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APPENDIX C.

Corporation Income Tax Return

2015 Corporate Return

prepared for:

Sockwa Corporation

4347 Raytheon Road
Oxnard, CA 93033

Grace R. Jacobsen CPA

4607 Lakeview Canyon Road # 474
Westlake Village, CA 91361

Grace R. Jacobsen CPA
4607 Lakeview Canyon Road # 474
Westlake Village, CA 91361
(805) 494-9667

Client SOCKWA
June 1, 2016

Sockwa Corporation
4347 Raytheon Road
Oxnard, CA 93033
213 995-5004

FEDERAL FORMS

Form 1120	2015 U.S. Corporation Income Tax Return
Form 1125-A	Cost of Goods Sold
Form 7004	Application for Automatic Extension
Form 8879-C	IRS e-file Signature Authorization Depreciation Schedules

CALIFORNIA FORMS

Form 100	2015 California Corporation Income Tax Return
Form 100-ES	Corporation Estimated Tax
Form 3586	Payment Voucher for Electronically Filed Returns
Form 3805Q	Net Operating Loss Deduction
Form 3885	Depreciation and Amortization
Form 5806	Underpayment of Estimated Tax by Corporations
Form 8453-C	Declaration for Electronic Filing California Depreciation Schedules

FEE SUMMARY

Preparation Fee	\$ 1,500.00
Amount Due	\$ 1,500.00

Form at bottom of page. ■

Installment 1 – File and Pay by the 15th day of the 4th month of the taxable year. When the due date falls on a weekend or holiday, the deadline to file and pay without penalty is extended to the next business day. Due to the Emancipation Day holiday on April 16, 2016, tax returns filed and payments mailed or submitted on April 18, 2016, will be considered timely.
If no payment is due, do not mail this form.

WHERE TO FILE: Using black or blue ink, make check or money order payable to the 'Franchise Tax Board.' Write the corporation number and '2016 Form 100-ES' on the check or money order. Detach form below. Enclose, but **do not** staple, payment with form and mail to:

**FRANCHISE TAX BOARD
PO BOX 942857
SACRAMENTO CA 94257-0531**

Make all checks or money orders payable in U.S. dollars and drawn against a U.S. financial institution.

ONLINE SERVICES: Corporations can make payments online with Web Pay for Businesses. After a one-time online registration, corporations can make an immediate payment or schedule payments up to a year in advance. Go to ftb.ca.gov for more information.

----- DETACH HERE ----- .IF NO PAYMENT IS DUE, DO NOT MAIL THIS FORM ----- DETACH HERE -----

Caution: You may be required to pay electronically. See instructions.

Installment 1

TAXABLE YEAR

CALIFORNIA FORM

2016 Corporation Estimated Tax

100-ES

3037722 SOCK 26-2317559 000000000000 16 FORM 1
TYB 01-01-2016 TYE 12-31-2016
SOCKWA CORPORATION

4347 RAYTHEON ROAD
OXNARD CA 93033 213 995-5004

Est Tax Amt 800. QSub Tax Amt Total Payment Amt 800.

Form **8879-C**

IRS e-file Signature Authorization for Form 1120

OMB No. 1545-0123

For calendar year **2015**, or tax year beginning _____, 2015, ending _____, _____

2015

Department of the Treasury
Internal Revenue Service

► **Do not send to the IRS. Keep for your records.**
► **Information about Form 8879-C and its instructions is at www.irs.gov/form8879c.**

Name of corporation Sockwa Corporation Employer identification number 26-2317559

Part I Tax Return Information (Whole dollars only)

1	Total income (Form 1120, line 11)	1	83,752.
2	Taxable income (Form 1120, line 30)	2	
3	Total tax (Form 1120, line 31)	3	
4	Amount owed (Form 1120, line 34)	4	
5	Overpayment (Form 1120, line 35)	5	

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 2015 electronic income tax return and accompanying schedules and statements and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts shown on the copy of the corporation's electronic income tax return. I consent to allow my electronic return originator (ERO), transmitter, or intermediate service provider to send the corporation's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the corporation's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at **1-888-353-4537** no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the corporation's electronic income tax return and, if applicable, the corporation's consent to electronic funds withdrawal.

Officer's PIN: check one box only

I authorize Grace R. Jacobsen CPA to enter my PIN 95313 as my signature
ERO firm name do not enter all zeros
on the corporation's 2015 electronically filed income tax return.

As an officer of the corporation, I will enter my PIN as my signature on the corporation's 2015 electronically filed income tax return.

Officer's signature ► _____ Date ► _____ Title ► President

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 96722522329
do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2015 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 ► Grace R Jacobsen Date ► _____

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

BAA For Paperwork Reduction Act Notice, see instructions.

Form **8879-C** (2015)

Form **7004**

(Rev December 2012)

Department of the Treasury
Internal Revenue Service

**Application for Automatic Extension of Time To File Certain
Business Income Tax, Information, and Other Returns**

OMB No. 1545-0233

▶ **File a separate application for each return.**
▶ **Information about Form 7004 and its separate instructions is at www.irs.gov/form7004.**

**Print
or
Type**

Name Sockwa Corporation <small>Number, street, and room or suite number. (If P.O. box, see instructions.)</small> 4347 Raytheon Road <small>City, town, state, and ZIP code (If a foreign address, enter city, province or state, and country (follow the country's practice for entering postal code)).</small> Oxnard, CA 93033	Identifying number 26-2317559
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Note. File request for extension by the due date of the return for which the extension is granted. See instructions before completing this form.

Part I Automatic 5-Month Extension

1 a Enter the form code for the return that this application is for (see below) 1

Application Is For:	Form Code	Application Is For:	Form Code
Form 1065	09	Form 1041 (estate other than a bankruptcy estate)	04
Form 8804	31	Form 1041 (trust)	05

Part II Automatic 6-Month Extension

b Enter the form code for the return that this application is for (see below) 12

Application Is For:	Form Code	Application Is For:	Form Code
Form 706-GS(D)	01	Form 1120-ND (section 4951 taxes)	20
Form 706-GS(T)	02	Form 1120-PC	21
Form 1041 (bankruptcy estate only)	03	Form 1120-POL	22
Form 1041-N	06	Form 1120-REIT	23
Form 1041-QFT	07	Form 1120-RIC	24
Form 1042	08	Form 1120S	25
Form 1065-B	10	Form 1120-SF	26
Form 1066	11	Form 3520-A	27
Form 1120	12	Form 8612	28
Form 1120-C	34	Form 8613	29
Form 1120-F	15	Form 8725	30
Form 1120-FSC	16	Form 8831	32
Form 1120-H	17	Form 8876	33
Form 1120-L	18	Form 8924	35
Form 1120-ND	19	Form 8928	36

- 2** If the organization is a foreign corporation that does not have an office or place of business in the United States, check here.
- 3** If the organization is a corporation and is the common parent of a group that intends to file a consolidated return, check here.
If checked, attach a statement, listing the name, address, and Employer Identification Number (EIN) for each member covered by this application.

Part III All Filers Must Complete This Part

4 If the organization is a corporation or partnership that qualifies under Regulations section 1.6081-5, check here.

5 a The application is for calendar year 20 15, or tax year beginning _____, 20 __, and ending _____, 20 __

b Short tax year. If this tax year is less than 12 months, check the reason: Initial return Final return
 Change in accounting period Consolidated return to be filed Other (see instructions – attach explanation)

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

BAA For Privacy Act and Paperwork Reduction Act Notice, see separate instructions.

Form **7004** (Rev 12-2012)

CPCZ0701L 11/30/12

Form **1120**
Department of the Treasury
Internal Revenue Service

U.S. Corporation Income Tax Return
For calendar year 2015 or tax year beginning _____, 2015, ending _____,
► Information about Form 1120 and its separate instructions is at www.irs.gov/form1120.

OMB No. 1545-0123
2015

A Check if: 1 a Consolidated return (attach Form 851) <input type="checkbox"/> b Life/nonlife consolidated return <input type="checkbox"/> 2 Personal holding co. (attach Sch. PH) <input type="checkbox"/> 3 Personal service corp. (see instrs) <input type="checkbox"/> 4 Schedule M-3 attached <input type="checkbox"/>	TYPE OR PRINT	Sockwa Corporation 4347 Raytheon Road Oxnard, CA 93033	B Employer identification number 26-2317559 C Date incorporated 3/27/2008 D Total assets (see instructions) \$ 183,672.
E Check if: (1) Initial return (2) Final return (3) Name change (4) Address change			

I N C O M E	1 a	Gross receipts or sales		151,996.
	1 b	Returns and allowances		
	1 c	Balance. Subtract line 1b from line 1a.		151,996.
	2	Cost of goods sold (attach Form 1125-A)		68,244.
	3	Gross profit. Subtract line 2 from line 1c.		83,752.
	4	Dividends (Schedule C, line 19)		
	5	Interest		
	6	Gross rents		
	7	Gross royalties		
	8	Capital gain net income (attach Schedule D (Form 1120))		
	9	Net gain or (loss) from Form 4797, Part II, line 17 (attach Form 4797)		
10	Other income (see instructions — attach statement)			
11	Total income. Add lines 3 through 10.		83,752.	
D E D U C T I O N S	12	Compensation of officers (see instructions — attach Form 1125-E)		
	13	Salaries and wages (less employment credits)		3,290.
	14	Repairs and maintenance		
	15	Bad debts		
	16	Rents		7,675.
	17	Taxes and licenses		2,573.
	18	Interest		1,496.
	19	Charitable contributions		0.
	20	Depreciation from Form 4562 not claimed on Form 1125-A or elsewhere on return (attach Form 4562)		
	21	Depletion		
	22	Advertising		1,877.
	23	Pension, profit-sharing, etc., plans		
	24	Employee benefit programs		
	25	Domestic production activities deduction (attach Form 8903)		
	26	Other deductions (attach statement)	See Statement 1	64,407.
	27	Total deductions. Add lines 12 through 26.		81,318.
	28	Taxable income before net operating loss deduction and special deductions. Subtract line 27 from line 11.		2,434.
T X C R S A N D P A Y M E N T S	29 a	Net operating loss deduction (see instructions)	See St. 2	2,434.
	29 b	Special deductions (Schedule C, line 20)		
	29 c	Add lines 29a and 29b.		2,434.
30	Taxable income. Subtract line 29c from line 28 (see instructions).		0.	
31	Total tax (Schedule J, Part I, line 11)		0.	
32	Total payments and refundable credits (Schedule J, Part II, line 21)		0.	
33	Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/>			
34	Amount owed. If line 32 is smaller than the total of lines 31 and 33, enter amount owed.		0.	
35	Overpayment. If line 32 is larger than the total of lines 31 and 33, enter amount overpaid			
36	Enter amount from line 35 you want: Credited to 2016 estimated tax.	Refunded ►		

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.		May the IRS discuss this return with the preparer shown below (see instructions)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
	Signature of officer _____ Date _____	Title President			
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	Grace R Jacobsen		Grace R Jacobsen		P01437139
	Firm's name ► Grace R. Jacobsen CPA		Firm's EIN ► 45-4323419		
	Firm's address ► 4607 Lakeview Canyon Road # 474 Westlake Village, CA 91361		Phone no. (805) 494-9667		

Schedule C Dividends and Special Deductions (see instructions)	(a) Dividends received	(b) Percentage	(c) Special deductions (a) x (b)
1 Dividends from less-than-20%-owned domestic corporations (other than debt-financed stock)		70	
2 Dividends from 20%-or-more-owned domestic corporations (other than debt-financed stock)		80	
3 Dividends on debt-financed stock of domestic and foreign corporations		see instructions	
4 Dividends on certain preferred stock of less-than-20%-owned public utilities		42	
5 Dividends on certain preferred stock of 20%-or-more-owned public utilities		48	
6 Dividends from less-than-20%-owned foreign corporations and certain FSCs		70	
7 Dividends from 20%-or-more-owned foreign corporations and certain FSCs		80	
8 Dividends from wholly owned foreign subsidiaries		100	
9 Total. Add lines 1 through 8. See instructions for limitation			
10 Dividends from domestic corporations received by a small business investment company operating under the Small Business Investment Act of 1958		100	
11 Dividends from affiliated group members		100	
12 Dividends from certain FSCs		100	
13 Dividends from foreign corporations not included on lines 3, 6, 7, 8, 11, or 12			
14 Income from controlled foreign corporations under subpart F (attach Form(s) 5471)			
15 Foreign dividend gross-up			
16 IC-DISC and former DISC dividends not included on lines 1, 2, or 3			
17 Other dividends			
18 Deduction for dividends paid on certain preferred stock of public utilities			
19 Total dividends. Add lines 1 through 17. Enter here and on page 1, line 4			
20 Total special deductions. Add lines 9, 10, 11, 12, and 18. Enter here and on page 1, line 29b			

Schedule J Tax Computation and Payment (see instructions)

Part I – Tax Computation

1 Check if the corporation is a member of a controlled group (attach Schedule O (Form 1120))	▶ <input type="checkbox"/>			
2 Income tax. Check if a qualified personal service corporation (see instructions)	▶ <input type="checkbox"/>		2	0.
3 Alternative minimum tax (attach Form 4626)			3	
4 Add lines 2 and 3			4	0.
5a Foreign tax credit (attach Form 1118)		5 a		
b Credit from Form 8834 (see instructions)		5 b		
c General business credit (attach Form 3800)		5 c		
d Credit for prior year minimum tax (attach Form 8827)		5 d		
e Bond credits from Form 8912		5 e		
6 Total credits. Add lines 5a through 5e			6	
7 Subtract line 6 from line 4			7	
8 Personal holding company tax (attach Schedule PH (Form 1120))			8	
9a Recapture of investment credit (attach Form 4255)		9 a		
b Recapture of low-income housing credit (attach Form 8611)		9 b		
c Interest due under the look-back method – completed long-term contracts (attach Form 8697)		9 c		
d Interest due under the look-back method – income forecast method (attach Form 8866)		9 d		
e Alternative tax on qualifying shipping activities (attach Form 8902)		9 e		
f Other (see instructions – attach statement)		9 f		
10 Total. Add lines 9a through 9f			10	
11 Total tax. Add lines 7, 8, and 10. Enter here and on page 1, line 31			11	0.

Part II – Payments and Refundable Credits

12 2014 overpayment credited to 2015			12	
13 2015 estimated tax payments			13	
14 2015 refund applied for on Form 4466			14	
15 Combine lines 12, 13, and 14			15	0.
16 Tax deposited with Form 7004			16	
17 Withholding (see instructions)			17	
18 Total payments. Add lines 15, 16 and 17			18	0.
19 Refundable credits from:				
a Form 2439		19 a		
b Form 4136		19 b		
c Form 8827, line 8c		19 c		
d Other (attach statement – see instructions)		19 d		
20 Total credits. Add lines 19a through 19d			20	
21 Total payments and credits. Add lines 18 and 20. Enter here and on page 1, line 32			21	0.

Schedule K Other Information (see instructions)

1 Check accounting method: a <input checked="" type="checkbox"/> Cash b <input type="checkbox"/> Accrual c <input type="checkbox"/> Other (specify) ▶ _____				Yes	No
2 See the instructions and enter the:					
a Business activity code no. ▶ 454390					
b Business activity ▶ Sales					
c Product or service ▶ Beach Soccer Sock					
3 Is the corporation a subsidiary in an affiliated group or a parent-subsi-diary controlled group? If 'Yes,' enter name and EIN of the parent corporation ▶ _____					X
4 At the end of the tax year:					
a Did any foreign or domestic corporation, partnership (including any entity treated as a partnership), trust, or tax-exempt organization own directly 20% or more, or own, directly or indirectly, 50% or more of the total voting power of all classes of the corporation's stock entitled to vote? If 'Yes,' complete Part I of Schedule G (Form 1120) (attach Schedule G)					X
b Did any individual or estate own directly 20% or more, or own, directly or indirectly, 50% or more of the total voting power of all classes of the corporation's stock entitled to vote? If 'Yes,' complete Part II of Schedule G (Form 1120) (att Schedule G)					X

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

5 At the end of the tax year, did the corporation:				Yes	No
a Own directly 20% or more, or own, directly or indirectly, 50% or more of the total voting power of all classes of stock entitled to vote of any foreign or domestic corporation not included on Form 851 , Affiliations Schedule? For rules of constructive ownership, see instructions.					X
If 'Yes,' complete (i) through (iv) below.					
(i) Name of Corporation	(ii) Employer Identification Number (if any)	(iii) Country of Incorporation	(iv) Percentage Owned in Voting Stock		
b Own directly an interest of 20% or more, or own, directly or indirectly, an interest of 50% or more in 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.					X
If 'Yes,' complete (i) through (iv) below.					
(i) Name of Entity	(ii) Employer Identification Number (if any)	(iii) Country of Organization	(iv) Maximum Percentage Owned in Profit, Loss, or Capital		
6 During this tax year, did the corporation pay dividends (other than stock dividends and distributions in exchange for stock) in excess of the corporation's current and accumulated earnings and profits? (See sections 301 and 316.)					X
If 'Yes,' file Form 5452 , Corporate Report of Nondividend Distributions.					
If this is a consolidated return, answer here for the parent corporation and on Form 851 for each subsidiary					
7 At any time during the tax year, did one foreign person own, directly or indirectly, at least 25% of (a) the total voting power of all classes of the corporation's stock entitled to vote or (b) the total value of all classes of the corporation's stock?					X
For rules of attribution, see section 318. If 'Yes,' enter:					
(i) Percentage owned ▶ _____ and (ii) Owner's country ▶ _____					
(c) The corporation may have to file Form 5472 , Information Return of a 25% Foreign-Owned U.S. Corporation or a Foreign Corporation Engaged in a U.S. Trade or Business. Enter the number of Forms 5472 attached ▶ _____					
8 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.					
9 Enter the amount of tax-exempt interest received or accrued during the tax year ▶ \$ _____					None
10 Enter the number of shareholders at the end of the tax year (if 100 or fewer) ▶ _____					
11 If the corporation has an NOL for the tax year and is electing to forego the carryback period, check here.				<input type="checkbox"/>	
If the corporation is filing a consolidated return, the statement required by Regulations section 1.1502-21(b)(3) must be attached or the election will not be valid.					
12 Enter the available NOL carryover from prior tax years (do not reduce it by any deduction on line 29a.) ▶ \$ _____					429,520
13 Are the corporation's total receipts (page 1, line 1a, plus lines 4 through 10) for the tax year and its total assets at the end of the tax year less than \$250,000?				X	
If 'Yes,' the corporation is not required to complete Schedules L, M-1, and M-2. Instead, enter the total amount of cash distributions and the book value of property distributions (other than cash) made during the tax year ▶ \$ _____					None
14 Is the corporation required to file Schedule UTP (Form 1120), Uncertain Tax Position Statement (see instructions)?					X
If 'Yes,' complete and attach Schedule UTP.					
15a Did the corporation make any payments in 2015 that would require it to file Form(s) 1099?				X	
b If 'Yes,' did or will the corporation file required Forms 1099?				X	
16 During this tax year, did the corporation have an 80% or more change in ownership, including a change due to redemption of its own stock?					X
17 During or subsequent to this tax year, but before the filing of this return, did the corporation dispose of more than 65% (by value) of its assets in a taxable, non-taxable, or tax deferred transaction?					X
18 Did the corporation receive assets in a section 351 transfer in which any of the transferred assets had a fair market basis or fair market value of more than \$1 million?					X

Schedule L	Balance Sheets per Books	Beginning of tax year		End of tax year	
		(a)	(b)	(c)	(d)
Assets					
1	Cash		-3,377.		117,907.
2a	Trade notes and accounts receivable				
b	Less allowance for bad debts				
3	Inventories		58,331.		57,203.
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)	12,887.		12,887.	
b	Less accumulated amortization	3,621.	9,266.	4,325.	8,562.
14	Other assets (attach statement)				
15	Total assets		64,220.		183,672.
Liabilities and Shareholders' Equity					
16	Accounts payable		5,162.		11,020.
17	Mortgages, notes, bonds payable in less than 1 year				
18	Other current liabilities (attach stmt) See St. 3		66,700.		66,700.
19	Loans from shareholders		175,912.		126,711.
20	Mortgages, notes, bonds payable in 1 year or more				160,500.
21	Other liabilities (attach statement) See St. 4		6,001.		
22	Capital stock: a Preferred stock	279,884.		279,884.	
	b Common stock	204,934.	484,818.	210,935.	490,819.
23	Additional paid-in capital				
24	Retained earnings — Approp (att stmt)				
25	Retained earnings — Unappropriated		-674,373.		-672,078.
26	Adjmt to shareholders' equity (att stmt)				
27	Less cost of treasury stock				
28	Total liabilities and shareholders' equity		64,220.		183,672.

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

Note: The corporation may be required to file Schedule M-3 (see instructions).

1	Net income (loss) per books	2,295.	7	Income recorded on books this year not included on this return (itemize):	
2	Federal income tax per books			Tax-exempt interest \$	
3	Excess of capital losses over capital gains				
4	Income subject to tax not recorded on books this year (itemize):				
5	Expenses recorded on books this year not deducted on this return (itemize):		8	Deductions on this return not charged against book income this year (itemize):	
a	Depreciation \$		a	Depreciation \$	
b	Charitable contributions \$		b	Charitable contribns \$	
c	Travel & entertainment \$ 139.				
		139.	9	Add lines 7 and 8	0.
6	Add lines 1 through 5	2,434.	10	Income (page 1, line 28) — line 6 less line 9	2,434.

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

1	Balance at beginning of year	-674,373.	5	Distributions: a Cash	
2	Net income (loss) per books	2,295.	b	Stock	
3	Other increases (itemize):		c	Property	
			6	Other decreases (itemize):	
			7	Add lines 5 and 6	
4	Add lines 1, 2, and 3	-672,078.	8	Balance at end of year (line 4 less line 7)	-672,078.

Form **1125-A**

(Rev December 2012)
Department of the Treasury
Internal Revenue Service

Cost of Goods Sold

▶ Attach to Form 1120, 1120-C, 1120-F, 1120S, 1065, or 1065-B.
▶ Information about Form 1125-A and its instructions is at www.irs.gov/form1125a.

OMB No. 1545-2225

Name Sockwa Corporation	Employer identification number 26-2317559
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1 Inventory at beginning of year	1	58,331.
2 Purchases	2	36,586.
3 Cost of labor	3	
4 Additional section 263A costs (attach schedule)	4	
5 Other costs (attach schedule) <i>See Statement 5</i>	5	30,530.
6 Total. Add lines 1 through 5	6	125,447.
7 Inventory at end of year	7	57,203.
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	68,244.

9a Check all methods used for valuing closing inventory:

- (i) Cost
- (ii) Lower of cost or market
- (iii) Other (Specify method used and attach explanation) ▶

b Check if there was a writedown of subnormal goods ▶

c Check if the LIFO inventory method was adopted this tax year for any goods (if checked, attach Form 970) ▶

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)? Yes No

f Was there any change in determining quantities, cost, or valuations between opening and closing inventory? If 'Yes,' attach explanation Yes No

BAA For Paperwork Reduction Act Notice, see instructions.

Form 1125-A (Rev 12-2012)

2015

Federal Statements

Page 1

Sockwa Corporation

26-2317559

Statement 1
Form 1120, Line 26
Other Deductions

Amortization.....	\$	704.
Auto and Truck.....		206.
Bank Charges.....		2,079.
Branding.....		7,580.
Contract Labor.....		12,487.
Dues and Subscriptions.....		492.
Legal and Professional.....		6,652.
Meals and Entertainment.....		139.
Miscellaneous.....		267.
Office Expense.....		2,665.
Outside Services.....		1,099.
Printing.....		6,875.
Social Media.....		4,560.
Sponsorship.....		6,350.
Supplies.....		4,295.
Telephone.....		180.
Trade Shows.....		4,853.
Travel.....		2,400.
Utilities.....		97.
Website.....		427.
Total	\$	<u>64,407.</u>

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

Carryover Generated From Year End 12/31/13	\$	293,167.
Available for Carryover to 2015.....		293,167.
Carryover Generated From Year End 12/31/14	\$	136,353.
Available for Carryover to 2015.....		136,353.
Net Operating Losses Available in 2015.....	\$	<u>429,520.</u>
Taxable Income.....		2,434.
Total Net Operating Loss Deduction (Limited to Taxable Income).....		<u>2,434.</u>

Statement 3
Form 1120, Schedule L, Line 18
Other Current Liabilities

	<u>Beginning</u>	<u>Ending</u>
Current Liability.....	\$ 51,118.	\$ 51,118.
Kabbage Inc.....	15,582.	15,582.
Total	<u>\$ 66,700.</u>	<u>\$ 66,700.</u>

2015

Federal Statements

Page 2

Sockwa Corporation

26-2317559

Statement 4
Form 1120, Schedule L, Line 21
Other Liabilities

	<u>Beginning</u>	<u>Ending</u>
D Heller.....	\$ 6,000.	\$ 0.
Rounding.....	1.	0.
Total	<u>\$ 6,001.</u>	<u>\$ 0.</u>

Statement 5
Form 1125-A, Line 5
Other Cost of Goods Sold

Duty & Tarrif.....	\$ 1,973.
Fulfillment.....	11,301.
Merchant Account Fees.....	3,871.
Project Mgmt Application.....	25.
Shipping.....	13,360.
Total	<u>\$ 30,530.</u>

Date Accepted

DO NOT MAIL THIS FORM TO THE FTB

TAXABLE YEAR

FORM

2015

California e-file Return Authorization for Corporations

8453-C

Corporation name

Identifying number

SOCKWA CORPORATION

26-2317559

Part I Tax Return Information (whole dollars only)

Table with 2 columns: Line number and Amount. Lines 1-5 showing Total income, Taxable income, Total tax, Tax due, and Overpayment.

Part II Settle Your Account Electronically for Taxable Year 2015

Form with fields for Direct deposit of refund (6) and Electronic funds withdrawal (7a Amount, 7b Withdrawal date).

Part III Schedule of Estimated Tax Payments for Taxable Year 2016 (These are NOT installment payments for the current amount the corporation owes.)

Table with 5 columns: Amount, First Payment, Second Payment, Third Payment, Fourth Payment. Line 8 Amount and Line 9 Withdrawal Date.

Part IV Banking Information (Have you verified the corporation's banking information?)

Form with fields for Routing number (10), Account number (11), and Type of account (12) with checkboxes for Checking and Savings.

Part V Declaration of Officer

I authorize the corporate account to be settled as designated in Part II. If I check Part II, Box 6, I declare that the account specified in Part IV for the direct deposit refund agrees with the authorization stated on my return.

Under penalties of perjury, I declare that I am an officer of the above corporation and that the information I provided to my electronic return originator (ERO), transmitter, or intermediate service provider and the amounts in Part I above agree with the amounts on the corresponding lines of the corporation's 2015 California income tax return.

Signature line for Officer with fields for Signature of officer, Date, and Title (PRESIDENT).

Part VI Declaration of Electronic Return Originator (ERO) and Paid Preparer. See instructions.

I declare that I have reviewed the above corporation's return and that the entries on form FTB 8453-C are complete and correct to the best of my knowledge. (If I am only an intermediate service provider, I understand that I am not responsible for reviewing the corporation's return.)

Form for ERO Must Sign with fields for ERO's signature (GRACE R JACOBSEN), Date, Check if also paid preparer (checked), Check if self-employed, ERO's PTIN (P01437139), Firm's name (GRACE R. JACOBSEN CPA), address (4607 LAKEVIEW CANYON ROAD # 474 WESTLAKE VILLAGE, CA), FEIN (45-4323419), and ZIP code (91361).

Under penalties of perjury, I declare that I have examined the above corporation's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. I make this declaration based on all information of which I have knowledge.

Form for Paid Preparer Must Sign with fields for Paid preparer's signature, Date, Check if self-employed, Paid preparer's PTIN, Firm's name, and ZIP code.

Voucher at bottom of page. ■

DO NOT MAIL A PAPER COPY OF THE CORPORATE OR EXEMPT ORGANIZATION TAX RETURN WITH THE PAYMENT VOUCHER. If the amount of payment is zero, do not mail this voucher.

WHERE TO FILE: Using black or blue ink, make check or money order payable to the 'Franchise Tax Board.' Write the corporation number or FEIN and '2015 FTB 3586' on the check or money order. Detach voucher below. Enclose, but do not staple, payment with voucher and mail to: FRANCHISE TAX BOARD PO BOX 942857 SACRAMENTO CA 94257-0531 Make all checks or money orders payable in U.S. dollars and drawn against a U.S. financial institution.

WHEN TO FILE: Fiscal year - See instructions. Calendar year corporations - File and Pay by March 15, 2016. Calendar year exempt organizations - File and Pay by May 16, 2016. When the due date falls on a weekend or holiday, the deadline to file and pay without penalty is extended to the next business day. Due to the Emancipation Day holiday on April 16, 2016, tax returns filed and payments mailed or submitted on April 18, 2016, will be considered timely.

ONLINE SERVICES: Corporations can make payments online with Web Pay for Businesses. After a one-time online registration, corporations can make an immediate payment or schedule payments up to a year in advance. Go to ftb.ca.gov for more information.

--- DETACH HERE --- IF NO PAYMENT IS DUE, DO NOT MAIL THIS VOUCHER --- DETACH HERE ---

CAUTION: You may be required to pay electronically, see instructions.

TAXABLE YEAR 2015 Payment Voucher for Corporations and Exempt Organizations e-filed Returns CALIFORNIA FORM 3586 (e-file)

3037722 SOCK 26-2317559 000000000000 15 FORM 0 TYB 01-01-2015 TYE 12-31-2015 SOCKWA CORPORATION

4347 RAYTHEON ROAD OXNARD CA 93033

213 995-5004

Amount of Payment 822.

059 6181156 CACA1201L 12/18/15 FTB 3586 2015

RP

3037722 SOCK 26-2317559 000000000000 15
 TYB 01-01-2015 TYE 12-31-2015
 SOCKWA CORPORATION

4347 RAYTHEON ROAD
 OXNARD CA 93033

Schedule Q Questions (continued on Side 2)

- A FINAL RETURN?** • Dissolved Surrendered (withdrawn) Merged/Reorganized IRC Section 338 sale QSub election
 Enter date (mm/dd/yyyy) •
- B 1** Is income included in a combined report of a unitary group? • Yes No
2 If "Yes," indicate: wholly within CA (R&TC 25101.15)
 within and outside of CA
3 Is there a change in the members listed in Schedule R-7 from the prior year? • Yes No
4 Enter the number of members (including parent or key corporation) listed in the Schedule R-7, Part I, Section A,
 subject to income or franchise tax •
5 Is form FTB 3544 **and/or** 3544A attached to the return? • Yes No
- C 1** During this taxable year, did another person or legal entity acquire control or majority ownership (more than a 50%
 interest) of this corporation or any of its subsidiaries that owned California real property (i.e., land, buildings), leased
 such property for a term of 35 years or more, or leased such property from a government agency for any term? • Yes No
2 During this taxable year, did this corporation or any of its subsidiaries acquire control or majority ownership (more than
 a 50% interest) in another legal entity that owned California real property (i.e., land, buildings), leased such property for
 a term of 35 years or more, or leased such property from a government agency for any term? • Yes No
3 During this taxable year, has more than 50% of the voting stock of this corporation cumulatively transferred in one or
 more transactions after an interest in California real property (i.e., land, buildings) was transferred to it that was
 excluded from property tax reassessment under R&TC Section 62(a)(2) and it was not reported on a previous year's
 tax return? • Yes No
(Yes requires filing of statement, penalties may apply – see instructions.)

STATE ADJUSTMENTS	1 Net income (loss) before state adjustments. See instructions.	• 1	2,434.
	2 Amount deducted for foreign or domestic tax based on income or profits from Schedule A.	• 2	
	3 Amount deducted for tax under the provisions of the Corporation Tax Law from Schedule A.	• 3	
	4 Interest on government obligations.	• 4	
	5 Net California capital gain from Side 6, Schedule D, line 11.	• 5	
	6 Depreciation and amortization in excess of amount allowed under California law. Attach form FTB 3885.	• 6	
	7 Net income from corporations not included in federal consolidated return. See instructions.	• 7	
	8 Other additions. Attach schedule(s).	• 8	
	9 Total. Add line 1 through line 8.	• 9	2,434.

SOCKWA CORPORATION 3037722

ADJUSTMENTS	10	Intercompany dividend deduction. Attach Schedule H (100).	10			
	11	Dividends received deduction. Attach Schedule H (100)	11			
	12	Additional depreciation allowed under CA law. Attach form FTB 3885.	12			
	13	Capital gain from federal Form 1120, line 8.	13			
	14	Contributions.	14	50.		
	15	Other deductions. Attach schedule(s).	15			
	16	Total. Add line 10 through line 15.	16		50.	
INCOME	17	Net income (loss) after state adjustments. Subtract line 16 from Side 1, line 9.	17		2,384.	
	18	Net income (loss) for state purposes. Complete Schedule R if apportioning or allocating income. See instructions.	18		2,384.	
	19	Net operating loss (NOL) deduction. See instructions.	19	2,384.		
	20	Pierce's disease, EZ, LARZ, TTA, or LAMBRA NOL carryover deduction. See instructions.	20			
	21	Disaster loss deduction. See instructions.	21			
	22	Net income for tax purposes. Combine line 19 through line 21. Then, subtract from line 18.	22		0.	
TAXES	23	Tax. <u>8.84</u> % x line 22 (at least minimum franchise tax, if applicable). See instructions.	23		800.	
	24	New employment credit, amount generated.				
	25	New employment credit, amount claimed.	25			
	26a	Credit name _____ code _____ amount _____	26a			
	26b	Credit name _____ code _____ amount _____	26b			
	27	To claim more than two credits, see instructions.	27			
	28	Add line 25 through line 27.	28			
	29	Balance. Subtract line 28 from line 23 (at least minimum franchise tax, if applicable).	29		800.	
	30	Alternative minimum tax. Attach Schedule P (100). See instructions.	30			
	31	Total tax. Add line 29 and line 30.	31		800.	
PAYMENTS	32	Overpayment from prior year allowed as a credit.	32			
	33	2015 Estimated tax payments. See instructions.	33			
	34	2015 Withholding (Form 592-B and/or 593). See instructions.	34			
	35	Amount paid with extension of time to file tax return.	35			
	36	Total payments. Add line 32 through line 35.	36			
	AMOUNT REFUND OR DUE	37	Use tax. This is not a total line. See instructions.	37		
38		Payments balance. If line 36 is more than line 37, subtract line 37 from line 36.	38			
39		Use tax balance. If line 37 is more than line 36, subtract line 36 from line 37.	39			
40		Franchise or income tax due. If line 31 is more than line 38, subtract line 38 from line 31.	40		800.	
41		Overpayment. If line 38 is more than line 31, subtract line 31 from line 38.	41			
42		Amount of line 41 to be credited to 2016 estimated tax.	42			
43		Refund. Subtract line 42 from line 41. See instructions to have the refund directly deposited.	43			
43a		Routing number _____	43b	Type <input type="checkbox"/> Checking <input type="checkbox"/> Savings	43c	Account number _____
44a		Penalties and interest.	44a		22.	
44b		Check if estimate penalty computed using Exception B or C. See instructions.		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
45	Total amount due. Add line 39, line 40, line 42, and line 44a. Then, subtract line 41 from the result.	45		822.		

Schedule Q Questions (continued from Side 1)

- D If the corporation filed on a water's-edge basis pursuant to R&TC Sections 25110 and 25113 in previous years, enter the date the water's-edge election ended. (mm/dd/yyyy) ● _____
- E Was the corporation's income included in a consolidated federal return? ● Yes No
- F Principal business activity code. (Do not leave blank): ● 454390
 Business activity SALES
 Product or service BEACH SOCCER SOCK

Schedule Q Questions (continued on Side 3)

SOCKWA CORPORATION 3037722

Schedule Q Questions (continued from Side 2)

- G** Date incorporated (mm/dd/yyyy): 3/27/2008 Where: • State CA Country _____
- H** Date business began in California or date income was first derived from California sources: (mm/dd/yyyy) • 3/27/2008
- I** First return? • Yes No If 'Yes' and this corporation is a successor to a previously existing business, check the appropriate box.
- (1) sole proprietorship (2) partnership (3) joint venture (4) corporation (5) other
(Attach statement showing name, address, and FEIN/SSN/ITIN of previous business.)
- J** 'Doing business as' name: See instructions: . . .
• _____
- K** At any time during the taxable year, was more than 50% of the voting stock:
- 1** Of the corporation owned by any single interest? • Yes No
- 2** Of another corporation owned by this corporation? • Yes No
- 3** Of this and one or more other corporations owned or controlled, directly or indirectly, by the same interests? • Yes No
If 1 or 3 is 'Yes,' enter the country of the ultimate parent
• _____
- If 1, 2, or 3 is 'Yes,' furnish a statement of ownership indicating pertinent names, addresses, and percentages of stock owned. If the owner(s) is an individual, provide the SSN/ITIN.
- L** Has the corporation included a reportable transaction or listed transaction within this return? (See instructions for definitions) • Yes No
If 'Yes,' complete and attach federal Form 8886 for each transaction.
- M** Is this corporation apportioning or allocating income to California using Schedule R? • Yes No
- N** How many affiliates in the combined report are claiming immunity from taxation in California under Public Law 86-272? • _____
- O** Corporation headquarters are: . . . • (1) Within California (2) Outside of California, within the U.S. (3) Outside of the U.S.
- P** Location of principal accounting records 4347 RAYTHEON ROAD OXNARD, CA 93033
- Q** Accounting method: • (1) Cash (2) Accrual (3) Other
- R** Does this corporation or any of its subsidiaries have a Deferred Intercompany Stock Account (DISA)? • Yes No
If 'Yes' enter the total balance of all DISAs. • \$ _____
- S** Is this corporation or any of its subsidiaries a RIC? • Yes No
- T** Is this corporation treated as a REMIC for California purposes? • Yes No
- U** Is this corporation a REIT for California purposes? • Yes No
- V** Is this corporation an LLC or limited partnership electing to be taxed as a corporation for federal purposes? • Yes No
If 'Yes,' enter the effective date of the election (mm/dd/yyyy): _____
- W** Is this corporation to be treated as a credit union? • Yes No
- X** Is the corporation under audit by the IRS or has it been audited by the IRS in a prior year? • Yes No
- Y** Have all required information returns (e.g. federal Forms 1099, 5471, 5472, 8300, 8865, etc.) been filed with the Franchise Tax Board? N/A Yes No
- Z** Does the taxpayer (or any corporation of the taxpayer's combined group, if applicable) own 80% or more of the stock of an insurance company? Yes No
- AA** Did the corporation file the federal Schedule UTP (Form 1120)? • Yes No
- BB** Does any member of the combined report own an SMLLC or generate/claim credits that are attributable to an SMLLC? • Yes No

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 ▶ _____	Title PRESIDENT	Date _____
	Officer's email address (optional)		• Telephone 213 995-5004
Paid Preparer's Use Only	Preparer's signature ▶ GRACE R JACOBSEN	Date	• PTIN P01437139
	Firm's name (or yours, if self-employed) and address GRACE R. JACOBSEN CPA 4607 LAKEVIEW CANYON ROAD # 474 WESTLAKE VILLAGE, CA 91361		• FEIN 45-4323419
		Check if self-employed <input type="checkbox"/>	• Telephone (805) 494-9667
	May the FTB discuss this return with the preparer shown above? See instructions • <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		

SOCKWA CORPORATION 3037722

Schedule A Taxes Deducted. Use additional sheet(s) if necessary.

(a) Nature of tax	(b) Taxing authority	(c) Total amount	(d) Nondeductible amount
SEE STATEMENT 1		2,573.	0.
Total. Enter total of column (c) on Schedule F, line 17, and total of column (d) on Side 1, line 2 or line 3. If the corporation uses California computation method to compute the net income, see instructions.		2,573.	

Schedule F Computation of Net Income. See instructions.

INCOME		DEDUCTIONS	
1 a	Gross receipts or gross sales..... 151,996.		
b	Less returns and allowance.....	c Balance.....	1 c 151,996.
2	Cost of goods sold. Attach federal Form 1125-A (California Schedule V).....		2 68,244.
3	Gross profit. Subtract line 2 from line 1c.....		3 83,752.
4	Total dividends. Attach federal Schedule C, (California Schedule H (100)).....		4
5 a	Interest on obligations of the United States and U.S. instrumentalities.....		5 a
b	Other interest. Attach schedule.....		5 b
6	Gross rents.....		6
7	Gross royalties.....		7
8	Capital gain net income. Attach federal Schedule D (California Schedule D).....		8
9	Ordinary gain (loss). Attach federal Form 4797 (California Schedule D-1).....		9
10	Other income (loss). Attach schedule.....		10
11	Total income. Add line 3 through line 10.....		11 83,752.
12	Compensation of officers. Attach federal Form 1125-E or equivalent schedule.....	12	
13	Salaries and wages (not deducted elsewhere).....	13	3,290.
14	Repairs.....	14	
15	Bad debts.....	15	
16	Rents.....	16	7,675.
17	Taxes (California Schedule A). See instructions.....	17	2,573.
18	Interest. Attach schedule.....	18	1,496.
19	Contributions. Attach schedule.....	19	
20	Depreciation. Attach federal Form 4562 and FTB 3885.....	20	
21	Less depreciation claimed elsewhere on return.....	21a	21b
22	Depletion. Attach schedule.....	22	
23	Advertising.....	23	1,877.
24	Pension, profit-sharing plans, etc.....	24	
25	Employee benefit plans.....	25	
26 a	Total travel and entertainment..... 278.		
b	Deductible amounts.....	26b	139.
27	Other deductions. Attach schedule..... STATEMENT 2.....	27	64,268.
28	Specific deduction for organizations under R&TC Section 23701r or 23701t. See instructions.....	28	
29	Total deductions. Add line 12 through line 28.....	29	81,318.
30	Net income before state adjustments. Subtract line 29 from line 11. Enter here and on Side 1, line 1.....	30	2,434.

Schedule J Add-On Taxes and Recapture of Tax Credits. See instructions.

1	LIFO recapture due to S corporation election, IRC Sec. 1363(d) deferral: \$.....	1
2	Interest computed under the look-back method for completed long-term contracts (Attach form FTB 3834).....	2
3	Interest on tax attributable to installment: a Sales of certain timeshares and residential lots.....	3 a
	b Method for nondealer installment obligations.....	3 b
4	IRC Section 197(f)(9)(B)(ii) election.....	4
5	Credit recapture name:.....	5
6	Combine line 1 through line 5, revise Side 2, line 40 or line 41, whichever applies, by this amount. Write 'Schedule J' to the left of line 40 or line 41.....	6

SOCKWA CORPORATION 3037722

Schedule V Cost of Goods Sold

1	Inventory at beginning of year	<input checked="" type="radio"/>	1	58,331.
2	Purchases	<input checked="" type="radio"/>	2	36,586.
3	Cost of labor	<input type="radio"/>	3	
4a	Additional IRC Section 263A costs. Attach schedule	<input type="radio"/>	4a	
b	Other costs. Attach schedule	<input type="radio"/>	4b	30,530.
5	Total. Add line 1 through line 4b	<input type="radio"/>	5	125,447.
6	Inventory at end of year	<input checked="" type="radio"/>	6	57,203.
7	Cost of goods sold. Subtract line 6 from line 5. Enter here and on Side 4, Schedule F, line 2.	<input type="radio"/>	7	68,244.

Method of inventory valuation **COST**

Was there any change in determining quantities, costs of valuations between opening and closing inventory? Yes No

If 'Yes,' attach an explanation.

Enter California seller's permit number, if any.

Check if the LIFO inventory method was adopted this taxable year for any goods. If checked, attach federal Form 970.

If the LIFO inventory method was used for this taxable year, enter the amount of closing inventory under LIFO.

Do the rules of IRC Section 263A (with respect to property produced or acquired for resale) apply to the corporation? Yes No

The corporation may not be required to complete Schedules L, M-1, and M-2. See Schedule M-1 instructions for reporting requirements.

Schedule L Balance Sheet	Beginning of taxable year		End of taxable year	
	(a)	(b)	(c)	(d)
Assets				
1 Cash	<input checked="" type="radio"/>	-3,377.	<input type="radio"/>	117,907.
2a Trade notes and accounts receivable	<input type="radio"/>		<input type="radio"/>	
b Less allowance for bad debts	<input checked="" type="radio"/>		<input type="radio"/>	
3 Inventories	<input checked="" type="radio"/>	58,331.	<input type="radio"/>	57,203.
4 Federal and state government obligations	<input checked="" type="radio"/>		<input type="radio"/>	
5 Other current assets. Attach schedule(s)	<input type="radio"/>		<input type="radio"/>	
6 Loans to stockholders/officers. Attach sch	<input checked="" type="radio"/>		<input type="radio"/>	
7 Mortgage and real estate loans	<input checked="" type="radio"/>		<input type="radio"/>	
8 Other investments. Attach schedule(s)	<input checked="" type="radio"/>		<input type="radio"/>	
9a Buildings and other fixed depreciable assets	<input type="radio"/>		<input type="radio"/>	
b Less accumulated depreciation	<input checked="" type="radio"/>		<input type="radio"/>	
10a Depletable assets	<input type="radio"/>		<input type="radio"/>	
b Less accumulated depletion	<input checked="" type="radio"/>		<input type="radio"/>	
11 Land (net of any amortization)	<input checked="" type="radio"/>		<input type="radio"/>	
12a Intangible assets (amortizable only)	<input checked="" type="radio"/>	12,887.	<input type="radio"/>	12,887.
b Less accumulated amortization	<input checked="" type="radio"/>	3,621.	<input checked="" type="radio"/>	9,266.
13 Other assets. Attach schedule(s)	<input type="radio"/>		<input checked="" type="radio"/>	4,325.
14 Total assets	<input checked="" type="radio"/>	64,220.	<input type="radio"/>	183,672.
Liabilities and Stockholders' Equity				
15 Accounts payable	<input checked="" type="radio"/>	5,162.	<input type="radio"/>	11,020.
16 Mortgages, notes, bonds payable in less than 1 year	<input checked="" type="radio"/>		<input type="radio"/>	
17 Other current liabilities. Attach schedule(s)	SEE STM 4	66,700.	<input type="radio"/>	66,700.
18 Loans from stockholders. Attach schedule(s)	<input checked="" type="radio"/>	175,912.	<input type="radio"/>	126,711.
19 Mortgages, notes, bonds payable in 1 year or more	<input checked="" type="radio"/>		<input type="radio"/>	160,500.
20 Other liabilities. Attach schedule(s)	SEE STM 5	6,001.	<input type="radio"/>	
21 Capital stock: a Preferred stock	<input checked="" type="radio"/>	279,884.	<input type="radio"/>	279,884.
b Common stock	<input checked="" type="radio"/>	204,934.	<input type="radio"/>	484,818.
22 Paid-in or capital surplus. Att reconciliation	<input type="radio"/>		<input type="radio"/>	210,935.
23 Retained earnings — Appropriated. Attach schedule	<input type="radio"/>		<input type="radio"/>	490,819.
24 Retained earnings — Unappropriated	<input type="radio"/>	-674,373.	<input type="radio"/>	-672,078.
25 Adjustments to shareholders' equity. Att sch	<input type="radio"/>		<input type="radio"/>	
26 Less cost of treasury stock	<input type="radio"/>		<input type="radio"/>	
27 Total liabilities and stockholders' equity	<input type="radio"/>	64,220.	<input type="radio"/>	183,672.

Schedule M-1 Reconciliation of Income (Loss) per Books With Income (Loss) per Return.	
If the corporation completed federal Schedule M-3 (Form 1120/1120-F), see instructions.	
1 Net income per books..... ●	2,295.
2 Federal income tax..... ●	
3 Excess of capital losses over capital gains..... ●	
4 Taxable income not recorded on books this year (itemize)..... ●	
5 Expenses recorded on books this year not deducted in this return (itemize)..... ●	
a Depreciation..... \$	
b State taxes..... \$	
c Travel and entertainment..... \$ 139.	
d Other..... \$	
e Total. Add line 5a through line 5d..... ●	139.
6 Total. Add line 1 through line 5e..... ●	2,434.
7 Income recorded on books this year not included in this return (itemize)..... ●	
a Tax-exempt interest \$	
b Other..... \$	
c Total. Add line 7a and line 7b..... ●	
8 Deductions in this return not charged against book income this year (itemize)..... ●	
a Depreciation..... \$	
b State tax refunds..... \$	
c Other..... \$	
d Total. Add line 8a through line 8c..... ●	
9 Total. Add line 7c and line 8d..... ●	0.
10 Net income per return. Subtract line 9 from line 6..... ●	2,434.

Schedule M-2 Analysis of Unappropriated Retained Earnings per Books (Side 5, Schedule L, line 24)	
1 Balance at beginning of year..... ●	-674,373.
2 Net income per books..... ●	2,295.
3 Other increases (itemize)..... ●	
4 Total. Add line 1 through line 3..... ●	-672,078.
5 Distributions:..... ●	
a Cash..... ●	
b Stock..... ●	
c Property..... ●	
6 Other decreases (itemize)..... ●	
7 Total. Add line 5 and line 6..... ●	
8 Balance at end of year. Subtract line 7 from line 4..... ●	-672,078.

Schedule D California Capital Gains and Losses					
Part I Short-Term Capital Gains and Losses — Assets Held One Year or Less. Use additional sheet(s) if necessary.					
(a) Kind of property and description (Example, 100 shares of Z Company)	(b) Date acquired (mm/dd/yyyy)	(c) Date sold (mm/dd/yyyy)	(d) Gross sales price	(e) Cost or other basis plus expense of sale	(f) Gain (loss) (d) less (e)
1					
2 Short-term capital gain from installment sales from form FTB 3805E, line 26 or line 37..... ●					2
3 Unused capital loss carryover from 2014..... ●					3
4 Net short-term capital gain (loss). Combine line 1 through line 3..... ●					4

Part II Long-Term Capital Gains and Losses — Assets Held More Than One Year. Use additional sheet(s) if necessary.					
(a)	(b)	(c)	(d)	(e)	(f)
5					
6 Enter gain from Schedule D-1, line 9 and/or any capital gain distributions..... ●					6
7 Long-term capital gain from installment sales from form FTB 3805E, line 26 or line 37..... ●					7
8 Net long-term capital gain (loss). Combine line 5 through line 7..... ●					8
9 Enter excess of net short-term capital gain (line 4) over net long-term capital loss (line 8)..... ●					9
10 Net capital gain. Enter excess of net long-term capital gain (line 8) over net short-term capital loss (line 4)..... ●					10
11 Total lines 9 and 10. Enter here and on Form 100, Side 1, line 5. If losses exceed gains, carry forward losses to 2016..... ●					11

TAXABLE YEAR

2015

**Net Operating Loss (NOL) Computation and
NOL and Disaster Loss Limitations – Corporations**

CALIFORNIA FORM

3805Q

Attach to Form 100, Form 100W, Form 100S, or Form 109.

Corporation name SOCKWA CORPORATION	California corporation number 3037722
During the taxable year the corporation incurred the NOL, the corporation was a(n): <input checked="" type="radio"/> <input checked="" type="checkbox"/> C Corporation <input type="radio"/> S Corporation <input type="radio"/> Exempt organization <input type="radio"/> Limited liability company (electing to be taxed as a corporation)	FEIN 26-2317559

If the corporation previously filed California tax returns under another corporate name, enter the corporation name and California corporation number:

If the corporation is included in a combined report of a unitary group, see instructions, General Information C, Combined Reporting.

Part I Current year NOL. If the corporation does not have a current year NOL, go to Part II.

1 Net loss from Form 100, line 18; Form 100W, line 18; Form 100S, line 15; or Form 109, line 2. Enter as a positive number.	1	
2 2015 disaster loss included in line 1. Enter as a positive number.	2	
3 Subtract line 2 from line 1. If zero or less, enter -0- and see instructions.	3	
4a Enter the amount of the loss incurred by a new business included in line 3.	4a	
4b Enter the amount of the loss incurred by an eligible small business included in line 3.	4b	
4c Add line 4a and line 4b.	4c	
5 General NOL. Subtract line 4c from line 3.	5	
6 Current year NOL. Add line 2, line 4c, and line 5. See instructions.	6	<input checked="" type="radio"/>

If the corporation is using the current year NOL to carryback to offset net income for taxable years 2013 and/or 2014, complete Part III, NOL carryback, on Side 2 before completing Part I, lines 7-9 below.

7 2015 NOL carryback used to offset 2013 net income. Enter the amount from Part III, line 3, column (e).	7	
8 2015 NOL carryback used to offset 2014 net income. Enter the amount from Part III, line 3, column (g).	8	
9 2015 NOL carryover to 2016. Add line 7 and line 8, then subtract the result from line 6. See instructions.	9	

Election to waive carryback

Check the box if the corporation elects to relinquish the entire carryback period with respect to 2015 NOL under IRC Section 172(b)(3). By making the election, the corporation is electing to carry an NOL forward instead of carrying it back in the previous two years. Once the election is made, it's irrevocable. See instructions.

Continue with Part II, NOL carryover and disaster loss carryover limitations. Do not complete Part III, NOL carryback.

Part II NOL carryover and disaster loss carryover limitations. See Instructions.

	(g) Available balance	
1 Net income – Enter the amount from Form 100, line 18; Form 100W, line 18; Form 100S, line 15 less line 16; or Form 109, line 2; (but not less than -0-).	<input checked="" type="radio"/>	2,384.

Prior Year NOLs

(a) Year of loss	(b) Code – See instructions	(c) Type of NOL – See below*	(d) Initial loss	(e) Carryover from 2014	(f) Amount used in 2015	(g) Available balance	(h) Carryover to 2016 col. (e) – col. (f)
2 <input checked="" type="radio"/> 2013		ESB	291,935.	<input checked="" type="radio"/> 291,935.	2,384.	0.	<input checked="" type="radio"/> 289,551.
<input checked="" type="radio"/> 2014		ESB	136,353.	<input checked="" type="radio"/> 136,353.	0.	0.	<input checked="" type="radio"/> 136,353.
<input type="radio"/>				<input type="radio"/>			<input type="radio"/>
<input type="radio"/>				<input type="radio"/>			<input type="radio"/>

Current Year NOLs

(a) Year of loss	(b) Code – See instructions	(c) Type of NOL – See below*	(d) Initial loss	(e) Carryover from 2014	(f) Amount used in 2015	(g) Available balance	(h) Carryover to 2016 col. (e) – col. (f)
3 2015		DIS					col. (d) – col. (f) See instructions.
4 2015							
2015							
2015							
2015							

*Type of NOL: General (GEN), New Business (NB), Eligible Small Business (ESB), or Disaster (DIS).

SOCKWA CORPORATION 3037722

Part III NOL carryback

- 1 2013 Net income – Enter the amount from 2013 Form 100, line 23; Form 100W, line 23; Form 100S, line 21; or taxable income from Form 109, line 9; (but not less than -0-)
- 2 2014 Net income – Enter the amount from 2014 Form 100, line 22; Form 100W, line 22; Form 100S, line 20; or taxable income from Form 109, line 9; (but not less than -0-)

(a) Year of loss	(b) Code – See instructions	(c) Type of NOL – See below*	(d) Initial Loss	2013		2014		(i) Carryover to 2016 col. (d) minus [col. (e) plus col. (g)]
				(e) Carryback used – See instructions	(f) After carryback col. (d) minus col. (e)	(g) Carryback used – See instructions	(h) After carryback col. (f) minus col. (g)	
3 2015								
2015								
2015								
2015								
2015								

*Type of NOL: General (GEN), New Business (NB), Eligible Small Business (ESB), or NOL attributable to a qualified disaster loss (DIS).

Part IV 2015 NOL deduction

- 1 Total the amounts in Part II, line 2, column (f). 1 2,384.
- 2 Enter the total amount from line 1 that represents disaster loss carryover deduction here and on Form 100, line 21; Form 100W, line 21; or Form 100S, line 19. Form 109 filers enter -0-. 2 0.
- 3 Subtract line 2 from line 1. Enter the result here and on Form 100, line 19; Form 100W, line 19; Form 100S, line 17; or Form 109, line 7. 3 2,384.

TAXABLE YEAR

2015

AMT COMPUTATION

Net Operating Loss (NOL) Computation and
NOL and Disaster Loss Limitations – Corporations

CALIFORNIA FORM

3805Q

Attach to Form 100, Form 100W, Form 100S, or Form 109.

Corporation name SOCKWA CORPORATION	California corporation number 3037722
During the taxable year the corporation incurred the NOL, the corporation was a(n): <input checked="" type="radio"/> S Corporation <input checked="" type="radio"/> Exempt organization <input checked="" type="radio"/> Limited liability company (electing to be taxed as a corporation)	FEIN 26-2317559

If the corporation previously filed California tax returns under another corporate name, enter the corporation name and California corporation number:

If the corporation is included in a combined report of a unitary group, see instructions, General Information C, Combined Reporting.

Part I Current year NOL. If the corporation does not have a current year NOL, go to Part II.

1 Net loss from Form 100, line 18; Form 100W, line 18; Form 100S, line 15; or Form 109, line 2. Enter as a positive number.	1	
2 2015 disaster loss included in line 1. Enter as a positive number.	2	
3 Subtract line 2 from line 1. If zero or less, enter -0- and see instructions.	3	
4a Enter the amount of the loss incurred by a new business included in line 3.	4a	
b Enter the amount of the loss incurred by an eligible small business included in line 3.	4b	
c Add line 4a and line 4b.	4c	
5 General NOL. Subtract line 4c from line 3.	5	
6 Current year NOL. Add line 2, line 4c, and line 5. See instructions.	6	<input checked="" type="radio"/>

If the corporation is using the current year NOL to carryback to offset net income for taxable years 2013 and/or 2014, complete Part III, NOL carryback, on Side 2 before completing Part I, lines 7-9 below.

7 2015 NOL carryback used to offset 2013 net income. Enter the amount from Part III, line 3, column (e).	7	<input checked="" type="radio"/>
8 2015 NOL carryback used to offset 2014 net income. Enter the amount from Part III, line 3, column (g).	8	<input checked="" type="radio"/>
9 2015 NOL carryover to 2016. Add line 7 and line 8, then subtract the result from line 6. See instructions.	9	<input checked="" type="radio"/>

Election to waive carryback

Check the box if the corporation elects to relinquish the entire carryback period with respect to 2015 NOL under IRC Section 172(b)(3). By making the election, the corporation is electing to carry an NOL forward instead of carrying it back in the previous two years. Once the election is made, it's irrevocable. See instructions.

Continue with Part II, NOL carryover and disaster loss carryover limitations. Do not complete Part III, NOL carryback.

Part II NOL carryover and disaster loss carryover limitations. See Instructions.

1 Net income – Enter the amount from Form 100, line 18; Form 100W, line 18; Form 100S, line 15 less line 16; or Form 109, line 2; (but not less than -0-).	(g) Available balance	
<input checked="" type="radio"/>	2,146.	

Prior Year NOLs

(a) Year of loss	(b) Code – See instructions	(c) Type of NOL – See below*	(d) Initial loss	(e) Carryover from 2014	(f) Amount used in 2015	(g) Available balance	(h) Carryover to 2016 col. (e) – col. (f)
2 <input checked="" type="radio"/> 2013		ESB	291,935.	<input checked="" type="radio"/> 291,935.	2,146.		<input checked="" type="radio"/> 289,789.
<input checked="" type="radio"/> 2014		ESB	136,353.	<input checked="" type="radio"/> 136,353.	0.		<input checked="" type="radio"/> 136,353.
<input type="radio"/>				<input type="radio"/>			<input type="radio"/>
<input type="radio"/>				<input type="radio"/>			<input type="radio"/>

Current Year NOLs

							col. (d) – col. (f) See instructions.
3 2015		DIS					
4 2015							
2015							
2015							
2015							

*Type of NOL: General (GEN), New Business (NB), Eligible Small Business (ESB), or Disaster (DIS).

SOCKWA CORPORATION 3037722

Part III NOL carryback

- 1 2013 Net income — Enter the amount from 2013 Form 100, line 23; Form 100W, line 23; Form 100S, line 21; or taxable income from Form 109, line 9; (but not less than -0-).
- 2 2014 Net income — Enter the amount from 2014 Form 100, line 22; Form 100W, line 22; Form 100S, line 20; or taxable income from Form 109, line 9; (but not less than -0-).

(a) Year of loss	(b) Code — See instructions	(c) Type of NOL — See below*	(d) Initial Loss	2013		2014		(i) Carryover to 2016 col. (d) minus [col. (e) plus col. (g)]
				(e) Carryback used — See instructions	(f) After carryback col. (d) minus col. (e)	(g) Carryback used — See instructions	(h) After carryback col. (f) minus col. (g)	
3 2015								
2015								
2015								
2015								
2015								

*Type of NOL: General (GEN), New Business (NB), Eligible Small Business (ESB), or NOL attributable to a qualified disaster loss (DIS).

Part IV 2015 NOL deduction

- 1 Total the amounts in Part II, line 2, column (f). 1 2,146.
- 2 Enter the total amount from line 1 that represents disaster loss carryover deduction here and on Form 100, line 21; Form 100W, line 21; or Form 100S, line 19. Form 109 filers enter -0-. 2 0.
- 3 Subtract line 2 from line 1. Enter the result here and on Form 100, line 19; Form 100W, line 19; Form 100S, line 17; or Form 109, line 7. 3 2,146.

TAXABLE YEAR

CALIFORNIA FORM

2015 Corporation Depreciation and Amortization

3885

Attach to Form 100 or Form 100W. **FORM 100**

Corporation name SOCKWA CORPORATION	California corporation number 3037722
---	---

Part I Election To Expense Certain Property Under IRC Section 179

1	Maximum deduction under IRC Section 179 for California.	1	
2	Total cost of IRC Section 179 property placed in service.	2	
3	Threshold cost of IRC Section 179 property before reduction in limitation.	3	200,000.
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	0.
5	Dollar limitation for taxable year. Subtract line 4 from line 1. If zero or less, enter -0-	5	0.
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property (elected IRC Section 179 cost).	7	
8	Total elected cost of IRC Section 179 property. Add amounts in column (c), line 6 and line 7.	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8.	9	
10	Carryover of disallowed deduction from prior taxable years.	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5.	11	
12	IRC Section 179 expense deduction. Add line 9 and line 10, but do not enter more than line 11.	12	
13	Carryover of disallowed deduction to 2016. Add line 9 and line 10, less line 12.	13	

Part II Depreciation and Election of Additional First Year Depreciation Deduction Under R&TC Section 24356

14	(a) Description of property	(b) Date acquired (mm/dd/yyyy)	(c) Cost or other basis	(d) Depreciation allowed or allowable in earlier years	(e) Depreciation method	(f) Life or rate	(g) Depreciation for this year	(h) Additional first year depreciation
15	Add the amounts in column (g) and column (h). The total of column (h) may not exceed \$2,000. See instructions for line 14, column (h).						15	

Part III Summary

16	Total: If the corporation is electing: IRC Section 179 expense, add the amount on line 12 and line 15, column (g) or Additional first year depreciation under R&TC Section 24356, add the amounts on line 15, columns (g) and (h) or Depreciation (if no election is made), enter the amount from line 15, column (g).	16	0.
17	Total depreciation claimed for federal purposes from federal Form 4562, line 22.	17	0.
18	Depreciation adjustment. If line 17 is greater than line 16, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 17 is less than line 16, enter the difference here and on Form 100 or Form 100W, Side 2, line 12. (If California depreciation amounts are used to determine net income before state adjustments on Form 100 or Form 100W, no adjustment is necessary.)	18	

Part IV Amortization

19	(a) Description of property	(b) Date acquired (mm/dd/yyyy)	(c) Cost or other basis	(d) Amortization allowed or allowable in earlier years	(e) R&TC section (see instr)	(f) Period or percentage	(g) Amortization for this year	
	PATENT	2/21/2013	10,556.	1,290.	197	15	704.	
20	Total. Add the amounts in column (g).						20	704.
21	Total amortization claimed for federal purposes from federal Form 4562, line 44.						21	704.
22	Amortization adjustment. If line 21 is greater than line 20, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 21 is less than line 20, enter the difference here and on Form 100 or Form 100W, Side 2, line 12.						22	0.

TAXABLE YEAR
2015

**Underpayment of Estimated Tax
by Corporations**

CALIFORNIA FORM
5806

For calendar year 2015 or fiscal year beginning (mm/dd/yyyy) _____, and ending (mm/dd/yyyy) _____
 Corporation name **SOCKWA CORPORATION** California corporation number **3037722**

Part I Figure the Underpayment

1 Current year's tax. See instructions.	1				800.
		(a)	(b)	(c)	(d)
2 Installment due dates. See instructions.	2	4/15/15	6/15/15	9/15/15	12/15/15
3 Percentage required. See instructions.	3	30% (not less than min.)	70% less 1st	70% less prior	100% less prior
4 Amount due. See instructions.	4	800.			
5 a Amount paid or credited for each installment.	5 a				
b Overpayment from previous installment. See instructions.	5 b				
6 Add line 5a and line 5b.	6				
7 Underpayment (subtract line 6 from line 4). See instructions. Overpayment (subtract line 4 from line 6). If line 7 shows an underpayment for any installment, go to Part IV, Exceptions Worksheets.	7	800.			

Part II Exceptions to the Penalty If Exception A, line 8a is met for all four installments, do not attach this form to the return. If Exception B or C is met, for any installment, attach form FTB 5806 to the back of Form 100, Form 100W, Form 100S or Form 109.

(check the applicable boxes)		Yes	No	Yes	No	Yes	No	Yes	No
8 a	Exception A — Regular Corporations, line 26.		X		X		X		X
8 b	Exception A — Large Corporations, In 30. See inst.								
9	Exception B (line 42) met?								
10	Exception C (line 64) met?								

Part III Figure the Penalty If line 7 shows an underpayment for any installment and one of the three exceptions was not met, figure the penalty for that installment by completing line 11 through line 22.

11 Enter the earlier of the payment date, or the 15th day of the 3rd month after the close of the taxable year. Form 109 filers, see instructions.	11	3/15/16			
12 Number of days from date shown on line 2 to date shown on line 11.	12	335			
13 Number of days on line 12 before 7/01/15.	13	76			
14 Number of days on line 12 after 6/30/15 and before 1/01/16.	14	184			
15 Number of days on line 12 after 12/31/15 and before 7/01/16. Calendar year corporations, see instructions.	15	75			
16 For fiscal year corporations only. Number of days on line 12 after 6/30/16 and before 1/01/17. See instrs.	16				
17 For fiscal year corporations only. Number of days on line 12 after 12/31/16 and before 2/15/17.	17				
18 No. of days on line 13	18				
No. of days in taxable year x 3% x line 7.		5.00			
19 No. of days on line 14	19				
No. of days in taxable year x 3% x line 7.		12.10			
20 No. of days on line 15	20				
No. of days in taxable year x 3% x line 7.		4.92			
21 No. of days on line 16	21				
No. of days in taxable year x % (see instrs) x In 7.					
22 No. of days on line 17	22				
No. of days in taxable year x % (see instrs) x In 7.					
22 a Add amounts for each column from line 18 through line 22.	22 a	22.02			
22 b Total estimated penalty due. Add line 22a, column (a) through column (d). Enter here and on Form 100, line 44a; Form 100W, line 41a; Form 100S, line 43a; or Form 109, line 27.	22 b				22.

SOCKWA CORPORATION 3037722

Part IV Exceptions Worksheets Even if line 7 shows an underpayment for any installment, the Franchise Tax Board will not assess a penalty if timely payments were made and they equal or exceed the amount determined under any of the three exceptions for the same installment period.

Exception A – Prior Year's Tax – Regular Corporations

23 Prior year's tax (the return must have been for a full 12 months).....	23	800.							
		(a)		(b)		(c)		(d)	
		30% (not less than min.)		70%		70%		100%	
24 Enter line 23 x the percentage shown ...	24	800.		800.		800.		800.	
25 Amount paid by the installment due date (cumulative).....	25								
26 If line 25 is greater than line 24, the exception was met. Check 'Yes' here and check the applicable 'Yes' box in Part II, line 8a. If line 24 is greater than line 25, the exception was not met. Check 'No' here and check the applicable 'No' box in Part II, line 8a....	26	Yes	X No	Yes	X No	Yes	X No	Yes	X No

Exception A – Prior Year's Tax – Large Corporations

Use this exception only if prior year tax is less than current year tax.

27 Current year's tax.....	27				
		1st Installment		2nd Installment	
28 a Installment due. Enter line 23 x 30%	28a				
b Installment due. Enter line 27 x 70%	28b				
29 Amount paid by the installment due date (cumulative).....	29				
30 If line 29 is greater than line 28 for both installments, the exception is met. Check 'Yes' here for each installment and check the applicable 'Yes' box in Part II, line 8b. The exception to the penalty applies only if line 29 is greater than line 28 for both installments. If line 28 is greater than line 29 for either installment, the exception is not met. Check 'No' here and check the applicable 'No' box in Part II, line 8b.....	30	Yes	No	Yes	No

See instructions regarding amounts to use for installment 3 and installment 4.

Exception B – Tax on Annualized Current Year Income

Enter number of months for each period. See instructions ▶

		(a)	(b)	(c)	(d)
31 Enter taxable income for each annualization period.....	31				
32 Annualization amounts. See instructions	32				
33 a Annualized taxable income. Multiply line 31 by line 32.....	33a				
b R&TC Section 23802(e) deduction (S corps only).....	33b				
c Net income. Subtract line 33b from line 33a.....	33c				
34 Tax. Multiply line 33c by the current tax rate.....	34				
35 Tax credits for each payment period.....	35				
36 Subtract line 35 from line 34.....	36				
37 Other taxes*.....	37				
38 Total tax. Add line 36 and line 37.....	38				
39 Applicable percentage. For short period returns (taxable year of less than 12 months), see the instructions for Part I, line 3.....	39	30% (not less than min.)	70%	70%	100%
40 Installment due. Multiply line 38 by line 39.....	40				
41 Amount paid by the installment due date (cumulative).....	41				
42 If line 41 is greater than line 40, the exception was met. Check 'Yes' here and check the applicable 'Yes' box in Part II, line 9. If line 40 is greater than line 41, the exception was not met. Check 'No' here and check the applicable 'No' box in Part II, line 9.....	42	Yes	No	Yes	No

*Include alternative minimum tax, S corporation taxes from Schedule D (100S) and from the excess net passive income, the QSub annual tax, installment amount credit recapture, and the minimum franchise tax.

2015

California Statements

Page 1

Sockwa Corporation

3037722

Statement 1
Form 100, Schedule A
Taxes Deducted

Nature of Tax	Taxing Authority	Total Amount	Nondeduct. Amount
Licenses and Permits		\$ 845.	
Payroll Taxes	IRS	912.	
Sales		816.	
	Total	<u>\$ 2,573.</u>	<u>\$ 0.</u>

Statement 2
Form 100, Schedule F, Line 27
Other Deductions

Amortization.....	\$ 704.
Auto and Truck.....	206.
Bank Charges.....	2,079.
Branding.....	7,580.
Contract Labor.....	12,487.
Dues and Subscriptions.....	492.
Legal and Professional.....	6,652.
Miscellaneous.....	267.
Office Expense.....	2,665.
Outside Services.....	1,099.
Printing.....	6,875.
Social Media.....	4,560.
Sponsorship.....	6,350.
Supplies.....	4,295.
Telephone.....	180.
Trade Shows.....	4,853.
Travel.....	2,400.
Utilities.....	97.
Website.....	427.
	Total <u>\$ 64,268.</u>

Statement 3
Form 100, Schedule V, Line 4(b)
Other Costs

Duty & Tarrif.....	\$ 1,973.
Fulfillment.....	11,301.
Merchant Account Fees.....	3,871.
Project Mgmt Application.....	25.
Shipping.....	13,360.
	Total <u>\$ 30,530.</u>

2015

California Statements

Page 2

Sockwa Corporation

3037722

Statement 4
Form 100, Schedule L, Line 17
Other Current Liabilities

	<u>Beginning</u>	<u>Ending</u>
Current Liability.....	\$ 51,118.	\$ 51,118.
Kabbage Inc.....	15,582.	15,582.
Total	<u>\$ 66,700.</u>	<u>\$ 66,700.</u>

Statement 5
Form 100, Schedule L, Line 20
Other Liabilities

	<u>Beginning</u>	<u>Ending</u>
D Heller.....	\$ 6,000.	\$ 0.
Rounding.....	1.	0.
Total	<u>\$ 6,001.</u>	<u>\$ 0.</u>