

2025 Partnership Return

RUNIONS FAMILY LLC
16221 40TH ST SW
LONGBRANCH, WA 98351

Peterson NW CPA Inc
1740 Pottery Ave, Suite 201
Port Orchard, WA 98366

**PETERSON NW CPA INC
1740 POTTERY AVE, SUITE 201
PORT ORCHARD, WA 98366
(360) 329-7031**

February 9, 2026

RUNIONS FAMILY LLC
16221 40TH ST SW
LONGBRANCH, WA 98351

Dear Client:

Your 2025 Federal Partnership Income Tax return will be electronically filed with the Internal Revenue Service upon receipt of a signed Form 8879PE - IRS e-file Signature Authorization. No tax is payable with the filing of this return.

You must distribute a copy of the 2025 Schedule K-1 to each member, if applicable. Be sure to give each member a copy of the Partner's Instructions for Schedule K-1.

Please call if you have any questions.

Sincerely,

MICHELLE PETERSON

Michelle L Peterson, CPA

RUNIONS FAMILY LLC

92-3514349

NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS. PCT.	CUR 179 BONUS	SPECIAL DEPR. ALLOW.	PRIOR 179/ BONUS/ SP. DEPR.	PRIOR DEC. BAL DEPR.	SALVAG /BASIS REDUCT.	DEPR. BASIS	PRIOR DEPR.	METHOD	LIFE	RATE	CURRENT DEPR.
RENTAL REAL ESTATE - CABIN																
BUILDINGS																
1	CABIN RENTAL	3/01/22		94,600							94,600	9,604	S/L MM	27.5	.03636	3,440
	TOTAL BUILDINGS			94,600		0	0	0	0	0	94,600	9,604				3,440
IMPROVEMENTS																
3	SEPTIC IMPROVEMENT	4/30/24		12,078							12,078	604	150DB HY	15	.09500	1,147
	TOTAL IMPROVEMENTS			12,078		0	0	0	0	0	12,078	604				1,147
LAND																
2	CABIN LAND	3/01/22		282,000							282,000					0
	TOTAL LAND			282,000		0	0	0	0	0	282,000	0				0
	TOTAL DEPRECIATION			<u>388,678</u>		<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>388,678</u>	<u>10,208</u>				<u>4,587</u>
	GRAND TOTAL DEPRECIATION			<u>388,678</u>		<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>388,678</u>	<u>10,208</u>				<u>4,587</u>

RUNIONS FAMILY LLC

92-3514349

NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	AMT BASIS	AMT PRIOR DEPR.	AMT METHOD	AMT LIFE	AMT RATE	AMT DEPR.	REG. DEPR.	OWN PCT.	POST-86 DEPR ADJ.	REAL PROP PREF.	LEAS PER PROP PREF.	59 (E)(2) AMORT.
RENTAL REAL ESTATE - CABIN															
BUILDINGS															
1	CABIN RENTAL	3/01/22		94,600	9,604	S/L MM	27.5	.03636	3,440	3,440					0
	TOTAL BUILDINGS			94,600	9,604				3,440	3,440		0	0	0	0
IMPROVEMENTS															
3	SEPTIC IMPROVEMENT	4/30/24		12,078	604	150DB HY	15	.09500	1,147	1,147					0
	TOTAL IMPROVEMENTS			12,078	604				1,147	1,147		0	0	0	0
LAND															
2	CABIN LAND	3/01/22		282,000					0	0					0
	TOTAL LAND			282,000	0				0	0		0	0	0	0
	TOTAL DEPRECIATION			388,678	10,208				4,587	4,587		0	0	0	0
	GRAND TOTAL DEPRECIATION			388,678	10,208				4,587	4,587		0	0	0	0

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IMPROVEMENTS																
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LAND																
2	CABIN LAND	3/01/22		282,000							282,000					0
	TOTAL LAND			282,000		0	0	0	0	0	282,000	0				0
	TOTAL DEPRECIATION			<u>388,678</u>		<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>388,678</u>	<u>10,208</u>				<u>4,587</u>
	GRAND TOTAL DEPRECIATION			<u>388,678</u>		<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>388,678</u>	<u>10,208</u>				<u>4,587</u>

Form **8879-PE**

(Rev. December 2025)

Department of the Treasury
Internal Revenue Service

E-file Authorization for Form 1065

(For return of partnership income or administrative adjustment request (AAR))

OMB No. 1545-0123

ERO must obtain and retain completed Form 8879-PE.
Go to www.irs.gov/Form8879PE for the latest information.

For calendar year 2025, or tax year beginning _____, and ending _____.

Name of partnership
RUNIONS FAMILY LLC
Employer identification number
92-3514349

Part I Form 1065 Information (Whole dollars only)	
1 Gross receipts or sales less returns and allowances (Form 1065, line 1c)	1
2 Gross profit (Form 1065, line 3)	2
3 Ordinary business income (loss) (Form 1065, line 23)	3
4 Net rental real estate income (loss) (Form 1065, Schedule K, line 2)	4 <u>2,442.</u>
5 Other net rental income (loss) (Form 1065, Schedule K, line 3c)	5

Part II Declaration and Signature Authorization of Partner or Member, or Partnership Representative (PR) (Designated Individual (DI) if the PR is an entity).

I declare under penalties of perjury that:

- 1a** If the Form 1065 is being transmitted as part of a return of partnership income, I am a partner or member of the named partnership.
- b** If the Form 1065 is being transmitted as part of an AAR, I am the PR (DI if the PR is an entity) of the named partnership for the partnership taxable year to which the AAR relates.
- 2** I have examined a copy of the partnership's electronic Form 1065 (whether used as return or AAR) and accompanying forms, schedules, and statements, and to the best of my knowledge and belief, it/they is/are true, correct, and complete.
- 3** I am fully authorized to sign the return or AAR on behalf of the partnership.
- 4** The amounts shown in Part I above are the amounts shown on the electronic copy of the partnership's Form 1065.
- 5** I consent to allow my electronic return originator (ERO), transmitter, or intermediate service provider to transmit the partnership's return or AAR to the IRS and to receive from the IRS **(a)** an acknowledgment of receipt or reason for rejection of the transmission and **(b)** the reason for any delay in processing the return or AAR.
- 6** I have selected a personal identification number (PIN) as my signature for the partnership's electronic return of partnership income or AAR.

Partner or Member, or PR (DI if the PR is an entity) PIN: check one box only

I authorize PETERSON NW CPA INC to enter my PIN 11329 as my signature
ERO firm name Don't enter all zeros
on the partnership's electronically filed return of partnership income or AAR.

As a Partner or Member, or PR (DI if the PR is an entity) of the partnership, I will enter my PIN as my signature on the partnership's electronically filed return of partnership income or AAR.

Partner or Member, or PR (DI if the PR is an entity) signature: _____

Title: MEMBER Date: 2/10/2026

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 91749633597
Don't enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the electronically filed return of partnership income or AAR for the partnership indicated above. I confirm that I am submitting this return or AAR 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: MICHELLE L PETERSON, CPA Date: 2/10/2026

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

U.S. Return of Partnership Income

For calendar year 2025, or tax year beginning _____, 2025, ending _____, 20_____.

Go to www.irs.gov/Form1065 for instructions and the latest information.

2025

A Principal business activity

REAL ESTATE

B Principal product or service

INVESTMENT PROP

C Business code number

531110

RUNIONS FAMILY LLC
16221 40TH ST SW
LONGBRANCH, WA 98351

D Employer identification number

92-3514349

E Date business started

2/11/2022

F Total assets (see instructions)

\$ 374,175.

G Check applicable boxes: (1) Initial return (2) Final return (3) Name change (4) Address change (5) Amended return

H Check accounting method: (1) Cash (2) Accrual (3) Other (specify):

I Number of Schedules K-1. Attach one for each person who was a partner at any time during the tax year: 4

J Check if Schedules C and M-3 are attached

K Check if partnership: (1) Aggregated activities for section 465 at-risk purposes (2) Grouped activities for section 469 passive activity purposes

Caution: Include only trade or business income and expenses on lines 1a through 23 below. See instructions for more information.

Table with 3 columns: Description, Amount, and Code. Rows include Income (1-8), Deductions (9-22), and Tax and Payment (23-32).

Sign Here: Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than partner or limited liability company member) is based on all information of which preparer has any knowledge.

Paid Preparer Use Only: Print/Type preparer's name, Preparer's signature, Date, Check if self-employed, PTIN, Firm's name, Firm's EIN, Firm's address, Phone no.

Schedule B Other Information

1 What type of entity is filing this return? Check the applicable box:
a Domestic general partnership
b Domestic limited partnership
c [X] Domestic limited liability company
d Domestic limited liability partnership
e Foreign partnership
f Other:

2 At the end of the tax year:
a Did any foreign or domestic corporation, partnership (including any entity treated as a partnership), trust, or tax-exempt organization, or any foreign government own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital of the partnership? For rules of constructive ownership, see instructions. If "Yes," attach Schedule B-1, Information on Partners Owning 50% or More of the Partnership
b Did any individual or estate own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital of the partnership? For rules of constructive ownership, see instructions. If "Yes," attach Schedule B-1

3 At the end of the tax year, did the partnership:
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? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (iv) below.

Table with 4 columns: (i) Name of corporation, (ii) Employer identification number (if any), (iii) Country of incorporation, (iv) Percentage owned in voting stock

b Own directly an interest of 20% or more, or own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital in any foreign or domestic partnership (including an entity treated as a partnership) or in the beneficial interest of a trust? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (v) below

Table with 5 columns: (i) Name of entity, (ii) Employer identification number (if any), (iii) Type of entity, (iv) Country of organization, (v) Maximum percentage owned in profit, loss, or capital

4 Does the partnership satisfy all four of the following conditions?
a The partnership's total receipts for the tax year were less than \$250,000.
b The partnership's total assets at the end of the tax year were less than \$1 million.
c Schedules K-1 are filed with the return and furnished to the partners on or before the due date (including extensions) for the partnership return.
d The partnership is not filing and is not required to file Schedule M-3
If "Yes," the partnership is not required to complete Schedules L, M-1, and M-2; item F on page 1 of Form 1065; or item L on Schedule K-1.

5 Is this partnership a publicly traded partnership, as defined in section 469(k)(2)?

6 During the tax year, did the partnership have any debt that was canceled, was forgiven, or had the terms modified so as to reduce the principal amount of the debt?

7 Has this partnership filed, or is it required to file, Form 8918, Material Advisor Disclosure Statement, to provide information on any reportable transaction?

8 At any time during calendar year 2025, did the partnership have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). If "Yes," enter the name of the foreign country.

9 At any time during the tax year, did the partnership receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes," the partnership may have to file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts. See instructions

10a Is the partnership making, or had it previously made (and not revoked), a section 754 election? If "Yes," enter the effective date of the election
See instructions for details regarding section 754 election.

b For this tax year, did the partnership make an optional basis adjustment under section 743(b)? If "Yes," enter the total aggregate net positive amount \$ _____ and the total aggregate net negative amount \$(_____) of such section 743(b) adjustments for all partners made in the tax year. The partnership must also attach a statement showing the computation and allocation of each basis adjustment. See instructions

Schedule B	Other Information (continued)	Yes	No
	c For this tax year, did the partnership make an optional basis adjustment under section 734(b)? If "Yes," enter the total aggregate net positive amount \$ _____ and the total aggregate net negative amount \$(_____) of such section 734(b) adjustments for all partnership property made in the tax year. The partnership must also attach a statement showing the computation and allocation of each basis adjustment. See instructions		X
	d For this tax year, is the partnership required to adjust the basis of partnership property under section 743(b) or 734(b) because of a substantial built-in loss (as defined under section 743(d)) or substantial basis reduction (as defined under section 734(d))? If "Yes," enter the total aggregate amount of such section 743(b) adjustments and/or section 734(b) adjustments for all partners and/or partnership property made in the tax year \$ _____. The partnership must also attach a statement showing the computation and allocation of the basis adjustment. See instructions		X
	e Reserved for future use		
11	Check this box if, during the current or prior tax year, the partnership distributed any property received in a like-kind exchange or contributed such property to another entity (other than disregarded entities wholly owned by the partnership throughout the tax year) <input type="checkbox"/>		
12	At any time during the tax year, did the partnership distribute to any partner a tenancy-in-common or other undivided interest in partnership property?		X
13a	If the partnership is required to file Form 8858, Information Return of U.S. Persons With Respect to Foreign Disregarded Entities (FDEs) and Foreign Branches (FBs), enter the number of Forms 8858 attached. See instructions		
	b Reserved for future use		
14	Does the partnership have any foreign partners? If "Yes," enter the number of Forms 8805, Foreign Partner's Information Statement of Section 1446 Withholding Tax, filed for this partnership		X
15	Enter the number of Forms 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships, attached to this return		
16a	Did you make any payments in 2025 that would require you to file Form(s) 1099? See instructions		X
	b If "Yes," did you or will you file required Form(s) 1099?		
17	Enter the number of Forms 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations, attached to this return		
18	Enter the number of partners that are foreign governments under section 892. 0		
19	During the partnership's tax year, did the partnership make any payments, or receive any payments allocable to foreign partners, 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)?		X
20	Was the partnership a specified domestic entity required to file Form 8938 for the tax year? See the Instructions for Form 8938.		X
21	Is the partnership a section 721(c) partnership, as defined in Regulations section 1.721(c)-1(b)(14)?		X
22	During the tax year, did the partnership pay or accrue any interest or royalty for which one or more partners are not allowed a deduction under section 267A? See instructions. If "Yes," enter the total amount of the disallowed deductions \$ _____		X
23	Did the partnership 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
24	Does the partnership satisfy one or more of the following? See instructions		X
	a The partnership owns a pass-through entity with current, or prior year carryover, excess business interest expense.		
	b The partnership's aggregate average annual gross receipts (determined under section 448(c)) for the 3 tax years preceding the current tax year are more than \$31 million and the partnership has business interest expense.		
	c The partnership is a tax shelter (see instructions) and the partnership has business interest expense. If "Yes" to any, complete and attach Form 8990.		
25	Does the partnership intend to self-certify as a qualified opportunity fund? If "Yes," complete and attach Form 8996, Qualified Opportunity Fund, and enter the amount (if any) from Form 8996, line 15 \$ _____		X
26	Enter the number of foreign partners subject to section 864(c)(8) as a result of transferring all or a portion of an interest in the partnership or of receiving a distribution from the partnership. Complete Schedule K-3 (Form 1065), Part XIII, for each foreign partner subject to section 864(c)(8) on a transfer or distribution.		
27	At any time during the tax year, were there any transfers between the partnership and its partners subject to the disclosure requirements of Regulations section 1.707-8?		X

Schedule B	Other Information (continued)	Yes	No
28	Since December 22, 2017, did a foreign corporation directly or indirectly acquire substantially all of the properties constituting a trade or business of your partnership, and was the ownership percentage (by vote or value) for purposes of section 7874 greater than 50% (for example, the partners held more than 50% of the stock of the foreign corporation)? If "Yes," list the ownership percentage by vote and by value. See instructions. Percentage: _____ By vote: _____ By value: _____		X
29	Is the partnership required to file Form 7208, Excise Tax on Repurchase of Corporate Stock (see instructions):		
a	Under the applicable foreign corporation rules?		X
b	Under the covered surrogate foreign corporation rules?		X
	If "Yes," to either (a) or (b), complete Form 7208. See the Instructions for Form 7208.		
30	At any time during this tax year, did the partnership (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, or otherwise dispose of a digital asset (or financial interest in a digital asset)? See instructions		X
31	Reserved for future use		
32	Check this box if an election out of subchapter K under section 761 is being made. See instructions	<input type="checkbox"/>	
33	Is the partnership electing out of the centralized partnership audit regime under section 6221(b)? See instructions. If "Yes," the partnership must complete Schedule B-2 (Form 1065). Enter the total from Schedule B-2, Part III, line 3	X	
 <u>4</u>		
	If "No," complete Designation of Partnership Representative below.		

Designation of Partnership Representative (see instructions)
Enter below the information for the partnership representative (PR) for the tax year covered by this return.

First name of PR (or entity name)		Last name of PR		
U.S. address of PR	Street	City	State	ZIP code
	-----			U.S. phone number of PR

Name of designated individual (DI) if PR is an entity

First name of DI		Last name of DI		
U.S. address of DI	Street	City	State	ZIP code
	-----			U.S. phone number of DI

Schedule K Partners' Distributive Share Items		Total amount
Income (Loss)	1 Ordinary business income (loss) (page 1, line 23)	1
	2 Net rental real estate income (loss) (attach Form 8825)	2 2,442.
	3a Other gross rental income (loss)	3a
	b Expenses from other rental activities (attach stmt)	3b
	c Other net rental income (loss). Subtract line 3b from line 3a	3c
	4 Guaranteed payments: a Services 4a b Capital 4b	4c
	c Total. Add lines 4a and 4b	4c
	5 Interest income	5
	6 Dividends and dividend equivalents: a Ordinary dividends	6a
	b Qualified dividends 6b c Dividend equivalents 6c	6c
	7 Royalties	7
8 Net short-term capital gain (loss) (attach Schedule D (Form 1065))	8	
9a Net long-term capital gain (loss) (attach Schedule D (Form 1065))	9a	
b Collectibles (28%) gain (loss)	9b	
c Unrecaptured section 1250 gain (attach statement)	9c	
10 Net section 1231 gain (loss) (attach Form 4797)	10	
11 Other income (loss) (see instructions) Type:	11	
Deductions	12 Section 179 deduction (attach Form 4562)	12
	13a Cash contributions	13a
	b Noncash contributions	13b
	c Investment interest expense	13c
	d Section 59(e)(2) expenditures: (1) Type: (2) Amount:	13d(2)
e Other deductions (see instructions) Type:	13e	
Self-Employment	14a Net earnings (loss) from self-employment	14a
	b Gross farming or fishing income	14b
	c Gross nonfarm income	14c
Credits	15a Low-income housing credit (section 42(j)(5))	15a
	b Low-income housing credit (other)	15b
	c Qualified rehabilitation expenditures (rental real estate) (attach Form 3468, if applicable)	15c
	d Other rental real estate credits (see instructions) Type:	15d
	e Other rental credits (see instructions) Type:	15e
	f Other credits (see instructions) Type:	15f
International	16a Attach Schedule K-2 (Form 1065), Partners' Distributive Share Items — International, and check this box to indicate that you are reporting items of international tax relevance <input type="checkbox"/>	
	b Check this box if you qualified for an exception to filing Schedule K-2 (Form 1065) <input checked="" type="checkbox"/>	
Alternative Minimum Tax (AMT) Items	17a Post-1986 depreciation adjustment	17a
	b Adjusted gain or loss	17b
	c Depletion (other than oil and gas)	17c
	d Oil, gas, and geothermal properties — gross income	17d
	e Oil, gas, and geothermal properties — deductions	17e
	f Other AMT items (attach stmt)	17f
Other Information	18a Tax-exempt interest income	18a
	b Other tax-exempt income	18b
	c Nondeductible expenses	18c
	19a Distributions of cash and marketable securities	19a 8,663.
	b Distributions of other property	19b
	20a Investment income	20a
	b Investment expenses	20b
c Other items and amounts (attach stmt) SEE STATEMENT 1		
21 Total foreign taxes paid or accrued	21	

Analysis of Net Income (Loss) per Return

1 Net income (loss). Combine Schedule K, lines 1 through 11. From the result, subtract the sum of Schedule K, lines 12 through 13e, and 21						1	2,442.
2 Analysis by partner type:	(i) Corporate	(ii) Individual (active)	(iii) Individual (passive)	(iv) Partnership	(v) Exempt organization	(vi) Nominee/Other	
a General partners							
b Limited partners		2,442.					

Schedule L	Balance Sheets per Books	Beginning of tax year		End of tax year	
		(a)	(b)	(c)	(d)
Assets					
1	Cash		775.		292.
2a	Trade notes and accounts receivable				
b	Less allowance for bad debts				
3	Inventories				
4	U.S. Government obligations				
5	Tax-exempt securities				
6	Other current assets (attach stmt)				
7a	Loans to partners (or persons related to partners)				
b	Mortgage and real estate loans				
8	Other investments (attach stmt)				
9a	Buildings and other depreciable assets	106,678.		106,678.	
b	Less accumulated depreciation	10,208.	96,470.	14,795.	91,883.
10a	Depletable assets				
b	Less accumulated depletion				
11	Land (net of any amortization)		282,000.		282,000.
12a	Intangible assets (amortizable only)				
b	Less accumulated amortization				
13	Other assets (attach stmt)				
14	Total assets		379,245.		374,175.
Liabilities and Capital					
15	Accounts payable				
16	Mortgages, notes, bonds payable in less than 1 year				
17	Other current liabilities (attach stmt)	SEE ST 2.			1,151.
18	All nonrecourse loans				
19a	Loans from partners (or persons related to partners)				
b	Mortgages, notes, bonds payable in 1 year or more				
20	Other liabilities (attach stmt)				
21	Partners' capital accounts		379,245.		373,024.
22	Total liabilities and capital		379,245.		374,175.

Schedule M-1 Reconciliation of Income (Loss) per Books With Analysis of Net Income (Loss) per Return
 Note: The partnership may be required to file Schedule M-3. See instructions.

1	Net income (loss) per books	2,442.	6	Income recorded on books this year not included on Schedule K, lines 1 through 11 (itemize):	
2	Income included on Schedule K, lines 1, 2, 3c, 5, 6a, 7, 8, 9a, 10, and 11, not recorded on books this year (itemize):		a	Tax-exempt interest . . . \$	
3	Guaranteed payments (other than health insurance)		7	Deductions included on Schedule K, lines 1 through 13e, and 21, not charged against book income this year (itemize):	
4	Expenses recorded on books this year not included on Schedule K, lines 1 through 13e, and 21 (itemize):		a	Depreciation \$	
a	Depreciation \$		8	Add lines 6 and 7	
b	Travel and entertainment \$		9	Income (loss) (Analysis of Net Income (Loss) per Return, line 1). Subtract line 8 from line 5	2,442.
5	Add lines 1 through 4	2,442.			

Schedule M-2 Analysis of Partners' Capital Accounts					
1	Balance at beginning of year	379,245.	6	Distributions: a Cash	8,663.
2	Capital contributed: a Cash		b	Property	
	b Property		7	Other decreases (itemize):	
3	Net income (loss) (see instructions)	2,442.	8	Add lines 6 and 7	8,663.
4	Other increases (itemize):		9	Balance at end of year. Subtract line 8 from line 5	373,024.
5	Add lines 1 through 4	381,687.			

Rental Real Estate Income and Expenses of a Partnership or an S Corporation
Attach to Form 1065 or 1120-S.
Go to www.irs.gov/Form8825 for instructions and the latest information.

OMB No. 1545-0123

Name RUNIONS FAMILY LLC	Employer identification number 92-3514349
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1	(a) Physical address of each property (street, city, state, ZIP code)	(b) Type (Enter code 1-8; see page 2 for list.)	(c) Type (Enter code A-I; see page 2 for list.)	(d) Fair rental days	(e) Personal-use days
A	13619 36TH ST SW LAKEBAY, WA 98349	1		365	
B					
C					
D					

		Properties			
		A	B	C	D
Rental Real Estate Income					
2a	Gross rents	2a	18,000.		
b	Other income related to rental real estate activity	2b			
c	Total rental real estate income for each property. Add lines 2a and 2b	2c	18,000.		
Rental Real Estate Expenses					
3	Advertising	3			
4	Auto and travel	4			
5	Cleaning and maintenance	5			
6	Commissions	6			
7	Insurance	7	1,151.		
8	Interest (see instructions)	8			
9	Legal and other professional fees	9	1,000.		
10	Real estate taxes	10			
11	Repairs	11			
12	Utilities	12	810.		
13	Wages and salaries	13			
14	Depreciation (see instructions)	14	4,587.		
15	Reserved for future use	15			
16	Reserved for future use	16			
17	Other deductions (attach Schedule A (Form 8825))	17	8,010.		
SEE STATEMENT 3					
18	Total rental real estate expenses for each property. Add lines 3 through 17	18	15,558.		
19	Income or (loss) from each rental real estate property. Subtract line 18 from line 2c	19	2,442.		
20a	Total rental real estate income. Add total rental real estate income from line 2c. See instructions	20a		18,000.	
b	Total rental real estate expenses. Add total rental real estate expenses from line 18. See instructions	20b		-15,558.	
21	Net gain (loss) from Form 4797, Part II, line 17, from the disposition of property from rental real estate activities	21			
22a	Net income (loss) from rental real estate activities from partnerships, estates, and trusts in which this partnership or S corporation is a partner or beneficiary (from Schedule K-1)	22a			
b Identify below the partnerships, estates, or trusts from which net income (loss) is shown on line 22a. Attach a statement if more space is needed.					
(1) Name		(2) Employer identification number			
-----		-----			
-----		-----			
-----		-----			
23	Net rental real estate income (loss). Combine lines 20a through 22a. Enter the result here and on Schedule K, line 2, of Form 1065 or 1120-S	23		2,442.	

1	Enter the address and type of each rental real estate property. For each rental real estate property listed, report the number of days rented at fair rental value and number of days of personal use. See instructions.				
	(a) Physical address of each property (street, city, state, ZIP code)	(b) Type (Enter code 1–8; see below for list.)	(c) Type (Enter code A–I; see below for list.)	(d) Fair rental days	(e) Personal-use days

Properties

		Properties			
Rental Real Estate Income					
2a	Gross rents	2a			
b	Other income related to rental real estate activity	2b			
c	Total rental real estate income for each property. Add lines 2a and 2b	2c			
Rental Real Estate Expenses					
3	Advertising	3			
4	Auto and travel	4			
5	Cleaning and maintenance	5			
6	Commissions	6			
7	Insurance	7			
8	Interest (see instructions)	8			
9	Legal and other professional fees	9			
10	Real estate taxes	10			
11	Repairs	11			
12	Utilities	12			
13	Wages and salaries	13			
14	Depreciation (see instructions)	14			
15	Reserved for future use	15			
16	Reserved for future use	16			
17	Other deductions (attach Schedule A (Form 8825))	17			
18	Total rental real estate expenses for each property. Add lines 3 through 17	18			
19	Income or (loss) from each rental real estate property. Subtract line 18 from line 2c	19			

Allowable Codes for Type of Property for Line 1, Column (b)

- 1 – Single-family residence
- 2 – Multi-family residence
- 3 – Vacation or short-term rental
- 4 – Commercial
- 5 – Land
- 6 – Royalties
- 7 – Self-rental
- 8 – Other (include description with the code on Form 8825 or on a separate statement)

Allowable Codes for Other Information, Line 1, Column (c)

- A – Nontaxable contribution (sections 721 and 351) (specify)
 - B – Other exchange (sections 1031, 1033, etc.) (specify)
 - C – Taxable acquisition (section 1012)
 - D – New construction/renovation or other basis addition/subtraction
 - E – Reserved for future use
 - F – Nontaxable distribution (section 731) (specify)
 - G – Taxable disposition (section 1001 gain/loss)
 - H – Abandonment
 - I – Other/supplement
- (For code I, include a brief description for an acquisition, disposition, or other transaction not listed in codes A –H. For codes A–I, include relevant supplementary description on Form 8825 or on a separate statement.)

Schedule K-1
(Form 1065)

Department of the Treasury
Internal Revenue Service

2025

For calendar year 2025, or tax year

beginning / / 2025 ending / /

Partner's Share of Income, Deductions, Credits, etc.
See separate instructions.

Final K-1

Amended K-1

651123
OMB No. 1545-0123

Part I Information About the Partnership

A Partnership's employer identification number
92-3514349

B Partnership's name, address, city, state, and ZIP code
RUNIONS FAMILY LLC
16221 40TH ST SW
LONGBRANCH, WA 98351

C IRS center where partnership filed return: **E-FILE**

D Check if this is a publicly traded partnership (PTP)

Part II Information About the Partner

E Partner's SSN or TIN (Do not use TIN of a disregarded entity. See instructions.)
-**-*

F Name, address, city, state, and ZIP code for partner entered in E. See instructions.
JESSE J STERN
9725 17TH AVE NE
SEATTLE, WA 98115

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

H1 Domestic partner Foreign partner

H2 If the partner is a disregarded entity (DE), enter the partner's:
TIN _____ Name _____

I1 What type of entity is this partner? INDIVIDUAL

I2 If this partner is a retirement plan (IRA/SEP/Keogh/etc.), check here

J Partner's share of profit, loss, and capital (see instructions):

	Beginning	Ending
Profit	60 %	60 %
Loss	60 %	60 %
Capital	60 %	60 %

Check if decrease is due to:
 Sale or Exchange of partnership interest. See instructions.

K1 Partner's share of liabilities:

	Beginning	Ending
Nonrecourse	\$	\$ 690.
Qualified nonrecourse financing	\$	\$
Recourse	\$	\$

K2 Check this box if item K1 includes liability amounts from lower-tier partnerships

K3 Check if any of the above liability is subject to guarantees or other payment obligations by the partner. See instructions

L Partner's Capital Account Analysis

Beginning capital account	\$ 222,889.
Capital contributed during the year	\$
Current year net income (loss)	\$ 1,466.
Other increase (decrease) (attach explanation)	\$
Withdrawals and distributions	\$()
Ending capital account	\$ 224,355.

M Did the partner contribute property with a built-in gain (loss)?
 Yes No If "Yes," attach statement. See instructions.

N Partner's Share of Net Unrecognized Section 704(c) Gain or (Loss)

Beginning	\$
Ending	\$

Part III Partner's Share of Current Year Income, Deductions, Credits, and Other Items

1	Ordinary business income (loss)	14	Self-employment earnings (loss)
2	Net rental real estate income (loss)		
*	1,466.		
3	Other net rental income (loss)	15	Credits
4a	Guaranteed payments for services		
4b	Guaranteed payments for capital	16	Schedule K-3 is attached if checked <input type="checkbox"/>
4c	Total guaranteed payments	17	Alternative minimum tax (AMT) items
5	Interest income		
6a	Ordinary dividends		
6b	Qualified dividends	18	Tax-exempt income and nondeductible expenses
6c	Dividend equivalents		
7	Royalties		
8	Net short-term capital gain (loss)	19	Distributions
9a	Net long-term capital gain (loss)		
9b	Collectibles (28%) gain (loss)		
9c	Unrecaptured section 1250 gain	20	Other information
		AJ*	STMT
10	Net section 1231 gain (loss)		
11	Other income (loss)		
12	Section 179 deduction	21	Foreign taxes paid or accrued
13	Other deductions		
22	<input type="checkbox"/> More than one activity for at-risk purposes*		
23	<input type="checkbox"/> More than one activity for passive activity purposes*		
*See attached statement for additional information.			

For IRS Use Only

**BOX 2
RENTAL REAL ESTATE ACTIVITIES**

PROPERTY TYPE AND ADDRESS	GROSS INCOME	NET EXPENSES	NET INCOME	PASSIVE NONPASS	SEC. 1231 TOTAL
TYPE: 1 - SINGLE FAMILY RESIDENCE 13619 36TH ST SW LAKEBAY, WA 98349	10,800.	9,335.	\$ 1,465.	PASSIVE	
ROUNDING OR SPECIALLY ALLOCATED NET INCOME (LOSS) ADJUSTMENT					1.
			TOTAL \$		<u>1,466.</u>

**BOX 20
OTHER INFORMATION**

*** DESCRIPTIVE INFORMATION**

AJ	AGGREGATE BUSINESS ACTIVITY GROSS INCOME.....	\$	10,800.
AJ	AGGREGATE BUSINESS ACTIVITY TOTAL DEDUCTIONS.....		9,334.

SUPPLEMENTAL INFORMATION

THIS PARTNER WILL NOT RECEIVE SCHEDULE K-3 FROM THE PARTNERSHIP UNLESS THE PARTNER REQUESTS THE SCHEDULE.

PURSUANT TO IRC SECTION 6221(B)(1), FOR THE CURRENT TAX YEAR, THE PARTNERSHIP HAS ELECTED OUT OF THE CENTRALIZED PARTNERSHIP AUDIT REGIME. ANY IRS AUDIT CONDUCTED, AND ANY SUBSEQUENT ASSESSMENT, WILL BE MADE AT THE PARTNER LEVEL, PARTNER BY PARTNER, AND UNDER THE AUDIT PROCEDURES APPLICABLE TO EACH PARTNER FOR THE YEAR UNDER EXAMINATION.

Schedule K-1
(Form 1065)

Department of the Treasury
Internal Revenue Service

2025

For calendar year 2025, or tax year

beginning / / 2025 ending / /

Partner's Share of Income, Deductions, Credits, etc.
See separate instructions.

Final K-1 Amended K-1

651123
OMB No. 1545-0123

Part I Information About the Partnership

A Partnership's employer identification number
92-3514349

B Partnership's name, address, city, state, and ZIP code
RUNIONS FAMILY LLC
16221 40TH ST SW
LONGBRANCH, WA 98351

C IRS center where partnership filed return: **E-FILE**

D Check if this is a publicly traded partnership (PTP)

Part II Information About the Partner

E Partner's SSN or TIN (Do not use TIN of a disregarded entity. See instructions.)
-**-*

F Name, address, city, state, and ZIP code for partner entered in E. See instructions.
NICHOLAS C RUNIONS
PO BOX 2224
LEAVENWORTH, WA 98826

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

H1 Domestic partner Foreign partner

H2 If the partner is a disregarded entity (DE), enter the partner's:
TIN _____ Name _____

I1 What type of entity is this partner? INDIVIDUAL

I2 If this partner is a retirement plan (IRA/SEP/Keogh/etc.), check here

J Partner's share of profit, loss, and capital (see instructions):

	Beginning	Ending
Profit	15 %	15 %
Loss	15 %	15 %
Capital	15 %	15 %

Check if decrease is due to:
 Sale or Exchange of partnership interest. See instructions.

K1 Partner's share of liabilities:

	Beginning	Ending
Nonrecourse	\$	\$ 173.
Qualified nonrecourse financing	\$	\$
Recourse	\$	\$

K2 Check this box if item K1 includes liability amounts from lower-tier partnerships

K3 Check if any of the above liability is subject to guarantees or other payment obligations by the partner. See instructions

L Partner's Capital Account Analysis

Beginning capital account	\$ 55,722.
Capital contributed during the year	\$
Current year net income (loss)	\$ 366.
Other increase (decrease) (attach explanation)	\$
Withdrawals and distributions	\$()
Ending capital account	\$ 56,088.

M Did the partner contribute property with a built-in gain (loss)?
 Yes No If "Yes," attach statement. See instructions.

N Partner's Share of Net Unrecognized Section 704(c) Gain or (Loss)

Beginning	\$
Ending	\$

Part III Partner's Share of Current Year Income, Deductions, Credits, and Other Items

1	Ordinary business income (loss)	14	Self-employment earnings (loss)
2	Net rental real estate income (loss)		
*	366.		
3	Other net rental income (loss)	15	Credits
4a	Guaranteed payments for services		
4b	Guaranteed payments for capital	16	Schedule K-3 is attached if checked <input type="checkbox"/>
4c	Total guaranteed payments	17	Alternative minimum tax (AMT) items
5	Interest income		
6a	Ordinary dividends		
6b	Qualified dividends	18	Tax-exempt income and nondeductible expenses
6c	Dividend equivalents		
7	Royalties		
8	Net short-term capital gain (loss)	19	Distributions
9a	Net long-term capital gain (loss)		
9b	Collectibles (28%) gain (loss)		
9c	Unrecaptured section 1250 gain	20	Other information
		AJ*	STMT
10	Net section 1231 gain (loss)		
11	Other income (loss)		
12	Section 179 deduction	21	Foreign taxes paid or accrued
13	Other deductions		
22	<input type="checkbox"/> More than one activity for at-risk purposes*		
23	<input type="checkbox"/> More than one activity for passive activity purposes*		
*See attached statement for additional information.			

For IRS Use Only

**BOX 2
RENTAL REAL ESTATE ACTIVITIES**

PROPERTY TYPE AND ADDRESS	GROSS INCOME	NET EXPENSES	NET INCOME	PASSIVE NONPASS	SEC. 1231 TOTAL
TYPE: 1 - SINGLE FAMILY RESIDENCE 13619 36TH ST SW LAKEBAY, WA 98349	2,700.				
		2,334.	\$ 366.	PASSIVE	
		TOTAL	\$ <u>366.</u>		

**BOX 20
OTHER INFORMATION**

*** DESCRIPTIVE INFORMATION**

AJ	AGGREGATE BUSINESS ACTIVITY GROSS INCOME.....	\$	2,700.
AJ	AGGREGATE BUSINESS ACTIVITY TOTAL DEDUCTIONS.....		2,334.

SUPPLEMENTAL INFORMATION

THIS PARTNER WILL NOT RECEIVE SCHEDULE K-3 FROM THE PARTNERSHIP UNLESS THE PARTNER REQUESTS THE SCHEDULE.

PURSUANT TO IRC SECTION 6221(B) (1), FOR THE CURRENT TAX YEAR, THE PARTNERSHIP HAS ELECTED OUT OF THE CENTRALIZED PARTNERSHIP AUDIT REGIME. ANY IRS AUDIT CONDUCTED, AND ANY SUBSEQUENT ASSESSMENT, WILL BE MADE AT THE PARTNER LEVEL, PARTNER BY PARTNER, AND UNDER THE AUDIT PROCEDURES APPLICABLE TO EACH PARTNER FOR THE YEAR UNDER EXAMINATION.

Schedule K-1
(Form 1065)

Department of the Treasury
Internal Revenue Service

2025

For calendar year 2025, or tax year

beginning / / 2025 ending / /

Partner's Share of Income, Deductions, Credits, etc.
See separate instructions.

Final K-1

Amended K-1

651123
OMB No. 1545-0123

Part I Information About the Partnership

A Partnership's employer identification number
92-3514349

B Partnership's name, address, city, state, and ZIP code
RUNIONS FAMILY LLC
16221 40TH ST SW
LONGBRANCH, WA 98351

C IRS center where partnership filed return: **E-FILE**

D Check if this is a publicly traded partnership (PTP)

Part II Information About the Partner

E Partner's SSN or TIN (Do not use TIN of a disregarded entity. See instructions.)
-**-*

F Name, address, city, state, and ZIP code for partner entered in E. See instructions.
ADAM S RUNIONS
6529 42ND AVE NE
SEATTLE, WA 98115

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

H1 Domestic partner Foreign partner

H2 If the partner is a disregarded entity (DE), enter the partner's:
TIN _____ Name _____

I1 What type of entity is this partner? INDIVIDUAL

I2 If this partner is a retirement plan (IRA/SEP/Keogh/etc.), check here

J Partner's share of profit, loss, and capital (see instructions):

	Beginning	Ending
Profit	15 %	15 %
Loss	15 %	15 %
Capital	15 %	15 %

Check if decrease is due to:
 Sale or Exchange of partnership interest. See instructions.

K1 Partner's share of liabilities:

	Beginning	Ending
Nonrecourse	\$	\$ 173.
Qualified nonrecourse financing	\$	\$
Recourse	\$	\$

K2 Check this box if item K1 includes liability amounts from lower-tier partnerships

K3 Check if any of the above liability is subject to guarantees or other payment obligations by the partner. See instructions

L Partner's Capital Account Analysis

Beginning capital account	\$ 55,722.
Capital contributed during the year	\$
Current year net income (loss)	\$ 366.
Other increase (decrease) (attach explanation)	\$
Withdrawals and distributions	\$()
Ending capital account	\$ 56,088.

M Did the partner contribute property with a built-in gain (loss)?
 Yes No If "Yes," attach statement. See instructions.

N Partner's Share of Net Unrecognized Section 704(c) Gain or (Loss)

Beginning	\$
Ending	\$

Part III Partner's Share of Current Year Income, Deductions, Credits, and Other Items

1	Ordinary business income (loss)	14	Self-employment earnings (loss)
2	Net rental real estate income (loss)		
*	366.		
3	Other net rental income (loss)	15	Credits
4a	Guaranteed payments for services		
4b	Guaranteed payments for capital	16	Schedule K-3 is attached if checked <input type="checkbox"/>
4c	Total guaranteed payments	17	Alternative minimum tax (AMT) items
5	Interest income		
6a	Ordinary dividends		
6b	Qualified dividends	18	Tax-exempt income and nondeductible expenses
6c	Dividend equivalents		
7	Royalties		
8	Net short-term capital gain (loss)	19	Distributions
9a	Net long-term capital gain (loss)		
9b	Collectibles (28%) gain (loss)		
9c	Unrecaptured section 1250 gain	20	Other information
		AJ*	STMT
10	Net section 1231 gain (loss)		
11	Other income (loss)		
12	Section 179 deduction	21	Foreign taxes paid or accrued
13	Other deductions		
22	<input type="checkbox"/> More than one activity for at-risk purposes*		
23	<input type="checkbox"/> More than one activity for passive activity purposes*		
*See attached statement for additional information.			

For IRS Use Only

**BOX 2
RENTAL REAL ESTATE ACTIVITIES**

PROPERTY TYPE AND ADDRESS	GROSS INCOME	NET EXPENSES	NET INCOME	PASSIVE NONPASS	SEC. 1231 TOTAL
TYPE: 1 - SINGLE FAMILY RESIDENCE 13619 36TH ST SW LAKEBAY, WA 98349	2,700.	2,334.	\$ 366.	PASSIVE	
		TOTAL	\$ 366.		

**BOX 20
OTHER INFORMATION**

*** DESCRIPTIVE INFORMATION**

AJ AGGREGATE BUSINESS ACTIVITY GROSS INCOME.....	\$	2,700.
AJ AGGREGATE BUSINESS ACTIVITY TOTAL DEDUCTIONS.....		2,334.

SUPPLEMENTAL INFORMATION

THIS PARTNER WILL NOT RECEIVE SCHEDULE K-3 FROM THE PARTNERSHIP UNLESS THE PARTNER REQUESTS THE SCHEDULE.

PURSUANT TO IRC SECTION 6221(B) (1), FOR THE CURRENT TAX YEAR, THE PARTNERSHIP HAS ELECTED OUT OF THE CENTRALIZED PARTNERSHIP AUDIT REGIME. ANY IRS AUDIT CONDUCTED, AND ANY SUBSEQUENT ASSESSMENT, WILL BE MADE AT THE PARTNER LEVEL, PARTNER BY PARTNER, AND UNDER THE AUDIT PROCEDURES APPLICABLE TO EACH PARTNER FOR THE YEAR UNDER EXAMINATION.

Schedule K-1
(Form 1065)

Department of the Treasury
Internal Revenue Service

2025

For calendar year 2025, or tax year

beginning / / 2025 ending / /

Partner's Share of Income, Deductions, Credits, etc.
See separate instructions.

Final K-1 Amended K-1

651123
OMB No. 1545-0123

Part I Information About the Partnership

A Partnership's employer identification number
92-3514349

B Partnership's name, address, city, state, and ZIP code
RUNIONS FAMILY LLC
16221 40TH ST SW
LONGBRANCH, WA 98351

C IRS center where partnership filed return: **E-FILE**

D Check if this is a publicly traded partnership (PTP)

Part II Information About the Partner

E Partner's SSN or TIN (Do not use TIN of a disregarded entity. See instructions.)
-**-*

F Name, address, city, state, and ZIP code for partner entered in E. See instructions.
MARK F RUNIONS
16221 40TH ST SW
LONGBRANCH, WA 98351

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

H1 Domestic partner Foreign partner

H2 If the partner is a disregarded entity (DE), enter the partner's:
TIN _____ Name _____

I1 What type of entity is this partner? INDIVIDUAL

I2 If this partner is a retirement plan (IRA/SEP/Keogh/etc.), check here

J Partner's share of profit, loss, and capital (see instructions):

	Beginning	Ending
Profit	10 %	10 %
Loss	10 %	10 %
Capital	10 %	10 %

Check if decrease is due to:
 Sale or Exchange of partnership interest. See instructions.

K1 Partner's share of liabilities:

	Beginning	Ending
Nonrecourse	\$	\$ 115.
Qualified nonrecourse financing	\$	\$
Recourse	\$	\$

K2 Check this box if item K1 includes liability amounts from lower-tier partnerships

K3 Check if any of the above liability is subject to guarantees or other payment obligations by the partner. See instructions

L Partner's Capital Account Analysis

Beginning capital account	\$ 44,912.
Capital contributed during the year	\$
Current year net income (loss)	\$ 244.
Other increase (decrease) (attach explanation)	\$
Withdrawals and distributions	\$(8,663.)
Ending capital account	\$ 36,493.

M Did the partner contribute property with a built-in gain (loss)?
 Yes No If "Yes," attach statement. See instructions.

N Partner's Share of Net Unrecognized Section 704(c) Gain or (Loss)

Beginning	\$
Ending	\$

Part III Partner's Share of Current Year Income, Deductions, Credits, and Other Items

1	Ordinary business income (loss)	14	Self-employment earnings (loss)
2	Net rental real estate income (loss)		
*	244.		
3	Other net rental income (loss)	15	Credits
4a	Guaranteed payments for services		
4b	Guaranteed payments for capital	16	Schedule K-3 is attached if checked <input type="checkbox"/>
4c	Total guaranteed payments	17	Alternative minimum tax (AMT) items
5	Interest income		
6a	Ordinary dividends		
6b	Qualified dividends	18	Tax-exempt income and nondeductible expenses
6c	Dividend equivalents		
7	Royalties		
8	Net short-term capital gain (loss)	19	Distributions
9a	Net long-term capital gain (loss)	A	8,663.
9b	Collectibles (28%) gain (loss)		
9c	Unrecaptured section 1250 gain	20	Other information
10	Net section 1231 gain (loss)	AJ*	STMT
11	Other income (loss)		
12	Section 179 deduction	21	Foreign taxes paid or accrued
13	Other deductions		
22	<input type="checkbox"/> More than one activity for at-risk purposes*		
23	<input type="checkbox"/> More than one activity for passive activity purposes*		
*See attached statement for additional information.			

For IRS Use Only

**BOX 2
RENTAL REAL ESTATE ACTIVITIES**

PROPERTY TYPE AND ADDRESS	GROSS INCOME	NET EXPENSES	NET INCOME	PASSIVE NONPASS	SEC. 1231 TOTAL
TYPE: 1 - SINGLE FAMILY RESIDENCE 13619 36TH ST SW LAKEBAY, WA 98349	1,800.	1,556.	\$ 244.	PASSIVE	
		TOTAL	\$ 244.		

**BOX 20
OTHER INFORMATION**

*** DESCRIPTIVE INFORMATION**

AJ AGGREGATE BUSINESS ACTIVITY GROSS INCOME.....	\$	1,800.
AJ AGGREGATE BUSINESS ACTIVITY TOTAL DEDUCTIONS.....		1,556.

SUPPLEMENTAL INFORMATION

THIS PARTNER WILL NOT RECEIVE SCHEDULE K-3 FROM THE PARTNERSHIP UNLESS THE PARTNER REQUESTS THE SCHEDULE.

PURSUANT TO IRC SECTION 6221(B) (1), FOR THE CURRENT TAX YEAR, THE PARTNERSHIP HAS ELECTED OUT OF THE CENTRALIZED PARTNERSHIP AUDIT REGIME. ANY IRS AUDIT CONDUCTED, AND ANY SUBSEQUENT ASSESSMENT, WILL BE MADE AT THE PARTNER LEVEL, PARTNER BY PARTNER, AND UNDER THE AUDIT PROCEDURES APPLICABLE TO EACH PARTNER FOR THE YEAR UNDER EXAMINATION.

**SCHEDULE B-1
(Form 1065)**

(Rev. August 2019)
Department of the Treasury
Internal Revenue Service

**Information on Partners Owning 50% or
More of the Partnership**

▶ **Attach to Form 1065.**

▶ **Go to www.irs.gov/Form1065 for the latest information.**

OMB No. 1545-0123

Name of partnership

RUNIONS FAMILY LLC

Employer identification number (EIN)

92-3514349

Part I **Entities Owning 50% or More of the Partnership** (Form 1065, Schedule B, Question 2a (Question 3a for 2009 through 2017))

Complete columns (i) through (v) below for any foreign or domestic corporation, partnership (including any entity treated as a partnership), trust, tax-exempt organization, or any foreign government that owns, directly or indirectly, an interest of 50% or more in the profit, loss, or capital of the partnership (see instructions).

(i) Name of Entity	(ii) Employer Identification Number (if any)	(iii) Type of Entity	(iv) Country of Organization	(v) Maximum Percentage Owned in Profit, Loss, or Capital

Part II **Individuals or Estates Owning 50% or More of the Partnership** (Form 1065, Schedule B, Question 2b (Question 3b for 2009 through 2017))

Complete columns (i) through (iv) below for any individual or estate that owns, directly or indirectly, an interest of 50% or more in the profit, loss, or capital of the partnership (see instructions).

(i) Name of Individual or Estate	(ii) Identifying Number (if any)	(iii) Country of Citizenship (see instructions)	(iv) Maximum Percentage Owned in Profit, Loss, or Capital
JESSE J STERN	***-**-****	UNITED STATES	60.000

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 1065.

Schedule **B-1** (Form 1065) (Rev. 8-2019)

**SCHEDULE B-2
(Form 1065)**

December 2018
Department of the Treasury
Internal Revenue Service

**Election Out of the Centralized
Partnership Audit Regime**

▶ Attach to Form 1065 or Form 1066.

OMB No. 1545-0123

▶ Go to www.irs.gov/Form1065 for the instructions and the latest information.

Name of partnership RUNIONS FAMILY LLC	Employer identification number (EIN) 92-3514349
--	---

Certain partnerships with 100 or fewer partners can elect out of the centralized partnership audit regime if each partner is an individual, a C corporation, a foreign entity that would be treated as a C corporation were it domestic, an S corporation, or an estate of a deceased partner. For purposes of determining whether the partnership has 100 or fewer partners, the partnership must include all shareholders of any S corporation that is a partner. By completing Part I, you are making an affirmative statement that all of the partners in the partnership are eligible partners under section 6221(b)(1)(C) and you have provided all of the information on this schedule. See the instructions, including the instructions for the treatment of real estate mortgage investment conduits (REMICs), for more details.

Part I List of Eligible Partners

Use the following codes under Type of Eligible Partner:

I – Individual C – Corporation E – Estate of Deceased Partner
F – Eligible Foreign Entity S – S corporation

Name of Partner	Taxpayer Identification Number (TIN)	Type of Eligible Partner (Code)
1 JESSE J STERN	***-**-****	I
2 NICHOLAS C RUNIONS	***-**-****	I
3 ADAM S RUNIONS	***-**-****	I
4 MARK F RUNIONS	***-**-****	I
5		
6		
7		
8		
9		
10		
11		
12		
13		
14		
15		

Continued on Part IV

Part II List of S Corporation Shareholders (For each S corporation partner, complete a separate Part II and separate Part V, if needed.)

Use the following codes under Type of Person:

I – Individual E – Estate of Deceased Shareholder T – Trust O – Other

Name of S Corporation Partner ▶	TIN of Partner ▶
---------------------------------	------------------

Name of Shareholder	Shareholder TIN	Type of Person (Code)
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
11		
12		

Continued on Part V

Part III Total Number of Schedules K-1 Required To Be Issued. See Instructions.

1	Total of Part I and all Parts IV Schedules K-1 required to be issued by the partnership	1	4
2	Total of Part II and all Parts V Schedules K-1 required to be issued by any S corporation partners	2	
3	Total. Add line 1 and line 2.	3	4

Note: If line 3 is more than 100, the partnership cannot make the election under section 6221(b).

**STATEMENT 1
FORM 1065, SCHEDULE K, LINE 20C
OTHER REPORTABLE ITEMS**

AGGREGATE BUSINESS ACTIVITY GROSS INCOME	\$	18,000.
AGGREGATE BUSINESS ACTIVITY TOTAL DEDUCTIONS		15,558.

**STATEMENT 2
FORM 1065, SCHEDULE L, LINE 17
OTHER CURRENT LIABILITIES**

	<u>BEGINNING</u>	<u>ENDING</u>
REIMBURSEMENT	\$ 0.	\$ 1,151.
TOTAL	<u>\$ 0.</u>	<u>\$ 1,151.</u>

**STATEMENT 3
FORM 8825
OTHER EXPENSES**

PROPERTY A: 13619 36TH ST SW LAKEBAY, WA 98349
 PROPERTY B:
 PROPERTY C:
 PROPERTY D:

	<u>PROPERTY A</u>	<u>PROPERTY B</u>	<u>PROPERTY C</u>	<u>PROPERTY D</u>
LICENSES AND PERMITS	\$ 70.			
RENTS - REAL PROPERTY	7,940.			
TOTAL	<u>\$ 8,010.</u>			

RUNIONS FAMILY LLC

92-3514349

SECTION 1.263(A)-1(F) DE MINIMIS SAFE HARBOR ELECTION

THE TAXPAYER HEREBY MAKES THE DE MINIMIS SAFE HARBOR ELECTION UNDER REGULATION 1.263(A)-1(F).

RUNIONS FAMILY LLC
16221 40TH ST SW
LONGBRANCH, WA 98351
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