportionment Factor 0.000%					
Part 3. Corporations Apportionir	ng Franchise or Incor	ne to N.C. and to Ot	her States Using Single S	Sales Factor	0.0000%	
Part 4. Special Apportionment 0.0						

CD-425 (42)

6. Total franchise tax due

7. Nonrefundable franchise tax credits

9. Total franchise tax credits subject

10. Refundable franchise tax credits

to 50% of tax limit taken in 2014

11. Franchise Tax Credits Taken in 2014

8. Enter the lesser of Line 6 or 7

10-22-14

2014 Corporate Tax Credit Summary

North Carolina Department of Revenue

Legal N	lame (Fir	st 10 Cha	aracters)	FIR	ESTORM				Fe	deral Employ	/er ID Nu	umber	26262	25465
					For C	ompute	er Use (Only						
01				0	12A				0	15E	3			0
02				0	12B				0	16	RF	N	CP	N
03				0	13A				0		QB	N	ER	N
04	PG	N	RF	N	13B				0	16				0
	ER	N	AA	Y	14A				0	17				0
04			_	175	14B				0	22				0
09				0	15A				0					
365 - 2. Revit	=	0 x 365 n income-	-producing	0 = historic	1.	0		to no		dents filing co Rehabilitati historic stru	ng an ind			gh 17.)
mill fa	acility		ne-produci		2.	0				A. Enter qu	alified	enditur	es12a	
mill fa 4. Othe	acility r franchis of tax lim 1/2 of the	e and tax it e amount	c credits not of piped r	ot subject t	3. 50 4.	0 175			13.	B. Enter cre Rehabilitati nonincome- historic stru A. Enter rel	edit amor ng a -producir acture	unt ng	12b.	
	Investing Expense	g in Recy es Relate	cling Facili d to Divide	ities ends				630		expense B. Enter ins	s stallment		13a.	
		tax crec	I Report Fe		5.	175		300242016	14.	amount of Revitalizing income-pro	an ducing		13b.	
Part 2. C	omputat	ion of Fr	ranchise 1	Tax Credit	s Taken in 2	014				A. Enter qu	alified	enditure	es14a.	

Submit this form directly after Form CD-405 or CD-401S. Attach separate schedule to substantiate any credit claimed.

35

35

0

35

175

6.

7.

8.

9.

10.

0

0

0

14b.

15a.

15b.

B. Enter credit amount

nonincome-producing

A. Enter rehabilitation

B. Enter installment

amount of credit

historic mill facility

expenses

15. Revitalizing a

CD-425 2014 Page 2 (42)

	Legal Name (First 10 Characters) FIRESTORM	Federal Employer ID Number	262625465	
16.	Other income tax credits not subject to 50% of tax limit Investing in Recycling Facilities Qualified Business Investments Cogeneration Plant Expenses Related to Dividends		16.	0
17.	Income tax credits not subject to 50% of tax limit carried over from previous years		17.	0
18.	Total income tax credits not subject to 50% of tax limit		18.	0
19. 20.	N.C. net income tax due Nonrefundable income tax credits		19. 20.	0 0
21.	Enter lesser of Line 19 or 20		21.	0
22.	Total income tax credits subject to 50% of tax limit taken in 2014		22.	0
23.	Add Lines 21 and 22		23.	Ü
24.	Income tax credit adjustment (C Corporations only)		24.	0
25.	Income Tax Credits Taken in 2014		25.	0

Form CD-425 must be attached to the last page of Form CD-405 or CD-401S if a tax credit is claimed. Failure to substantiate a tax credit may result in the disallowance of that credit.

North Carolina Statements

Statement 1 - Form CD-401S, Page 2, Schedule G, Line 2 - Cost of Goods Sold

Description	<u></u>	Amount
BEGINNING INVENTORY	\$	14,500
PURCHASES		18,878
LESS: ENDING INVENTORY		-12,200
TOTAL	\$	21,178

Statement 2 - Form CD-401S, Page 2, Schedule G, Line 5 - Other Income (Loss)

Description	Ar	nount
INSURANCE REFUND	\$	136
TOTAL	\$	136

Statement 3 - Form CD-401S, Page 2, Schedule G, Line 7 - Compensation of Officers

Officer Name	Com	<u>ipensation</u>
LIBERTIE	\$	543
TRAVIS		976
JULIE		1,074
MATTHEW		545
TOTAL	\$	3,138

Statement 4 - Form CD-401S, Page 2, Schedule G, Line 12 - Taxes and Licenses

Description	Ar	mount
LICENSES & PERMITS	\$	200
PAYROLL TAXES		440
PROPERTY TAXES		178
TOTAL	\$	818

Statement 5 - Form CD-401S, Page 2, Schedule G, Line 19 - Other Deductions

Description	Aı	mount
BANK SERVICE CHARGES	\$	200
CAFE EXPENSES		320
CREDIT CARD MERCHANT FEES		714
DUES & SUBSCRIPTIONS		160
OFFICE SUPPLIES		79
POSTAGE		207
PRINTING & REPRODUCTION		69
PROFESSIONAL FEES		825
TELEPHONE		696
TRAVEL		411
UTILITIES		1,213
TOTAL	\$	4,894

North Carolina Statements

Statement 6 - Form CD-401S, Page 3, Schedule H, Line 10 - Other Income (Loss)

Description	A	mount
SEC. 1231 GAIN (LOSS)	\$	-887
TOTAL	\$	-887

Statement 7 - Form CD-401S, Page 4, Schedule L, Line 14 - Other Assets

Description	nning Year	End of Year		
RENT & UTILITY DEPOSITS INVESTMENT IN NCDF	\$ 0	\$	2,940 150	
TOTAL	\$ 0	\$	3,090	

Statement 8 - Form CD-401S, Page 4, Schedule L, Line 18 - Other Current Liabilities

Description	Beginning of Year		End of Year		
ACCRUED PAYROLL TAX GIFT CERTIFICATES SALES TAX PAYABLE	\$	441 3,634 747	\$	47 3,315 0	
TOTAL	\$	4,822	\$	3,362	

Statement 9 - Form CD-401S, Page 4, Schedule L, Line 21 - Other Liabilities

Description		ginning Year	nd Year
DUE TO EMPLOYEES	\$	200	\$ 0
DUE TO KILA		200	 0
TOTAL	\$ <u></u>	400	\$ 0

Statement 10 - Form CD-401S, Page 5, Schedule M-2, Line 3 - NC AAA Other Additions

Description	Amount	
INTEREST INCOME	\$	2
TOTAL	\$	2

Statement 11 - Form CD-401S, Page 5, Schedule M-2, Line 5 - NC AAA Other Reductions

Description	Amount	
NET 1231 LOSS	\$	887
CHARITABLE CONTRIBUTIONS		389
TOTAL	\$	1,276

Form 4797

Sales of Business Property (Also Involuntary Conversions and Recapture Amounts Under Sections 179 and 280F(b)(2))

► Attach to your tax return. ▶ Information about Form 4797 and its separate instructions is at www.irs.gov/form4797.

OMB No. 1545-0184

Attachment Sequence No.

Department of the Treasury Internal Revenue Service

Identifying number Name(s) shown on return FIRESTORM CAFE, LLC 26-2625465 Enter the gross proceeds from sales or exchanges reported to you for 2014 on Form(s) 1099-B or 1099-S (or substitute statement) that you are including on line 2, 10, or 20 (see instructions) Sales or Exchanges of Property Used in a Trade or Business and Involuntary Conversions From Other Than Casualty or Theft—Most Property Held More Than 1 Year (see instructions) (e) Depreciation (f) Cost or other (g) Gain or (loss) 2 (a) Description (b) Date acquired (c) Date sold (d) Gross allowed or basis, plus Subtract (f) from the allowable since of property (mo., day, yr.) (mo., day, yr.) sales price improvements and sum of (d) and (e) expense of sale acquisition HOT WATER HEATERS 05/16/08 03/08/14 268 700 -432 CONVECTION OVEN & STAND 500 05/16/08 03/08/14 593 1,548 Gain, if any, from Form 4684, line 39 3 Section 1231 gain from installment sales from Form 6252, line 26 or 37 4 4 Section 1231 gain or (loss) from like-kind exchanges from Form 8824 5 5 Gain, if any, from line 32, from other than casualty or theft 6 6 -887 Combine lines 2 through 6. Enter the gain or (loss) here and on the appropriate line as follows: Partnerships (except electing large partnerships) and S corporations. Report the gain or (loss) following the instructions for Form 1065, Schedule K, line 10, or Form 1120S, Schedule K, line 9, Skip lines 8, 9, 11, and 12 beld Individuals, partners, S corporation shareholders, and all others. If line 7 is zero or a loss, enter the amount fr line 7 on line 11 below and skip lines 8 and 9. If line 7 is a gain and you did not have any prior year section 1231 losses, or they were recaptured in an earlier year, enter the gain from line 7 as a long-term capital gain on the Schedule D filed with your return and skip lines 8, 9, 11, and 12 below. 8 Nonrecaptured net section 1231 losses from prior years (see instructions) Subtract line 8 from line 7. If zero or less, enter -0-. If line 9 is zero, enter the gain from line 7 on line 12 below. If line 9 is more than zero, enter the amount from line 8 on line 12 below and enter the gain from line 9 as a long-term capital gain on the Schedule D filed with your return (see instructions) Ordinary Gains and Losses (see instructions) Ordinary gains and losses not included on lines 11 through 16 (include property held 1 year or less): 10 Loss, if any, from line 7 Gain, if any, from line 7 or amount from line 8, if applicable 12 13 Gain, if any, from line 31 13 Net gain or (loss) from Form 4684, lines 31 and 38a 14 14 Ordinary gain from installment sales from Form 6252, line 25 or 36 15 15 Ordinary gain or (loss) from like-kind exchanges from Form 8824 16 Combine lines 10 through 16 17 17 For all except individual returns, enter the amount from line 17 on the appropriate line of your return and skip lines and b below. For individual returns, complete lines a and b below: If the loss on line 11 includes a loss from Form 4684, line 35, column (b)(ii), enter that part of the loss here. Enter t part of the loss from income-producing property on Schedule A (Form 1040), line 28, and the part of the loss from property used as an employee on Schedule A (Form 1040), line 23, Identify as from "Form 4797, line 18a." See 18a instructions

Redetermine the gain or (loss) on line 17 excluding the loss, if any, on line 18a. Enter here and on Form 1040, line 148b

For Paperwork Reduction Act Notice, see separate instructions.

Form 4797 (2014)

THERE ARE NO AMOUNTS FOR PAGE 2

Form	NC Retained Earnings R	econciliation Workshee	t 2014	
CD-401S				
	For calendar year 2014, or other tax year beginn	ing , ending		
lame		NC Secretary of State ID Number	Federal Employer ID Number	
FIRESTORM (CAFE, LLC	1042479	262625465	
	Schedule L - Reta Retained Earnings - Unappropriated	0		
	Accumulated Adjustments Account	-5,802		
	Other Adjustments Account	0		
	Undistributed Txbl Inc Previously Taxed	0		
	Schedule L, Line 24 - Retained Earnings	-5,802		

Schedule M-2 - Retained Earnings

	Accumulated Adjustments Account	Other Adjustments Account	Undistributed Taxable Income Previously Taxed	Retained Earnings Unappropriated/ Timing Differences	Total Retained Earnings
Beg Yr Bal Ordinary Inc (Loss) Other Additions Other Reductions Distributions	-5,245 717 2 1,276	0	0	0	-5,245 717 2 1,276
End Yr Bal	-5,802	0	0	0	-5,802