Form 887 -S

### IRS e-file Signature Authorization for Form 1120S

▶ Return completed Form 8879-S to ERO. (Don't send to the IRS.)

Go to www.irs.gov/Form8879S for the latest information.

OMB No. 1545-0123

Department of the Treasury Internal Revenue Service Name of corporation

For calendar year 2017, or tax year beginning

, and ending

Employer identification number SIMPSON SALES UNLIMITED INC. 80-0026103 Part I Tax Return Information Whole dollars onl Gross receipts or sales less returns and allowances (Form 1120S, line 1c) 477 552 Gross profit (Form 1120S, line 3) 201 458 2 Ordinary business income (loss) (Form 1120S, line 21) 15,436 3 Net rental real estate income (loss) (Form 1120S, Schedule K, line 2) 4 Income (loss) reconciliation (Form 1120S, Schedule K, line 18) 14 786 Declaration and Signature Authorization of Officer (Be sure to get a cop of the corporation's return) Part I

Under penalties of perjury, I declare that I am an officer of the above corporation and that I have examined a copy of the corporation's 2017 electronic income tax return and accompanying schedules and statements and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts shown on the copy of the corporation's electronic income tax return. I consent to allow my electronic return originator (ERO), transmitter, or intermediate service provider to send the corporation's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the corporation's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the corporation's electronic income tax return and, if applicable, the corporation's consent to electronic funds withdrawal.

| Officer's PIN: check one box onl | Officer's | PIN: | check | one | box | only |
|----------------------------------|-----------|------|-------|-----|-----|------|
|----------------------------------|-----------|------|-------|-----|-----|------|

| X | l authorize   | MARCKRES          |                  | COMPANY | INC. | to enter my PIN     | 26103 as my signature |
|---|---------------|-------------------|------------------|---------|------|---------------------|-----------------------|
|   | on the corpor | ation's 2017 elec | tronically filed |         | Doi  | n't enter all zeros |                       |
|   |               |                   |                  |         |      |                     |                       |

As an officer of the corporation, I will enter my PIN as my signature on the corporation's 2017 electronically filed income tax return.

Officer's signature

02/03/18 Title > PRESIDENT

WADE E SIMPSON

#### Ш **Certification and Authentication**

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

03018287781 Don't enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2017 electronically filed income tax return for the corporation indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 3112, IRS e-file Application and Participation, and Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature

JULIE A. MARCKRES CPA 02/03/18

ERO Must Retain This Form — See Instructions Don't Submit This Form to the IRS Unless Requested To Do So

For Paperwork Reduction Act Notice, see instructions.

Form 8879-S (2017)

Form 1120S

# . 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. Go to www.irs.gov/Form1120S for instructions and the latest information.

OMB No. 1545-0123

2017

Department of the Treasury Internal Revenue Service For calendar ear 2017 or tax ear be innin . endin S election effective date D **Employer identification number** 01/01/02 SIMPSON SALES UNLIMITED INC. TYPE Business activity code 80-0026103 number (see Instructions) OR Number, street, and room or suite no. If a P.O. box, see instructions. Date incorporated 238290 PO BOX 186 12/21/2001 PRINT Check if Sch. M-3 City or town, state or province, country, and ZIP or foreign postal code Total assets (see instructions) attached HYDE PARK VT 05655 \$ 91 899 Is the corporation electing to be an S corporation beginning with this tax year? Yes X No If "Yes," attach Form 2553 if not already filed Check if: (1) Final return (2) Name change (3) 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 1 Caution. Include onl trade or business income and ex enses on lines 1a throu h 21. See the instructions for more information. 1a Gross receipts or sales Returns and allowances 1b Balance. Subtract line 1b from line 1a 477 552 1c Income 2 Cost of goods sold (attach Form 1125-A) 276 094 Gross profit. Subtract line 2 from line 1c 3 201 458 3 4 Net gain (loss) from Form 4797, line 17 (attach Form 4797) Other income (loss) (see instructions—attach statement) ... 5 5 6 Total income lose Add lines 3 through 5 201 458 6 7 50 722 Compensation of officers (see instructions-attach Form 1125-E) . . . . 7 (see instructions for limitations) 8 59 607 8 9 Repairs and maintenance 38 9 10 10 11 194 Rents ..... 11 12 Taxes and licenses .... 667 12 375 13 Interest ..... ..... 13 14 Depreciation not claimed on Form 1125-A or elsewhere on return (attach Form 4562) 345 14 Depletion (Do not deduct oil and gas depletion.) 15 15 ions 16 Advertising 6 224 16 17 17 Deducti Employee benefit programs 18 18 19 Other deductions (attach statement) 43 850 19 Total deductions. Add lines 7 through 19 ...... 20 186 022 20 ..... Ordina business income loss . Subtract line 20 from line 6 ..... 21 15 436 21 Excess net passive income or LIFO recapture tax (see instructions) 22a Tax from Schedule D (Form 1120S) 22h **Payments** c Add lines 22a and 22b (see instructions for additional taxes) 22c 2017 estimated tax payments and 2016 overpayment credited to 2017 23a Tax deposited with Form 7004 23b Credit for federal tax paid on fuels (attach Form 4136) C and Add lines 23a through 23c 23d 24 Estimated tax penalty (see instructions). Check if Form 2220 is attached 24 Amount owed. If line 23d is smaller than the total of lines 22c and 24, enter amount owed 25 25 26 Overpayment. If line 23d is larger than the total of lines 22c and 24, enter amount overpaid 26 27 Enter amount from line 26 Credited to 2018 estimated tax Refunded > 27 Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, May the IRS discuss this return with the preparer and to the best of my knowledge and bellef, it is true, correct, and complete. Declaration of preparer (other than taxpayer) shown below see instructions? X Yes is based on all information of which preparer has any knowledge. No Sign PRESIDENT Here WADE E SIMPSON Signature of officer Title Print/Type preparer's name Preparer's signature Date Check PTIN Paid JULIE A. MARCKRES, CPA JULIE A. MARCKRES, CPA 02/03/18 self-employed P00295705 Preparer Firm's name ► MARCKRES NORDER AND COMPANY INC. Firm's EIN ▶ 03-0322133 Use Only Firm's address PO BOX 732 MORRISVILLE 05661 Phone no. 802 - 888 - 7781Form 1120S (2017) For Paperwork Reduction Act Notice, see separate instructions.

| 1  | Check accounting method:               | a Cash b                                | X Accrual                         |   |                         | •                                      | Yes                     | Νo  |
|----|--|---|-----------------------------------|---|-------------------------|--|-------------------------|-----|
|    |  | c Other (speci                          | fy)                               |   |                         |  |                         |     |
| 2  | See the instructions and enter the     |   |                                   |   |                         |  |                         |     |
|    | a Business activity ► RETAIL           | * |                                   | duct or service ► GARAG                 |                         |  |                         |     |
| 3  | At any time during the tax year, w     |   |                                   |   |                         |  |                         |     |
|    | nominee or similar person? If "Ye      | s," attach Schedule E                   | 3-1, Information on               | Certain Shareholders of an              | S Corporation           |  |                         | X   |
| 4  | At the end of the tax year, did the    | •                                       |                                   |   |                         |  |                         |     |
| а  | Own directly 20% or more, or ow        | n, directly or indirectly               | , 50% or more of t                | he total stock issued and ou            | tstanding of any        |  |                         |     |
|    | foreign or domestic corporation?       | For rules of construct                  | ive ownership, see                | Instructions. If "Yes," compl           | lete (i) through (v)    |  |                         |     |
|    | below                                  |   |                                   |   |                         |  |                         | X   |
|    | (i) Name of Corporation                |   | (II) Employer<br>Identification   | (iii) Country of                        | (iv) Percentage of      | (v) If Percentage in (i                |                         | )%, |
|    | (i) Name of Corporation                |   | Number (if any)                   | Incorporation                           | Stock Owned             | Enter the Date (i<br>a Qualified Subch | apter S                 |     |
|    |  |   |                                   |   |                         | Subsidiary Election 1                  | Was Mad                 | de  |
|    |  |   |                                   |   |                         |  |                         |     |
|    |  |   |                                   |   |                         |  |                         |     |
|    |  |   |                                   |   |                         |  |                         |     |
|    | <u> </u>                               |   |                                   |   |                         |  |                         |     |
| b  | Own directly an interest of 20% o      |   | •                                 |   | •                       |  |                         |     |
|    | capital in any foreign or domestic     |   |                                   |   | eneficial interest of a |  |                         | 3.7 |
|    | trust? For rules of constructive ov    | vnershi , see instructi                 | ons. If "Yes," com                | lete i throu h v below                  |                         |  |                         | Х   |
|    |  |   | (II) Employer                     |   | (iv) Country of         | (v) Meximun                            |                         |     |
|    | (i) Name of Entity                     |   | ldentification<br>Number (if any) | (III) Type of Entity                    | Organization            |  | in Profit,<br>r Capital | •   |
|    |  |   | realinear (ii diriy)              |   |                         | 2000, 0                                | - Gapilar               |     |
|    |  |   |                                   |   |                         |  |                         |     |
|    |  |   |                                   |   |                         |  |                         |     |
| 5a | At the end of the tax year, did the    | corporation have any                    | outstanding share                 | es of restricted stock?                 |                         |  |                         | X   |
|    | If "Yes," complete lines (i) and (ii)  |   | <b>J</b>                          | •                                       |                         |  |                         |     |
|    | (i) Total shares of restricted stor    |   |                                   |   | <b>•</b>                |  |                         |     |
|    | (ii) Total shares of non-restricted    | -41-                                    |                                   |   |                         |  |                         |     |
| b  | At the end of the tax year, did the    |   |                                   |   |                         | •• ••• •                               |                         | Х   |
|    | If "Yes," complete lines (i) and (ii)  | •                                       | J                                 | •                                       | *****                   |  |                         |     |
|    | (i) Total shares of stock outstand     |   | tax vear                          |   | <b>•</b>                |  |                         |     |
|    | (ii) Total shares of stock outstand    | _                                       |                                   |   |                         | •                                      |                         |     |
| 6  | Has this corporation filed, or is it r | -                                       |                                   |   |                         |  |                         |     |
|    | information on any reportable tran     | •                                       | -                                 |   | •                       |  |                         | Χ   |
| 7  | Check this box if the corporation i    |   |                                   |   |                         | ( <del></del>                          |                         |     |
|    | If checked, the corporation may h      | ave to file Form 8281                   | , Information Retu                | irn for Publicly Offered Origin         | nal Issue Discount      | _                                      |                         |     |
|    | Instruments.                           |   |                                   |   |                         |  |                         |     |
| 8  | If the corporation: (a) was a C cor    | poration before it elec                 | ted to be an S co                 | poration or the corporation             | acquired an             |  |                         |     |
|    | asset with a basis determined by       | reference to the basis                  | of the asset (or th               | ne basis of any other propert           | y) in                   |  |                         |     |
|    | the hands of a C corporation and       | (b) has net unrealized                  | d built-in gain in ex             | cess of the net recognized t            | ouilt-in gain           |  |                         |     |
|    | from prior years, enter the net unr    | ealized built-in gain re                | educed by net reco                | gnized built-in gain from pri           | or years (see           |  |                         |     |
|    | instructions)                          |   | -                                 |   | \$                      |  |                         |     |
| 9  | Enter the accumulated earnings a       |   |                                   |   |                         |  |                         |     |
| 0  | Does the corporation satisfy both      |   |                                   | *                                       |                         | • • •                                  |                         |     |
| а  | The corporation's total receipts (se   |   |                                   | ss than \$250,000                       |                         |  |                         |     |
|    | The corporation's total assets at t    |   |                                   |   |                         |  |                         | X   |
|    | If "Yes," the corporation is not req   | <u> </u>                                |                                   |   |                         |  |                         |     |
| 1  | During the tax year, did the corpor    | •                                       |                                   |   | en, or had the          |  |                         |     |
|    | terms modified so as to reduce th      | •                                       |                                   | <del>_</del>                            |                         |  |                         | Х   |
|    | If "Yes," enter the amount of princ    |   |                                   | •                                       |                         |  |                         |     |
| 2  |  | d subchapter S subsi                    | diary election term               | ninated or revoked? If "Yes."           | see instructions        |  |                         | X   |
|    | Did the corporation make any pay       |   |                                   |   |                         |  | X                       |     |
|    | If "Vee " did the cor, oration file or |   |                                   | • |                         |  | X                       |     |

Form 1120S (2017)

| Form 1                                    | 120S   | 2017 SIMPSON SALES UNLIMITED INC. 80-00261   | 03                                      |                 | Pa e 3            |
|---|--------|--|---|-----------------|-------------------|
| Sche                                      | dule   | K Shareholders' Pro Rata Share Items   |   |                 | Total amount      |
|   | 1      | Ordinary business income (loss) (page 1, line 21)  |   | 1               | 15 436            |
|   | 2      | Net rental real estate income (loss) (attach Form 8825)  |   | _               |                   |
|   |        | Other gross rental income (loss) 3a  |   | _               |                   |
|   |        | Expenses from other rental activities (attach statement) 3b  |   |                 |                   |
| _   | c      | Other water the control of the Charles the |   | 3c              |                   |
| SSC                                       | 4      |  |   |                 |                   |
| Ę   | 5      | Interest income Dividends: a Ordinary dividends  |   | 5a              |                   |
| Ë   | J      |  |   | Ja              |                   |
| ncome (Loss)                              | •      | • • • • • • • •  |   |                 |                   |
| =   | 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))   |   | 8a              |                   |
|   |        | Collectibles (28%) gain (loss)   |   |                 |                   |
|   | C      | Unrecaptured section 1250 gain (attach statement) 8c   |   |                 |                   |
|   | 9      | Net section 1231 gain (loss) (attach Form 4797)  |   | 9               |                   |
|   | 10     | Other income loss see instructions T e ▶   |   | 10              |                   |
| 20  | 11     | Section 179 deduction (attach Form 4562)   |   | 11              | CEO               |
| Deductions                                |        | Charitable contributions SEE STMT  | · <del>4</del> .                        | 12a             | 650               |
| ğ   | b      | Investment interest expense  |   | 12b             |                   |
| Ö   | C      | Section 59(e)(2) expenditures (1) Type ► (2) Am  | ount <b>&gt;</b>                        | 12c 2           |                   |
|   | а      | Other deductions see instructions  |   | 12d             |                   |
|   |        | Low-income housing credit (section 42(j)(5))   |   | 13a             |                   |
|   | b      | Low-income housing credit (other)  |   | 13b             |                   |
| <b>₹</b> 3                                |        | Qualified rehabilitation expenditures (rental real estate) (attach Form 3468, if applicable)   |   | 13c             |                   |
| Credits                                   | d      | Other rental real estate credits (see instructions) Type   |   | 13d             |                   |
| Ü   |        | Other rental credits (see instructions) Type ▶   |   | 13e             |                   |
|   | f      | Blofuel producer credit (attach Form 6478)   |   | 13f             |                   |
|   |        | Other credits see instructions   |   | 13              |                   |
|   |        | Name of country or U.S. possession ▶   |   | 446             |                   |
|   |        | Gross income from all sources  |   | 14b             |                   |
|   | C      | Gross income sourced at shareholder level  | •                                       | 14c             |                   |
|   |        | Foreign gross income sourced at corporate level  |   | 14d             |                   |
| <u>v</u>                                  |        | Passive category   |   | 14e             |                   |
| Ö   |        | General category   |   | 14f             |                   |
| 띯   | T      | Other (attach statement)   | • | 171             |                   |
| Transactions                              |        | Deductions allocated and apportioned at shareholder level  |   | 14              |                   |
|   |        | Interest expense   | •                                       | 14h             |                   |
| ign                                       | n      | Other  |   | 1711            |                   |
| Foreig                                    |        | Deductions allocated and apportioned at corporate level to foreign source income   |   | 141             |                   |
| <u></u>                                   |        | Passive category   |   | 14'             |                   |
|   |        | General category   |   | 14k             |                   |
|   | K      | Other (attach statement)   |   | 176             |                   |
|   |        | Other information  Total foreign taxes (check one): ▶ ☐ Paid ☐ Accrued   |   | 141             |                   |
|   |        |  |   | 14m             |                   |
|   |        | Reduction in taxes available for credit (attach statement)  Other foreign tax information (attach statement  |   | 1-7111          |                   |
|   |        | <del></del>  |   | 15a             | -137              |
| a a w                                     |        | Post-1986 depreciation adjustment  | • | 15b             | 107               |
| te i                                      |        | Adjusted gain or loss  |   | 15c             |                   |
|   |        | Depletion (other than oil and gas)   |   | 15d             |                   |
| Alternative<br>Minimum Tax<br>(AMT) Items |        | Oil, gas, and geothermal properties – gross income   |   | 15u<br>15e      |                   |
| -50                                       |        | Oil, gas, and geothermal properties deductions   | • •                                     | 15 <del>6</del> |                   |
| <u>ص</u> .                                |        | Other AMT items attach statement   |   | 16a             |                   |
| ctin                                      |        | Tax-exempt interest income   |   | 16b             |                   |
| ffe<br>nol                                |        | Other tax-exempt income  |   | 16c             |                   |
| Items Affecting<br>Shareholder<br>Basis   | ر<br>د | Nondeductible expenses   |   | 16d             |                   |
| Sh  |        | Re a ment of loans from shareholders   | •••                                     | 16e             | 4 693             |
| =   | ᅜ      | The a ment of logic from engineers   |   |                 | Form 1120S (2017) |

| Sc       | n 1120S 2017 SIMPSON SALES UNLI<br>hedule K Shareholders' Pro Rata Share Items               |              | INC.              |                                  | 80-00      | 026103      | 7                 | P<br>Total amount | Pae4  |
|----------|--|--------------|-------------------|----------------------------------|------------|-------------|-------------------|-------------------|-------|
| Other    | to Dividend distributions paid from accumulated d Other items and amounts (attach statement) | earnings ar  | nd profits        |                                  |            |             | 17a<br>17b<br>17c |                   |       |
| Recon-   | 18 Income/loss reconciliation. Combine the an column. From the result, subtract the sum of   | nounts on li | nes 1 through     | n 10 in the far<br>through 12d a | right      |             | 18                | 14                | 706   |
| Scl      | redule L Balance Sheets per Books  |              | eginning of tax y |                                  |            | •           | End of tax y      |                   | 700   |
|          | Assets   | а            |                   | b                                |            | c           |                   | d                 |       |
| 1        | Cash   | -            |                   |                                  | 055        | ŭ           |                   | 19 2              | 239   |
| 2a       | Trade notes and accounts receivable  | 42           | 925               |                                  |            | 15          | 824               |                   |       |
| b        | Less allowance for bad debts   |              |                   | 42                               | 925        | <del></del> |                   | 15 8              | 324   |
| 3        | Inventories  |              |                   |                                  | 733        |             |                   | 47 (              |       |
| 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   | 59           | 859               |                                  |            | 59          | 859               |                   |       |
| b        | Less accumulated depreciation  | 41           | 712               | 18                               | 147        | 50          | 057               | 9 8               | 302   |
| 11a      | Depletable assets  |              |                   |                                  |            |             |                   |                   |       |
| b        | Less accumulated depletion   |              |                   |                                  |            |             |                   |                   |       |
| 12       | Land (net of any amortization)   |              |                   |                                  |            |             |                   |                   |       |
| 13a      | Intangible assets (amortizable only)   |              |                   |                                  |            |             |                   |                   |       |
| b        | Less accumulated amortization  |              |                   |                                  |            |             |                   |                   |       |
| 14       | Other assets (attach statement)  |              |                   | 117                              | 0.60       |             |                   | 01.0              | 200   |
| 15       | Total assets   |              |                   | 117                              | 860        |             |                   | 91 8              | 399   |
| 40       | Liabilities and Shareholders' Equity   |              |                   | 1 7                              | O E O      |             |                   | 11.               | 104   |
| 16       | Accounts payable   |              |                   | 10                               | 053<br>000 |             |                   | 14 1              | 000   |
| 17<br>18 | Mortgages, notes, bonds payable in less than 1 year  |              |                   | 37                               | 906        |             |                   | 19 3              |       |
| 19       | Other current liabilities (attach statement) STMT 3  |              |                   |                                  | 064        |             |                   |                   | 370   |
| 20       | Loans from shareholders  Mortgages, notes, bonds payable in 1 year or more                   |              |                   |                                  | 336        |             |                   |                   | 797   |
| 21       | Other liabilities (attach statement)   |              |                   | 1. 2.                            | 550        |             |                   | 3                 | , , , |
| 22       | Comital stants   |              |                   |                                  | 100        |             |                   |                   | 100   |
| 23       | Additional hold in conital   |              |                   | 35                               | 467        |             |                   | 35 4              |       |
| 24<br>25 | Retained earnings Adjustments to shareholders' equity (attach statement)                     |              |                   | -10                              |            |             |                   |                   | 720   |
| 26<br>27 | Less cost of treasury stock  Total liabilities and shareholders' e uit                       |              |                   | 117                              | 860        |             |                   | 91 8              | 399   |

| -2-         | n 1120S 2017 SIMPSON SALES UN<br>hedule M-1 Reconciliation of Income   |  | . 80-0026103<br>With Income (Loss) per Return   | Pa e 5  |
|-------------|--|--|---|---|
| 1<br>2      | Note: The co oration ma be re  Net income (loss) per books  Income included on Schedule K, lines 1, 2, 3c, 4, 5a, 6, 7, 8a, 9, and 10, not recorded on books this year (itemize) | uired to file Schedule M<br>14 786     |   |   |
| 3<br>a<br>b | Expenses recorded on books this year not included on Schedule K, lines 1 through 12 and 14l (itemize):  Depreciation \$ Travel and entertainment \$                              |  | Deductions included on Schedule K, lines 1 through 12 and 14l, not charged against book income this year (itemize):  Depreciation \$  Add lines 5 and 6 |   |
| 4<br>Sch    | Add lines 1 throu h 3  nedule M-2 Analysis of Accumulated  Undistributed Taxable Inc   |  | 8 Income loss Schedule K line 18. Line 4 less line ount, Other Adjustments Account, a   | a7 14 786   |
|             |  | (a) Accumulated<br>adjustments account | · · · · · · · · · · · · · · · · · · ·   | (c) Shareholders' undistributed taxable income previously taxed |
| 1<br>2<br>3 | Balance at beginning of tax year Ordinary income from page 1, line 21 Other additions  |  | 066<br>436  |   |
| 4<br>5<br>6 | Loss from page 1, line 21 Other reductions STMT 4 Combine lines 1 through 5  | 4                                      | 650<br>720  |   |
| 7<br>8      | Distributions other than dividend distributions  Balance at end of tax ear. Subtract line 7 from line 6  | 4                                      | 720   |   |

Form 1120S (2017)

Form 1125

#### **Cost of Goods Sold**

(Rev. October 2016)

Department of the Treasury
Internal Revenue Service

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

OMB No. 1545-0123

| Name |  | Employer identification nur | nber  |      |
|------|--|-----------------------------|-------|------|
| S    | IMPSON SALES UNLIMITED INC.  | 80-0026103                  |       |      |
| 1    | Inventory at beginning of year   | 1                           | 41    | 733  |
| 2    | Purchases  | <br>2                       | 281   | 395  |
| 3    | Cost of labor  | 3                           |       | +    |
| 4    | Additional Section 200A costs (attach schedule)  | 4                           |       |      |
| 5    | and data (attach concepts)   | <br>5                       |       |      |
| 6    | Total. Add lines 1 through 5   | 6                           | 323   | 128  |
| 7    | Inventory at end of year   | 7                           | 47    | 034  |
| 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                           | 276   | 094  |
| 9a   | Check all methods used for valuing closing inventory:  | •                           |       |      |
|      | (i) X Cost   |                             |       |      |
|      | (ii) Lower of cost or market   |                             |       |      |
|      | (iii)  |                             |       |      |
| b    | Check if there was a writedown of subnormal goods  |                             |       | ٦ .  |
| C    | Check if the LIFO inventory method was adopted this tax year for any goods (if checked, attach Form 970)           |                             | `` ▶  | 7    |
| ď    | If the LIFO inventory method was used for this tax year, enter amount of closing inventory computed                |                             | -     | _    |
|      | under LIFO   | 9d                          |       |      |
| e    | If property is produced or acquired for resale, do the rules of section 263A apply to the entity? See instructions | Y                           | es    | No   |
| f    | Was there any change in determining quantities, cost, or valuations between opening and closing inventory? If      |                             |       |      |
|      | attach explanation   | Y                           | es [2 | √ No |
|      |  |                             | -     |      |

For Paperwork Reduction Act Notice, see Instructions.

Form 1125-A (Rev. 10-2016)

Form 1125-E

## **Compensation of Officers**

(Rev. October 2016

Attach to Form 1120, 1120-C, 1120-F, 1120-REIT, 1120-RIC, or 1120S.

Information about Form 1125-E and its separate instructions is at www.irs.gov/form1125e.

OMB No. 1545-0123

Department of the Treasury Internal Revenue Service

SIMPSON SALES UNLIMITED INC.

Employer Identification number 80-0026103

Note: Complete Form 1125-E only if total receipts are \$500,000 or more. See instructions for definition of total receipts.

| (a) Name of officer  |  | (b) Social security number (see instructions)         | (c) Percent of<br>time devoted to<br>business | Percent of sto | ock owned<br>(e) Preferred | (f) Amount of compensation                       |
|--|--|---|---|----------------|----------------------------|--|
| 1 WAD  | E E SIMPSON  | 009-34-9001   | 100.000%                                      | 100.000%       | 9/                         | 50,722   |
|  |  |   | 9   |                | %                          | ,  |
|  |  |   | 9   |                | 9/                         |  |
|  |  |   | 9   |                | 9                          |  |
|  |  |   | 9   |                | %                          | •,   |
|  |  |   | 9   | %              | %                          | ř  |
|  |  |   | %   | %              |                            | •.   |
| ·luedawa   |  | TO THE OWN THE    | 9/  | % _            |                            |  |
|  |  |   | <br>%   | %              |                            |  |
| ***************************************                    |  |   |   |                |                            | - · ·  |
| mandonness series et Schille publiche                      |  | WELDOW MICHIGAN AND AND AND AND AND AND AND AND AND A | 9   | % _            | <u> </u>                   |  |
| · MARGINE SPANNE (M. M. M |  |   | 9   | %              | %                          |  |
| ***************************************                    |  |   | % و   | % _            | %                          |  |
|  |  |   | %   | %              | %                          |  |
|  |  |   |   |                |                            | . *************************************          |
| -  |  |   | ٧   | <u>%</u>       | 9/                         |  |
| ***************************************                    |  |   | 9   | <u></u> %      |                            |  |
| **************************************                     |  |   |   | %_             | ٧                          | unguunuu ana an |
| 5 . v. v. v  |  |   | 9/  |                |                            |  |
| · · · · · · · · · · · · · · · · · · ·                      |  |   | 9/  |                |                            |  |
|  |  |   | 9   | <u></u> %%     | %                          |  |
|  |  |   | %   | %              | %                          |  |
| 2 Tota   | al compensation of officers  |   |   |                |                            | 50,722   |
| 3 Con  | npensation of officers claimed on Form 1125-A or elsew   | rhere on return                                       |   |                | 3                          |  |
| app  | tract line 3 from line 2. Enter the result here and on For<br>ropriate line of your tax return<br>rwork Reduction Act Notice, see separate instruction |   | 2 or the                                      |                | , <b>4</b>                 | 50,722<br>rm <b>1125-E</b> (Rev. 10-2016)        |

SIM6103 SIMPSON SALES UNLIMITED INC.

80-0026103

## **Federal Statements**

FYE: 12/31/2017

### Statement 1 - Form 1120S Pa e 1 Line 19 - Other Deductions

#### **Amount**

1,674 808 1,750 49 301 2,244 10,432 1,622 3,182 125 620 1,750 325 5,498 1,356 10,677 552 885 43,850

#### Statement 2 - Form 1120S Pa e 3 Schedule K Line 12a - Cash Contributions

\$

| Descri tion              | Cash<br>Contrib 50% |     | Cash<br>Contrib 30% |   | Qualified<br>Disaster |   | Total     |  |
|--------------------------|---------------------|-----|---------------------|---|-----------------------|---|-----------|--|
| CHARITABLE CONTRIBUTIONS | \$                  | 650 | \$                  |   | \$                    |   | \$<br>650 |  |
| TOTAL                    | \$                  | 650 | \$                  | 0 | \$                    | 0 | \$<br>650 |  |

#### Statement 3 - Form 1120S Pa e 4 Schedule L Line 18 - Other Current Liabilities

| Descri tion                        | eginning<br>of Year | End<br>of Year |                |  |
|------------------------------------|---------------------|----------------|----------------|--|
| PAYROLL LIABILITIES                | \$<br>3,308         | \$             | 7,266          |  |
| SALES TAX PAYABLE ADVANCE DEPOSITS | 5,012<br>26,532     |                | 1,975<br>8,594 |  |
| VT CORP TAX PAYABLE                | 250                 |                | 250            |  |
| CREDIT CARD PAYABLE                | 2,804               |                | 1,226          |  |
| TOTAL                              | \$<br>37,906        | \$             | 19,311         |  |

#### Statement 4 - Form 1120S Pa e 5 Schedule M-2 Line 5 a - Other Reductions

| Amount    |
|-----------|
| \$<br>650 |
| \$<br>650 |

TOTAL

#### SIMPSON SALES UNLIMITED INC. PO BOX 186 HYDE PARK, VT 05655

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

Under Regulation 1.263(a)-1(f), the taxpayer hereby elects to apply the de minimis safe harbor election to all qualifying property placed in service during the tax year.

SIM6103 SIMPSON SALES UNLIMITED INC.

80-0026103

# Federal Asset Report Form 1120S, Page 1

FYE: 12/31/2017

| Asset   | Descri tion   | Date<br>I <u>n Service</u>  | Cost  | Bus Sec<br>% 179Bonus | Basis<br>for De r  | PerConv Meth  | Prior  | Current   |
|---|---|---|---|-----------------------|--|---|--|---|
| 36 LEASE<br>38 UTILIT<br>40 LADDI<br>42 2008 V<br>43 2 DELI<br>45 PLOW<br>46 2010 G<br>47 DISPL | ABLE HEATER<br>CHOLD IMPROVEMENTS<br>LY TRAILER<br>ER SYSTEM                                  | 1/19/93<br>7/01/07<br>8/15/08<br>10/23/09<br>6/15/12<br>12/28/12<br>11/06/13<br>8/24/14<br>3/07/14<br>5/29/14 | 283<br>4,293<br>994<br>604<br>8,500<br>2,475<br>2,641<br>12,720<br>1,200<br>1,623<br>35,333 | X<br>X                | 283<br>4,293<br>994<br>604<br>0<br>2,641<br>12,720<br>1,200<br>1,623<br>24,358 | 7 MQ200DB<br>7 MQ200DB<br>5 HY 200DB<br>3 HY 200DB<br>5 MQ200DB<br>5 HY S/L<br>7 HY 200DB<br>7 HY 200DB | 283<br>2,867<br>994<br>604<br>8,500<br>2,475<br>2,099<br>6,360<br>675<br>913<br>25,770 | 0<br>254<br>0<br>0<br>0<br>0<br>289<br>2,544<br>150<br>203<br>3,440 |
| Other De rec<br>44 2012 C   | iation:<br>HEVY SILVERADO<br>Total Other Depreciation   | 9/23/13   | 24,526<br>24,526  |                       | 24,526<br>24,526   |   | 15,942<br>15,942   | 4,905<br>4,905  |
|   | Total ACRS and Other Dep  | preciation  | 24,526  |                       | 24,526   |   | 15,942   | 4,905   |
|   | Grand Totals<br>Less: Dispositions and Tran<br>Less: Start-up/Org Expense<br>Net Grand Totals |   | 59,859<br>0<br>0<br>59,859  | ,                     | 48,884<br>0<br>0<br>48,884   | ÷   | 41,712<br>0<br>0<br>41,712   | 8,345<br>0<br>0<br>8,345  |

SIM6103 SIMPSON SALES UNLIMITED INC.

80-0026103

AMT Asset Report Form 1120S, Page 1

80-0026103 FYE: 12/31/2017

| Asset   | Descri tion  | Date<br>I <u>n Service</u>   | Cost   | Bus Sec<br><u>%</u> 179Bonus | Basis<br>for De r   | PerConv Meth  | Prior   | Current   |
|---|--|--|--|------------------------------|---|---|---|---|
| Prior<br>10<br>36<br>38<br>40<br>42<br>43<br>44<br>45<br>46<br>47<br>48 | MACRS: PORTABLE HEATER LEASEHOLD IMPROVEMENTS UTILITY TRAILER LADDER SYSTEM 2008 VAN 2 DELL COMPUTERS 2012 CHEVY SILVERADO PLOW 2010 GMC SAVANA CARG DISPLAY DOOR CEDAR DOOR DISPLAY | 1/19/93<br>7/01/07<br>8/15/08<br>10/23/09<br>6/15/12<br>12/28/12<br>9/23/13<br>11/06/13<br>8/24/14<br>3/07/14<br>5/29/14 | 283<br>4,293<br>994<br>604<br>8,500<br>2,475<br>0<br>2,641<br>12,720<br>1,200<br>1,623<br>35,333 | X<br>X                       | 283<br>4,293<br>994<br>604<br>0<br>0<br>2,641<br>12,720<br>1,200<br>1,623<br>24,358 | 7 HY 150DB<br>15 MQ150DB<br>7 MQ150DB<br>7 MQ200DB<br>5 HY 150DB<br>3 HY 150DB<br>5 HY 150DB<br>5 MQ150DB<br>5 HY S/L<br>7 HY 150DB<br>7 HY 150DB | 283<br>2,867<br>994<br>604<br>8,500<br>2,475<br>0<br>1,829<br>6,360<br>539<br>728<br>25,179 | 0<br>254<br>0<br>0<br>0<br>0<br>433<br>2,544<br>147<br>199<br>3,577 |
|   | Grand Totals<br>Less: Dispositions and Tr  | ansfers  | 35,333<br>0  |                              | 24,358<br>0   |   | 25,179<br>0   | 3,577<br>0  |
|   | <b>Net Grand Totals</b>  | ***************************************  | 35,333   | -                            | 24,358  | w.  | 25,179  | 3,577   |

SIM6103 SIMPSON SALES UNLIMITED INC.
80-0026103 Future Depreciation Report FYE: 12/31/18
FYE: 12/31/2017 Form 1120S, Page 1

| Asset  | Descri tion  | Date In<br>Service  | Cost  | Tax   | AMT   |
|--|--|---|---|---|---|
| Prior M  | ACRS:  |   |   |   |   |
| 10<br>36<br>38<br>40<br>42<br>43<br>45<br>46<br>47<br>48 | PORTABLE HEATER LEASEHOLD IMPROVEMENTS UTILITY TRAILER LADDER SYSTEM 2008 VAN 2 DELL COMPUTERS PLOW 2010 GMC SAVANA CARG DISPLAY DOOR CEDAR DOOR DISPLAY | 1/19/93<br>7/01/07<br>8/15/08<br>10/23/09<br>6/15/12<br>12/28/12<br>11/06/13<br>8/24/14<br>3/07/14<br>5/29/14 | 283<br>4,293<br>994<br>604<br>8,500<br>2,475<br>2,641<br>12,720<br>1,200<br>1,623<br>35,333 | 0<br>253<br>0<br>0<br>0<br>0<br>253<br>2,544<br>107<br>145<br>3,302 | 0<br>253<br>0<br>0<br>0<br>0<br>379<br>2,544<br>147<br>199<br>3,522 |
| Other E  | De reciation:  |   |   |   |   |
| 44   | 2012 CHEVY SILVERADO  Total Other Depreciation   | 9/23/13   | 24,526<br>24,526  | 3,679<br>3,679  | 0<br>0  |
|  | Total ACRS and Other Depreciation  | ı   | 24,526  | 3,679   | 0   |
|  |  |   | 59,859  | 6,981   | 3,522   |

|  | 0045   |     | Final K-1 Ar  | nended K-1   |  | OMB No. 1545-0123  |
|--|--|-----|---|--------------|--|--|
| Schedule K-1<br>(Form 1120S)<br>Department of the Treasury                         | <b>2017</b> For calendar year 2017, or tax year  | Pa  | rt III Shareholder<br>Deductions  |              | Current Ye   | ar Income,   |
| Internal Revenue Service   |  | 1   | Ordinary business income (loss)   |              | Credits  |  |
| beginning  | ending   | 2   | Net rental real estate income (lo   |              | mention and the state of the st | the second secon |
| Shareholder's Share of Income Credits, etc.  | ne, Deductions, and separate Instructions.   | 3   | Other net rental income (loss)  |              | manacomo que proprio de consecuencia   |  |
| Part I Information About the (   | Corporation  | 4   | Interest income   |              | errorroma azatish dali fina kaddini ja   | de de l'annual de septimination de l'annual de l'annua |
| A Corporation's employer identification number 80-0026103                          |  | ба  | Ordinary dividends  |              | Albertal Berger (1984) (1984) (1984) (1984) (1984) (1984) (1984) (1984) (1984) (1984) (1984) (1984) (1984) (19   |  |
| B Corporation's name, address, city, state, and ZIP code SIMPSON SALES UNLIMITED I | NC.  | 5b  | Qualified dividends   | 14           | Foreign transaction  | ns.  |
| PO BOX 186   | l  | 6 . | Royalties   |              | s  |  |
| HYDE PARK VT   | 05655  | 7   | Net short-term capital gain (loss   | )            | wet server of the confident AMERICA CONTINUES of the Cont |  |
| C IRS Center where corporation filed return E-FILE                                 |  | 8a  | Net long-term capital gain (loss)   |              |  |  |
| Part II Information About the S  | Shareholder  | 8b  | Collectibles (28%) gain (loss)  |              |  |  |
| D Shareholder's identifying number $009-34-9001$                                   |  | 8c  | Unreceptured section 1250 gain  |              | <u></u>  |  |
| E Shareholder's name, address, city, state, and ZIP code WADE E SIMPSON PO BOX 186 |  | 9   | Net section 1231 gain (loss)  | 15           | Alternative minimu   | ım tex (AMT) items   |
| FO BOX 100   |  |     |   | A            |  | -137   |
| HYDE PARK VT   | 05655  |     |   |              |  |  |
| F Shareholder's percentage of stock ownership for tex year                         | 100.000000%  |     |   |              |  |  |
|  |  |     |   |              | AND THE RESIDENCE OF THE PROPERTY OF THE PROPE |  |
|  |  |     |   |              |  |  |
|  |  | 11  | Section 179 deduction   | 16<br>E      | Items affecting sh   | areholder basis  |
|  |  | 12  | Other deductions  |              |  |  |
|  |  | _A  | 650   |              |  | ***************************************  |
| e Only   |  |     |   |              |  |  |
| For IKS Use Only   |  |     |   |              |  |  |
| For  |  |     |   | 17           | Other information  | A CONTRACTOR OF THE PROPERTY O |
|  |  |     | and a new year of the Philosophic Address of the United States of the Control of |              |  | V-V4   |
|  |  |     |   |              |  |  |
|  | And the second s |     | 44 (44 (44 (44 (44 (44 (44 (44 (44 (44  |              | Name of the second seco | and the second s |
|  | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,  |     | * See attached state  | tement for a | dditional info   | rmation  |

#### Schedule K-1 Form 1120S 2017

Credit for increasing research

activities

DAA

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

|     |   | ,  |     | Code   | )   |            | Report on   |
|-----|---|--|-----|--------|---|------------|---|
| 1.  | Ordinary business income (loss). Determine w                    | hether the income (loss) is                            |     |        | Credit for employer social                                | ٦          |   |
|     | passive or nonpassive and enter on your return a                |  |     |        | security and Medicare taxes                               |            |   |
|     | Passive loss  | Report on See the Shareholder's Instructions           |     | 0      | Backup withholding  |            | See the Shareholder's Instructions                                    |
|     | Passive income  | Schedule E, line 28, column (g)                        |     | P      | Other credits   | ╛          |   |
|     | Nonpassive loss   | See the Shareholder's Instructions                     | 44  | Easa   | ian transations   |            |   |
|     | Nonpassive income   | Schedule E, line 28, column (j)                        | 14. |        | ign transactions Name of country or U.S.                  |            |   |
| 2.  | Net rental real estate income (loss)                            | See the Shareholder's Instructions                     |     |        | possession  |            |   |
| 3.  | Other net rental Income (loss)                                  |  |     |        | Gross income from all sources                             |            | Form 1116, Pert I   |
| ٥.  | Net income  | Schedule E, line 28, column (g)                        |     | С      | Gross income sourced at                                   |            | Tomit 170, Parti  |
|     | Net loss  | See the Shareholder's Instructions                     |     |        | shareholder level   |            |   |
| 4.  | Interest Income   | Form 1040, line 8a                                     |     |        | ign gross income sourced at corporate le                  | vel        |   |
|     |   |  |     |        | Passive category  |            | From 4446 Part I  |
| 5a. | Ordinary dividends  | Form 1040, line 9a                                     |     |        | General category<br>Other                                 | ▗▋         | Form 1116, Part I   |
| 5b. | Qualified dividends   | Form 1040, line 9b                                     |     |        | uctions allocated and apportioned at share                | —<br>eholc | der level   |
| 6.  | Royaltles   | Schedule E, line 4                                     |     |        | Interest expense  |            | Form 1116, Part I   |
| 7.  | Net short-term capital gain (loss)                              | Schedule D, line 5                                     |     | н      | Other   |            | Form 1116, Part I   |
| 8a. | Net long-term capital gain (loss)                               | Schedule D, line 12                                    |     | Dedu   | ictions allocated and apportioned at corp                 | orate      | level to foreign source   |
| 8b. | Collectibles (28%) gain (loss)                                  | 28% Rate Gain Worksheet, line 4                        |     | incon  |   | _          |   |
| · · | Control of the My Sain freed                                    | (Schedule D instructions)                              |     |        | Passive category  |            | Form 1116, Part I   |
| 0   | Have continued another \$250 cale                               | See the Shareholder's instructions                     |     |        | General category Other                                    |            | ·   |
| 8c. | Unrecaptured section 1250 gain                                  |  |     |        | r information   |            |   |
| 9.  | Net section 1231 gain (loss)                                    | See the Shareholder's Instructions                     |     |        | Total foreign taxes paid                                  |            | Form 1116, Part II  |
| 10. | Other income (loss)   |  |     |        | Total foreign taxes accrued                               |            | Form 1116, Part II  |
|     | Code  |  |     | N      | Reduction in taxes available for                          |            |   |
|     | A Other portfolio income (toss)                                 | See the Shareholder's Instructions                     |     |        | credit  |            | Form 1116, line 12  |
|     | B Involuntary conversions                                       | See the Shareholder's Instructions                     |     |        | Foreign trading gross receipts                            |            | Form 8873   |
|     | C Sec. 1256 contracts & straddles                               | Form 6781, line 1<br>See Pub. 535                      |     |        | Extraterritorial income exclusion                         |            | Form 8873   |
|     | D Mining exploration costs recapture  E Other income (loss)     | See the Shareholder's Instructions                     |     | Q      | Other foreign transactions                                |            | See the Shareholder's Instructions                                    |
|     | • •   |  | 15. | Alter  | native minimum tax (AMT) items                            |            |   |
| 11. | Section 179 deduction   | See the Shareholder's Instructions                     |     | A      | Post-1986 depreciation adjustment                         |            |   |
| 12. | Other deductions  |  |     | В      | Adjusted gain or loss                                     |            | See the Shareholder's Instructions                                    |
|     | A Cash contributions (50%)                                      |  |     |        | Depletion (other than oil & gas)                          |            | and the Instructions for Form 6251                                    |
|     | B Cash contributions (30%) C Noncash contributions (50%)        |  |     |        | Oil, gas, & geothermal—gross income                       |            |   |
|     | C Noncash contributions (50%) D Noncash contributions (30%)     | n u ni chabitata                                       |     |        | Oll, gas, & geothermal—deductions                         |            |   |
|     | E Capital gain property to a 50%                                | See the Shareholder's                                  |     | F      | Other AMT items   |            |   |
|     | organization (30%)  | instructions   | 16. | Item   | s affecting shareholder basis                             |            |   |
|     | F Capital gain property (20%)                                   |  | 10. |        | Tax-exempt interest income                                |            | Form 1040, line 8b  |
|     | G Contributions (100%)  |  |     |        | Other tax-exempt income                                   |            |   |
|     | H Investment interest expense                                   | Form 4952, line 1                                      |     | C      | Nondeductible expenses                                    |            |   |
|     | Deductions—royalty income                                       | Schedule E, line 19                                    |     | D      | Distributions   |            | See the Shareholder's Instructions                                    |
|     | J Section 59(e)(2) expenditures                                 | See the Shareholder's Instructions                     |     | E      | Repayment of loans from                                   |            |   |
|     | K Deductions—portfolio (2% floor)                               | Schedule A, line 23                                    |     |        | shareholders  |            |   |
|     | L Deductions—portfolio (other)  M Preproductive period expenses | Schedule A, line 28 See the Shareholder's Instructions | 17  | Othe   | r information   |            |   |
|     | N Commercial revitalization deduction                           | 366 (18 3) idiational a literactions                   | ••• |        | Investment income   |            | Form 4952, line 4a  |
|     | from rental real estate activities                              | See Form 8582 instructions                             |     |        | Investment expenses                                       |            | Form 4952, line 5   |
|     | O Reforestation expense deduction                               | See the Shareholder's Instructions                     |     | С      | Qualified rehabilitation expenditures                     |            |   |
|     | P Domestic production activities                                |  |     | _      | (other than rental real estate)                           |            | See the Shareholder's Instructions See the Shareholder's Instructions |
|     | information   | See Form 8903 instructions                             |     | D<br>E | Basis of energy property  Recapture of low-income housing |            | Dea the Originational & Instructions                                  |
|     | Q Qualified production activities income                        | Form 8903, line 7b                                     |     | -      | credit (section 42(j)(5))                                 |            | Form 8611, line 8   |
|     | R Employer's Form W-2 wages                                     | Form 8903, line 17                                     |     | F      | Recapture of low-income housing                           |            | Form 8611 line 8  |
|     | S Other deductions  | See the Shareholder's Instructions                     |     | G      | credit (other) Recapture of investment credit             |            | Form 8611, line 8<br>See Form 4255                                    |
| 13. | Credits   |  |     | Н      | Recapture of other credits                                |            | See the Shareholder's Instructions                                    |
|     | A Low-income housing credit (section                            |  |     | ı      | Look-back interestcompleted                               |            |   |
|     | 42(j)(5)) from pre-2008 buildings                               |  |     |        | long-term contracts                                       |            | See Form 8697   |
|     | B Low-income housing credit (other)<br>from pre-2008 buildings  |  |     | j      | Look-back interest—income<br>forecast method              |            | See Form 8866   |
|     | C Low-income housing credit (section                            |  |     | ĸ      | Dispositions of property with                             |            | •   |
|     | 42(j)(5)) from post-2007 buildings                              | See the Shareholder's                                  |     |        | section 179 deductions                                    |            |   |
|     | D Low-income housing credit (other)                             | Instructions   |     | L      | Recapture of section 179 deduction                        |            |   |
|     | from post-2007 buildings  |  |     | м      | Section 453(I)(3) information                             |            |   |
|     | E Qualified rehabilitation expenditures                         |  |     | N      | Section 453A(c) information                               |            |   |
|     | (rental real estate)  |  |     | 0      | Section 1260(b) information                               |            |   |
|     | F Other rental real estate credits                              |  |     | P      | Interest allocable to production                          |            | See the Shareholder's Instructions                                    |
|     | G Other rental credits  |  |     | _      | expenditures  |            |   |
|     | H Undistributed capital gains credit                            | Form 1040, line 73, box a                              |     | Q      | CCF nonqualified withdrawals                              |            |   |
|     | Biofuel producer credit   |  |     | R<br>S | Depletion information—oil and gas<br>Reserved             |            |   |
|     | J Work opportunity credit                                       | Cun the Charek-13-3-                                   |     | T      | Section 108(i) information                                |            |   |
|     | K Disabled access credit L Empowerment zone                     | See the Shareholder's<br>Instructions                  |     | Ù      | Net investment income                                     |            |   |
|     | employment credit   | () lot uctions   |     | ٧      | Other information   |            |   |
|     | outprogramme or an annual and a second                          |  |     |        |   |            |   |

Tax and

**Payments** 

Refund applied for on Form 4466

Over a ment refunded

Tax due (overpayment)

Total payments and credits

Estimated tax penalty from Form 2220
Penalties and interest Penalties and interest

Net tax due (overpayment)

Overpayment credited to next year's estimated tax

| Form 1     | 120S Two                              | Year Comparison Wo | rkshe | et Page 1 |      | :       | 2016 & 2017           |
|------------|---------------------------------------|--------------------|-------|-----------|------|---------|-----------------------|
| Name       |                                       |                    |       |           |      | Employe | Identification Number |
| SIMPS      | SON SALES UNLIMITED I                 | NC.                |       |           |      | 80-0    | 0026103               |
|            |                                       |                    | 2016  |           | 2017 |         | Differences           |
|            | Gross profit percentage               |                    | 38.   | 9113      | 42.  | 1856    | 3.2743                |
|            | Net receipts                          |                    | 445   | 284       | 477  | 552     | 32 268                |
|            | Cost of goods sold                    | ••••               | 272   | 018       | 276  | 094     | 4 076                 |
| Income     | Gross profit                          |                    | 173   | 266       | 201  | 458     | 28 192                |
|            | Net gain (loss) from Form 4797        |                    |       |           |      |         |                       |
|            | Other income (loss)                   |                    |       |           |      |         |                       |
|            | Total income loss                     |                    | 173   | 266       | 201  | 458     | 28 192                |
|            | Compensation of officers              |                    | 46    | 800       | 50   | 722     | 3 922                 |
|            | Salaries and wages less employment    | credits            | 52    | 066       | 59   | 607     | 7 541                 |
|            | Repairs and maintenance               |                    |       | 605       |      | 38      | -567                  |
|            | Bad debts                             | •                  |       |           |      |         |                       |
|            | Rents                                 | •                  | 7     | 316       | 7    | 194     | -122                  |
|            | Taxes and licenses                    |                    | 9     | 541       | 9    | 667     | 126                   |
|            | Interest                              |                    | 1     | 365       |      | 375     | -990                  |
| Deductions |                                       |                    | 8     | 603       | 8    | 345     | -258                  |
|            | Depletion                             |                    |       |           |      |         |                       |
|            | Advertising                           |                    | 4     | 885       | 6    | 224     | 1 339                 |
|            | Pension, profit-sharing, etc., plans  |                    |       |           |      |         |                       |
|            | Employee benefit programs             |                    |       |           |      |         |                       |
|            | Other deductions                      |                    |       | 284       |      | 850     | 4 566                 |
|            | Total deductions                      |                    |       | 465       |      | 022     | 15 557                |
|            | Ordina business income loss           |                    | 2     | 801       | 15   | 436     | 12 635                |
|            | Excess net passive income or LIFO re  | capture tax        |       |           |      |         |                       |
|            | Tax from Schedule D                   |                    |       | _         |      | _       | •                     |
|            | Total tax                             |                    |       | 0         |      | 0       | 0                     |
|            | Estimated tax and prior year overpayn |                    |       |           |      |         |                       |
|            | Tax deposited with Form 7004          |                    |       |           |      |         |                       |
|            | Credit for federal tax paid on fuels  | . , .              |       |           |      |         |                       |

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Form 1120S

# Two Year Comparison Worksheet Page 2

Name

Employer Identification Number

| SIMPSO      | ON SALES UNLIMITED INC.   |                  |     |                   | 80-00 | 026103                |
|-------------|---|------------------|-----|-------------------|-------|-----------------------|
|             | Ordinary business income (loss)  Net rental real estate income (loss) | <b>2016</b><br>2 | 801 | <b>2017</b><br>15 | 436   | Differences<br>12 635 |
|             | Other net rental income (loss)  |                  |     |                   |       |                       |
| Income      | Interest income   |                  |     |                   |       |                       |
| (Loss)      | Dividends   |                  |     |                   |       |                       |
|             | Royalties   |                  |     |                   |       |                       |
|             | Net short-term capital gain (loss)                                    |                  |     |                   |       |                       |
|             | Net long-term capital gain (loss)                                     |                  |     |                   |       |                       |
|             | Net Section 1231 gain (loss)  |                  |     |                   |       |                       |
|             | Other income loss   |                  |     |                   |       |                       |
|             | Section 179 deduction   |                  |     |                   |       |                       |
| Deductions  | Charitable contributions  |                  | 250 |                   | 650   | 400                   |
|             | Investment interest expense   |                  |     |                   |       |                       |
|             | Section 59(e)(2) expenditures   |                  |     |                   |       |                       |
|             | Other deductions  |                  |     |                   |       |                       |
|             | Low-income housing credit (Section 42(j)(5))                          |                  |     |                   |       |                       |
|             | Low-income housing credit (other)                                     |                  |     |                   |       |                       |
|             | Qualified rehabilitation expenditures (rental real estate)            |                  |     |                   |       |                       |
| Credits     | Other rental real estate credits                                      |                  |     |                   |       |                       |
|             | Other rental credits  |                  |     |                   |       |                       |
|             | Biofuel producer credit   |                  |     |                   |       |                       |
|             | Other credits   |                  |     |                   |       |                       |
| Foreign     | Total foreign gross income  |                  |     |                   |       |                       |
| Transaction | Total foreign toyes   |                  |     |                   |       |                       |
|             | Total foreign taxes  Reduction in taxes available for credit          |                  |     |                   |       |                       |
|             | Post-1986 depreciation adjustment                                     |                  | -4  |                   | -137  | -133                  |
|             | Adjusted gain or loss   |                  | -   |                   | 10,   | 100                   |
| AMT         | Adjusted gain or loss  Depletion (other than oil and gas)             |                  |     |                   |       |                       |
| Items       | Oil, gas, and geothermal properties-gross income                      |                  |     |                   |       |                       |
|             | Oil, gas, and geothermal properties-deductions                        |                  |     |                   |       |                       |
|             | Other AMT items   |                  |     |                   |       |                       |
|             | Tax-exempt interest income  |                  |     |                   |       |                       |
| Items       | Other tax-exempt income   |                  |     |                   |       |                       |
| Affecting   | Nondeductible expenses  |                  | 28  |                   |       | -28                   |
| S/H Basis   | Distributions   | 15               | 750 |                   |       | -15 750               |
|             | Repayment of loans from shareholders                                  | 2                | 765 | 4                 | 693   | 1 928                 |
|             | Investment income   |                  |     |                   |       |                       |
| Other       | Investment expenses   |                  |     |                   |       |                       |
| Information | Dividend distributions paid from accumulated E&P                      |                  |     |                   |       |                       |
|             | Income loss if Schedule M-1 is uired                                  | 2                | 551 | 14                | 786   | 12 235                |
|             |   | .,,.,,           |     |                   |       |                       |

Form 1120S

# Two Year Comparison Worksheet Page 3

2016 201

Name

**Employer Identification Number** 

| SIMPS           | ON SALES UNLIMITED INC.  | 2016                     |                                 | 2017                   | 80-00             | 26103<br>Differences                           |
|-----------------|--|--------------------------|---------------------------------|------------------------|-------------------|--|
| Schedule<br>L   | Beginning assets Beginning liabilities and equity Ending assets Ending liabilities and equity Net income (loss) per books                | 114<br>114<br>117<br>117 | 785<br>785<br>860<br>860<br>523 | 117<br>117<br>91<br>91 | 860<br>899<br>899 | 3 075<br>3 075<br>-25 961<br>-25 961<br>12 263 |
| Schedule<br>M-1 | Taxable income not on books  Book expenses not deducted  Income on books not on return   | ٤                        | 28                              | 11                     | 700               | -28  |
| Schedule        | Return deductions not on books Income loss er return Balance at beginning of year Ordinary income (loss) from page 1                     | 3                        | 551<br>161<br>801               | -10                    | 786<br>066<br>436 | 12 235<br>-13 227<br>12 635                    |
| M-2<br>AAA      | Other additions Other reductions Distributions other than dividend distributions Balance at end of _ear                                  | 15<br>-10                | 278<br>750<br>066               | Δ                      | 650<br>720        | 372<br>-15 750<br>14 786                       |
| Schedule<br>M-2 | Balance at end of lear  Balance at beginning of year  Other additions  Other reductions  | 10                       | 000                             | -                      | 120               | 14 700   |
| OAA<br>Schedule | Distributions other than dividend distributions  Balance at end of ear  Balance at beginning of year                                     |                          |                                 |                        |                   |  |
| M-2<br>PTI      | Distributions other than dividend distributions Balance at end of year Total income (loss) items:  |                          |                                 |                        |                   |  |
|                 | Income (loss) per income statement Temporary difference Permanent difference Income (loss) per tax return Total expense/deduction items: |                          |                                 |                        |                   |  |
| Schedule<br>M-3 | Expense per income statement Temporary difference Permanent difference Deduction per tax return  |                          |                                 |                        |                   |  |
|                 | Other items with no differences: Income (loss) per income statement Income (loss) per tax return Reconciliation totals:                  |                          |                                 |                        |                   |  |
|                 | Income (loss) per income statement Temporary difference Permanent difference Income loss er tax return                                   |                          |                                 |                        |                   |  |

| VT Form   | VERMO  |  | , <u>-</u> , .   | . =10  |  | For office use o  | nly   |
|---|--|--|--|--|--|---|---|
| 8879-VT-C   | Corporate or Business Income Tax D (SEE INSTRUCTIONS IN THE VT FEI   |  |  | _  |  | Date received   |   |
| Part I  | (=====================================   |  |  |  |  |   |   |
| Address   | ON SALES UNLIMITED INC.  |  |  |  |  | Federal ID Number 800026103 Fiscal Year END Date (YY  | YYMMDD)                                     |
| PO BO   | X 186  |  |  |  |  | 20171231  | -   |
| City  |  | State  | ZIP C  |  |  |   | Nation Co.                                  |
| HYDE Foreign Count  |  | VT<br>E-mail A   |  | 655  |  | _   |   |
| r or organ cours  | ,  |  |  | ALES@AOL.  | COM  |   |   |
| Part II   | Fax Return Information (whole dollars  | oniv)  |  |  |  |   |   |
| 1. Form bei   | ng filed X BI-471 X BI-47  |  | CO-41  | 11   |  | _   |   |
| <ol> <li>Refund of</li> <li>Refund a</li> </ol>   | redited to next year   |  |  | • • •  |  | 2.<br>3.  | •   |
| 4. Amount   |  |  |  |  |  | 4.  | 250.  |
| Depositor ac  Part IV  Under pe with the a knowledg  If making  I consent of Taxes  If the Ver  Please Sign  Here  Part V | count number (DAN)   | gning beed to my Elermont Color to withdred declaration different Color timely part of the Color | elow, you dectronic Reporate or law funds for and according to the second symmetry of the s | TN must be 01 throi Type of accor u agree that: eturn Originator (ER Business Income ta rom my account in te mpanying schedules the amount due, I ar WADE E SIM PRESIDENT Printed Name  Iy | ugh 12 or 21 thrunt: Savints S | ngs Check counts shown in Part II bove, and is, to the bo on the date specified. is, to the Vermont Dep ax and any applicable | agree<br>est of my<br>coartment<br>charges. |
| signed this fo  | erm before I submitted the return. I will give the taxp  | payer a cop  | y of all for   | ms and information   | to be filed with   | Vermont.  Check if: paid prepa  | 50  |
| Electronic<br>Return  | signature JULIE A. MARCKRES,   | CPA  |  |  | 02/03/18   | Self-emplo  | ·   |
| Originator's  | Firm's name MARCKRES NORDER A (or yours if PO BOX 732  | ND COM   | PANY,  | INC.   | en 03 0  | 322133  |   |
| Use Only  | and address MORRISVILLE  | VT   | 05663  | l  |  | 802-888-7781  | ,   |
| Under penalt  | E-mail address: JMARCKRE  Declaration of Paid Preparer les of perjury, I declare that I have examined the abid belief, they are true, correct and complete. This  Preparer's | ove taxpay   | er's returr  | and accompanying   | j schedules and<br>which I have kr<br><sub>Date</sub>  | statement. To the be<br>rowledge.<br>Check if<br>self-employed  | st of my                                    |
| Paid<br>Preparer's  | signature  |  |  |  |  | oon employed  |   |
| Use Only  | Firm's name (or yours if   |  |  |  | EIN  |   |   |
|   | self-employed)<br>and address  |  |  |  | Phone Number   |   |   |
|   | E-mail address:  |  |  |  |  |   |   |

Form 8879-VT-C

Vermont Department of Taxes 133 State Street Montpelier, VT 05633-1401

Phone: (802) 828-5723

VT Form **BI-476** 

#### **BUSINESS INCOME TAX RETURN**

For Resident Only



#### For Partnerships, Subchapter S Corporations, and LLCs

**Entity Name** 

SIMPSON SALES UNLIMITED INC.

Federal ID Number

800026103

Address, Line 1

PO BOX 186

Address, Line 2

City, State, ZIP Code

HYDE PARK

VT

05655

Foreign Country

#### FOR COMPUTERIZED USE ONLY

| ~=   |     |     |    |    |       |   |      |     |        | 000000103 |  |
|--|-----|-----|----|----|-------|---|------|-----|--------|-----------|--|
| SIMPSON SALES UNLIMITED INC. FID 800026103 |     |     |    |    |       |   |      |     |        |           |  |
| PO BOX                                     | 186 |     |    |    |       |   |      | FYE | 3      | 20170101  |  |
|  |     |     |    |    |       |   |      | FYE | !<br>} | 20171231  |  |
| HYDE PA                                    | ARK |     |    | VT | 05655 |   |      | NAI | CS     | 238290    |  |
|  |     |     |    |    |       |   |      | DSC | Y      |           |  |
| APC  | N   | I   |    | N  |       | N |      | FIN | N      |           |  |
| 1120S                                      | Y   | 106 | 55 | N  | OTHER | N |      |     |        |           |  |
| А И  |     | В   | N  |    | С     | 1 |      |     |        |           |  |
| 1  |     | 250 |    |    |       |   | 5    |     |        | 0         |  |
| 2  |     | 0   |    |    |       |   | 6    |     |        | 0         |  |
| 3  |     | 250 |    |    |       |   | PTIN | P00 | 295    | 5705      |  |
| 4  |     | 0   |    |    |       |   | PEIN | 030 | 322    | 2133      |  |

I hereby certify that I am an officer or authorized agent responsible for the taxpayer's compliance with the requirements of Title 32 of the Vermont Statutes and that this return is true, correct, and complete to the best of my knowledge. If prepared by a person other than the taxpayer, this declaration further provides that under 32 V.S.A. § 5901, this information has not been and will not be used for any other purpose, or made available to any other person, other than for the preparation of this return unless a separate valid consent form is signed by the taxpayer and retained by the preparer.

JULIE A. MARCKRES, CPA

Signature of Officer or Authorized Agent Printed name WADE E SIMPSON Date

Preparer's signature

Date

Daytime telephone number (optional)

802-888-3997

Print name, Firm's name (or yours if self-employed) and address below JULIE A. MARCKRES, CPA

MARCKRES NORDER AND COMPANY, INC. PO BOX 732

E-mail address (optional)

SIMPSONSALES@AOL.COM

MORRISVILLE

VT 05661

May the Dept. of Taxes discuss this return with the preparer shown? X Yes No

802-888-7781 Telephone

Form BI-476

1022

JMARCKRES@NORDERCPA.COM

Rev. 10/17

| VT Form Bl-476, revised 10/17, Page 2   | This page must             | be filed with Page 1 of this form.      |                            |        |
|---|----------------------------|---|----------------------------|--------|
| Entity Name SIMPSON SALES UNLIMITE  | ED INC.                    | Fiscal Year Ending (YYYYMMDD) 20171231  | Federal ID Number 80002610 | 13     |
| Υ   | es No                      | Federal ID Number                       | 800                        | 026103 |
| Did the Accounting Period change?   | N                          | Returns cannot be processed without the | Federal ID Number          |        |
| Is this an Initial Return?  | N                          | Tax Year BEGIN Date (YYYYMMDD)          | 20                         | 170101 |
| Is this an Extended Return?   | N                          | Tax Year END Date (YYYYMMDD)            | 20                         | 171231 |
| Is this a Final Return?   | N                          | Will Federal 1120S be filed?            | X Yes                      | No     |
| If yes, this cancels account  |                            | Will Federal 1065 be filed?             | Yes                        | X No   |
|   |                            | Will another Federal form be filed?     | Yes                        | X No   |
|   |                            | Entity's Primary 6-digit NAICS Number   |                            | 238290 |
| If "Yes", STOP and complete Form BI-47'C. Total number of Vermont shareholders, par | ed from at least one<br>1. | state other than VT?                    | C. Enter all amounts in wh | X No   |
| TAX COMPUTATION (see instructions)  |                            |   |                            |        |
| 1. Vermont minimum entity tax (\$250)   |                            |   | 1.                         | 250.   |
| NOTE: If you qualify for an exception to t  | he Vermont minimu          | ım entity tax, you must complete        |                            |        |
| Form BI-471 and attach supporting docu  |                            |   |                            |        |
| 2. Payments previously made for this tax ye   |                            | orm BA-403 or credit                    |                            |        |
| available through prior year carryforward   |                            | ,                                       | 2.                         | 250.   |
| 3. Balance Due (If Line 1 is greater than Lin                                       |                            |   | 3.                         | 250.   |
| 4. Overpayment (If Line 2 is greater than L   | ine 1)                     |   | 4.                         |        |
| 5. Overpayment to be Refunded   |                            |   | 5.                         | 0.     |
| 6. Overpayment to be credited to next tax   | x year                     |   | <b>6.</b>                  | 0.     |