FORM **65** *11000165*

ALABAMA DEPARTMENT OF REVENUE

● CY ☒ ● FY ☐ ●SY ☐ **2011**

Partnership/Limited Liability Company Return of Income

ALSO TO BE FILED BY SYNDICATES, POOLS, JOINT VENTURES, ETC.

Important! You Must Check Applicable Box:

- ● ☐ Amended Return
- ● ☐ Initial Return
- ● ☐ Final Return
- ● ☒ General Partnership
- ● ☐ Limited Partnership
- ● ☐ LLC/LLP
- ● ☐ Qualified Investment Partnership

For Calendar Year 2011 or Fiscal Year beginning ● 1/1, 2011, and ending ● 12/31, 11

DEPARTMENT USE ONLY

FN

FEDERAL BUSINESS CODE NUMBER ● 123460

FEDERAL EMPLOYER IDENTIFICATION NUMBER ● 47-5058380

Name of Company ● Dunham's

Number and Street: 10-147 34 Main Street

City or Town: Montreal, QC H2Z 2Y9 | State: QC | 9 Digit ZIP Code: 00000-0000

Check if the company operates in more than one state ● ☒

If above name or address is different from the one shown on your 2010 return, check here ● ☐

Check if the company qualifies for the Alabama Enterprise Zone Credit or the Capital Credit ● ☐

Number of Members During The Tax Year ● 2

Total Federal income as shown on Form 1065, line 8. ●

Total Federal deductions as shown on Form 1065, line 21. ●

Total assets as shown on Form 1065. ●

CN

State in Which Company Was Formed: ● Canada

Nature of Business: ● Sporting Goods

Date Qualified in Alabama: ● 01/01/2000

Number of Nonresident Members Included in Composite Filing ●

UNLESS A COPY OF FEDERAL FORM 1065 IS ATTACHED THIS RETURN IS INCOMPLETE

SCHEDULE A — COMPUTATION OF SEPARATELY STATED AND NONSEPARATELY STATED INCOME

	1 Federal Ordinary Income or (Loss) from trade or business activities			1	● (100,000)
Reconciliation to Alabama Basis *(see instructions)*	2 Net short-term and long-term capital gains – income or (loss)	2	●		
	3 Salaries and wages reduced for federal employment credits	3	●( )		
	4 Net income or (loss) from rental real estate activities	4	●		
	5 Net income or (loss) from other rental activities	5	●		
	6 Net gain or (loss) under **I.R.C. §1231** *(other than casualty losses)*	6	●		
	7 Adjustments due to the Federal Economic Stimulus Act of 2008 *(attach schedule)*	7	●		
	8 Other reconciliation items *(attach schedule)*	8	●		
	9 Net reconciling items *(add lines 2 through 8)*			9	●
	10 Net Alabama nonseparately stated income or (loss) *(add line 1 and line 9)*			10	● (100,000)
Separately Stated Items (Related to Business Income)	11 Contributions	11	●( )		
	12 Oil and gas depletion	12	●( )		
	13 **I.R.C. §179** expense deduction *(complete Schedule K)*	13	●( )		
	14 Casualty losses	14	●( )		
	15 Portfolio income or (loss) less expenses *(complete Schedule K)*	15	●		
	16 Other separately stated items *(attach schedule)*	16	●		
	17 Net separately stated items *(add line 11 through 16)*			17	●
	18 Total separately stated and nonseparately stated items *(add line 10 and line 17)*			18	●
	19 Alabama apportionment factor from Schedule D, line 4	19	● 50.0000 %		***Do not multiply line 18 by line 19***
	20 Nonseparately Stated Income Allocated and Apportioned to Alabama from Schedule D, line 7			20	● (50,000)

Please Sign Here

●☒ I authorize a representative of the Department of Revenue to discuss my return and attachments with my preparer.

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature of general partner	Date	Daytime Telephone No.	Social Security No.
	01/01/12	(877) 874-1074	555 55 5874

Paid Preparer's Use Only

Preparer's Signature	Date	Check if self-employed	Preparer's PTIN
	● 01/01/2012	☒	● P34 56 7891

Firm's name (or yours, if self-employed) and address: ● Canada Tax

Telephone No.: (877) 874-1074

E.I. No.: 87-4917488

● 10-172 98 Canada Tax Lane Montreal, QC H2Z 2Y9

ZIP Code: 00000

Email Address: canada.tax@email.com

Mail to: Alabama Department of Revenue, Individual and Corporate Tax Division, P.O. Box 327441, Montgomery, AL 36132-7441 **ADOR**

on or before April 17, 2012. (Fiscal Year Returns must be filed on or before the 15th day of the fourth month following the close of the fiscal year.)

SCHEDULE B — ALLOCATION OF NONBUSINESS INCOME, LOSS, AND EXPENSE

Identify by account name and amount all items of nonbusiness income, loss, and expense removed from apportionable income and those items which are directly allocable to Alabama. Adjustment(s) must also be made for any proration of expenses under Alabama Income Tax Rule 810-27-1-4-.01, which states, "Any allowable deduction that is applicable to both business and nonbusiness income of the taxpayer shall be prorated to each class of income in determining income subject to tax as provided…" *(See instructions).*

DIRECTLY ALLOCABLE ITEMS	ALLOCABLE GROSS INCOME / LOSS		RELATED EXPENSE		NET OF RELATED EXPENSE	
	Column A Everywhere	Column B Alabama	Column C Everywhere	Column D Alabama	Column E Everywhere (Col. A less Col. C)	Column F Alabama (Col. B less Col. D)
Nonseparately stated items						
1a	●					
1b	●					
1c	●					
1d Total *(add lines 1a, 1b, and 1c)*					●	
Separately stated items						
1e	●					
1f	●					
1g	●					
1h Total *(add lines 1e, 1f, and 1g)*					●	

SCHEDULE C — APPORTIONMENT FACTOR SCHEDULE – *Do not complete if the entity operates exclusively in Alabama.*

TANGIBLE PROPERTY AT COST FOR PRODUCTION OF BUSINESS INCOME	ALABAMA BEGINNING OF YEAR	ALABAMA END OF YEAR	EVERYWHERE BEGINNING OF YEAR	EVERYWHERE END OF YEAR
1 Inventories	●			
2 Land	●			
3 Furniture and fixtures	●			
4 Machinery and equipment	●			
5 Buildings and leasehold improvements	●			
6 IDB/IRB property (at cost)	●			
7 Government property (at FMV)	●			
8 ●				
9 Less Construction in progress (if included)	●			
10 Totals	●			
11 Average owned property (BOY + EOY ÷ 2)		●		●
12 Annual rental expense	● x8 =		x8 =	
13 Total average property (add line 11 and line 12)	13a	●	13b	●
14 Alabama property factor — 13a ÷ 13b = line 14			14	● %

SALARIES, WAGES, COMMISSIONS AND OTHER COMPENSATION RELATED TO THE PRODUCTION OF BUSINESS INCOME	15a ALABAMA	15b EVERYWHERE	15c
15 Alabama payroll factor — 15a ÷ 15b = 15c	● 25,000	50,000	50.0000 %

SALES	ALABAMA	EVERYWHERE
16 Destination sales	●	
17 Origin sales	●	
18 Total gross receipts from sales	●	
19 Dividends	●	
20 Interest	●	
21 Rents	●	
22 Royalties	●	
23 Gross proceeds from capital and ordinary gains	●	
24 Other ●_____ (Federal 1065, line ●_____)	●	
25 Alabama sales factor — 25a ÷ 25b = line 25c	25a ●	25b

25c	%
26 Enter the amount from line 25c	26	%
27 Sum of lines 14, 15c, 25c, and 26 ÷ 4 = **ALABAMA APPORTIONMENT FACTOR** (Enter here and on line 4, Schedule D, page 3)	27	● 50.0000 %

11000365

SCHEDULE D — APPORTIONMENT AND ALLOCATION OF INCOME TO ALABAMA

1	Net Alabama nonseparately stated income or (loss) from line 10, Schedule A	1	(100,000)
2	Nonseparately stated (income) or loss treated as nonbusiness income *(line 1d, Column E, Schedule B)* – please enter income as a negative amount and losses as a positive amount	2	
3	Apportionable income or (loss) – add line 1 and line 2	3	(100,000)
4	Apportionment factor from line 27, Schedule C	4	50.0000 %
5	Income or (loss) apportioned to Alabama *(multiply amount on line 3 by the percentage on line 4)*	5	(50,000)
6	Nonseparately stated income or (loss) allocated to Alabama as nonbusiness income *(Column F, line 1d, Schedule B)*	6	
7	Nonseparately Stated Income Allocated and Apportioned to Alabama *(add lines 5 and 6)*. Enter this amount on line 20, Schedule A and line 1, Schedule K – Alabama Amount	7	(50,000)

SCHEDULE E — OTHER INFORMATION

1 Indicate method of accounting (a) ☐ cash (b) ☒ accrual (c) ☐ other

2 Check if the company is currently being audited by the IRS ☐ What years are involved? _____

3 Check if the IRS has completed any audits ☐

4 Enter this company's Alabama Withholding Tax Account Number 0000723879

5 Briefly describe your operations Sporting Goods

6 Indicate if company has been (a) ☐ dissolved (b) ☐ sold (c) ☒ incorporated

If company has been dissolved, sold, or incorporated, complete the following:

Nature of change Sporting & Golfing Supplies

Name and address of new company, corporation, or owner(s)

7 Location of the partnership records 10-172 98 Main Street Montreal, QC H2Z 2Y9

8 Check if an Alabama business privilege tax return was filed for this entity ☒

If the privilege tax return was filed using a different FEIN, please provide the name and FEIN used to file the return.

FEIN: NAME:

9 Taxpayer's email address: Dunham.goods@email.com

SCHEDULE K — DISTRIBUTIVE SHARE ITEMS

	Federal Amount	Apportionment Factor	Apportioned Amount	Enter on Alabama Schedule K-1
1 Alabama Nonseparately Stated Income (Schedule D, line 7)			(50,000)	Part III, Line M
Separately Stated Items:				
2 Contributions				Part III, Line S
3 Oil and gas depletion				Part III, Line Z
4 **I.R.C. §179** expense deduction				
a. Amount allowed on 1065				
b. Adjustments required *(see instructions)*				
c. Amount to be apportioned				Part III, Line O
5 Casualty losses				Part III, Line W
6 Portfolio income				Part III, Line Q
7 Interest expense related to portfolio income				Part III, Line P
8 Other expenses related to portfolio income (attach schedule)				Part III, Line R
9 Other separately stated business items (attach explanation)				Part III, Line T
10 Small business health insurance premiums (attach explanation)				Part III, Line Y
11 Separately stated nonbusiness items (attach schedule)				Part III, Line AA
12 Composite payment made on behalf of owner/shareholder				Part III, Line U
13 U.S. taxes paid (attach explanation)				Part III, Line V
14 Alabama exempt income (attach explanation)				Part III, Line AB
15 Reemployment Act of 2010 deduction (attach explanation)				Part III, Line AC
Transactions with Owners:				
16 Property distributions to owners		100%		Part III, Line X
17 Guaranteed payments to partners				Part III, Line N

CHECK LIST

HAVE THE FOLLOWING FORMS BEEN ATTACHED TO THE FORM 65?

☒ ALABAMA SCHEDULE K-1 (one for each owner)

☐ FEDERAL FORM 1065 (entire form as filed with the IRS)

Required Entity Information For Partnerships and LLCs

1. List general partners.

NAME OF GENERAL PARTNER	SSN / FEIN	ADDRESS	PERCENT OF OWNERSHIP
a. Geyer	761676270	10-172 98 Main Street Montreal, QC H2Z 2Y9	50.00
b.			
c.			
d.			
e.			

2. List other states in which the Partnership/LLC operates, if applicable.

3. At any time during the tax year, did the Partnership/LLC transact business in a foreign country? ☒ Yes ☐ No
If yes, complete the information below:

NAME OF COUNTRY	NATURE OF BUSINESS	TAXABLE INCOME REPORTED TO COUNTRY
a. Canada	Selling Golf Goods	874,917.00
b.		
c.		
d.		
e.		

4. At any time during the tax year, did the Partnership/LLC invest in another Pass-Through entity? ☐ Yes ☒ No
If yes, complete the information below:

NAME OF ENTITY	FEIN	PERCENT OF OWNERSHIP
a.		
b.		
c.		
d.		
e.		

5. Person to contact for information regarding this return:

Name: Bill Johnson

Telephone Number: (874) 871-8745

Email: Bill.Johnson@email.com

This schedule does not eliminate the Schedule K-1 filing requirement.

SCHEDULE

K-1

(Form 65 and Form 20S)

110005K1

ALABAMA DEPARTMENT OF REVENUE
INDIVIDUAL & CORPORATE TAX DIVISION

Owner's/Shareholder's Share of Income, Deductions, Credits, etc.

2011

SEE INSTRUCTIONS

- ☐ Subchapter K entity
- ☐ S corporation
- ☐ QIP Indicator

Tax year beginning 1/1, 2011 and ending 12/31, 2012

- ☒ Final K-1
- ☐ Amended K-1

PART I Information About the Pass Through Entity

A Entity's Federal Employer Identification Number
47-5058380

B Entity's name, address, city, state, and ZIP code
Dunham's

PART II Information About the Owner/Shareholder

C Owner's/Shareholder's identifying number
761676270

D Owner's/Shareholder's name
Geyer

E Owner's/Shareholder's street address
10-172 98 Main Street

F Owner's/Shareholder's city, state, ZIP code
Montreal, QC H2Z 2Y9

G ☒ General partner or LLC member manager ☐ Limited partner or other LLC member

H What type of entity is this owner/shareholder?
☐ Tax exempt entity Individual

I Owner's/Shareholder's percentage of profit and (loss) sharing
50.00%

J Check if owner/shareholder is a nonresident ☒ Nonresident
If a nonresident, provide state of legal residence:
Canada / FC "Foreign Country"
Check if the owner is a single member LLC.
☐ Owner

K Owner's capital at end of tax year

L Notes:

PART III Owner's/Shareholder's Share of Current Year Alabama Income, Deductions, Credit, and Other Items

	Income allocated and apportioned to Alabama		100% Alabama – to be reported by Alabama residents
M	Nonseparately stated income (25,000)	M2	
N	Amount of guaranteed payments to partner to be reported by the partner as Alabama source income *(see instructions)*	N2	
O	Section 179 expense	O2	
P	Investment interest expense related to portfolio income	P2	
Q	Portfolio income	Q2	
R	Other expenses related to portfolio income – *do not include interest expense*	R2	
S	Charitable contributions	S2	
T	Other separately stated business items *(attach schedule)*	T2	
U	Composite payment made on behalf of owner/shareholder *(see instructions)*		
V	U.S. income taxes paid *(see instructions)*	V2	
W	Casualty losses *(see instructions)*	W2	
X	Withdrawals and distributions		
Y	Small business health insurance premiums *(attach explanation)*		
Z	Oil and gas depletion	Z2	
AA	Separately stated nonbusiness items *(attach schedule)*		
AB	Alabama exempt income *(attach explanation)*	AB2	
AC	Reemployment Act of 2010 Credit *(attach explanation)*		

ADOR

A completed Alabama Schedule K-1 for each member in the Subchapter K entity/S corporation must be attached to Form 65/Form 20S.

SCHEDULE

K-1

(Form 65 and Form 20S)

110005K1

ALABAMA DEPARTMENT OF REVENUE
INDIVIDUAL & CORPORATE TAX DIVISION

Owner's/Shareholder's Share of Income, Deductions, Credits, etc.

2011

- ☐ Subchapter K entity
- ☐ S corporation
- ☐ QIP Indicator

SEE INSTRUCTIONS

Tax year beginning 1/1, 2011 and ending 12/31, 20____

- ☒ Final K-1
- ☐ Amended K-1

PART I Information About the Pass Through Entity

A Entity's Federal Employer Identification Number
47-5058380

B Entity's name, address, city, state, and ZIP code
Dunham's

PART II Information About the Owner/Shareholder

C Owner's/Shareholder's identifying number
717898484

D Owner's/Shareholder's name
Carter Mills

E Owner's/Shareholder's street address
2844 Main Street

F Owner's/Shareholder's city, state, ZIP code
Mobile, AL 44627

G ☐ General partner or LLC member manager ☐ Limited partner or other LLC member

H What type of entity is this owner/shareholder?
☐ Tax exempt entity Individual

I Owner's/Shareholder's percentage of profit and (loss) sharing
50.00%

J Check if owner/shareholder is a nonresident ☐ Nonresident
If a nonresident, provide state of legal residence:

Check if the owner is a single member LLC.
☐ Owner

K Owner's capital at end of tax year

L Notes:
RETURN SHOULD REJECT FOR RESIDENT NOT FILLING OUT BOTH M1 and M2.

PART III Owner's/Shareholder's Share of Current Year Alabama Income, Deductions, Credit, and Other Items

	Income allocated and apportioned to Alabama		100% Alabama – to be reported by Alabama residents
M	Nonseparately stated income (25,000)	M2	
N	Amount of guaranteed payments to partner to be reported by the partner as Alabama source income *(see instructions)*	N2	
O	Section 179 expense	O2	
P	Investment interest expense related to portfolio income	P2	
Q	Portfolio income	Q2	
R	Other expenses related to portfolio income – *do not include interest expense*	R2	
S	Charitable contributions	S2	
T	Other separately stated business items *(attach schedule)*	T2	
U	Composite payment made on behalf of owner/shareholder *(see instructions)*		
V	U.S. income taxes paid *(see instructions)*	V2	
W	Casualty losses *(see instructions)*	W2	
X	Withdrawals and distributions		
Y	Small business health insurance premiums *(attach explanation)*		
Z	Oil and gas depletion	Z2	
AA	Separately stated nonbusiness items *(attach schedule)*		
AB	Alabama exempt income *(attach explanation)*	AB2	
AC	Reemployment Act of 2010 Credit *(attach explanation)*		

ADOR

A completed Alabama Schedule K-1 for each member in the Subchapter K entity/S corporation must be attached to Form 65/Form 20S.