



**WALSH WASHBURN, LLC.**  
CERTIFIED PUBLIC ACCOUNTING FIRM

5360 College Boulevard, Suite 100  
Overland Park, Kansas 66211  
Phone: 913-660-7710  
Fax: 913-660-1995

March 14, 2019

Vista Del Mar Irrigation Company  
13714 Cayo Cantiles  
Corpus Christi, TX 78418

Dear Larry:

Your 2018 Federal Corporation Income Tax Return will be electronically filed with the Internal Revenue Service upon receipt of a signed Form 8879C - IRS e-file Signature Authorization in the web portal. You may also mail it to us, fax it to (913) 660-1995 or e-mail it to [jolee@walshwashburn.com](mailto:jolee@walshwashburn.com). No tax is payable with the filing of this return. There is an overpayment of \$5,500, of which \$5,500 has been applied to your 2019 estimated tax.

Your 2018 Kansas Corporation Income Tax Return will be electronically filed with the State of Kansas. No tax is payable with the filing of this return.

Your 2019 Texas Franchise Tax Return will be electronically filed with the State of Texas. No tax is payable with the filing of this return.

Please be sure to call if you have any questions.

Sincerely,

John W Duncan, CPA

**2018 Corporate Return**  
prepared for:

**Vista Del Mar Irrigation Company**  
13714 Cayo Cantiles  
Corpus Christi, TX 78418

**WALSH WASHBURN, LLC**  
5360 COLLEGE BOULEVARD SUITE 100  
OVERLAND PARK, KS 66211-1621

**IRS e-file Signature Authorization for Form 1120**

For calendar year **2018**, or tax year beginning \_\_\_\_\_, **2018**, ending \_\_\_\_\_, \_\_\_\_\_

**2018**

Department of the Treasury  
Internal Revenue Service

▶ **Do not send to the IRS. Keep for your records.**  
▶ **Go to [www.irs.gov/Form8879C](http://www.irs.gov/Form8879C) for the latest information.**

Name of corporation Vista Del Mar Irrigation Company Employer identification number 74-6031426

**Part I Tax Return Information** (Whole dollars only)

<b>1</b>	Total income (Form 1120, line 11)	<b>1</b>	<u>10,441.</u>
<b>2</b>	Taxable income (Form 1120, line 30)	<b>2</b>	<u>-91,243.</u>
<b>3</b>	Total tax (Form 1120, line 31)	<b>3</b>	
<b>4</b>	Amount owed (Form 1120, line 35)	<b>4</b>	
<b>5</b>	Overpayment (Form 1120, line 36)	<b>5</b>	<u>5,500.</u>

**Part II Declaration and Signature Authorization of Officer. Be sure to get a copy of the corporation's return.**

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 2018 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 only**

I authorize WALSH WASHBURN, LLC to enter my PIN 29901 as my signature  
ERO firm name do not enter all zeros  
on the corporation's 2018 electronically filed income tax return.

As an officer of the corporation, I will enter my PIN as my signature on the corporation's 2018 electronically filed income tax return.

Officer's signature ▶ \_\_\_\_\_ Date ▶ \_\_\_\_\_ Title ▶ President

**Part III Certification and Authentication**

**ERO's EFIN/PIN.** Enter your six-digit EFIN followed by your five-digit self-selected PIN ..... 48080198989  
do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2018 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 ▶  Date ▶ 03/09/2019

**ERO Must Retain This Form – See Instructions**  
**Do Not Submit This Form to the IRS Unless Requested To Do So**



<b>Schedule C Dividends, Inclusions, and Special Deductions</b> (see instructions)	<b>(a)</b> Dividends and inclusions	<b>(b)</b> Percentage	<b>(c)</b> Special deductions <b>(a) x (b)</b>
1 Dividends from less-than-20%-owned domestic corporations (other than debt-financed stock) . . . . .		50	
2 Dividends from 20%-or-more-owned domestic corporations (other than debt-financed stock) . . . . .		65	
3 Dividends on certain debt-financed stock of domestic and foreign corporations . . . . .		see instructions	
4 Dividends on certain preferred stock of less-than-20%-owned public utilities . . . . .		23.3	
5 Dividends on certain preferred stock of 20%-or-more-owned public utilities . . . . .		26.7	
6 Dividends from less-than-20%-owned foreign corporations and certain FSCs . . . . .		50	
7 Dividends from 20%-or-more-owned foreign corporations and certain FSCs . . . . .		65	
8 Dividends from wholly owned foreign subsidiaries . . . . .		100	
9 <b>Subtotal.</b> Add lines 1 through 8. See instructions for limitations . . . . .		see instructions	
10 Dividends from domestic corporations received by a small business investment company operating under the Small Business Investment Act of 1958 . . . . .		100	
11 Dividends from affiliated group members . . . . .		100	
12 Dividends from certain FSCs . . . . .		100	
13 Foreign-source portion of dividends received from a specified 10%-owned foreign corporation (excluding hybrid dividends) (see instructions) . . . . .		100	
14 Dividends from foreign corporations not included on line 3, 6, 7, 8, 11, 12, or 13 (including any hybrid dividends) . . . . .			
15 Section 965(a) inclusion . . . . .		see instructions	
16a Subpart F inclusions derived from the sale by a controlled foreign corporation (CFC) of the stock of a lower-tier foreign corporation treated as a dividend (attach Form(s) 5471) (see instructions) . . . . .		100	
b Subpart F inclusions derived from hybrid dividends of tiered corporations (attach Form(s) 5471) (see instructions) . . . . .			
c Other inclusions from CFCs under subpart F not included on line 15, 16a, 16b, or 17 (attach Form(s) 5471) (see instructions) . . . . .			
17 Global Intangible Low-Taxed Income (GILTI) (attach Form(s) 5471 and Form 8992) . . . . .			
18 Gross-up for foreign taxes deemed paid . . . . .			
19 IC-DISC and former DISC dividends not included on line 1, 2, or 3 . . . . .			
20 Other dividends . . . . .			
21 Deduction for dividends paid on certain preferred stock of public utilities . . . . .			
22 Section 250 deduction (attach Form 8993) . . . . .			
23 <b>Total dividends and inclusions.</b> Add lines 9 through 20. Enter here and on page 1, line 4. . . . .			
24 <b>Total special deductions.</b> Add lines 9 through 22, column (c). Enter here and on page 1, line 29b . . . . .			

**Schedule J Tax Computation and Payment** (see instructions)

**Part I – Tax Computation**

1	Check if the corporation is a member of a controlled group (attach Schedule O (Form 1120)). See instructions ▶ <input type="checkbox"/>		
2	Income tax. See instructions	2	0.
3	Base erosion minimum tax (attach Form 8991)	3	
4	Add lines 2 and 3	4	0.
5a	Foreign tax credit (attach Form 1118)	5a	
b	Credit from Form 8834 (see instructions)	5b	
c	General business credit (attach Form 3800)	5c	
d	Credit for prior year minimum tax (attach Form 8827)	5d	
e	Bond credits from Form 8912	5e	
6	<b>Total credits.</b> Add lines 5a through 5e	6	
7	Subtract line 6 from line 4	7	
8	Personal holding company tax (attach Schedule PH (Form 1120))	8	
9a	Recapture of investment credit (attach Form 4255)	9a	
b	Recapture of low-income housing credit (attach Form 8611)	9b	
c	Interest due under the look-back method – completed long-term contracts (attach Form 8697)	9c	
d	Interest due under the look-back method – income forecast method (attach Form 8866)	9d	
e	Alternative tax on qualifying shipping activities (attach Form 8902)	9e	
f	Other (see instructions – attach statement)	9f	
10	<b>Total.</b> Add lines 9a through 9f	10	
11	<b>Total tax.</b> Add lines 7, 8, and 10. Enter here and on page 1, line 31	11	0.

**Part II – Section 965 Payments** (see instructions)

12	2018 net 965 tax liability paid from Form 965-B, Part II, column (k), line 2. Enter here and on page 1, line 32	12	
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**Part III – Payments and Refundable Credits, and Section 965 Net Tax Liability**

13	2017 overpayment credited to 2018	13	5,500.
14	2018 estimated tax payments	14	
15	2018 refund applied for on Form 4466	15	
16	Combine lines 13, 14, and 15	16	5,500.
17	Tax deposited with Form 7004	17	
18	Withholding (see instructions)	18	
19	<b>Total payments.</b> Add lines 16, 17, and 18	19	5,500.
20	Refundable credits from:		
a	Form 2439	20a	
b	Form 4136	20b	
c	Form 8827, line 8c	20c	
d	Other (attach statement – see instructions)	20d	
21	<b>Total credits.</b> Add lines 20a through 20d	21	
22	2018 net 965 tax liability from Form 965-B, Part I, column (d), line 2. See instructions	22	
23	<b>Total payments, credits, and section 965 net tax liability.</b> Add lines 19, 21, and 22. Enter here and on page 1, line 33	23	5,500.

**Schedule K Other Information** (see instructions)

<p><b>1</b> Check accounting method:      a <input type="checkbox"/> Cash    b <input checked="" type="checkbox"/> Accrual    c <input type="checkbox"/> Other (specify) ▶ _____</p> <p><b>2</b> See the instructions and enter the:</p> <p>a Business activity code no. ▶ <u>532400</u></p> <p>b Business activity ▶ <u>Real Estate</u></p> <p>c Product or service ▶ <u>Rental</u></p> <p><b>3</b> Is the corporation a subsidiary in an affiliated group or a parent-subsidary controlled group? ..... <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                  If "Yes," enter name and EIN of the parent corporation ▶ _____</p> <p><b>4</b> At the end of the tax year:</p> <p>a Did any foreign or domestic corporation, partnership (including any entity treated as a partnership), trust, or tax-exempt organization own directly 20% or more, or own, directly or indirectly, 50% or more of the total voting power of all classes of the corporation's stock entitled to vote? If "Yes," complete Part I of Schedule G (Form 1120) (attach Schedule G) ..... <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>b Did any individual or estate own directly 20% or more, or own, directly or indirectly, 50% or more of the total voting power of all classes of the corporation's stock entitled to vote? If "Yes," complete Part II of Schedule G (Form 1120) (attach Schedule G) ..... <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><b>5</b> At the end of the tax year, did the corporation:</p> <p>a Own directly 20% or more, or own, directly or indirectly, 50% or more of the total voting power of all classes of stock entitled to vote of any foreign or domestic corporation not included on <b>Form 851</b>, Affiliations Schedule? For rules of constructive ownership, see instructions ..... <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                  If "Yes," complete (i) through (iv) below.</p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:45%;">(i) Name of Corporation</th> <th style="width:15%;">(ii) Employer Identification Number (if any)</th> <th style="width:15%;">(iii) Country of Incorporation</th> <th style="width:25%;">(iv) Percentage Owned in Voting Stock</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table> <p>b Own directly an interest of 20% or more, or own, directly or indirectly, an interest of 50% or more in any foreign or domestic partnership (including an entity treated as a partnership) or in the beneficial interest of a trust? For rules of constructive ownership, see instructions ..... <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                  If "Yes," complete (i) through (iv) below.</p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:45%;">(i) Name of Entity</th> <th style="width:15%;">(ii) Employer Identification Number (if any)</th> <th style="width:15%;">(iii) Country of Organization</th> <th style="width:25%;">(iv) Maximum Percentage Owned in Profit, Loss, or Capital</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table>	(i) Name of Corporation	(ii) Employer Identification Number (if any)	(iii) Country of Incorporation	(iv) Percentage Owned in Voting Stock																					(i) Name of Entity	(ii) Employer Identification Number (if any)	(iii) Country of Organization	(iv) Maximum Percentage Owned in Profit, Loss, or Capital																					Yes	No
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<p><b>6</b> During this tax year, did the corporation pay dividends (other than stock dividends and distributions in exchange for stock) in excess of the corporation's current and accumulated earnings and profits? See sections 301 and 316 ..... <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                  If "Yes," file <b>Form 5452</b>, Corporate Report of Nondividend Distributions. See the instructions for Form 5452.                  If this is a consolidated return, answer here for the parent corporation and on Form 851 for each subsidiary.</p> <p><b>7</b> At any time during the tax year, did one foreign person own, directly or indirectly, at least 25% of the total voting power of all classes of the corporation's stock entitled to vote or at least 25% of the total value of all classes of the corporation's stock? For rules of attribution, see section 318. If "Yes," enter:</p> <p>(a) Percentage owned ▶ _____ and (b) Owner's country ▶ _____</p> <p>(c) The corporation may have to file <b>Form 5472</b>, Information Return of a 25% Foreign-Owned U.S. Corporation or a Foreign Corporation Engaged in a U.S. Trade or Business. Enter the number of Forms 5472 attached ▶ _____</p> <p><b>8</b> Check this box if the corporation issued publicly offered debt instruments with original issue discount ..... <input type="checkbox"/>                   If checked, the corporation may have to file <b>Form 8281</b>, Information Return for Publicly Offered Original Issue Discount Instruments.</p> <p><b>9</b> Enter the amount of tax-exempt interest received or accrued during the tax year ▶ \$ _____ <u>None</u></p> <p><b>10</b> Enter the number of shareholders at the end of the tax year (if 100 or fewer) ▶ <u>5</u></p> <p><b>11</b> If the corporation has an NOL for the tax year and is electing to forego the carryback period, check here (see instructions) ..... <input type="checkbox"/>                   If the corporation is filing a consolidated return, the statement required by Regulations section 1.1502-21(b)(3) must be attached or the election will not be valid.</p> <p><b>12</b> Enter the available NOL carryover from prior tax years (do not reduce it by any deduction reported on page 1, line 29a.) ▶ \$ _____ <u>195,250</u></p>	Yes	No																																																

**Schedule K** Other Information (continued from page 4)

	Yes	No
<b>13</b> Are the corporation's total receipts (page 1, line 1a, plus lines 4 through 10) for the tax year <b>and</b> its total assets at the end of the tax year less than \$250,000? .....		X
If "Yes," the corporation is not required to complete Schedules L, M-1, and M-2. Instead, enter the total amount of cash distributions and the book value of property distributions (other than cash) made during the tax year ▶ \$ _____		
<b>14</b> Is the corporation required to file Schedule UTP (Form 1120), Uncertain Tax Position Statement? See instructions .....		X
If "Yes," complete and attach Schedule UTP.		
<b>15 a</b> Did the corporation make any payments in 2018 that would require it to file Form(s) 1099? .....	X	
<b>b</b> If "Yes," did or will the corporation file required Forms 1099? .....	X	
<b>16</b> During this tax year, did the corporation have an 80% or more change in ownership, including a change due to redemption of its own stock? .....		X
<b>17</b> During or subsequent to this tax year, but before the filing of this return, did the corporation dispose of more than 65% (by value) of its assets in a taxable, non-taxable, or tax deferred transaction? .....		X
<b>18</b> Did the corporation receive assets in a section 351 transfer in which any of the transferred assets had a fair market basis or fair market value of more than \$1 million? .....		X
<b>19</b> During the corporation's tax year, did the corporation make any payments that would require it to file Forms 1042 and 1042-S under chapter 3 (sections 1441 through 1464) or chapter 4 (sections 1471 through 1474) of the Code? .....		X
<b>20</b> Is the corporation operating on a cooperative basis? .....		X
<b>21</b> During the tax year, did the corporation pay or accrue any interest or royalty for which the deduction is not allowed under section 267A? See instructions .....		X
If "Yes," enter the total amount of the disallowed deductions ▶ \$ _____		
<b>22</b> Does the corporation have gross receipts of at least \$500 million in any of the 3 preceding tax years? (See sections 59A(e)(2) and (3)). .....		X
If "Yes," complete and attach Form 8991.		
<b>23</b> Did the corporation have an election under section 163(j) for any real property trade or business or any farming business in effect during the tax year? See instructions .....		X
<b>24</b> Does the corporation satisfy one of the following conditions and the corporation does not own a pass-through entity with current year, or prior year carryover, excess business interest expense? See instructions .....	X	
<b>a</b> The corporation's aggregate average annual gross receipts (determined under section 448(c)) for the 3 tax years preceding the current tax year do not exceed \$25 million, and the corporation is not a tax shelter, or		
<b>b</b> The corporation only has business interest expense from (1) an electing real property trade or business, (2) an electing farming business, or (3) certain utility businesses under section 163(j)(7). If "No," complete and attach Form 8990.		
<b>25</b> Is the corporation attaching Form 8996 to certify as a Qualified Opportunity Fund? .....		X
If "Yes," enter amount from Form 8996, line 13 ▶ \$ _____		

Schedule L	Balance Sheets per Books	Beginning of tax year		End of tax year	
		(a)	(b)	(c)	(d)
<b>Assets</b>					
1	Cash		1,120,741.		532,870.
2a	Trade notes and accounts receivable				
b	Less allowance for bad debts				
3	Inventories				
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) See St. 3				476,241.
10a	Buildings and other depreciable assets	53,723.		53,723.	
b	Less accumulated depreciation	45,987.	7,736.	49,081.	4,642.
11a	Depletable assets				
b	Less accumulated depletion				
12	Land (net of any amortization)		512,168.		535,649.
13a	Intangible assets (amortizable only)				
b	Less accumulated amortization				
14	Other assets (attach statement) See St. 4		1,606.		1,606.
15	Total assets		1,642,251.		1,551,008.
<b>Liabilities and Shareholders' Equity</b>					
16	Accounts payable		46.		46.
17	Mortgages, notes, bonds payable in less than 1 year				
18	Other current liabilities (attach stmt)				
19	Loans from shareholders				
20	Mortgages, notes, bonds payable in 1 year or more				
21	Other liabilities (attach statement)				
22	Capital stock: a Preferred stock				
	b Common stock	5,000.	5,000.	5,000.	5,000.
23	Additional paid-in capital		45,356.		45,356.
24	Retained earnings — Approp (att stmt)				
25	Retained earnings — Unappropriated		1,740,900.		1,649,657.
26	Adjmt to shareholders' equity (att stmt)				
27	Less cost of treasury stock		149,051.		149,051.
28	Total liabilities and shareholders' equity		1,642,251.		1,551,008.

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

Note: The corporation may be required to file Schedule M-3. See instructions.

1	Net income (loss) per books	-91,243.	7	Income recorded on books this year not included on this return (itemize):	
2	Federal income tax per books			Tax-exempt interest \$	
3	Excess of capital losses over capital gains				
4	Income subject to tax not recorded on books this year (itemize):				
5	Expenses recorded on books this year not deducted on this return (itemize):		8	Deductions on this return not charged against book income this year (itemize):	
a	Depreciation \$		a	Depreciation \$	
b	Charitable contributions \$		b	Charitable contribns \$	
c	Travel & entertainment \$				
6	Add lines 1 through 5	-91,243.	9	Add lines 7 and 8	0.
			10	Income (page 1, line 28) — line 6 less line 9	-91,243.

**Schedule M-2 Analysis of Unappropriated Retained Earnings per Books (Line 25, Schedule L)**

1	Balance at beginning of year	1,740,900.	5	Distributions: a Cash	
2	Net income (loss) per books	-91,243.	b	Stock	
3	Other increases (itemize):		c	Property	
			6	Other decreases (itemize):	
			7	Add lines 5 and 6	
4	Add lines 1, 2, and 3	1,649,657.	8	Balance at end of year (line 4 less line 7)	1,649,657.



Form **4562**

**Depreciation and Amortization  
(Including Information on Listed Property)**

OMB No. 1545-0172

**2018**

Department of the Treasury  
Internal Revenue Service (99)

▶ **Attach to your tax return.**  
▶ **Go to [www.irs.gov/Form4562](http://www.irs.gov/Form4562) for instructions and the latest information.**

Attachment  
Sequence No. **179**

Name(s) shown on return

Vista Del Mar Irrigation Company

Identifying number

74-6031426

Business or activity to which this form relates

Form 1120

**Part I Election To Expense Certain Property Under Section 179**

**Note:** If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions) .....	1	
2	Total cost of section 179 property placed in service (see instructions) .....	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions) .....	3	
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0- .....	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions .....	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29 .....	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 .....	8	
9	Tentative deduction. Enter the <b>smaller</b> of line 5 or line 8 .....	9	
10	Carryover of disallowed deduction from line 13 of your 2017 Form 4562 .....	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instrs .....	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11 .....	12	
13	Carryover of disallowed deduction to 2019. Add lines 9 and 10, less line 12 .....	▶ 13	

**Note:** Don't use Part II or Part III below for listed property. Instead, use Part V.

**Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.)**

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions. ....	14	
15	Property subject to section 168(f)(1) election .....	15	
16	Other depreciation (including ACRS) .....	16	

**Part III MACRS Depreciation (Don't include listed property. See instructions.)**

**Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2018 .....	17	3,094.
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here .....	▶ <input type="checkbox"/>	

**Section B – Assets Placed in Service During 2018 Tax Year Using the General Depreciation System**

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only — see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19 a 3-year property .....						
b 5-year property .....						
c 7-year property .....						
d 10-year property .....						
e 15-year property .....						
f 20-year property .....						
g 25-year property .....			25 yrs		S/L	
h Residential rental property .....			27.5 yrs	MM	S/L	
i Nonresidential real property .....			39 yrs	MM	S/L	
				MM	S/L	

**Section C – Assets Placed in Service During 2018 Tax Year Using the Alternative Depreciation System**

20 a Class life .....					S/L	
b 12-year .....			12 yrs		S/L	
c 30-year .....			30 yrs	MM	S/L	
d 40-year .....			40 yrs	MM	S/L	

**Part IV Summary (See instructions.)**

21	Listed property. Enter amount from line 28 .....	21	
22	<b>Total.</b> Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations — see instructions .....	22	3,094.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs .....	23	

**Statement 1**  
**Form 1120, Line 26**  
**Other Deductions**

Bank Charges .....	\$	187.
Insurance.....		1,804.
Land Maintenance .....		540.
Legal and Professional.....		5,097.
Miscellaneous.....		790.
Outside Services.....		65,400.
Travel.....		3,923.
	Total	<u>\$ 77,741.</u>

**Statement 2**  
**Form 1120, Line 29a**  
**Net Operating Loss Deduction**

Carryover Generated From Year End 12/31/15	\$	95,040.	
Available for Carryover to 2018.....			95,040.
Carryover Generated From Year End 12/31/16	\$	71,434.	
Amount Utilized in 2014		71,434.	
Total Utilization		<u>71,434.</u>	
Available for Carryover to 2018.....			0.
Carryover Generated From Year End 12/31/17	\$	100,210.	
Available for Carryover to 2018.....			100,210.
Net Operating Losses Available in 2018.....	\$		<u>195,250.</u>
Taxable Income.....			-91,243.
Total Net Operating Loss Deduction (Limited to TI).....			<u>0.</u>

**Statement 3**  
**Form 1120, Schedule L, Line 9**  
**Other Investments**

	<u>Beginning</u>	<u>Ending</u>
Custody-Common Stock .....	\$ 0.	\$ 476,241.
Total	<u>\$ 0.</u>	<u>\$ 476,241.</u>

Statement 4  
Form 1120, Schedule L, Line 14  
Other Assets

	<u>Beginning</u>	<u>Ending</u>
Other Assets .....	\$ 1,606.	\$ 1,606.
Total	<u>\$ 1,606.</u>	<u>\$ 1,606.</u>

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

The Corporation hereby makes the de minimis safe harbor election under Regulation 1.263(a)-1(f).

Vista Del Mar Irrigation Company  
13714 Cayo Cantiles  
Corpus Christi, TX 78418  
74-6031426

K-120

2018 CORPORATE INCOME TAX

005

151018

Rev. 7-18

Page 1 of 6

For the taxable year beginning

01012018

ending

12312018

Vista Del Mar Irrigation Company

EIN this entity

EIN Federal Consolidated Parent

13714 Cayo Cantiles
Corpus Christi, TX 78418

746031426

A Method Used to Determine Income of Corporation in Kansas

B Business Activity Code

G Type of Federal Return Filed:

1 Activity wholly within Kansas - Single entity

532400

X 1 Separate

2 Activity wholly within Kansas - Consolidated

C Date Business Began in KS

2 Consolidated

X 3 Single entity apportionment method (K-120AS)

04011992

H Have you submitted Form K-120EL?

4 Combined income method - Single corporation filing (Sch. K-121)

D Date Business Discontinued in KS

I Enter your original federal due date if other than 15th day of 4th month after the end of tax year.

5 Combined income method - Multiple corporation filing (Sch. K-121)

12312018

6 Qualified elective two-factor (K-120AS) Year qualified:

E State and Month/Day/Year of Incorporation

J Name or address has changed?

7 Common carrier mileage (Enclose mileage apportionment schedule)

TX 08201928

8 Alternative or separate accounting (Enclose letter of authorization and schedule)

F State of Commercial Domicile TX

Filing an amended corporate income return. Reason for amended return:
Note: This form cannot be used for tax years prior to 2018.

Amended affects Kansas only

Adjustment by IRS

Amended Federal return

Table with 3 columns: Description, Amended affects Kansas only, Adjustment by IRS, Amended Federal return. Rows include Federal taxable income, Total state and municipal interest, Taxes on or measured by income or fees, Federal net operating loss deduction, Other additions to federal taxable income, Total additions to federal taxable income, Interest on U.S. government obligations, IRC Section 78 and 80% of foreign dividends, Other subtractions from federal taxable income, Total subtractions from federal taxable income, Net income before apportionment, Nonbusiness income - Total company, Apportionable business income, Average percent to Kansas, Amount to Kansas, Nonbusiness income - Kansas, Kansas Expensing Recapture, Kansas Expensing Deduction, Kansas net income before NOL deduction, Kansas net operating loss deduction, Combined report (Schedule K-121) or alternative/separate accounting income.

Vista Del Mar Irrigation Company


746031426

22 Kansas taxable income (Subtract line 20 from line 19 or enter line 21, as applicable)	0.00	33 Overpayment from original return (This figure is a subtraction; see instructions)	00
23 Normal tax (4% of line 22)	0.00	34 Total prepaid credits (Add lines 28-32 and subtract line 33)	00
24 Surtax (3% of line 22 in excess of \$50,000)	0.00	35 Balance due (If line 27 exceeds line 34)	0.00
25 Total tax (Add lines 23 and 24. If filing combined, use line 24 of K-121.)	0.00	36 Interest	00
26 Total nonrefundable credits (Part I, line 27; cannot exceed amount on line 25)	00	37 Penalty	00
27 Balance (Subtract line 26 from line 25; cannot be less than zero)	0.00	38 Estimated tax penalty	00
28 Estimated tax paid and amount credited forward (Part II, line 4)	00	If annualizing to compute penalty, check this field	
29 Other tax payments (enclose separate schedule)	00	39 Total tax, interest & penalty due (Add lines 35-38) Complete Form K-120V & enclose it with your payment	00
30 Amount paid with Kansas extension	00	40 Overpayment (If line 27 plus line 38 is less than line 34)	00
31 Total of all other refundable credits (Part I, line 34)	00	41 Refund. Enter the amount of line 40 you wish to be refunded	00
32 Payments remitted with original return (See instructions)	00	42 Credit Forward. Enter the amount of line 40 (original return only) you wish to apply to 2019 estimated tax. (Line 42 cannot exceed the total of lines 28, 29 and 30)	00

KSCA0112L 10/17/18

I authorize the Director of Taxation or the Director's designee to discuss my K-120 and any enclosures with my preparer.  
 I declare under the penalties of perjury that to the best of my knowledge and belief this is a true, correct, and complete return.

Officer Signature \_\_\_\_\_ Title President Date \_\_\_\_\_  
 (Required)

Preparer Signature John W Duncan, CPA  Preparer Phone Number 9136607710 Preparer SSN or EIN/PTIN P01668108 Date 03/09/2019

WALSH WASHBURN, LLC 5360 COLLEGE BOULEVARD SUITE  
 OVERLAND PARK, KS 66211-1621

**PART I - NONREFUNDABLE CREDITS**

---

1	Center for Entrepreneurship Credit (Enclose Schedule K-31; see instructions) .....	00
2	Agritourism Liability Insurance Credit (Enclose Schedule K-33; See instructions) .....	00
3	Business and Job Development Credit - <b>for carry forward use only</b> (Enclose Schedule K-34; See instructions) .....	00
4	Historic Preservation Credit (Enclose Schedule K-35; See instructions) .....	00
5	Disabled Access Credit (Enclose Schedule K-37; See instructions) .....	00
6	Swine Facility Improvement Credit (Enclose Schedule K-38; See instructions) .....	00
7	Oil and Gas Well Plugging Credit (Enclose Schedule K-39; See instructions) .....	00
8	Assistive Technology Contribution Credit (Enclose Schedule K-42; See instructions) .....	00
9	Research and Development Credit (Enclose Schedule K-53; See instructions) .....	00
10	Venture Capital Credit - <b>for carryforward use only</b> (Enclose Schedule K-55; See instructions).....	00
11	Seed Capital Credit - <b>for carryforward use only</b> (Enclose Schedule K-55; See instructions).....	00
12	High Performance Incentive Program Credit (Enclose Schedule K-59; See instructions) .....	00
13	Community Service Contribution Credit (Enclose Schedule K-60; See instructions) .....	00
14	Alternative-Fueled Motor Vehicle Property Credit (Enclose Schedule K-62; See instructions) .....	00
15	Low Income Student Scholarship Credit (Enclose Schedule K-70; see instructions) .....	00
16	Law Enforcement Training Center Credit - <b>for carry forward use only</b> (Enclose Schedule K-72; see instructions) .....	00
17	Petroleum Refinery Credit - <b>for carry forward use only</b> (Enclose Schedule K-73; see instructions).....	00
18	Kansas National Guard and Reserve Employer Credit (Enclose Schedule K-74; see instructions) .....	00
19	Single City Port Authority Credit (Enclose Schedule K-76; see instructions) .....	00
20	Qualifying Pipeline Credit - <b>for carry forward use only</b> (Enclose Schedule K-77; see instructions).....	00
21	BioMass-to-Energy Credit - <b>for carry forward use only</b> (Enclose Schedule K-79; see instructions) .....	00
22	Environmental Compliance Credit (Enclose Schedule K-81; see instructions) .....	00
23	Storage and Blending Equipment Credit - <b>for carry forward use only</b> (Enclose Schedule K-82; see instructions) .....	00
24	Electric Cogeneration Facility Credit - <b>for carry forward use only</b> (Enclose Schedule K-83; see instructions) ..	00
25	Declared Disaster Capital Investment Credit - <b>for carry forward use only</b> (Enclose Schedule K-87; see instructions) ..	00
26	Farm Net Operating Loss (Enclose Schedule K-139F; see instructions) .....	00
27	<b>Total nonrefundable credits (Enter on line 26, page 2)</b> .....	00

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**REFUNDABLE CREDITS**

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28	Telecommunications Credit (Enclose Schedule K-36; See instructions) .....	00
29	Child Day Care Assistance Credit (Enclose Schedule K-56; See instructions) .....	00
30	Small Employer Healthcare Credit (Enclose Schedule K-57; See instructions) .....	00
31	Community Service Contribution Credit (Enclose Schedule K-60; See instructions) .....	00
32	Individual Development Account Credit (Enclose Schedule K-68; See instructions) .....	00
33	Farm Net Operating Loss (Enclose Schedule K-139F; See instructions) .....	00
34	<b>Total refundable credits (Enter on line 31, page 2)</b> .....	00

**PART II ADDITIONAL INFORMATION**

1 Did the corporation file a Kansas Income Tax return under the same name for the preceding year?  Yes  No If "no", enter previous name and EIN. \_\_\_\_\_

2 Enter the address of the corporation's principal location in Kansas.  
13714 Cayo Cantiles  
Corpus Christi, TX 78418

3 The corporation's books are in care of:  
Name The Corporation  
Address 13714 Cayo Cantiles  
Corpus Christi, TX 78418  
Telephone 816-474-9737

4 List each estimated tax payment and credit forward amount claimed on this return.

Date	Amount	Date	Amount

5 Has your corporation been involved in any reorganization during the period covered by this return?  Yes  No If "yes", enclose a detailed explanation.

6 If this is a final return for Kansas, please state the reason. If the corporation was liquidated or dissolved, state the IRC section under which the corporation was liquidated.

7 If your federal taxable income has been redetermined for any prior year(s) that have not previously been reported to Kansas, check the applicable box(es) below and state the calendar, fiscal, or short period year ending date. You are required to submit, under separate cover, the federal Forms 1139, 1120X, or Revenue Agent's Report along with the Kansas amended return (Form K-120 or K-120X, whichever is applicable).

Revenue Agent's Report  Net Operating Loss  
 Amended Return Years ended \_\_\_\_\_

8 If you are registered with the Kansas Department of Revenue under any other Kansas tax act, enter all registration or license numbers on the applicable line:

a Sales Tax \_\_\_\_\_  
b Compensating Use Tax \_\_\_\_\_  
c Withholding Tax \_\_\_\_\_  
d Other (specify) \_\_\_\_\_

**PART III AFFILIATED CORPORATIONS DOING BUSINESS IN KANSAS**

(Enclose a separate sheet for additional corporations)

Name of Corporation	Employer ID Number

**PART IV SCHEDULE OF TAXES**

(Include those taxes deducted on line 17 of the federal return. See instructions.)

1 Taxes on or measured by income or fees or payments in lieu of income taxes. (Include federal environmental tax; itemize)

<u>Ad Valorem Taxes</u>	20796.
2 Total (Enter on line 3, page 1)	20796.
3 Total other taxes	53.
4 Total taxes (Must equal line 17 of the federal return)	20849.

**PART V SCHEDULE OF INTEREST INCOME**

(Include the interest from line 5 of the federal return)

1 U.S. interest income (Describe type):

2 Total (Enter on line 7, page 1)	
3 Total other interest income	10441.
4 Total interest income (Must equal line 5 of the federal return)	10441.

Name as shown on Form K-120 <b>Vista Del Mar Irrigation Company</b>	Employer Identification Number (EIN) <b>746031426</b>
--	--

**PART VI**

**APPORTIONMENT FORMULA**

A Property	WITHIN KANSAS		TOTAL COMPANY		PERCENT WITHIN KANSAS
	Beginning of Year	End of Year	Beginning of Year	End of Year	
1 Value of owned real and tangible personal property used in business at original cost:					
Inventory .....					
Depreciable assets .....			53,723.	53,723.	
Land .....			512,168.	535,649.	
Other tangible assets (Enclose schedule) .....					
Less: Construction in progress .....					
Total property to be averaged .....			565,891.	589,372.	
Average owned property (Beginning + End ÷ 2) .....				577,632.	
2 Net annual rented property. Multiplied by 8 .....					
TOTAL PROPERTY (Enter on line 14A, page 1) .....				577,632.	

B Payroll (Those corporations qualified and utilizing the elective two-factor formula must complete this area only during the first year of qualifying.)	WITHIN KANSAS	TOTAL COMPANY	
1 Compensation of officers .....			
2 Wages, salaries and commissions .....			
3 Payroll expense included in cost of goods sold .....			
4 Payroll expense included in repairs .....			
5 Other wages and salaries .....			
TOTAL PAYROLL (Enter on line 14B, page 1). (If qualified and utilizing the elective two-factor formula, do not carry this percentage to page 1) .....			

C Sales (Gross receipts, less returns and allowances) .....			
1 Sales delivered or shipped to purchasers in Kansas:			
(a) Shipped from outside Kansas .....			
(b) Shipped from within Kansas .....			
2 Sales shipped from Kansas to:			
(a) The United States Government .....			
(b) Purchasers in a state where the taxpayer would not be taxable (e.g., under federal Public Law 86-272) .....			
3 Dividends .....			
Interest .....		10,441.	
Rents .....			
Royalties .....			
Gains/losses from intangible asset sales .....			
Gross proceeds from tangible asset sales .....			
Other income (Enclose schedule) .....			
TOTAL SALES (Enter on line 14C, page 1) .....		10,441.	<b>C</b> 0.0000 %

<b>D1</b> Total percent (Sum of lines A, B & C if qualified and utilizing three-factor formula) .....	<b>D1</b> %
<b>D2</b> Total percent (Sum of lines A & C if qualified and utilizing two-factor formula) .....	<b>D2</b> %
<b>E</b> Average percent of either D1 or D2, whichever is applicable (Enter on line 14, page 1) .....	<b>E</b> 0.0000 %

PART VII Page 6 of 6

ADDITIONAL INFORMATION

1 Does the Kansas sales figure in Part VI include (1) all sales delivered from Kansas where purchaser is the U.S. Government and (2) all sales delivered from Kansas to states in which this corporation is immune from state income taxation under federal Public Law 86-272 (15 U.S.C. 381)? Yes

If not, please explain:

b Has any state determined that this corporation conducts or has conducted a unitary business with any other corporation? [X] No [ ] Yes If yes, specify which state or states and enclose a complete list of the corporations conducting the unitary business.

3 Describe briefly the nature and location(s) of your Kansas business activities.

2 If you claim that part of your net income is assignable to business done outside Kansas: a Enclose a list of all states in which this corporation is doing business and filing state corporation income or franchise tax returns.

4 Are the amounts in the total company column the same as those reported in returns or reports to other states under the Uniform Division of Income for Tax Purposes Act? [X] Yes [ ] No If no, please explain

PART VIII AFFILIATED CORPORATIONS INCLUDED IN FORM K-120AS CORPORATION APPORTIONMENT SCHEDULE

Check if included

Table with 4 columns: Name of Corporation, Employer Identification Number, In Total Company Factors, Within Kansas Factors

PART IX - KANSAS PASS-THROUGH SCHEDULE

The distributions from the entities listed below have been passed-through and are included in your entity.

Table with 6 columns: Pass-through Entity Name, EIN of Pass-through Entity, Your Entity to which income of Pass-through is included, EIN to which income of Pass-through Entity is included, Principal Product of Services of Pass-through Entity, Kansas Operations (Y/N)

PART X - KANSAS DISREGARDED ENTITY SCHEDULE

The disregarded entities listed below are included in this return.

KSCA0212L 10/17/18

Table with 6 columns: Disregarded Entity Name, EIN of Disregarded Entity, Your Entity to which income of Disregarded Entity is included, EIN to which income of Disregarded Entity is included, Principal Product of Services of Disregarded Entity, Kansas Operations (Y/N)

Statement 1  
Form K-120, Line 20  
Kansas Net Operating Loss Deduction

Carryover Generated From Year End	12/31/15	\$	47,520.	
Available for Carryover to 2018.....				47,520.
Carryover Generated From Year End	12/31/16	\$	35,717.	
Available for Carryover to 2018.....				35,717.
Carryover Generated From Year End	12/31/17	\$	50,105.	
Available for Carryover to 2018.....				50,105.
Total Net Operating Loss Deduction.....		\$		<u>133,342.</u>

# Texas Franchise Tax No Tax Due Report

■ **Tcode** 13255 Annual

The law requires No Tax Due Reports originally due on or after Jan. 1, 2016 to be filed electronically. Filing this paper report means you are requesting, and we are granting, a waiver from the electronic reporting requirement for this report year ONLY.

■ Taxpayer number 17460314267	■ Report year 2019	Due date 05/15/2019
----------------------------------	-----------------------	------------------------

Taxpayer name Vista Del Mar Irrigation Company				Secretary of State file number or Comptroller file number 0005204900	
Mailing address 13714 Cayo Cantiles				Check box if the address has changed <input type="checkbox"/>	
City Corpus Christi	State TX	Country United States	ZIP code plus 4 78418		
Check box if this is a combined report <input type="checkbox"/>				NAICS code 532400	
Check box if Total Revenue is adjusted for Tiered Partnership Election, see instructions. (Note: Upper tiered partnerships do not qualify to use this form.) <input type="checkbox"/>			Check box to request a Certificate of Account Status <input type="checkbox"/>		
Is this entity a corporation, limited liability company, professional association, limited partnership or financial institution? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					

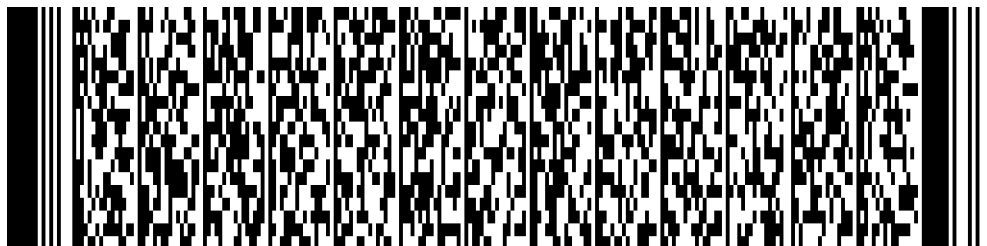
If any of the statements below are true, you qualify to file this No Tax Due Report (Check all boxes that apply.):

1. This entity is a passive entity as defined in Texas Tax Code Sec. 171.0003. (See instructions.) (Passive income does NOT include rent.) 1.
  2. This entity's annualized total revenue is below the no tax due threshold. 2.
  3. This entity has zero Texas Gross Receipts. 3.
  4. This entity is a Real Estate Investment Trust (REIT) that meets the qualifications specified in Texas Tax Code Sec. 171.0002(c)(4). 4.
  5. This entity is a new veteran-owned business as defined in Texas Tax Code Sec. 171.0005. (See instructions.) (Must have formed after Jan. 1, 2016 and must be pre-qualified.) 5.
- 6a. Accounting year begin date m m d d y y  
6a.  010118
- 6b. Accounting year end date m m d d y y  
6b.  123118
7. TOTAL REVENUE (Whole dollars only) 7.  10441.00

Print or type name Laurence R Jones Jr		Area code and phone number (816) 474-9737	
I declare that the information in this document and any attachments is true and correct to the best of my knowledge and belief.		<b>Mail original to:</b> Texas Comptroller of Public Accounts P.O. Box 149348 Austin, TX 78714-9348	
sign here	Date		

Instructions for each report year are online at [www.comptroller.texas.gov/taxes/franchise/forms/](http://www.comptroller.texas.gov/taxes/franchise/forms/). If you have any questions, call 1-800-252-1381.

**Texas Comptroller Official Use Only**



VE/DE	<input type="checkbox"/>
PM Date	<input type="text"/>



**Texas Franchise Tax Public Information Report**  
To be filed by Corporations, Limited Liability Companies (LLC), Limited Partnerships (LP),  
Professional Associations (PA) and Financial Institutions

■ Tcode 13196

■ Taxpayer number ■ Report year

17460314267	2019
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*You have certain rights under Chapter 552 and 559, Government Code, to review, request and correct information we have on file about you. Contact us at 1-800-252-1381.*

Taxpayer name <b>Vista Del Mar Irrigation Company</b>			<input type="checkbox"/> Check box if the mailing address has changed.
Mailing address <b>13714 Cayo Cantiles</b>		Secretary of State (SOS) file number or Comptroller file number	
City <b>Corpus Christi</b>	State <b>TX</b>	ZIP code plus 4 <b>78418</b>	<b>0005204900</b>

Check box if there are currently no changes from previous year; if no information is displayed, complete the applicable information in Sections A, B and C.

Principal office <b>13714 Cayo Cantiles, Corpus Christi, TX 78418</b>
Principal place of business <b>13714 Cayo Cantiles, Corpus Christi, TX 78418</b>

*You must report officer, director, member, general partner and manager information as of the date you complete this report.*



1746031426719

**Please sign below!** This report must be signed to satisfy franchise tax requirements.

**SECTION A** Name, title and mailing address of each officer, director, member, general partner or manager.

Name	Title	Director	Term expiration	m m d d y y
Laurence R Jones Jr	President	<input checked="" type="checkbox"/> YES		
Mailing address 2901 Verona Rd.	City Corpus Christi	State TX	ZIP Code 66208	
L. R. Jones III	Secretary	<input checked="" type="checkbox"/> YES		
Mailing address 13714 Cayo Cantiles	City Corpus Christi	State TX	ZIP Code 78418	
Name	Title	<input type="checkbox"/> YES	Term expiration	m m d d y y
Mailing address	City	State	ZIP Code	

**SECTION B** Enter information for each corporation, LLC, LP, PA or financial institution, if any, in which this entity owns an interest of 10 percent or more.

Name of owned (subsidiary) corporation, LLC, LP, PA or financial institution	State of formation	Texas SOS file number, if any	Percentage of ownership

**SECTION C** Enter information for each corporation, LLC, LP, PA or financial institution, if any, that owns an interest of 10 percent or more in this entity.

Name of owned (parent) corporation, LLC, LP, PA or financial institution	State of formation	Texas SOS file number, if any	Percentage of ownership

Registered agent and registered office currently on file (see instructions if you need to make changes) *You must make a filing with the Secretary of State to change registered agent, registered office or general partner information.*

Agent: <b>David M Coover Jr</b>	City <b>Corpus Christi</b>	State <b>TX</b>	ZIP Code <b>78401</b>
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The information on this form is required by Section 171.203 of the Tax Code for each corporation, LLC, LP, PA or financial institution that files a Texas Franchise Tax Report. Use additional sheets for Sections A, B, and C, if necessary. The information will be available for public inspection.

I declare that the information in this document and any attachments is true and correct to the best of my knowledge and belief, as of the date below, and that a copy of this report has been mailed to each person named in this report who is an officer, director, member, general partner or manager and who is not currently employed by this or a related corporation, LLC, LP, PA or financial institution.

<b>sign here</b> ▶	Title <b>President</b>	Date	Area code and phone number <b>(816) 474-9737</b>
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**Texas Comptroller Official Use Only**



VE/DE	<input type="checkbox"/>	PIR IND	<input type="checkbox"/>
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