

**DIS Case Number: 15-0643-EL-AGG**

## Section A: Application Information

### A-1. Provider type:

☒ Power Broker
 ☐ Aggregator
 ☐ Retail Generation Provider
 ☐ Power Marketer

### A-2. Applicant's legal name and contact information.

**Legal Name:** Triple S Energy Management LLC  
**Country:** United States  
**Phone:** 3303396001    **Extension (if applicable):**  
**Street:** 2038 Oldtown Valley Rd SE  
**Website (if any):** www.triplesenergy.com    **City:** New Philadelphia    **Province/State:** OH  
**Postal Code:** 44663

### A-3. Names and contact information under which the applicant will do business in Ohio

Provide the names and contact information the business entity will use for business in Ohio. This does not have to be an Ohio address and may be the same contact information given in A-2.

Name	Type	Address	Active?	Proof
Triple S Energy Management LLC	Official Name	2038 Oldtown Valley Rd SE New Philadelphia, OH 44663	Yes	File

### A-4. Names under which the applicant does business in North America

Provide all business names the applicant uses in North America, including the names provided in A-2 and A-3.

Name	Type	Address	Active?	Proof
Triple S Energy Management LLC	Official Name	2038 Oldtown Valley Rd SE New Philadelphia, OH 44663	Yes	File

### A-5. Contact person for regulatory matters



Sandy Carpenter  
2038 Oldtown Valley Rd SE  
New Philadelphia, OH 44663  
US  
scarpenter@triplesenergy.com  
3303396001

**A-6. Contact person for PUCO Staff use in investigating consumer complaints**

Sandy Carpenter  
2038 Oldtown Valley Rd SE  
New Philadelphia, OH 44663  
US  
scarpenter@triplesenergy.com  
3303396001

**A-7. Applicant's address and toll-free number for customer service and complaints**

<b>Phone:</b> 3303396001	<b>Extension (if applicable):</b>	<b>Country:</b> United States
<b>Fax:</b> 3305764141	<b>Extension (if applicable):</b>	<b>Street:</b> 2038 Oldtown Valley Rd SE
<b>Email:</b> scarpenter@triplesenergy.com		<b>City:</b> New Philadelphia
		<b>Province/State:</b> OH
		<b>Postal Code:</b> 44663

**A-8. Applicant's federal employer identification number**

26-4585783

**A-9. Applicant's form of ownership**

**Form of ownership:** Limited Liability Company (LLC)

**A-10. Identify current or proposed service areas**

Identify each service area in which the applicant is currently providing service or intends to provide service and identify each customer class that the applicant is currently serving or intends to serve.

**Service area selection**



## Public Utilities Commission

AEP Ohio

DP&L

Duke Energy Ohio

FirstEnergy - Cleveland Electric Illuminating

FirstEnergy - Ohio Edison

FirstEnergy - Toledo Edison

### Class of customer selection

Commercial

Industrial

Mercantile

Residential

### A-11. Start date

Indicate the approximate start date the applicant began/will begin offering services: 04-01-2009

### A-12. Principal officers, directors, and partners

Please provide all contacts that should be listed as an officer, director or partner.

Name	Email	Title	Address
Sandy Carpenter	scarpenter@triplesenergy.com	Owner	2038 Oldtown Valley Rd SE New Philadelphia, OH 44663 US

### A-13. Company history

Sandy Carpenter is the Owner and President of Triple S Energy Management LLC . She has 38 combined years of experience in the natural gas and electricity markets in the State of Ohio. Prior to forming Triple S Energy Management, LLC in 2009, Sandy held roles as Contract Administrator in the Natural Gas Marketing Department for Atwood Resources (a local Producer), and Secretary to the President of Atwood Resources , Regional Sales Manager for Belden & Blake Corporation (a local Producer) sales and management of over 1 BCF of natural gas, Senior Energy Manager for Virginia Power Energy, and Energy Consulting for Compass Energy. During her career, she was exposed to many aspects of the energy industry including Local Production, the Purchase aspect of natural gas, the sale of natural gas, online natural gas bidding platforms and consulting energy accounts. She is a member of Cambridge Who's Who when in 2011 was named the Professional of the year in Energy Consulting. Sandy manages



over 56,000 MW of Industrial and Commercial electric accounts and 450,000 Mcf Industrial and Commercial gas accounts.

#### **A-14. Secretary of State**

Secretary of State Link:

## **Section B: Applicant Managerial Capability and Experience**

### **B-1. Jurisdiction of operations**

List all jurisdictions in which the applicant or any affiliated interest of the applicant is certified, licensed, registered or otherwise authorized to provide retail natural gas service or retail/wholesale electric service as of the date of filing the application..

Jurisdiction of Operation: The only State of Jurisdiction is the State of Ohio

### **B-2. Experience and plans**

Describe the applicant's experience in providing the service(s) for which it is applying (e.g., number and type of customers served, utility service areas, amount of load, etc.). Include the plan for contracting with customers, providing contracted services, providing billing statements and responding to customer inquiries and complaints in accordance with Commission rules adopted pursuant to Sections 4928.10 and/or 4929.22 of the Ohio Revised Code.

Application Experience and Plan Description: Triple S Energy was created by Sandy Carpenter with 10 years of electric procurement which includes consulting energy services to small, medium, large and residential customers. My plans for contracting with customers is to offer an all price offer for electricity use through a channel of Electric Suppliers. As a Broker, Electric Suppliers have contracted with Triple S Energy as a Broker on Record. Suppliers will pay Triple S Energy a Broker Fee which is based on mills per KWH used by a customer on a monthly basis. Triple S Energy provides a detailed energy savings analysis to the customer on a monthly basis identifying the savings incurred by using my services

### **B-3. Disclosure of liabilities and investigations**

For the applicant, affiliate, predecessor of the applicant, or any principal officer of the applicant, describe all existing, pending or past rulings, judgments, findings, contingent liabilities, revocation of authority, regulatory investigations, judicial actions, or other formal or informal notices of violations, or any other matter related to competitive services in Ohio or equivalent services in another jurisdiction..

**B-4. Disclosure of consumer protection violations**

Has the applicant, affiliate, predecessor of the applicant, or any principal officer of the applicant been convicted or held liable for fraud or for violation of any consumer protection or antitrust laws within the past five years?

**No**

**B-5. Disclosure of certification, denial, curtailment, suspension or revocation**

Has the applicant, affiliate, or a predecessor of the applicant had any certification, license, or application to provide retail natural gas or retail/wholesale electric service denied, curtailed, suspended, revoked, or cancelled or been terminated or suspended from any of Ohio's Natural Gas or Electric Utility's Choice programs within the past two years?

**No**

## Section C: Applicant Financial Capability and Experience

**C-1. Financial reporting**

Provide a current link to the most recent Form 10-K filed with the Securities and Exchange Commission (SEC) or upload the form. If the applicant does not have a Form 10-K, submit the parent company's Form 10-K. If neither the applicant nor its parent is required to file Form 10-K, state that the applicant is not required to make such filings with the SEC and provide an explanation as to why it is not required.

Does not apply

**C-2. Financial statements**



## Public Utilities Commission

Provide copies of the applicant's two most recent years of audited financial statements, including a balance sheet, income statement, and cash flow statement. If audited financial statements are not available, provide officer certified financial statements. If the applicant has not been in business long enough to satisfy this requirement, provide audited or officer certified financial statements covering the life of the business. If the applicant does not have a balance sheet, income statement, and cash flow statement, the applicant may provide a copy of its two most recent years of tax returns with **social security numbers and bank account numbers redacted**.

If the applicant is unable to meet the requirement for two years of financial statements, the Staff reviewer may request additional financial information.

File(s) attached

### **C-3. Forecasted financial statements**

Provide two years of forecasted income statements **based solely on the applicant's anticipated business activities in the state of Ohio**.

Include the following information with the forecast: a list of assumptions used to generate the forecast; a statement indicating that the forecast is based solely on Ohio business activities only; and the name, address, email address, and telephone number of the preparer of the forecast.

The forecast may be in one of two acceptable formats: 1) an annual format that includes the current year and the two years succeeding the current year; or 2) a monthly format showing 24 consecutive months following the month of filing this application broken down into two 12-month periods with totals for revenues, expenses, and projected net incomes for both periods. Please show revenues, expenses, and net income (revenues minus total expenses) that is expected to be earned and incurred in **business activities only in the state of Ohio** for those periods.

If the applicant is filing for both an electric certificate and a natural gas certificate, please provide a separate and distinct forecast for revenues and expenses representing Ohio electric business activities in the application for the electric certificate and another forecast representing Ohio natural gas business activities in the application for the natural gas certificate.

File(s) attached

### **C-4. Credit rating**



## Public Utilities Commission

Provide a credit opinion disclosing the applicant's credit rating as reported by at least one of the following ratings agencies: Moody's Investors Service, Standard & Poor's Financial Services, Fitch Ratings or the National Association of Insurance Commissioners. If the applicant does not have its own credit ratings, substitute the credit ratings of a parent or an affiliate organization and submit a statement signed by a principal officer of the applicant's parent or affiliate organization that guarantees the obligations of the applicant. If an applicant or its parent does not have such a credit rating, enter 'Not Rated'.

This does not apply

### C-5. Credit report

Provide a copy of the applicant's credit report from Experian, Equifax, TransUnion, Dun and Bradstreet or a similar credit reporting organization. If the applicant is a newly formed entity with no credit report, then provide a personal credit report for the principal owner of the entity seeking certification. At a minimum, the credit report must show summary information and an overall credit score. **Bank/credit account numbers and highly sensitive identification information must be redacted.** If the applicant provides an acceptable credit rating(s) in response to C-4, then the applicant may select 'This does not apply' and provide a response in the box below stating that a credit rating(s) was provided in response to C-4.

File(s) attached

### C-6. Bankruptcy information

Within the previous 24 months, have any of the following filed for reorganization, protection from creditors or any other form of bankruptcy?

- Applicant
- Parent company of the applicant
- Affiliate company that guarantees the financial obligations of the applicant
- Any owner or officer of the applicant

No

### C-7. Merger information

Is the applicant currently involved in any dissolution, merger or acquisition activity, or otherwise participated in such activities within the previous 24 months?

No



## **C-8. Corporate structure**

Provide a graphical depiction of the applicant's corporate structure. Do not provide an internal organizational chart. The graphical depiction should include all parent holding companies, subsidiaries and affiliates as well as a list of all affiliate and subsidiary companies that supply retail or wholesale electricity or natural gas to customers in North America. If the applicant is a stand-alone entity, then no graphical depiction is required, and the applicant may respond by stating that it is a stand-alone entity with no affiliate or subsidiary companies.

Stand-alone entity with no affiliate or subsidiary companies

## **Section D: Applicant Technical Capacity**

### **D-1. Operations**

Power brokers/aggregators: Include details of the applicant's business operations and plans for arranging and/or aggregating for the supply of electricity to retail customers.

**Operations Description:** As a Power Broker, Triple S Energy's operation is to advise customers on a supply of electricity at a fair price for a specified term. Monthly monitoring of actual usage, kwh used, period of usage and savings are identified. Triple S Energy does not aggregate customers unless the customer has multiple locations within the same utility system. If this is the case, Triple S Energy would collect all utility invoices from the customer and solicit to potential electric suppliers for pricing.

### **D-2. Operations Expertise & Key Technical Personnel**

Given the operational nature of the applicant's business, provide evidence of the applicant's experience and technical expertise in performing such operations. Include the names, titles, e-mail addresses, and background of key personnel involved in the operations of the applicant's business.

File(s) attached

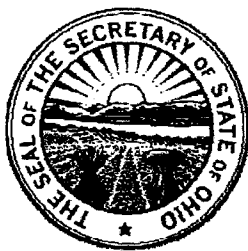






Public Utilities  
Commission

# Application Attachments



**Form 533A Prescribed by the:  
Ohio Secretary of State**

Central Ohio: (614) 466-3910  
Toll Free: (877) SOS-FILE (767-3453)

[www.sos.state.oh.us](http://www.sos.state.oh.us)  
[Busserv@sos.state.oh.us](mailto:Busserv@sos.state.oh.us)

**Expedite this form: (select one)**

Mail form to one of the following:

☐ Expedite PO Box 1390  
Columbus, OH 43216

\*\*\* Requires an additional fee of \$100 \*\*\*

☒ Non Expedite PO Box 670  
Columbus, OH 43216

**ARTICLES OF ORGANIZATION FOR A DOMESTIC  
LIMITED LIABILITY COMPANY**

**Filing Fee: \$125.00**

**(CHECK ONLY ONE (1) BOX)**

<p><b>(1) <input checked="" type="checkbox"/> Articles of Organization for Domestic For-Profit Limited Liability Company</b> (115-LCA) ORC 1705</p>	<p><b>(2) <input type="checkbox"/> Articles of Organization for Domestic Nonprofit Limited Liability Company</b> (115-LCA) ORC 1705</p>
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Name of limited liability company

TRIPLE "S" ENERGY MANAGEMENT, LLC.

Name must include one of the following words or abbreviations: "limited liability company," "limited," "LLC," "L.L.C.," "Ltd.," or "Ltd"

Effective Date

(Optional)

mm/dd/yyyy

(The legal existence of the limited liability company begins upon the filing of the articles or on a later date specified that is not more than ninety days after filing)

This limited liability company shall exist for

(Optional)

30 years from date of formation

Period of Existence

Purpose

(Optional)

Engage in energy business and carry on any activity for which persons may lawfully associate themselves.

☐ Check here if additional provisions are attached

## ORIGINAL APPOINTMENT OF AGENT

The undersigned authorized member(s), manager(s) or representative(s) of

TRIPLE "S" ENERGY MANAGEMENT, LLC.

Name of Limited Liability Company

hereby appoint the following to be Statutory Agent upon whom any process, notice or demand required or permitted by statute to be served upon the limited liability company may be served. The name and address of the agent is

Sandra K. Carpenter

Name of Agent

2038 Oldtown Valley Road S.E.

Mailing Address

New Philadelphia

City

Ohio

State

44663

Zip Code

☐ If the agent is an individual and using a P.O. Box, check this box to certify the agent is an Ohio resident.

## ACCEPTANCE OF APPOINTMENT

The undersigned, named herein as the statutory agent for

TRIPLE "S" ENERGY MANAGEMENT, LLC.

Name of Limited Liability Company

hereby acknowledges and accepts the appointment of agent for said limited liability company

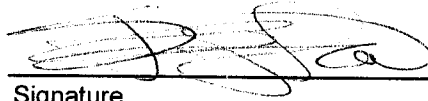


Agent's Signature

By signing and submitting this form to the Ohio Secretary of State, the undersigned hereby certifies that he or she has the requisite authority to execute this document on behalf of the limited liability company identified above.

**REQUIRED**

Articles and original appointment of agent must be authenticated (**signed**) by a member, manager or other representative.



Signature

3-16-09  
Date

Sandra K. Carpenter

Print Name

Signature

Date

Print Name

Signature

Date

Print Name

(See Instructions Below)

Search inquiry: (My company)

## CreditScore<sup>SM</sup> Report

as of: 02/15/21 12:39 ET

### Triple S Energy Management

**Address:** 2038 Oldtown Valley Rd SE  
New Phila, OH 44663-7833  
United States  
**Phone:** 330-339-6001  
**Website:** www.triplesenergy.com  
**Experian BIN:** 907942602

**Also is (or has been) operating as:**  
Triple S Energy Management LLC

**Key Personnel:** Owner: Sandra K Carpenter  
**SIC Code:** 8748-Business Consulting Services,  
Nec  
1711-Plumbing, Heating & A/C  
Contractors  
8741-Management Services  
**NAICS Code:** 541618-Other Management  
Consulting Services  
238220-Plumbing, Heating, And Air-  
Conditioning Contractors  
236110-Residential Building  
Construction  
**Experian File  
Established:** April 2009  
**Experian Years on File:** 12 Years  
**Years in Business:** 12 Years  
**Total Employees:** 1  
**Sales:** \$80,000

### Experian Business Credit Score

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**80**  
**Business Credit  
Score**



The objective of the Experian Business Credit Score is to predict payment behavior. High Risk means that there is a significant probability of delinquent payment. Low Risk means that there is a good probability of on-time payment.

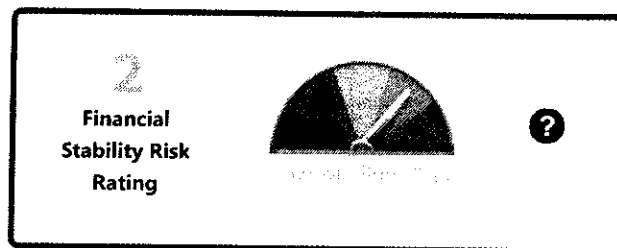
#### Key Score Factors:

- Number of recently active commercial accounts.
- Ratio of total bal to total high bal across all comm acct.
- Length of time on Experian's file.

**Business Credit Scores range from a low of 1 to high of 100 with this company receiving a score of 80.** Higher scores indicate lower risk. This score predicts the likelihood of serious credit delinquencies within the next 12 months. This score uses tradeline and collections information, public filings as well as other variables to predict future risk.

### Experian Financial Stability Risk Rating

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A Financial Stability Risk Rating of 2 indicates a 1.11% potential risk of severe financial distress within the next 12 months.

#### Key Rating Factors:

- Number of active commercial accounts.
- Risk associated with the company's industry sector.
- Risk associated with the business type.
- Balance to high credit ratio for commercial accounts.

**Financial Stability Risk Ratings range from a low of 1 to high of 5 with this company receiving a rating of 2.** Lower ratings indicate lower risk. Experian categorizes all businesses to fit within one of the five risk segments. This rating predicts the likelihood of payment default and/or bankruptcy within the next 12 months. This rating uses tradeline and collections information, public filings as well as other variables to predict future risk.

#### Credit Summary

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This location does not yet have an estimated Days Beyond Terms (**DBT**), or a Payment Trend Indicator. This is often the result of too few Payment **Tradelines**.

Please refer to Experian's '[www.BusinessCreditFacts.com](http://www.BusinessCreditFacts.com)' website for more information on establishing Payment Tradelines.

**Lowest 6 Month Balance:** \$41  
**Highest 6 Month Balance:** \$390  
**Current Total Account Balance:** \$0  
**Highest Credit Amount Extended:**

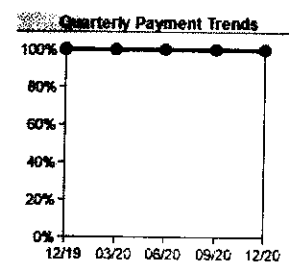
**Payment Tradelines** (see [charts](#)): 1  
**UCC Filings** 0

✓ **Businesses Scoring Worse:** 79%  
 ✓ **Bankruptcies:** 0  
 ✓ **Liens:** 0  
 ✓ **Judgments Filed:** 0  
 ✓ **Collections:** 0

#### Payment Trend Summary

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Insufficient information to produce  
**Monthly Payment Trends**  
 chart.



\*Percentage of on-time payments by quarter.

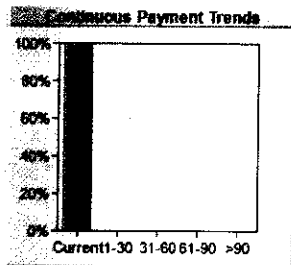
Insufficient information to produce

### Monthly Payment Trends

table.

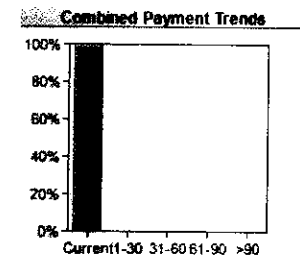
### Quarterly Payment Trends - Recent Activity

Date		Up to 30	31-60 DBT	61-90 DBT	>90 DBT
12/19	0%	0%	0%	0%	0%
03/20	0%	0%	0%	0%	0%
06/20	0%	0%	0%	0%	0%
09/20	100%	0%	0%	0%	0%
12/20	0%	0%	0%	0%	0%



\*Continuous distribution with DBT.

Insufficient information to produce  
Newly Reported Payment Trends  
chart.



\*Combined distribution with DBT.

## Special Offers on Triple S Energy Management from Experian

This report contains **Payment Tradelines** which do not appear on this CreditScore report but do appear on the ProfilePlus Report. Payment Tradelines play an important role in establishing the credit score for this business. Upgrade now to the enhanced ProfilePlus report for only \$15, and you'll see the Payment Tradeline detail, Inquiry breakouts, UCC Filings, and more.

Buy the enhanced report for \$15.00 more

**Is this your business? Start monitoring your business today for only \$135 more** (regularly \$189).

See additional trade and financial experiences available only in the premium report of our Business Credit Advantage subscriptions.

Sourced from the top 10 largest business card issuers and 12 of the top 15 commercial lenders. Plus, get unlimited access, change alerts, comprehensive insights not seen here about your financial and trade data along with its source, customized **Score Improvement Tips**, and detection of your business identity on the Dark Web.

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## **Triple “S” Energy Testimonials and Case Studies identified in my website: [www.triplesenergy.com](http://www.triplesenergy.com)**

### **Testimonials**

"We have worked with Sandy for many years, She has managed our utilities, provided insight to the markets; yearly cost savings and provided data to support utilities."

– **Rick Wooldridge - Wayne Dalton, a division of Overhead Door Corporation – Purchase Manager** – [rwooldridge@wayne-dalton.com](mailto:rwooldridge@wayne-dalton.com) – **Phone: 330-495-7340**

"Sandy Carpenter has consulted for me since 2011 and I can testify that she has delivered significant utility savings for the firms where I have been employed as a Facility Manager. Sandy is the consummate professional and her knowledge of the utility industry is extensive. In short, she just saves you money on your utilities and looks ahead for changes in the industry and plans accordingly for you; outstanding customer service. In the energy management field, Sandy is the consummate expert: she has detailed knowledge of the utility industry and guides you to the most cost saving company. Sandy will manage your utility accounts with the utmost efficiency. Highly Recommend!"

– **Rob Barrett, Facility Manager, Arts in Stark** – [rbarrett@artsinstark.com](mailto:rbarrett@artsinstark.com) – **Phone: 330-452-4096**

"Sandy takes a “can do” attitude and organized approach to her work. She approaches her work with energy, insightfulness and integrity. She is a good listener, relates well to others and exhibits exceptional customer focus."

– **Terri Rabicoff, MBA, Vice President at TRJB, Inc.** – **Phone: 602-741-4383**

Triple “S” Energy Management LLC has offered energy consulting services to the Pro Football Hall of Fame for many years. Triple “S” Energy offers expert advice, detailed knowledge of the utility industry, integrity, and honest recommendations. We are proud Triple “S” Energy is our part of our team.

– **Kevin Shiplett, Football Hall of Fame – Purchasing Manager** – [Kevin.shiplett@profootballhof.com](mailto:Kevin.shiplett@profootballhof.com) – **Phone: 330-456-8207**

### **Case Studies**

## **Pro Football Hall of Fame \$155,065 in electrical savings**

The Pro Football Hall of Fame in Canton, Ohio, has been a national historical institution since 1963. The Pro Football Hall of Fame has partnered with Triple “S” Energy for many years to ensure they receive the lowest cost as it relates to purchasing natural gas and electricity. Since electric deregulation began Triple “S” Energy has worked extremely hard to secure significant cost savings. In soliciting proposals, and in turn signing for electricity and natural gas with another provider, Triple “S” Energy has saved the Pro Football Hall of Fame \$155,065 in electric and natural costs from September, 2013 — December, 2019 for the main building at the Hall of Fame location.

## Case Studies (Continued)

**Local School System** benefits from Deregulation on AEPOhio (Updated April 1, 2020)  
**Triway Local School System**, located in Wooster, Ohio (Wayne County) has worked with Triple “S” Energy Management since 2011 after pursuing them about reducing their overall electric cost on AEPOhio. Triway has multiple meters that continue to enjoy significant benefits from deregulation on AEPOhio by working with Triple “S” Energy to accomplish and capture the best savings to assist with the reduction of their total cost of electricity. Triple “S” Energy has been able to save Triway Local School System a total of \$262,964.00 from Sept, 2011 — March, 2020 on their overall electricity costs.

**Non-Profit Organization** Benefits from Energy Management (Updated April 1, 2020)  
**The Cultural Center** located in Canton, Ohio has partnered with Triple “S” Energy for many years to manage their energy needs including the success of the installation of a 50.76KW Solar System. This system was installed on the roof of the Cultural Center Parking Deck and will supply a small percentage of power to the 330,000 sq. ft. building. Since the system was installed, it has produced 382,680 Kwh and has avoided 267,876 kg CO2 emissions. The system has provided about 6% of the facilities usage. To see more information on the solar system, please visit [www.artsinstark.com/cultural-center-for-the-arts/](http://www.artsinstark.com/cultural-center-for-the-arts/). Triple “S” Energy has saved the Cultural Center a total of \$43,331.00 from January, 2017 to March, 2020 by reducing their electricity rate on AEP.

**Wooster, Ohio Company** saves on Electric Deregulation (Updated April 1, 2020)  
Through the efforts of Triple “S” Energy Management, a Wooster Company has saved \$1,552,687.00 from October, 2011 — January, 2020 by enrolling with a 3rd party supplier for generation services on AEP Ohio. Triple “S” Energy Management also offered a Program called Demand Response which is the reduction of electric usage in response to electric grid emergencies. The Company has agreed to participate in this program on a year to year basis. By agreeing to reduce their usage during a specified critical day, the business is then compensated with an incentive payment. Since 2011, the company has received compensation checks totaling \$522,700.00 for their participation in the Demand Response Program.

**G&S Titanium** in Wooster, Ohio saves on Electric Deregulation and Renewable Energy (Updated April 1, 2020)  
G&S Titanium are Metal Wire Drawing Specialists who manufacture most grades of titanium in the form of round and hex bars, fastener wire, spring wire and precision ground medical bars. Through the efforts of Triple “S” Energy Management , G&S Titanium has enrolled the manufacturing facility with a 3rd party supplier for generation and transmission on AEP Ohio. G&S Titanium has saved \$98,000.00 Year Over Year Savings since 2013.

With the assistance of Triple “S” Energy and Vision, G&S Titanium successfully installed a 64.86 Ground Solar Array to generate power for their office and manufacturing facility.

# Triple “S” Energy Management LLC

Forecasted Income Statement based solely upon Ohio Electric Brokering activities

	Current Year (Estimated) 2021	Forecast Year 1 2022
Revenues		
Ohio Electric Brokering Revenue	<u>\$185,000</u>	<u>\$200,000</u>
Expenses		
Total Expenses	<u>\$ 35,000</u>	<u>\$ 35,000</u>
Taxes		
Provision for Income Taxes	<u>\$ 48,000</u>	<u>\$ 48,000</u>
Net Income	<u>\$102,000</u>	<u>\$117,000</u>

Forecast prepared by  
Sandy Carpenter  
Owner  
2038 Oldtown Valley Road SE  
New Philadelphia, Ohio 44663  
Phone: 330-339-6001  
Email: [scarpenter@triplesenergy.com](mailto:scarpenter@triplesenergy.com)

Assumptions: Current year Revenue is based on sales from 2020. Usage is down due to the impact of Covid 19. Revenue estimate for 2022 is based on an increase of around 9% due to a number of new customer enrollments in January and February, 2021 that will carry over into 2022. Expenses and Taxes are the same from year to year.

# **Competitive Retail Electric Service Affidavit**

County of Tuscarawas :

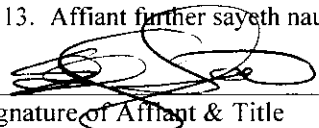
State of Ohio :

Sandy Carpenter, Affiant, being duly sworn/affirmed, hereby states that:

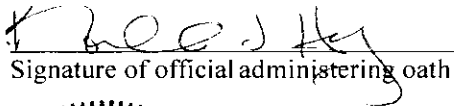
1. The information provided within the certification or certification renewal application and supporting information is complete, true, and accurate to the best knowledge of affiant, and that it will amend its application while it is pending if any substantial changes occur regarding the information provided.
2. The applicant will timely file an annual report of its intrastate gross receipts, gross earnings, and sales of kilowatt-hours of electricity pursuant to Sections 4905.10(A), 4911.18(A), and 4928.06(F), Ohio Revised Code.
3. The applicant will timely pay any assessment made pursuant to Sections 4905.10, 4911.18, and 4928.06(F), Ohio Revised Code.
4. The applicant will comply with all applicable rules and orders adopted by the Public Utilities Commission of Ohio pursuant to Title 49, Ohio Revised Code.
5. The applicant will cooperate fully with the Public Utilities Commission of Ohio, and its Staff on any utility matter including the investigation of any consumer complaint regarding any service offered or provided by the applicant.
6. The applicant will fully comply with Section 4928.09, Ohio Revised Code regarding consent to the jurisdiction of Ohio Courts and the service of process.
7. The applicant will comply with all state and/or federal rules and regulations concerning consumer protection, the environment, and advertising/promotions.
8. The applicant will use its best efforts to verify that any entity with whom it has a contractual relationship to purchase power is in compliance with all applicable licensing requirements of the Federal Energy Regulatory Commission and the Public Utilities Commission of Ohio.
9. The applicant will cooperate fully with the Public Utilities Commission of Ohio, the electric distribution companies, the regional transmission entities, and other electric suppliers in the event of an emergency condition that may jeopardize the safety and reliability of the electric service in accordance with the emergency plans and other procedures as may be determined appropriate by the Commission.
10. If applicable to the service(s) the applicant will provide, it will adhere to the reliability standards of (1) the North American Electric Reliability Council (NERC), (2) the appropriate regional reliability council(s), and (3) the Public Utilities Commission of Ohio.
11. The Applicant will inform the Public Utilities Commission of Ohio of any material change to the information supplied in the application within 30 days of such material change, including any change in contact person for regulatory purposes or contact person for Staff use in investigating consumer complaints.

12. The facts set forth above are true and accurate to the best of his/her knowledge, information, and belief and that he/she expects said applicant to be able to prove the same at any hearing hereof.

13. Affiant further sayeth naught.

 Owner/CEO  
Signature of Affiant & Title

Sworn and subscribed before me this 17 day of FEBRUARY, 2021  
Month Year

  
Signature of official administering oath

Kellie J. Huey - Notary  
Print Name and Title



My commission expires on 6-29-21

Kellie J. Huey  
Notary Public, State of Ohio  
Commission Expires: 6-29-21

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

## U.S. Income Tax Return for an S Corporation

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](http://www.irs.gov/Form1120S) for instructions and the latest information.

CLIENT'S COPY

2018

For calendar year 2018 or tax year beginning ending

A Selection effective date <b>01/01/17</b>	TYPE OR PRINT	Name <b>TRIPLE S ENERGY MANAGEMENT LLC</b>	D Employer identification number <b>26-4585783</b>
B Business activity code number (see instructions) <b>561490</b>		Number, street, and room or suite no. if a P.O. box, see instructions. <b>2038 OLDTOWN VALLEY RD SE</b>	E Date incorporated <b>01/01/2017</b>
C Check if Sch. M-3 attached <input type="checkbox"/>		City or town, state or province, country, and ZIP or foreign postal code <b>NEW PHILADELPHIA OH 44663</b>	F Total assets (see instructions) \$

G Is the corporation electing to be an S corporation beginning with this tax year? ☐ Yes ☒ No If "Yes," attach Form 2553 if not already filedH Check if: (1) ☐ Final return (2) ☐ Name change (3) ☐ Address change (4) ☐ Amended return (5) ☐ S election termination or revocationI Enter the number of shareholders who were shareholders during any part of the tax year **1**

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	<b>236,886</b>	1c	<b>236,886</b>
	b Returns and allowances	1b		2	
	c Balance. Subtract line 1b from line 1a			3	<b>236,886</b>
	2 Cost of goods sold (attach Form 1125-A)			4	
	3 Gross profit. Subtract line 2 from line 1c			5	
	4 Net gain (loss) from Form 4797, line 17 (attach Form 4797)			6	<b>236,886</b>
Deductions (see instructions for limitations)	5 Other income (loss) (see instructions—attach statement)			7	<b>72,000</b>
	6 Total income (loss). Add lines 3 through 5			8	<b>14,625</b>
	7 Compensation of officers (see instructions—attach Form 1125-E)			9	
	8 Salaries and wages (less employment credits)			10	
	9 Repairs and maintenance			11	
	10 Bad debts			12	<b>7,182</b>
	11 Rents			13	
	12 Taxes and licenses			14	
	13 Interest (see instructions)			15	
	14 Depreciation not claimed on Form 1125-A or elsewhere on return (attach Form 4562)			16	<b>4,405</b>
	15 Depletion (Do not deduct oil and gas depletion.)			17	
Tax and Payments	16 Advertising			18	
	17 Pension, profit-sharing, etc., plans			19	<b>33,478</b>
	18 Employee benefit programs			20	<b>131,690</b>
	19 Other deductions (attach statement) <b>SEE STMT 1</b>			21	<b>105,196</b>
	20 Total deductions. Add lines 7 through 19				
	21 Ordinary business income (loss). Subtract line 20 from line 6				
	22a Excess net passive income or LIFO recapture tax (see instructions)	22a		22c	
	b Tax from Schedule D (Form 1120S)	22b			
	c Add lines 22a and 22b (see instructions for additional taxes)				
	23a 2018 estimated tax payments and 2017 overpayment credited to 2018	23a		23e	
b Tax deposited with Form 7004	23b		24		
c Credit for federal tax paid on fuels (attach Form 4136)	23c		25		
d Refundable credit from Form 8827, line 8c	23d		26		
e Add lines 23a through 23d			27		
24 Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/>					
25 Amount owed. If line 23e is smaller than the total of lines 22c and 24, enter amount owed					
26 Overpayment. If line 23e is larger than the total of lines 22c and 24, enter amount overpaid					
27 Enter amount from line 26: Credited to 2019 estimated tax <input checked="" type="checkbox"/> Refunded <input type="checkbox"/>					

Sign  
HereUnder 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)? ☒ Yes ☐ NoSignature of officer **SANDRA K CARPENTER**

Date

Title

MEMBER

Paid  
Preparer  
Use Only

Print/Type preparer's name

**ALAN J. BAMBECK, CPA**

Preparer's signature

**ALAN J. BAMBECK, CPA**

Date

**02/28/19**Check ☐ if

self-employed

PTIN

**P00005578**

Firm's name

**BAMBECK & ASSOCIATES LLC**

Firm's EIN

**51-0659924**

Firm's address

**830 WEST STATE STREET****NEWCOMERSTOWN, OH****43832**

Phone no.

**740-498-6984**

For Paperwork Reduction Act Notice, see separate instructions.

Form 1120S (2018)

**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 ▶ <b>CONSULTING</b> b Product or service ▶ <b>ENERGY</b>		
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		<b>X</b>
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		<b>X</b>

(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 any) 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		<b>X</b>

(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

5 a 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. (i) Total shares of restricted stock ▶ (ii) Total shares of non-restricted stock ▶	<b>X</b>
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. (i) Total shares of stock outstanding at the end of the tax year ▶ (ii) Total shares of stock outstanding if all instruments were executed ▶	<b>X</b>
6 Has this corporation filed, or is it required to file, Form 8918, Material Advisor Disclosure Statement, to provide information on any reportable transaction? ▶ <input type="checkbox"/>	<b>X</b>
7 Check this box if the corporation issued publicly offered debt instruments with original issue discount If checked, the corporation may have to file Form 8281, Information Return for Publicly Offered Original Issue Discount Instruments. ▶ <input type="checkbox"/>	
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	<b>X</b>
10 Does the corporation satisfy one of the following conditions and the corporation doesn't own a pass-through entity with current year, or prior year carryover, excess business interest expense? See instructions a The corporation's aggregate average annual gross receipts (determined under section 448(c)) for the 3 tax years preceding the current tax year don't exceed \$25 million, and the corporation isn't a tax shelter; or b The corporation only has business interest expense from (1) an electing real property trade or business, (2) an electing farming business, or (3) certain utility businesses under section 163(j)(7). If "No," complete and attach Form 8990.	<b>X</b>
11 Does the corporation satisfy both of the following conditions? 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.	<b>X</b>



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

	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 ▶ \$		X
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 2018 that would require it to file Form(s) 1099?	X	
b If "Yes," did the corporation file or will it file required Forms 1099?		X
15 Is the corporation attaching Form 8996 to certify as a Qualified Opportunity Fund?		X
If "Yes," enter the amount from Form 8996, line 13 ▶ \$		

**Schedule K Shareholders' Pro Rata Share Items**

		Total amount	
Income (Loss)	1 Ordinary business income (loss) (page 1, line 21)	1	105,196
	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 1120S))	7	
Deductions	8a Net long-term capital gain (loss) (attach Schedule D (Form 1120S))	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	
Credits	10 Other income (loss) (see instructions) Type ▶	10	
	11 Section 179 deduction (attach Form 4562)	11	
	12a Charitable contributions	12a	
	b Investment interest expense	12b	
	c Section 59(e)(2) expenditures (1) Type ▶ (2) Amount ▶	12c(2)	
	d Other deductions (see instructions) Type ▶	12d	
	13a Low-income housing credit (section 42(j)(5))	13a	
Foreign Transactions	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	
	14a Name of country or U.S. possession ▶	14b	
	b Gross income from all sources	14c	
	c Gross income sourced at shareholder level	14d	
	d Section 951A category	14e	
e Foreign branch category	14f		
f Passive category	14g		
g General category	14h		
h Other (attach statement)	14i		
i Deductions allocated and apportioned at shareholder level	14j		
j Interest expense	14k		
k Other	14l		
l Deductions allocated and apportioned at corporate level to foreign source income	14m		
m Section 951A category	14n		
n Foreign branch category	14o		
o Passive category	14p		
p General category	14q		
q Other (attach statement)			
r Other information			
p Total foreign taxes (check one): ▶ <input type="checkbox"/> Paid <input type="checkbox"/> Accrued			
q Reduction in taxes available for credit (attach statement)			
r Other foreign tax information (attach statement)			

**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		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 14p (itemize):		6 Deductions included on Schedule K, lines 1 through 12 and 14p, not charged against book income this year (itemize):	
a Depreciation \$		a Depreciation \$	
b Travel and entertainment \$		7 Add lines 5 and 6	
4 Add lines 1 through 3		8 Income (loss) (Schedule K, line 18). Line 4 less line 7	

**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	87,413			
2 Ordinary income from page 1, line 21	105,196			
3 Other additions				
4 Loss from page 1, line 21	( )			
5 Other reductions <b>STMT 3</b>	( 834 )			
6 Combine lines 1 through 5	191,775			
7 Distributions				
8 Balance at end of tax year. Subtract line 7 from line 6	191,775			

Form 1120S (2018)

<b>Schedule K Shareholders' Pro Rata Share Items (continued)</b>		<b>Total amount</b>
<b>Alternative Minimum Tax (AMT) Items</b>	<b>15a</b> Post-1986 depreciation adjustment	<b>15a</b>
	<b>b</b> Adjusted gain or loss	<b>15b</b>
	<b>c</b> Depletion (other than oil and gas)	<b>15c</b>
	<b>d</b> Oil, gas, and geothermal properties – gross income	<b>15d</b>
	<b>e</b> Oil, gas, and geothermal properties – deductions	<b>15e</b>
	<b>f</b> Other AMT items (attach statement)	<b>15f</b>
<b>Items Affecting Shareholder Basis</b>	<b>16a</b> Tax-exempt interest income	<b>16a</b>
	<b>b</b> Other tax-exempt income	<b>16b</b>
	<b>c</b> Nondeductible expenses	<b>16c</b> <b>834</b>
	<b>d</b> Distributions (attach statement if required) (see instructions)	<b>16d</b>
	<b>e</b> Repayment of loans from shareholders	<b>16e</b>
<b>Other Information</b>	<b>17a</b> Investment income	<b>17a</b>
	<b>b</b> Investment expenses	<b>17b</b>
	<b>c</b> Dividend distributions paid from accumulated earnings and profits	<b>17c</b>
	<b>d</b> Other items and amounts (attach statement) <b>SEE STATEMENT 2</b>	
<b>Reconciliation</b>	<b>18</b> 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 14p	<b>18</b>

<b>Schedule L Balance Sheets per Books</b>		<b>Beginning of tax year</b>		<b>End of tax year</b>	
<b>Assets</b>		<b>(a)</b>	<b>(b)</b>	<b>(c)</b>	<b>(d)</b>
<b>1</b>	Cash				
<b>2a</b>	Trade notes and accounts receivable				
<b>b</b>	Less allowance for bad debts	(		(	
<b>3</b>	Inventories				
<b>4</b>	U.S. government obligations				
<b>5</b>	Tax-exempt securities (see instructions)				
<b>6</b>	Other current assets (attach statement)				
<b>7</b>	Loans to shareholders				
<b>8</b>	Mortgage and real estate loans				
<b>9</b>	Other investments (attach statement)				
<b>10a</b>	Buildings and other depreciable assets				
<b>b</b>	Less accumulated depreciation	(		(	
<b>11a</b>	Depletable assets				
<b>b</b>	Less accumulated depletion	(		(	
<b>12</b>	Land (net of any amortization)				
<b>13a</b>	Intangible assets (amortizable only)				
<b>b</b>	Less accumulated amortization	(		(	
<b>14</b>	Other assets (attach statement)				
<b>15</b>	<b>Total assets</b>				
<b>Liabilities and Shareholders' Equity</b>					
<b>16</b>	Accounts payable				
<b>17</b>	Mortgages, notes, bonds payable in less than 1 year				
<b>18</b>	Other current liabilities (attach statement)				
<b>19</b>	Loans from shareholders				
<b>20</b>	Mortgages, notes, bonds payable in 1 year or more				
<b>21</b>	Other liabilities (attach statement)				
<b>22</b>	Capital stock				
<b>23</b>	Additional paid-in capital				
<b>24</b>	Retained earnings				
<b>25</b>	Adjustments to shareholders' equity (attach statement)				
<b>26</b>	Less cost of treasury stock	(		(	
<b>27</b>	<b>Total liabilities and shareholders' equity</b>				

671118

Final K-1

Amended K-1

OMB No. 1545-0123

**Schedule K-1  
(Form 1120S)**Department of the Treasury  
Internal Revenue Service**2018**

For calendar year 2018, or tax year

beginning

ending

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

▶ See back of form and separate instructions.

**Part I Information About the Corporation****A** Corporation's employer identification number**26-4585783****B** Corporation's name, address, city, state, and ZIP code**TRIPLE S ENERGY MANAGEMENT LLC****2038 OLDTOWN VALLEY RD SE****NEW PHILADELPHIA OH 44663****C** IRS Center where corporation filed return**E-FILE****Shareholder****SANDRA K CARPENTER****2038 OLDTOWN VALLEY RD SE****NEW PHILADELPHIA****OH 44663****F** Shareholder's percentage of stock  
ownership for tax year**100.000000 %****Part III Shareholder's Share of Current Year Income,  
Deductions, Credits, and Other Items**

<b>1</b>	Ordinary business income (loss)	<b>13</b>	Credits
	<b>105,196</b>		
<b>2</b>	Net rental real estate income (loss)		
<b>3</b>	Other net rental income (loss)		
<b>4</b>	Interest income		
<b>5a</b>	Ordinary dividends		
<b>5b</b>	Qualified dividends	<b>14</b>	Foreign transactions
<b>6</b>	Royalties		
<b>7</b>	Net short-term capital gain (loss)		
<b>8a</b>	Net long-term capital gain (loss)		
<b>8b</b>	Collectibles (28%) gain (loss)		
<b>8c</b>	Unrecaptured section 1250 gain		
<b>9</b>	Net section 1231 gain (loss)		
<b>10</b>	Other income (loss)	<b>15</b>	Alternative minimum tax (AMT) items
<b>11</b>	Section 179 deduction	<b>16</b>	Items affecting shareholder basis
		<b>C*</b>	<b>834</b>
<b>12</b>	Other deductions		
		<b>17</b>	Other information
		<b>V*</b>	<b>105,196</b>
		<b>W*</b>	<b>86,625</b>

\* See attached statement for additional information.

For IRS Use Only

**Section 199A Information Worksheet**Form **1120S****2018**

For calendar year 2018 or tax year beginning

, ending

Name

Employer Identification Number

**TRIPLE S ENERGY MANAGEMENT LLC****26-4585783****Activity Description**

Column A ..... **PAGE 1 ACTIVITY**

Column B ..... \_\_\_\_\_

Column C ..... \_\_\_\_\_

Column D ..... \_\_\_\_\_

Column E ..... \_\_\_\_\_

	Column A	Column B	Column C	Column D	Column E
Specified service business	NO				
Ordinary business income (loss)	105,196				
Net rental real estate income (loss)					
Other net rental income (loss)					
Royalties					
<b>Section 199A income</b>	<b>105,196</b>				
<b>Section 199A W-2 wages</b>	<b>86,625</b>				
<b>Section 199A unadjusted basis</b>					

**Other Information:**

QBI allocable to cooperative pmnts received

W-2 wages allocable to qualified payments

Cooperative QPAI deduction to patron

26-4585783

**Federal Statements**

FYE: 12/31/2018

**Statement 1 - Form 1120S, Page 1, Line 19 - Other Deductions**

<u>Description</u>	<u>Amount</u>
CONTRACT LABOR	\$ 1,303
SUPPLIES	4,096
POSTAGE	629
PHONE	1,394
CELL PHONE	3,024
INTERNET	4,083
DUES AND SUBSCRIPTIONS	6,765
CONTINUING EDUCATION	3,270
PROFESSIONAL SERVICES	2,515
REFERRALS	200
AUTO	1,908
INSURANCE - GENERAL LIABILITY	1,703
INSURANCE - WORKERS COMP	219
BANK SERVICE CHARGE	17
FEES	323
PRINTING	1,195
50% OF MEALS	834
TOTAL	\$ <u>33,478</u>

**Statement 2 - Form 1120S, Page 4, Schedule K, Line 17d - Other Items and Amounts**

<u>Description</u>	<u>Amount</u>
SECTION 199A INFORMATION - SEE ATTACHED WRK	

**Statement 3 - Form 1120S, Page 5, Schedule M-2, Line 5(a) - Other Reductions**

<u>Description</u>	<u>Amount</u>
TRAVEL & ENTERTAINMENT	\$ 834
TOTAL	\$ <u>834</u>

264585783 Triple S Energy Management LLC

2/28/2019 9:49 AM

26-4585783

# Federal Statements

FYE: 12/31/2018

Sandra K. Carpenter

## Schedule K-1, Box 16, Code C - Nondeductible Expenses

Description	Shareholder Amount
PAGE 1 MEALS	\$ 834
TOTAL	\$ 834

Form <b>1096</b> Department of the Treasury Internal Revenue Service	<b>Annual Summary and Transmittal of U.S. Information Returns</b>	OMB No. 1545-0108  <div style="font-size: 2em; font-weight: bold;">2018</div>
FILER'S name Triple S Energy Management LLC  Street address (including room or suite number) 2038 Oldtown Valley Rd SE  City or town, state or province, country, and ZIP or foreign postal code New Philadelphia, OH 44663		
Name of person to contact		Telephone number
Email address		Fax number
<div style="float: right; text-align: right;"> <b>For Official Use Only</b>  </div>		
1 Employer identification number 26-4585783	2 Social security number	3 Total number of forms 2
4 Federal income tax withheld \$		5 Total amount reported with this Form 1096 \$ 2397.75
6 Enter an "X" in only one box below to indicate the type of form being filed.		
7 Form 1099-MISC with NEC in box 7, check <input checked="" type="checkbox"/>		
W-2G 32	1097-BTC 50	1098 81
1098-C 78	1098-E 84	1098-Q 74
1098-T 83	1099-A 80	1099-B 79
1099-C 85	1099-CAP 73	1099-DIV 91
1099-G 86	1099-INT 92	1099-K 10
1099-LS 18	1099-LTC 93	1099-MISC 95
1099-OLD 96	1099-PATR 97	1099-Q 31
1099-QA 1A	1099-R 98	1099-S 75
1099-SA 94	1099-SB 43	3921 25
3922 26	5498 28	5498-ESA 72
5498-QA 2A	5498-SA 27	5498-SB 27

**Return this entire page to the Internal Revenue Service. Photocopies are not acceptable.**

Under penalties of perjury, I declare that I have examined this return and accompanying documents and, to the best of my knowledge and belief, they are true, correct, and complete.

Signature ▶

Title ▶

Date ▶ 01/10/19

## Instructions

**Future developments.** For the latest information about developments related to Form 1096, such as legislation enacted after it was published, go to [www.irs.gov/Form1096](http://www.irs.gov/Form1096).

**Reminder.** The only acceptable method of electronically filing information returns listed on this form in box 6 with the IRS is through the FIRE system. See Pub. 1220.

**Purpose of form.** Use this form to transmit paper Forms 1097, 1098, 1099, 3921, 3922, 5498, and W-2G to the IRS.

**Caution:** If you are required to file 250 or more information returns of any one type, you must file electronically. If you are required to file electronically but fail to do so, and you do not have an approved waiver, you may be subject to a penalty. For more information, see part F in the 2018 General Instructions for Certain Information Returns.

Forms 1099-QA and 5498-QA can be filed on paper only, regardless of the number of returns.

**Who must file.** Any person or entity who files any of the forms shown in line 6 above must file Form 1096 to transmit those forms to the IRS.

Enter the filer's name, address (including room, suite, or other unit number), and taxpayer identification number (TIN) in the spaces provided on the form. The name, address, and TIN of the filer on this form must be the same as those you enter in the upper left area of Forms 1097, 1098, 1099, 3921, 3922, 5498, or W-2G.

**When to file.** File Form 1096 as follows.

- With Forms 1097, 1098, 1099, 3921, 3922, or W-2G, file by February 28, 2019.

**Caution:** We recommend you file Form 1099-MISC, as a stand-alone shipment, by January 31, 2019, if you are reporting nonemployee compensation (NEC) in box 7. Also, check box 7 above.

- With Forms 5498, file by May 31, 2019.

## Where To File

Send all information returns filed on paper with Form 1096 to the following.

If your principal business, office or agency, or legal residence in the case of an individual, is located in

Use the following three-line address

Alabama, Arizona, Arkansas, Connecticut, Delaware, Florida, Georgia, Kentucky, Louisiana, Maine, Massachusetts, Mississippi, New Hampshire, New Jersey, New Mexico, New York, North Carolina, Ohio, Pennsylvania, Rhode Island, Texas, Vermont, Virginia, West Virginia

Department of the Treasury  
Internal Revenue Service Center  
Austin, TX 73301



Form **1120-S**Department of the Treasury  
Internal Revenue Service**U.S. Income Tax Return for an S Corporation**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](http://www.irs.gov/Form1120S) for instructions and the latest information.**COPY**  
2019

OMB No. 1545-0047

For calendar year 2019 or tax year beginning ending

A Selection effective date <b>01/01/17</b>	TYPE OR PRINT	Name <b>TRIPLE S ENERGY MANAGEMENT LLC</b>	D Employer identification number <b>26-4585783</b>
B Business activity code number (see instructions) <b>561490</b>		Number, street, and room or suite no. If a P.O. box, see instructions. <b>2038 OLDTOWN VALLEY RD SE</b>	E Date incorporated <b>01/01/2017</b>
C Check if Sch. M-3 attached <input type="checkbox"/>		City or town, state or province, country, and ZIP or foreign postal code <b>NEW PHILADELPHIA OH 44663</b>	F Total assets (see instructions) <b>\$ 64,000</b>

- G Is the corporation electing to be an S corporation beginning with this tax year? ☐ Yes ☒ No If "Yes," attach Form 2553 if not already filed
- H Check if: (1) ☐ Final return (2) ☐ Name change (3) ☐ Address change (4) ☐ Amended return (5) ☐ S election termination or revocation
- I Enter the number of shareholders who were shareholders during any part of the tax year **1**
- 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	<b>254,235</b>	
	b Returns and allowances	1b		
	c Balance. Subtract line 1b from line 1a	1c		<b>254,235</b>
	2 Cost of goods sold (attach Form 1125-A)	2		
	3 Gross profit. Subtract line 2 from line 1c	3		<b>254,235</b>
	4 Net gain (loss) from Form 4797, line 17 (attach Form 4797)	4		
Deductions (see instructions for limitations)	5 Other income (loss) (see instructions—attach statement)	5		
	6 Total income (loss). Add lines 3 through 5	6		<b>254,235</b>
	7 Compensation of officers (see instructions—attach Form 1125-E)	7		<b>79,500</b>
	8 Salaries and wages (less employment credits)	8		<b>15,000</b>
	9 Repairs and maintenance	9		
	10 Bad debts	10		
	11 Rents	11		
	12 Taxes and licenses	12		<b>8,016</b>
	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		<b>4,972</b>
	17 Pension, profit-sharing, etc., plans	17		<b>4,000</b>
	18 Employee benefit programs	18		
	19 Other deductions (attach statement)	19	<b>SEE STMT 1</b>	<b>60,386</b>
20 Total deductions. Add lines 7 through 19	20		<b>171,874</b>	
21 Ordinary business income (loss). Subtract line 20 from line 6	21		<b>82,361</b>	
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 2019 estimated tax payments and 2018 overpayment credited to 2019	23a		
	b Tax deposited with Form 7004	23b		
	c Credit for federal tax paid on fuels (attach Form 4136)	23c		
	d Reserved for future use	23d		
	e Add lines 23a through 23d	23e		
	24 Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/>	24		
	25 Amount owed. If line 23e is smaller than the total of lines 22c and 24, enter amount owed	25		
26 Overpayment. If line 23e is larger than the total of lines 22c and 24, enter amount overpaid	26			
27 Enter amount from line 26: Credited to 2020 estimated tax	27			

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. ☒ Yes ☐ No**Sign Here**Signature of officer **SANDRA K CARPENTER**

Date

**MEMBER**

Title

**Paid Preparer Use Only**

Print/Type preparer's name

**ALAN J. BAMBECK, CPA**

Preparer's signature

**ALAN J. BAMBECK, CPA**

Date

**03/23/20**Check ☐ if

self-employed

PTIN

**P00005578**Firm's name **BAMBECK & ASSOCIATES LLC**Firm's EIN **51-0659924**Firm's address **830 WEST STATE STREET  
NEWCOMERSTOWN, OH 43832**Phone no **740-498-6984**



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

	Yes	No
<b>12</b> 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? If "Yes," enter the amount of principal reduction ▶ \$		X
<b>13</b> During the tax year, was a qualified subchapter S subsidiary election terminated or revoked? If "Yes," see instructions	X	
<b>14a</b> Did the corporation make any payments in 2019 that would require it to file Form(s) 1099? b If "Yes," did the corporation file or will it file required Forms 1099?	X	
<b>15</b> Is the corporation attaching Form 8996 to certify as a Qualified Opportunity Fund? If "Yes," enter the amount from Form 8996, line 14 ▶ \$		X

**Schedule K Shareholders' Pro Rata Share Items**

		Total amount	
Income (Loss)	<b>1</b> Ordinary business income (loss) (page 1, line 21)	<b>1</b>	<b>82,361</b>
	<b>2</b> Net rental real estate income (loss) (attach Form 8825)	<b>2</b>	
	<b>3a</b> Other gross rental income (loss)	<b>3a</b>	
	<b>3b</b> Expenses from other rental activities (attach statement)	<b>3b</b>	
	<b>3c</b> Other net rental income (loss). Subtract line 3b from line 3a	<b>3c</b>	
	<b>4</b> Interest income	<b>4</b>	
	<b>5</b> Dividends: <b>a</b> Ordinary dividends <b>b</b> Qualified dividends	<b>5a</b> <b>5b</b>	
	<b>6</b> Royalties	<b>6</b>	
	<b>7</b> Net short-term capital gain (loss) (attach Schedule D (Form 1120-S))	<b>7</b>	
	<b>8a</b> Net long-term capital gain (loss) (attach Schedule D (Form 1120-S))	<b>8a</b>	
<b>8b</b> Collectibles (28%) gain (loss)	<b>8b</b>		
<b>8c</b> Unrecaptured section 1250 gain (attach statement)	<b>8c</b>		
<b>9</b> Net section 1231 gain (loss) (attach Form 4797)	<b>9</b>		
<b>10</b> Other income (loss) (see instructions) Type ▶	<b>10</b>		
Deductions	<b>11</b> Section 179 deduction (attach Form 4562)	<b>11</b>	
	<b>12a</b> Charitable contributions SEE STMT 2	<b>12a</b>	<b>3,000</b>
	<b>12b</b> Investment interest expense	<b>12b</b>	
	<b>12c(2)</b> Section 59(e)(2) expenditures (1) Type ▶ (2) Amount ▶	<b>12c(2)</b>	
<b>12d</b> Other deductions (see instructions) Type ▶	<b>12d</b>		
Credits	<b>13a</b> Low-income housing credit (section 42(j)(5))	<b>13a</b>	
	<b>13b</b> Low-income housing credit (other)	<b>13b</b>	
	<b>13c</b> Qualified rehabilitation expenditures (rental real estate) (attach Form 3468, if applicable)	<b>13c</b>	
	<b>13d</b> Other rental real estate credits (see instructions) Type ▶	<b>13d</b>	
	<b>13e</b> Other rental credits (see instructions) Type ▶	<b>13e</b>	
	<b>13f</b> Biofuel producer credit (attach Form 6478)	<b>13f</b>	
	<b>13g</b> Other credits (see instructions) Type ▶	<b>13g</b>	
Foreign Transactions	<b>14a</b> Name of country or U.S. possession ▶	<b>14a</b>	
	<b>b</b> Gross income from all sources	<b>14b</b>	
	<b>c</b> Gross income sourced at shareholder level Foreign gross income sourced at corporate level	<b>14c</b>	
	<b>d</b> Reserved for future use	<b>14d</b>	
	<b>e</b> Foreign branch category	<b>14e</b>	
	<b>f</b> Passive category	<b>14f</b>	
	<b>g</b> General category	<b>14g</b>	
	<b>h</b> Other (attach statement) Deductions allocated and apportioned at shareholder level	<b>14h</b>	
	<b>i</b> Interest expense	<b>14i</b>	
	<b>j</b> Other Deductions allocated and apportioned at corporate level to foreign source income	<b>14j</b>	
	<b>k</b> Reserved for future use	<b>14k</b>	
	<b>l</b> Foreign branch category	<b>14l</b>	
	<b>m</b> Passive category	<b>14m</b>	
	<b>n</b> General category	<b>14n</b>	
	<b>o</b> Other (attach statement) Other information	<b>14o</b>	
	<b>p</b> Total foreign taxes (check one): <input type="checkbox"/> Paid <input type="checkbox"/> Accrued ▶	<b>14p</b>	
	<b>q</b> Reduction in taxes available for credit (attach statement)	<b>14q</b>	
	<b>r</b> Other foreign tax information (attach statement)	<b>14r</b>	

<b>Schedule K Shareholders' Pro Rata Share Items (continued)</b>		<b>Total amount</b>	
<b>Alternative Minimum Tax (AMT) Items</b>	<b>15a</b> Post-1986 depreciation adjustment	<b>15a</b>	
	<b>b</b> Adjusted gain or loss	<b>15b</b>	
	<b>c</b> Depletion (other than oil and gas)	<b>15c</b>	
	<b>d</b> Oil, gas, and geothermal properties – gross income	<b>15d</b>	
	<b>e</b> Oil, gas, and geothermal properties – deductions	<b>15e</b>	
	<b>f</b> Other AMT items (attach statement)	<b>15f</b>	
<b>Items Affecting Shareholder Basis</b>	<b>16a</b> Tax-exempt interest income	<b>16a</b>	
	<b>b</b> Other tax-exempt income	<b>16b</b>	
	<b>c</b> Nondeductible expenses	<b>16c</b>	<b>2,460</b>
	<b>d</b> Distributions (attach statement if required) (see instructions)	<b>16d</b>	<b>76,901</b>
	<b>e</b> Repayment of loans from shareholders	<b>16e</b>	
<b>Other Information</b>	<b>17a</b> Investment income	<b>17a</b>	
	<b>b</b> Investment expenses	<b>17b</b>	
	<b>c</b> Dividend distributions paid from accumulated earnings and profits	<b>17c</b>	
	<b>d</b> Other items and amounts (attach statement) <b>SEE STATEMENT 3</b>		
<b>Reconciliation</b>	<b>18</b> <b>Income/loss reconciliation.</b> 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 14p	<b>18</b>	<b>79,361</b>

<b>Schedule L Balance Sheets per Books</b>		<b>Beginning of tax year</b>		<b>End of tax year</b>	
		<b>(a)</b>	<b>(b)</b>	<b>(c)</b>	<b>(d)</b>
<b>Assets</b>					
<b>1</b>	Cash		<b>64,000</b>		<b>64,000</b>
<b>2a</b>	Trade notes and accounts receivable				
<b>b</b>	Less allowance for bad debts	( )		( )	
<b>3</b>	Inventories				
<b>4</b>	U.S. government obligations				
<b>5</b>	Tax-exempt securities (see instructions)				
<b>6</b>	Other current assets (attach statement)				
<b>7</b>	Loans to shareholders				
<b>8</b>	Mortgage and real estate loans				
<b>9</b>	Other investments (attach statement)				
<b>10a</b>	Buildings and other depreciable assets				
<b>b</b>	Less accumulated depreciation	( )		( )	
<b>11a</b>	Depletable assets				
<b>b</b>	Less accumulated depletion	( )		( )	
<b>12</b>	Land (net of any amortization)				
<b>13a</b>	Intangible assets (amortizable only)				
<b>b</b>	Less accumulated amortization	( )		( )	
<b>14</b>	Other assets (attach statement)				
<b>15</b>	<b>Total assets</b>		<b>64,000</b>		<b>64,000</b>
<b>Liabilities and Shareholders' Equity</b>					
<b>16</b>	Accounts payable				
<b>17</b>	Mortgages, notes, bonds payable in less than 1 year				
<b>18</b>	Other current liabilities (attach statement)				
<b>19</b>	Loans from shareholders				
<b>20</b>	Mortgages, notes, bonds payable in 1 year or more				
<b>21</b>	Other liabilities (attach statement)				
<b>22</b>	Capital stock				
<b>23</b>	Additional paid-in capital				
<b>24</b>	Retained earnings		<b>64,000</b>		<b>64,000</b>
<b>25</b>	Adjustments to shareholders' equity (attach statement)				
<b>26</b>	Less cost of treasury stock	( )		( )	
<b>27</b>	<b>Total liabilities and shareholders' equity</b>		<b>64,000</b>		<b>64,000</b>

Form 1120-S (2019) **TRIPLE S ENERGY MANAGEMENT LLC** **26-4585783**  
**Schedule M-1 Reconciliation of Income (Loss) per Books With Income (Loss) per Return**

Page 5

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

<b>1</b> Net income (loss) per books	<b>76,901</b>	<b>5</b> Income recorded on books this year not included on Schedule K, lines 1 through 10 (itemize):	
<b>2</b> Income included on Schedule K, lines 1, 2, 3c, 4, 5a, 6, 7, 8a, 9, and 10, not recorded on books this year (itemize)		<b>a</b> Tax-exempt interest \$	
<b>3</b> Expenses recorded on books this year not included on Schedule K, lines 1 through 12 and 14p (itemize):		<b>6</b> Deductions included on Schedule K, lines 1 through 12 and 14p, not charged against book income this year (itemize):	
<b>a</b> Depreciation \$		<b>a</b> Depreciation \$	
<b>b</b> Travel and entertainment \$ <b>460</b>			
<b>STMT 4</b> <b>2,000</b>	<b>2,460</b>	<b>7</b> Add lines 5 and 6	
<b>4</b> Add lines 1 through 3	<b>79,361</b>	<b>8</b> Income (loss) (Schedule K, line 18). Subtract line 7 from line 4	<b>79,361</b>

**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
<b>1</b> Balance at beginning of tax year	<b>191,775</b>			
<b>2</b> Ordinary income from page 1, line 21	<b>82,361</b>			
<b>3</b> Other additions				
<b>4</b> Loss from page 1, line 21	( )			
<b>5</b> Other reductions <b>STMT 5</b>	( <b>133,235</b> )			( )
<b>6</b> Combine lines 1 through 5	<b>140,901</b>			
<b>7</b> Distributions	<b>76,901</b>			
<b>8</b> Balance at end of tax year. Subtract line 7 from line 6	<b>64,000</b>			

Form **1120-S** (2019)

671119

**Schedule K-1  
(Form 1120-S)**Department of the Treasury  
Internal Revenue Service**2019**

For calendar year 2019 or tax year

☐ Final K-1☐ Amended K-1

OMB No. 1545-0123

beginning

ending

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

▶ See back of form and separate instructions.

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

1	Ordinary business income (loss)	13	Credits
	<b>82,361</b>		
2	Net rental real estate income (loss)		
3	Other net rental income (loss)		
4	Interest income		
5a	Ordinary dividends		
5b	Qualified dividends	14	Foreign transactions
6	Royalties		
7	Net short-term capital gain (loss)		
8a	Net long-term capital gain (loss)		
8b	Collectibles (28%) gain (loss)		
8c	Unrecaptured section 1250 gain		
9	Net section 1231 gain (loss)		
10	Other income (loss)	15	Alternative minimum tax (AMT) items
11	Section 179 deduction	16	Items affecting shareholder basis
		C*	<b>STMT</b>
12	Other deductions		
A	<b>3,000</b>	D	<b>76,901</b>
		17	Other information
		V*	<b>STMT</b>
18	More than one activity for at-risk purposes*		
19	More than one activity for passive activity purposes*		

\* See attached statement for additional information.

**Part I Information About the Corporation**

A Corporation's employer identification number

**26-4585783**

B Corporation's name, address, city, state, and ZIP code

**TRIPLE S ENERGY MANAGEMENT LLC****2038 OLDTOWN VALLEY RD SE****NEW PHILADELPHIA OH 44663**

C IRS Center where corporation filed return

**E-FILE****Part II Information About the Shareholder**

D Shareholder's name, address, city, state, and ZIP code

**SANDRA K CARPENTER****2038 OLDTOWN VALLEY RD SE****NEW PHILADELPHIA****OH 44663**F Shareholder's percentage of stock  
ownership for tax year**100.000000 %**

For IRS Use Only

**Section 199A Information Worksheet**Form **1120-S****2019**

For calendar year 2019 or tax year beginning , ending

Name

Employer Identification Number

**TRIPLE S ENERGY MANAGEMENT LLC****26-4585783**

	Activity Description	Pass-Through Entity EIN	PTP	Aggregated	SSTB
Column A	<b>PAGE 1 ACTIVITY</b>				
Column B					
Column C					
Column D					
Column E					

QBI or Qualified PTP Items:	Column A	Column B	Column C	Column D	Column E
Ordinary business income (loss)	82,361				
Net rental real estate income (loss)					
Other net rental income (loss)					
Royalty income (loss)					
Section 1231 gain (loss)					
Other income (loss)					
Section 179 deduction					
Charitable contributions	3,000				
Other deductions					
<b>W-2 wages</b>	<b>94,500</b>				
<b>Qualified property</b>					

**Other Information:**

QBI allocable to cooperative pmts received  
W-2 wages allocable to qualified payments  
Section 199A(g) deduction

**Section 199A REIT dividends**

**Federal Statements****Statement 1 - Form 1120-S, Page 1, Line 19 - Other Deductions**

Description	Amount
CONTRACT LABOR	\$ 17,385
SUPPLIES	3,250
POSTAGE	661
PHONE	1,512
CELL PHONE	2,427
INTERNET	4,467
DUES AND SUBSCRIPTIONS	8,118
TRAVEL	1,030
CONTINUING EDUCATION	6,075
PROFESSIONAL SERVICES	6,990
AUTO	1,804
INSURANCE - GENERAL LIABILITY	2,085
INSURANCE - WORKERS COMP	376
BANK SERVICE CHARGE	18
FEES	382
BUYOUTS	1,677
MEMBERSHIPS	1,669
50% OF MEALS	460
TOTAL	\$ 60,386

**Statement 2 - Form 1120-S, Page 3, Schedule K, Line 12a - Cash Contributions**

Description	Cash Contrib 60%	Cash Contrib 30%	Qualified Disaster	Total
CONTRIBUTIONS	\$ 3,000	\$	\$	\$ 3,000
TOTAL	\$ 3,000	\$ 0	\$ 0	\$ 3,000

**Statement 3 - Form 1120-S, Page 4, Schedule K, Line 17d - Other Items and Amounts**

Description	Amount
SECTION 199A INFORMATION - SEE ATTACHED WRK	

**Statement 4 - Form 1120-S, Page 5, Schedule M-1, Line 3 - Expenses on Books Not on Return**

Description	Amount
FINES AND PENALTIES	\$ 2,000
TOTAL	\$ 2,000



**Federal Statements****Statement 5 - Form 1120-S, Page 5, Schedule M-2, Line 5(a) - Other Reductions**

<u>Description</u>	<u>Amount</u>
PRIOR YEAR ADJUSTMENT	\$ 127,775
FINES AND PENALTIES	2,000
TRAVEL & ENTERTAINMENT	460
CHARITABLE CONTRIBUTIONS	3,000
TOTAL	\$ <u>133,235</u>

264585783 Triple S Energy Management LLC

3/23/2020 6:38 PM

26-4585783

**Federal Statements**

FYE: 12/31/2019

Sandra K Carpenter

**Schedule K-1, Box 16, Code C - Nondeductible Expenses**

<u>Description</u>	<u>Shareholder Amount</u>
FINES AND PENALTIES	\$ 2,000
PAGE 1 MEALS	460
TOTAL	<u>\$ 2,460</u>

**This foregoing document was electronically filed with the Public Utilities**

**Commission of Ohio Docketing Information System on**

**2/22/2021 9:34:11 AM**

**in**

**Case No(s). 15-0643-EL-AGG**

Summary: In the Matter of the Application of Triple S Energy Management LLC