Department of the Treasury Internal Revenue Service

U.S. Income Tax Return for an S Corporation

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

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

OMB No. 1545-0123 2016

Fo				tax year beg		, ending					
Α		ction effective			Name FTPFSTOP	M CAFE, I	.T.C			D Er	nployer identification number
В		/16/0 ess activity o		TYPE	FIRESTOR	m CAPE, I	шс			ر ا	6-2625465
_		er (see instru		OR	Number, street, and r	oom or suite no. If a P.O	. box. see instructions				ate incorporated
_	72	2513			610 HAYW		,				5/16/2008
С		k if Sch. M-3		PRINT		province, country, and Z				F To	tal assets (see instructions)
	attach	ned	Ш		ASHEVILL	E	NC 2	8806			
_				<u> </u>	<u> </u>			.		\$	60,144
			_	-	S corporation begin						2553 if not already filed
Н		ck if: (1)				(3) X Addres		Amend	led return (5)	S election	on termination or revocation
<u> </u>					ho were shareholde						u 4
Ca			-				_		tions for more inform		T
	1a	Gross re	ceipts or	sales				1a	274,52	6	
	b	Returns	and allow	vances				1b			
ø	С	Balance.	Subtract	line 1b from	ı line 1a					1c	274,526
Income	2	Cost of	goods sol	d (attach Fo	rm 1125-A)					2	155,583
ၓ	3	Gross pi	ofit. Subt	ract line 2 fro	om line 1c					3	118,943
=	4	Net gain	(loss) fro	m Form 479	7, line 17 (attach Fo	orm 4797)		<u></u>	· · · <u>. · · · · · · · · · · · · · · · ·</u>	4	40 44
	5	Other in	come (los	ss) (see insti	ructions—attach sta	tement)		SEE	STMT 1	5	10,141
_	6	Total inc	ome (los	ss). Add lines	s 3 through 5		<u></u>		<u>u</u>	. 6	129,084
_	7	•		`		,					34,476
ions	8										33,439
limitations)	9	Repairs	and main	tenance						9	1,219
for	10	Bad debt	s							10	20.001
	11										38,991
instructions	12										6,251
ıstru	13										3,092
<u>ا</u> .	14	Deprecia	tion not c	laimed on Fo	orm 1125-A or elsev	where on return (a	ttach Form 4562	i)		14	1,130
(see	15			deduct oil	and gas depletion.)				15	0.100
ns	16	Advertisir									2,102
ē	17	Pension,	profit-sha	aring, etc., pl	ians						
C	18	Employe	e benefit	programs						18	00.004
Deductions	19	Other de	ductions	(attach state	ement)			SEE	STMT Z	19	23,294
Δ	20								u		143,994
_	21									21	-14,910
	22a				recapture tax (see ins	structions)		22a		_	
S	b			D (Form 11				22b		_	
ents	ı			•	tions for additional taxe	*				22c	
Paymer	23a				2015 overpayment cred	lited to 2016		23a		_	
a	b	•		Form 7004				23b		_	
<u> </u>	С			•	uels (attach Form 4	136)		23c			
and	d	Add lines							· · · · · · · · · · · · · · · · · · ·	23d	
	24		•	• (tructions). Check if				u L	24	
Тах	25				maller than the total		•			25	
	26				rger than the total o		enter amount o	verpaid		26	
_	27				edited to 2017 estin		ما المام ممانات ممام		Refunded u	_	
		and to the	best of my k	nowledge and be	at I have examined this ret elief, it is true, correct, and				ľ		his return with the preparer
0		is based or	all informat	ion of which prep	parer has any knowledge.			1	\ <u></u>	ow (see ins	
	ign) —							<u>DIR</u>	ECTOR	
	ere		ature of offic	•	BERTIE VALAN	1		Date	Title	T	<u> </u>
Р.	اماد		• • • •	parer's name		Preparer's signature			Date	Check	if PTIN
	id ono:			. STORCE					03/27/17	self-empl	<u> </u>
	epai	-	ïrm's name			P.C.			Firm's	EIN U	26-4129801
US	se O	niy F	irm's addres		BOX 1373	a	2000	1200	,	0.0	00 EOE 2701
				ASH	EVILLE, N	<u>. </u>	∠880 2	2-1373	Phone	no. 82	28-505-3791

	P	age 2
	Yes	No
		Х
		X
entage ir the Date ified Sub / Electio	n (iv) is 1 e (if any) ochapter n Was M	00%, S Made
		X
		Х
		X
		^
		X

1	Check accounting method: a Cash b	X Accrual				Yes	No
	c Other (speci	fy) u					
2	See the instructions and enter the:						
	a Business activity u CAFE & BOOK SALES	b Pro	duct or service u FC	OD & BOOKS			
3	At any time during the tax year, was any shareholder of	of the corporation a	disregarded entity, a	trust, an estate, or a			
	nominee or similar person? If "Yes," attach Schedule E	3-1, Information on	Certain Shareholders	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	, 50% or more of t	he total stock issued a	and outstanding of any			
	foreign or domestic corporation? For rules of construct	ive ownership, see	instructions. If "Yes,"	complete (i) through (v)			
	below						X
	(i) Name of Corporation	(ii) Employer Identification Number (if any)	(iii) Country of Incorporation		(v) If Percentage in Enter the Dat a Qualified Sul Subsidiary Election	e (if any) ochapter	S
b	Own directly an interest of 20% or more, or own, direct	ly or indirectly, an	interest of 50% or mor	e in the profit, loss, or			
	capital in any foreign or domestic partnership (including	an entity treated	as a partnership) or in	the beneficial interest of a			
	trust? For rules of constructive ownership, see instructive	ons. If "Yes," comp	olete (i) through (v) be	low			X
	(i) Name of Entity	(ii) Employer Identification Number (if any)	(iii) Type of Entity	(iv) Country of Organization		num Perd ed in Pro , or Capi	ofit,
5a	At the end of the tax year, did the corporation have an	y outstanding shar	es of restricted stock?				Х
	If "Yes," complete lines (i) and (ii) below.						
	(i) Total shares of restricted stock			u			
	(ii) Total shares of non-restricted stock			u			
b	At the end of the tax year, did the corporation have an	y outstanding stoc	k options, warrants, or	similar instruments?			X
	If "Yes," complete lines (i) and (ii) below.						
	(i) Total shares of stock outstanding at the end of the	tax year		u			
_	(ii) Total shares of stock outstanding if all instruments						
6	Has this corporation filed, or is it required to file, Form						х
_	information on any reportable transaction?						
1	Check this box if the corporation issued publicly offered				u 📋		
	If checked, the corporation may have to file Form 828	i, information Retu	im for Publicly Offered	Onginal Issue Discount			
8	Instruments. If the corporation: (a) was a C corporation before it ele-	otad ta ba an S ca	rnoration or the corner	ration acquired an			
·	asset with a basis determined by reference to the basis						
	the hands of a C corporation and (b) has net unrealize						
	from prior years, enter the net unrealized built-in gain r	-	_	-			
	instructions)		-				
9	Enter the accumulated earnings and profits of the corporate of the corpora	oration at the end	of the tax vear.	\$			
10	Does the corporation satisfy both of the following cond			*			
	The corporation's total receipts (see instructions) for the		ss than \$250.000				
	The corporation's total assets at the end of the tax year	-					х
	If "Yes," the corporation is not required to complete Sci						
11	During the tax year, did the corporation have any non-s			forgiven, or had the			
	terms modified so as to reduce the principal amount of			=			X
	If "Yes," enter the amount of principal reduction						
12	During the tax year, was a qualified subchapter S subs						X
13a	Did the corporation make any payments in 2016 that w	-				X	
	If "Yes," did the corporation file or will it file required Fo					X	
						4000	

Sched	lule	K Shareholders' Pro Rata Share Items		Total amount
	1	Ordinary business income (loss) (page 1, line 21)	1	-14,910
	2	Net rental real estate income (loss) (attach Form 8825)	2	-
		Other gross rental income (loss) 3a		
∞	С	Other net rental income (loss). Subtract line 3b from line 3a	3с	
Income (Loss)	4	Interest income		5
5	5	Dividends: a Ordinary dividends	5a	
me		b Qualified dividends 5b		
JCC	6		6	
-	7	Royalties Net short-term capital gain (loss) (attach Schedule D (Form 1120S))	7	
		Net long-term capital gain (loss) (attach Schedule D (Form 1120S))	8a	
	h	Collectibles (28%) gain (loss) (attach scriedule b (10111 11200))	- Oa	
	0	· / • /	-	
		Unrecaptured section 1250 gain (attach statement) Not section 1231 gain (leas) (attach Farm 4707)		
	9	Net section 1231 gain (loss) (attach Form 4797)		
	10	Other income (loss) (see instructions)	10	
S	11	Section 179 deduction (attach Form 4562)	11	2 442
Deductions	12a	Charitable contributions SEE STMT 3	12a	2,443
e e		Investment interest expense	12b	
Dec		Section 59(e)(2) expenditures (1) Type u (2) Amount u	12c(2)	
		Other deductions (see instructions)	12d	
	13a	Low-income housing credit (section 42(j)(5))	13a	
	b	Low-income housing credit (other)	13b	
ts	С	Qualified rehabilitation expenditures (rental real estate) (attach Form 3468, if applicable)	13c	
Credits	d	Other rental real estate credits (see instructions) Type u	13d	
ວັ	е	Other rental credits (see instructions) Type u	13e	
	f	Biofuel producer credit (attach Form 6478)	13f	
	g	Other credits (see instructions)	13g	
	14a	Name of country or U.S. possession ${f u}$		
	b	Gross income from all sources	14b	
		Gross income sourced at shareholder level	14c	
		Foreign gross income sourced at corporate level		
	d	Passive category	14d	
suc	е	General category	14e	
Transactions	f	Other (attach statement)	14f	
ารล		Deductions allocated and apportioned at shareholder level		
<u>r</u> a_	а	Interest expense	14g	
-		Other	14h	
Foreign		Deductions allocated and apportioned at corporate level to foreign source income		
Por	i	Passive category	14i	
	i	General category	14j	
	k	Other (attach statement)	14k	
		Other (attach statement) Other information	141	
			141	
		Total foreign taxes (check one): u Paid Accrued Reduction in taxes available for credit (attach statement)	14m	
	'n	Other foreign tax information (attach statement)	14111	
			15a	40
s ax	13a	Post-1986 depreciation adjustment		10
Alternative Minimum Tax (AMT) Items	D	Adjusted gain or loss	15b	
E T	_ c	Depletion (other than oil and gas)	15c	
Alte AM	l d	Oil, gas, and geothermal properties – gross income	15d	
`≥	e	Oil, gas, and geothermal properties – deductions	15e	
<u></u>		Other AMT items (attach statement)	15f	
Items Affecting Shareholder Basis	16a	Tax-exempt interest income	16a	
ffec sis	b	Other tax-exempt income	16b	
aret Bas	С	Nondeduct ble expenses	16c	75
She I	d	Distributions (attach statement if required) (see instructions)	16d	
<u> </u>	е	Repayment of loans from shareholders	16e	

Form	11205 (2016) FIRESIORM CAFE	, <u>ппс</u>	20-2	043403		Page 4
	edule K Shareholders' Pro Rata Share	Items (continued)				Total amount
	17a Investment income				17a	<u> </u>
Ę.	b Investment expenses				17b	
₹.	c Dividend distributions paid from accun	nulated earnings and profits	3		17c	
Other	d Other items and amounts (attach state					
Recon-	18 Income/loss reconciliation. Combine	e the amounts on lines 1 the	rough 10 in the far right			
		sum of the amounts on lines	s 11 through 12d and 14l		18	-17,348
Sch	edule L Balance Sheets per Books	Beginning o	f tax year		End of ta	x year
	Assets	(a)	(b)	(c)		(d)
1	Cash		4,429			13,246
2a	Trade notes and accounts receivable	1,828		2,	,173	
b	Less allowance for bad debts	(1,828	()	2,173 27,421
3	Inventories		35,950			27,421
4	U.S. government obligations					
5	Tax-exempt securities (see instructions)					
6	Other current assets (attach statement)					
7	Loans to shareholders					
8	Mortgage and real estate loans					
9	Other investments (attach statement)					
10a	Buildings and other depreciable assets	32,556		32	,556	
b	Less accumulated depreciation	(18,754)	13,802	(19,	,883)	12,673
11a	Depletable assets					
b	Less accumulated depletion	(()	
12	Land (net of any amortization)					
13a	Intangible assets (amortizable only)	1,214		1,	,214	
b	Less accumulated amortization	(152)	1,062	(369)	845
14	Other assets (attach statement) STMT 4		3,551			3,786
15	Total assets		60,622			60,144
	Liabilities and Shareholders' Equity					-
16	Accounts payable		4,123			16,931
17	Mortgages, notes, bonds payable in less than 1 year					
18	Other current liabilities (attach statement) STMT 5		5,278			5,019
19	Loans from shareholders					
20	Mortgages, notes, bonds payable in 1 year or more					
21	Other liabilities (attach statement) STMT 6		50,436			53,332
22	Capital stock		217			217
23	Additional paid-in capital		8,373			9,873
24 25	Retained earnings		-7 , 805			-25,228
25	Adjustments to shareholders' equity (attach statement)					
26	Less cost of treasury stock		()			()
27	Total liabilities and shareholders' equity		60,622			60,144
						44000

Form **1120S** (2016)

Scl	chedule M-1 Reconciliation of Income (Loss) per Books With Income (Loss) per Return								
Note: The corporation may be required to file Schedule M-3 (see instructions)									
1	Net income (loss) per books	-17,423	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,					
	included on Schedule K, lines 1 through 12			lines 1 through 12 and 14l, not charged					
	and 14l (itemize):			against book income this year (itemize):					
a b	Depreciation \$ Travel and entertainment \$ 40		а	Depreciation \$					
	STMT 7 35	75	7	Add lines 5 and 6					

4 Add lines 1 through 3 -17,348 8 Income (loss) (Schedule K, line 18). Line 4 less line 7 -17,
Schedule M-2 Analysis of Accumulated Adjustments Account, Other Adjustments Account, and Shareholders' Undistributed Taxable Income Previously Taxed (see instructions)

	01141041144114		modilio i rotrodicij razioa	(333 :::3::3::3)	
			(a) Accumulated adjustments account	(b) Other adjustments account	(c) Shareholders' undistributed taxable income previously taxed
1	Balance at beginning of tax year		-7,805		
2	Ordinary income from page 1, line 21				
3	Other additions STMT	8	5		
4	Loss from page 1, line 21		(14,910		
5	Other reductions STMT	9	(2,518)(
6	Combine lines 1 through 5		-25,228		
7	Distributions other than dividend distribu	tions			
8	Balance at end of tax year. Subtract line 7 from	line 6	-25,228		

Form **1120S** (2016)

Form 1125-A

Department of the Treasury Internal Revenue Service

Cost of Goods Sold

 $\bf u$ Attach to Form 1120, 1120-C, 1120-F, 1120S, 1065, or 1065-B. $\bf u$ Information about Form 1125-A and its instructions is at www.irs.gov/form1125a.

OMB No. 1545-0123

Name FI	·	yer identifi -2625	ication number	
1	Inventory at beginning of year	1		5,950
2	Purchases	2	14	7,054
3	Cost of labor	3		
4	Additional section 263A costs (attach schedule)	4		
5	Other costs (attach schedule)	5		
6	Total. Add lines 1 through 5	6	18	3,004
7	Inventory at end of year	7	2	7,421
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	15	5,583
9a	Check all methods used for valuing closing inventory: (i) X Cost (ii) Lower of cost or market (iii) Other (Specify method used and attach explanation.) u			
b	Check if there was a writedown of subnormal goods		ι	\vdash
C	Check if the LIFO inventory method was adopted this tax year for any goods (if checked, attach Form 970)		ι	ı 📙
d	If the LIFO inventory method was used for this tax year, enter amount of closing inventory computed under LIFO	9d		
е	If property is produced or acquired for resale, do the rules of section 263A apply to the entity? See instructions		Yes	X No
f	Was there any change in determining quantities, cost, or valuations between opening and closing inventory? If "Yes, attach explanation		Yes	X No
For Pa	perwork Reduction Act Notice, see instructions.	F	Form 1125-A	(Rev. 10-2016)

Federal Statements

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

Description	 Amount
DONATIONS	\$ 10,141
TOTAL	\$ 10,141

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

Description	 Amount
BANK SERVICE CHARGES	\$ 74
CAFE & BOOKSTORE SUPPLIES	1,820
COMPUTER & INTERNET EXPENSES	113
CREDIT CARD MERCHANT FEES	5,062
DE MINIMIS ASSETS < \$2,500	1,244
DUES & SUBSCRIPTIONS	1,204
INSURANCE - LIABILITY	695
INSURANCE - WORKERS' COMP.	1,374
JANITORIAL EXPENSE	1,073
OFFICE SUPPLIES	491
PAYROLL SERVICE FEES	212
POSTAGE	390
PRINTING & REPRODUCTION	453
PROFESSIONAL FEES	875
TELEPHONE	1,242
TRAVEL	360
UTILITIES	6,355
AMORTIZATION	217
50% OF MEALS & ENTERTAINMENT	 40
TOTAL	\$ 23,294

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

Desc	cription	Coi	Cash htrib 50%	ash rib 30%	 Total
MISCELLANEOUS	CONTRIBUTIONS	\$	2,443	\$ 	\$ 2,443
TOTAL		\$	2,443	\$ 0	\$ 2,443

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

Description	eginning of Year	 End of Year
DUE FROM MEMBERS INVESTMENT IN SCC RENT & UTILITY DEPOSITS	\$ 150 3,401	\$ 517 150 3,119
TOTAL	\$ 3,551	\$ 3,786

Federal Statements

Statement 5 - Form 1120S, Page 4, Schedule L, Line 18 - Other Current Liabilities

Description	Beginning of Year	_	End of Year		
ACCRUED PAYROLL TAX GIFT CERTIFICATES SALES TAX PAYABLE	\$ 1,860 1,505 1,913	\$	1,559 1,181 2,279		
TOTAL	\$ 5,278	\$	5,019		

Statement 6 - Form 1120S, Page 4, Schedule L, Line 21 - Other Liabilities

Description	. <u></u>	Beginning of Year	 End of Year
N/P - JULIE N/P - MOUNTAIN BIZWORKS N/P - SCC N/P - TRAVIS	\$	9,755 4,623 35,158 900	\$ 9,755 7,570 35,107 900
TOTAL	\$	50,436	\$ 53,332

Statement 7 - Form 1120S, Page 5, Schedule M-1, Line 3 - Expenses on Books Not on Return

Description	Amount		
FINES AND PENALTIES	\$	35	
TOTAL	\$	35	

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

Description	Amount		
INTEREST INCOME	\$	5	
TOTAL	\$	5	

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

Description	<i>P</i>	mount
FINES AND PENALTIES	\$	35
MEALS & ENTERTAINMENT		40
CHARITABLE CONTRIBUTIONS		2,443
TOTAL	\$	2,518

S Corporation Tax Return 2016 North Carolina Department of Revenue

For calendar year 2016, or other tax year beginning

16 and ending

610		CAFE, DD RD.	LLC NC 2	8806							DOR	Use Only	
Initia Final Shor	I Return Return t Year Reti Subchapter S		NC-Rehab NC-478 CD-479	А	mended Retui las Nonresider las Escheatabl	nt Shareh					2626 Secretary 104 NAIG	oloyer ID Numb 525465 of State ID Nu 12479 CS Code 2513	
FIRE	610	2880)6 26262!	5465	10424	79	722	513		IF	N N	FR	N
SR	N I	ICR N	478 N	47	9 N	AR	N	NRS	N	EF) N	QSSS	N
FIRE	STORM	CAFE	LLC										
610	HAYWO	OD RD				ASHE	VILL	E			NC :	28806	
	GR		274526	07		175	16		-1490	05	24C		0
	TA		60144	80		25	17			0	24D		0
		01	0	09		0	19			0	24E		0
		HCE	N	10	-14	905	20			0	26		0
		02	40093	11		0	21			0	27		0
	6 2	03	8277	13		0	22			0	31A		0
	0014	05	200	14	-14	905	24A			0	31B		0
	2018	06	0	15	1000	000	24B			0	33		0
		PFSP	P	PP	P00955	658	TN						
		Sch. A	Computation of Fra	nchise T	ах		Sch.	B Comp	outation	of Cor	orate Inc	come Tax	
		1. Net W			-1	5138		Shareholder's S				-149	05
		1 `	Company Exception	rh.	4	N 0093		Corporation Inc	, ,	ncomo (Lo	.co)		0
			nent in N.C. Tangible Proper sed Value of N.C. Tangible I	•		8277		Adjustments to (N.C. Taxable In		ncome (cc	(55)	-149	- 1
		I	e Amount			0093		Nonapportionab					0
		5. Total F	ranchise Tax Due			200	14.	Apportionable I	ncome			-149	
		1	tion for Franchise Tax Ext.			175		Apportionment				100.000	
		7. Tax C 8. Franch	redits iise Tax Due			175 25		Income Apportionable			N C	-149	05
			ise Tax Overpaid			0		Total Net Taxab		ocalca to	W.O.	-149	٠ ١
Sign Re	eturn Be	low	Refund Du	е		0		X Paymo	ent Du	е		25	
				DIDE									
Signature a	nd Title of Offi	cer		DIRE		orporate Tele	ephone Nu	umber		Date			
					<u>.</u>	82850					0955	658	
Signature of	f Paid Prepare	er			Pı	eparer's Tele				Prepare	er's FEIN, SS	N, or PT N	
			this return is accurate and 0, Raleigh, N.C. 27		. Returns are	due by ti	he 15th	day of the	4th mor		EIN r the end	SSN X	PTIN e vear.

Legal Name (First 10 Characters)

FIRESTORM

Federal Employer ID Number

262625465

CD-401S Line-by-Line Information

Sc	h. B Computation of Corporate Income Tax	<u> </u>	Sch. E Appraised Value of N.C. Tangible Property
19.	Amount of Line 18 Attributable to Nonresidents	•	1. County tax value of N.C. tangible property 15049
	Filing Composite	0	2. Appraised value of N.C. tangible property 8277
20.	Separately Stated tems of Income Attributable		
	to Nonresidents Filing Composite	0	Sch. F Other Information - All Taxpayers Must Complete Schedule
21.	N.C. Income Tax	0	1. a. State of incorporation NC
22.	Annual Report Fee (Include \$25.00 only if Form CD-479		b. Date incorporated 05 16 08
	is attached in paper form; otherwise, enter zero.)	0	2. Date of N.C. Certificate of Authority 05 16 08
23.	Add Lines 21 and 22	0	3. Trade or business: a. In N.C. CAFE & BOOK SA
24.	Payments and Credits	•	b. Everywhere CAFE & BOOK SA
	a. Income Tax Extension	0	4. Principal place of business ASHEVILLE NC
	b. Other Prepayments of Tax	0	5. a. What was the last year the RS redetermined
	c. Partnership (Include Form D-403, NC K-1)	0	the corporation's federal taxable income?
	d. Nonresident W/holding (Include 1099/W-2)	0	b. Were adjustments reported to N.C.?
	e. Tax Credits	0	c. If so, when?
25.	Add Lines 24a through 24e	0	6. Is corporation subject to franchise tax but not N.C. income tax because its'
26.	Income Tax Due	0	income tax activities are protected? (If yes, attach explanation) ${f N}$
27.	Income Tax Overpaid	0	
_	B B ()		
	x Due or Refund	25	Sch. G Ordinary Income (Loss) from Trade or Business Activities 1. a. Gross receipts or sales 274526
28.	Franchise Tax Due or Overpayment	25	
29.	Income Tax Due or Overpayment	25	274526
30.	Balance of Tax Due or Overpayment	25	OFF 1 1 1 1 1 5 5 6 0 3
31.	a. Interest	0	110042
	b. Penalties		
	c. Add Lines 31a and 31b	0 25	4. Net gain (loss) (Attach schedule) 5. Other income (loss) (Attach schedule) STMT 2 10141
	Total Due	∠5 0	100004
33.	Amount to be Refunded	U	CEP 5 2 2 4 4 5 6
٥.	b O Net Weeth		22420
	h. C Net Worth	80396	T 1010
	Total assets	75282	
	Total liabilities	5114	20001
	Line 1 minus Line 2	2114	CENTER 4 CO.E.1
	Treasury Stock	U	3000
5.	Accumulated depreciation, depletion, and amortization	20252	1120
	permitted for income tax purposes		14. a. Depreciation b. Depreciation included in cost of goods sold
6.	Line 3 minus Lines 4 and 5	-15138	b. Depreciation included in cost of goods sold
7.	Affiliated indebtedness (Attach schedule)	0	1120
		15120	c. Balance - Line 14a minus 14b
	Line 6 plus (or minus) Line 7	-15138 100.0000%	15. Depletion 0 16. Advertising 2102
9.	Apportionment factor		
10.	Net Worth	-15138	17. Pension, profit-sharing, and similar plans
_			18. Employee benefit programs
Sc	h. D Investment in N.C. Tangible Property	COOR	19. Other deductions (Attach schedule) STMT 5 23294
	Inventory valuation method	COST 27421	20. Total Deductions 143994 21. Ordinary Business Income (Loss) -14910
	Total inventories located in N.C.		21. Ordinary Business Income (Loss) —14910
	Total furniture, fixtures, and M & E located in N.C.	19029	Cab II Commutation of Income (1)
3.	Total land and buildings located in N.C.	0	Sch. H Computation of Income (Loss)
	Total leasehold improvements and	12504	1. Ordinary business income (loss) -14910
4.	other N.C. tangible property	13524	2. Net rental real estate income (loss)
		59974	
	Add Lines 1 through 4	022.2	
5.	Add Lines 1 through 4 Accumulated depreciation, depletion, and amortization		
5.	·	19881 40093	

CD-401S 2016 Page 3 (42)

Legal Name (First 10 Characters)	FIRESTORM	Federal Employer ID Number	262625465
Sch. H Computation of Income (Lo	ss)		
3. Other net rental income (loss)			0
4. Interest income			5
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)			0
10. Other income (loss) (Attach Schedule)			0
11. Total Income (Loss)			-14905
Sch. I Adjustments to Income (Los	ss)		
1. Additions to Federal Adjusted Gross Income (Lo	oss)		0
2. Deductions from Federal Adjusted Gross Income	e (Loss)		0
3. Adjustments to Income (Loss)			0

Sch. K Shareholders' Pro Rata Share Items

	The National Property of the National Control of the N	Shareholder 1	Shareholder 2	Shareholders' Total
1.	Identifying Number			
2.	Name	LIBERTIE	ANASTASIA	
3.	a. Address			
		ASHEVILLE_NC	ASHE <u>VILLE</u> NC	
	b. Is shareholder a nonresident	Yes X No	Yes X No	
4.	Ownership %	66.5301 %	16.8033%	100.0000%
5.	Share of income (loss)	-9916	-2505	-14905
6.	Additions to income (loss)	0	0	0
7.	Deductions from income (loss)	0	0	0
8.	Income subject to N.C. tax	-9916	-2505	-14905
9.	Share of tax credits	0	0	0
10.	Tax withheld from nonwage compensation	0	0	0
11.	Amount of Line 8 apportioned or allocated	_	_	
	to N.C. (nonresidents only)	0	0	0
12.	Separately stated items of income	_	_	
	(nonresidents only)	0	0	0
13.	Net tax paid for shareholder by	_	_	2
	corporation (nonresidents only)	0	0	0
14.	Is the corporation filing a Nonresident			
	Shareholder Agreement, Form NC-NA,			
	for this shareholder with this return?	Yes X No	Yes X No	
15.	Has the corporation filed a Nonresident			
	Shareholder Agreement, Form NC-NA,			
	for this shareholder in a previous tax year?	Yes X No	Yes X No	
	If yes, what tax year?			

Legal Name (First 10 Characters)

FIRESTORM

Federal Employer ID Number

262625465

		Beginnin	g of Tax	Year		End of	Tax Year
	Assets	(a)		(b)	Į	(c)	(d)
1. Ca	sh			4429			13246
2. a.	Trade notes and accounts receivable	1828				2173	
b.	Less allowance for bad debts	(0)	1828	(0)	2173
3. Inv	rentories			35950			27421
4. a.	U.S. government obligations			0			0
b.	State and other obligations			0			0
5. Tax	x-exempt securities			0			0
6. Oth	ner current assets (Attach schedule)			0			0
7. Loa	ans to shareholders			0			0
8. Mo	ortgage and real estate loans			0			0
9. Oth	ner investments (Attach schedule)			0			0
10. a.	Buildings and other depreciable assets	32556				32556	
b.	Less accumulated depreciation	(18754		13802	(19883)	12673
11. a.	Depletable assets	0				0	
b.	Less accumulated depletion	(0		0	(0)	0
12. Lar	nd (net of any amortization)			0			0
13. a.	Intangible assets (amortizable only)	1214				1214	
b.	Less accumulated amortization	(152		1062	(369)	845
14. Oth	ner assets (Attach schedule)	STMT 6		3551			3786
15. To :	tal Assets			60622			60144
	Liabilities and Shareholders' I	Equity					
16. Ac	counts payable			4123			16931
17. Mo	ortgages, notes, and bonds payable in less than 1 year			0			0
18. Oth	her current liabilities (Attach schedule)	STMT 7		5278			5019
19. Lo	ans from shareholders			0			0
20. Mo	ortgages, notes, and bonds payable in 1 year or more			0			0
21. Oth	her liabilities (Attach schedule)	STMT 8		50436			53332
22. Ca	pital stocks			217			217
23. Ad	ditional paid-in capital			8373			9873
24. Re	etained earnings			-7805			-25228
25. Ad	justments to shareholders' equity (Attach schedule)			0			0
26. Les	ss cost of treasury stock		(0)		(0
27. To	tal Liabilities and Shareholders' Equity		1	60622			60144
Sch. I	M-1 Federal Schedule						
1. Ne	t income (loss) per books	-17423	5.	Income recorded on be	ooks this	s year not included on	
2. Inc	come included on Federal Sch. K, Lines 1, 2, 3c, 4, 5a,			Federal Sch. K, Lines	1 throug	gh 10 (itemize):	
6,	7, 8a, 9 and 10 not recorded on books this year (itemize):			Tax-exempt interest		0	
						0	(
		0	6.	Deductions included o	n Feder	al Sch. K, Lines 1 through	
3. Ex	penses recorded on books this year not included on			12, 14l not charged ag	gainst bo	ook income	
Fed	deral Sch. K, Lines 1 through 12, and 14l (itemize):			this year (itemize):			
a.	Depreciation 0			Depreciation		0	
b.	Travel and entertainment 40					0	(
	STMT 9 35	75	7.	Add Lines 5 and 6			(
1 Δd	d Lines 1 through 3	-17348	8.	Income or Loss (Fed.	Sch. K.	Line 18)	-17348

Legal Name (First 10 Characters)

FIRESTORM

Federal Employer ID Number

262625465

Sch.	M-2	Analy	sis o	of I	N.C.	AAA

	N.C. Accumulated	N.C. Accumulated N.C. Other	
	Adjustments	Adjustments	Income Previously Taxed
Balance at beginning of year	-7805	0	0
2. Ordinary income from Sch. G, Line 21	0		
3. Other additions SEE STMT 10	5	0	
4. Loss from Sch. G, Line 21	(14910 ₎		
5. Other reductions SEE STATEMENT 11	(2518)	(0)	0
6. Compute Lines 1 through 5	-25228	0	0
7. Distributions other than dividend distributions	0	0	0
8. Balance at end of tax year	-25228	0	0

Sch. N Nonapportionable Income

n. N Nonapportionable inc	ome			
(A) Nonapportionable	(B) Gross Amounts	(C) Related Expenses	(D) Net Amounts	(E) Net Amounts Allocated
Income				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	-
. Nonapportionable Income Allocated t	to N.C.	'		0

2. Nonapportionable Income Allocated to N.C.

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

Sch. O	Computation	Ot	Apportionment	Factor

Part 1. Do	mestic Corporations and C	Other Corporations Not Appor	tioning Franchise or Income Outside N.C.	100.0000%
------------	---------------------------	------------------------------	--	-----------

Part 2. Corporations Apportioning Franchise or Income to N.C. and to Other Sta	ites
--	------

	1. Within North	Carolina	2. Total Ev	verywhere	
	(a) Beginning Period	(b) Ending Period	(a) Beginning Period	(b) Endin	g Period
1. Land	0	0	0		0
2. Buildings	0	0	0		0
3. Inventories	0	0	0		0
4. Other property	0	0	0		0
5. Total	0	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	5	0		0	
11. Payroll Factor		0		0	0.0000%
12. Sales Factor		0		0	0.0000%
13. Total of Factors					0.0000%
14. N.C. Apportionment Factor					0.0000%
Part 3. Corporations Apportioni	ng Franchise or Income	to N.C. and to Other	States Using Single Sales	Factor	0.0000%
Part 4. Special Apportionment					0.0000%

Legal Name FIRESTORM Federal Employer ID Number 262625465

_ 5	ch. K Shareholders' Shares of In	come, Adj	ustments, and Tax Credit	s (Contin	ueu)	
	Shareholder	3	Shareholder	4	Shareholder	Shareholder
1.	Identifying Number					
2.	Name JOEY		MARY			
3.	a. Address					
			ASHEVILLE NC	288		
	b. Is shareholder a nonresident		Yes	X No	Yes No	☐ Yes ☐ No
4.		3333%	8.33		%	%
5.	Share of income (loss)	-1242	-1	242	0	0
6.	Additions to income (loss)	0		0	0	0
7.	Deductions from income (loss)	1242	1	0 242	0	0
8.		-1242	-1	_	0	0
9.	Share of tax credits	0		0	0	0
10.	Tax withheld from nonwage comp	U		0	U	U
11.	Amount of Line 8 apportioned or allocated	0		0	0	0
40	to N.C. (nonresidents only)	U		U	O	O
12.	Separately stated items of income	0		0	0	0
10	(nonresidents only) Net tax paid for shareholder by	U		U	0	O
13.	corporation (nonresidents only)	0		0	0	0
1/	Is the corporation filing a Nonresident	O		O	0	O
14.	Shareholder Agreement, Form NC-NA,					
	for this shareholder with this return?	X No	Yes	X No	Yes No	☐ Yes ☐ No
15	Has the corporation filed a Nonresident	21 110	103	21 10		
	Shareholder Agreement, Form NC-NA,					
	for this shareholder in a previous tax year?	X No	Yes	X No	Yes No	Yes No
	If yes, what tax year?					
_						
	Shareholder		Shareholder		Shareholder	Shareholder
1.			Shareholder		Shareholder	Shareholder
1.			Shareholder		Shareholder	Shareholder
2.	Identifying Number		Shareholder		Shareholder	Shareholder
2.	Identifying Number Name a. Address					
2. 3.	Identifying Number Name a. Address b. Is shareholder a nonresident Yes	No	Shareholder Yes	No	Yes No	Yes No
 3. 4. 	Identifying Number Name a. Address b. Is shareholder a nonresident Ownership %	. No %		<u>"</u>	Yes No %	Yes No
 3. 4. 5. 	Identifying Number Name a. Address b. Is shareholder a nonresident Ownership % Share of income (loss)	No %			Yes No % O	Yes No %
 2. 3. 4. 5. 6. 	Identifying Number Name a. Address b. Is shareholder a nonresident Ownership % Share of income (loss) Additions to income (loss)	No % O O		% 0 0	Yes No % O O	Yes No %
 3. 4. 6. 7. 	Identifying Number Name a. Address b. Is shareholder a nonresident Ownership % Share of income (loss) Additions to income (loss) Deductions from income (loss)	No % 0 0 0 0		% 0 0 0	Yes No No % 0 0 0	Yes No No 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
2. 3. 4. 5. 6. 7. 8.	Identifying Number Name a. Address b. Is shareholder a nonresident Ownership % Share of income (loss) Additions to income (loss) Deductions from income (loss) Income subject to N.C. tax	No % O O O O O		% 0 0 0	Yes No % 0 0 0 0 0 0	Yes No % 0 0 0 0 0
2. 3. 4. 5. 6. 7. 8. 9.	Identifying Number Name a. Address b. Is shareholder a nonresident Ownership % Share of income (loss) Additions to income (loss) Deductions from income (loss) Income subject to N.C. tax Share of tax credits	No % O O O O O O O		% 0 0 0 0	Yes No % 0 0 0 0 0 0 0 0	Yes No % 0 0 0 0 0 0 0
2. 3. 4. 5. 6. 7. 8. 9. 10.	Identifying Number Name a. Address b. Is shareholder a nonresident Ownership % Share of income (loss) Additions to income (loss) Deductions from income (loss) Income subject to N.C. tax Share of tax credits Tax withheld from nonwage comp	No % O O O O O		% 0 0 0	Yes No % 0 0 0 0 0 0	Yes No % 0 0 0 0 0
2. 3. 4. 5. 6. 7. 8. 9.	Identifying Number Name a. Address b. Is shareholder a nonresident Ownership % Share of income (loss) Additions to income (loss) Deductions from income (loss) Income subject to N.C. tax Share of tax credits Tax withheld from nonwage comp Amount of Line 8 apportioned or allocated	No % 0 0 0 0 0 0 0		% 0 0 0 0 0	Yes No No % 0 0 0 0 0 0 0	Yes No % 0 0 0 0 0 0 0 0
2. 3. 4. 5. 6. 7. 8. 9. 10. 11.	Identifying Number Name a. Address b. Is shareholder a nonresident Ownership % Share of income (loss) Additions to income (loss) Deductions from income (loss) Income subject to N.C. tax Share of tax credits Tax withheld from nonwage comp Amount of Line 8 apportioned or allocated to N.C. (nonresidents only)	No % O O O O O O O		% 0 0 0 0	Yes No % 0 0 0 0 0 0 0 0	Yes No % 0 0 0 0 0 0 0
2. 3. 4. 5. 6. 7. 8. 9. 10.	Identifying Number Name a. Address b. Is shareholder a nonresident Ownership % Share of income (loss) Additions to income (loss) Deductions from income (loss) Income subject to N.C. tax Share of tax credits Tax withheld from nonwage comp Amount of Line 8 apportioned or allocated to N.C. (nonresidents only) Separately stated items of income	No % 0 0 0 0 0 0 0 0		% 0 0 0 0 0	Yes No % 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Yes No No % 0 0 0 0 0 0 0 0 0
2. 3. 4. 5. 6. 7. 8. 9. 10. 11.	Identifying Number Name a. Address b. Is shareholder a nonresident Ownership % Share of income (loss) Additions to income (loss) Deductions from income (loss) Income subject to N.C. tax Share of tax credits Tax withheld from nonwage comp Amount of Line 8 apportioned or allocated to N.C. (nonresidents only) Separately stated items of income (nonresidents only)	No % 0 0 0 0 0 0 0		% 0 0 0 0 0	Yes No No % 0 0 0 0 0 0 0	Yes No % 0 0 0 0 0 0 0 0
2. 3. 4. 5. 6. 7. 8. 9. 10. 11.	Identifying Number Name a. Address b. Is shareholder a nonresident Ownership % Share of income (loss) Additions to income (loss) Deductions from income (loss) Income subject to N.C. tax Share of tax credits Tax withheld from nonwage comp Amount of Line 8 apportioned or allocated to N.C. (nonresidents only) Separately stated items of income (nonresidents only) Net tax paid for shareholder by	No % 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		% 0 0 0 0 0 0	Yes No % 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Yes No No % 0 0 0 0 0 0 0 0 0
2. 3. 4. 5. 6. 7. 8. 9. 10. 11.	Identifying Number Name a. Address b. Is shareholder a nonresident Ownership % Share of income (loss) Additions to income (loss) Deductions from income (loss) Income subject to N.C. tax Share of tax credits Tax withheld from nonwage comp Amount of Line 8 apportioned or allocated to N.C. (nonresidents only) Separately stated items of income (nonresidents only) Net tax paid for shareholder by corporation (nonresidents only)	No % 0 0 0 0 0 0 0 0		% 0 0 0 0 0	Yes No % 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Yes No % 0 0 0 0 0 0 0 0 0 0
2. 3. 4. 5. 6. 7. 8. 9. 10. 11. 12.	Identifying Number Name a. Address b. Is shareholder a nonresident Ownership % Share of income (loss) Additions to income (loss) Income subject to N.C. tax Share of tax credits Tax withheld from nonwage comp Amount of Line 8 apportioned or allocated to N.C. (nonresidents only) Separately stated items of income (nonresidents only) Net tax paid for shareholder by corporation (nonresidents only) Is the corporation filing a Nonresident	No % 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		% 0 0 0 0 0 0	Yes No % 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Yes No % 0 0 0 0 0 0 0 0 0 0
2. 3. 4. 5. 6. 7. 8. 9. 10. 11. 12.	Identifying Number Name a. Address b. Is shareholder a nonresident Ownership % Share of income (loss) Additions to income (loss) Deductions from income (loss) Income subject to N.C. tax Share of tax credits Tax withheld from nonwage comp Amount of Line 8 apportioned or allocated to N.C. (nonresidents only) Separately stated items of income (nonresidents only) Net tax paid for shareholder by corporation (nonresidents only)	No % 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		% 0 0 0 0 0 0	Yes No % 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Yes No % 0 0 0 0 0 0 0 0 0 0
2. 3. 4. 5. 6. 7. 8. 9. 10. 11. 12.	Identifying Number Name a. Address b. Is shareholder a nonresident Ownership % Share of income (loss) Additions to income (loss) Deductions from income (loss) Income subject to N.C. tax Share of tax credits Tax withheld from nonwage comp Amount of Line 8 apportioned or allocated to N.C. (nonresidents only) Separately stated items of income (nonresidents only) Net tax paid for shareholder by corporation (nonresidents only) Is the corporation filing a Nonresident Shareholder Agreement, Form NC-NA,	No % 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Yes	% 0 0 0 0 0 0	Yes No % 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Yes No % 0 0 0 0 0 0 0 0 0 0 0
2. 3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13.	Identifying Number Name a. Address b. Is shareholder a nonresident Ownership % Share of income (loss) Additions to income (loss) Deductions from income (loss) Income subject to N.C. tax Share of tax credits Tax withheld from nonwage comp Amount of Line 8 apportioned or allocated to N.C. (nonresidents only) Separately stated items of income (nonresidents only) Net tax paid for shareholder by corporation (nonresidents only) Is the corporation filing a Nonresident Shareholder Agreement, Form NC-NA, for this shareholder with this return?	No % 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Yes	% 0 0 0 0 0 0	Yes No % 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Yes No % 0 0 0 0 0 0 0 0 0 0 0
2. 3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13.	Identifying Number Name a. Address b. Is shareholder a nonresident Ownership % Share of income (loss) Additions to income (loss) Deductions from income (loss) Income subject to N.C. tax Share of tax credits Tax withheld from nonwage comp Amount of Line 8 apportioned or allocated to N.C. (nonresidents only) Separately stated items of income (nonresidents only) Net tax paid for shareholder by corporation (nonresidents only) Is the corporation filing a Nonresident Shareholder Agreement, Form NC-NA, for this shareholder with this return? Has the corporation filed a Nonresident	No % 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Yes	% 0 0 0 0 0 0	Yes No % 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Yes No % 0 0 0 0 0 0 0 0 0 0 0
2. 3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13.	Identifying Number Name a. Address b. Is shareholder a nonresident Ownership % Share of income (loss) Additions to income (loss) Deductions from income (loss) Income subject to N.C. tax Share of tax credits Tax withheld from nonwage comp Amount of Line 8 apportioned or allocated to N.C. (nonresidents only) Separately stated items of income (nonresidents only) Net tax paid for shareholder by corporation (nonresidents only) Is the corporation filing a Nonresident Shareholder Agreement, Form NC-NA, for this shareholder with this return? Has the corporation filed a Nonresident Shareholder Agreement, Form NC-NA,	No % 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Yes	% 0 0 0 0 0 0	Yes No % 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Yes No % 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
2. 3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13.	Identifying Number Name a. Address b. Is shareholder a nonresident Ownership % Share of income (loss) Additions to income (loss) Deductions from income (loss) Income subject to N.C. tax Share of tax credits Tax withheld from nonwage comp Amount of Line 8 apportioned or allocated to N.C. (nonresidents only) Separately stated items of income (nonresidents only) Net tax paid for shareholder by corporation (nonresidents only) Is the corporation filing a Nonresident Shareholder Agreement, Form NC-NA, for this shareholder with this return? Has the corporation filed a Nonresident Shareholder Agreement, Form NC-NA,	No % 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Yes	% 0 0 0 0 0 0	Yes No % 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Yes No % 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0

CD-425 (42)

8-18-16

2016 Corporate Tax Credit Summary

North Carolina Department of Revenue

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

l	Logai Name (i ii	ot 10 On	laraotoro)		CLD I OIU I	i cacia	i Linploy	or ID Ital	11001	20202	3103	
	01			0	12	0	18B				0	
	02			0	15A	0	19				0	
	03			0	15B	0	20				0	
	04			0	16A	0	21	RF	N	CP	N	
	05			0	16B	0	21				0	
	06 RF	N	AA	Y	17A	0	22				0	
	06		1	.75	17B	0	27				0	
	07			0	18A	0						

Part 1. Franchise Tax Credits Not Subject to 50% of Tax Limit		
1. Short period credit for change in income year $365 - 0 = 0 \times 365$	0 = 1.	0
2. Revitalizing an income-producing historic mill facility	2.	0
3. Revitalizing a nonincome-producing historic mill facility	3.	0
4. Rehabilitating an income-producing historic structure (Article 3L)	4.	0
5. Rehabilitating a nonincome-producing historic structure (Article 3L)	5.	0
6. Other franchise and tax credits not subject to 50% of tax limit Investing in Recycling Facilities X Additional Annual Report Fee Paid	6.	175
7. Franchise tax credits not subject to 50% of tax limit carried over from previous years	7.	0
8. Total franchise tax credits not subject to 50% of tax limit	8.	175
Part 2. Computation of Franchise Tax Credits Taken in 2016		
9. Total franchise tax due	9.	200
Nonrefundable franchise tax credits	10.	175
1. Enter the lesser of Line 9 or 10	11.	175
2. Total franchise tax credits subject to 50% of tax limit taken in 2016	12.	0
3. Refundable franchise tax credits	13.	0
4. Franchise Tax Credits Taken in 2016	14.	175



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

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

Part 3	3. Income Tax Credits Not Subject to 50% of Tax Limit		
	(S Corporations enter only the amount of tax credits attributable to nonresidents filing composite or	Lines 15 through 22.)	
15.	Rehabilitating an income-producing historic structure (Article 3D)		
	A. Enter qualified rehabilitation expenditures	15a.	0
	B. Enter installment amount of credit	15b.	0
16.	Rehabilitating a nonincome-producing historic structure (Article 3D)		
	A. Enter rehabilitation expenses	16a.	0
	B. Enter installment amount of credit	16b.	0
17.	Revitalizing an income-producing historic mill facility		
	A. Enter qualified rehabilitation expenditures	17a.	0
	B. Enter credit amount	17b.	0
18.	Revitalizing a nonincome-producing historic mill facility		
	A. Enter rehabilitation expenses	18a.	0
	B. Enter installment amount of credit	18b.	0
19.	Rehabilitating an income-producing historic structure (Article 3L)	19.	0
20.	Rehabilitating a nonincome-producing historic structure (Article 3L)	20.	0
21.	Other income tax credits not subject to 50% of tax limit	21.	0
	Investing in Recycling Facilities Cogeneration Plant		
22.	Income tax credits not subject to 50% of tax limit carried over from previous years	22.	0
23.	Total income tax credits not subject to 50% of tax limit	23.	0
Part	4. Computation of Income Tax Credits Taken in 2016		
24.	N.C. net income tax due	24.	0
25.	Nonrefundable income tax credits	25.	0
	Enter lesser of Line 24 or 25	26.	0
	Total income tax credits subject to 50% of tax limit taken in 2016	27.	0
	Add Lines 26 and 27	28.	0
29.	Income tax credit adjustment (C Corporations only)	29.	0
	Income Tax Credits Taken in 2016	30.	0

Form CD-425 must be attached to the last page of Form CD-405 or CD-401S if a tax credit is taken. 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	 Amount
BEGINNING INVENTORY	\$ 35,950
PURCHASES	147,054
LESS: ENDING INVENTORY	 -27,421
TOTAL	\$ 155,583

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

Description	<u></u>	Amount	
DONATIONS	\$	10,141	
TOTAL	\$	10,141	

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

Officer Name	Comp	<u>ensation</u>
JOEY CONTRACTOR OF THE PROPERTY OF THE PROPERT	\$	10,504
MARY		8,506
ANASTASIA		8,632
LIBERTIE		6,834
TOTAL	\$	34,476

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

Description	<i></i>	Amount
LICENSES & PERMITS	\$	322
PAYROLL TAXES		5,726
PROPERTY TAXES		203
TOTAL	\$	6,251

North Carolina Statements

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

Description	 Amount
BANK SERVICE CHARGES	\$ 74
CAFE & BOOKSTORE SUPPLIES	1,820
COMPUTER & INTERNET EXPENSES	113
CREDIT CARD MERCHANT FEES	5,062
DE MINIMIS ASSETS < \$2,500	1,244
DUES & SUBSCRIPTIONS	1,204
INSURANCE - LIABILITY	695
INSURANCE - WORKERS' COMP.	1,374
JANITORIAL EXPENSE	1,073
OFFICE SUPPLIES	491
PAYROLL SERVICE FEES	212
POSTAGE	390
PRINTING & REPRODUCTION	453
PROFESSIONAL FEES	875
TELEPHONE	1,242
TRAVEL	360
UTILITIES	6,355
AMORTIZATION	217
50% MEALS AND ENTERTAINMENT	 40
TOTAL	\$ 23,294

Statement 6 - Form CD-401S, Page 4, Schedule L, Line 14 - Other Assets

Description	 Beginning of Year	 End of Year
DUE FROM MEMBERS INVESTMENT IN SCC	\$ 150	\$ 517 150
RENT & UTILITY DEPOSITS	 3,401	 3,119
TOTAL	\$ 3,551	\$ 3,786

Statement 7 - Form CD-401S, Page 4, Schedule L, Line 18 - Other Current Liabilities

Beginning of Year		(End of Year
\$	1,860 1,505 1,913	\$	1,559 1,181 2,279
\$	5,278	\$	5,019
		\$ 1,860 1,505 1,913	of Year (

North Carolina Statements

Statement 8 - Form CD-401S, Page 4, Schedule L, Line 21 - Other Liabilities

Description	 Beginning of Year	_	End of Year
N/P - JULIE N/P - MOUNTAIN BIZWORKS N/P - SCC N/P - TRAVIS	\$ 9,755 4,623 35,158 900	\$	9,755 7,570 35,107 900
TOTAL	\$ 50,436	\$_	53,332

Statement 9 - Form CD-401S, Page 4, Schedule M-1, Line 3b - Expenses Recorded on Books, Not Return

Description	Am	nount
FINES AND PENALTIES	\$	35
TOTAL	\$	35

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

Description		 Amount
INTEREST	INCOME	\$ 5
TOTA	AL.	\$ 5

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

Description	 Amount
CHARITABLE CONTRIBUTIONS	\$ 2,443
MEALS & ENTERTAINMENT	40
FINES AND PENALTIES	35
TOTAL	\$ 2,518

NC Retained Earnings Reconciliation Worksheet				
	For calendar year 2016, or other tax year beginni	<u>ng</u> , ending		
Name		NC Secretary of State ID Number	Federal Emp	oloyer ID Number
FIRESTORM C	CAFE, LLC	1042479	2626	25465
	Retained Earnings - Unappropriated Accumulated Adjustments Account	<u>0</u> -25,228		
	Other Adjustments Account			
	Undistributed Txbl Inc Previously Taxed	0		
	Schedule L, Line 24 - Retained Earnings	-25,228		

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	-7,805	0	0	0	-7,805
Ordinary Inc (Loss)	-14,910				-14,910
Other Additions	5				5
Other Reductions	2,518				2,518
Distributions					
End Yr Bal	-25,228	0	0	0	-25,228