

▶ ERO must obtain and retain completed Form 8879-S.
▶ Go to www.irs.gov/Form8879S for the latest information.

2021

Department of the Treasury
Internal Revenue Service

For calendar year 2021, or tax year beginning _____, 2021, and ending _____, 20__.

Name of corporation

The Kind Group, LLC

Employer identification number

46-1657110

Part I Tax Return Information (whole dollars only)

1	Gross receipts or sales less returns and allowances (Form 1120-S, line 1c)	1	6,070,017.
2	Gross profit (Form 1120-S, line 3)	2	1,821,481.
3	Ordinary business income (loss) (Form 1120-S, line 21)	3	459,687.
4	Net rental real estate income (loss) (Form 1120-S, Schedule K, line 2)	4	
5	Income (loss) reconciliation (Form 1120-S, Schedule K, line 18)	5	459,687.

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

Under penalties of perjury, I declare that I am an officer of the above corporation and that I have examined a copy of the corporation's 2021 electronic income tax return and accompanying schedules and statements and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts shown on the copy of the corporation's electronic income tax return. I consent to allow my electronic return originator (ERO), transmitter, or intermediate service provider to send the corporation's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the corporation's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at **888-353-4537** no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the corporation's electronic income tax return and, if applicable, the corporation's consent to electronic funds withdrawal.

Officer's PIN: check one box only

I authorize _____ to enter my PIN _____ as my signature
ERO firm name Don't enter all zeros
on the corporation's 2021 electronically filed income tax return.

As an officer of the corporation, I will enter my PIN as my signature on the corporation's 2021 electronically filed income tax return.

Officer's signature ▶ _____ Date ▶ _____ Title ▶ Owner

Part III Certification and Authentication

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

2 0 0 1 3 9 1 1 0 5 1

Don't enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2021 electronically filed income tax return for the corporation indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 3112**, IRS e-file Application and Participation, and **Pub. 4163**, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature ▶ _____ Date ▶ 03/09/2022

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

Department of the Treasury
Internal Revenue Service

▶ **Do not file this form unless the corporation has filed or is attaching Form 2553 to elect to be an S corporation.**
▶ **Go to www.irs.gov/Form1120S for instructions and the latest information.**

2021

For calendar year 2021 or tax year beginning , 2021, ending , 20

A S election effective date 01/01/2018	TYPE OR PRINT	Name The Kind Group, LLC	D Employer identification number 46-1657110
B Business activity code number (see instructions) 424990		Number, street, and room or suite no. If a P.O. box, see instructions. 1808 Brielle Ave	E Date incorporated 01/01/2016
C Check if Sch. M-3 attached <input type="checkbox"/>		City or town, state or province, country, and ZIP or foreign postal code Asbury Park NJ 07712	F Total assets (see instructions) \$ 1,525,483.

G Is the corporation electing to be an S corporation beginning with this tax year? See instructions. Yes No

H Check if: (1) Final return (2) Name change (3) Address change (4) Amended return (5) S election termination

I Enter the number of shareholders who were shareholders during any part of the tax year ▶ 2

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

Caution: Include **only** trade or business income and expenses on lines 1a through 21. See the instructions for more information.

Income	1a Gross receipts or sales	1a	6,070,017.	
	b Returns and allowances	1b		
	c Balance. Subtract line 1b from line 1a			1c 6,070,017.
	2 Cost of goods sold (attach Form 1125-A)			2 4,248,536.
	3 Gross profit. Subtract line 2 from line 1c			3 1,821,481.
	4 Net gain (loss) from Form 4797, line 17 (attach Form 4797)			4
5 Other income (loss) (see instructions—attach statement)			5	
6 Total income (loss). Add lines 3 through 5 ▶			6 1,821,481.	
Deductions (see instructions for limitations)	7 Compensation of officers (see instructions—attach Form 1125-E)	7		
	8 Salaries and wages (less employment credits)	8	82,126.	
	9 Repairs and maintenance	9	5,514.	
	10 Bad debts	10	78,836.	
	11 Rents	11	92,829.	
	12 Taxes and licenses	12	9,033.	
	13 Interest (see instructions)	13		
	14 Depreciation not claimed on Form 1125-A or elsewhere on return (attach Form 4562)	14		
	15 Depletion (Do not deduct oil and gas depletion.)	15		
	16 Advertising	16	551,344.	
	17 Pension, profit-sharing, etc., plans	17		
	18 Employee benefit programs	18		
	19 Other deductions (attach statement) See Statement	19	542,112.	
	20 Total deductions. Add lines 7 through 19 ▶	20	1,361,794.	
	21 Ordinary business income (loss). Subtract line 20 from line 6	21	459,687.	
Tax and Payments	22a Excess net passive income or LIFO recapture tax (see instructions)	22a		
	b Tax from Schedule D (Form 1120-S)	22b		
	c Add lines 22a and 22b (see instructions for additional taxes)			22c
	23a 2021 estimated tax payments and 2020 overpayment credited to 2021	23a		
	b Tax deposited with Form 7004	23b	0.	
	c Credit for federal tax paid on fuels (attach Form 4136)	23c		
	d Add lines 23a through 23c			23d 0.
	24 Estimated tax penalty (see instructions). Check if Form 2220 is attached ▶ <input type="checkbox"/>	24		
	25 Amount owed. If line 23d is smaller than the total of lines 22c and 24, enter amount owed	25		0.
	26 Overpayment. If line 23d is larger than the total of lines 22c and 24, enter amount overpaid	26		
27 Enter amount from line 26: Credited to 2022 estimated tax ▶ Refunded ▶	27			

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

Signature of officer	Date	Owner Title	May the IRS discuss this return with the preparer shown below? See instructions. <input type="checkbox"/> Yes <input type="checkbox"/> No
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Paid Preparer Use Only	Print/Type preparer's name Kevin Gilmartin	Preparer's signature Kevin Gilmartin	Date 03/09/2022	Check <input type="checkbox"/> if self-employed	PTIN P01449226
	Firm's name ▶ Gilmartin Consulting	Firm's EIN ▶ 30-0870968			
	Firm's address ▶ 14 Imlay Ln Farmingdale NJ 07727	Phone no. (585) 315-7150			

Schedule B Other Information (see instructions)

- | | Yes | No |
|---|-----|----|
| 1 Check accounting method: a <input checked="" type="checkbox"/> Cash b <input type="checkbox"/> Accrual
c <input type="checkbox"/> Other (specify) ▶ _____ | | |
| 2 See the instructions and enter the:
a Business activity ▶ <u>Sales</u> b Product or service ▶ <u>Sales</u> | | |
| 3 At any time during the tax year, was any shareholder of the corporation a disregarded entity, a trust, an estate, or a nominee or similar person? If "Yes," attach Schedule B-1, Information on Certain Shareholders of an S Corporation . . . | | X |
| 4 At the end of the tax year, did the corporation:
a Own directly 20% or more, or own, directly or indirectly, 50% or more of the total stock issued and outstanding of any foreign or domestic corporation? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (v) below | | X |

(i) Name of Corporation	(ii) Employer Identification Number (if any)	(iii) Country of Incorporation	(iv) Percentage of Stock Owned	(v) If Percentage in (iv) Is 100%, Enter the Date (if applicable) a Qualified Subchapter S Subsidiary Election Was Made

- | | Yes | No |
|--|-----|----|
| 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

- | | | |
|--|--|---|
| 5a At the end of the tax year, did the corporation have any outstanding shares of restricted stock?
If "Yes," complete lines (i) and (ii) below. | | X |
|--|--|---|

- | | | |
|---|--|--|
| (i) Total shares of restricted stock ▶ _____ | | |
| (ii) Total shares of non-restricted stock ▶ _____ | | |

- | | | |
|--|--|---|
| b At the end of the tax year, did the corporation have any outstanding stock options, warrants, or similar instruments?
If "Yes," complete lines (i) and (ii) below. | | X |
|--|--|---|

- | | | |
|--|--|--|
| (i) Total shares of stock outstanding at the end of the tax year ▶ _____ | | |
| (ii) Total shares of stock outstanding if all instruments were executed ▶ _____ | | |

- | | | |
|---|--|---|
| 6 Has this corporation filed, or is it required to file, Form 8918 , Material Advisor Disclosure Statement, to provide information on any reportable transaction? | | X |
|---|--|---|

- | | | |
|---|--|--|
| 7 Check this box if the corporation issued publicly offered debt instruments with original issue discount <input type="checkbox"/>
If checked, the corporation may have to file Form 8281 , Information Return for Publicly Offered Original Issue Discount Instruments. | | |
|---|--|--|

- | | | |
|---|--|--|
| 8 If the corporation (a) was a C corporation before it elected to be an S corporation or the corporation acquired an asset with a basis determined by reference to the basis of the asset (or the basis of any other property) in the hands of a C corporation, and (b) has net unrealized built-in gain in excess of the net recognized built-in gain from prior years, enter the net unrealized built-in gain reduced by net recognized built-in gain from prior years. See instructions ▶ \$ _____ | | |
|---|--|--|

- | | | |
|--|--|---|
| 9 Did the corporation have an election under section 163(j) for any real property trade or business or any farming business in effect during the tax year? See instructions | | X |
|--|--|---|

- | | | |
|---|--|---|
| 10 Does the corporation satisfy one or more of the following? See instructions | | X |
|---|--|---|

- | | | |
|---|--|--|
| a The corporation owns a pass-through entity with current, or prior year carryover, excess business interest expense. | | |
| b The corporation's aggregate average annual gross receipts (determined under section 448(c)) for the 3 tax years preceding the current tax year are more than \$26 million and the corporation has business interest expense. | | |
| c The corporation is a tax shelter and the corporation has business interest expense.
If "Yes," complete and attach Form 8990. | | |

- | | | |
|---|--|---|
| 11 Does the corporation satisfy both of the following conditions? | | X |
|---|--|---|

- | | | |
|--|--|--|
| a The corporation's total receipts (see instructions) for the tax year were less than \$250,000. | | |
| b The corporation's total assets at the end of the tax year were less than \$250,000.
If "Yes," the corporation is not required to complete Schedules L and M-1. | | |

Schedule B Other Information (see instructions) <i>(continued)</i>		Yes	No
12	During the tax year, did the corporation have any non-shareholder debt that was canceled, was forgiven, or had the terms modified so as to reduce the principal amount of the debt?		X
	If "Yes," enter the amount of principal reduction ▶ \$		
13	During the tax year, was a qualified subchapter S subsidiary election terminated or revoked? If "Yes," see instructions		X
14a	Did the corporation make any payments in 2021 that would require it to file Form(s) 1099?		X
b	If "Yes," did the corporation file or will it file required Form(s) 1099?		
15	Is the corporation attaching Form 8996 to certify as a Qualified Opportunity Fund?		X
	If "Yes," enter the amount from Form 8996, line 15 ▶ \$		

Schedule K Shareholders' Pro Rata Share Items		Total amount	
Income (Loss)	1 Ordinary business income (loss) (page 1, line 21)	1	459,687.
	2 Net rental real estate income (loss) (attach Form 8825)	2	
	3a 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 Interest income 4		
	5 Dividends: a Ordinary dividends 5a		
	b Qualified dividends 5b		
	6 Royalties 6		
	7 Net short-term capital gain (loss) (attach Schedule D (Form 1120-S)) 7		
8a Net long-term capital gain (loss) (attach Schedule D (Form 1120-S)) 8a			
b Collectibles (28%) gain (loss) 8b			
c Unrecaptured section 1250 gain (attach statement) 8c			
9 Net section 1231 gain (loss) (attach Form 4797) 9			
10 Other income (loss) (see instructions) Type ▶ 10			
Deductions	11 Section 179 deduction (attach Form 4562) 11		
	12a Charitable contributions 12a		
	b Investment interest expense 12b		
	c Section 59(e)(2) expenditures Type ▶ 12c		
d Other deductions (see instructions) Type ▶ 12d			
Credits	13a Low-income housing credit (section 42(j)(5)) 13a		
	b Low-income housing credit (other) 13b		
	c Qualified rehabilitation expenditures (rental real estate) (attach Form 3468, if applicable) 13c		
	d Other rental real estate credits (see instructions) Type ▶ 13d		
	e Other rental credits (see instructions) Type ▶ 13e		
	f Biofuel producer credit (attach Form 6478) 13f		
	g Other credits (see instructions) Type ▶ 13g		
International Transactions	14 Attach Schedule K-2 (Form 1120-S), Shareholders' Pro Rata Share Items—International, and check this box to indicate you are reporting items of international tax relevance ▶ <input type="checkbox"/>		
Alternative Minimum Tax (AMT) Items	15a Post-1986 depreciation adjustment 15a		
	b Adjusted gain or loss 15b		
	c Depletion (other than oil and gas) 15c		
	d Oil, gas, and geothermal properties—gross income 15d		
	e Oil, gas, and geothermal properties—deductions 15e		
	f Other AMT items (attach statement) 15f		
Items Affecting Shareholder Basis	16a Tax-exempt interest income 16a		
	b Other tax-exempt income 16b		
	c Nondeductible expenses 16c		20,691.
	d Distributions (attach statement if required) (see instructions) 16d		300,000.
	e Repayment of loans from shareholders 16e		
	f Foreign taxes paid or accrued 16f		

Schedule K Shareholders' Pro Rata Share Items <i>(continued)</i>		Total amount	
Other Information	17a Investment income	17a	
	b Investment expenses	17b	
	c Dividend distributions paid from accumulated earnings and profits	17c	0.
	d Other items and amounts (attach statement) ** SEC 199A INFO: SEE STMT A		
Reconciliation	18 Income (loss) reconciliation. Combine the amounts on lines 1 through 10 in the far right column. From the result, subtract the sum of the amounts on lines 11 through 12d and 16f .	18	459,687.

Schedule L Balance Sheets per Books		Beginning of tax year		End of tax year	
Assets		(a)	(b)	(c)	(d)
1	Cash		1,002,462.		729,526.
2a	Trade notes and accounts receivable				
b	Less allowance for bad debts	()		()	
3	Inventories		402,012.		788,176.
4	U.S. government obligations				
5	Tax-exempt securities (see instructions)				
6	Other current assets (attach statement)				
7	Loans to shareholders				
8	Mortgage and real estate loans				
9	Other investments (attach statement)				
10a	Buildings and other depreciable assets				
b	Less accumulated depreciation	()		()	
11a	Depletable assets				
b	Less accumulated depletion	()		()	
12	Land (net of any amortization)				
13a	Intangible assets (amortizable only)				
b	Less accumulated amortization	()		()	
14	Other assets (attach statement)		12,000.		7,781.
15	Total assets		1,416,474.		1,525,483.
Liabilities and Shareholders' Equity					
16	Accounts payable		85,555.		89,610.
17	Mortgages, notes, bonds payable in less than 1 year				
18	Other current liabilities (attach statement)		44,058.		
19	Loans from shareholders		500,000.		500,000.
20	Mortgages, notes, bonds payable in 1 year or more				
21	Other liabilities (attach statement)				
22	Capital stock				
23	Additional paid-in capital		282,589.		292,605.
24	Retained earnings		504,272.		643,268.
25	Adjustments to shareholders' equity (attach statement)				
26	Less cost of treasury stock	()		()	
27	Total liabilities and shareholders' equity		1,416,474.		1,525,483.

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

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

1	Net income (loss) per books	438,996.	5	Income recorded on books this year not included on Schedule K, lines 1 through 10 (itemize):	
2	Income included on Schedule K, lines 1, 2, 3c, 4, 5a, 6, 7, 8a, 9, and 10, not recorded on books this year (itemize) -----		a	Tax-exempt interest \$ -----	
3	Expenses recorded on books this year not included on Schedule K, lines 1 through 12 and 16f (itemize):		6	Deductions included on Schedule K, lines 1 through 12 and 16f, not charged against book income this year (itemize):	
a	Depreciation \$ -----		a	Depreciation \$ -----	
b	Travel and entertainment \$ 20,691.	20,691.	7	Add lines 5 and 6	
4	Add lines 1 through 3	459,687.	8	Income (loss) (Schedule K, line 18). Subtract line 7 from line 4	459,687.

Schedule M-2 Analysis of Accumulated Adjustments Account, Shareholders' Undistributed Taxable Income Previously Taxed, Accumulated Earnings and Profits, and Other Adjustments Account
(see instructions)

	(a) Accumulated adjustments account	(b) Shareholders' undistributed taxable income previously taxed	(c) Accumulated earnings and profits	(d) Other adjustments account
1 Balance at beginning of tax year	311,171.	0.	0.	0.
2 Ordinary income from page 1, line 21	459,687.			
3 Other additions				
4 Loss from page 1, line 21	()			
5 Other reductions Meals and entertainment	(20,691.)			()
6 Combine lines 1 through 5	750,167.	0.	0.	0.
7 Distributions	300,000.	0.	0.	0.
8 Balance at end of tax year. Subtract line 7 from line 6	450,167.	0.	0.	0.

▶ **Attach to Form 1120, 1120-C, 1120-F, 1120S, or 1065.**
▶ **Go to www.irs.gov/Form1125A for the latest information.**

Name The Kind Group, LLC		Employer identification number 46-1657110	
1	Inventory at beginning of year	1	402,012
2	Purchases	2	3,588,224
3	Cost of labor	3	
4	Additional section 263A costs (attach schedule) <i>See Statement</i>	4	794,761
5	Other costs (attach schedule) <i>Shipping</i>	5	251,715
6	Total. Add lines 1 through 5	6	5,036,712
7	Inventory at end of year	7	788,176
8	Cost of goods sold. Subtract line 7 from line 6. Enter here and on Form 1120, page 1, line 2 or the appropriate line of your tax return. See instructions	8	4,248,536
9a	Check all methods used for valuing closing inventory: (i) <input checked="" type="checkbox"/> Cost (ii) <input type="checkbox"/> Lower of cost or market (iii) <input type="checkbox"/> Other (Specify method used and attach explanation.) ▶		
b	Check if there was a writedown of subnormal goods	▶ <input type="checkbox"/>	
c	Check if the LIFO inventory method was adopted this tax year for any goods (if checked, attach Form 970)	▶ <input type="checkbox"/>	
d	If the LIFO inventory method was used for this tax year, enter amount of closing inventory computed under LIFO	9d	
e	If property is produced or acquired for resale, do the rules of section 263A apply to the entity? See instructions	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
f	Was there any change in determining quantities, cost, or valuations between opening and closing inventory? If "Yes," attach explanation	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

Section references are to the Internal Revenue Code unless otherwise noted.

What's New

Small business taxpayers. For tax years beginning after December 31, 2017, the following apply.

- A small business taxpayer (defined below), may use a method of accounting for inventories that either: (1) treats inventories as nonincidental materials and supplies, or (2) conforms to the taxpayer's financial accounting treatment of inventories.
- A small business taxpayer is not required to capitalize costs under section 263A.

General Instructions

Purpose of Form

Use Form 1125-A to calculate and deduct cost of goods sold for certain entities.

Who Must File

Filers of Form 1120, 1120-C, 1120-F, 1120S, or 1065, must complete and attach Form 1125-A if the applicable entity reports a deduction for cost of goods sold.

Inventories

Generally, inventories are required at the beginning and end of each tax year if the production, purchase, or sale of

merchandise is an income-producing factor. See Regulations section 1.471-1. If inventories are required, you generally must use an accrual method of accounting for sales and purchases of inventory items.

Exception for certain taxpayers. A small business taxpayer (defined below), can adopt or change its accounting method to account for inventories in the same manner as material and supplies that are nonincidental, or conform to its treatment of inventories in an applicable financial statement (as defined in section 451(b)(3)), or if it does not have an applicable financial statement, the method of accounting used in its books and records prepared in accordance with its accounting procedures. See section 471(c)(3).

A small business taxpayer claiming exemption from the requirement to keep inventories is changing its method of accounting for purposes of section 481. For additional guidance on this method of accounting, see Pub. 538, Accounting Periods and Methods. For guidance on changing to this method of accounting, see Form 3115 and the Instructions for Form 3115.

Small business taxpayer. A small business taxpayer is a taxpayer that (a) has average annual gross receipts of \$25 million or less (indexed for inflation) for the 3 prior tax years, and (b) is not a tax shelter (as defined in section 448(d)(3)). See Pub. 538.

Uniform capitalization rules. The uniform capitalization rules of section 263A generally require you to capitalize, or include in inventory, certain costs incurred in connection with the following.

- The production of real property and tangible personal property held in inventory or held for sale in the ordinary course of business.
- Real property or personal property (tangible and intangible) acquired for resale.
- The production of real property and tangible personal property for use in its trade or business or in an activity engaged in for profit.

A small business taxpayer (defined above) is not required to capitalize costs under section 263A. See section 263A(i).

See the discussion on section 263A uniform capitalization rules in the instructions for your tax return before completing Form 1125-A. Also see Regulations sections 1.263A-1 through 1.263A-3. See Regulations section 1.263A-4 for rules for property produced in a farming business.

Schedule K-1 (Form 1120-S)

2021

Department of the Treasury Internal Revenue Service

For calendar year 2021, or tax year

beginning [] / [] / 2021 ending [] / [] / []

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

Part I Information About the Corporation

A Corporation's employer identification number 46-1657110
B Corporation's name, address, city, state, and ZIP code The Kind Group, LLC 1808 Brielle Ave Asbury Park NJ 07712
C IRS Center where corporation filed return Kansas City, MO 64999-0013
D Corporation's total number of shares Beginning of tax year End of tax year

Part II Information About the Shareholder

E Shareholder's identifying number 139-66-7936
F Shareholder's name, address, city, state, and ZIP code Anthony Gagliardi 421 W. Lincoln Ave Oakhurst NJ 07755
G Current year allocation percentage 99.00000 %
H Shareholder's number of shares Beginning of tax year End of tax year
I Loans from shareholder Beginning of tax year \$ 495,000. End of tax year \$ 495,000.

For IRS Use Only

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

Table with 4 columns: Line number, Description, Amount, and Other information. Rows include Ordinary business income (loss) 159,687., Net rental real estate income (loss), Other net rental income (loss), Interest income, Ordinary dividends, Qualified dividends, Royalties, Net short-term capital gain (loss), Net long-term capital gain (loss), Collectibles (28%) gain (loss), Unrecaptured section 1250 gain, Net section 1231 gain (loss) 20,484., Other income (loss), Section 179 deduction, Other deductions, and Other information STMT.

18 More than one activity for at-risk purposes*
19 More than one activity for passive activity purposes*
* See attached statement for additional information.

Statement A—QBI Pass-through Entity Reporting

Corporation's name: The Kind Group, LLC		Corporation's EIN: 46-1657110	
Shareholder's name: Anthony Gagliardi		Shareholder's identifying no: 139-66-7936	
		1120S, Line 21	
		<input type="checkbox"/> PTP <input type="checkbox"/> Aggregated <input checked="" type="checkbox"/> SSTB	<input type="checkbox"/> PTP <input type="checkbox"/> Aggregated <input type="checkbox"/> SSTB
		<input type="checkbox"/> PTP <input type="checkbox"/> Aggregated <input type="checkbox"/> SSTB	<input type="checkbox"/> PTP <input type="checkbox"/> Aggregated <input type="checkbox"/> SSTB
Shareholder's share of:			
QBI or qualified PTP items subject to shareholder-specific determinations:			
	Ordinary business income (loss)	455,090.	
	Rental income (loss)		
	Royalty income (loss)		
	Section 1231 gain (loss)		
	Other income (loss)		
	Section 179 deduction		
	Other deductions		
	W-2 wages	81,305.	
	UBIA of qualified property		
	Section 199A dividends		

Statement A—QBI Pass-through Entity Reporting

Corporation's name:		Corporation's EIN:	
Shareholder's name:		Shareholder's identifying no:	
		<input type="checkbox"/> PTP <input type="checkbox"/> Aggregated <input type="checkbox"/> SSTB	<input type="checkbox"/> PTP <input type="checkbox"/> Aggregated <input type="checkbox"/> SSTB
		<input type="checkbox"/> PTP <input type="checkbox"/> Aggregated <input type="checkbox"/> SSTB	<input type="checkbox"/> PTP <input type="checkbox"/> Aggregated <input type="checkbox"/> SSTB
Shareholder's share of:			
QBI or qualified PTP items subject to shareholder-specific determinations:			
	Ordinary business income (loss)		
	Rental income (loss)		
	Royalty income (loss)		
	Section 1231 gain (loss)		
	Other income (loss)		
	Section 179 deduction		
	Other deductions		
	W-2 wages		
	UBIA of qualified property		
	Section 199A dividends		

Statement A—QBI Pass-through Entity Reporting

Corporation's name: The Kind Group, LLC		Corporation's EIN: 46-1657110	
Shareholder's name: Joseph Vecchione		Shareholder's identifying no: 139-80-0646	
		1120S, Line 21	
		<input type="checkbox"/> PTP <input type="checkbox"/> Aggregated <input checked="" type="checkbox"/> SSTB	<input type="checkbox"/> PTP <input type="checkbox"/> Aggregated <input type="checkbox"/> SSTB
		<input type="checkbox"/> PTP <input type="checkbox"/> Aggregated <input type="checkbox"/> SSTB	<input type="checkbox"/> PTP <input type="checkbox"/> Aggregated <input type="checkbox"/> SSTB
Shareholder's share of:			
QBI or qualified PTP items subject to shareholder-specific determinations:			
	Ordinary business income (loss)	4,597.	
	Rental income (loss)		
	Royalty income (loss)		
	Section 1231 gain (loss)		
	Other income (loss)		
	Section 179 deduction		
	Other deductions		
	W-2 wages	821.	
	UBIA of qualified property		
	Section 199A dividends		

Statement A—QBI Pass-through Entity Reporting

Corporation's name:		Corporation's EIN:	
Shareholder's name:		Shareholder's identifying no:	
		<input type="checkbox"/> PTP <input type="checkbox"/> Aggregated <input type="checkbox"/> SSTB	<input type="checkbox"/> PTP <input type="checkbox"/> Aggregated <input type="checkbox"/> SSTB
		<input type="checkbox"/> PTP <input type="checkbox"/> Aggregated <input type="checkbox"/> SSTB	<input type="checkbox"/> PTP <input type="checkbox"/> Aggregated <input type="checkbox"/> SSTB
Shareholder's share of:			
QBI or qualified PTP items subject to shareholder-specific determinations:			
	Ordinary business income (loss)		
	Rental income (loss)		
	Royalty income (loss)		
	Section 1231 gain (loss)		
	Other income (loss)		
	Section 179 deduction		
	Other deductions		
	W-2 wages		
	UBIA of qualified property		
	Section 199A dividends		

QuickZoom to Other Copy _____

Page 1

Corporation's Name: <u>The Kind Group, LLC</u>		Corporation's EIN: <u>46-1657110</u>	
1120S, Line 21			
<input type="checkbox"/> PTP	<input type="checkbox"/> PTP	<input type="checkbox"/> PTP	
<input type="checkbox"/> Aggregated	<input type="checkbox"/> Aggregated	<input type="checkbox"/> Aggregated	
<input checked="" type="checkbox"/> SSTB	<input type="checkbox"/> SSTB	<input type="checkbox"/> SSTB	
Shareholder's share of:			
QBI or qualified PTP items subject to shareholder-specific determinations:			
Ordinary business inc (loss)	459,687.	_____	_____
Rental income (loss)	_____	_____	_____
Royalty income (loss)	_____	_____	_____
Section 1231 gain (loss)	_____	_____	_____
Other income (loss)	_____	_____	_____
Section 179 deduction	_____	_____	_____
Other deductions	_____	_____	_____
W-2 wages	82,126.	_____	_____
UBIA of qualified property	_____	_____	_____
Section 199A dividends	_____		

Corporation's Name: _____ Corporation's EIN: _____

<input type="checkbox"/> PTP <input type="checkbox"/> Aggregated <input type="checkbox"/> SSTB	<input type="checkbox"/> PTP <input type="checkbox"/> Aggregated <input type="checkbox"/> SSTB	<input type="checkbox"/> PTP <input type="checkbox"/> Aggregated <input type="checkbox"/> SSTB

Shareholder's share of:
 QBI or qualified PTP items subject to shareholder-specific determinations:

Ordinary business inc (loss) .					
Rental income (loss)	_____	_____	_____	_____	_____
Royalty income (loss)	_____	_____	_____	_____	_____
Section 1231 gain (loss) . . .	_____	_____	_____	_____	_____
Other income (loss)	_____	_____	_____	_____	_____
Section 179 deduction	_____	_____	_____	_____	_____
Other deductions	_____	_____	_____	_____	_____
W-2 wages	_____	_____	_____	_____	_____
UBIA of qualified property . . .	_____	_____	_____	_____	_____
Section 199A dividends					

199A Worksheet by Activity

2021

► Keep for your records

Corporation's name <u>The Kind Group, LLC</u>	Corporation's EIN <u>46-1657110</u>
--	--

QuickZoom to 199A Summary ► _____

Aggregation Code: _____	Trade or Business: <u>1120S, Line 21</u> EIN: <u>46-1657110</u>
Is this activity a qualified trade/business? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Specified Service Trade or Business? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

QBI or qualified PTP items subject to shareholder-specific determinations:

1 a Ordinary business income (loss)	1 a	459,687.		
b Adjustments	b			
c Adjusted ordinary business income (loss)	1 c		459,687.	
2 a Rental income (loss)	2 a			
b Adjustments	b			
c Adjusted rental income (loss)	2 c			
3 a Royalty income (loss)	3 a			
b Adjustments	b			
c Adjusted royalty income (loss)	3 c			
4 a Section 1231 gain (loss)	4 a			
b Adjustments	b			
c Adjusted section 1231 gain (loss)	4 c			
5 Other income (loss)	5			
6 a Section 179 deduction	6 a			
b Adjustments	b			
c Adjusted section 179 deduction	6 c			
7 Other deductions	7			
8 a W-2 wages	8 a	82,126.		
b Adjustments	b			
c Adjusted W-2 Wages	8 c		82,126.	
9 a UBIA of qualified property	9 a			
b Adjustments	b			
c Adjusted UBIA of qualified property	9 c			

Section 179 Carryover Detail for this Activity

Tentative Section 179 deduction from current year assets

Part I: Prior Year Carryovers

by Year and Category

- A Before 2018
- B 2018
- C 2019
- D 2020
- Total prior year carryovers to this year**

Section 179 Regular Tax	Section 179 QBI
	0.

Part II: 179 Deduction Allowed

by Year and Category

Total 179 deduction allowed for this activity in current year

- A Amount allowed from 2021
- B Amount allowed from before 2018
- C Amount allowed from 2018
- D Amount allowed from 2019
- E Amount allowed from 2020

Section 179 Regular Tax	Section 179 QBI

Part III: Total Carryforward to 2022

by Year and Category

- A Carryforward from 2021
- B Carryforward from before 2018
- C Carryforward from 2018
- D Carryforward from 2019
- E Carryforward from 2020
- Total carryforward to next year**

Section 179 Regular Tax	Section 179 QBI

Additional information from your 2021 US Form 1120S: Income Tax Return for S Corp**Form 1120S: S-Corporation Tax Return****Other Deductions****Continuation Statement**

Description	Amount
Automobile and truck expense	83,424.
Bank charges	5,729.
Commissions	1,091.
Computer services and supplies	9,775.
Delivery and freight	2,091.
Dues and subscriptions	32,180.
Insurance	15,988.
Legal and professional	151,641.
Meals (50%)	20,691.
Miscellaneous	3,323.
Office expense	16,079.
Supplies	2,851.
Travel	51,143.
Utilities	20,803.
credit card processing	113,885.
disposal fee	3,122.
payroll processing	3,796.
website	4,500.
Total	542,112.

SMART WORKSHEET FOR: Form 1120S: S-Corporation Tax Return**Salaries and wages****Itemization Statement**

Description	Amount
Brianna	36,200.
Isabella	23,850.
Sophia	2,076.
James	20,000.
Total	82,126.

Form 1125-A: Cost of Goods Sold**Additional Section 263A Costs Statement****Continuation Statement**

Additional Costs	Additional Amount
Freight-in	790,794
Other purchase	3,967
Total	794,761

**CORPORATION BUSINESS TAX
ESTIMATED PAYMENT WORKSHEET**

CBT-150S

**BEGINNING TAX YEAR 2016, YOU NEED TO PAY YOUR NEW JERSEY
CORPORATION BUSINESS TAX ELECTRONICALLY**

You need to pay the tax by one of these methods:

1. **Electronic Check or Credit Card:** Visit www.njtaxation.org and select "Make a Payment."
2. **Electronic Funds Transfer (EFT):** To register visit www.nj.gov/treasury/revenue/eft1.shtml

If you do not have access to the internet, call our Customer Service Center at 609-292-6400 to make a payment.

DO NOT CUT THIS PAGE – DO NOT MAIL – FOR REFERENCE ONLY

REV 02/16/22 PRO

Corporation Business Tax Statement of Estimated Tax Worksheet
CBT-150S

Due Date: 04/18/22 Voucher #: 1 Beginning 01/01/2022 and ending 12/31/2022
1030 2020
46-1657110 THEK

THE KIND GROUP, LLC
1808 BRIELLE AVE
ASBURY PARK NJ 07712

1. Amount of this installment	1.	375.00
2. Amount of overpayment credit (See instruction 5)	2.	0.00
3. Amount of this installment payment	3.	375.00

(Line 1 minus Line 2)

Payments should be made electronically.

**CORPORATION BUSINESS TAX
ESTIMATED PAYMENT WORKSHEET**

CBT-150S

**BEGINNING TAX YEAR 2016, YOU NEED TO PAY YOUR NEW JERSEY
CORPORATION BUSINESS TAX ELECTRONICALLY**

You need to pay the tax by one of these methods:

1. **Electronic Check or Credit Card:** Visit www.njtaxation.org and select "Make a Payment."
2. **Electronic Funds Transfer (EFT):** To register visit www.nj.gov/treasury/revenue/eft1.shtml

If you do not have access to the internet, call our Customer Service Center at 609-292-6400 to make a payment.

DO NOT CUT THIS PAGE – DO NOT MAIL – FOR REFERENCE ONLY

REV 02/16/22 PRO

Corporation Business Tax Statement of Estimated Tax Worksheet
CBT-150S

Due Date: 06/15/22 Voucher #: 2 Beginning 01/01/2022 and ending 12/31/2022
1030 2020
46-1657110 THEK

THE KIND GROUP, LLC
1808 BRIELLE AVE
ASBURY PARK NJ 07712

1. Amount of this installment	1.	375.00
2. Amount of overpayment credit (See instruction 5)	2.	0.00
3. Amount of this installment payment	3.	375.00
(Line 1 minus Line 2)		

Payments should be made electronically.

**CORPORATION BUSINESS TAX
ESTIMATED PAYMENT WORKSHEET**

CBT-150S

**BEGINNING TAX YEAR 2016, YOU NEED TO PAY YOUR NEW JERSEY
CORPORATION BUSINESS TAX ELECTRONICALLY**

You need to pay the tax by one of these methods:

1. **Electronic Check or Credit Card:** Visit www.njtaxation.org and select "Make a Payment."
2. **Electronic Funds Transfer (EFT):** To register visit www.nj.gov/treasury/revenue/eft1.shtml

If you do not have access to the internet, call our Customer Service Center at 609-292-6400 to make a payment.

DO NOT CUT THIS PAGE – DO NOT MAIL – FOR REFERENCE ONLY

REV 02/16/22 PRO

Corporation Business Tax Statement of Estimated Tax Worksheet
CBT-150S

Due Date: 09/15/22 Voucher #: 3 Beginning 01/01/2022 and ending 12/31/2022
1030 2020
46-1657110 THEK

THE KIND GROUP, LLC
1808 BRIELLE AVE
ASBURY PARK NJ 07712

1. Amount of this installment	1.	375.00
2. Amount of overpayment credit (See instruction 5)	2.	0.00
3. Amount of this installment payment	3.	375.00
(Line 1 minus Line 2)		

Payments should be made electronically.

**CORPORATION BUSINESS TAX
ESTIMATED PAYMENT WORKSHEET**

CBT-150S

**BEGINNING TAX YEAR 2016, YOU NEED TO PAY YOUR NEW JERSEY
CORPORATION BUSINESS TAX ELECTRONICALLY**

You need to pay the tax by one of these methods:

1. **Electronic Check or Credit Card:** Visit www.njtaxation.org and select "Make a Payment."
2. **Electronic Funds Transfer (EFT):** To register visit www.nj.gov/treasury/revenue/eft1.shtml

If you do not have access to the internet, call our Customer Service Center at 609-292-6400 to make a payment.

DO NOT CUT THIS PAGE – DO NOT MAIL – FOR REFERENCE ONLY

REV 02/16/22 PRO

Corporation Business Tax Statement of Estimated Tax Worksheet
CBT-150S

Due Date: 12/15/22 Voucher #: 4 Beginning 01/01/2022 and ending 12/31/2022
1030 2020
46-1657110 THEK

THE KIND GROUP, LLC
1808 BRIELLE AVE
ASBURY PARK NJ 07712

1. Amount of this installment	1.	375.00
2. Amount of overpayment credit (See instruction 5)	2.	0.00
3. Amount of this installment payment	3.	375.00
(Line 1 minus Line 2)		

Payments should be made electronically.

**2021
CBT-100S**

DO NOT MAIL THIS FORM

**New Jersey Corporation Business Tax Return
For Tax Years Ending On or After July 31, 2021 Through June 30, 2022**

Tax year beginning 01/01, 2021, and ending 12/31, 2021

The surtax enacted under P.L. 2018, c.48 does not apply to New Jersey S corporations.

FEDERAL EMPLOYER I.D. NUMBER 46-1657110	N.J. CORPORATION NUMBER 0400-5385-50	Date of NJ S Corporation election <u>01012016</u>
CORPORATION NAME THE KIND GROUP, LLC		State and date of incorporation <u>NJ 01012016</u>
MAILING ADDRESS 1808 BRIELLE AVE		Date authorized to do business in New Jersey <u>01012016</u>
CITY ASBURY PARK	STATE NJ	ZIP CODE 07712
Check applicable return type: <input type="checkbox"/> Initial <input type="checkbox"/> Amended Enter Amended code: <input type="checkbox"/> <input type="checkbox"/> If code 10, enter reason: _____		Federal business activity code <u>424990</u>
		Corporation books are in the care of <u>OWNER</u> at <u>1808 BRIELLE AVE, ASBURY PARK, NJ 07712</u>
		Phone Number (<u>888</u>) <u>330-2353</u>
		Check if applicable (see instructions): <input type="checkbox"/> Professional Corporation <input type="checkbox"/> Qualified Subchapter S Subsidiary <input type="checkbox"/> Claiming P.L. 86-272 Parent ID#: _____

1. Taxable net income subject to federal corporate income taxation from Schedule A, Part II, line 5 (if a net loss, enter zero).....	1.	0.
2. AMOUNT OF TAX – Multiply line 1 by the applicable tax rate (see instructions).....	2.	0.
3. Tax Credits (from Schedule A-3, Part I, line 28) (see instructions).....	3.	
4. TAX LIABILITY – Subtract line 3 from line 2 or enter the minimum tax from Schedule A-GR, whichever is greater (see instructions).....	4.	1,500.
5. Installment Payment (only applies if line 4 is \$375 or less – see instructions).....	5.	
6. Professional Corporation Fees (Schedule PC, Part II, line 7).....	6.	
7. TOTAL TAX AND PROFESSIONAL CORPORATION FEES (add lines 4, 5, and 6).....	7.	1,500.
8. a. Payments and Credits (see instructions).....	8a.	1,575.
b. Payments made by Partnerships on behalf of taxpayer (include copies of all NJK-1s).....	8b.	
c. Refundable Tax Credits (from Schedule A-3, Part II, line 5) (see instructions).....	8c.	
d. Total Payments and Credits – Add lines 8a, 8b, and 8c.....	8d.	1,575.
9. Balance of Tax Due – If line 8d is less than line 7, subtract line 8d from line 7.....	9.	
10. Pro Rata Share of S Corp Income for nonconsenting shareholders (from Schedule K, Part VII, line 6, column C or Schedule K Liquidated, Part VII, line 6 columns C plus E).....	10.	
11. Gross Income Tax paid on behalf of nonconsenting shareholders (see instructions).....	11.	
12. Penalty and Interest Due (see instructions).....	12.	65.
13. Total Balance Due – Add lines 9, 11, and 12.....	13.	
14. Amount Overpaid – If line 8d is greater than the sum of lines 7, 11, and 12, subtract lines 7, 11, and 12 from line 8d.....	14.	10.
15. Amount of line 14 to be Refunded.....	15.	10.
16. Amount of line 14 to be Credited to 2022 Tax Return.....	16.	
17. Amount of line 14 to be Credited to a Combined Group and tax year to which it is to be applied <input type="checkbox"/> 2021 or <input type="checkbox"/> 2022.....	17.	

CERTIFICATION OF INACTIVITY (See instructions)	If the corporation is inactive , page 1, the Annual General Questionnaire, and Schedules A (parts I and II), A-2, A-3, A-4, and A-GR must be completed. A corporate officer must sign and certify below: <input type="checkbox"/> By marking the check box to the left, I certify that the corporation did not conduct any business, did not have any income, receipts, or expenses, and did not own any assets during the entire period covered by the tax return.		
	(Date)	(Signature of Corporate Officer)	(Title)

SIGNATURE AND VERIFICATION (See instructions)	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules, forms, and statements, and to the best of my knowledge and belief, it is true, correct, and complete. I understand that pursuant to <u>N.J.S.A. 54:10A-14(a)</u> , I must include copies of the federal return(s), forms, and schedules with my New Jersey return. If prepared by a person other than the taxpayer, this declaration is based on all information of which the preparer has any knowledge.		
	(Date)	(Signature of Duly Authorized Officer of Taxpayer) <u>14 IMLAY LN</u>	(Title) <u>OWNER</u>
		<u>KEVIN GILMARTIN</u>	<u>FARMINGDALE NJ 07727</u>
	(Date)	(Signature of Individual Preparing Return)	(Address)
		<u>GILMARTIN CONSULTING 14 IMLAY LN</u>	<u>FARMINGDALE NJ 07727</u>
	(Name of Tax Preparer's Employer)	(Address)	(Employer's ID Number) <u>30-0870968</u>

NAME AS SHOWN ON RETURN
THE KIND GROUP, LLC

FEDERAL ID NUMBER
46-1657110

ANNUAL GENERAL QUESTIONNAIRE (See instructions)

All taxpayers must answer the following questions. Riders must be provided where necessary.

1. Type of business MANUFACTURING
Principal products handled MANUFACTURING
2. State the location of the actual seat of management or control of the corporation NJ
3. Did one or more other corporations own beneficially, or control, a majority of the stock of taxpayer corporation or did the same interests own beneficially, or control, a majority of the stock of taxpayer corporation and of one or more other corporations?
 Yes No
If yes, provide a rider indicating the name and FEIN of the controlled corporation, the name and FEIN of the controlling/parent corporation, and the percentage of stock owned or controlled.
4. These questions must be answered by corporations with a controlling interest in certain commercial property.
- a. During the period covered by the return, did the taxpayer acquire or dispose of directly or indirectly a controlling interest in certain commercial property?
 Yes – Answer question 4b below. No
- b. Was the CITT-1, *Controlling Interest Transfer Tax*, filed with the Division of Taxation?
 Yes. Provide a rider indicating the information and include a copy of the CITT-1.
 No. Provide a rider indicating the name and FEIN of the transferee, the name and FEIN of the transferor, and the assessed value of the property.
5. Does this corporation own any Qualified Subchapter S Subsidiaries (QSSS)?
 Yes No
If yes, provide a rider indicating the name, address, and FEIN of the subsidiary, whether the subsidiary made a New Jersey QSSS election, and whether the activities of the subsidiary are included in this return.
6. Did the taxpayer receive any deemed repatriation dividends reported under IRC §965 from a subsidiary in the taxpayer's federal tax year 2017 or 2018 for which the taxpayer files a New Jersey 2017, 2018, or 2019 tax return?
 Yes No
If yes, provide a rider indicating the name and FEIN of the subsidiary, the amount of deemed repatriation dividends, and indicate on which New Jersey return the income was included.
7. If the taxpayer is a unitary subsidiary of a combined group filing a New Jersey combined return from which the taxpayer is excluded, did the taxpayer distribute dividends or deemed dividends in the current tax year?
 Yes No
If yes, provide a rider indicating the name and FEIN of the entity to which the dividends were paid (deemed), the amount of dividends, and unitary ID number of the combined group.
8. Is the taxpayer an intangible holding company or is the taxpayer's income, directly or indirectly, from intangible property or related service activities that are deductible against the income of members of a combined group?
 Yes No
If yes, provide a rider indicating the names and ID numbers of the combined group or the related members and detail the taxpayer's income that is deductible against their income.
9. Is income from sources outside the United States included in taxable net income on Schedule A?
 Yes No NA
If yes, provide a rider indicating such items of gross income, the source, the deductions, and the amount of foreign taxes paid. Enter on Schedule A, Part I, line 37b, the difference between the net of such income and the amount of foreign taxes paid not previously deducted (include a rider).
10. Does the taxpayer have related parties or affiliates that file combined returns in New Jersey?
 Yes No
11. Is the taxpayer part of a group that files a New Jersey combined return but is excluded from the combined return?
 Yes No
If yes, name of the managerial member of the combined group: _____
12. Has the taxpayer or the preparer completing this return on the taxpayer's behalf taken any uncertain tax positions when filing this return or their federal tax return? For more information see Financial Accounting Standards Board (FASB) Accounting Standards Codification (ASC) 740-10, formerly FASB Interpretation No. 48 (FIN 48).
 Yes – Include a rider detailing the information. No
13. Does the taxpayer own or lease real or tangible property in New Jersey?
 Yes No
14. Does the taxpayer have payroll in New Jersey?
 Yes No

NAME AS SHOWN ON RETURN
THE KIND GROUP, LLC

FEDERAL ID NUMBER
46-1657110

ALL TAXPAYERS MUST COMPLETE THIS SCHEDULE

Schedule A COMPUTATION OF NEW JERSEY TAXABLE NET INCOME (SEE INSTRUCTIONS)

PART I - COMPUTATION OF ENTIRE NET INCOME

1.	Gross receipts or sales <u>6,070,017</u> . Less returns and allowances	1.	6,070,017.
2.	Less: Cost of goods sold (from Schedule A-2, line 8).....	2.	4,248,536.
3.	Gross profit - Subtract line 2 from line 1	3.	1,821,481.
4.	Net gain (loss) from Form 4797 (include Form 4797) (see instructions)	4.	
5.	Other income (loss) (include schedule).....	5.	
6.	Total Income (loss). Add lines 3 through 5.....	6.	1,821,481.
7.	Compensation of officers (from Schedule F).....	7.	
8.	Salaries and wages <u>82,126</u> . Less jobs credit	8.	82,126.
9.	Repairs	9.	5,514.
10.	Bad debts	10.	78,836.
11.	Rents	11.	92,829.
12.	Taxes	12.	9,033.
13.	Interest.....	13.	
14a.	Depreciation	14a.	
14b.	Depreciation claimed on Schedule A-2 and elsewhere on return.....	14b.	
14c.	Subtract line 14b from line 14a.....	14c.	
15.	Depletion (do not deduct oil and gas depletion)	15.	
16.	Advertising.....	16.	551,344.
17.	Pension, profit-sharing, etc., plans	17.	
18.	Employee benefit programs.....	18.	
19.	Other deductions (include schedule)..... <u>See Statement</u>	19.	542,112.
20.	Total deductions (add lines 7 through 19).....	20.	1,361,794.
21.	Ordinary income (loss) from trade or business activities. Subtract line 20 from line 6 (see instructions)	21.	459,687.
22.	a. Gross income from all rental activities.....	22a.	
	b. Expenses related to the above rental activities (include schedule).....	22b.	
	c. Net income (loss) from all rental activities. Subtract line 22b from 22a.....	22c.	
23.	Portfolio income (loss):		
	a. Interest income	23a.	
	b. Dividend income	23b.	
	c. Royalty income	23c.	
	d. Capital gain net income (include Schedule D (Form 1120-S))	23d.	
	e. Other portfolio income (loss) (include schedule)	23e.	
24.	Net gain (loss) under section 1231 (include federal Form 4797).....	24.	
25.	Other income (loss) (include schedule)	25.	
26.	Section 179 expense deduction (include federal Form 4562) (see instructions).....	26.	
27.	Deductions related to portfolio income (loss)	27.	
28.	Other deductions (include schedule).....	28.	
29.	Add lines 21 through 28.....	29.	459,687.
30.	Charitable contributions (limited to 10% of line 29).....	30.	
31.	Taxable income before net operating loss and special deductions. Subtract line 30 from line 29. (see instructions).....	31.	459,687.

NAME AS SHOWN ON RETURN THE KIND GROUP, LLC	FEDERAL ID NUMBER 46-1657110
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Schedule A COMPUTATION OF NEW JERSEY TAXABLE NET INCOME (SEE INSTRUCTIONS)

32. Taxable income before net operating loss and special deductions from page 3, line 31	32.	459,687.
33. Interest on federal, state, municipal, and other obligations not included above (see instructions).....	33.	
34. New Jersey State and other states' income taxes deducted above (see instructions).....	34.	
35. Taxes paid by the corporation on behalf of the shareholder (see instructions)	35.	
36. a. Depreciation modification being added to income (from Schedule S).....	36a.	
b. Depreciation modification being subtracted from income (from Schedule S).....	36b.	
37. a. Deduction for IRC Section 78 Gross-up not deducted at line 43 below	37a.	
b. Other deductions and additions. Explain on separate rider (see instructions)	37b.	
c. Related party interest addback (Schedule G, Part I).....	37c.	
d. Related party intangibles expenses and costs addback (Schedule G, Part II).....	37d.	
e. Add back any other federally exempt income not reported elsewhere on Schedule A (see instructions)	37e.	
38. Entire net income before net operating loss deduction and dividend exclusion (net lines 32 through 37(e)).....	38.	459,687.
39. Allocation factor from Schedule J (if all receipts were derived from only New Jersey sources, enter 1.000000).....	39.	1.000000
40. Allocated Entire Net Income before net operating loss deductions and dividend exclusion - Multiply line 38 by line 39 and enter the result here (if zero or less, enter zero on line 45)	40.	459,687.
41. Deduction for Current Converted Net Operation Losses (from Form 500S) (Amount entered cannot be more than amount on line 40.).....	41.	
42. Allocated Entire Net Income before allocated dividend exclusion - Subtract line 41 from line 40 (if zero or less, enter zero here and on line 45)	42.	459,687.
43. Allocated Dividend Exclusion (from Schedule R, line 13).....	43.	
44. Reserved for future use.....	44.	
45. Allocated Entire Net Income - Subtract line 43 from line 42.....	45.	459,687.

PART II (See instructions)

1. Entire net income that is subject to federal corporate income taxation (see instructions).....	1.	
2. Allocation factor from Schedule J (if all receipts were derived from only New Jersey sources, enter 1.000000).....	2.	1.000000
3. Allocated Entire Net Income before net operating loss deductions multiply line 1 by line 2.....	3.	0.
4. Deduction for Available Converted Net Operation Losses (from Form 500S) (Amount entered cannot be more than amount on line 3.).....	4.	
5. Taxable Net Income subject to federal corporate income taxation (carry to page 1, line 1, ONLY if amount is more than zero) - Subtract line 4 from line 3	5.	0.

Schedule A-2 COST OF GOODS SOLD (See instructions) All data must match amounts reported on federal Form 1125-A of the federal pro forma or federal return, whichever is applicable.

1. Inventory at beginning of year	1.	402,012.
2. Purchases.....	2.	3,588,224.
3. Cost of labor	3.	
4. Additional section 263A costs.....	4.	794,761.
5. Other costs (include schedule)..... See Statement	5.	251,715.
6. Total - Add lines 1 through 5	6.	5,036,712.
7. Inventory at end of year.....	7.	788,176.
8. Cost of goods sold - Subtract line 7 from line 6. Enter here and on Schedule A, Part I, line 2	8.	4,248,536.

NAME AS SHOWN ON RETURN
THE KIND GROUP, LLC

FEDERAL ID NUMBER
46-1657110

Schedule A-3 SUMMARY OF TAX CREDITS (See instructions)

PART I – Tax Credits Used Against Liability

1. New Jobs Investment Tax Credit from Form 304	1.	
2. Angel Investor Tax Credit from Form 321	2.	
3. Business Employment Incentive Program Tax Credit from Form 324	3.	
4. EITHER: a. Urban Enterprise Zone Employee Tax Credit from Form 300	4.	
OR b. Urban Enterprise Zone Investment Tax Credit from Form 301		
5. Redevelopment Authority Project Tax Credit from Form 302	5.	
6. Manufacturing Equipment and Employment Investment Tax Credit from Form 305	6.	
7. Research and Development Tax Credit from Form 306	7.	
8. Neighborhood Revitalization State Tax Credit from Form 311	8.	
9. Effluent Equipment Tax Credit from Form 312	9.	
10. Economic Recovery Tax Credit from Form 313	10.	
11. AMA Tax Credit from Form 315	11.	
12. Business Retention and Relocation Tax Credit from Form 316	12.	
13. Sheltered Workshop Tax Credit from Form 317	13.	
14. Film Production Tax Credit from Form 318	14.	
15. Urban Transit Hub Tax Credit from Form 319	15.	
16. Grow NJ Tax Credit from Form 320	16.	
17. Wind Energy Facility Tax Credit from Form 322	17.	
18. Residential Economic Redevelopment and Growth Tax Credit from Form 323	18.	
19. Public Infrastructure Tax Credit from Form 325	19.	
20. Reserved for future use	20.	
21. Film and Digital Media Tax Credit from Form 327	21.	
22. Tax Credit for Employers of Employees With Impairments from Form 328	22.	
23. Pass-Through Business Alternative Income Tax Credit from Form 329	23.	
24. Apprenticeship Program Tax Credit from Form 330	24.	
25. Tax Credit for Employer of Organ/Bone Marrow Donor from Form 331	25.	
26. Tiered Subsidiary Dividend Pyramid Tax Credit from Form 332	26.	
27. Other Tax Credit (see instructions)	27.	
28. Total tax credits – Add lines 1 through 27. Enter here and on page 1, line 3	28.	

PART II – Refundable Tax Credits

1. Refundable portion of New Jobs Investment Tax Credit from Form 304	1.	
2. Refundable portion of Angel Investor Tax Credit from Form 321	2.	
3. Refundable portion of Business Employment Incentive Program Tax Credit from Form 324	3.	
4. Other Tax Credit to be refunded	4.	
5. Total amount of tax credits to be refunded. Enter here and on page 1, line 8c	5.	

NAME AS SHOWN ON RETURN THE KIND GROUP, LLC	FEDERAL ID NUMBER 46-1657110
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ALL CORPORATIONS MUST COMPLETE THIS SCHEDULE AND SUBMIT IT WITH THEIR CBT-100S TAX RETURN

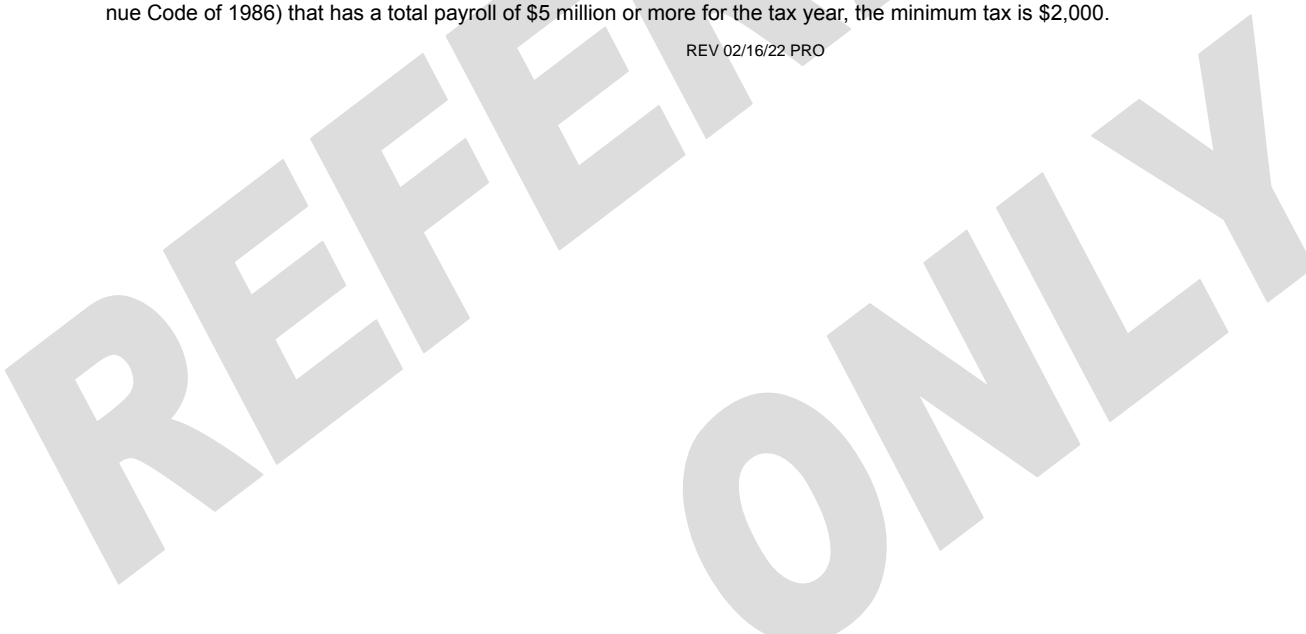
Schedule A-4 SUMMARY SCHEDULE (See instructions)

Interest and Intangible Costs and Expenses			Dividend Exclusion Information		
1. Schedule G, Part I, line b.....	1.	0.	7. Schedule R, line 7	7.	0.
2. Schedule G, Part II, line b.....	2.	0.	8. Schedule R, line 9	8.	0.
Schedule J Information			Schedule A-GR Information		
3. Schedule J, line 1f.....	3.		9. Schedule A-GR, line 6.....	9.	6,000,000.
4. Schedule J, line 1g.....	4.		Schedule P Information		
5. Schedule J, line 1h.....	5.		10. Schedule P, Part III, line 1	10.	0.
			11. Schedule P, Part III, line 2.....	11.	0.
Net Operational Income Information					
6. Schedule O, Part III, line 31.....	6.	0.			

Schedule A-GR COMPUTATION OF NEW JERSEY GROSS RECEIPTS AND MINIMUM TAX (See instr.)
Complete this schedule only if the amount reported on page 1, line 2 is less than \$1,500. Members of an affiliated or controlled group, see note below.

1. Enter sales of tangible personal property shipped to points within New Jersey.....	1.	6,000,000.
2. Enter services if the benefit of the service is received in New Jersey	2.	
3. Enter rentals of property situated in New Jersey.....	3.	
4. Enter royalties for the use in New Jersey of patents, copyrights, and trademarks.....	4.	
5. Enter all other business receipts earned in New Jersey.....	5.	
6. Total New Jersey Gross Receipts.....	6.	6,000,000.
7. Enter minimum tax per instructions. Enter here and on page 1, line 4.....	7.	1,500.

NOTE: If a taxpayer is filing a separate return and is a member of an affiliated or controlled group (as per sections 1504 or 1563 of the Internal Revenue Code of 1986) that has a total payroll of \$5 million or more for the tax year, the minimum tax is \$2,000.



NAME AS SHOWN ON RETURN THE KIND GROUP, LLC	FEDERAL ID NUMBER 46-1657110
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Schedule F CORPORATE OFFICERS – GENERAL INFORMATION AND COMPENSATION (See instr.)
Data must match amounts reported on federal Form 1125-E of the federal pro forma or federal return, whichever is applicable.

(1) Name and Current Address of Officer	(2) Social Security Number	(3) Title	(4) Dates Employed in this position		(5) Percentage of Corporation Stock Owned		(6) Amount of Compensation
			From	To	Common	Preferred	
ANTHONY GAGLIARDI 1808 Brielle Ave Asbury Park NJ 07712	139-66-7936	OWNER	01/01/18	Present	100.0000		0.
a. Total compensation of officers.....							0.
b. Less: Compensation of officers claimed elsewhere on the return.....							
c. Balance of compensation of officers (include here and on Schedule A, Part I, line 7).....							0.

Schedule G – Part I INTEREST (See Instructions)

1. Was interest paid, accrued, or incurred to a related member(s) deducted from entire net income?

Yes. Fill out the following schedule. No.

Name of Related Member	Federal ID Number	Relationship to Taxpayer	Amounts
a. Total amount of interest deducted.....			
b. Subtract: Exceptions (see instructions).....			
c. Related party interest expenses disallowed for New Jersey purposes (include here and on Schedule A, Part I, line 37c).....			

Schedule G – Part II INTEREST EXPENSES AND COSTS AND INTANGIBLE EXPENSES AND COSTS (See instr.)

1. Were intangible expenses and costs, including intangible interest expenses and costs, paid, accrued, or incurred to related members, deducted from entire net income? Yes. Fill out the following schedule. No.

Name of Related Member	Federal ID Number	Relationship to Taxpayer	Type of Intangible Expense Deducted	Exception Amounts
a. Total amount of intangible expenses and costs deducted.....				
b. Subtract: Exceptions (see instructions).....				
c. Related party intangible expenses and costs addback (include here and on Schedule A, Part I, line 37d).....				

NOTE: For tax years beginning on or after January 1, 2018, the treaty exceptions have been limited pursuant to P.L. 2018, c. 48. See Schedule G-2 instructions for more information.

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Schedule H

TAXES (See instructions)

Include all taxes paid or accrued during the accounting period wherever deducted on Schedule A.

	(A) Corporation Franchise Business Taxes*	(B) Corporation Business/ Occupancy Taxes*	(C) Property Taxes	(D) U.C.C. or Payroll Taxes	(E) Other Taxes/ Licenses (include schedule)	(F) Total
1. New Jersey Taxes				8,814.		8,814.
2. Other States & U.S. Possessions						
3. City and Local Taxes						
4. Taxes Paid to Foreign Countries						
5. Total				8,814.		8,814.
6. Combine lines 5(a) and 5(b)						
7. Sales & Use Taxes Paid by a Utility Vendor						
8. Add lines 6 and 7						
9. Federal Taxes				8,814.	0.	8,814.
10. Total (Combine line 5 and line 9)				17,628.	0.	17,628.

* Include on line 4 taxes paid or accrued to any foreign country, state, province, territory, or subdivision thereof.

Schedule J

COMPUTATION OF ALLOCATION FACTOR (See instructions)

All taxpayers, regardless of entire net income reported on Schedule A, Part I, line 38, Form CBT-100S, must complete Schedule J. This schedule can be omitted if the taxpayer does not have receipts outside New Jersey, in which case the allocation factor will be 100% (1.000000).

For tax years ending on and after July 31, 2019, services are sourced based on market sourcing, not cost of performance.

1. Receipts:	AMOUNTS (omit cents)	
a. From sales of tangible personal property shipped to points within New Jersey.....	a.	
b. From services if the benefit of the service is received in New Jersey	b.	
c. From rentals of property situated in New Jersey	c.	
d. From royalties for the use in New Jersey of patents, copyrights, and trademarks	d.	
e. All other business receipts earned in New Jersey	e.	
f. Total New Jersey receipts (Total of lines 1a to 1e, inclusive).....	f.	
g. Total receipts from all sales, services, rentals, royalties, and other business transactions everywhere.....	g.	
h. Allocation Factor (Percentage in New Jersey (line 1f) divided by line 1g). Carry the fraction 6 decimal places. Do not express as a percent. Include here and on Schedule A, Part I, line 39, and Schedule A, Part II, line 2.....	h.	

NAME AS SHOWN ON RETURN
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Schedule K SHAREHOLDERS' SHARES OF INCOME, DEDUCTIONS, ETC. (See instructions)

PART I

1. Total number of shareholders.....	2
2. Total number of nonresident shareholders.....	1
3. a. Total number of nonconsenting shareholders.....	0
b. Percentage of stock owned	0.00000 %

PART II NEW JERSEY S CORPORATION INCOME (LOSS)

1. Amount from Schedule A, Part I, line 21.....	1.	459,687.
2. Add the following amounts from federal 1120-S, Schedule K		
a. Net income (loss) from rental real estate activities..... a.		
b. Net income (loss) from other rental activities..... b.		
c. Interest income..... c.		
d. Dividend income..... d.		
e. Royalty income..... e.		
f. Net short-term capital gain (loss)..... f.		
g. Net long-term capital gain (loss)..... g.		
h. Other portfolio income (loss)..... h.		
i. Net gain (loss) under sections 1231 and/or 179..... i.		
j. Other income..... j.		
k. Tax-exempt interest income..... k.		
l. Other tax-exempt income..... l.		
Total of 2a through 2l.....	2.	
3. Add line 1 plus line 2.....	3.	459,687.
4. Additions:		
a. Interest income on state and municipal bonds other than New Jersey..... a.		
b. New Jersey State and other states' income taxes deducted in arriving at line 3 including taxes paid on behalf of the shareholder..... b.		
c. All expenses included in line 3 to generate tax-exempt income..... c.		
d. Losses included in line 3 from U.S. Treasury and other obligations pursuant to N.J.S.A. 54A:6-14 and 6-14.1..... d.		
e. Other additions..... e.		
Total of 4a through 4e.....	4.	
5. Add line 3 plus line 4.....	5.	459,687.
6. Subtractions:		
a. U.S. Treasury and other interest income included in line 3 from investments exempt under N.J.S.A. 54A:6-14 and 6-14.1..... a.		
b. Gains included in line 3 from U.S. Treasury and other obligations pursuant to N.J.S.A. 54A:6-14 and 6-14.1..... b.		
c. IRC Section 179 expense from federal Schedule K..... c.		
d. Federal 50% of business meal expenses and 100% of entertainment expenses..... d.		20,691.
e. Charitable contributions from federal Schedule K..... e.		
f. Other subtractions..... f.		
Total of 6a through 6f.....	6.	20,691.
7. New Jersey depreciation adjustment from Gross Income Tax Depreciation Adjustment Worksheet GIT-DEP.....	7.	
8. New Jersey S Corporation Income (Loss) - Line 5 minus line 6 plus or minus line 7.....	8.	438,996.

PART III ALLOCATION OF S CORPORATION INCOME (LOSS)

1. New Jersey S Corporation Income (Loss) (Part II, line 8).....	1.	438,996.
a. Current period nonoperational activity (Schedule O, Part I, line 34).....	1a.	0.
b. Nonunitary partnership income/loss (from Schedule P-1, Part II, line 4).....	1b.	
2. Total operational income (loss) (line 1 minus lines 1a and 1b).....	2.	438,996.
3. Allocation factor (Schedule J, line 1h).....	3.	1.000000
4. Allocated operational income (loss) (line 3 x line 2).....	4.	438,996.
5. Nonoperational income (loss) (Schedule O, Part III, line 31).....	5.	0.
a. Nonunitary partnership income (from Schedule P-1, Part II, line 5).....	5a.	
6. Total allocated income (loss) (line 4 plus lines 5 and 5a).....	6.	438,996.
7. New Jersey CBT reported on CBT-100S (Page 1, line 2 minus line 3).....	7.	0.
8. New Jersey allocated income (loss) (line 6 minus line 7).....	8.	438,996.
9. Income (loss) not allocated to New Jersey (line 1 minus line 6).....	9.	0.

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PART IV – A ANALYSIS OF NEW JERSEY ACCUMULATED ADJUSTMENTS ACCOUNT

	(A) New Jersey AAA	(B) Non New Jersey AAA	(C) Total of Columns (A) & (B)
1. Beginning balance.....	314,266.		314,266.
2. Net pro rata share of S corporation income.....	459,687.	0.	459,687.
3. Other income/loss.....			
4. Other reductions (include schedule).....			
5. Total lines 1-4.....	773,953.	0.	773,953.
6. Distributions.....	300,000.	0.	300,000.
7. Ending balance (line 5 minus line 6).....	473,953.	0.	473,953.

PART IV – B NEW JERSEY EARNINGS AND PROFITS

1. Beginning balance.....	1.	
2. Additions/Adjustments.....	2.	
3. Dividends paid.....	3.	
4. Ending balance (line 1 plus line 2 minus line 3).....	4.	

PART V SUMMARY OF RESIDENT SHAREHOLDERS' PRO RATA SHARES

(A) Name	(B) Social Security Number	(C) Pro Rata Share Income/Loss	(D) Distributions
1. ANTHONY GAGLIARDI	139-66-7936	159,687.	0.
2.			
3.			
4.			
5.			
6. Total.....		159,687.	0.

PART VI SUMMARY OF CONSENTING NONRESIDENT SHAREHOLDERS' PRO RATA SHARES

(A) Name	(B) Social Security Number	Pro Rata Share Income/Loss		(E) Distributions
		(C) Allocated to NJ	(D) Not Allocated to NJ	
1. JOSEPH VECCHIONE	139-80-0646	300,000.	0.	300,000.
2.				
3.				
4.				
5.				
6. Total.....		300,000.	0.	300,000.

PART VII SUMMARY OF NONCONSENTING SHAREHOLDERS' PRO RATA SHARES

(A) Name	(B) Social Security Number	Pro Rata Share Income/Loss		(E) Distributions	(F) Gross Income Tax Paid
		(C) Allocated to NJ	(D) Not Allocated to NJ		
1.					
2.					
3.					
4.					
5.					
6. Total.....					

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Schedule K Liquidated S CORPORATIONS SHAREHOLDERS' SHARES OF INCOME, DEDUCTIONS, ETC. (See instructions)

PART I

1. Total number of shareholders.....
2. Total number of nonresident shareholders.....
3. a. Total number of nonconsenting shareholders.....
- b. Percentage of stock owned %
4. Enter date the assets were fully disposed..... / /
5. Enter date the shareholders' stock was fully disposed ... / /

PART II NJ S CORPORATION INCOME(LOSS) WORKSHEET UPON COMPLETE LIQUIDATION

	Column A S Corp Income Prior to Disposition of Assets	Column B Income, Gains/Losses from Disposition of Assets in Complete Liquidation
1. Amount from Schedule A, Part I, line 21.....	1.	
2. Add the following amounts from federal 1120-S, Schedule K		
a. Net income (loss) from rental real estate activities	2a.	
b. Net income (loss) from other rental activities	2b.	
c. Interest income.....	2c.	
d. Dividend income.....	2d.	
e. Royalty income.....	2e.	
f. Net short-term capital gain (loss)	2f.	
g. Net long-term capital gain (loss)	2g.	
h. Other portfolio income (loss).....	2h.	
i. Net gain (loss) under sections 1231 and/or 179	2i.	
j. Other income.....	2j.	
k. Tax-exempt interest income	2k.	
l. Other tax-exempt income.....	2l.	
3. Add line 1 plus lines 2a through 2l.....	3.	
4. Additions:		
a. Interest income on state and municipal bonds other than New Jersey.....	4a.	
b. New Jersey State and other states' income taxes deducted in arriving at line 3 including taxes paid on behalf of the shareholder	4b.	
c. All expenses included in line 3 to generate tax-exempt income	4c.	
d. Losses included in line 3 from U.S. Treasury and other obligations pursuant to N.J.S.A. 54A:6-14 and 6-14.1	4d.	
e. Other additions.....	4e.	
5. Add line 3 plus lines 4a through 4e	5.	
6. Subtractions:		
a. U.S. Treasury and other interest income included in line 3 from investments exempt under N.J.S.A. 54A:6-14 and 6-14.1	6a.	
b. Gains included in line 3 from U.S. Treasury and other obligations pursuant to N.J.S.A. 54A:6-14 and 6-14.1	6b.	
c. IRC Section 179 expense from federal Schedule K.....	6c.	
d. Federal 50% of business meal expenses and 100% of entertainment expenses.....	6d.	
e. Charitable contributions from federal Schedule K.....	6e.	
f. Other subtractions.....	6f.	
Total of 6a through 6f.....	6.	
7. New Jersey depreciation adjustment from Gross Income Tax Depreciation Adjustment Worksheet GIT-DEP	7.	
8. Total Income (Loss) – Line 5 minus line 6 plus or minus line 7	8.	

PART III ALLOCATION OF INCOME (LOSS)

1. Income from Line 8, Part II column A and column B	1.	
a. Current period nonoperational activity (Schedule O, Part I, line 34).....	1a.	
b. Nonunitary partnership income/loss (from Schedule P-1, Part II, line 4)	1b.	
2. Total operational income (loss) (line 1 minus lines 1a and 1b).....	2.	
3. Allocation factor (Schedule J, line 1h).....	3.	
4. Allocated operational income (loss) (line 3 x line 2).....	4.	
5. Nonoperational income (loss) (Schedule O, Part III, line 31)	5.	
a. Nonunitary partnership income (from Schedule P-1, Part II, line 5)	5a.	
6. Total allocated income (loss) (line 4 plus lines 5 and 5a).....	6.	
7. New Jersey CBT reported on CBT-100S (Page 1, line 2 minus line 3).....	7.	
8. New Jersey allocated income (loss) (line 6 minus line 7).....	8.	
9. Income (loss) not allocated to New Jersey (line 1 minus line 6).....	9.	

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Schedule K Liquidated S CORPORATIONS SHAREHOLDERS' SHARES OF INCOME, DEDUCTIONS, ETC. (See instructions)

PART IV – A ANALYSIS OF NEW JERSEY ACCUMULATED ADJUSTMENTS ACCOUNT

	(A) New Jersey AAA	(B) Non New Jersey AAA	(C) Total of Columns (A) & (B)
1. Beginning balance.....			
2. Net pro rata share of S corporation income			
3. Other income/loss			
4. Other reductions (include schedule)			
5. Total lines 1-4.....			
6. Distributions			
7. Ending balance (line 5 minus line 6).....			

PART IV – B NEW JERSEY EARNINGS AND PROFITS

1. Beginning balance.....	1.	
2. Additions/Adjustments.....	2.	
3. Dividends paid.....	3.	
4. Ending balance (line 1 plus line 2 minus line 3).....	4.	

REV 02/16/22 PRO

REFERENCED ONLY

Schedule K Liquidated S CORPORATIONS SHAREHOLDERS' SHARES OF INCOME, DEDUCTIONS, ETC. (See instructions)

NAME AS SHOWN ON RETURN

PART V SUMMARY OF RESIDENT SHAREHOLDERS' PRO RATA SHARES

(A) Name	(B) Social Security Number	(C) Pro Rata Share Income/Loss	(D) Gain/Loss of Disposition of Assets	(E) Distributions
1.				
2.				
3.				
4.				
5.				
6. Total.....				

PART VI SUMMARY OF CONSENTING NON-RESIDENT SHAREHOLDERS' PRO RATA SHARES

(A) Name	(B) Social Security Number	Pro Rata Share Income/Loss		Gain/Loss of Disposition of Assets		(G) Distributions
		(C) Allocated to NJ	(D) Not Allocated to NJ	(E) Allocated to NJ	(F) Not Allocated to NJ	
1.						
2.						
3.						
4.						
5.						
6. Total.....						

FEDERAL ID NUMBER

PART VII SUMMARY OF NONCONSENTING SHAREHOLDERS' PRO RATA SHARES

(A) Name	(B) Social Security Number	Pro Rata Share Income/Loss		Gain/Loss of Disposition of Assets		(G) Distributions	(H) Gross Income Tax Paid
		(C) Allocated to NJ	(D) Not Allocated to NJ	(E) Allocated to NJ	(F) Not Allocated to NJ		
1.							
2.							
3.							
4.							
5.							
6. Total.....							

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NAME AS SHOWN ON RETURN THE KIND GROUP, LLC	FEDERAL ID NUMBER 46-1657110
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Schedule P

SUBSIDIARY INVESTMENT ANALYSIS (See instructions)

NOTE: Taxpayers must hold 80% of the combined voting power of all classes of stock entitled to vote and at least 80% of the total number of shares of all other classes of stock, except non-voting stock which is limited and preferred as to dividends, for each subsidiary. Do not include advances to subsidiaries in book value. **Do not include any previously taxed dividends.** Instead, report those amounts on Schedule PT.

PART I DOMESTIC SUBSIDIARY

Federal ID Number	(1) Name of Subsidiary	(2) Percentage of Interest		(3) Book Value	(4) Domestic Dividend Income (as reported on Schedule A)
		(a) Voting	(b) Non-Voting		
Totals					

PART II FOREIGN SUBSIDIARY

Federal ID Number	(1) Name of Subsidiary	(2) Percentage of Interest		(3) Book Value	(4) Foreign Dividend Income (as reported on Schedule A)
		(a) Voting	(b) Non-Voting		
Totals					

PART III TOTAL OF 80% OR MORE OWNED SUBSIDIARY DIVIDENDS

1. Enter total from Part I, column 4 (include here and on Schedule A-4)	1.
2. Enter total from Part II, column 4 (include here and on Schedule A-4)	2.
3. Total dividends. Add lines 1 and 2 (include here and on Schedule R)	3.

Schedule R

DIVIDEND EXCLUSION (See instructions)

1. Enter the total dividends and deemed dividends reported on Schedule A	1.	
2. Enter amount from Schedule PT, Section D, line 3	2.	
3. Dividends eligible for dividend exclusion – Subtract line 2 from line 1	3.	
4. Enter amount from Schedule P, Part III, line 3.....	4.	
5. Multiply line 4 by .95.....	5.	
6. Subtract line 4 from line 3.....	6.	
7. Dividend income from investments where taxpayer owns less than 50% of voting stock and less than 50% of all other classes of stock (do not incl. amounts subtracted on line 2)	7.	
8. Subtract line 7 from line 6.....	8.	
9. Multiply line 8 by 50%.....	9.	
10. Reserved for future use.....	10.	
11. DIVIDEND EXCLUSION: Add lines 5 and 9.....	11.	
12. Allocation factor from current Schedule J (if all receipts are derived from only NJ sources, enter 1.000000).....	12.	1.000000
13. ALLOCATED DIVIDEND EXCLUSION: Multiply line 11 by line 12 (include here and on Schedule A, Part I, line 43) ...	13.	

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Schedule S – Part I DEPRECIATION AND SAFE HARBOR LEASING (See instructions)

1. IRC § 179 Deduction	1.
2. Special Depreciation Allowance – for qualified property placed in service during the tax year	2.
3. MACRS.....	3.
4. ACRS.....	4.
5. Other Depreciation	5.
6. Listed Property	6.
7. Total depreciation claimed in arriving at Schedule A, Part I, line 28	7.

Include Federal Form 4562 and Federal Depreciation Worksheet

Modification at Schedule A, Part I, line 32 – Depreciation and Certain Safe Harbor Lease Transactions

Additions

8. Amounts from lines 3, 4, 5, and 6 above	8.
9. Special Depreciation Allowance from line 2 above.....	9.
10. Distributive share of the special depreciation allowance from a partnership.....	10.
11. Distributive share of ACRS, MACRS, and other depreciation from a partnership.....	11.
12. Deductions on federal return resulting from an election made pursuant to IRC § 168(f)(8) exclusive of elections made with respect to mass commuting vehicles	
a. Interest	12a.
b. Rent.....	12b.
c. Amortization of Transactional Costs.....	12c.
d. Other Deductions	12d.
13. IRC § 179 depreciation in excess of New Jersey allowable deduction	13.
14. Other additions (include an explanation/reconciliation).....	14.
15. Total lines 8 through 14	15.

Deductions

16. New Jersey depreciation	16.
17. Recomputed depreciation attributable to distributive share of recovery property from a partnership	17.
18. Any income included in the return with respect to property solely as a result of an IRC § 168(f)(8) election ..	18.
19. The lessee/user should enter the amount of depreciation that would have been allowable under the Internal Revenue Code on December 31, 1980, had there been no safe harbor lease election	19.
20. Excess of accumulated ACRS, MACRS, or bonus depreciation over accumulated New Jersey depreciation on physical disposal of recovery property (include computations)	20.
21. Other deductions (include an explanation/reconciliation).....	21.
22. Total lines 16 through 21	22.
23. ADJUSTMENT – Subtract line 22 from line 15 and enter the result. (If line 23 is positive, enter at Schedule A, Part I, line 36a. If line 23 is negative, enter as a positive number at Schedule A, Part I, line 36b.).....	23.

Schedule S – Part II NEW JERSEY DEPRECIATION FOR GAS, ELECTRIC, AND GAS AND ELECTRIC PUBLIC UTILITIES (See instructions)

1. Total depreciation claimed in arriving at Schedule A, Part I, line 21	1.
2. Federal depreciation for assets placed in service after January 1, 1998	2.
3. Net – Subtract line 2 from line 1	3.
4. New Jersey depreciation allowable on the Single Asset Account (Assets placed in service prior to January 1, 1998)	
a. Total adjusted federal depreciable basis as of December 31, 1997.....	4a.
b. Excess book depreciable basis over federal tax basis as of December 31, 1997	4b.
c. Less accumulated federal basis for all Single Asset Account property sold, retired, or disposed of to date.	4c.
d. Total (line 4a plus line 4b less line 4c).....	4d.
5. New Jersey Depreciation – Divide line 4d by 30	
6. New Jersey Adjustment	
a. Depreciation adjustment for assets placed in service prior to Jan. 1, 1998 – Subtract line 5 from line 3 ..	6a.
b. Special bonus depreciation adjustment from Schedule S, Part I, line 23 (see instructions)	6b.
7. Total Adjustment – Add lines 6a and 6b and enter the result. (If line 7 is positive, enter at Schedule A, Part I, line 36a. If line 7 is negative, enter as a positive number at Schedule A, Part I, line 36b.).....	7.

**SCHEDULE
NJ-K-1**
(Form CBT-100S)
2021

**State of New Jersey
Division of Taxation
Shareholder's Share of Income/Loss**

For Calendar Year 2021, or tax year beginning _____, _____ and ending _____, _____

Shareholder's identifying number 139-66-7936	Federal employer identification number 46-1657110
Shareholder's name, address, and ZIP Code ANTHONY GAGLIARDI 421 W. LINCOLN AVE OAKHURST NJ 07755	Corporation's name, address, and ZIP Code THE KIND GROUP, LLC 1808 BRIELLE AVE ASBURY PARK NJ 07712

See instructions and reverse side

Part I

- Shareholder's percentage of stock ownership for tax year 99.00000%
- Shareholder resident nonresident
- Shareholder consenting nonconsenting
- Check applicable box: Final NJ-K-1 Amended NJ-K-1
- Date the shareholder's stock was fully disposed..... _____

Part II

- S Income/Loss allocated to NJ 159,687.
- S Income/Loss not allocated to NJ 0.
- Pro rata share of S Corporation Income/Loss (line 1 plus line 2).... 159,687.
- Gain/Loss on disposition of assets allocated to NJ
- Gain/Loss on disposition of assets not allocated to NJ
- Total Gain/Loss from disposition of assets (line 4 plus line 5).....
- Total payments made on behalf of shareholder.....
- Distributions..... 0.

Shareholder: Follow the reporting instructions contained in your NJ Income Tax return packet and in publication GIT-9S, *Income From S Corporations*.

This schedule must be included with your NJ Income Tax return.

Part III Shareholder's NJ Accumulated Adjustments Account

	New Jersey AAA	Non New Jersey AAA
1. Beginning balance	314,266.	
2. Income/Loss	159,687.	
3. Other Income/Loss		
4. Other reductions		
5. Total lines 1-4	473,953.	
6. Distributions.....	0.	
7. Ending Balance (line 5 minus line 6)	473,953.	

Part IV Shareholder's NJ Earnings and Profits Account

- Beginning balance
- Additions/Adjustments
- Dividends received
- Ending balance (line 1 plus line 2 minus line 3)

Part V

- Interest paid to shareholder (per 1099-INT)
- Indebtedness:
 - From corporation to shareholder:
 - From shareholder to corporation:
- Shareholder's HEZ deduction:

INSTRUCTIONS FOR SCHEDULE NJ-K-1

**For additional information see publication GIT-9S, *Income From S Corporations*
(Available on the Division's [website](#))**

PART I

- Line 1 Shareholder's percentage of stock ownership as reported on federal 1120-S.
- Line 2 Indicate shareholder's residency status at year's end.
- Line 3 Indicate whether shareholder is a consenting or nonconsenting shareholder.
- Line 4 If applicable, indicate if this schedule is a final or amended NJ-K-1.
- Line 5 Enter date shareholder received final distribution (cash and/or property).

PART II

- Line 1 Enter shareholder's share of New Jersey allocated S corporation income/loss from Part III, line 8 of Schedule K or from Part III, line 8, column A of Schedule K Liquidated.
- New Jersey S corporations that claim a credit for taxes paid to other jurisdictions in accordance with N.J.A.C. 18:7-8.3 will report 100% of the shareholder's net pro rata share as allocated to New Jersey.
- Line 2 Enter shareholder's share of S corporation income/loss not allocated to New Jersey from Part III, line 9 of Schedule K or from Part III, line 9, column A of Schedule K Liquidated.
- Line 4 Enter shareholder's share of New Jersey allocated income, gains/losses from disposition of assets from Part III, line 8, column B of Schedule K Liquidated.
- Line 5 Enter shareholder's share of income, gains/losses from disposition of assets not allocated to New Jersey from Part III, line 9, column B of Schedule K Liquidated.
- Line 7 Enter total payments made on behalf of the shareholder as reported in Part VII, column F of Schedule K or in Part VII, column (H) of Schedule K Liquidated.
- Line 8 Enter distributions shareholder received during the year as reported in Part V, VI, or VII, of Schedule K or Schedule K Liquidated.

PART III

- Lines 1–7 Enter shareholder's share of New Jersey Accumulated Adjustments (AAA) from Part IV-A, Schedule K or Schedule K Liquidated.

PART IV

- Lines 1–4 Enter shareholder's share of New Jersey Earnings and Profits from Part IV-B, Schedule K or Schedule K Liquidated.

PART V

- Line 1 Enter the amount of any interest paid to the shareholder that should be reported by the S corporation on federal Form 1099-INT. Include any other interest paid to the shareholder that was deducted by the S corporation in arriving at income reflected in Part II, line 8 of Schedule K or Schedule K Liquidated.
- Line 2 a. Enter the total amount of the corporation's indebtedness to the shareholder at year's end or prior to final distribution.
b. Enter the total amount of the shareholder's indebtedness to the corporation at year's end or prior to final distribution.
- Line 3 If a New Jersey electing S corporation is a qualified primary care medical or dental practice located in or within 5 miles of a Health Enterprise Zone (HEZ), the corporation must determine if the shareholders are entitled to an HEZ deduction and the amount. The shareholder's deduction is entered on the shareholder's Schedule NJ-K-1 and deducted on the shareholder's Gross Income Tax return. See the Division's website, nj.gov/taxation, for qualification and calculation information.

NOTE: A New Jersey electing S corporation doing business in New Jersey may file a NJ-1080-C composite return on behalf of its qualified nonresident shareholders who elect to be included in the composite filing. Every participating shareholder must make the election to be part of the composite return in writing each year by using Form NJ-1080E, Election to Participate in Composite Return, or a form substantially similar.

**SCHEDULE
NJ-K-1**
(Form CBT-100S)
2021

**State of New Jersey
Division of Taxation
Shareholder's Share of Income/Loss**

For Calendar Year 2021, or tax year beginning _____, _____ and ending _____, _____

Shareholder's identifying number 139-80-0646	Federal employer identification number 46-1657110
Shareholder's name, address, and ZIP Code JOSEPH VECCHIONE 578 WASHINGTON BLVD, #935 MARINA DEL REY CA 90292	Corporation's name, address, and ZIP Code THE KIND GROUP, LLC 1808 BRIELLE AVE ASBURY PARK NJ 07712

See instructions and reverse side

Part I

- Shareholder's percentage of stock ownership for tax year 1.00000 %
- Shareholder resident nonresident
- Shareholder consenting nonconsenting
- Check applicable box: Final NJ-K-1 Amended NJ-K-1
- Date the shareholder's stock was fully disposed..... _____

Part II

- S Income/Loss allocated to NJ 300,000.
- S Income/Loss not allocated to NJ 0.
- Pro rata share of S Corporation Income/Loss (line 1 plus line 2).... 300,000.
- Gain/Loss on disposition of assets allocated to NJ
- Gain/Loss on disposition of assets not allocated to NJ
- Total Gain/Loss from disposition of assets (line 4 plus line 5).....
- Total payments made on behalf of shareholder.....
- Distributions..... 300,000.

Shareholder: Follow the reporting instructions contained in your NJ Income Tax return packet and in publication GIT-9S, *Income From S Corporations*.

This schedule must be included with your NJ Income Tax return.

Part III Shareholder's NJ Accumulated Adjustments Account

	New Jersey AAA	Non New Jersey AAA
1. Beginning balance		
2. Income/Loss	300,000.	0.
3. Other Income/Loss		
4. Other reductions		
5. Total lines 1-4	300,000.	0.
6. Distributions.....	300,000.	0.
7. Ending Balance (line 5 minus line 6)	0.	0.

Part IV Shareholder's NJ Earnings and Profits Account

- Beginning balance
- Additions/Adjustments
- Dividends received
- Ending balance (line 1 plus line 2 minus line 3)

Part V

- Interest paid to shareholder (per 1099-INT)
- Indebtedness:
 - From corporation to shareholder:
 - From shareholder to corporation:
- Shareholder's HEZ deduction:

INSTRUCTIONS FOR SCHEDULE NJ-K-1

**For additional information see publication GIT-9S, *Income From S Corporations*
(Available on the Division's [website](#))**

PART I

- Line 1 Shareholder's percentage of stock ownership as reported on federal 1120-S.
- Line 2 Indicate shareholder's residency status at year's end.
- Line 3 Indicate whether shareholder is a consenting or nonconsenting shareholder.
- Line 4 If applicable, indicate if this schedule is a final or amended NJ-K-1.
- Line 5 Enter date shareholder received final distribution (cash and/or property).

PART II

- Line 1 Enter shareholder's share of New Jersey allocated S corporation income/loss from Part III, line 8 of Schedule K or from Part III, line 8, column A of Schedule K Liquidated.
- New Jersey S corporations that claim a credit for taxes paid to other jurisdictions in accordance with N.J.A.C. 18:7-8.3 will report 100% of the shareholder's net pro rata share as allocated to New Jersey.
- Line 2 Enter shareholder's share of S corporation income/loss not allocated to New Jersey from Part III, line 9 of Schedule K or from Part III, line 9, column A of Schedule K Liquidated.
- Line 4 Enter shareholder's share of New Jersey allocated income, gains/losses from disposition of assets from Part III, line 8, column B of Schedule K Liquidated.
- Line 5 Enter shareholder's share of income, gains/losses from disposition of assets not allocated to New Jersey from Part III, line 9, column B of Schedule K Liquidated.
- Line 7 Enter total payments made on behalf of the shareholder as reported in Part VII, column F of Schedule K or in Part VII, column (H) of Schedule K Liquidated.
- Line 8 Enter distributions shareholder received during the year as reported in Part V, VI, or VII, of Schedule K or Schedule K Liquidated.

PART III

- Lines 1–7 Enter shareholder's share of New Jersey Accumulated Adjustments (AAA) from Part IV-A, Schedule K or Schedule K Liquidated.

PART IV

- Lines 1–4 Enter shareholder's share of New Jersey Earnings and Profits from Part IV-B, Schedule K or Schedule K Liquidated.

PART V

- Line 1 Enter the amount of any interest paid to the shareholder that should be reported by the S corporation on federal Form 1099-INT. Include any other interest paid to the shareholder that was deducted by the S corporation in arriving at income reflected in Part II, line 8 of Schedule K or Schedule K Liquidated.
- Line 2 a. Enter the total amount of the corporation's indebtedness to the shareholder at year's end or prior to final distribution.
b. Enter the total amount of the shareholder's indebtedness to the corporation at year's end or prior to final distribution.
- Line 3 If a New Jersey electing S corporation is a qualified primary care medical or dental practice located in or within 5 miles of a Health Enterprise Zone (HEZ), the corporation must determine if the shareholders are entitled to an HEZ deduction and the amount. The shareholder's deduction is entered on the shareholder's Schedule NJ-K-1 and deducted on the shareholder's Gross Income Tax return. See the Division's website, nj.gov/taxation, for qualification and calculation information.

NOTE: A New Jersey electing S corporation doing business in New Jersey may file a NJ-1080-C composite return on behalf of its qualified nonresident shareholders who elect to be included in the composite filing. Every participating shareholder must make the election to be part of the composite return in writing each year by using Form NJ-1080E, Election to Participate in Composite Return, or a form substantially similar.

CBT-160-A

NJ Division of Taxation
(11-21)

Underpayment of Estimated NJ Corporation Business Tax

For Taxpayers With Gross Receipts of Less Than \$50 Million
Submit with your tax return (Form CBT-100, CBT-100S, or CBT-100U)

Name as Shown on Return THE KIND GROUP, LLC	Federal ID Number 46-1657110	Unitary ID Number, if applicable NU
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Part I How to Calculate Your Underpayment

Note: If you meet any of the exceptions that eliminate the underpayment charge for **any** quarter, complete Part II.

1. Amount of 2021 tax – See instructions for line 1 on reverse side	1,500.
2. 90% of line 1 – If you were qualified and elected to make a single payment in lieu of paying installments of estimated tax, enter zero (see instructions).....	1,350.
3. Prior year's tax – Enter the amount from line 6, page 1 of the 2020 CBT-100 or line 4, page 1 of the 2020 CBT-100S, or line 5, page 1 of the 2020 CBT-100U	1,500.
4. Enter the lesser of lines 2 or 3.....	1,350.

	(a)	(b)	(c)	(d)
5. Enter in columns (a) through (d) the installment dates that correspond to the 15th day of the fourth, sixth, ninth, and 12th months of your tax year (see instructions)	04/15/2021	06/15/2021	09/15/2021	12/15/2021
6. Enter 25% of line 4 in columns (a) through (d).....	338.	338.	338.	338.
7. (a) Amount paid or credited for each period	0.	0.	0.	0.
(b) Overpayment of previous installment (enter any overpayment shown on line 9 that is more than the total of all prior underpayments as a credit against the next installment).....				
8. Add lines 7a and 7b	0.	0.	0.	0.
9. Underpayment (subtract line 8 from line 6) or overpayment (subtract line 6 from line 8).....	338.	338.	338.	338.

Part II Exceptions (See Instructions)

10. Total amount paid or credited from the beginning of the tax year through the installment dates that correspond to the 15th day of the fourth, sixth, ninth, and 12th months of your tax year.....	0.	0.	0.	0.
11. Exception 1 – Tax based on the facts shown on the prior year's return but using current year's rates. See instructions regarding periods of less than one year.....	25% of tax	50% of tax	75% of tax	100% of tax
	22.5% of tax	45% of tax	67.5% of tax	90% of tax
12. Exception 2 – Tax based on annualized tax				

Part III Installment Interest Due (See Instructions)

13. Amount of underpayment from line 9	338.	338.	338.	338.
14. Enter same installment dates used above at line 5.....	04/15/2021	06/15/2021	09/15/2021	12/15/2021
15. Enter the date of payment or the 15th day of the fourth month after the close of the tax year, whichever is earlier	04/18/2022	04/18/2022	04/18/2022	04/18/2022
16. Number of months from the date on line 14 to the date on line 15. (A part of a month is deemed to be a full month.).....	13	11	8	5
17. Interest..... SEE WORKSHEET	23.	19.	14.	9.
18. Installment interest due – Add columns (a), (b), (c), and (d) of line 17. Enter the total here and on page 1, line 12, of Form CBT-100, page 1, line 12, of CBT-100S, or page 1, line 14, of CBT-100U	65.			

Additional information from your 2021 New Jersey S Corporation Business Tax Return

CBT-100S: Corporation Business Return Schedule A: Other Deductions Statement

Continuation Statement

Description	Amount
AUTOMOBILE AND TRUCK EXPENSE	83,424.
BANK CHARGES	5,729.
COMMISSIONS	1,091.
COMPUTER SERVICES AND SUPPLIES	9,775.
DELIVERY AND FREIGHT	2,091.
DUES AND SUBSCRIPTIONS	32,180.
INSURANCE	15,988.
LEGAL AND PROFESSIONAL	151,641.
MEALS (50%)	20,691.
MISCELLANEOUS	3,323.
OFFICE EXPENSE	16,079.
SUPPLIES	2,851.
TRAVEL	51,143.
UTILITIES	20,803.
CREDIT CARD PROCESSING	113,885.
DISPOSAL FEE	3,122.
PAYROLL PROCESSING	3,796.
WEBSITE	4,500.
Total	542,112.

CBT-100S: Corporation Business Return Schedule A-2: Other Costs Statement

Continuation Statement

Description	Amount
SHIPPING	251,715.
Total	251,715.

▶ ERO must obtain and retain completed Form 8879-S.
▶ Go to www.irs.gov/Form8879S for the latest information.

2021

Department of the Treasury
Internal Revenue Service

For calendar year 2021, or tax year beginning _____, 2021, and ending _____, 20__.

Name of corporation

The Kind Group, LLC

Employer identification number

46-1657110

Part I Tax Return Information (whole dollars only)

1	Gross receipts or sales less returns and allowances (Form 1120-S, line 1c)	1	6,070,017.
2	Gross profit (Form 1120-S, line 3)	2	1,821,481.
3	Ordinary business income (loss) (Form 1120-S, line 21)	3	459,687.
4	Net rental real estate income (loss) (Form 1120-S, Schedule K, line 2)	4	
5	Income (loss) reconciliation (Form 1120-S, Schedule K, line 18)	5	459,687.

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

Under penalties of perjury, I declare that I am an officer of the above corporation and that I have examined a copy of the corporation's 2021 electronic income tax return and accompanying schedules and statements and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts shown on the copy of the corporation's electronic income tax return. I consent to allow my electronic return originator (ERO), transmitter, or intermediate service provider to send the corporation's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the corporation's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at **888-353-4537** no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the corporation's electronic income tax return and, if applicable, the corporation's consent to electronic funds withdrawal.

Officer's PIN: check one box only

I authorize _____ to enter my PIN _____ as my signature
ERO firm name Don't enter all zeros
on the corporation's 2021 electronically filed income tax return.

As an officer of the corporation, I will enter my PIN as my signature on the corporation's 2021 electronically filed income tax return.

Officer's signature ▶ _____ Date ▶ _____ Title ▶ Owner

Part III Certification and Authentication

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

2 0 0 1 3 9 1 1 0 5 1

Don't enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2021 electronically filed income tax return for the corporation indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 3112**, IRS e-file Application and Participation, and **Pub. 4163**, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature ▶ _____ Date ▶ 03/09/2022

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

U.S. Income Tax Return for an S Corporation

Department of the Treasury
Internal Revenue Service

▶ **Do not file this form unless the corporation has filed or is attaching Form 2553 to elect to be an S corporation.**
▶ **Go to www.irs.gov/Form1120S for instructions and the latest information.**

2021

For calendar year 2021 or tax year beginning _____, 2021, ending _____, 20

A S election effective date 01/01/2018	TYPE OR PRINT	Name The Kind Group, LLC	D Employer identification number 46-1657110
B Business activity code number (see instructions) 424990		Number, street, and room or suite no. If a P.O. box, see instructions. 1808 Brielle Ave	E Date incorporated 01/01/2016
C Check if Sch. M-3 attached <input type="checkbox"/>		City or town, state or province, country, and ZIP or foreign postal code Asbury Park NJ 07712	F Total assets (see instructions) \$ 1,525,483.

G Is the corporation electing to be an S corporation beginning with this tax year? See instructions. Yes No
H Check if: (1) Final return (2) Name change (3) Address change (4) Amended return (5) S election termination
I Enter the number of shareholders who were shareholders during any part of the tax year ▶ 2
J Check if corporation: (1) Aggregated activities for section 465 at-risk purposes (2) Grouped activities for section 469 passive activity purposes

Caution: Include **only** trade or business income and expenses on lines 1a through 21. See the instructions for more information.

Income	1a Gross receipts or sales	1a	6,070,017.	
	b Returns and allowances	1b		
	c Balance. Subtract line 1b from line 1a	1c		6,070,017.
	2 Cost of goods sold (attach Form 1125-A)	2		4,248,536.
	3 Gross profit. Subtract line 2 from line 1c	3		1,821,481.
	4 Net gain (loss) from Form 4797, line 17 (attach Form 4797)	4		
5 Other income (loss) (see instructions—attach statement)	5			
6 Total income (loss). Add lines 3 through 5 ▶	6		1,821,481.	
Deductions (see instructions for limitations)	7 Compensation of officers (see instructions—attach Form 1125-E)	7		
	8 Salaries and wages (less employment credits)	8		82,126.
	9 Repairs and maintenance	9		5,514.
	10 Bad debts	10		78,836.
	11 Rents	11		92,829.
	12 Taxes and licenses	12		9,033.
	13 Interest (see instructions)	13		
	14 Depreciation not claimed on Form 1125-A or elsewhere on return (attach Form 4562)	14		
	15 Depletion (Do not deduct oil and gas depletion.)	15		
	16 Advertising	16		551,344.
	17 Pension, profit-sharing, etc., plans	17		
	18 Employee benefit programs	18		
	19 Other deductions (attach statement) See Statement	19		542,112.
	20 Total deductions. Add lines 7 through 19 ▶	20		1,361,794.
	21 Ordinary business income (loss). Subtract line 20 from line 6	21		459,687.
Tax and Payments	22a Excess net passive income or LIFO recapture tax (see instructions)	22a		
	b Tax from Schedule D (Form 1120-S)	22b		
	c Add lines 22a and 22b (see instructions for additional taxes)	22c		
	23a 2021 estimated tax payments and 2020 overpayment credited to 2021	23a		
	b Tax deposited with Form 7004	23b	0.	
	c Credit for federal tax paid on fuels (attach Form 4136)	23c		
	d Add lines 23a through 23c	23d		0.
	24 Estimated tax penalty (see instructions). Check if Form 2220 is attached ▶ <input type="checkbox"/>	24		
	25 Amount owed. If line 23d is smaller than the total of lines 22c and 24, enter amount owed	25		0.
	26 Overpayment. If line 23d is larger than the total of lines 22c and 24, enter amount overpaid	26		
27 Enter amount from line 26: Credited to 2022 estimated tax ▶ Refunded ▶	27			

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

Signature of officer	Date	Owner Title	May the IRS discuss this return with the preparer shown below? See instructions. <input type="checkbox"/> Yes <input type="checkbox"/> No
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Paid Preparer Use Only	Print/Type preparer's name Kevin Gilmartin	Preparer's signature Kevin Gilmartin	Date 03/09/2022	Check <input type="checkbox"/> if self-employed	PTIN P01449226
	Firm's name ▶ Gilmartin Consulting	Firm's EIN ▶ 30-0870968			
	Firm's address ▶ 14 Imlay Ln Farmingdale NJ 07727	Phone no. (585) 315-7150			

Schedule B Other Information (see instructions)

- | | Yes | No |
|---|-----|----|
| 1 Check accounting method: a <input checked="" type="checkbox"/> Cash b <input type="checkbox"/> Accrual
c <input type="checkbox"/> Other (specify) ▶ _____ | | |
| 2 See the instructions and enter the:
a Business activity ▶ <u>Sales</u> b Product or service ▶ <u>Sales</u> | | |
| 3 At any time during the tax year, was any shareholder of the corporation a disregarded entity, a trust, an estate, or a nominee or similar person? If "Yes," attach Schedule B-1, Information on Certain Shareholders of an S Corporation . . . | | X |
| 4 At the end of the tax year, did the corporation:
a Own directly 20% or more, or own, directly or indirectly, 50% or more of the total stock issued and outstanding of any foreign or domestic corporation? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (v) below | | X |

(i) Name of Corporation	(ii) Employer Identification Number (if any)	(iii) Country of Incorporation	(iv) Percentage of Stock Owned	(v) If Percentage in (iv) Is 100%, Enter the Date (if applicable) a Qualified Subchapter S Subsidiary Election Was Made

- | | Yes | No |
|--|-----|----|
| 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

- | | Yes | No |
|--|-----|----|
| 5a At the end of the tax year, did the corporation have any outstanding shares of restricted stock?
If "Yes," complete lines (i) and (ii) below. | | X |

- (i)** Total shares of restricted stock ▶ _____
- (ii)** Total shares of non-restricted stock ▶ _____

- | | Yes | No |
|--|-----|----|
| b At the end of the tax year, did the corporation have any outstanding stock options, warrants, or similar instruments?
If "Yes," complete lines (i) and (ii) below. | | X |

- (i)** Total shares of stock outstanding at the end of the tax year ▶ _____
- (ii)** Total shares of stock outstanding if all instruments were executed ▶ _____

- | | Yes | No |
|---|-----|----|
| 6 Has this corporation filed, or is it required to file, Form 8918 , Material Advisor Disclosure Statement, to provide information on any reportable transaction? | | X |

- | | Yes | No |
|---|-----|----|
| 7 Check this box if the corporation issued publicly offered debt instruments with original issue discount <input type="checkbox"/>
If checked, the corporation may have to file Form 8281 , Information Return for Publicly Offered Original Issue Discount Instruments. | | |

- | | Yes | No |
|---|-----|----|
| 8 If the corporation (a) was a C corporation before it elected to be an S corporation or the corporation acquired an asset with a basis determined by reference to the basis of the asset (or the basis of any other property) in the hands of a C corporation, and (b) has net unrealized built-in gain in excess of the net recognized built-in gain from prior years, enter the net unrealized built-in gain reduced by net recognized built-in gain from prior years. See instructions ▶ \$ _____ | | |

- | | Yes | No |
|--|-----|----|
| 9 Did the corporation have an election under section 163(j) for any real property trade or business or any farming business in effect during the tax year? See instructions | | X |

- | | Yes | No |
|---|-----|----|
| 10 Does the corporation satisfy one or more of the following? See instructions | | X |
| a The corporation owns a pass-through entity with current, or prior year carryover, excess business interest expense. | | |
| b The corporation's aggregate average annual gross receipts (determined under section 448(c)) for the 3 tax years preceding the current tax year are more than \$26 million and the corporation has business interest expense. | | |
| c The corporation is a tax shelter and the corporation has business interest expense.
If "Yes," complete and attach Form 8990. | | |

- | | Yes | No |
|--|-----|----|
| 11 Does the corporation satisfy both of the following conditions? | | X |
| a The corporation's total receipts (see instructions) for the tax year were less than \$250,000. | | |
| b The corporation's total assets at the end of the tax year were less than \$250,000.
If "Yes," the corporation is not required to complete Schedules L and M-1. | | |

Schedule B Other Information (see instructions) <i>(continued)</i>		Yes	No
12	During the tax year, did the corporation have any non-shareholder debt that was canceled, was forgiven, or had the terms modified so as to reduce the principal amount of the debt?		X
	If "Yes," enter the amount of principal reduction ▶ \$		
13	During the tax year, was a qualified subchapter S subsidiary election terminated or revoked? If "Yes," see instructions		X
14a	Did the corporation make any payments in 2021 that would require it to file Form(s) 1099?		X
b	If "Yes," did the corporation file or will it file required Form(s) 1099?		
15	Is the corporation attaching Form 8996 to certify as a Qualified Opportunity Fund?		X
	If "Yes," enter the amount from Form 8996, line 15 ▶ \$		

Schedule K Shareholders' Pro Rata Share Items		Total amount	
Income (Loss)	1 Ordinary business income (loss) (page 1, line 21)	1	459,687.
	2 Net rental real estate income (loss) (attach Form 8825)	2	
	3a 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 Interest income 4		
	5 Dividends: a Ordinary dividends 5a		
	b Qualified dividends 5b		
	6 Royalties 6		
	7 Net short-term capital gain (loss) (attach Schedule D (Form 1120-S)) 7		
8a Net long-term capital gain (loss) (attach Schedule D (Form 1120-S)) 8a			
	b Collectibles (28%) gain (loss) 8b		
	c Unrecaptured section 1250 gain (attach statement) 8c		
9 Net section 1231 gain (loss) (attach Form 4797) 9			
10 Other income (loss) (see instructions) Type ▶ 10			
Deductions	11 Section 179 deduction (attach Form 4562) 11		
	12a Charitable contributions 12a		
	b Investment interest expense 12b		
	c Section 59(e)(2) expenditures Type ▶ 12c		
d Other deductions (see instructions) Type ▶ 12d			
Credits	13a Low-income housing credit (section 42(j)(5)) 13a		
	b Low-income housing credit (other) 13b		
	c Qualified rehabilitation expenditures (rental real estate) (attach Form 3468, if applicable) 13c		
	d Other rental real estate credits (see instructions) Type ▶ 13d		
	e Other rental credits (see instructions) Type ▶ 13e		
	f Biofuel producer credit (attach Form 6478) 13f		
	g Other credits (see instructions) Type ▶ 13g		
International Transactions	14 Attach Schedule K-2 (Form 1120-S), Shareholders' Pro Rata Share Items—International, and check this box to indicate you are reporting items of international tax relevance ▶ <input type="checkbox"/>		
Alternative Minimum Tax (AMT) Items	15a Post-1986 depreciation adjustment 15a		
	b Adjusted gain or loss 15b		
	c Depletion (other than oil and gas) 15c		
	d Oil, gas, and geothermal properties—gross income 15d		
	e Oil, gas, and geothermal properties—deductions 15e		
	f Other AMT items (attach statement) 15f		
Items Affecting Shareholder Basis	16a Tax-exempt interest income 16a		
	b Other tax-exempt income 16b		
	c Nondeductible expenses 16c		20,691.
	d Distributions (attach statement if required) (see instructions) 16d		300,000.
	e Repayment of loans from shareholders 16e		
	f Foreign taxes paid or accrued 16f		

Schedule K Shareholders' Pro Rata Share Items <i>(continued)</i>		Total amount	
Other Information	17a Investment income	17a	
	b Investment expenses	17b	
	c Dividend distributions paid from accumulated earnings and profits	17c	0.
	d Other items and amounts (attach statement) ** SEC 199A INFO: SEE STMT A		
Reconciliation	18 Income (loss) reconciliation. Combine the amounts on lines 1 through 10 in the far right column. From the result, subtract the sum of the amounts on lines 11 through 12d and 16f .	18	459,687.

Schedule L Balance Sheets per Books		Beginning of tax year		End of tax year	
Assets		(a)	(b)	(c)	(d)
1	Cash		1,002,462.		729,526.
2a	Trade notes and accounts receivable				
b	Less allowance for bad debts	()		()	
3	Inventories		402,012.		788,176.
4	U.S. government obligations				
5	Tax-exempt securities (see instructions)				
6	Other current assets (attach statement)				
7	Loans to shareholders				
8	Mortgage and real estate loans				
9	Other investments (attach statement)				
10a	Buildings and other depreciable assets				
b	Less accumulated depreciation	()		()	
11a	Depletable assets				
b	Less accumulated depletion	()		()	
12	Land (net of any amortization)				
13a	Intangible assets (amortizable only)				
b	Less accumulated amortization	()		()	
14	Other assets (attach statement)		12,000.		7,781.
15	Total assets		1,416,474.		1,525,483.
Liabilities and Shareholders' Equity					
16	Accounts payable		85,555.		89,610.
17	Mortgages, notes, bonds payable in less than 1 year				
18	Other current liabilities (attach statement)		44,058.		
19	Loans from shareholders		500,000.		500,000.
20	Mortgages, notes, bonds payable in 1 year or more				
21	Other liabilities (attach statement)				
22	Capital stock				
23	Additional paid-in capital		282,589.		292,605.
24	Retained earnings		504,272.		643,268.
25	Adjustments to shareholders' equity (attach statement)				
26	Less cost of treasury stock	()		()	
27	Total liabilities and shareholders' equity		1,416,474.		1,525,483.

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

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

1	Net income (loss) per books	438,996.	5	Income recorded on books this year not included on Schedule K, lines 1 through 10 (itemize):	
2	Income included on Schedule K, lines 1, 2, 3c, 4, 5a, 6, 7, 8a, 9, and 10, not recorded on books this year (itemize) -----		a	Tax-exempt interest \$ -----	
3	Expenses recorded on books this year not included on Schedule K, lines 1 through 12 and 16f (itemize):		6	Deductions included on Schedule K, lines 1 through 12 and 16f, not charged against book income this year (itemize):	
a	Depreciation \$ -----		a	Depreciation \$ -----	
b	Travel and entertainment \$ 20,691.	20,691.	7	Add lines 5 and 6	
4	Add lines 1 through 3	459,687.	8	Income (loss) (Schedule K, line 18). Subtract line 7 from line 4	459,687.

Schedule M-2 Analysis of Accumulated Adjustments Account, Shareholders' Undistributed Taxable Income Previously Taxed, Accumulated Earnings and Profits, and Other Adjustments Account
(see instructions)

	(a) Accumulated adjustments account	(b) Shareholders' undistributed taxable income previously taxed	(c) Accumulated earnings and profits	(d) Other adjustments account
1 Balance at beginning of tax year	311,171.	0.	0.	0.
2 Ordinary income from page 1, line 21	459,687.			
3 Other additions				
4 Loss from page 1, line 21	()			
5 Other reductions Meals and entertainment	(20,691.)			()
6 Combine lines 1 through 5	750,167.	0.	0.	0.
7 Distributions	300,000.	0.	0.	0.
8 Balance at end of tax year. Subtract line 7 from line 6	450,167.	0.	0.	0.

▶ **Attach to Form 1120, 1120-C, 1120-F, 1120S, or 1065.**
▶ **Go to www.irs.gov/Form1125A for the latest information.**

Name The Kind Group, LLC		Employer identification number 46-1657110	
1	Inventory at beginning of year	1	402,012
2	Purchases	2	3,588,224
3	Cost of labor	3	
4	Additional section 263A costs (attach schedule) <i>See Statement</i>	4	794,761
5	Other costs (attach schedule) <i>Shipping</i>	5	251,715
6	Total. Add lines 1 through 5	6	5,036,712
7	Inventory at end of year	7	788,176
8	Cost of goods sold. Subtract line 7 from line 6. Enter here and on Form 1120, page 1, line 2 or the appropriate line of your tax return. See instructions	8	4,248,536
9a	Check all methods used for valuing closing inventory: (i) <input checked="" type="checkbox"/> Cost (ii) <input type="checkbox"/> Lower of cost or market (iii) <input type="checkbox"/> Other (Specify method used and attach explanation.) ▶		
b	Check if there was a writedown of subnormal goods	▶ <input type="checkbox"/>	
c	Check if the LIFO inventory method was adopted this tax year for any goods (if checked, attach Form 970)	▶ <input type="checkbox"/>	
d	If the LIFO inventory method was used for this tax year, enter amount of closing inventory computed under LIFO	9d	
e	If property is produced or acquired for resale, do the rules of section 263A apply to the entity? See instructions	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
f	Was there any change in determining quantities, cost, or valuations between opening and closing inventory? If "Yes," attach explanation	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

Section references are to the Internal Revenue Code unless otherwise noted.

What's New

Small business taxpayers. For tax years beginning after December 31, 2017, the following apply.

- A small business taxpayer (defined below), may use a method of accounting for inventories that either: (1) treats inventories as nonincidental materials and supplies, or (2) conforms to the taxpayer's financial accounting treatment of inventories.
- A small business taxpayer is not required to capitalize costs under section 263A.

General Instructions

Purpose of Form

Use Form 1125-A to calculate and deduct cost of goods sold for certain entities.

Who Must File

Filers of Form 1120, 1120-C, 1120-F, 1120S, or 1065, must complete and attach Form 1125-A if the applicable entity reports a deduction for cost of goods sold.

Inventories

Generally, inventories are required at the beginning and end of each tax year if the production, purchase, or sale of

merchandise is an income-producing factor. See Regulations section 1.471-1. If inventories are required, you generally must use an accrual method of accounting for sales and purchases of inventory items.

Exception for certain taxpayers. A small business taxpayer (defined below), can adopt or change its accounting method to account for inventories in the same manner as material and supplies that are nonincidental, or conform to its treatment of inventories in an applicable financial statement (as defined in section 451(b)(3)), or if it does not have an applicable financial statement, the method of accounting used in its books and records prepared in accordance with its accounting procedures. See section 471(c)(3).

A small business taxpayer claiming exemption from the requirement to keep inventories is changing its method of accounting for purposes of section 481. For additional guidance on this method of accounting, see Pub. 538, Accounting Periods and Methods. For guidance on changing to this method of accounting, see Form 3115 and the Instructions for Form 3115.

Small business taxpayer. A small business taxpayer is a taxpayer that (a) has average annual gross receipts of \$25 million or less (indexed for inflation) for the 3 prior tax years, and (b) is not a tax shelter (as defined in section 448(d)(3)). See Pub. 538.

Uniform capitalization rules. The uniform capitalization rules of section 263A generally require you to capitalize, or include in inventory, certain costs incurred in connection with the following.

- The production of real property and tangible personal property held in inventory or held for sale in the ordinary course of business.
- Real property or personal property (tangible and intangible) acquired for resale.
- The production of real property and tangible personal property for use in its trade or business or in an activity engaged in for profit.

A small business taxpayer (defined above) is not required to capitalize costs under section 263A. See section 263A(i).

See the discussion on section 263A uniform capitalization rules in the instructions for your tax return before completing Form 1125-A. Also see Regulations sections 1.263A-1 through 1.263A-3. See Regulations section 1.263A-4 for rules for property produced in a farming business.

Schedule K-1 (Form 1120-S)

2021

Department of the Treasury Internal Revenue Service

For calendar year 2021, or tax year

beginning [] / [] / 2021 ending [] / [] / []

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

Part I Information About the Corporation

A Corporation's employer identification number 46-1657110
B Corporation's name, address, city, state, and ZIP code The Kind Group, LLC 1808 Brielle Ave Asbury Park NJ 07712
C IRS Center where corporation filed return Kansas City, MO 64999-0013
D Corporation's total number of shares Beginning of tax year End of tax year

Part II Information About the Shareholder

E Shareholder's identifying number 139-66-7936
F Shareholder's name, address, city, state, and ZIP code Anthony Gagliardi 421 W. Lincoln Ave Oakhurst NJ 07755
G Current year allocation percentage 99.00000 %
H Shareholder's number of shares Beginning of tax year End of tax year
I Loans from shareholder Beginning of tax year \$ 495,000. End of tax year \$ 495,000.

For IRS Use Only

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

Table with 4 columns: Line number, Description, Amount, and Other information. Includes rows for Ordinary business income (loss), Net rental real estate income (loss), Other net rental income (loss), Interest income, Ordinary dividends, Qualified dividends, Royalties, Net short-term capital gain (loss), Net long-term capital gain (loss), Collectibles (28%) gain (loss), Unrecaptured section 1250 gain, Net section 1231 gain (loss), Other income (loss), Section 179 deduction, Other deductions, and Other information.

* See attached statement for additional information.

Statement A—QBI Pass-through Entity Reporting

Corporation's name: The Kind Group, LLC		Corporation's EIN: 46-1657110	
Shareholder's name: Anthony Gagliardi		Shareholder's identifying no: 139-66-7936	
		1120S, Line 21	
		<input type="checkbox"/> PTP <input type="checkbox"/> Aggregated <input checked="" type="checkbox"/> SSTB	<input type="checkbox"/> PTP <input type="checkbox"/> Aggregated <input type="checkbox"/> SSTB
		<input type="checkbox"/> PTP <input type="checkbox"/> Aggregated <input type="checkbox"/> SSTB	<input type="checkbox"/> PTP <input type="checkbox"/> Aggregated <input type="checkbox"/> SSTB
Shareholder's share of:			
QBI or qualified PTP items subject to shareholder-specific determinations:			
	Ordinary business income (loss)	455,090.	
	Rental income (loss)		
	Royalty income (loss)		
	Section 1231 gain (loss)		
	Other income (loss)		
	Section 179 deduction		
	Other deductions		
	W-2 wages	81,305.	
	UBIA of qualified property		
	Section 199A dividends		

Statement A—QBI Pass-through Entity Reporting

Corporation's name:		Corporation's EIN:	
Shareholder's name:		Shareholder's identifying no:	
		<input type="checkbox"/> PTP <input type="checkbox"/> Aggregated <input type="checkbox"/> SSTB	<input type="checkbox"/> PTP <input type="checkbox"/> Aggregated <input type="checkbox"/> SSTB
		<input type="checkbox"/> PTP <input type="checkbox"/> Aggregated <input type="checkbox"/> SSTB	<input type="checkbox"/> PTP <input type="checkbox"/> Aggregated <input type="checkbox"/> SSTB
Shareholder's share of:			
QBI or qualified PTP items subject to shareholder-specific determinations:			
	Ordinary business income (loss)		
	Rental income (loss)		
	Royalty income (loss)		
	Section 1231 gain (loss)		
	Other income (loss)		
	Section 179 deduction		
	Other deductions		
	W-2 wages		
	UBIA of qualified property		
	Section 199A dividends		

**Schedule K-1
(Form 1120-S)**

2021

Department of the Treasury
Internal Revenue Service

For calendar year 2021, or tax year

beginning ending

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

▶ See separate instructions.

Part I Information About the Corporation		Part III Shareholder's Share of Current Year Income, Deductions, Credits, and Other Items	
A Corporation's employer identification number 46-1657110	1 Ordinary business income (loss) 300,000.	13	Credits
B Corporation's name, address, city, state, and ZIP code The Kind Group, LLC 1808 Brielle Ave Asbury Park NJ 07712	2 Net rental real estate income (loss)	3	Other net rental income (loss)
C IRS Center where corporation filed return Kansas City, MO 64999-0013	4 Interest income	5a	Ordinary dividends
D Corporation's total number of shares Beginning of tax year _____ End of tax year _____	5a Ordinary dividends	5b	Qualified dividends
Part II Information About the Shareholder	6 Royalties	14	Schedule K-3 is attached if checked <input type="checkbox"/>
E Shareholder's identifying number 139-80-0646	7 Net short-term capital gain (loss)	15	Alternative minimum tax (AMT) items
F Shareholder's name, address, city, state, and ZIP code Joseph Vecchione 578 Washington Blvd, #935 Marina Del Rey CA 90292	8a Net long-term capital gain (loss)	9	Net section 1231 gain (loss)
G Current year allocation percentage 1.00000 %	8b Collectibles (28%) gain (loss)	10	Other income (loss)
H Shareholder's number of shares Beginning of tax year _____ End of tax year _____	8c Unrecaptured section 1250 gain	11	Section 179 deduction
I Loans from shareholder Beginning of tax year \$ 5,000. End of tax year \$ 5,000.	9 Net section 1231 gain (loss)	12	Other deductions
For IRS Use Only	10 Other income (loss)	16	Items affecting shareholder basis C 207. D 300,000.
For IRS Use Only	11 Section 179 deduction	17	Other information V * STMT
For IRS Use Only	12 Other deductions	18	<input type="checkbox"/> More than one activity for at-risk purposes*
For IRS Use Only	17 Other information V * STMT	19	<input type="checkbox"/> More than one activity for passive activity purposes*
For IRS Use Only	18 <input type="checkbox"/> More than one activity for at-risk purposes*	* See attached statement for additional information.	
For IRS Use Only	19 <input type="checkbox"/> More than one activity for passive activity purposes*		

Statement A—QBI Pass-through Entity Reporting

Corporation's name: The Kind Group, LLC		Corporation's EIN: 46-1657110	
Shareholder's name: Joseph Vecchione		Shareholder's identifying no: 139-80-0646	
Shareholder's share of:		1120S, Line 21	
		<input type="checkbox"/> PTP <input type="checkbox"/> Aggregated <input checked="" type="checkbox"/> SSTB	<input type="checkbox"/> PTP <input type="checkbox"/> Aggregated <input type="checkbox"/> SSTB
QBI or qualified PTP items subject to shareholder-specific determinations:			
	Ordinary business income (loss)	4,597.	
	Rental income (loss)		
	Royalty income (loss)		
	Section 1231 gain (loss)		
	Other income (loss)		
	Section 179 deduction		
	Other deductions		
	W-2 wages	821.	
	UBIA of qualified property		
	Section 199A dividends		

Statement A—QBI Pass-through Entity Reporting

Corporation's name:		Corporation's EIN:	
Shareholder's name:		Shareholder's identifying no:	
Shareholder's share of:			
		<input type="checkbox"/> PTP <input type="checkbox"/> Aggregated <input type="checkbox"/> SSTB	<input type="checkbox"/> PTP <input type="checkbox"/> Aggregated <input type="checkbox"/> SSTB
QBI or qualified PTP items subject to shareholder-specific determinations:			
	Ordinary business income (loss)		
	Rental income (loss)		
	Royalty income (loss)		
	Section 1231 gain (loss)		
	Other income (loss)		
	Section 179 deduction		
	Other deductions		
	W-2 wages		
	UBIA of qualified property		
	Section 199A dividends		

QuickZoom to Other Copy _____

Page 1

Corporation's Name: <u>The Kind Group, LLC</u>		Corporation's EIN: <u>46-1657110</u>	
1120S, Line 21			
<input type="checkbox"/> PTP	<input type="checkbox"/> PTP	<input type="checkbox"/> PTP	
<input type="checkbox"/> Aggregated	<input type="checkbox"/> Aggregated	<input type="checkbox"/> Aggregated	
<input checked="" type="checkbox"/> SSTB	<input type="checkbox"/> SSTB	<input type="checkbox"/> SSTB	
Shareholder's share of:			
QBI or qualified PTP items subject to shareholder-specific determinations:			
Ordinary business inc (loss)	459,687.	_____	_____
Rental income (loss)	_____	_____	_____
Royalty income (loss)	_____	_____	_____
Section 1231 gain (loss)	_____	_____	_____
Other income (loss)	_____	_____	_____
Section 179 deduction	_____	_____	_____
Other deductions	_____	_____	_____
W-2 wages	82,126.	_____	_____
UBIA of qualified property	_____	_____	_____
Section 199A dividends	_____		

Corporation's Name: _____ Corporation's EIN: _____

<input type="checkbox"/> PTP <input type="checkbox"/> Aggregated <input type="checkbox"/> SSTB	<input type="checkbox"/> PTP <input type="checkbox"/> Aggregated <input type="checkbox"/> SSTB	<input type="checkbox"/> PTP <input type="checkbox"/> Aggregated <input type="checkbox"/> SSTB
--	--	--

Shareholder's share of:
 QBI or qualified PTP items subject to shareholder-specific determinations:

Ordinary business inc (loss)	_____	_____	_____	_____	_____
Rental income (loss)	_____	_____	_____	_____	_____
Royalty income (loss)	_____	_____	_____	_____	_____
Section 1231 gain (loss)	_____	_____	_____	_____	_____
Other income (loss)	_____	_____	_____	_____	_____
Section 179 deduction	_____	_____	_____	_____	_____
Other deductions	_____	_____	_____	_____	_____
W-2 wages	_____	_____	_____	_____	_____
UBIA of qualified property	_____	_____	_____	_____	_____
Section 199A dividends	_____	_____			

199A Worksheet by Activity

2021

▶ Keep for your records

Corporation's name <u>The Kind Group, LLC</u>	Corporation's EIN <u>46-1657110</u>
--	--

QuickZoom to 199A Summary ▶ _____

Aggregation Code: _____	Trade or Business: <u>1120S, Line 21</u> EIN: <u>46-1657110</u>
Is this activity a qualified trade/business? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Specified Service Trade or Business? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

QBI or qualified PTP items subject to shareholder-specific determinations:

1 a Ordinary business income (loss)	1 a	459,687.		
b Adjustments	b			
c Adjusted ordinary business income (loss)	1 c		459,687.	
2 a Rental income (loss)	2 a			
b Adjustments	b			
c Adjusted rental income (loss)	2 c			
3 a Royalty income (loss)	3 a			
b Adjustments	b			
c Adjusted royalty income (loss)	3 c			
4 a Section 1231 gain (loss)	4 a			
b Adjustments	b			
c Adjusted section 1231 gain (loss)	4 c			
5 Other income (loss)	5			
6 a Section 179 deduction	6 a			
b Adjustments	b			
c Adjusted section 179 deduction	6 c			
7 Other deductions	7			
8 a W-2 wages	8 a	82,126.		
b Adjustments	b			
c Adjusted W-2 Wages	8 c		82,126.	
9 a UBIA of qualified property	9 a			
b Adjustments	b			
c Adjusted UBIA of qualified property	9 c			

Section 179 Carryover Detail for this Activity

Tentative Section 179 deduction from current year assets

Part I: Prior Year Carryovers

by Year and Category

- A Before 2018
- B 2018
- C 2019
- D 2020
- Total prior year carryovers to this year**

Section 179 Regular Tax	Section 179 QBI
	0.

Part II: 179 Deduction Allowed

by Year and Category

Total 179 deduction allowed for this activity in current year

- A Amount allowed from 2021
- B Amount allowed from before 2018
- C Amount allowed from 2018
- D Amount allowed from 2019
- E Amount allowed from 2020

Section 179 Regular Tax	Section 179 QBI

Part III: Total Carryforward to 2022

by Year and Category

- A Carryforward from 2021
- B Carryforward from before 2018
- C Carryforward from 2018
- D Carryforward from 2019
- E Carryforward from 2020
- Total carryforward to next year**

Section 179 Regular Tax	Section 179 QBI

Additional information from your 2021 US Form 1120S: Income Tax Return for S Corp

Form 1120S: S-Corporation Tax Return

Other Deductions

Continuation Statement

Description	Amount
Automobile and truck expense	83,424.
Bank charges	5,729.
Commissions	1,091.
Computer services and supplies	9,775.
Delivery and freight	2,091.
Dues and subscriptions	32,180.
Insurance	15,988.
Legal and professional	151,641.
Meals (50%)	20,691.
Miscellaneous	3,323.
Office expense	16,079.
Supplies	2,851.
Travel	51,143.
Utilities	20,803.
credit card processing	113,885.
disposal fee	3,122.
payroll processing	3,796.
website	4,500.
Total	542,112.

SMART WORKSHEET FOR: Form 1120S: S-Corporation Tax Return

Salaries and wages

Itemization Statement

Description	Amount
Brianna	36,200.
Isabella	23,850.
Sophia	2,076.
James	20,000.
Total	82,126.

Form 1125-A: Cost of Goods Sold

Additional Section 263A Costs Statement

Continuation Statement

Additional Costs	Additional Amount
Freight-in	790,794
Other purchase	3,967
Total	794,761