

Selden Fox

Accounting for your future

619 Enterprise Drive | Oak Brook, Illinois 60523 | www.seldenfox.com
p 630.954.1400 | f 630.954.1327 | email@seldenfox.com

April 23, 2019

Mr. Firas Diwan
1215 Rand LLC
1215 Rand Road
Des Plaines, Illinois 60016

Dear Firas:

You have requested that your returns be electronically filed. **Please return the signed authorizations (in the envelope provided) to Selden Fox, Ltd. as soon as possible.** We will electronically transmit your federal return to the Internal Revenue Service and your state return to the applicable state tax department. The bound copy is for your use and should be retained for your files.

e-file SIGNATURE AUTHORIZATION:

- FORM 8879-PE – FEDERAL

2018 PARTNERSHIP INCOME TAX RETURNS (*Your copy only*):

- FEDERAL
- ILLINOIS

Upon an audit of the returns, requests may be made for supporting documentation. Therefore, we recommend that you retain all pertinent records.

We sincerely appreciate this opportunity to serve you. Please contact us if you have any questions concerning the returns or if we may be of further assistance.

Very truly yours,

SELDEN FOX, LTD.

Garth A. Reimel
Vice President of Dealer Operations

GAR/dsl

2018 TAX RETURN FILING INSTRUCTIONS

U.S. RETURN OF PARTNERSHIP INCOME

FOR THE YEAR ENDING

DECEMBER 31, 2018

Prepared for	1215 RAND LLC 1215 RAND ROAD DES PLAINES, IL 60016
Prepared by	SELDEN FOX, LTD. 619 ENTERPRISE DRIVE OAK BROOK, IL 60523-8835
To be signed and dated by	A MEMBER OF THE LLC
Amount of tax	NOT APPLICABLE
Mail tax return to	THIS RETURN HAS BEEN PREPARED FOR ELECTRONIC FILING. TO HAVE IT TRANSMITTED ELECTRONICALLY TO THE IRS, PLEASE SIGN, DATE, AND RETURN FORM 8879-PE TO OUR OFFICE. WE WILL THEN SUBMIT YOUR ELECTRONIC RETURN.
Forms to be distributed to partners	ENCLOSED ARE COPIES OF SCHEDULE K-1 TO BE DISTRIBUTED TO THE MEMBERS.
Return must be mailed on or before	RETURN FEDERAL FORM 8879-PE TO US BY SEPTEMBER 16, 2019.
Special Instructions	DO NOT MAIL THE PAPER COPY OF THE RETURN TO THE IRS.

**IRS e-file Signature Authorization
 for Form 1065**

▶ **Return completed Form 8879-PE to your ERO. (Don't send to the IRS.)**
 ▶ **Go to www.irs.gov/Form8879PE for the latest information.**
 For calendar year 2018, or tax year beginning _____, 2018, ending _____, 20_____.

2018

Name of partnership **1215 RAND LLC** Employer identification number **46-5752501**

Part I Tax Return 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 22)	3
4 Net rental real estate income (loss) (Form 1065, Schedule K, line 2)	4
5 Other net rental income (loss) (Form 1065, Schedule K, line 3c)	5

-14,194.

**Part II Declaration and Signature Authorization of Partner or Member
 (Be sure to get a copy of the partnership's return)**

Under penalties of perjury, I declare that I am a partner or member of the above partnership and that I have examined a copy of the partnership's 2018 electronic return of partnership income 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 partnership's electronic return of partnership income. I consent to allow my electronic return originator (ERO), transmitter, or intermediate service provider to send the partnership's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission and (b) the reason for any delay in processing the return. I have selected a personal identification number (PIN) as my signature for the partnership's electronic return of partnership income.

Partner or Member's PIN: check one box only

I authorize **SELDEN FOX, LTD.** to enter my PIN **92501**
ERO firm name Don't enter all zeros
 as my signature on the partnership's 2018 electronically filed return of partnership income.

As a partner or member of the partnership, I will enter my PIN as my signature on the partnership's 2018 electronically filed return of partnership income.

Partner or member's signature _____
 Title ▶ **MEMBER/MANAGER** Date ▶ _____

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. **36221060523**
Don't enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2018 electronically filed return of partnership income for the partnership 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 ▶ _____

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

1065

Form Department of the Treasury Internal Revenue Service

U.S. Return of Partnership Income

OMB No. 1545-0123

For calendar year 2018, or tax year beginning EXTENSION GRANTED TO 09/16/19, ending

2018

Partnership information section including Principal business activity (REAL ESTATE), Name of partnership (1215 RAND LLC), Principal product or service (MANAGEMENT), Business code number (531120), City (DES PLAINES), State (IL), ZIP (60016), Employer identification number (46-5752501), Date business started (09/01/2014), Total assets (\$855,741), and various checkboxes for return type and accounting method.

Caution: Include only trade or business income and expenses on lines 1a through 22 below. See instructions for more information.

Main table with 30 rows for Income, Deductions, and Tax and Payments. Includes sub-rows for depreciation (16a, 16b, 16c) and total calculations. Line 22 shows Ordinary business income (loss) of 0.

Sign Here section with signature line for Garth Reimel, date line, and a box for 'May the IRS discuss this return with the preparer shown below?' with 'Yes' checked.

Paid Preparer Use Only section with fields for Print/Type preparer's name (GARTH REIMEL), Preparer's signature, Date, Check self-employed, Firm's name (SELDEN FOX, LTD.), Firm's address (619 ENTERPRISE DRIVE, OAK BROOK, IL 60523-8835), Firm's EIN (36-2985770), and Phone no. (630-954-1400).

Schedule B Other Information

1 What type of entity is filing this return? Check the applicable box:				Yes	No
a	<input type="checkbox"/> Domestic general partnership	b	<input type="checkbox"/> Domestic limited partnership		
c	<input checked="" type="checkbox"/> Domestic limited liability company	d	<input type="checkbox"/> Domestic limited liability partnership		
e	<input type="checkbox"/> Foreign partnership	f	<input type="checkbox"/> 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					X
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, Information on Partners Owning 50% or More of the Partnership				X	
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					X
(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					X
(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?				Yes	No
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.					X
5 Is this partnership a publicly traded partnership, as defined in section 469(k)(2)?					X
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?					X
7 Has this partnership filed, or is it required to file, Form 8918, Material Advisor Disclosure Statement, to provide information on any reportable transaction?					X
8 At any time during calendar year 2018, 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. ▶					X
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					X
10 a Is the partnership making, or had it previously made (and not revoked), a section 754 election? See instructions for details regarding a section 754 election.					X
b Did the partnership make for this tax year an optional basis adjustment under section 743(b) or 734(b)? If "Yes," attach a statement showing the computation and allocation of the basis adjustment. See instructions					X

Schedule B Other Information (continued)

		Yes	No
c	Is the partnership required to adjust the basis of partnership assets 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," attach a statement showing the computation and allocation of the basis adjustment. See instructions		X
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)		
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
13	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		
	0		
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.		
16 a	Did you make any payments in 2018 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 Form(s) 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.		
19	During the partnership's tax year, did the partnership make any payments that would require it to file Form 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 Treasury Regulations section 1.721(c)-1T(b)(14)?		X
22	During the tax year, did the partnership pay or accrue any interest or royalty for which the deduction is not allowed 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 of the following conditions and the partnership does not own a pass-through entity with current year, or prior year, carryover excess business interest expense? See instructions	X	
a	The partnership'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 partnership is not a tax shelter, or		
b	The partnership 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.		
25	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. 2. If "No," complete Designation of Partnership Representative below.	X	

Designation of Partnership Representative (see instructions)

Enter below the information for the partnership representative (PR) for the tax year covered by this return.

Name of PR	FIRAS DIWAN	U.S. taxpayer identification number of PR	612-95-6186
U.S. address of PR	6444 W BELMONT CHICAGO, IL 60634	U.S. phone number of PR	224-250-2222
If the PR is an entity, name of the designated individual for the PR		U.S. taxpayer identification number of the designated individual	
U.S. address of designated individual		U.S. phone number of designated individual	

26	Is the partnership attaching Form 8996 to certify as a Qualified Opportunity Fund? If "Yes," enter the amount from Form 8996, line 13. \$		X
-----------	--	--	---

Schedule K Partners' Distributive Share Items		Total amount	
Income (Loss)	1 Ordinary business income (loss) (page 1, line 22)	1	0.
	2 Net rental real estate income (loss) (attach Form 8825) SEE STATEMENT 1	2	-14,194.
	3 a Other gross rental income (loss)	3a	
	b Expenses from other rental activities (attach statement)	3b	
	c Other net rental income (loss). Subtract line 3b from line 3a	3c	
	4 Guaranteed payments	4	
	5 Interest income	5	
	6 Dividends and dividend equivalents: a Ordinary dividends	6a	
	b Qualified dividends	6b	
	c Dividend equivalents	6c	
	7 Royalties	7	
8 Net short-term capital gain (loss) (attach Schedule D (Form 1065))	8		
9 a 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	
	13 a Contributions	13a	
	b Investment interest expense	13b	
	c Section 59(e)(2) expenditures: (1) Type ▶ (2) Amount ▶	13c(2)	
d Other deductions (see instructions) Type ▶ SEE STATEMENT 2	13d	33,616.	
Self-Employment	14 a Net earnings (loss) from self-employment	14a	0.
	b Gross farming or fishing income	14b	
	c Gross nonfarm income	14c	
Credits	15 a 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	
Foreign Transactions	16 a Name of country or U.S. possession ▶		
	b Gross income from all sources	16b	
	c Gross income sourced at partner level	16c	
	Foreign gross income sourced at partnership level		
	d Section 951A category ▶ e Foreign branch category ▶	16e	
	f Passive category ▶ g General category ▶ h Other ... ▶	16h	
	Deductions allocated and apportioned at partner level		
	i Interest expense ▶ j Other ▶	16j	
	Deductions allocated and apportioned at partnership level to foreign source income		
	k Section 951A category ▶ l Foreign branch category ▶	16l	
	m Passive category ▶ n General category ▶ o Other ... ▶	16o	
p Total foreign taxes (check one): Paid <input type="checkbox"/> Accrued <input type="checkbox"/>	16p		
q Reduction in taxes available for credit (attach statement)	16q		
r Other foreign tax information (attach statement)			
Alternative Minimum Tax (AMT) items	17 a 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 statement)	17f	
Other Information	18 a Tax-exempt interest income	18a	
	b Other tax-exempt income	18b	
	c Nondeductible expenses	18c	
	19 a Distributions of cash and marketable securities	19a	
	b Distributions of other property	19b	
	20 a Investment income	20a	
b Investment expenses	20b		
c Other items and amounts (attach statement) STMT 3			

Analysis of Net Income (Loss)

1 Net income (loss). Combine Schedule K, lines 1 through 11. From the result, subtract the sum of Schedule K, lines 12 through 13d, and 16p						1	-47,810.
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		-47,810.					

Schedule L Balance Sheets per Books

Assets	Beginning of tax year		End of tax year	
	(a)	(b)	(c)	(d)
1 Cash		25,797.		65,454.
2a Trade notes and accounts receivable	66,701.		66,701.	
b Less allowance for bad debts		66,701.		66,701.
3 Inventories				
4 U.S. government obligations				
5 Tax-exempt securities				
6 Other current assets (attach statement)				
7a Loans to partners (or persons related to partners)				
b Mortgage and real estate loans				
8 Other investments (attach statement)				
9a Buildings and other depreciable assets	535,379.		535,379.	
b Less accumulated depreciation	160,668.	374,711.	180,287.	355,092.
10a Depletable assets				
b Less accumulated depletion				
11 Land (net of any amortization)		368,494.		368,494.
12a Intangible assets (amortizable only)				
b Less accumulated amortization				
13 Other assets (attach statement)				
14 Total assets		835,703.		855,741.
Liabilities and Capital				
15 Accounts payable				
16 Mortgages, notes, bonds payable in less than 1 year		27,600.		27,600.
17 Other current liabilities (attach statement)	STATEMENT 4	138,521.		204,310.
18 All nonrecourse loans				
19a Loans from partners (or persons related to partners)				
b Mortgages, notes, bonds payable in 1 year or more		186,638.		188,697.
20 Other liabilities (attach statement)				
21 Partners' capital accounts		482,944.		435,134.
22 Total liabilities and capital		835,703.		855,741.

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

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

1 Net income (loss) per books	-47,810.	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 13d, and 16p, not charged against book income this year (itemize):	
4 Expenses recorded on books this year not included on Schedule K, lines 1 through 13d, and 16p (itemize):		a Depreciation \$	
a Depreciation \$		8 Add lines 6 and 7	
b Travel and entertainment \$		9 Income (loss) (Analysis of Net Income (Loss), line 1). Subtract line 8 from line 5	-47,810.
5 Add lines 1 through 4	-47,810.		

Schedule M-2 Analysis of Partners' Capital Accounts

1 Balance at beginning of year	482,944.	6 Distributions: a Cash	
2 Capital contributed: a Cash		b Property	
b Property		7 Other decreases (itemize):	
3 Net income (loss) per books	-47,810.	8 Add lines 6 and 7	
4 Other increases (itemize):		9 Balance at end of year. Subtract line 8 from line 5	435,134.
5 Add lines 1 through 4	435,134.		

Rental Real Estate Income and Expenses of a Partnership or an S Corporation

▶ Attach to Form 1065 or Form 1120S.
 ▶ Go to www.irs.gov/Form8825 for the latest information.

OMB No. 1545-0123

Name 1215 RAND LLC	Employer identification number 46 5752501
------------------------------	---

1	Show the type and address of each property. For each rental real estate property listed, report the number of days rented at fair rental value and days with personal use. See instructions. See page 2 to list additional properties.			
	Physical address of each property - street, city, state, ZIP code	Type - Enter code 1-8; see page 2 for list	Fair Rental Days	Personal Use Days
A	1215 RAND ROAD DES PLAINES, IL 60016	4	365	0
B				
C				
D				

		Properties			
		A	B	C	D
Rental Real Estate Income					
2 Gross rents	2	120,936.			
Rental Real Estate Expenses					
3 Advertising	3				
4 Auto and travel	4				
5 Cleaning and maintenance	5				
6 Commissions	6				
7 Insurance	7				
8 Legal and other professional fees	8				
9 Interest	9	2,325.			
10 Repairs	10				
11 Taxes	11	101,027.			
12 Utilities	12				
13 Wages and salaries	13				
14 Depreciation (see instructions)	14	19,618.			
15 Other (list) ▶ STMT 5	15	12,160.			
16 Total expenses for each property. Add lines 3 through 15	16	135,130.			
17 Income or (Loss) from each property. Subtract line 16 from line 2	17	-14,194.			

18a Total gross rents. Add gross rents from line 2, columns A through H		120,936.
b Total expenses. Add total expenses from line 16, columns A through H		(135,130.)
19 Net gain (loss) from Form 4797, Part II, line 17, from the disposition of property from rental real estate activities	19	
20a 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)	20a	
b Identify below the partnerships, estates, or trusts from which net income (loss) is shown on line 20a. Attach a schedule if more space is needed:		
(1) Name	(2) Employer identification number	
_____	_____	
_____	_____	
21 Net rental real estate income (loss). Combine lines 18a through 20a. Enter the result here and on:	21	-14,194.
• Form 1065 or 1120S: Schedule K, line 2		

For Paperwork Reduction Act Notice, see instructions.

Form **8825** (Rev. 11-2018)

1	Show the type and address of each property. For each rental real estate property listed, report the number of days rented at fair rental value and days with personal use. See instructions.			
	Physical address of each property - street, city, state, ZIP code	Type - Enter code 1-8; see below for list	Fair Rental Days	Personal Use Days
E				
F				
G				
H				

		Properties			
		E	F	G	H
Rental Real Estate Income					
2 Gross rents	2				
Rental Real Estate Expenses					
3 Advertising	3				
4 Auto and travel	4				
5 Cleaning and maintenance	5				
6 Commissions	6				
7 Insurance	7				
8 Legal and other professional fees ..	8				
9 Interest	9				
10 Repairs	10				
11 Taxes	11				
12 Utilities	12				
13 Wages and salaries	13				
14 Depreciation (see instructions)	14				
15 Other (list) ▶	15				

16 Total expenses for each property. Add lines 3 through 15	16				
17 Income or (Loss) from each property. Subtract line 16 from line 2	17				

Allowable Codes for Type of Property

- 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)

JWA

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

(Rev. September 2017)
Department of the Treasury
Internal Revenue Service

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

▶ **Attach to Form 1065.**

OMB No. 1545-0123

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

Name of partnership

Employer identification number

1215 RAND LLC

46-5752501

Part I Entities Owning 50% or More of the Partnership (Form 1065, Schedule B, Question 3a)

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 3b)

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
ADAM JIDD	344-02-7228	UNITED STATES	50.00
FIRAS DIWAN	612-95-6186	UNITED STATES	50.00

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

Schedule B-1 (Form 1065) (Rev. 9-2017)

**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.

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

OMB No. 1545-0123

Name of Partnership 1215 RAND LLC	Employer Identification Number (EIN) 46-5752501
---	---

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	ADAM JIDD	344-02-7228	I
2	FIRAS DIWAN	612-95-6186	I
3			
4			
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	2.
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	2.

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

2018 DEPRECIATION AND AMORTIZATION REPORT

COMMERCIAL RENTAL PROPERTY

R- 1

Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
1	LAND	09/01/14	L				368,494.				368,494.			0.	
2	BUILDING	09/01/14	SL	39.00	MM	17	340,148.				340,148.	28,709.		8,722.	37,431.
3	CAR WASH EQUIPMENT	09/01/14	200DB	5.00	HY	17	72,998.			36,499.	36,499.	29,140.		4,905.	34,045.
4	BUILDING IMPROVEMENTS	09/01/14	SL	39.00	MM	17	53,500.				53,500.	4,515.		1,372.	5,887.
5	POS COMPUTER SYSTEMS	09/01/14	200DB	5.00	HY	17	68,733.			34,367.	34,366.	27,438.		4,619.	32,057.
	* TOTAL RENTAL DEPRECIATION						903,873.			70,866.	833,007.	89,802.		19,618.	109,420.

Limitation on Business Interest Expense Under Section 163(j)

▶ Attach to your tax return.

▶ Go to www.irs.gov/Form8990 for instructions and the latest information.

Taxpayer name(s) shown on tax return 1215 RAND LLC	Identification number 46-5752501
--	--

Part I Computation of Allowable Business Interest Expense

Part I is completed by all taxpayers subject to section 163(j). Schedule A and Schedule B need to be completed before Part I when the taxpayer is a partner or shareholder of a pass-through entity subject to 163(j).

Section I - Business Interest Expense

1 Current year business interest expense (not including floor plan financing interest expense), before the section 163(j) limitation	1	35,941.		
2 Disallowed business interest expense carryforwards from prior years. (Does not apply to a partnership)	2			
3 Partner's excess business interest expense treated as paid or accrued in current year (Schedule A, line 44, column (h))	3			
4 Floor plan financing interest expense. See instructions	4			
5 Total business interest expense. Add lines 1 through 4	5			35,941.

Section II - Adjusted Taxable Income

Taxable Income

6 Taxable income. See instructions	6			-47,810.
--	---	--	--	----------

Additions (adjustments to be made if amounts are taken into account on line 6)

7 Any item of loss or deduction which is not properly allocable to a trade or business of the taxpayer. See instructions	7			
8 Any business interest expense not from a pass-through entity. See instructions	8	35,941.		
9 Amount of any net operating loss deduction under section 172	9			
10 Amount of any qualified business income deduction allowed under section 199A	10			
11 Deduction allowable for depreciation, amortization, or depletion attributable to a trade or business	11	19,618.		
12 Amount of any loss or deduction items from a pass-through entity. See instructions	12			
13 Other additions. See instructions	13			
14 Total current year partner's excess taxable income (Schedule A, line 44, column (f))	14			
15 Total current year S corporation shareholder's excess taxable income (Schedule B, line 46, column (c))	15			
16 Total. Add lines 7 through 15	16			55,559.

Reductions (adjustments to be made if amounts are taken into account on line 6)

17 Any item of income or gain which is not properly allocable to a trade or business of the taxpayer. See instructions	17			
18 Any business interest income not from a pass-through entity. See instructions	18			
19 Amount of any income or gain items from a pass-through entity. See instructions	19			
20 Other reductions. See instructions	20			
21 Total. Combine lines 17 through 20	21			
22 Adjusted taxable income. Combine lines 6, 16, and 21. (If zero or less, enter -0-)	22			7,749.

Section III - Business Interest Income

23 Current year business interest income. See instructions	23			
24 Excess business interest income from pass-through entities (total of Schedule A, line 44, column (g), and Schedule B, line 46, column (d))	24			
25 Total. Add lines 23 and 24	25			

Section IV - 163(j) Limitation Calculations

Limitation on Business Interest Expense

26	Multiply adjusted taxable income (line 22) by 30% (0.30). See instructions	26	2,325.		
27	Business interest income (line 25)	27			
28	Floor plan financing interest expense (line 4)	28			
29	Total. Add lines 26, 27, and 28	29			2,325.

Allowable Business Interest Expense

30	Total current year business interest expense deduction. See instructions	30			2,325.
-----------	---	-----------	--	--	--------

Carryforward

31	Disallowed business interest expense. Subtract line 29 from line 5. (If zero or less, enter -0-)	31			33,616.
-----------	---	-----------	--	--	---------

Part II Partnership Pass-Through Items

Part II is only completed by a partnership that is subject to section 163(j). The partnership items below are allocated to the partners and are not carried forward by the partnership. See the instructions for more information.

Excess Business Interest Expense

32	Excess business interest expense. Enter amount from line 31	32			33,616.
-----------	--	-----------	--	--	---------

Excess Taxable Income (If you entered an amount on line 32, skip lines 33 through 37.)

33	Subtract the sum of lines 4 and 25 from line 5. (If zero or less, enter -0-)	33			
34	Subtract line 33 from line 26. (If zero or less, enter -0-)	34			
35	Divide line 34 by line 26. Enter the result as a decimal. (If line 26 is zero, enter -0-)	35			
36	Excess Taxable Income. Multiply line 35 by line 22	36			

Excess Business Interest Income

37	Excess business interest income. Subtract the sum of lines 1, 2, and 3 from line 25. (If zero or less, enter -0-)	37			
-----------	--	-----------	--	--	--

Part III S Corporation Pass-Through Items

Part III is only completed by S corporations that are subject to section 163(j). The S corporation items below are allocated to the shareholders. See the instructions for more information.

Excess Taxable Income

38	Subtract the sum of lines 4 and 25 from line 5. (If zero or less, enter -0-)	38			
39	Subtract line 38 from line 26. (If zero or less, enter -0-)	39			
40	Divide line 39 by line 26. Enter the result as a decimal. (If line 26 is zero, enter -0-)	40			
41	Excess Taxable Income. Multiply line 40 by line 22	41			

Excess Business Interest Income

42	Excess business interest income. Subtract the sum of lines 1, 2, and 3 from line 25. (If zero or less, enter -0-)	42			
-----------	--	-----------	--	--	--

Business Interest Expense

Description	Business Interest Expense	Business Interest Expense Ratio	Limited Business Interest Expense	Disallowed Business Interest Expense
COMMERCIAL - COMMERCIAL RENTAL PROPERTY	35,941.	1.000000	2,325.	
Total	35,941.	1.000000	2,325.	0.

Determination of Each Partner's Relevant Section 163(j) Items-Worksheet A

Keep for Your Records

Before you begin: ✓ Complete Form 8990 before beginning this worksheet. ✓ This worksheet provides space for up to three partners. If there are more than three partners, use more than one worksheet. The total column should reconcile to amounts for all partners.				
	Partner 1	Partner 2	Partner 3	Total
Step 1: Partnership - level calculation required by section 163(j)(4)(A).				
1. Partnership's Adjusted Taxable Income (ATI). (Form 8990, line 22)				7,749.
2. Partnership's business interest income. (Form 8990, line 25) ...				0.
3. Partnership's business interest expense. (Form 8990, subtract line 4 from line 5)				35,941.
4. Partnership's deductible business interest expense. (Form 8990, subtract line 4 from line 30)				2,325.
5. Partnership's excess business interest expense. (Form 8990, line 32) ...				33,616.
6. Partnership's excess taxable income. (Form 8990, line 36)				0.
7. Partnership's excess business interest income. (Form 8990, line 37) ...				0.
Step 2: Determine each partner's relevant section 163(j) items.				
8. Partner's allocable ATI. See instructions	3,875.	3,875.		7,750.
9. Partner's allocable business interest income. See instructions	0.	0.		0.
10. Partner's allocable business interest expense. See instructions	17,971.	17,971.		35,942.
Step 3: Partner - level comparison of business interest income and business interest expense.				
11. Subtract line 10 from line 9. (If zero or less, enter -0-)	0.	0.		0.
12. Subtract line 9 from line 10. (If zero or less, enter -0-)	17,971.	17,971.		35,942.
Step 4: Matching partnership and aggregate partner excess business interest income.				
13. Divide line 11 by line 11 total column amount. (If the total column equals zero, enter -0-)	%	%	%	.00%
14. Multiply line 13 by line 12 total column amount				0.
15. Subtract line 14 from line 11. (If zero or less, enter -0-)				0.
Step 5: Remaining business interest expense determination.				
16. Divide line 12 by line 12 total column amount. (If the total column equals zero, enter -0-)	50.00%	50.00%	%	100.00%
17. Multiply line 16 by line 11 total column amount				0.
18. Subtract line 17 from line 12. (If zero or less, enter -0-)	17,971.	17,971.		35,942.
Step 6: Determination of final allocable ATI.				
19. If line 8 is greater than or equal to \$0, enter line 8. Otherwise, enter -0-	3,875.	3,875.		7,750.
20. If line 8 is less than \$0, enter the absolute value of line 8. Otherwise, enter -0-	0.	0.		0.
21. Divide line 19 by line 19 total column amount. (If the total column equals zero, enter -0-)	50.00%	50.00%	%	100.00%
22. Multiply line 21 by line 20 total column amount				0.
23. Subtract line 22 from line 19. (If zero or less, enter -0-)	3,875.	3,875.		7,750.
Step 7: Partner - level comparison of 30% of ATI and remaining business interest expense.				
24. Multiply line 23 by 30% (0.30)	1,163.	1,163.		2,326.
25. Subtract line 18 from line 24. (If zero or less, enter -0-)				0.
26. Subtract line 24 from line 18. (If zero or less, enter -0-)	16,808.	16,808.		33,616.

**Determination of Each Partner's Relevant
Section 163(j) Items - Worksheet A - Continued**

Keep for Your Records

	Partner 1	Partner 2	Partner 3	Total
Step 8: Partner priority right to ATI capacity excess determination.				
27a. Is line 5 total column amount greater than zero? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
27b. Is line 20 total column amount greater than zero? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
27c. Is line 26 total column amount greater than zero? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
27d. Are lines 27a, 27b, and 27c all "Yes"? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
28. If line 27d is "No," enter line 25. Otherwise, complete Worksheet B				0.
29. If line 27d is "No," enter line 26. Otherwise, complete Worksheet B	16,808.	16,808.		33,616.
30. If line 27d is "No," enter -0-. Otherwise, complete Worksheet B				0.
Step 9: Matching partnership and aggregate partner excess taxable income.				
31. Divide line 28 by line 28 total column amount. (If the total column equals zero, enter -0-.)	%	%	%	.00%
32. Multiply line 31 by line 29 total column amount				0.
33. Subtract line 32 from line 28. (If zero or less, enter -0-.)				0.
Step 10: Match partnership and aggregate partner excess business interest expense.				
34. Divide line 29 by line 29 total column amount. (If the total column equals zero, enter -0-.)	50.00%	50.00%	%	100.00%
35. Multiply line 34 by line 28 total column amount				0.
36. If line 30 is greater than zero, enter line 30. Otherwise, subtract line 35 from line 29. (If zero or less, enter -0-.)	16,808.	16,808.		33,616.
Step 11: Final section 163(j) excess item and deductible business interest expense allocation.				
37. Partner's deductible business interest expense. Subtract line 36 from line 10	1,163.	1,163.		2,326.
38. Partner's excess business interest expense. Enter line 36	16,808.	16,808.		33,616.
39. Partner's excess taxable income. Multiply line 33 by (10/3)				0.
40. Partner's excess business interest income. Enter line 15				0.

Qualified Business Income (Section 199A)

Description	Qualified Business Income	Specified Service Income	W-2 Wages	Unadjusted Basis of Assets	Qualified PTP Income	Gain on Disposition of PTP	Total PTP Income
COMMERCIAL - COMMERCIAL RENTAL PROPERTY	-14,194.			535,379.			
TOTAL	-14,194.			535,379.			

Qualified REIT dividends _____

Unused prior year losses _____

Cooperative qualified business income _____

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

1215 Rand LLC
1215 Rand Road
Des Plaines, IL 60016

Employer Identification Number: 46-5752501

For the Year Ending December 31, 2018

1215 Rand LLC is making the de minimis safe harbor election under Reg. Sec. 1.263(a)-1(f).

Section 1.263(a)-3(h) Safe Harbor Election for Small Taxpayers

1215 Rand LLC
1215 Rand Road
Des Plaines, IL 60016

Employer Identification Number: 46-5752501

For the Year Ending December 31, 2018

1215 RAND LLC is making the safe harbor election under Reg. Sec. 1.263(a)-3(h) for the following eligible building property(s).

Description of Eligible Property(s):

1215 RAND ROAD, DES PLAINES, IL 60016

SCHEDULE K	NET INCOME (LOSS) FROM RENTAL REAL ESTATE	STATEMENT	1
DESCRIPTION		AMOUNT	
COMMERCIAL - COMMERCIAL RENTAL PROPERTY		-14,194.	
TOTAL TO SCHEDULE K, LINE 2		-14,194.	

SCHEDULE K	OTHER DEDUCTIONS	STATEMENT	2
DESCRIPTION		AMOUNT	
EXCESS BUSINESS INTEREST EXPENSE		33,616.	
TOTAL INCLUDED IN SCHEDULE K, LINE 13D		33,616.	

SCHEDULE K	OTHER ITEMS	STATEMENT	3
DESCRIPTION		AMOUNT	
SECTION 199A QUALIFIED BUSINESS INCOME		-14,194.	
SECTION 199A W-2 WAGES		0.	
SECTION 199A UNADJUSTED BASIS		535,379.	
SECTION 199A REIT DIVIDENDS		0.	
SECTION 199A PTP INCOME		0.	

SCHEDULE L	OTHER CURRENT LIABILITIES	STATEMENT	4
DESCRIPTION	BEGINNING OF TAX YEAR	END OF TAX YEAR	
A&FHOLDINGS	50,000.	50,000.	
ADVANCED RENT	7,000.		
FIRAS DIWAN	50,000.	50,000.	
JIDD HOLDINGS LLC	31,521.	104,310.	
TOTAL TO SCHEDULE L, LINE 17	138,521.	204,310.	

OTHER RENTAL EXPENSES

STATEMENT 5

COMMERCIAL

PROPERTY: COMMERCIAL RENTAL PROPERTY
LOCATION: 1215 RAND ROAD, DES PLAINES, IL 60016

DESCRIPTION	AMOUNT
PROFESSIONAL FEES	1,375.
UTILITIES	10,785.
TOTAL TO RENTAL SCHEDULE, LINE 15	12,160.

GROSS RENTAL INCOME

STATEMENT 6

COMMERCIAL

PROPERTY: COMMERCIAL RENTAL PROPERTY
LOCATION: 1215 RAND ROAD, DES PLAINES, IL 60016

DESCRIPTION	AMOUNT
GROSS RENTAL INCOME	120,000.
OTHER INCOME	936.
TOTAL TO RENTAL SCHEDULE, LINE 2	120,936.

ALTERNATIVE MINIMUM TAX DEPRECIATION REPORT

Asset No.	Description	Date Acquired	AMT Method	AMT Life	AMT Cost Or Basis	AMT Accumulated	Regular Depreciation	AMT Depreciation	AMT Adjustment
1	LAND	09/01/14			368,494.	0.	0.	0.	0.
2	BUILDING	09/01/14	SL	39.00	340,148.	28,709.	8,722.	8,722.	0.
3	CAR WASH EQUIPMENT	09/01/14	200DB	5.00	72,998.	29,140.	4,905.	4,905.	0.
4	BUILDING IMPROVEMENTS	09/01/14	SL	39.00	53,500.	4,515.	1,372.	1,372.	0.
5	POS COMPUTER SYSTEMS	09/01/14	200DB	5.00	68,733.	27,438.	4,619.	4,619.	0.
TOTALS					903,873.	89,802.	19,618.	19,618.	0.

Schedule K-1 (Form 1065) Department of the Treasury Internal Revenue Service

2018

Final K-1 Amended K-1 OMB No. 1545-0123

For calendar year 2018, or tax year

beginning ending

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

Part I Information About the Partnership

A Partnership's employer identification number 46-5752501
B Partnership's name, address, city, state, and ZIP code 1215 RAND LLC 1215 RAND ROAD DES PLAINES, IL 60016
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 identifying number 344-02-7228
F Partner's name, address, city, state, and ZIP code ADAM JIDD 415 MICHAEL MANOR GLENVIEW, IL 60025
G General partner or LLC member-manager Limited partner or other LLC member
H Domestic partner Foreign partner
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:
Beginning Ending
Profit 50.0000000% 50.0000000%
Loss 50.0000000% 50.0000000%
Capital 50.0000000% 50.0000000%
K Partner's share of liabilities:
Beginning Ending
Nonrecourse \$ \$
Qualified nonrecourse financing \$ \$
Recourse \$ 93,319. \$ 94,349.
L Partner's capital account analysis:
Beginning capital account \$ 102,150.
Capital contributed during the year \$
Current year increase (decrease) \$ -23,905.
Withdrawals & distributions \$()
Ending capital account \$ 78,245.
Tax basis GAAP Section 704(b) book
M Did the partner contribute property with a built-in gain or loss? Yes No

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

Table with 2 columns: Item description and Amount. Rows include: 1 Ordinary business income (loss) 0., 2 Net rental real estate income (loss) -7,097., 3 Other net rental income (loss), 4 Guaranteed payments, 5 Interest income, 6a Ordinary dividends, 6b Qualified dividends, 6c Dividend equivalents, 7 Royalties, 8 Net short-term capital gain (loss), 9a Net long-term capital gain (loss), 9b Collectibles (28%) gain (loss), 9c Unrecaptured sec 1250 gain, 10 Net section 1231 gain (loss), 11 Other income (loss), 12 Section 179 deduction, 13 Other deductions 16,808., 14 Self-employment earnings (loss) 0., 15 Credits, 16 Foreign transactions, 17 Alternative min tax (AMT) items, 18 Tax-exempt income and nondeductible expenses, 19 Distributions, 20 Other information Z * -7,097., AA * 0., AB * 267,690., AC * 0., AD * 0.

*See attached statement for additional information.

For IRS Use Only

SCHEDULE K-1 SECTION 199A ITEMS, BOX 20
CODES Z THROUGH AD

CODE	DESCRIPTION	AMOUNT
	RENT - COMMERCIAL - COMMERICAL RENTAL PROPERTY	
Z	SECTION 199A QUALIFIED BUSINESS INCOME	-7,097.
AA	SECTION 199A W-2 WAGES	0.
AB	SECTION 199A UNADJUSTED BASIS	267,690.
AC	SECTION 199A REIT DIVIDENDS	0.
AD	SECTION 199A PTP INCOME	0.

SCHEDULE K-1 SECTION 199A ADDITIONAL INFORMATION

THE SECTION 199A AMOUNTS TO BE USED IN THE CALCULATION OF QUALIFIED BUSINESS INCOME DEDUCTION ON YOUR 1040/1041 RETURN ARE REPORTED ON LINE 20, UNDER CODES Z, AA, AB, AC AND AD. PLEASE CONSULT YOUR TAX ADVISOR REGARDING THE CALCULATION OF QUALIFIED BUSINESS INCOME DEDUCTION, INCLUDING THE POSSIBLE AGGREGATIONS AND LIMITATIONS THAT MAY APPLY AND THE FILING OF THE 1.199A-4(C)(2)(I) ANNUAL DISCLOSURE STATEMENT.

SCHEDULE K-1 ELECTION UNDER SECTION 1101(G)(4) OF BBA

1215 RAND LLC HAS MADE THE ELECTION OUT OF THE CENTRALIZED PARTNERSHIP AUDIT REGIME UNDER SECTION 6221(B) FOR THE YEAR ENDING DECEMBER 31, 2018.

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

Table with columns: Code, Report on, and a third column for reporting details. Rows include categories like Ordinary business income (loss), Foreign transactions, Section 179 deduction, Other deductions, Credits, and Self-employment earnings (loss). Each row lists a code and a description, with a corresponding 'Report on' instruction.

Schedule K-1
(Form 1065)
Department of the Treasury
Internal Revenue Service

2018

Final K-1 Amended K-1 OMB No. 1545-0123

For calendar year 2018, or tax year

beginning ending

Partner's Share of Income, Deductions, Credits, etc.

▶ See separate instructions.

Part I Information About the Partnership													
A Partnership's employer identification number 46-5752501													
B Partnership's name, address, city, state, and ZIP code 1215 RAND LLC 1215 RAND ROAD DES PLAINES, IL 60016													
C IRS Center where partnership filed return E-FILE													
D <input type="checkbox"/> Check if this is a publicly traded partnership (PTP)													
Part II Information About the Partner													
E Partner's identifying number 612-95-6186													
F Partner's name, address, city, state, and ZIP code FIRAS DIWAN 241 GREENWOOD RD GLENVIEW, IL 60025													
G <input checked="" type="checkbox"/> General partner or LLC member-manager <input type="checkbox"/> Limited partner or other LLC member													
H <input checked="" type="checkbox"/> Domestic partner <input type="checkbox"/> Foreign partner													
I1 What type of entity is this partner? INDIVIDUAL													
I2 If this partner is a retirement plan (IRA/SEP/Keogh/etc.), check here <input type="checkbox"/>													
J Partner's share of profit, loss, and capital:													
	<table border="1"> <thead> <tr> <th></th> <th>Beginning</th> <th>Ending</th> </tr> </thead> <tbody> <tr> <td>Profit</td> <td>50.0000000%</td> <td>50.0000000%</td> </tr> <tr> <td>Loss</td> <td>50.0000000%</td> <td>50.0000000%</td> </tr> <tr> <td>Capital</td> <td>50.0000000%</td> <td>50.0000000%</td> </tr> </tbody> </table>		Beginning	Ending	Profit	50.0000000%	50.0000000%	Loss	50.0000000%	50.0000000%	Capital	50.0000000%	50.0000000%
	Beginning	Ending											
Profit	50.0000000%	50.0000000%											
Loss	50.0000000%	50.0000000%											
Capital	50.0000000%	50.0000000%											
K Partner's share of liabilities:													
	<table border="1"> <thead> <tr> <th></th> <th>Beginning</th> <th>Ending</th> </tr> </thead> <tbody> <tr> <td>Nonrecourse</td> <td>\$</td> <td>\$</td> </tr> <tr> <td>Qualified nonrecourse financing</td> <td>\$</td> <td>\$</td> </tr> <tr> <td>Recourse</td> <td>\$ 93,319.</td> <td>\$ 94,348.</td> </tr> </tbody> </table>		Beginning	Ending	Nonrecourse	\$	\$	Qualified nonrecourse financing	\$	\$	Recourse	\$ 93,319.	\$ 94,348.
	Beginning	Ending											
Nonrecourse	\$	\$											
Qualified nonrecourse financing	\$	\$											
Recourse	\$ 93,319.	\$ 94,348.											
L Partner's capital account analysis:													
Beginning capital account \$ <u>380,794.</u>													
Capital contributed during the year \$ _____													
Current year increase (decrease) \$ <u>-23,905.</u>													
Withdrawals & distributions \$(_____)													
Ending capital account \$ <u>356,889.</u>													
<input type="checkbox"/> Tax basis <input type="checkbox"/> GAAP <input checked="" type="checkbox"/> Section 704(b) book													
<input type="checkbox"/> Other (explain)													
M Did the partner contribute property with a built-in gain or loss? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No													
If "Yes," attach statement (see instructions)													

Part III Partner's Share of Current Year Income, Deductions, Credits, and Other Items		
1 Ordinary business income (loss) 0.	15 Credits	
2 Net rental real estate income (loss) -7,097.	16 Foreign transactions	
3 Other net rental income (loss)		
4 Guaranteed payments		
5 Interest income		
6a Ordinary dividends	17 Alternative min tax (AMT) items	
6b Qualified dividends		
6c Dividend equivalents		
7 Royalties	18 Tax-exempt income and nondeductible expenses	
8 Net short-term capital gain (loss)		
9a Net long-term capital gain (loss)	19 Distributions	
9b Collectibles (28%) gain (loss)	20 Other information	
9c Unrecaptured sec 1250 gain		Z * -7,097.
10 Net section 1231 gain (loss)		AA * 0.
11 Other income (loss)		AB * 267,689.
	AC * 0.	
	AD * 0.	
12 Section 179 deduction		
13 Other deductions 16,808.		
14 Self-employment earnings (loss) 0.		

*See attached statement for additional information.

For IRS Use Only

SCHEDULE K-1 SECTION 199A ITEMS, BOX 20
CODES Z THROUGH AD

CODE	DESCRIPTION	AMOUNT
	RENT - COMMERCIAL - COMMERICAL RENTAL PROPERTY	
Z	SECTION 199A QUALIFIED BUSINESS INCOME	-7,097.
AA	SECTION 199A W-2 WAGES	0.
AB	SECTION 199A UNADJUSTED BASIS	267,689.
AC	SECTION 199A REIT DIVIDENDS	0.
AD	SECTION 199A PTP INCOME	0.

SCHEDULE K-1 SECTION 199A ADDITIONAL INFORMATION

THE SECTION 199A AMOUNTS TO BE USED IN THE CALCULATION OF QUALIFIED BUSINESS INCOME DEDUCTION ON YOUR 1040/1041 RETURN ARE REPORTED ON LINE 20, UNDER CODES Z, AA, AB, AC AND AD. PLEASE CONSULT YOUR TAX ADVISOR REGARDING THE CALCULATION OF QUALIFIED BUSINESS INCOME DEDUCTION, INCLUDING THE POSSIBLE AGGREGATIONS AND LIMITATIONS THAT MAY APPLY AND THE FILING OF THE 1.199A-4(C)(2)(I) ANNUAL DISCLOSURE STATEMENT.

SCHEDULE K-1 ELECTION UNDER SECTION 1101(G)(4) OF BBA

1215 RAND LLC HAS MADE THE ELECTION OUT OF THE CENTRALIZED PARTNERSHIP AUDIT REGIME UNDER SECTION 6221(B) FOR THE YEAR ENDING DECEMBER 31, 2018.

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

Table with columns for item number, description, report on instructions, code, and report on information. Includes sections for ordinary business income, foreign transactions, alternative minimum tax (AMT) items, tax-exempt income, distributions, other information, and credits.

**Application for Automatic Extension of Time To File Certain
 Business Income Tax, Information, and Other Returns**
 ▶ **File a separate application for each return.**
 ▶ **Go to www.irs.gov/Form7004 for instructions and the latest information.**

Print or Type	Name 1215 RAND LLC	Identifying number 46-5752501
	Number, street, and room or suite no. (If P.O. box, see instructions.) 1215 RAND ROAD	
	City, town, state, and ZIP code (If a foreign address, enter city, province or state, and country (follow the country's practice for entering postal code).) DES PLAINES, IL 60016	

Note: File request for extension by the due date of the return. See instructions before completing this form.

Part I Automatic Extension for Certain Business Income Tax, Information, and Other Returns. See instructions.

1 Enter the form code for the return listed below that this application is for 09

Application Is For:	Form Code	Application Is For:	Form Code
Form 706-GS(D)	01	Form 1120-ND (section 4951 taxes)	20
Form 706-GS(T)	02	Form 1120-PC	21
Form 1041 (bankruptcy estate only)	03	Form 1120-POL	22
Form 1041 (estate other than a bankruptcy estate)	04	Form 1120-REIT	23
Form 1041 (trust)	05	Form 1120-RIC	24
Form 1041-N	06	Form 1120S	25
Form 1041-QFT	07	Form 1120-SF	26
Form 1042	08	Form 3520-A	27
Form 1065	09	Form 8612	28
Form 1066	11	Form 8613	29
Form 1120	12	Form 8725	30
Form 1120-C	34	Form 8804	31
Form 1120-F	15	Form 8831	32
Form 1120-FSC	16	Form 8876	33
Form 1120-H	17	Form 8924	35
Form 1120-L	18	Form 8928	36
Form 1120-ND	19		

Part II All Filers Must Complete This Part

- 2** If the organization is a foreign corporation that does not have an office or place of business in the United States, check here ▶
- 3** If the organization is a corporation and is the common parent of a group that intends to file a consolidated return, check here ▶
 If checked, attach a statement listing the name, address, and employer identification number (EIN) for each member covered by this application.
- 4** If the organization is a corporation or partnership that qualifies under Regulations section 1.6081-5, check here ▶
- 5a** The application is for calendar year 2018, or tax year beginning _____, and ending _____
- b Short tax year.** If this tax year is less than 12 months, check the reason: Initial return Final return
 Change in accounting period Consolidated return to be filed Other (See instructions - attach explanation.)

6 Tentative total tax	6	0.
7 Total payments and credits. See instructions	7	
8 Balance due. Subtract line 7 from line 6. See instructions	8	

2018 TAX RETURN FILING INSTRUCTIONS

ILLINOIS FORM IL-1065

FOR THE YEAR ENDING

DECEMBER 31, 2018

Prepared for	1215 RAND LLC 1215 RAND ROAD DES PLAINES, IL 60016
Prepared by	SELDEN FOX, LTD. 619 ENTERPRISE DRIVE OAK BROOK, IL 60523-8835
To be signed and dated by	A MEMBER OF THE LLC
Amount of tax	Total tax \$ 0.00 Less: payments and credits \$ 0.00 Plus: other amount \$ 0.00 Plus: interest and penalties \$ 0.00 NO PMT REQUIRED \$
Overpayment	Credited to your estimated tax \$ 0.00 Other amount \$ 0.00 Refunded to you \$ 0.00
Mail tax return and check (if applicable) to	THIS RETURN HAS BEEN PREPARED FOR ELECTRONIC FILING. ILLINOIS DOES NOT HAVE A SIGNATURE AUTHORIZATION FORM TO SIGN. UPON RECEIPT OF THE SIGNED FEDERAL AUTHORIZATION FORM, WE WILL SUBMIT YOUR ELECTRONIC RETURN TO THE IDOR.
Forms to be distributed to partners	ENCLOSED ARE COPIES OF SCHEDULE K-1-P TO BE DISTRIBUTED TO EACH PARTNER.
Return must be mailed on or before	RETURN SIGNED FORM 8879-PE TO OUR OFFICE BY SEPTEMBER 16, 2019.
Special Instructions	DO NOT MAIL THE PAPER COPY OF THE RETURN TO THE IDOR.

Illinois Department of Revenue
2018 Form IL-1065
Partnership Replacement Tax Return

See "When should I file?" in the Form IL-1065 instructions for a list of due dates.



If this return is not for calendar year 2018, enter your fiscal tax year here.

Tax year beginning _____, ending _____
month day year month day year

This form is for tax years ending on or after December 31, 2018, and before December 31, 2019. For tax years ending in 2018 but before December 31, 2018, use the 2017 form. For prior years, use the form for that year.

Enter the amount you are paying.
 \$ _____

Step 1: Identify your partnership

A Enter your complete legal business name.
 If you have a name change, check this box.
 Name: 1215 RAND LLC

B Enter your mailing address.
 Check this box if either of the following apply:
 • this is your **first return**, or
 • you have an **address change**.
 C/O: _____

Mailing address: 1215 RAND ROAD

City: DES PLAINES State: IL ZIP: 60016

C If this is the first or final return, check the applicable box(es).
 First return
 Final return (Enter the date of termination. _____)
mm dd yyyy

D If this is a final return because you sold this business, enter the date sold (mm dd yyyy) _____, and the new owner's FEIN. _____

E Apportionment Formulas. Check the appropriate box or boxes and see Apportionment Formula instructions.
 Financial organizations Transportation companies
 Federally regulated exchanges Sales companies

F Check this box if you are:
 classified as an investment partnership
 classified as a publicly-traded partnership

G Check this box if you made an IRC § 761 election.

H Enter your federal employer identification no. (FEIN).
46-5752501

I Check this box if you are a member of a unitary business group **and** are included on a Schedule UB, Combined Apportionment for Unitary Business Group. Enter the FEIN of the member who prepared the Schedule UB and **attach** it to this return.

J Enter your North American Industry Classification System (NAICS) Code. See instructions.
531120

K Enter the city, state, and ZIP code where your accounting records are kept. (Use the two-letter postal abbreviation, e.g., IL, GA, etc.)
DES PLAINES IL 60016
City State ZIP

L If you are making the business income election to treat all nonbusiness income as business income, check this box and enter "0" on Lines 36 and 44.

M If you have completed the following, check the box and **attach** the federal form(s) to this return.
 Federal Form 8886 Federal Sch. M-3, Part II, Line 10

N Check this box if you attached Form IL-4562.

O Check this box if you attached Illinois Schedule M (for businesses).

P Check this box if you attached Schedule 80/20.

Q Check this box if you attached Schedule 1299-A.

R Check this box if your business activity is protected under Public Law 86-272.

S Check this box if you attached the Subgroup Sch.

Step 2: Figure your ordinary income or loss

(Whole dollars only)

<p>▼ 1 Ordinary income or loss, or equivalent from federal Schedule K.</p> <p>2 Net income or loss from all rental real estate activities.</p> <p>3 Net income or loss from other rental activities.</p> <p>4 Portfolio income or loss.</p> <p>5 Net IRC Section 1231 gain or loss.</p> <p>6 All other items of income or loss that were not included in the computation of income or loss on Page 1 of U.S. Form 1065 or 1065-B. See instructions. Identify: _____</p> <p>7 Add Lines 1 through 6. This is your ordinary income or loss.</p>	<p>1 _____ .00</p> <p>2 <u>-14,194</u> .00</p> <p>3 _____ .00</p> <p>4 _____ .00</p> <p>5 _____ .00</p> <p>6 _____ .00</p> <p>7 <u>-14,194</u> .00</p>
---	--

Step 3: Figure your unmodified base income or loss

<p>8 Charitable contributions.</p> <p>9 Expense deduction under IRC Section 179.</p> <p>10 Interest on investment indebtedness.</p> <p>11 All other items of expense that were not deducted in the computation of ordinary income or loss on Page 1 of U.S. Form 1065 or 1065-B. See instructions. Identify: _____</p> <p>12 Add Lines 8 through 11.</p> <p>▲ 13 Subtract Line 12 from Line 7. This amount is your total unmodified base income or loss.</p>	<p>8 _____ .00</p> <p>9 _____ .00</p> <p>10 _____ .00</p> <p>11 _____ .00</p> <p>12 _____ .00</p> <p>13 <u>-14,194</u> .00</p>
--	--

Step 4: Figure your income or loss

14	Enter your unmodified base income or loss from Line 13.	14	<u>-14,194.00</u>
15	State, municipal, and other interest income excluded from Line 14.	15	<u>.00</u>
16	Illinois replacement tax deducted in arriving at Line 14.	16	<u>.00</u>
17	Illinois Special Depreciation addition. Attach Form IL-4562.	17	<u>.00</u>
18	Related-party expenses addition. Attach Schedule 80/20.	18	<u>.00</u>
19	Distributive share of additions. Attach Schedule(s) K-1-P or K-1-T.	19	<u>.00</u>
20	Guaranteed payments to partners from U.S. Form 1065 or 1065-B.	20	<u>.00</u>
21	The amount of loss distributable to a partner subject to replacement tax. Attach Schedule B.	21	<u>.00</u>
22	Other additions. Attach Illinois Schedule M (for businesses).	22	<u>.00</u>
23	Add Lines 14 through 22. This amount is your income or loss.	23	<u>-14,194.00</u>

Step 5: Figure your base income or loss

24	Interest income from U.S. Treasury or other exempt federal obligations.	24	<u>.00</u>
25	August 1, 1969, valuation limitation amount. Attach Schedule F.	25	<u>.00</u>
26	Personal service income or reasonable allowance for compensation of partners.	26	<u>.00</u>
27	Share of income distributable to a partner subject to replacement tax. Attach Schedule B.	27	<u>.00</u>
28	River Edge Redevelopment Zone Dividend subtraction. Attach Schedule 1299-A.	28	<u>.00</u>
29	High Impact Business Dividend subtraction. Attach Schedule 1299-A.	29	<u>.00</u>
30	Illinois Special Depreciation subtraction. Attach Form IL-4562.	30	<u>9,524.00</u>
31	Related-party expenses subtraction. Attach Schedule 80/20.	31	<u>.00</u>
32	Distributive share of subtractions. Attach Schedule(s) K-1-P or K-1-T.	32	<u>.00</u>
33	Other subtractions. Attach Schedule M (for businesses).	33	<u>.00</u>
34	Total subtractions. Add Lines 24 through 33.	34	<u>9,524.00</u>
35	Base income or loss. Subtract Line 34 from Line 23.	35	<u>-23,718.00</u>

STOP	A If the amount on Line 35 is derived inside Illinois only, check this box and enter the amount from Step 5, Line 35 on Step 7, Line 47. You may not complete Step 6. (You must leave Step 6, Lines 36 through 46 blank.) <input checked="" type="checkbox"/>
	Note → If you are a unitary filer, do not check this box. Check the box on Line B and complete Step 6.
	B If any portion of the amount on Line 35 is derived outside Illinois, or you are a unitary filer, check this box and complete all lines of Step 6. (Do not leave Lines 40 through 42 blank.) See instructions. <input type="checkbox"/>

Step 6: Figure your income allocable to Illinois (Complete only if you checked the box on Line B, above.)

36	Nonbusiness income or loss. Attach Schedule NB.	36	<u>.00</u>
37	Business income or loss included in Line 35 from non-unitary partnerships, partnerships included on a Schedule UB, S corporations, trusts, or estates. See Instructions.	37	<u>.00</u>
38	Add Lines 36 and 37.	38	<u>.00</u>
39	Business income or loss. Subtract Line 38 from Line 35.	39	<u>.00</u>
40	Total sales everywhere. This amount cannot be negative.	40	<u>.00</u>
41	Total sales inside Illinois. This amount cannot be negative.	41	<u>.00</u>
42	Apportionment factor. Divide Line 41 by Line 40. (Round to six decimal places.)	42	<u>.00</u>
43	Business income or loss apportionable to Illinois. Multiply Line 39 by Line 42.	43	<u>.00</u>
44	Nonbusiness income or loss allocable to Illinois. Attach Schedule NB.	44	<u>.00</u>
45	Business income or loss apportionable to Illinois from non-unitary partnerships, partnerships included on a Schedule UB, S corporations, trusts, or estates. See instructions.	45	<u>.00</u>
46	Base income or loss allocable to Illinois. Add Lines 43 through 45.	46	<u>.00</u>





Step 7: Figure your net income

47	Base income or net loss from Step 5, Line 35, or Step 6, Line 46.	47	<u>-23,718 .00</u>
48	Illinois net loss deduction. Attach Schedule NLD. If Line 47 is zero or a negative amount, enter "0."	48	<u>0 .00</u>
49	Income after NLD. Subtract Line 48 from Line 47.	49	<u>-23,718 .00</u>
50	Enter the amount from Step 5, Line 35.	50	<u>-23,718 .00</u>
51	Divide Line 47 by Line 50. (Round the result to six decimal places. This figure cannot be greater than "1.")	51	<u>1.000000</u>
52	Exemption allowance. See instructions before completing.	52	<u>0 .00</u>
53	Net income. Subtract Line 52 from Line 49.	53	<u>-23,718 .00</u>

Step 8: Figure your net replacement tax and pass-through withholding you owe

54	Replacement tax. Multiply Line 53 by 1.5% (.015).	54	<u>0 .00</u>
55	Recapture of investment credits. Attach Schedule 4255.	55	<u>.00</u>
56	Replacement tax before investment credits. Add Lines 54 and 55.	56	<u>.00</u>
57	Investment credits. Attach Form IL-477.	57	<u>.00</u>
58	Net replacement tax. Subtract Line 57 from Line 56. If the amount is negative, enter "0."	58	<u>.00</u>
59	Pass-through withholding you owe on behalf of your members. Enter the amount from Schedule B, Section A, Line 9. See instructions. Attach Schedule B.	59	<u>0 .00</u>
60	Total net replacement tax and pass-through withholding you owe. Add Line 58 and Line 59.	60	<u>.00</u>

Step 9: Figure your refund or balance due

61	Payments. See instructions.		
a	Credits and payments made before the original tax due date.	61a	<u>.00</u>
b	Pass-through withholding reported to you on Schedule(s) K-1-P or K-1-T. Attach Schedule(s) K-1-P or K-1-T.	61b	<u>.00</u>
c	Illinois gambling withholding. Attach Form(s) W-2G.	61c	<u>.00</u>
62	Total payments. Add Lines 61a through 61c.	62	<u>.00</u>
63	Overpayment. If Line 62 is greater than Line 60, subtract Line 60 from Line 62.	63	<u>.00</u>
64	Amount to be credited forward . See instructions.	64	<u>.00</u>
65	Refund. Subtract Line 64 from Line 63. This is the amount to be refunded.	65	<u>.00</u>

66 **Complete to direct deposit your refund**

Routing Number _____ Checking or Savings

Account Number _____

67 **Tax Due.** If Line 60 is greater than Line 62, subtract Line 62 from Line 60. This is the amount you owe. 67 0 .00

▶ If you owe tax on Line 67, complete a payment voucher, Form IL-1065-V. Write your FEIN, tax year ending, and "IL-1065-V" on your check or money order and make it payable to "Illinois Department of Revenue." Attach your voucher and payment to the first page of this form.

Special Note ➔ Enter the amount of your payment on the top of Page 1 in the space provided.

Step 10: Sign below - Under penalties of perjury, I state that I have examined this return and, to the best of my knowledge, it is true, correct, and complete.

Sign Here Paid Preparer Use Only	Signature of partner	Date (mm/dd/yyyy)	MEMBER	224-250-2222	<input checked="" type="checkbox"/> Check if the Department may discuss this return with the paid preparer shown in this step.
	GARTH REIMEL				
	Print/Type paid preparer's name	Paid preparer's signature		Date (mm/dd/yyyy)	Paid Preparer's PTIN
	Firm's name ▶ SELDEN FOX, LTD.	Firm's FEIN ▶ 36-2985770		Firm's address ▶ 619 ENTERPRISE DRIVE OAK BROOK,	Firm's phone ▶ 630-954-1400

▶ If a payment is **not** enclosed, mail this return to:
Illinois Department of Revenue
 P.O. Box 19031
 Springfield, IL 62794-9031

▶ If a payment is enclosed, mail this return to:
Illinois Department of Revenue
 P.O. Box 19053
 Springfield, IL 62794-9053

Illinois Department of Revenue
2018 Schedule B Partners' or Shareholders' Information

Attach to your Form IL-1065 or Form IL-1120-ST.



Year ending
12 18
 Month Year

IL Attachment no. 1

Enter your name as shown on your Form IL-1065 or Form IL-1120-ST.
1215 RAND LLC

Enter your federal employer identification number (FEIN).
46-5752501

STOP Read this information first

- You must read the Schedule B instructions and complete Schedule(s) K-1-P and Schedule(s) K-1-P(3) before completing this schedule.
- You must complete Section B of Schedule B and provide all the required information for your partners or shareholders before completing Section A of Schedule B.

Note — Failure to follow these instructions may delay the processing of your return or result in you receiving further correspondence from the Department. You may also be required to submit further information to support your filing.

Section A: Total members' information (from Schedule(s) K-1-P and Schedule B, Section B)

STOP Before completing this section you must first complete Schedule(s) K-1-P, Schedule(s) K-1-P(3) and Schedule B, Section B. You will use the amounts from those schedules when completing this section.

Totals for resident and nonresident partners or shareholders (from Schedule(s) K-1-P and Schedule B, Section B)

- | | | | |
|---|---|---|-----------------------------|
| 1 | Enter the total of all nonbusiness income or loss you reported on Schedule(s) K-1-P for your members. See instructions. | 1 | <u>-14,194.00</u> |
| 2 | Enter the total of all income and replacement tax credits you reported on Schedule(s) K-1-P for your members. See instructions. | 2 | <u> </u> |
| 3 | Add the amounts shown on Schedule B, Section B, Column E for all partners or shareholders on all pages for which you have entered a check mark in Column D. Enter the total here. See instructions. | 3 | <u> </u> |

Totals for nonresident partners or shareholders only (from Schedule B, Section B)

- | | | | |
|---|--|---|-----------------------------|
| 4 | Enter the total pass-through withholding you reported on all pages of your Schedule B, Section B, Column J for your nonresident individual members. See instructions. | 4 | <u> </u> |
| 5 | Enter the total pass-through withholding you reported on all pages of your Schedule B, Section B, Column J for your nonresident estate members. See instructions. | 5 | <u> </u> |
| 6 | Enter the total pass-through withholding you reported on all pages of your Schedule B, Section B, Column J for your partnership and S corporation members. See instructions. | 6 | <u> </u> |
| 7 | Enter the total pass-through withholding you reported on all pages of your Schedule B, Section B, Column J for your nonresident trust members. See instructions. | 7 | <u> </u> |
| 8 | Enter the total pass-through withholding you reported on all pages of your Schedule B, Section B, Column J for your C corporation members. See instructions. | 8 | <u> </u> |
| 9 | Add Line 4 through Line 8. This is the total pass-through withholding you owe on behalf of all your nonresident partners or shareholders. This amount should match the total amount from Schedule B, Section B, Column J for all nonresident partners or shareholders on all pages. Enter the total here and on Form IL-1065, Line 59, or Form IL-1120-ST, Line 58. See instructions. | 9 | <u> </u> |

▶ Attach all pages of Schedule B, Section B behind this page.

**Illinois Department of Revenue
2018 Schedule B**

1215 RAND LLC



46-5752501

Enter your name as shown on your Form IL-1065 or Form IL-1120-ST.

Enter your federal employer identification number (FEIN).

Section B: Members' Information (See instructions before completing.)

A	B	C	D	E	F	G	H	I	J
Name and Address	Partner or Shareholder type	SSN or FEIN	Subject to Illinois replacement tax or an ESOP	Member's distributable amount of base income or loss	Excluded from pass-through withholding	Share of Illinois income subject to pass-through withholding	Pass-through withholding before credits	Distributable share of credits	Pass-through withholding amount
<i>(If Column F is blank, complete Column G through Column J. Otherwise, enter zero in Column G through Column J.)</i>									
1 Name <u>ADAM JIDD</u>									
C/O _____									
Addr. 1 <u>415 MICHAEL MANOR</u>									
Addr. 2 _____									
City <u>GLENVIEW IL 60025</u>	I	<u>344-02-7228</u> <input type="checkbox"/>		<u>-11,859.00</u>	R	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>
State ZIP									
2 Name <u>FIRAS DIWAN</u>									
C/O _____									
Addr. 1 <u>241 GREENWOOD RD</u>									
Addr. 2 _____									
City <u>GLENVIEW IL 60025</u>	I	<u>612-95-6186</u> <input type="checkbox"/>		<u>-11,859.00</u>	R	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>
State ZIP									
3 Name _____									
C/O _____									
Addr. 1 _____									
Addr. 2 _____									
City _____			<input type="checkbox"/>						
State ZIP									
4 Name _____									
C/O _____									
Addr. 1 _____									
Addr. 2 _____									
City _____			<input type="checkbox"/>						
State ZIP									
5 Name _____									
C/O _____									
Addr. 1 _____									
Addr. 2 _____									
City _____			<input type="checkbox"/>						
State ZIP									

849312 01-17-19 **Note** → If you have more members than space provided, attach additional copies of this page as necessary.

This form is authorized as outlined by the Illinois Income Tax Act. Disclosure of this information is REQUIRED. Failure to provide information could result in a penalty.

IL-4562 Special Depreciation

For tax years ending on or after December 31, 2018.
 Attach to your Form IL-1120, IL-1120-ST, IL-1065, IL-1041, or IL-1040.

Year ending

12	2018
Month	Year

IL Attachment No. 11

Step 1: Provide the following information

1215 RAND LLC	46-5752501
Enter your name as shown on your return.	Enter your Social Security number (SSN) or federal employer identification number (FEIN).

Special Note → **You must read the instructions before completing Form IL-4562. Do not use negative figures.**

Step 2: Figure your Illinois special depreciation addition

1 Enter the total amount claimed as a special depreciation allowance on federal Form 4562, Depreciation and Amortization, Line 14 or Line 25, for property acquired after September 10, 2001.	1	0.00
2 Individuals only: Enter the total amount claimed as a special depreciation allowance from federal Form 2106, Employee Business Expenses.	2	
3 Last year of regular depreciation: Enter the total amount of all Illinois depreciation subtractions claimed on prior year IL-4562 forms, Step 3, Line 8, for each property.	3	
4 Add Lines 1 through 3. This is your Illinois special depreciation addition. Enter the total here and see instructions for the list of Illinois form and line references to report this addition.	4	

Step 3: Figure your Illinois special depreciation subtraction

5 a Enter the portion of depreciation allowance claimed on federal Form 4562, Line 17, plus Line 19, Column g, plus Line 26, Column h, for property for which you claimed a special depreciation allowance on federal Form 4562, Line 14 or 25, for this tax year, or any other tax year ending after September 10, 2001, for bonus depreciation equal to 30 percent of your basis in the property.	5a	
b Individuals only: If you completed a federal Form 2106 for this tax year, enter the portion of any depreciation deductions included in Lines 4 and 38 for this tax year or any prior tax year for bonus depreciation equal to 30 percent of your basis in the property.	5b	
c Add Lines 5a and 5b.	5c	
6 Multiply Line 5c by 42.9% (0.429).	6	
7 a Enter the portion of depreciation allowance claimed on federal Form 4562, Line 17, plus Line 19, Column g, plus Line 26, Column h, for property for which you claimed a special depreciation allowance on federal Form 4562, Line 14 or 25, for this tax year, or any other tax year ending after September 10, 2001, for bonus depreciation equal to 50 percent of your basis in the property.	STMT 1 7a	9,524.00
b Individuals only: If you completed a federal Form 2106 for this tax year, enter the portion of any depreciation deductions included in Lines 4 and 38 for this tax year or any prior tax year for bonus depreciation equal to 50 percent of your basis in the property.	7b	
c Add Lines 7a and 7b.	7c	9,524.00
d For tax years ending on or before December 31, 2005, multiply Line 7c by 42.9% (0.429). For tax years ending after December 31, 2005, enter the amount from Line 7c.	7d	9,524.00
8 Add Lines 6 and 7d.	8	9,524.00
9 Last year of regular depreciation: Enter the Illinois special depreciation addition reported on any prior year Form IL-4562, Step 2, Line 1 plus Line 2, for each property. See instructions.	9	
10 Add Lines 8 and 9. This is your Illinois depreciation subtraction for this year. Enter the total here and see instructions for the list of Illinois form and line references to report this subtraction.	10	9,524.00

→ Attach this form to your Illinois return. ←



IL-4562	50% BONUS PROPERTY	STATEMENT	1
---------	--------------------	-----------	---

ASSET #	DESCRIPTION	CURRENT DEPRECIATION
3	CAR WASH EQUIPMENT	4,905.00
5	POS COMPUTER SYSTEMS	4,619.00
TOTAL TO FORM IL-4562, STEP 3, LINE 7A		9,524.00

**Application for Automatic Extension of Time To File Certain
 Business Income Tax, Information, and Other Returns**
 ▶ **File a separate application for each return.**
 ▶ **Go to www.irs.gov/Form7004 for instructions and the latest information.**

Print or Type	Name 1215 RAND LLC	Identifying number 46-5752501
	Number, street, and room or suite no. (If P.O. box, see instructions.) 1215 RAND ROAD	
	City, town, state, and ZIP code (If a foreign address, enter city, province or state, and country (follow the country's practice for entering postal code).) DES PLAINES, IL 60016	

Note: File request for extension by the due date of the return. See instructions before completing this form.

Part I Automatic Extension for Certain Business Income Tax, Information, and Other Returns. See instructions.

1 Enter the form code for the return listed below that this application is for 09

Application Is For:	Form Code	Application Is For:	Form Code
Form 706-GS(D)	01	Form 1120-ND (section 4951 taxes)	20
Form 706-GS(T)	02	Form 1120-PC	21
Form 1041 (bankruptcy estate only)	03	Form 1120-POL	22
Form 1041 (estate other than a bankruptcy estate)	04	Form 1120-REIT	23
Form 1041 (trust)	05	Form 1120-RIC	24
Form 1041-N	06	Form 1120S	25
Form 1041-QFT	07	Form 1120-SF	26
Form 1042	08	Form 3520-A	27
Form 1065	09	Form 8612	28
Form 1066	11	Form 8613	29
Form 1120	12	Form 8725	30
Form 1120-C	34	Form 8804	31
Form 1120-F	15	Form 8831	32
Form 1120-FSC	16	Form 8876	33
Form 1120-H	17	Form 8924	35
Form 1120-L	18	Form 8928	36
Form 1120-ND	19		

Part II All Filers Must Complete This Part

- 2** If the organization is a foreign corporation that does not have an office or place of business in the United States, check here ▶
- 3** If the organization is a corporation and is the common parent of a group that intends to file a consolidated return, check here ▶
 If checked, attach a statement listing the name, address, and employer identification number (EIN) for each member covered by this application.
- 4** If the organization is a corporation or partnership that qualifies under Regulations section 1.6081-5, check here ▶
- 5a** The application is for calendar year 2018, or tax year beginning _____, and ending _____
- b Short tax year.** If this tax year is less than 12 months, check the reason: Initial return Final return
 Change in accounting period Consolidated return to be filed Other (See instructions - attach explanation.)

6 Tentative total tax	6	0.
7 Total payments and credits. See instructions	7	
8 Balance due. Subtract line 7 from line 6. See instructions	8	

THE FOLLOWING SCHEDULES K-1-P WERE NOT FILED WITH THE
ILLINOIS RETURN.

**Illinois Department of Revenue
Schedule K-1-P**

**Partner's or Shareholder's Share of Income,
Deductions, Credits, and Recapture**

Year ending

12 / 18
Month / Year

To be completed by partnerships filing Form IL-1065 or S corporations filing Form IL-1120-ST

Partners and Shareholders receiving Schedule K-1-P should attach this to their Illinois tax return.

IL Attachment No. 12

Step 1: Identify your partnership or S corporation

1 Check your business type partnership S corporation

2 1215 RAND LLC

Enter your name as shown on your Form IL-1065 or Form IL-1120-ST.

3 46-5752501

Enter your federal employer identification number (FEIN).

4 Enter the apportionment factor from Form IL-1065 or Form IL-1120-ST, Line 42. Otherwise, enter "1." 1.000000

Step 2: Identify your partner or shareholder

5 ADAM JIDD

Name

7 344-02-7228

Social Security number or FEIN

6 415 MICHAEL MANOR

Mailing address

8 50.000000

Share (%)

GLENVIEW, IL 60025

City State ZIP

9a Check the appropriate box. See instructions.

individual corporation trust
 partnership S corporation estate

9b To be completed by the recipient on Line 5 only.

I am a: grantor trust disregarded entity
and the amounts on this Schedule will be reported by:

Name: _____

SSN or FEIN: _____

Step 3: Figure your partner's or shareholder's share of your nonbusiness income or loss

	A Member's share (See instructions.)	B Member's share allocable to Illinois
10 Interest	10 _____	_____
11 Dividends	11 _____	_____
12 Rental income	12 <u>-7,097</u>	<u>-7,097</u>
13 Patent royalties	13 _____	_____
14 Copyright royalties	14 _____	_____
15 Other royalty income	15 _____	_____
16 Capital gain or loss from real property	16 _____	_____
17 Capital gain or loss from tangible personal property	17 _____	_____
18 Capital gain or loss from intangible personal property	18 _____	_____
19 Other income and expense	19 _____	_____
Specify	_____	_____

Step 4: Figure your partner's or shareholder's share of your business income or loss

	A Member's share from U.S. Schedule K-1, less nonbusiness income	B Member's share apportioned to Illinois
20 Ordinary income or loss from trade or business activity	20 _____	_____
21 Net income or loss from rental real estate activities	21 _____	_____
22 Net income or loss from other rental activities	22 _____	_____
23 Interest	23 _____	_____
24 Dividends	24 _____	_____
25 Royalties	25 _____	_____
26 Net short-term capital gain or loss	26 _____	_____
27 Net long-term capital gain or loss. Total for year.	27 _____	_____
28 Unrecaptured Section 1250 gain	28 _____	_____
29 Guaranteed payments to partner (U.S. Form 1065 only)	29 _____	_____
30 Net Section 1231 gain or loss (other than casualty or theft). Total for year.	30 _____	_____
31 Other income and expense	31 _____	_____
Specify	_____	_____



Enter the partner's or shareholder's identification number from Line 7.

Step 5: Figure your partner's or shareholder's share of Illinois additions and subtractions

K-1-P Recipient: Before using the information provided in Step 5, you must read Schedule K-1-P(2) to correctly report the amounts listed in Columns A and B.

	A Member's share from Form IL-1065 or IL-1120-ST	B Member's share apportioned or allocated to Illinois
Additions		
32 Federally tax-exempt interest income	32 _____	_____
33 Illinois replacement tax and surcharge deducted	33 _____	_____
34 Illinois Special Depreciation addition	34 _____	_____
35 Related-Party Expenses addition	35 _____	_____
36 Distributive share of additions	36 _____	_____
37 Other additions (from Illinois Schedule M for businesses)	37 _____	_____
Subtractions		
38 a Interest from U.S. Treasury obligations (business income)	38a _____	_____
b Interest from U.S. Treasury obligations (nonbusiness income)	38b _____	_____
39 River Edge Redevelopment Zone Dividend Subtraction	39 _____	_____
40 High Impact Business Dividend subtraction	40 _____	_____
41 Contribution subtraction (Form IL-1120-ST filers only)	41 _____	_____
42 Interest subtraction - River Edge Redevelopment Zone (Form IL-1120-ST financial organizations only)	42 _____	_____
43 Interest subtraction - High Impact Business within a Foreign Trade Zone (Form IL-1120-ST financial organizations only)	43 _____	_____
44 Illinois Special Depreciation subtraction	44 <u>4,762</u>	<u>4,762</u>
45 Related-Party Expenses subtraction	45 _____	_____
46 Distributive share of subtractions	46 _____	_____
47 Other subtractions (from Illinois Schedule M for businesses)	47 _____	_____

Step 6: Figure your partner's or shareholder's (except a corporate partner or shareholder) share of your Illinois August 1, 1969, appreciation amounts

	A Member's share from Illinois Schedule F (Form IL-1065 or IL-1120-ST)	B Member's share apportioned or allocated to Illinois
48 Section 1245 and 1250 gain	48 _____	_____
49 Section 1231 gain	49 _____	_____
50 Section 1231 gain less casualty and theft gain. See instructions.	50 _____	_____
51 Capital gain	51 _____	_____

Step 7: Figure your partner's or shareholder's share of your Illinois credits, recapture, pass-through withholding and federal income subject to surcharge

	Credit Code	Member's share from Illinois tax return		Member's share from Illinois tax return
52 Illinois Income Tax Credits				
a Film Production Services	5000	52a _____		
b Enterprise Zone Investment	5080	52b _____	53 Recapture	
c Affordable Housing Donations	5260	52c _____	a Enterprise Zone or River Edge Redevelopment Zone Investment Credit recapture	53a _____
d EDGE	5300	52d _____	b Replacement Tax Investment Credit recapture	53b _____
e Research and Development	5340	52e _____	c Angel Investment Credit recapture	53c _____
f Wages paid to Ex-Felons	5380	52f _____	54 Pass-through withholding (See instructions)	54 _____
g Student-Assistance Contribution	5420	52g _____	55 Federal income attributable to transactions subject to the Compassionate Use of Medical Cannabis Pilot Program Act surcharge. See instructions.	55 _____
h Angel Investment	5460	52h _____		
i New Markets Development	5500	52i _____		
j River Edge Historic Preservation	5540	52j _____		
k Live Theater Production	5580	52k _____		
l Hospital	5620	52l _____		
m Invest in Kids	5660	52m _____		
n Natural Disaster	5700	52n _____		
o Historic Preservation	1030	52o _____		
p Other credits		52p _____		
q Replacement Tax Investment Credits. See instructions.		52q _____		



IL SCH K-1-P MEMBER'S SHARE OF DISTRIBUTABLE BASE INCOME OR LOSS

1	ENTER THE SHARE OF INCOME FROM IL-1065 LINE 14 FOR THIS MEMBER (SCHEDULE K-1-P COLUMN A LINES 10-27 & 30-31)	\$	-7,097.00
2	ENTER THE SHARE OF ADDITIONS DISTRIBUTABLE TO THIS MEMBER FROM IL-1065 LINES 15-20 AND LINE 22		0.00
3	ADD LINES 1 AND 2		-7,097.00
4	ENTER THE SHARE OF SUBTRACTIONS DISTRIBUTABLE TO THIS MEMBER FROM IL-1065 LINES 24-25 AND 28-33		4,762.00
5	SUBTRACT LINE 4 FROM LINE 3	\$	-11,859.00

**Illinois Department of Revenue
Schedule K-1-P**

**Partner's or Shareholder's Share of Income,
Deductions, Credits, and Recapture**

Year ending

12 / 18
Month / Year

To be completed by partnerships filing Form IL-1065 or S corporations filing Form IL-1120-ST

Partners and Shareholders receiving Schedule K-1-P should attach this to their Illinois tax return.

IL Attachment No. 12

Step 1: Identify your partnership or S corporation

1 Check your business type partnership S corporation

2 1215 RAND LLC

Enter your name as shown on your Form IL-1065 or Form IL-1120-ST.

3 46-5752501

Enter your federal employer identification number (FEIN).

4 Enter the apportionment factor from Form IL-1065 or Form IL-1120-ST, Line 42. Otherwise, enter "1." 1.000000

Step 2: Identify your partner or shareholder

5 FIRAS DIWAN
Name

7 612-95-6186
Social Security number or FEIN

6 241 GREENWOOD RD
Mailing address

8 50.000000
Share (%)

GLENVIEW, IL 60025
City State ZIP

9a Check the appropriate box. See instructions.

individual corporation trust
 partnership S corporation estate

9b To be completed by the recipient on Line 5 only.

I am a: grantor trust disregarded entity
and the amounts on this Schedule will be reported by:

Name: _____
SSN or FEIN: _____

Step 3: Figure your partner's or shareholder's share of your nonbusiness income or loss

	A Member's share (See instructions.)	B Member's share allocable to Illinois
10 Interest	10 _____	_____
11 Dividends	11 _____	_____
12 Rental income	12 <u>-7,097</u>	<u>-7,097</u>
13 Patent royalties	13 _____	_____
14 Copyright royalties	14 _____	_____
15 Other royalty income	15 _____	_____
16 Capital gain or loss from real property	16 _____	_____
17 Capital gain or loss from tangible personal property	17 _____	_____
18 Capital gain or loss from intangible personal property	18 _____	_____
19 Other income and expense	19 _____	_____
Specify		

Step 4: Figure your partner's or shareholder's share of your business income or loss

	A Member's share from U.S. Schedule K-1, less nonbusiness income	B Member's share apportioned to Illinois
20 Ordinary income or loss from trade or business activity	20 _____	_____
21 Net income or loss from rental real estate activities	21 _____	_____
22 Net income or loss from other rental activities	22 _____	_____
23 Interest	23 _____	_____
24 Dividends	24 _____	_____
25 Royalties	25 _____	_____
26 Net short-term capital gain or loss	26 _____	_____
27 Net long-term capital gain or loss. Total for year.	27 _____	_____
28 Unrecaptured Section 1250 gain	28 _____	_____
29 Guaranteed payments to partner (U.S. Form 1065 only)	29 _____	_____
30 Net Section 1231 gain or loss (other than casualty or theft). Total for year.	30 _____	_____
31 Other income and expense	31 _____	_____
Specify		



Enter the partner's or shareholder's identification number from Line 7.

Step 5: Figure your partner's or shareholder's share of Illinois additions and subtractions

K-1-P Recipient: Before using the information provided in Step 5, you must read Schedule K-1-P(2) to correctly report the amounts listed in Columns A and B.

	A Member's share from Form IL-1065 or IL-1120-ST	B Member's share apportioned or allocated to Illinois
32 Federally tax-exempt interest income	32 _____	_____
33 Illinois replacement tax and surcharge deducted	33 _____	_____
34 Illinois Special Depreciation addition	34 _____	_____
35 Related-Party Expenses addition	35 _____	_____
36 Distributive share of additions	36 _____	_____
37 Other additions (from Illinois Schedule M for businesses)	37 _____	_____
Subtractions		
38 a Interest from U.S. Treasury obligations (business income)	38a _____	_____
b Interest from U.S. Treasury obligations (nonbusiness income)	38b _____	_____
39 River Edge Redevelopment Zone Dividend Subtraction	39 _____	_____
40 High Impact Business Dividend subtraction	40 _____	_____
41 Contribution subtraction (Form IL-1120-ST filers only)	41 _____	_____
42 Interest subtraction - River Edge Redevelopment Zone (Form IL-1120-ST financial organizations only)	42 _____	_____
43 Interest subtraction - High Impact Business within a Foreign Trade Zone (Form IL-1120-ST financial organizations only)	43 _____	_____
44 Illinois Special Depreciation subtraction	44 <u>4,762</u>	<u>4,762</u>
45 Related-Party Expenses subtraction	45 _____	_____
46 Distributive share of subtractions	46 _____	_____
47 Other subtractions (from Illinois Schedule M for businesses)	47 _____	_____

Step 6: Figure your partner's or shareholder's (except a corporate partner or shareholder) share of your Illinois August 1, 1969, appreciation amounts

	A Member's share from Illinois Schedule F (Form IL-1065 or IL-1120-ST)	B Member's share apportioned or allocated to Illinois
48 Section 1245 and 1250 gain	48 _____	_____
49 Section 1231 gain	49 _____	_____
50 Section 1231 gain less casualty and theft gain. See instructions.	50 _____	_____
51 Capital gain	51 _____	_____

Step 7: Figure your partner's or shareholder's share of your Illinois credits, recapture, pass-through withholding and federal income subject to surcharge

52 Illinois Income Tax Credits	Credit Code	Member's share from Illinois tax return		Member's share from Illinois tax return
a Film Production Services	5000	52a _____		
b Enterprise Zone Investment	5080	52b _____	53 Recapture	
c Affordable Housing Donations	5260	52c _____	a Enterprise Zone or River Edge Redevelopment Zone Investment Credit recapture	53a _____
d EDGE	5300	52d _____	b Replacement Tax Investment Credit recapture	53b _____
e Research and Development	5340	52e _____	c Angel Investment Credit recapture	53c _____
f Wages paid to Ex-Felons	5380	52f _____	54 Pass-through withholding (See instructions)	54 _____
g Student-Assistance Contribution	5420	52g _____	55 Federal income attributable to transactions subject to the Compassionate Use of Medical Cannabis Pilot Program Act surcharge. See instructions.	55 _____
h Angel Investment	5460	52h _____		
i New Markets Development	5500	52i _____		
j River Edge Historic Preservation	5540	52j _____		
k Live Theater Production	5580	52k _____		
l Hospital	5620	52l _____		
m Invest in Kids	5660	52m _____		
n Natural Disaster	5700	52n _____		
o Historic Preservation	1030	52o _____		
p Other credits	_____	52p _____		
q Replacement Tax Investment Credits. See instructions.	_____	52q _____		



IL SCH K-1-P MEMBER'S SHARE OF DISTRIBUTABLE BASE INCOME OR LOSS

1	ENTER THE SHARE OF INCOME FROM IL-1065 LINE 14 FOR THIS MEMBER (SCHEDULE K-1-P COLUMN A LINES 10-27 & 30-31)	\$	-7,097.00
2	ENTER THE SHARE OF ADDITIONS DISTRIBUTABLE TO THIS MEMBER FROM IL-1065 LINES 15-20 AND LINE 22		0.00
3	ADD LINES 1 AND 2		-7,097.00
4	ENTER THE SHARE OF SUBTRACTIONS DISTRIBUTABLE TO THIS MEMBER FROM IL-1065 LINES 24-25 AND 28-33		4,762.00
5	SUBTRACT LINE 4 FROM LINE 3	\$	-11,859.00