

DIS Case Number: 21-0883-GA-AGG

Section A: Application Information

A-1. Provider type:

Retail Natural Gas Broker

Retail Natural Gas Aggregator

Retail Natural Gas Marketer

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

| Legal Name: Inertia Er | ergy Advisors LLC | Country: United States | 5 |
|-------------------------|----------------------|-------------------------|--------------------|
| Phone: 248-390- | Extension (if | Street: 4700 Gilbert St | e 47 |
| 2214 | applicable): | | |
| Website (if any): inert | iaenergyadvisors.net | City: Western Springs | Province/State: IL |
| | | | |

Postal Code: 60558

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 | Туре | Address | Active? | Proof |
|--------------------------------|---------------|--|---------|-------|
| Inertia Energy Advisors LLC | Official Name | 4700 Gilbert Ste 47 Western Springs, IL 60558 | 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 | Туре | Address | Active? | Proof |
|--------------------------------|---------------|--|---------|-------|
| Inertia Energy Advisors LLC | Official Name | 4700 Gilbert Ste 47 Western Springs, IL 60558 | Yes | File |

A-5. Contact person for regulatory matters



Eric Hutchins 4700 Gilbert Suite 47 Western Springs, IL 60558 US eric@inertiaenergyadvisors.net 2483902214

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

Eric Hutchins 4700 Gilbert Suite 47 Western Springs, IL 60558 US eric@inertiaenergyadvisors.net 2483902214

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

| Phone: 888-973- | Extension (if | Country: United St | ates |
|---------------------------------------|----------------------------|---------------------|--------------------|
| 1264 | applicable): | | |
| Fax: | Extension (if applicable): | Street: 4700 Gilber | t Ste 47 |
| Email: eric@inertiaenergyadvisors.net | | City: Western | Province/State: IL |
| | | Springs | |
| | | Postal Code: 60558 | 3 |

A-8. Applicant's federal employer identification number

45-2150337

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



Columbia Gas of Ohio Dominion Energy Ohio Duke Energy Ohio Vectren Energy Delivery of Ohio

Class of customer selection

Industrial Small Commercial Large Commercial

A-11. Start date

Indicate the approximate start date the applicant began/will begin offering services: 01-03-2022

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 |
|---------------|------------------------------------|-------|--|
| Eric Hutchins | eric@inertiaenergyadvisors. net | | 4700 Gilbert Suite 47 Western Springs, IL 60558 US |

A-13. Company history

Formed in 2011 to provide gas-electric to commercial and industrial companies.

A-14. Secretary of State

Secretary of State Link:

A-15. Proof of Ohio Employee and Office

Provide proof of an Ohio Office and Employee in accordance with Section 4929.22of the Ohio Revised Code. List the designated Ohio employee's name, Ohio office address, telephone number and web site address



Employee Name: Eric Hutchins 4700 Gilbert Suite 47 Western Springs, IL 60558 US eric@inertiaenergyadvisors.net 2483902214

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: This was provided in attachment of full application under Sec of State section.

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: This was provided in attachment of full application under Sec of State section.

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.

Liability and Investigations Disclosures: No past or present liabilities or investigations.

B-4. Disclosure of consumer protection violations



Has the applicant, affiliate, predecessor of the applicant, or any principal officer of the applicant been convicted orheld 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.

File(s) attached

C-2. Financial statements

Provide copies of the applicant's <u>two most recent years</u> 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

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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** <u>solely</u> 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

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

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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

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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.

File(s) attached

Section D: Applicant Technical Capacity

D-1. Operations

<u>Retail natural gas brokers/aggregators:</u> Include details of the applicant's business operations and plans for arranging and/or aggregating for the supply of natural gas to retail customers.

File(s) attached 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



Application Attachments

Ohio Public Utilities (CRI

Competitive Retail Natural Gas Service (CRNGS) Provider Application

Case Number: _____-GA-____

Please complete all information. Identify all attachments with a label and title (example: Exhibit C-2 Financial Statements). For paper filing, you can mail the original and two complete copies to the Public Utilities Commission of Ohio, Docketing Division, 180 East Broad Street, Columbus, Ohio 43215-3793.

A. Application Information

A-1. Provider Type.

Select the competitive retail natural gas service (CRNGS) provider type(s) for which the applicant is seeking certification. Please note you can select more than one.

| Retail Natural Gas Aggregator | Retail Natural Gas Broker | Retail Natural Gas Marketer |
|-------------------------------|---------------------------|-----------------------------|
| | ~ | |

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

Provide the name and contact information of the business entity.

| Inertia Energy Advisors I | LLC | |
|---------------------------|--|---------------------------|
| 4700 Gilbert Ste 47 | | |
| Western Springs | State: IL | Zip: 60558 |
| 248-390-2214 | Website: inertiaenergyadvisors.net | |
| | 4700 Gilbert Ste 47 Western Springs | Western Springs State: IL |

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: | Inertia Energy Advisors | LLC | |
|-----------------------|--------------------------|-----------|------------------------|
| Street Address: | 4700 Gilbert Ste 47 | | |
| City: Western Springs | | State: IL | Zip: 60558 |
| Telephone: | 248-390-2214eric@inertia | | rtiaenergyadvisors.net |

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

Provide all business names the applicant uses in North America. You do not need to include the names provided in A-2 and A-3.

Name(s):

Page 1 of 8

A-5. Contact person for regulatory matters.

| Name: | Eric Hutchir | IS | | Title: Preside | nt |
|------------------------------------|--------------------------------------|--|----------------------|--|---|
| | 4700 Gilber | rt Ste 47 | | | |
| Street Address: | Western Sp | orings | State: | IL | Zip: 60558 |
| City: Telephone: | 248-390-22 | 214 | Email | eric@inertiaene | ergyadvisors.net |
| A-6. Contact per | son for PUCO S | taff use in investigat | ting con | sumer complaints. | |
| | Eric Hutchin | าร | | Title: | ent |
| Name: | 4700 Gilbe | rt Ste 47 | _ | | |
| Street Address: | Western Sp | orings | Canata . | IL | Zip: 60558 |
| City: Telephone: | 248-390-22 | 214 | State: Email: | eric@inertiaene | rgyadvisors.net |
| A-7. Applicant's | address and to | Il-free number for c | ustome | service and compl | aints. |
| Street Address: | 4700 Gilbe | rt Ste 47 | | | |
| City: | Western S | prings | State: | | Zip: |
| Toll-free Telephone: | 888-973-12 | 264 | Email: | eric@inertiaene | ergyadvisors.net |
| FEIN: | 45-215033 | | mber. | | |
| A-9. Applicant s | torm of owner | ship (select one). | | | |
| Sole Proprie | etorship | Limited Liability Partnership (LLP) | | Corporation | Partnership |
| |] | | | | |
| Limited Liabilit (LLC | | Other: | | | |
| A-10. Identify cu | urrent or propo | sed service areas. | | | |
| Identify each s service and ide | ervice area in v entify each cust | which the applicant is comer class that the | s curren applican | tly providing service t is currently servin | e or intends to provide g or intends to serve. |
| Service area sel | ection: | | | | 201 62 64 0 |
| Columbia Ga | as of Ohio | Dominion Energy Ohio | 0 | uke Energy Ohio | Vectren Energy Delivery of Ohio |
| V | ſ | ~ | | V | ~ |
| | | | | | Page 2 of 8 |

| Class of | f customer | selection |
|----------|------------|-----------|
|----------|------------|-----------|

| Ind | lust | rial |
|-----|------|------|
| | V | |

Residential

| Small Commercial |
|------------------|
| V |

Large Commercial



A-11. Start Date.

Indicate the approximate start date the applicant began/will begin offering services.

2022 Date:

A-12. Principal officers, directors and partners.

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

A-13. Company history.

Provide an attachment with a concise description of the applicant's company history and principal business interests.

A-14. Secretary of State.

Provide evidence that the applicant is currently registered with the Ohio Secretary of State.

A-15. Proof of Ohio office and employee.

Provide "Proof of an Ohio Office and Employee" in accordance with Section 4929.22 of the Ohio Revised Code. List the designated Ohio employee's name, Ohio office address, telephone number and web site address.

| Name: | Title: | |
|-----------------|---|------|
| Street Address: | and the second se | |
| City: | State: | Zip: |
| Telephone: | Email: | |

B. Managerial Capability

Provide a response or attachment for each of the sections below.

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.

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.

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? If yes, attach a document detailing the information.



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? If yes, attach a document detailing the information.





C. Financial Capability

Provide a response or attachment for each of the sections below.

C-1. Financial reporting.

Provide a current link to the most recent Form 10-K filed with the Securities and Exchange Commission (SEC) or attach a copy of 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.

C-2. Financial statements

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

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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.

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.

C-4. Credit rating.

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".

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.

C-6. Bankruptcy information.

Page 5 of 8

Within the previous 24 months, have any of the following filed for reorganization, protection from creditors or any other form of bankruptcy? If yes, attach a document detailing the information. Applicant

Parent company of the applicant

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





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? If yes, attach a document detailing the information.





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.

C-9. Financial arrangements.

This section is only applicable if power marketer or retail electric generation provider has been selected in A-1.

Provide copies of the applicant's financial arrangements to satisfy collateral requirements to conduct retail electric/natural gas business activities (e.g., parental guarantees, letters of credit, contractual arrangements, etc., as described below).

Renewal applicants may provide a current statement from an Ohio local distribution utility (LDU) that shows that the applicant meets the LDU's collateral requirements. The statement or letter must be on the utility's letterhead and dated within a 30-day period of the date the applicant files its renewal application.

First-time applicants or applicants whose certificate has expired must meet the requirements of C-9 in one of the following ways:

1. The applicant itself states that it is investment grade rated by Moody's Investors Service, Standard & Poor's Financial Services, or Fitch Ratings and provides evidence of rating from the rating agencies. If you provided a credit rating in C-4, reference the credit rating in the statement.

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- The applicant's parent company is investment grade rated (by Moody's, Standard & Poor's, or Fitch) and guarantees the financial obligations of the applicant to the LDU(s).Provide a copy of the most recent credit opinion from Moody's, Standard & Poor's or Fitch.
- 3. The applicant's parent company is not investment grade rated by Moody's, Standard & Poor's or Fitch but has substantial financial wherewithal in the opinion of the Staff reviewer to guarantee the financial obligations of the applicant to the LDU(s). The parent company's financials and a copy of the parental guarantee must be included in the application if the applicant is relying on this option.
- The applicant can provide evidence of posting a letter of credit with the LDU(s) listed as the beneficiary, in an amount sufficient to satisfy the collateral requirements of the LDU(s).

D. Technical Capability

Provide an attachment for each of the sections below.

D-1. Operations.

<u>Retail natural gas brokers/aggregators:</u> Include details of the applicant's business operations and plans for arranging and/or aggregating for the supply of natural gas to retail customers.

Gas Marketers: Describe the operational nature of the applicant's business, specifying whether operations will include the contracting of natural gas purchases for retail sales, the nomination and scheduling of retail natural gas for delivery, and/or the provision of retail ancillary services, as well as other services used to supply natural gas to the natural gas company city gate for retail customers.

D-2. Operations expertise and key technical personnel.

Provide evidence of the applicant's experience and technical expertise in performing the operations described in this application. Include the names, titles, e-mail addresses, telephone numbers and background of key personnel involved in the operational aspects of the applicant's business.

As authorized representative for the above company/organization, I certify that all the information contained in this application is true, accurate and complete. I also understand that failure to report completely and accurately may result in penalties or other legal actions.

8-23-21 Date

Signature

PRESIDENT

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Competitive Retail Natural Gas Service Affidavit

County of <u>COOC</u>: State of <u>IL</u>: ERic Hutchins, Petrident Affiant, being duly swom/affirmed, hereby states that:

- 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.
- The applicant will timely file an annual report of its intrastate gross receipts and sales of hundred cubic feet of natural gas pursuant to Sections 4905.10(A), 4911.18(A), and 4929.23(B), Ohio Revised Code.
- The applicant will timely pay any assessment made pursuant to Sections 4905.10 and 4911.18(A), Ohio Revised Code.
- Applicant will comply with all applicable rules and orders adopted by the Public Utilities Commission of Ohio pursuant to Title 49, Ohio Revised Code.
- 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.
- Applicant will comply with Section 4929.21, Ohio Revised Code, regarding consent to the jurisdiction of the Ohio courts and the service of process.
- Applicant will comply with all state and/or federal rules and regulations concerning consumer protection, the environment, and advertising/promotions.
- 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.
- 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.

MARGARET MARTIGAN 10. Affiant further sayeth naught. OFFICIAL SEAL Eric Hutchins, President Notary Public, State of Illinois My Commission Expires Signature of Affiant & Title May 14, 2022 day of + Sworn and subscribed before me this _O Johany Public MARANO of official administering oath MA My commission expires on

Page 8 of 8

Exhibit A-12 "Principal Officers, Directors & Partners" provide the names, titles, addresses and telephone numbers of the applicant's principal officers, directors, partners, or other similar officials.

Eric Hutchins- Inertia Energy Advisors, LLC

President

4700 Gilbert Suite 47

Western Springs, IL 60558

248-390-2214

A-13 Exhibit A-13 "Company History," provide a concise description of the applicant's company history and principal business interests.

Eric Hutchins- Inertia Energy Advisors, LLC

President

Inertia Energy Advisors was formed in 2011 to provide procurement of electricity and natural gas for commercial and industrial companies in de-regulated areas. Approved and offering services in Michigan, California, Indiana, Texas, Ohio (electric), Maryland, DC and Illinois.

xhibit A-14 "Secretary of State- Provide evidence applicant is currently registered with Ohio Secretary of State,

Downloads PDF file

| 2102607 N | 1 |
|-----------------------------------|-------------|
| ADVISORS, LLC | Name |
| FOREIGN LIMITED LIABILITY COMPANY | Туре |
| 04/24/2012 | Filing Date |
| | Exp. Date |
| Active | Status |
| | |
| | County |
| MICHIGAN | State |

Exhibit B-1 "Jurisdictions of Operation," provide a list of all jurisdictions in which the applicant or any affiliated interest of the applicant is, at the date of filing the application, certified, licensed, registered, or otherwise authorized to provide retail or wholesale electric-Gas services.

| Current states Inertia Energy Advisors authorized to provide wholesale electric-Gas services. |
|---|
| New Jersey |
| Texas |
| Illinois |
| Michigan |
| Ohio-Electric |
| California |
| DC |
| Maryland |
| Kansas- Gas |
| Iowa- Gas |

Exhibit B-2 "Experience & Plans," provide a description of the applicant's experience and 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 Section 4928.10 and/or 4929.22 of the Revised Code.

Inertia Energy Advisors has been supplying commercial and industrial customers with natural gas and electric supply for the past 10 years. Inertia manages over 30 companies, spanning 20 states, and loads exceeding 1 million Mwh/DTH Annually. Having worked on the supply side, 1 understand the importance of education, transparency, and communication with our clients on a regular basis. My plan is to provide detailed offers from different suppliers, highlighting the similarities and differences in programs. Plan is to review all contracts and make customers aware of risks, while encouraging them to have internal legal counsel review and redline. The utility, or third party suppliers will handle all billing, but it will be the responsibility of Inertia to make sure it's correct and help resolve any issues that arise. Complaints will also be taken very seriously, all clients will have direct phone number of Inertia Energy Advisors President to discuss and resolve matters. Exhibit B-3 "Disclosure of Liabilities and Investigations," provide a description of all existing, pending or past rulings, judgments, contingent liabilities, revocation of authority, regulatory investigations, or any other matter that could adversely impact the applicant's financial or operational status or ability to provide the services it is seeking to be certified to provide.

Inertia Energy Advisors has no existing, pending or past rulings, judgments, contingent liabilities, revocation of authority, regulatory investigations, or any other matter that could adversely impact the applicant's financial or operational status or ability to provide the services it is seeking to be certified to provide. Exhibit C-1 "Financial Reporting," provide the most recent 10-K/8-K Filings with the SEC. If the applicant does not have such filings, it may submit those of its parent company. An applicant may submit a current link to the filings or provide them in paper form. If the applicant does not have such filings, then the applicant may indicate that the applicant is not required to file with the SEC and why. SE

Inertia Energy Advisors LLC is not set up to file 10-k/8-k and is not publicly traded, therefore we are not required to file SEC documents.

Exhibit C-2 "Financial Statements," provide copies of the applicant's two most recent years of audited financial statements (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, it shall file 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 account numbers redacted).

Inertia Energy Advisors LLC has provided a copy of two most recent tax returns.

| Form 10 | CHEDULE C com 1040) Check of the Treasury contrast of the Treasury con | | | | | | le Pormi ives. acquarde na. ••• | | | | |
|--------------|--|-------------------------------------|---------------|------------------------------|----------|--|---------------------------------|------------|---------------------------|--|--|
| nternal Rev | erue Service (99) | Attach to I | -orm 1040 | , 1040-5K, 1040-NK | 01 104 | ri, partieringe attention | Social as | curity nur | mber (SSN) | | |
| tente of pro | C S HUTCHI | 20 | | | | | 1000 | | | | |
| A Pri | ncipal business or pr TILITIES B | er code from instructions 541990 | | | | | | | | | |
| C Bu | siness name. If no s | eoarate busines | ss name, l | eave blank. | | Statement of the second s | | | number (EN) (see instr.) | | |
| I | NERTIA ENEL | RGY ADV | SORS, | LLC | | | 4 | 5-21 | 50337 | | |
| | siness address (indu | | | 1118 PAF | | | 0 | | | | |
| | y, town or post office | | | WESTERN | | | 00 | - | | | |
| F Ac | counting method: | (1) 🛛 | Cash (2 |) Accrual (3 |) L | Other (specify) | n losses | | X Yes No | | |
| G Di | d you "materially part | icipate" in the o | operation of | f this business during | 2020? | If "No," see instructions for limit o | 11 100000 | | 1 | | |
| H If | you started or acquin | ed this busines | s during 20 |)20, check here | | 0002 See includio08 | | 30 | X Yes No X Yes No | | |
| I Di | d you make any pays | ments in 2020 f | that would | require you to me Fon | n(s) i | 099? See instructions | | | X Yes No | | |
| | | you file require | d Form(s) | 1099? | | | | | | | |
| Part | I Income | Can instructio | os for line | 1 and check the box i | f this i | ncome was reported to you on | 199 | | | | |
| 1 G | ross receipts or sales | too amploy | " box on | that form was checked | 1 | | . 🗆 | 1 | 359,823 | | |
| | eturns and allowance | | A. DOX ON | | | | | 2 | AFA 000 | | |
| - | ubtract line 2 from lin | | | | | | | 3 | 359,823 | | |
| | ost of goods sold (fro | | | | | | | 4 | 359,823 | | |
| 5 G | mes profit Sublrad | line 4 from line | 93 | | | | | 5 | 339,623 | | |
| 6 0 | ther income, inducting fe | derai and state g | asoline or fi | uel tax credit or refund (se | e instru | ctions) | | 6 | 359,823 | | |
| | Add to | and E and E | | | | | and have | 7 | 559,024 | | |
| Part | II Expenses | , Enter expe | enses fo | r business use of | your | home only on line 30. | - | 18 | | | |
| 8 A | dvertising | | 8 | 3,323 | 18 | Office expense (see instructions) | | 19 | | | |
| 9 0 | ar and truck expense | s (see | | 0.67 | 19 | Pension and profit-sharing plans Rent or loase (see instructions): | •••• | 10 | | | |
| 1.1 | nstructions) | | 9 | 867 | 20 | Vehicles, machinery, and equipri | nent | 20a | | | |
| | commissions and fee | | 10 | 12,711 | ab | Other business property | | 20b | | | |
| | Contract labor (see instru | ctions) | 11 | 12,111 | 21 | Repairs and maintenance | | 21 | | | |
| | Depletion | | 12 | | 22 | Supplies (not included in Part III) | | 22 | 51 | | |
| | epreciation and sect expense deduction (n | | | | 23 | Taxes and licenses | | 23 | 8,76 | | |
| | ncluded in Part III) (s | | 13 | 1,700 | 24 | Travel and meals: | 100 | | | | |
| | nstructions) | | 10 | | 8 | Travel | | 24a | | | |
| | Employee benefit pro other than on line 19 | | 14 | | ь | Deductible meals (sec | | | | | |
| | nsurance (other than | | 15 | 720 | | instructions) | | 24b | 8 | | |
| | ntensal (acc instructi | | | | 25 | Utilities | | 25 | | | |
| | Mortgage (paid to bar | | 16a | | 26 | Wages (less employment credit | 5) | 26 | | | |
| | Other | | 16b | | | | | 27a | 4,47 | | |
| | | | | | | Other expenses (from line 48) . | | 27b | | | |
| 17 | Legal and profession | al services | 17 | 1,500 | | Reserved for future use | | 28 | 34,66 | | |
| 28 | Total expenses befo | ire expenses fo | r business | use of home. Add line | som | nough 27a | | 29 | 325,15 | | |
| 29 | Tentative profit or (los | ss). Subtract lin | e 28 from | line / | cos al | wwwhere Attach Form 8829 | | | | | |
| 30 | Expenses for busines | is use of your l | nome. Uo | not report these exper- | asa ci | sewhere. Attach Form 8829 | | | | | |
| | unless using the sim | plined method. | See instru | square footage of: (a) | VOUR | home: | | | | | |
| | Simplified method i | ners only. ch | for husing | ss: Us | e the | Simplified | | | | | |
| | Mathod Wedsheet in | the instruction | is to figure | the amount to enter o | n line | 30 | | 30 | 3,20 | | |
| 94 | Net profit or (loss). | Subtract line 3 | 0 from line | 29. | | | | | | | |
| | · If a profit, order of | both Scheduk | e 1 (Form | 1040), line 3 and on \$ | Sched | ule SE, line 2. (If you | 100 | 1 | 321,95 | | |
| | checked the box on | line 1, see inst | ructions). 8 | states and trusts, enter | er on F | form 1041, line 3. | | 31 | 321,33 | | |
| | a If a loss you mus | t do to line 32. | | | | | | | | | |
| 32 | If you have a loss o | heck the box t | hat describ | es your investment in | this at | ctivity. See instructions. | 22 | 32a | All investment is at risk | | |
| | - If you checked 32t | enter the los | s on both \$ | Schedule 1 (Form 104 | 40), lin | e 3 and on Schedule | | 32b | н | | |
| | SE, line 2. (If you di | necked the box | on line 1, | see the line 31 instruc | tions). | Estates and trusts, enter on | | 000 | at risk. | | |
| | Form 1041, line 3. | | | | | | |] | | | |
| | · If you checked 328 |), you must at | ach Form | 6198. Your loss may | ne num | ieu. | | | edule C (Form 1040) 2 | | |

| HUTCHINSETP | concernity. | O AD DM |
|---------------|-------------|---------|
| LIUTCHINSE IP | 10/20/04/1 | 0.40 FM |

| | ule C (Form 1040) 2020 UTILITIES BROKER | | | |
|--|--|-----------------|--------------------------|-------------------|
| _ | t III Cost of Goods Sold (see instructions) | | + | |
| | | 1 | | |
| | Method(s) used to a Cost b Lower of cost or market c Other (attach explanation | n) | | |
| | value dosing inventory: a Cost b Cover of cost of manual | $\frown \Gamma$ | VC | |
| | to the standard standar | | | 1000 |
| | Was there any change in determining quantities, costs, or valuations between opening and closing inventory? | ~ . | Yes | No |
| | If "Yes," attach explanation | | | - |
| | | 1 I | | |
| | inventory at beginning of year. If different from last year's closing inventory, attach explanation | 35 | | |
| | inventory at beginning of year. It directly non-max years and going the years | | | |
| | | 36 | | |
| | Purchases less cost of items withdrawn for personal use | | | |
| | | 37 | | |
| | Cost of labor. Do not include any amounts paid to yourself | | | |
| | | 38 | | |
| | Materials and supplies | 30 | - | |
| | | | | |
| | Other costs | 39 | | _ |
| | Other costs | | | |
| | | 40 | | |
| | Add lines 35 through 39 | | | |
| | | 41 | | |
| | Inventory at end of year | 41 | - | |
| | | | | |
| | Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on line 4 | 42 | | - |
| | file Form 4562. | | | |
| | When did you place your vehicle in service for business purposes? (month, day, year) Of the total number of miles you drove your vehicle during 2020, enter the number of miles you used your vehicle for: | | | |
| | Of the total number of miles you drove your vehicle during 2020, enter the number of miles you used your vehicle for: Businessb Commuting (see instructions)c Other Was used used to preserval use during off-duty hours? | | Yes | - H |
| - | Of the total number of miles you drove your vehicle during 2020, enter the number of miles you used your vehicle for: Businessb Commuting (see instructions)c Other Was your vehicle available for personal use during off-duty hours? Do you (or your spouse) have another vehicle available for personal use? | | Yes | E I |
| | Of the total number of miles you drove your vehicle during 2020, enter the number of miles you used your vehicle for: Businessb Commuting (see instructions)c Other Was your vehicle available for personal use during off-duty hours? Do you (or your spouse) have another vehicle available for personal use? | | Yes Yes Yes | E |
| 3 5 5 5 7 8 | Of the total number of miles you drove your vehicle during 2020, enter the number of miles you used your vehicle for: Business b Commuting (see instructions) c Other Was your vehicle available for personal use during off-duty hours? Do you (or your spouse) have another vehicle available for personal use? Do you have evidence to support your deduction? | | Yes | E |
| 5 5 5 7 8 | Of the total number of miles you drove your vehicle during 2020, enter the number of miles you used your vehicle for: Business b Commuting (see instructions) c Other Was your vehicle available for personal use during off-duty hours? Do you (or your spouse) have another vehicle available for personal use? Do you have evidence to support your deduction? | | Yes Yes Yes | F |
| a a a | Of the total number of miles you drove your vehicle during 2020, enter the number of miles you used your vehicle for: Business b Commuting (see instructions) c Other Was your vehicle available for personal use during ott-duty hours? Do you (or your spouse) have another vehicle available for personal use? Do you have evidence to support your deduction? If "Yes," is the evidence written? Part V Other Expenses. List below business expenses not included on lines 8-26 or line 30. | | Yes Yes Yes | 6 |
| A REP H | Of the total number of miles you drove your vehicle during 2020, enter the number of miles you used your vehicle for: Business b Commuting (see instructions) c Other Was your vehicle available for personal use during ott-duty hours? Do you (or your spouse) have another vehicle available for personal use? Do you have evidence to support your deduction? If "Yes," is the evidence written? Cother Expenses. List below business expenses not included on lines 8-26 or line 30. BANK CHARGES & FEES | | Yes Yes Yes | 6 |
| S S P H | Of the total number of miles you drove your vehicle during 2020, enter the number of miles you used your vehicle for: Business b Commuting (see instructions) c Other Was your vehicle available for personal use during off-duty hours? Do you (or your spouse) have another vehicle available for personal use? Do you have evidence to support your deduction? If "Yes," is the evidence written? ************************************ | | Yes Yes Yes | 6 1,0 1 |
| S S S P F I I | Of the total number of miles you drove your vehicle during 2020, enter the number of miles you used your vehicle for: Business b Commuting (see instructions) c Other Was your vehicle available for personal use during off-duty hours? Do you (or your spouse) have another vehicle available for personal use? Do you have evidence to support your deduction? If "Yes," is the evidence written? | | Yes Yes Yes | 6 1,0 1 |
| a B B B B B B B B B B B B B B B B B B B | Of the total number of miles you drove your vehicle during 2020, enter the number of miles you used your vehicle for: Business b Commuting (see instructions) c Other Was your vehicle available for personal use during off-duty hours? Do you (or your spouse) have another vehicle available for personal use? Do you have evidence to support your deduction? If "Yes," is the evidence written? | | Yes Yes Yes | 6 1,0 1,5 |
| a seperation | Of the total number of miles you drove your vehicle during 2020, enter the number of miles you used your vehicle for: Business b Commuting (see instructions) c Other Was your vehicle available for personal use during off-duty hours? Do you (or your spouse) have another vehicle available for personal use? Do you have evidence to support your deduction? f "Yes," is the evidence written? if "Yes," is the evidence written? if "Yes," is the evidence written? Cart V Other Expenses, List below business expenses not included on lines 8-26 or line 30. BANK CHARGES & FEES DUES & SUBSCRIPTIONS POSTAGE | | Yes Yes Yes | 6: 1,0 1,5 |
| a seperation | Of the total number of miles you drove your vehicle during 2020, enter the number of miles you used your vehicle for: Business b Commuting (see instructions) c Other Was your vehicle available for personal use during off-duty hours? Do you (or your spouse) have another vehicle available for personal use? Do you have evidence to support your deduction? If "Yes," is the evidence written? ************************************ | | Yes Yes Yes | 6 1,0 1,5 |
| a la | Of the total number of miles you drove your vehicle during 2020, enter the number of miles you used your vehicle for: Business b Commuting (see instructions) c Other Was your vehicle available for personal use during off-duty hours? Do you (or your spouse) have another vehicle available for personal use? Do you have cvidence to support your deduction? If "Yes," is the evidence written? • Other Expenses, List below business expenses not included on lines 8-26 or line 30. SANK CHARGES & FEES • DUES & SUBSCRIPTIONS POSTAGE • INTERNET | | Yes Yes Yes | 6 1,0 1,5 |
| a seperation | Of the total number of miles you drove your vehicle during 2020, enter the number of miles you used your vehicle for: Business b Commuting (see instructions) c Other Was your vehicle available for personal use during off-duty hours? Do you (or your spouse) have another vehicle available for personal use? 0 you have evidence to support your deduction? b ff "Yes," is the evidence written? | | Yes Yes Yes | 6 1,0 1,5 |
| a la | Of the total number of miles you drove your vehicle during 2020, enter the number of miles you used your vehicle for: b Commuting (see instructions) c Other Business b Commuting off-duty hours? c Other Was your vehicle available for personal use during off-duty hours? c c Do you (or your spouse) have another vehicle available for personal use? c c 1 Do you have evidence to support your deduction? c c 1 ff "Yes," is the evidence written? c c art V Other Expenses, List below business expenses not included on lines 8-26 or line 30. BANK CHARGES & FEES c SUBSCRIPTIONS POSTAGE relieved on the support relieved on the super relieved on the supe | | Yes Yes Yes | 6 1,0 1,5 |
| a seperation | Of the total number of miles you drove your vehicle during 2020, enter the number of miles you used your vehicle for: Business b Commuting (see instructions) c Other Was your vehicle available for personal use during off-duty hours? Do you (or your spouse) have another vehicle available for personal use? Do you have evidence to support your deduction? If Y'es," is the evidence written? If Y'es," is the evidence written? Do you failed on lines 8-26 or line 30. BANK CHARGES & FEES FEES DUES & SUBSCRIPTIONS POSTAGE INTERNET INTERNET | | Yes Yes Yes | 6 1,0 1,5 |
| a seperation | Of the total number of miles you drove your vehicle during 2020, enter the number of miles you used your vehicle for: b Commuting (see instructions) c Other Business b Commuting off-duty hours? c Other Was your vehicle available for personal use during off-duty hours? c Other Do you (or your spouse) have another vehicle available for personal use? c Do you (or your spouse) have another vehicle available for personal use? c Do you have evidence to support your deduction? c If "Yes," is the evidence written? c Part V Other Expenses. List below business expenses not included on lines 8-26 or line 30. BANK CHARGES & FEES FEES DUES & SUBSCRIPTIONS c POSTAGE FEES TELEPHONE INTERNET | | Yes Yes Yes | 6: 1,0 1,5 |
| a seperation | Of the total number of miles you drove your vehicle during 2020, enter the number of miles you used your vehicle for: Business b Commuting (see instructions) c Other Was your vehicle available for personal use during off-duty hours? Do you (or your spouse) have another vehicle available for personal use? Do you have evidence to support your deduction? Do you have evidence written? The evidence written? Date V Other Expenses, List below business expenses not included on lines 8-26 or line 30. BANK CHARGES & FEES DUES & SUBSCRIPTIONS POSTAGE INTERNET | | Yes Yes Yes | 6: 1,0 1,5 |
| a seperation | Of the total number of miles you drove your vehicle during 2020, enter the number of miles you used your vehicle for: Business b Commuting (see instructions) c Other Was your vehicle available for personal use during off-duty hours? Do you (or your spouse) have another vehicle available for personal use? Do you have evidence to support your deduction? Do you have evidence written? The evidence written? Date V Other Expenses, List below business expenses not included on lines 8-26 or line 30. BANK CHARGES & FEES DUES & SUBSCRIPTIONS POSTAGE INTERNET | | Yes Yes Yes | 6: 1,0 1,5 |
| S S B P F I I | Of the total number of miles you drove your vehicle during 2020, enter the number of miles you used your vehicle for: b Commuting (see instructions) c Other Business b Commuting off-duty hours? c Other Was your vehicle available for personal use during off-duty hours? c Other Do you (or your spouse) have another vehicle available for personal use? c Do you (or your spouse) have another vehicle available for personal use? c Do you have evidence to support your deduction? c If "Yes," is the evidence written? c Part V Other Expenses. List below business expenses not included on lines 8-26 or line 30. BANK CHARGES & FEES FEES DUES & SUBSCRIPTIONS c POSTAGE FEES TELEPHONE INTERNET | | Yes Yes Yes | 6: 1,0 1,5 |
| A B B B B B B B B B B B B B B B B B B B | Of the total number of miles you drove your vehicle during 2020, enter the number of miles you used your vehicle for: Business b Commuting (see instructions) c Other Was your vehicle available for personal use during ott-duty hours? Do you (or your spouse) have another vehicle available for personal use? Do you have cvidence to support your deduction? Do you have cvidence written? If "Yes," is the evidence written? Diff "Yes," is the evidence written? Diff "Yes," is the evidence written? art V Other Exponses, List below business expenses not included on lines 8-26 or line 30. BANK CHARGES & FEES FEES DUES & SUBSCRIPTIONS POSTAGE TELEPHONE INTERNET | | Yes Yes Yes | 6: 1,0 1,5 |
| A B B B B B B B B B B B B B B B B B B B | Of the total number of miles you drove your vehicle during 2020, enter the number of miles you used your vehicle for: Business b Commuting (see instructions) c Other Was your vehicle available for personal use during off-duty hours? Do you (or your spouse) have another vehicle available for personal use? Do you have cvidence to support your deduction? Dr you have cvidence written? | | Yes Yes Yes | 6: 1,0 1,5 |
| 5 6 78 EP H | Of the total number of miles you drove your vehicle during 2020, enter the number of miles you used your vehicle for: Business b Commuting (see instructions) c Other Was your vehicle available for personal use during off-duty hours? Do you (or your spouse) have another vehicle available for personal use? Do you have exidence to support your deduction? Int "res," is the evidence written? and V Other Expenses. List below business expenses not included on lines 8-26 or line 30. BANK CHARGES & FEES DUES & SUBSCRIPTIONS POSTAGE INTERNET INTERNET | | Yes Yes Yes | 6: 1,0 1,5 |
| 5 6 7a P H I | Of the lotal number of miles you drove your vehicle during 2020, enter the number of miles you used your vehicle for: Business b Commuting (see instructions) c Other Was your vehicle available for personal use during off-duty hours? Do you (or your spouse) have another vehicle available for personal use? Do you have evidence to support your deduction? If "Yes," is the evidence written? If "Yes," i | | Yes Yes Yes | 6: 1,00 1,5 |
| 5 6 7a P H I | Of the total number of miles you drove your vehicle during 2020, enter the number of miles you used your vehicle for: b Commuting (see instructions) c Other Business b Commuting off-duty hours? c Other Was your vehicle available for personal use during off-duty hours? c Other Do you (ar your spouse) have another vehicle available for personal use? c Other Do you have evidence to support your deduction? c Other > If "Yes," is the evidence written? c Other Exponses, List below business expenses not included on lines 8-26 or line 30. BANK CHARGES & FEES COULES & SUBSCRIPTIONS POSITAGE INTERNET INTERNET | | Yes Yes Yes | 6: 1,00 1,5 |
| 5 6 7a P H I | Of the total number of miles you drove your vehicle during 2020, enter the number of miles you used your vehicle for: b Commuting (see instructions) c Other Business b Commuting off-duty hours? c Other Was your vehicle available for personal use during off-duty hours? c Other Do you (or your spouse) have another vehicle available for personal use? c Other Do you have evidence to support your deduction? c Other If "res," is the evidence written? c Other Exponeses, List below business expenses not included on lines 8-26 or line 30. BANK CHARGES & FEES SUBSCRIPTIONS POSTAGE INTERNET INTERNET | | Yes Yes Yes | 6: 1,0 1,5 |
| 5 6 7a P H I | Of the total number of miles you drove your vehicle during 2020, enter the number of miles you used your vehicle for: b Commuting (see instructions) c Other Business b Commuting (see instructions) c Other Was your vehicle available for personal use during off-duty hours? Do you (or your spouse) have another vehicle available for personal use? Do you have evidence to support your deduction? > If "Yes," is the evidence writen? | | Yes Yes Yes | 6: 1,00 1,5 |
| 5 6 7 8 F F | Of the total number of miles you drove your vehicle during 2020, enter the number of miles you used your vehicle for: b Commuting (see instructions) c Other Business b Commuting off-duty hours? c Other Was your vehicle available for personal use during off-duty hours? c Other Do you (or your spouse) have another vehicle available for personal use? c Other Do you have evidence to support your deduction? c Other If "res," is the evidence written? c Other Exponeses, List below business expenses not included on lines 8-26 or line 30. BANK CHARGES & FEES SUBSCRIPTIONS POSTAGE INTERNET INTERNET | | Yes Yes Yes Yes | |

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| Form 1000 | | | | | | to a least not | | ship Incom ending | | | | | 019 | |
|---------------------------------|---|---------------------------|-------------|-----------------|-----------------|------------------------------------|-------------------|---|---------------------|-------------|--------------|-------------|--------------|------|
| setmant of the real Hervenue | Service | | | | | /Form1053 to | r instructi | | D | Empl | oyer Identi | fication mu | mber | |
| Principal bu | usiness activity | | Name | of pertnership | , | | | | 1 | 74 | JC | 11/ | | |
| | | | TN | TTTTT | ENE | RGY ADV | ISORS | LLC | | 6 | | | | _ |
| CONSULTING | | | LLW. | ERI IN | mom of sui | ite no. If a P.O. bo | , see the instr | uctions | E | | business st | | | |
| | roduct or service | or | #2 | 72 47 | 00 G | ILBERT, | SUITI | 2 47 | | 05 Total | /06/ | 2011 | - | - |
| SERVI | ode nutiber | Print | Chyd | v town, state (| or province, | country, and ZIP of | foreign posta | code | 1 | (3999 | instructions | 9 | 66,97 | 7 |
| | | | WE | STERN | SPR | INGS | IL | 60558 | F | ş | | | 00,91 | - |
| 5419 | | _ | - | | - Feer | | | ame change (4) | Address | chang | e (5) | Ame | ended retur | m |
| Check a | applicable boxes | | | | | Final return | | ther (specify) | | | | _ | | |
| Check a | accounting meth | od: (1) 🛛 |] Cas | h | (2) | | (-) L L | | ar | | | | | 3 |
| Number | r of Schedules K | -1. Attach | one fa | ir each pers | son who | was a parimen | at any une | e during the tax ye | | | | | | L |
| Check i | f Schedules C a | nd M-3 are | attack | hed | | an 485 studiek | numoses | (2) Grouped | activities for a | ection | 469 pas | sive acti | vity purpose | es |
| Check i | it partnership: (1 | Agg | regate | ed activities | s for seco | on lines to th | munh 22 h | elow. See instructi | ions for more | inform | ation. | _ | | |
| aution: In | clude only trade | or busine | ss inc | ome and e | xpenses | on mes la ul | OUGH EE S | 1a | 301,8 | 323 | | | | |
| | Gross receipts or | | | | | | | 16 | | | | | | |
| | Returns and allow | | | | | | | | | | 1c | - | 301,82 | 23 |
| | Salance, Subtrac | | | | | | | | | 1 | 2 | | | |
| a 2 C | Cost of goods so | | | | | | | | | | 3 | | 301,82 | 23 |
| E 3 0 | Gross profit. Sub | tract line 2 | from | line 1c | | | | | | | 4 | 14 | | |
| 3 0 4 0 | Ordinary income (k | ss) from oth | er part | nerships, es | gates, and | TUSS (alaci sa | Garday | | | | 5 | | | |
| - 6 5 | Net farm profil (k | ss) (attack | h Sche | adule F (Fo | om 1040 | or 1040-SR()) | | | | | 6 | | - | |
| | | | | | 17 (attac | ch Form 4/9/) | | | | | 7 | | | |
| 7 (| Other income (k | ss) (attach | n state | iment) | | | | | | | 8 | | 301,8 | 23 |
| 8 | Total income (li | oss). Com | bine lin | nes 3 throu | Jgn 7 | | dida \ | | | | 9 | | 11.000.000 | _ |
| · 9 3 | | | | | | | | | | | 10 | | | |
| (suggetul 10 11 12 | Guaranteed pay | teed payments to partners | | | | | | | | | 11 | | | |
| 2 11 | | | | | | | | | | | 12 | | | 1 |
| 5 12 | | | | | | | | | | | 13 | | | |
| | Rent | | | | | | | | | | 14 | | 9,0 |)1' |
| supprusu | Taxes and licen | ses | | | | | | | | | 15 | | | |
| 5 15 | Interest (see in: | structions) | | | | | | Tra | | | | | | |
| Ø 16a | Depreciation (if | required, a | ittach I | Form 4562 | 2) | | | 16a | | | 16c | | | |
| 9 16a b | Less depreciatio | n reported | on Fo | orm 1125-A | A and els | ewhere on ret | um | 160 | | | 17 | | | |
| SU0 17 | Depiction (Do n | ot deduct | oil an | nd gas dep | pletion.) | | | | | | 18 | | | |
| . 18 | Retirement plan | s, etc. | | | | | | | | | 19 | | | |
| 7 19 | Employee bene | | | | | | | CEE STA | TEMENT | 1 | 20 | | 29,5 | 51 |
| 18 19 20 | Other deduction | is (attach | statem | hent) | | | for Same (| SEE STA | | | 21 | | 38,5 | 53 |
| 21 | Total deduction | ns. Add th | e ame | DOURS SHOW | 11 11 1 10 10 1 | or right options | n for lines : | through 20 | | | 22 | | 263,2 | 29 |
| 22 | Ordinary busin | ess incor | ne (lo | es). Subtra | act line 21 | 1 from line 8 | | Hack Earn 9807) | | | 23 | - | | |
| - 23 | Interest due un | der the loc | k-back | k method- | -complete | ed long-term o | ontracts (a | ttach Form 8897) | | | 24 | | | |
| 24 25 26 | Interest due un | der the loo | k-bad | k method- | -income | forecast metho | od (attach i | Form 8866) | | • • | 25 | | | |
| E 25 | BBA AAR impu | ted under | payme | int (see ins | structions |) | | | | | 26 | | | |
| 26 | Other taxes (se | e instructi | ons) | | | | | | | | 27 | | | |
| | Total balance | due. Add I | lines 2 | 3 through 2 | 26 | | | | | | 28 | | | |
| Pue 27 28 | Payment (see | instruction | s) | | | | | | | | 29 | | | |
| Xe 29 | Amount owed | If line 28 | is sma | aller than lit | ne 27, er | nter amount ov | ved | | | | | | | |
| H 30 | Overpayment | If line 28 | is large | er than line | 27. ente | er overpaymen m. indudice accom | panying sched | unos and statements, an eity company member) i | d to the basil of m | y krewie | dge | | | _ |
| Sign | under penalties of and belief, it is the | correct, and | complet | 10. Declaration | of preparer | (other than partne | r or limited list | alty company member) i | s based on all inte | Allegener | May the | IRS discuss | this return | |
| Here | which preparer has | any knowled | ge. | | | | | | | 13 | instruction | TR()? | Yes | |
| | Sandura (f) | arther or limit | ind kabili | ity company m | rember | | | Date | | - | Check | | PTN | - |
| | Pare/Type prepa | | S. S. S. K. | | | Preparer's sign | | | Date 04/ | 20/20 | | | ******* | ** |
| Paid | BARBARA G. | MOCALL | | | | BARBARA G. | | CPAS, PA | 1 047 | 1 | EIN | | 222695 | 54 |
| Preparer | f Firm's name | | DD, | MCCA | | ASSOCI | MIES, | CERD, ER | | | | | 10 20 C | |
| | V Firm's address | P. | | BOX 2 LIUS, | | | - | 8031 | | Dhan | e no. | 704- | 896-28 | 370 |
| Use Onl | y Pilling accrede | | | | | | | | | | | | | 4.47 |

INERTIALINER 04/20/2020 1 27 PM

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| W | 55 (2019) INERTIA ENERGY AI dule B Other Information | | | | | Man T | Me |
|---|--|--|--|--|-----------|----------|-----|
| Wh | hat type of entity is filing this return? Check th | e applicable box: | | | P | Yes | No |
| | | Domestic li | mited partnership | | | | |
| Ц | Domesoc general paronoramp | | mited liability partnership | p. | | | |
| X | Domesuc analy outpany | H | | 00 | | | |
| | Foreign partnership T | 1 Outo | | | | | |
| At | the end of the tax year. | the Conference | with traded as a patr | thership), trust, or tax- | | | |
| Di | the end of the tax year. d any foreign or domestic corporation, partner | ship (including any | ferruly prated as a pain | 10% or more in the profit. | | 100 | |
| ex | any toreign or domesor, corporation, parties | own, directly or in | directly, all interest of 5 | Tryes" attach Schedule | 1 | | |
| los | as or capital of the partnership? For rules of | constructive owner | ship, see insulucions. II | 1 165, and 1 Controls | | | X |
| _ | A Charles Contractor Charging 50% or M | one of the Partners | ano | | | 1.51 | |
| - | in a vibration and all out of the state of t | rectly, an interest of | of 50% or more in the pr | hadde D.d. lotomation | | | |
| th | e nartnership? For rules of constructive owno | rship, see instructi | ons, in res, auach Su | neque B-1, internation | | x | |
| or | Partners Owning 50% or More of the Partne | rship | | | | | |
| | the and of the two week did the nadeership: | | | | | 200 | |
| | the man will as more or own directly or it | ndirectly, 50% or m | tore of the total voting p | oower of all classes of | | 105 | |
| 0 | lock entitled to vote of any foreign or domesti | c corporation? For | rules of constructive ov | whership, see instructions. | | 1100 | x |
| 20 | "Yes," complete (i) through (iv) below | | | | | vercenta | - |
| IT | Tes, complete (i) anolgit (ii) acion | (i) Employ | ver identification | (III) Country of | | d in Vol | |
| | (i) Name of Corporation | | ber (if any) | Incorporation | - | Stock | 0 |
| _ | | | | | | | |
| | | | | | | _ | |
| - | | - | | | | | |
| | | | | | | | |
| | | | | | | | _ |
| | | | internet of 50% | or more in the profit loss. | | | |
|) (| Own directly an interest of 20% or more, or ov | vn, directly of indire | scuy, all increas or 50% | whin) or in the beneficial | | | |
| 1.0 | | io (including an en | tity treated as a partners | sing) or in and borronade. | | | 1 3 |
| | nterest of a trust? For rules of constructive ov | vnership, see instru | uctions. If "Yes," comple- | the (i) through (a) become | (0) | Maximu | m |
| | 2067 2002 | (iii) Employer Identification | (III) Type of | (ht) Country of Organization | | lage Ow | |
| | (i) Name of Entity | Number (f are) | Entity | Ungen canoo | Profil, L | 100, 0 | Cap |
| - | | | | | | | - |
| | | | | | | | - |
| _ | | | | | - | _ | - |
| _ | | | | | _ | _ | _ |
| _ | | | | | | - | - |
| - | in the second second | Baurian conditions? |) | | | Yes | 1 |
| ł | Does the partnership satisfy all four of the fo | lowing conclusions? | -260.000 | | | | 1 |
| | The partnership's total receipts for the tax year | ar were less than a | 200,000. | | | | |
| a | The partnership's total assets at the end of th | e tax visar were les | ss than \$1 million. | | | 1 | |
| | The partnership's total associa at the one of the | a mar form | | in data Sociading | | 1 | |
| | Schedules K1 are filed with the return and fu | mished to the part | mens on or before the du | ue date (including | | | |
| b c | Schedules K 1 are filed with the return and fu extensions) for the partnership return. | mished to the part | iners on or before the du | ue dato (including | | x | |
| b | Schedules K 1 are filed with the return and fu extensions) for the partnership return. | mished to the part | mens on or before the du | | | x | - |
| b | Schedules K 1 are filed with the return and fu extensions) for the partnership return. | mished to the part | mens on or before the du | | | x | |
| b | Schedules K 1 are filed with the return and fu extensions) for the partnership return. The partnership is not filing and is not require If "Yes," the partnership is not required to con- | mished to the part | mens on or before the du | | | x | |
| b c d | Schedules K 1 are filed with the return and fu extensions) for the partnership return. The partnership is not filing and is not require if "Yes," the partnership is not required to con or item L on Schedule K-1. | mished to the part of to file Schedule nplote Schedules L | M-3 ., M-1, and M-2; item F ection 469(k)(2)? | on page 1 of Form 1065; | | x | |
| b c d | Schedules K 1 are filed with the return and fu extensions) for the partnership return. The partnership is not filing and is not require if "Yes," the partnership is not required to con or item L on Schedule K-1. | mished to the part of to file Schedule nplote Schedules L | M-3 ., M-1, and M-2; item F ection 469(k)(2)? | on page 1 of Form 1065; | | x | |
| b c d | Schedules K 1 are filed with the return and fu extensions) for the partnership return. The partnership is not filing and is not require if "Yes," the partnership is not required to con or item L on Schedule K-1. Is this partnership a publicity traded partnersh During the tax year, did the partnership have | mished to the part of to file Schedule nplote Schedules L ip as defined in se any debt that was | M-3 ., M-1, and M-2; item F ection 469(k)(2)? ; canceled, was forgiven | on page 1 of Form 1065; , or had the terms modified | | x | |
| b c d | Schedules K 1 are filed with the return and fu extensions) for the partnership return. The partnership is not filing and is not require if "Yes," the partnership is not required to con or item L on Schedule K-1. Is this partnership a publicity traded partnersh During the tax year, did the partnership have | mished to the part of to file Schedule nplote Schedules L ip as defined in se any debt that was | M-3 ., M-1, and M-2; item F ection 469(k)(2)? ; canceled, was forgiven | on page 1 of Form 1065; , or had the terms modified | | x | |
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| b c d 5 6 | Schedules K 1 are filed with the return and fu- extensions) for the partnership return. The partnership is not filing and is not require if "Yes," the partnership is not required to con- or item L on Schedule K-1. Is this partnership a publicly traded partnersh During the tax year, did the partnership have so as to reduce the principal amount of the d Has this partnership filed, or is it required to | mished to the part of to file Schedule nplete Schedules L ip as defined in se any debt that was lebt? file, Form 8918, M | M-3 ., M-1, and M-2; item F ection 469(k)(2)? ; canceled, was forgiven laterial Advisor Disclosu | on page 1 of Form 1065; n, or had the terms modified are Statement, to provide | | x | |
| b c d 5 5 | Schedules K 1 are filed with the return and fu- extensions) for the partnership return. The partnership is not filing and is not require if "Yes," the partnership is not required to con- or item L on Schedule K-1. Is this partnership a publicly traded partnersh During the tax year, did the partnership have so as to reduce the principal amount of the d Has this partnership filed, or is it required to information on any reportable transaction? | mished to the part of to file Schedules L npicte Schedules L ip as defined in se any debt that was lebt? file, Form 8918, M | M-3 ., M-1, and M-2; item F ection 469(k)(2)? : canceled, was forgiven laterial Advisor Disclosu e an interest in or a sign | on page 1 of Form 1065; n, or had the terms modified are Statement, to provide nature or other authority over | | x | |
| b c d 5 5 | Schedules K 1 are filed with the return and fu- extensions) for the partnership return. The partnership is not filing and is not require if "Yes," the partnership is not required to con- or item L on Schedule K-1. Is this partnership a publicly traded partnersh During the tax year, did the partnership have so as to reduce the principal amount of the d Has this partnership filed, or is it required to information on any reportable transaction? At any time during calendar year 2019, did the | mished to the part of to file Schedule nplote Schedules L ip as defined in se any debi that was lebt? file, Form 8918, M he partnership have as a bank accou | M-3 ., M-1, and M-2; item F action 469(k)(2)? a canceled, was forgiven taterial Advisor Disclosu e an interest in or a sign nt, securities account, o | on page 1 of Form 1065; h, or had the terms modified are Statement, to provide nature or other authority over or other financial account)? | | x | |
| b c d 5 6 | Schedules K 1 are filed with the return and fu extensions) for the partnership return. The partnership is not filing and is not require if "Yes," the partnership is not required to con or item L on Schedule K-1. Is this partnership a publicly traded partnersh During the tax year, did the partnership have so as to reduce the principal amount of the d Has this partnership filed, or is it required to information on any reportable transaction? At any time during calendar year 2019, did to a financial account in a foreign country (such Sce instructions for exceptions and filing req | mished to the part of to file Schedules I nplete Schedules I ip as defined in se any debt that was lebt? file, Form 8918, M he partnership have h as a bank accou- uirements for FinC | M-3 ., M-1, and M-2; item F ection 469(k)(2)? canceled, was forgiven taterial Advisor Disclosu e an interest in or a sign nt, securities account, o EN Form 114, Report o | on page 1 of Form 1065; h, or had the terms modified are Statement, to provide nature or other authority over or other financial account)? | | x | |
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| b c d 5 6 7 | Schedules K 1 are filed with the return and fu extensions) for the partnership return. The partnership is not filing and is not require if "Yes," the partnership is not required to con- or item L on Schedule K-1. Is this partnership a publicly traded partnersh During the tax year, did the partnership have so as to reduce the principal amount of the d Has this partnership filed, or is it required to Information on any reportable transaction? At any time during calendar year 2019, did the a financial account in a foreign country (such Sce instructions for exceptions and filing req Financial Accounts (FBAR). If "Yes," enter the | mished to the part of to file Schedules I nplete Schedules I ip as defined in se any debt that was lebt? file, Form 8918, M he partnership have a s a bank accou- uirements for FinC he name of the tom pership receive a d | M-3 ., M-1, and M-2; item F ection 469(k)(2)? canceled, was forgiven laterial Advisor Disclosu e an interest in or a sign nt, securities account, or EN Form 114, Report o eign country. listribution from, or was i | on page 1 of Form 1065; a, or had the terms modified are Statement, to provide nature or other authority over or other financial account)? of Foreign Bank and it the grantor of, or | | x | |
| b c d 5 6 7 8 | Schedules K 1 are filed with the return and fu- extensions) for the partnership return. The partnership is not filing and is not require if "Yes," the partnership is not required to com- or item L on Schedule K-1. Is this partnership a publicly traded partnership During the tax year, did the partnership have so as to reduce the principal amount of the d Has this partnership filed, or is it required to information on any reportable transaction? At any time during calendar year 2019, did the a financial account in a foreign country (such Sce instructions for exceptions and filing req Financial Accounts (FBAR). If "Yes," enter the At any time during the tax year, did the partner transferor to a foreign trust? If "Yes," the partner | mished to the part of to file Schedules L ip as defined in se any debt that was lebt? file, Form 8918, M the partnership have as a bank account unements for FinC the name of the tor mership receive a d intership may have | M-3 ., M-1, and M-2; item F ection 469(k)(2)? canceled, was forgiven laterial Advisor Disclosu e an interest in or a sign nt, securities account, o EN Form 114, Report o eign country. listribution from, or was i e to file Form 3520, Ann | on page 1 of Form 1065; n, or had the terms modified are Statement, to provide nature or other authority over or other financial account)? of Foreign Bank and it the granter of, or nual Return To Report | | X | |
| b c d 5 6 7 8 | Schedules K 1 are filed with the return and fu- extensions) for the partnership return. The partnership is not filing and is not require if "Yes," the partnership is not required to com- or item L on Schedule K-1. Is this partnership a publicly traded partnership During the tax year, did the partnership have so as to reduce the principal amount of the of Has this partnership filed, or is it required to information on any reportable transaction? At any time during calendar year 2019, did the a financial account in a foreign country (such Sce instructions for exceptions and filing req Financial Accounts (FBAR). If "Yes," enter the At any time during the tax year, did the partner transferor to, a foreign trust? If "Yes," the partner transferor to, a foreign trust? If "Yes," the partner transferor to, a foreign trust? | mished to the part of to file Schedule nplote Schedules L ip as defined in se any debt that was lebt? file, Form 8918, M the partnership have a s a bank account unements for FinC the name of the for mership receive a d intership may have ipt of Certain Fore | M-3 ., M-1, and M-2; item F ection 469(k)(2)? canceled, was forgiven laterial Advisor Disclosu e an interest in or a sign nt, securities account, o EN Form 114, Report o eign country. listribution from, or was in e to file Form 3520, Ann ign Gifts. See Instruction | on page 1 of Form 1065; n, or had the terms modified are Statement, to provide nature or other authority over or other financial account)? of Foreign Bank and it the grantor of, or hual Return To Report ris | | X | |
| b c d 5 6 7 8 9 | Schedules K 1 are filed with the return and fu- extensions) for the partnership return. The partnership is not filing and is not require if "Yes," the partnership is not required to con- or item L on Schedule K-1. Is this partnership a publicly traded partnersh During the tax year, did the partnership have so as to reduce the principal amount of the d Has this partnership filed, or is it required to Information on any reportable transaction? At any time during calendar year 2019, did the a financial account in a foreign country (such Sce instructions for exceptions and filing req Financial Accounts (FBAR). If "Yes," enter the At any time during the tax year, did the partner transferor to, a foreign trust? If "Yes," the part Transactions With Foreign Trusts and Reco | mished to the part of to file Schedule inplote Schedules L inplote | M-3 ., M-1, and M-2; item F ection 469(k)(2)? canceled, was forgiven laterial Advisor Disclosu e an interest in or a sign nt, securities account, o EN Form 114, Report o eign country. listribution from, or was in e to file Form 3520, Ann ign Gifts. See Instruction | on page 1 of Form 1065; n, or had the terms modified are Statement, to provide nature or other authority over or other financial account)? of Foreign Bank and it the grantor of, or hual Return To Report ris | | X | |
| b c d 5 6 7 8 9 10a | Schedules K 1 are filed with the return and fu- extensions) for the partnership return. The partnership is not filing and is not require if "Yes," the partnership is not required to con- or item L on Schedule K-1. Is this partnership a publicly traded partnersh During the tax year, did the partnership have so as to reduce the principal amount of the d Has this partnership filed, or is it required to information on any reportable transaction? At any time during calendar year 2019, did to a financial account in a foreign country (such See instructions for exceptions and filing req Financial Accounts (FBAR). If "Yes," enter the At any time during the tax year, did the partnership ransferor to, a foreign trust? If "Yes," the part transferor to, a foreign Trusts and Recci Is the partnership making, or had it previous Concident of the partnership making or had it previous | mished to the part of to file Schedule inplote Schedules L ip as defined in se any debt that was lebt? file, Form 8918, M he partnership have a s a bank accou unements for FinC he name of the ton hership receive a d rtnership may have ipt of Certain Fore dy made (and not a ion 754 election. | M-3 ., M-1, and M-2; item F action 469(k)(2)? a canceled, was forgiven laterial Advisor Disclosu e an interest in or a sign nt, securities account, or EN Form 114, Report of eign country. listribution from, or was in e to file Form 3520, Ann ign Gifts. See Instruction revoked), a section 754 | on page 1 of Form 1065; a, or had the terms modified are Statement, to provide nature or other authority over ar other financial account)? of Foreign Bank and it the grantor of, or hual Return To Report ris election? | | X | |
| b c d 5 6 7 8 9 10a | Schedules K 1 are filed with the return and fu- extensions) for the partnership return. The partnership is not filing and is not require if "Yes," the partnership is not required to con- or item L on Schedule K-1. Is this partnership a publicly traded partnersh During the tax year, did the partnership have so as to reduce the principal amount of the d Has this partnership filed, or is it required to Information on any reportable transaction? At any time during calendar year 2019, did the a financial account in a foreign country (such Sce instructions for exceptions and filing req Financial Accounts (FBAR). If "Yes," enter the At any time during the tax year, did the partner transferor to, a foreign trust? If "Yes," the part Transactions With Foreign Trusts and Reco | mished to the part of to file Schedule inplote Schedules L ip as defined in so any debt that was lebt? file, Form 8918, M the partnership have a s a bank account unements for FinC the name of the tom hership receive a d intership may have ipt of Certain Fore dy made (and not in ion 754 election. | M-3 ., M-1, and M-2; item F action 469(k)(2)? a canceled, was forgiven faterial Advisor Disclosu e an interest in or a sign nt, securities account, or EN Form 114, Report or eign country. listribution from, or was in a to file Form 3520, Ann ign Gifts. See Instruction revoked), a section 754 fustment under section | on page 1 of Form 1065; a, or had the terms modified are Statement, to provide nature or other authority over ar other financial account)? of Foreign Bank and it the grantor of, or hual Return To Report ris election? 743(b) or 734(b)? If "Yes," | | X | |

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| | 085 (2019) INERTIA ENERGY ADVISORS, LLC edule B Other Information (continued) | Yes | No |
|------|--|--------|------|
| - | | | |
| - | s the partnership required to adjust the basis of partnership assets under section 743(b) or 734(b) because of a | | |
| | the bit has the defend under method 74 Voll (* SLESSFIED DOOD (LLLLL)) (b) she had a fer all the state of the | | x |
| | A A A A A A A A A A A A A A A A A A A | | |
| | | | |
| | Check this box if, during the current or phor tax year, the parameters of the disregarded entities wholly owned by the and exchange or contributed such property to another entity (other than disregarded entities wholly owned by the | | 1 |
| | | - | - |
| - | partnership throughout the tax year) At any time during the tax year, did the partnership distribute to any partner a tenancy-in-common or other | - | x |
| | | - | - |
| _ | undivided interest in partnership property? If the partnership is required to file Form 8858, information Return of U.S. Persons With Respect To Foreign | 1.54 | |
| | If the partnership is required to the Form 8856, information reaching of Forms 8858 attached. See | | |
| | If the partnership is required to the Porth code, internation of the number of Forms 8858 attached. See Disregarded Entities (FDEs) and Foreign Branches (FBs), enter the number of Forms 8858 attached. See | - | - |
| | instructions | | |
| 1 | Instructions Does the partnership have any foreign partners? If "Yes," enter the number of Forms 8805, Foreign Partner's | | X |
| | Contract Add Matched Text filed for International State S | | |
| 5 | Information Statement of Section 1446 Weinfolding rax, into the date perton Certain Foreign Partnerships, attached Enter the number of Forms 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships, attached | | |
| | | X | 1 |
| 5a | to this return Did you make any payments in 2019 that would require you to file Form(s) 1099? See instructions | X | |
| b | The second Exercised Exercise 10002 | 1994 | |
| 7 | Contraction of Examples of Examples 5471 Information Return of U.S. Persons With Respect To Center Poreign | 12 | |
| 1 | A state of the sector of the s | | - |
| ~ | A strate that use familian advantments (in)ORE Section 032 | | - |
| 8 | is the same will the material with make any payments plat would require it to the | | x |
| 9 | the second start through the second start the second star | - | |
| - | and 1042-S under chapter 3 (sections 144) through 1449 at the partnership a specified domestic entity required to file Form 8938 for the tax year? See the Instructions | | x |
| 0 | | | X |
| | for Form 8938 Is the partnership a section 721(c) partnership, as defined in Regulations section 1.721(c)-1T(b)(14)? Is the partnership a section 721(c) partnership, as defined in Regulations section 1.721(c)-1T(b)(14)? | - | - |
| 21 | Is the partnership a section 721(c) partnership, as occurs or regardly for which the deduction is not allowed During the tax year, did the partnership pay or accrue any interest or royalty for which the deductions | 100 | |
| 22 | During the tax year, did the partnership pay or accroic any interest or region deductions | - | X |
| | Under section 267A? See Instructions, If "Yes," enter the total amount of the disallowed deductions Did the partnership have an election under section 163(i) for any real property trade or business or any farming | | |
| 23 | Did the partnership have an election under section 105() for any rost property case | | X |
| _ | business in effect during the tax year? See instructions | L | X |
| 24 | Does the partnership satisfy one or more of the following? See instructions | | |
| 8 | The partnership owns a pass-through entity with current, or prior year carryover, excess business interest | | |
| | | | |
| b | expense. The partnership's aggregate average annual gross receipts (determined under section 448(c)) for the 3 tax years | | |
| | an and the surgest law year are more than \$25 million and the partnership has observed interesting | | |
| 0 | The partnership is a tax shelter (see instructions) and the partnership has business interest expense. | | |
| | Land L Earn 2000 | - | 3 |
| 25 | the deates and of the controlized partnership audit regime under section 622 ((6)). Gee intervention | | |
| | Is the partnership electing out of the contrained partnership and the contrained of | | |
| | ine 3 | - 1 | |
| | If "No," complete Designation of Partnership Representative below. | - | - |
| - | a contract the Decomposition (see instructions) | | |
| De | er below the information for the partnership representative (PR) for the tax year covered by this return. | | |
| | er beiow the montandrich the pertonents | - | |
| - NA | 1118 PARK LANE U.S. phone number of CARP-2 | 00- | 221 |
| U.S | STORE OF R WESTERN SPRINGS IL 60558 PR 248-3 | 30- | 2219 |
| - | WEDIERC DIRECT | | |
| 11 | e PR is an entity, name of the destanded individual for the PR | | |
| | stores of destruction the stores of the store of | | _ |
| GH | ignated individual | L | - |
| 26 | Is the partnership attaching Form 8996 to cartify as a Qualified Opportunity Fund? | | |
| _ | If "Yes," enter the amount from Form 8996, line 14 | | |
| 27 | If "Yes," enter the amount from Form easo, line 14 Enter the number of foreign partners subject to section 854(c)(8) as a result of transferring all or a portion of an | 0 | |
| | f marking a distribution 1000 the contraction | | |
| 2 | At any line during the tax year, were there any transfers between the partnership and its partners below a sta- | | |
| | disclosure requirements of Regulations section 1.707-8? | Form 1 | |

DAA

| 1063 | (2019) INERTIA ENERGY ADVISORS, LLC | Tota | al amount |
|-----------------|---|-----------------------|-----------------|
| hed | Ile K Partners' Distributive Share Items | 1 | 263,292 |
| | Ordinary business income (loss) (page 1, line 22) | 2 | |
| | 2 Net rental real estate income (loss) (attach Form 8825) | 1999 | |
| | 3a Other gross rental income (loss) 3b | | |
| (Loss) | Expenses into other shifts actuality (allact) satisfield. | 30 | V |
| | Conter net rental income (loss). Subtract line 3b from line 3a Guarnieed payments: a Services 4a | | T |
| | 4 Guaranteed payments: a Services 4a b Capital 4b | 40 | |
| | a Total Add lines 4a and 4b | 5 | |
| | E Internet income | - | |
| | 6 Dividends and dividend equivalents: a Ordinary dividends | 6a | |
| | Dividends and dividend equivalents: a Ordinary dividends b Qualified dividends 6b c Dividend equivalents 6c | | |
| | | 7 | |
| - | 7 Royalties 8 Net short-term capital gain (loss) (attach Schedule D (Form 1085)) | 8 | |
| | Net short-term capital gain (loss) (attach Schedule D (Form 1065)) | 9a | |
| | | | |
| | b Collectibles (28%) gain (loss) | | |
| | Unrecapilured section 1250 gain (stach searching) | 10 | |
| | 10 Net section 1231 gain (loss) (attach Form 4797) | 11 | |
| | 11 Other income (loss) (see instructions) Type | 12 | |
| 20 | 12 Section 179 deduction (attach Form 4562) | 13a | |
| ō | 13a Contributions | 13b | |
| Deductions | to the second intersect webbind | 14- | |
| | c Section 50(c)(2) expenditures(1) Type (2) | 13c(2) 13d | |
| 3 | d Other deductions (see instructions) Type | | 263,292 |
| | 14a Net earnings (loss) from self-employment | 14a | 203,232 |
| Employ- ment | b Gross farming or fishing income | 14b | |
| d Log | c Gross nonfarm income | 14c | 301,823 |
| ш E | c Gross noniam income 15a Low-income housing credit (section 42(j)(5)) | 15a | |
| | | 15b | |
| 00 | b Low-income housing credit (other) | 15c | |
| Credits | c Qualified renabilitation experioritides (renatively feature) (and the | 15d | |
| 2 | | 15c | |
| 0 | e Other rental credits (see instructions) Type | 15f | |
| | f Other credits (see instructions) Type | | |
| | 16a Name of country or U.S. possession | 16b | |
| | b Gross income from all sources | 16c | |
| | c Gross income sourced at pariner level | 100 | |
| 2 | Environ armss income sourced at partnership level | | |
| Buo | e Foreign branch category | 160 | |
| Transacti | a reaction of the holder | 16h | |
| 18 | f Passive category g General category Deductions allocated and apportioned at partner level | | |
| La l | i Interest conertise j Other | 16j | |
| | i Interest expense j Other Deductions allocated and apportioned at partnership level to foreign source income | | |
| 5 | | 161 | |
| 2 | o Other | 160 | |
| Foreign | In resource category | 16p | |
| - | p Total foreign taxes (check one): Paid Accrued | 16q | |
| | a Reduction in taxes available for credit (attach statement) | | A LEW TON STATE |
| | r Other foreign tax information (attach statement) | 178 | |
| × | 17a Post-1986 depreciation adjustment | 475 | |
| E o | b Adjusted gain or loss | 47- | |
| = | c Depletion (other than oil and gas) | 474 | |
| Minimum Tax | d Oil, gas, and geothermal properties - gross income | | |
| 5.51 | e Oil, gas, and geothermal properties - deductions | | |
| | f Other AMT itoms (attach statement) | | |
| | and the second internet income | 18a | |
| 5 | 168 Tax exempt increase incomes | 18b | |
| Information | 18a Tax exempt interest income b Other tax-exempt income c Nondeductible expenses SEE STATEMENT 2 | 18c | 1,1 |
| m | c Nondeductible expenses | 19a | 269,1 |
| or | 19a Lisubuuuts oi cast and manager a | 19b | |
| | b Distributions of other property | 20a | |
| Other | 20a Investment income | 20b | |
| he | b Investment expenses c Other items and amounts (attach statement) SEE STATEMENT 3 | | |
| | SKE STATEMENT 2 | and the second second | Form 1065 (|

| arm 1065 (2019) INE | RITA EMERG | | 100 | | | | |
|---|---|------------------------------------|------------------------------------|---|---|------------------------------------|---------------|
| | | | | e sum of Sch | edule K, lines 12 ti | vough 13d, and 16p 1 (v) Exempt | 263,292 |
| Net income (loss). Com | bine Schedule K, lines 11 | hrough 11. From the rea | (iii) in | dividual | | (v) Exempt | (VI) |
| 2 Analysis by | (i) Corporate | (ii) Individual | | sive) | (iv) Partnersh | Organization | Nominee/Other |
| partner type: | () | (active) | (par | | | | |
| a General partners | | 230,651 | | 32,641 | | 001 | |
| b Limited partners | | | Beginning | | | End of tax | c year |
| Schedule L Ba | lance Sheets per Bo | (a) | Delland | | b) | (c) | (d) |
| As | sets | 101 | 1223 | | 73,911 | | 66,977 |
| 1 Cash | | | | 17.755.912.25 | | | |
| 2a Trade notes and ad | counts receivable | | | | | | |
| b Less allowance for | bad debts | | A CONTRACTOR | | | | |
| 3 Inventories | | | | | | | |
| - | bligation8 | | | | | | |
| 5 Tax-exempt securit | ties | | | | | | |
| 6 Other current assets (attach statement) | | | | - | | | |
| 7a Loans to partners (or | persons related to partner | s) | | - | | | |
| b Mortgage and real | estate loans | | | - | | | |
| 8 Other investments outsich statement) - | | | | 1.000 | the second second | | |
| 9a Buildings and othe | r depreciable asscts | | | - | | | |
| | depreciation | | | 0.0000 | - | | |
| 10a Depletable asscts | | | - | and a state | | | |
| | depletion | | | | | | |
| 11 Land (net of any a | | | | - | | | |
| 12a Intangible assets | | | | - | | | |
| | amortization | | | - | | | |
| 13 Other assets | | | | | 73,911 | | 66,977 |
| | | | | - | 13,311 | | |
| Liabilitie | s and Capital | | | 0.9420.00 | CONTRACTOR NO. | | |
| | | 100000 | | - | | | |
| 16 Motopoes notes bo | onds payable in less than | 1 year | | - | 5,274 | | 5,322 |
| 17 Other current Induities | SEE STMT | 4 | | - | 5,214 | | |
| 18 All nonrecourse loans | | | | - | | | |
| 19a Loans from pathers | (or persons related to pa | ritners) | | - | | | |
| b Mortgages, notes, bond | ts payable in 1 year or more | | | - | | | |
| 20 Other Isibilities | | | | - | 68,637 | | 61,655 |
| 21 Pamars' capital account | f s | | | - | 73,911 | | 66,977 |
| 22 Total liabilities an | d capital | | | 1 . 1404 | 13,911 | ee) per Return | |
| Schedule M-1 | Peronciliation | of Income (Los | s) per B | ooks with | n income (L | oss) per Return | |
| | Note: The partner | whin mow he required | to file Sch | edule M-3. 3 | Sec Instructions | | |
| 1 Net income (loss |) per books | 26 | 2,174 | 5 Income | recorded on box | iks this year not included | |
| 2 Income included on | Schedule K, lines 1, 2, 3 | G | | | | hrough 11 (itemize): | |
| | and 11, not recorded on | | | | | | |
| books this year (Inversion) | | | | | | | |
| | | | | | | K, lines 1 through 134, | |
| 3 Guaranteed payments | (other than health insurance) | - | | 7 Deductions | s inducted on Scheoule | in, res i friografian | |
| A Exponent service | i on books this year not uie K, lines 1 through | | | | | ok income this year (kembe): | |
| | (29): | | - 10 | | | | 4 |
| 13d, and 16p (lem | | 100 | | C | | | |
| 13d, and 16p (item a Decreciation \$ | | | | | | | |
| a Depreciation \$ | 1,11 | .8 | | 8 Add line | es 6 and 7 | 7 kl k lannen | - |
| 13d, and 16p (item a Depreciation \$ b Travel and evidentiment \$ | 1,11 ATEMENT 5 | .8 | | | | | |
| 13d, and 16p (learn a Depreciation \$ b Travel and entertainment \$ SEE \$T2 | ATEMENT 5 | | 1,118 | 9 Income | (loss) (Analysis | of Net income | 263.29 |
| a Depreciation \$ b Travel and entertainment \$ SEE ST2 | ATEMENT 5 | 26 | 1,118 | 9 Income (Loss), | (loss) (Analysis line 1), Subtrac | line 8 from line 5 | 263,29 |
| a Depreciation \$ b Travel and entertainment \$ SEE ST2 | ATEMENT 5 | 26 Partners' Capital | 1,118 3,292 Account | 9 Income (Loss), ts | line 1). Subtract | line 8 from line 5 | |
| 13d, and 16p (lem a Depreciation \$ b Travel and entratainment \$ SEE \$T2 5 Add lines 1 throp Schedule M-2 | ATEMENT 5 | 26 Partners' Capita | 1,118 | 9 Income (Loss), ts | tions: a Cash | line 8 from line 5 | |
| 13d, and 16p (lem a Depreciation \$ b Travel and entertainment \$ SEE ST2 5 Add lines 1 throp Schedule M-2 1 Balance at begin | ATEMENT 5 Ugh 4 Analysis of F nning of year | 26 Partners' Capital | 1,118 3,292 Account | 9 Income (Loss), ts | tions: a Cash | line 8 from line 5 | |
| 13d, and 16p (lem a Depreciation \$ b Travel and entertainment \$ SEE ST2 5 Add lines 1 throp Schedule M-2 1 Balance at begin | ATEMENT 5 Ugh 4 Analysis of F nning of year ted: a Cash | 26 Partners' Capital é | 1,118 3,292 Account 8,637 | 9 Income (Loss), ts 6 Distribu | tions: a Cash b Prope | lline 8 from line 5 | 269,15 |
| 13d, and 16p (lem a Depreciation S b Travel and entertainment S SEE ST2 5 Add lines 1 throp Schedule M-2 1 Balance at begin 2 Capital contribution | ATEMENT 5 ugh 4 Analysis of F nning of year Med: a Cash b Property | 26 Partners' Capital | 1,118 3,292 Account | 9 Income (Loss), ts 6 Distribu | tions: a Cash b Prope | lline 8 from line 5 | 269,15 |
| 13d, and 16p (lem a Depreciation S b Travel and entertainment S SEE ST2 5 Add lines 1 throp Schedule M-2 1 Balance at begin 2 Capital contribut 3 Net income (loss 4 Other incomes) | ATEMENT 5 Ugh 4 Analysis of F nning of year ded: a Cash b Property a) per books | 26 Partners' Capital 6 20 | 1,118 3,292 Account 8,637 | 9 Income (Loss), 5 6 Distribu 7 Other (itemiz | tions: a Cash b Prope decreases re): | nty | 269,15 |
| 13d, and 16p (lem a Depreciation S b Travel and entertainment S SEE ST2 5 Add lines 1 throp Schedule M-2 1 Balance at begin 2 Capital contribut 3 Net income (los 4 Other increases (terrize): | ATEMENT 5 ugh 4 Analysis of F nning of year Med: a Cash b Property | 26 Partners' Capital 6 20 | 1,118 3,292 Account 8,637 | 9 Income (Loss), 5 6 Distribu 7 Other (itemiz 8 Add lin | tions: a Cash b Prope decreases re): | nty | 269,15 |

| PARTNER# 1 | XR | nal K-1 Amended K | | OMB No. 1545-0123 |
|--|----------|--------------------------------------|----------------|---------------------------------------|
| hedule K-1 2019 | Par | t III Partner's Share o | f Curren | nt Year Income, |
| orm 1065) | 112 | Deductions, Cred | | |
| entmani of the Tresoury mai Revenue Service For calendar year 2019, or tax year | 1 | Ordinary business income (loss) | 15 | Credita |
| | | 198,010 | - | A PN / |
| artner's Share of Income, Deductions, | 2 | Net rental real estate income (ices) | 0 | 0 PY |
| redits, etc. See back of form and separate instructions. | - | Other net nental income (tool) | 16 | Foreign transactions |
| Part I Information About the Partnership | 3 | Other that hand in tot the (one) | | |
| Partrentip's employer identification number | 43 | Guaranteed payments for services | | |
| 45-2150337 | - | | | |
| Pathership's name, wideless, city, state, and ZIP code | 40 | Guerraniaed payments for capital | | |
| NERTIA ENERGY ADVISORS, LLC | | | | |
| | 40 | Total guaranteed paymonts | | |
| 272 4700 GILBERT, SUITE 47 | | 0.00 | | |
| ESTERN SPRINGS IL 60558 | | | - 1 | |
| | 5 | interest income | - | |
| IRS Center where partnership filed rotum | 63 | Ordinary dividencia | 1 | |
| E-FILE | | | | |
| Check If this is a publicly traded partnership (PTP) | 80 | Qualified dividends | | the set of a statement for (ALT) have |
| Part II Information About the Partner | | | 17 | Alternative minimum tax (AMT) literns |
| Perine's SSN or TIN (Do not use TIN of a disregarited entity. See Instr.) | 66 | Dividend equivalents | | |
| CONTRACTOR DA | | | - 1 | |
| Name, address, city, state, and 2IP code for partner writered in E. See instructions | 7 | Tecyclics | | |
| RRIC HUTCHINS | - | | - 1 | |
| | 8 | Not short-term capital gain (kass) | 18 | Tax-exempt income and |
| 118 PARK LANE TECTEDN SDRINGS IL 60558 | 98 | Not long term capital gain (loss) | | nondeductible expenses |
| VESTERN SPRINGS IL 60558 | | HEL King term segmen gen from | c* | 841 |
| C Overest patter of U.C. | 9b | Caleables (20%) gen (loss) | | 014 |
| nember manager | | | | and the second second |
| H1 X Domostic pertner | 90 | Unreceptuted sectors 1250 gain | | |
| H2 H the partner is a developeded entity (DE), while the partner's. | | | - | A TWO DOLLARS |
| TIN | 10 | Net section 1231 gain (loss) | 19 | Distributions |
| Name | 11 | Other maante (loss) | A | 203,262 |
| It What haps of entity is the partner? INDIVIDUAL | 1 " | Office and the former | | |
| If this partial is a referencent plan (IRA/SEP/Kexglubic), check here | | | _ | |
| J Partner's share of profit, loss, and capital (see Instructions). | | | 20 | Other Information |
| E0.00000 - 100.000000 s | 12 | Section 179 deduction | Z* | ST |
| 50 00000 × 100.000000 × | - | | | |
| Capital 50.000000 % 100.000000 % | 13 | Cither deductions | AH* | ST |
| Check if decrease is due to sele or exchange of partnership intered | | | | |
| K Patner's share of liabilities. Deginning Ending | | | | |
| Norrocourse 5 S | - | | | |
| Quelliod nonrecourse s | - | | | |
| Recourse \$ 3,966 \$ 5,322 | | 100 000 | | |
| Check this box if them K includes listelity amounts from lower tier partnerships. | A | 198,010 | - | |
| L STMT Partner's Capital Account Analysis STMT 5 26,896 | c | 226,987 | | |
| Bedrund cabra second | 2 | | purposes" | |
| Capital contributed during the year 5 Control water and protect (basis) 5 197,169 | 2 | 2 More than one activity for passi | e activity pur | poses" |
| Conten per me monte cont | | See attached statement for | additiona | al information. |
| Other increase (decrease) (attach exploration) \$ 203,262 | 5 | | | |
| Webdrawals & destributions 8 (203,202 Ending capital account 8 20,803 | 1 | | | |
| M Did the partner contribute property with a built-in gain or loss? | | 5 | | |
| | DS I lea | | | |
| Section 204/2 Gain or (Lois) | | | | |
| N Partner's Share of Net Unnecognado doctari Polici Canno (entre Boginning | - 3 | 5 | | |
| | | | - | Schedule K-1 (Form 1065) |

For Pa

Exhibit C-3"Forecasted Financial Statements," provide two years of forecasted income statements for the applicant's Natural Gas related business activities in the state of Ohio Only, along with a list of assumptions, and the name, address, email address, and telephone number of the preparer. The forecasts should be in an annualized format for the two years succeeding the Application year.

Inertia Energy Advisors LLC has provided Ohio only forecasted income statements for 2022-2023. Assumptions used to generate forecast: Obtain gas for current customers, existing contracts expiring, timely signed contracts, and no enrollment issues.

Any questions should be directed to the following:

Eric Hutchins

4700 Gilbert Suite 47

Western Springs, IL 60558

248-390-2214

INCOME STATEMENT

Inertia Energy Advisors, LLC

2022

| 2022 | 2022 |
|------------------------------------|-----------|
| Revenue: | 20,000.00 |
| Gross Sales | 20,000.00 |
| Less: Sales Returns and Allowances | 0.00 |
| Cost of Goods Sold: | 0.00 |
| Materials | 0.00 |
| Other direct expenses | 0.00 |
| Gross Profit (Loss) | 20,000.00 |
| Other Income: | 0.00 |
| Discount received | 0.00 |
| Rental income | 0.00 |
| Gain (Loss) on Sale of Assets | 0.00 |
| Interest received | 19.00 |
| Gross Income | 20,000.00 |
| Expenses: | |
| Financial expenses | 83.00 |
| Bank Charges and commissions | 83.00 |
| Interest | 0.00 |
| Personnel expenses | 0.00 |
| Wages | 0.00 |
| Payroll Taxes | 0.00 |
| Other Operational Expenses | 6,800.00 |
| Amortization | 0.00 |
| Insurance | 200.00 |
| Maintenance & Repairs | 0.00 |
| Marketing | 100.00 |
| Miscellaneous | 1,000.00 |
| Office Expenses | 0.00 |
| Permits and Licenses | 500.00 |
| Rent | 0.00 |
| Telephone | 0.00 |
| Travel | 5,000.00 |
| Utilities | 0.00 |
| Vehicle Expenses | 0.00 |
| Total Operational Expenses | 6,883.00 |
| Net Income (Loss) | 13,117.00 |

INCOME STATEMENT

Inertia Energy Advisors, LLC

2023

| 2023 | 2023 |
|------------------------------------|-----------|
| Revenue: | 40,000.00 |
| Gross Sales | 40,000.00 |
| Less: Sales Returns and Allowances | 0.00 |
| Cost of Goods Sold: | 0.00 |
| Materials | 0.00 |
| Other direct expenses | 0.00 |
| Gross Profit (Loss) | 40,000.00 |
| Other Income: | 0.00 |
| Discount received | 0.00 |
| Rental income | 0.00 |
| Gain (Loss) on Sale of Assets | 0.00 |
| Interest received | 0.00 |
| Gross Income | 40,000.00 |
| Expenses: | 400.00 |
| Financial expenses | 100.00 |
| Bank Charges and commissions | 100.00 |
| Interest | 0.00 |
| Personnel expenses | 0.00 |
| Wages | 0.00 |
| Payroll Taxes | 0.00 |
| Other Operational Expenses | 11,000.00 |
| Amortization | 0.00 |
| Insurance | 200.00 |
| Maintenance & Repairs | 0.00 |
| Marketing | 300.00 |
| Miscellaneous | 2,000.00 |
| Office Expenses | 0.00 |
| Permits and Licenses | 500.00 |
| Rent | 0.00 |
| Telephone | 0.00 |
| Travel | 8,000.00 |
| Utilities | 0.00 |
| Vehicle Expenses | 0.00 |
| Total Operational Expenses | 11,100.00 |
| Net Income (Loss) | 28,900.00 |

Exhibit C-4 "Credit Rating," provide a statement disclosing the applicant's credit rating as reported by two of the following organizations: Duff & Phelps, Dun and Bradstreet Information Services, Fitch IBCA, Moody's Investors Service, Standard & Poors, or a similar organization. In instances where an applicant does not have its own credit ratings, it may substitute the credit ratings of a parent or affiliate organization, provided the applicant submits 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 "N/A" in Exhibit C-6.

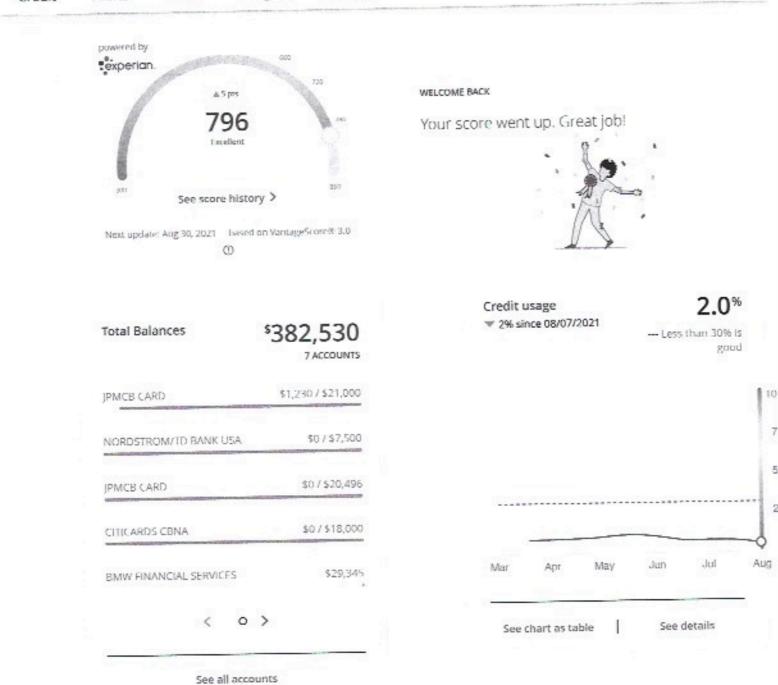
Inertia Energy Advisors LLC or parent doesn't have such credit rating so issuing N/A.

Exhibit 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.

Inertia Energy Advisors LLC has provided credit report from applicant.

Back to dashboard

Insights Support Offers Credit Alerts



What brings you to Credit Journey? Tell us about yourself so we can improve your experience.



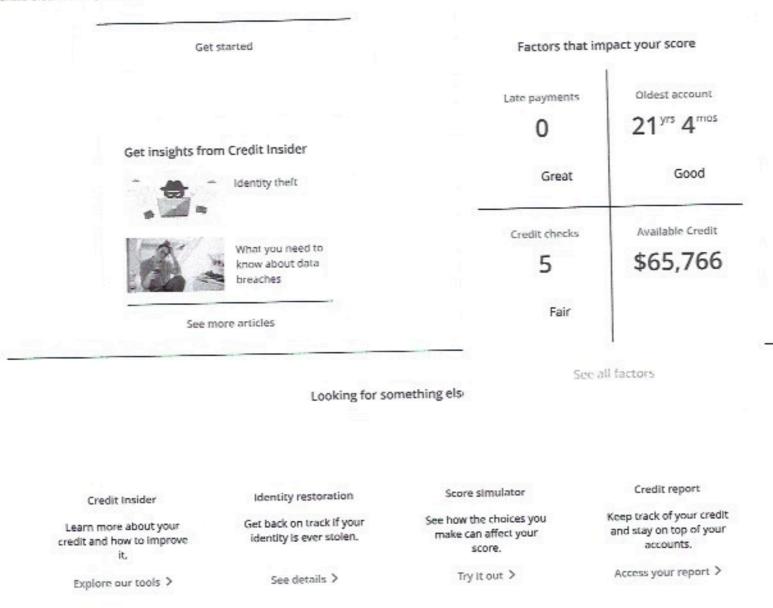
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5

2

Chase Credit Journey - Score



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Additional Information

VantageScore® 3.0, with scores ranging from 300 to 850, is a user-friendly credit score model developed by the three major nationwide credit reporting agencies, Experian®, TransUnion®, and Equifax®. VantageScore 3.0 is used by some but not all lenders. Higher scores represent a greater likelihood that you'll pay back your debts so you are viewed as being a lower credit risk to lenders. A lower score indicates to lenders that you may be a higher credit risk.

There are three different major credit reporting agencies. Experian, TransUnion and Equifax, that maintain a record of your credit history known as your credit file. Credit scores are based on the information in your credit file at the time it is requested. Your credit file information can vary from agency to agency because some lenders report your credit history to only one or two of the agencies; so your credit scores can vary if the information they have on file for you is different. Since the information in your file can change over time, your credit scores also may be different from day to day. Different credit scoring models can also give a different assessment of the credit risk (risk of default) for the same consumer and same credit file.

There are different credit scoring models which may be used by lenders and insurers. Your lender may not use VantageScore 3.0, so don't be surprised if your lender gives you a

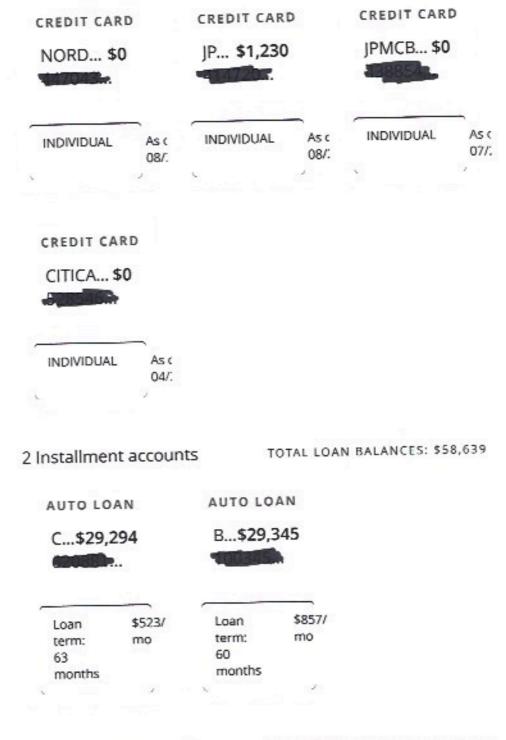
https://secure05a.chase.com/web/auth/cjp#/cjp/score/index/index

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| Back to dashbo | ard Chase Cre | dit Journey | Sign Out |
|--|--|---|---|
| Credit Alerts | Offers Insig | hts Support | MANDAL STREET, STRE |
| Here's | s your updated credit e an item to see more | DORT report. Within each detail. If there's ar see how to report | h category 0 , ny activity you |
| CATEGORIES Open accounts Closed accounts Credit checks Derogatory marks Collections Public records | 7 Open accounts 4 Revolving accounts | | :ES: \$1,230 / TOTAL CREDIT: \$66,996 |

https://secure05a.chase.com/web/auth/cjp#/cjp/report/index/index



1 Real estate account

TOTAL LOAN BALANCES: \$322,661

https://secure05a.chase.com/web/auth/cjp#/cjp/report/index/Index

Page 2 of 5

| | MORTGA | GE | | | |
|------------|---------------|---------------|------------|------------|-----------------|
| | \$322,6 | 561 | | | |
| | 195010 | R. | | | |
| | | | | | |
| | 1 | \$3,129/ | | | |
| | Loan term: | mo | | | |
| | 180 | | | | |
| | months | | | | |
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| b 0 | Public re | cords | | | |
| FU | rublicite | COTOS | | | |
| | | | | | |
| See See 10 | | | | | |
| | | statements | | | |
| Q | As of A | ugust 23, you | don't have | any consul | mer statements. |
| - A. | | - | | | |

Personal information .

Name

ERIC HUTCHINS

Also known as

Birth year

1970

Employers

INTERTIA ENERGY ADVISORIGS ENERGY

Addresses

1118 PARK LN WESTERN SPRINGS IL 60558-2116 3 SWEETWOOD CT INDIAN HEAD PARK IL 60525-4457 11340 HIAWATHA LN INDIAN HEAD PARK IL 60525-4332

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Additional Information

VantageScore[®] 3.0, with scores ranging from 300 to 850, is a user-friendly credit score model developed by the three major nationwide credit reporting agencies, Experian[®], TransUnion[®], and Equifax[®]. VantageScore 3.0 is used by some but not all lenders. Higher scores represent a greater likelihood that you'll pay back your debts so you are viewed as being a lower credit risk to lenders. A lower score indicates to lenders that you may be a higher credit risk.

There are three different major credit reporting agencies, Experian, TransUnion and Equifax, that maintain a record of your credit history known as your credit file. Credit scores are based on the information in your credit file at the time it is requested. Your credit file information can vary from agency to agency because some lenders report your credit history to only one or two

https://secure05a.chase.com/web/auth/cjp#/cjp/report/index/Index

Page 4 of 5

of the agencies; so your credit scores can vary if the information they have on file for you is different. Since the information in your file can change over time, your credit scores also may be different from day to day. Different credit scoring models can also give a different assessment of the credit risk (risk of default) for the same consumer and same credit file.

There are different credit scoring models which may be used by lenders and insurers. Your lender may not use VantageScore 3.0, so don't be surprised if your lender gives you a score that's different from your VantageScore. (And your VantageScore 3.0 may differ from your score under other types of VantageScores). Just remember that your associated risk level is often the same even if the number is not. For some consumers, however, the risk assessment of VantageScore 3.0 could vary. sometimes substantially, from a lender's score. If the lender's score is lower than your VantageScore 3.0, it is possible this difference can lead to higher interest rates and sometimes credit denial.

The credit scores presented in Credit Journey are not so-called FICO scores, and follow the VantageScore 3.0 consumer credit scoring model, which is not affiliated with Fair, Isaac and Company. The credit scores presented in Credit Journey may not be identical in every respect to any consumer credit scores provided by any other company.

The Identity Theft Insurance is underwritten and administered by American Bankers Insurance Company of Florida, an Assurant company under group or blanket policy(ies). The description herein is a summary and intended for informational purposes only and does not include all terms, conditions and exclusions of the policies described. Please refer to the actual policies for terms, conditions, and exclusions of coverage. Coverage may not be available in all jurisdictions. Review the <u>Summary of Benefits</u>. Exhibit 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.

Inertia Energy Advisors is a stand-alone entity with no affiliate or subsidiary company.

Exhibit D-1 "Operations." Include details of the applicant's business operations and plans for arranging and/or aggregating for the supply of natural gas to retail customers.

Inertia Energy Advisors plan is to provide detailed offers from different suppliers, highlighting the similarities and differences in programs. Plan is to review all contracts and make customers aware of risks, while encouraging them to have internal legal counsel review and redline. Once customer has selected a program, will forward a supplier initiated contract for signature.

10

Exhibit D-2 "Operations Expertise and Key Technical Personnel," Provide evidence of the applicant's experience and technical expertise in performing the operations described in this application. Include the names, titles, e-mail addresses, telephone numbers and background of key personnel involved in the operational aspects of the applicant's business.

Eric Hutchins- Inertia Energy Advisors, LLC

President

4700 Gilbert Suite 47

Western Springs, IL 60558

248-390-2214

eric@inertiaenergyadvisors.net

Eric Hutchins joined the energy business in 2009, developing an understanding of business from the supply side and helping customers understand all aspects of energy buying process. Only after years of learning the many intricacies of energy, a decision was made to establish Inertia Energy Advisors to provide a broader energy management platform. Eric is the only contributor to Inertia Energy Advisors, this way customers get the eduction, transparency, and communication required.

Exhibit C-2 "Financial Statements," provide copies of the applicant's two most recent years of audited financial statements (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, it shall file 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 account numbers redacted).

Inertia Energy Advisors LLC has provided a copy of two most recent tax returns.

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|--------------------------------|--|
| SCHEDULE C | |
| (Form 1040) | |

Profit or Loss From Business

(Sole Proprietorship)

| OMB No. 1543 | -0074 |
|--------------|-------|
| 202 | 20 |
| InemtadA | 00 |

| | nent of the Tressury | Go to www | v.irs.gov/ScheduleC | for in | structions and the latest inform A1; partnerships generally must | ation. file Form | 1065. | Allactmaril Sequence No 09 |
|----|---|-----------------|---|----------|---|---------------------|-----------|---|
| _ | Revenue Service (99) Attach t of proprietor | o romi iva | , 1040-51, 1040-111 | . 01 14 | rei, paraneranpo gonarang more | | | umber (SSN) |
| | RIC S HUTCHINS | | | | | | | 7983 |
| A | Principal business or profession, inc UTILITIES BROKER | luding produ | ct or service (see ins | truction | ns) | BEN | | from instructions |
| C | Business name. If no separate busin | ness name, k | eave blank. | 1 | | DEm | ployer ID | number (EIN) (see instr.) |
| ~ | INERTIA ENERGY AD | | | | | 4 | 5-21 | 50337 |
| E | Business address (including suite or | | 1118 PA | RK : | | | ain a | |
| | City, town or post office, state, and 2 | | WESTERN | SP | RINGS IL 605 | 58 | | |
| F | Accounting method: (1) | Cash (2) | | 3) | Other (specify) | | | |
| G | Did you "materially participate" in the | e operation o | f this business during | 2020 | ? If "No," see instructions for limit of | n losses | | X Yes No |
| н | If you started or acquired this busine | ess during 20 | 20, check here | | | | | Ц п. |
| 1 | Did you make any payments in 202 | 0 that would | require you to file Fo | rm(s) 1 | 10997 See instructions | | | X Yes No X Yes No |
| J | If "Yes," did you or will you file requi | ired Form(s) | 10997 | | | | | X Yes No |
| Pa | rt I Income | | | | | | | |
| 1 | Gross receipts or sales. See instruct Form W-2 and the "Statutory employ | | | | income was reported to you on | | 1 | 359,823 |
| 2 | | | | | | | 2 | |
| 3 | Cubinest line 2 from line 4 | | | | | | 3 | 359,823 |
| 4 | Cost of goods sold (from line 42) | | | | | | 4 | |
| 5 | Gross profit. Subtract line 4 from li | ne 3 | | | | 100 | 5 | 359,823 |
| 6 | Other income, including federal and state | gasoline or fu | el tax credit or refund (se | e instru | ciors) | | 6 | |
| 7 | Gross income. Add lines 5 and 6 | | | | | | 7 | 359,823 |
| Pa | rt II Expenses. Enter exp | penses for | business use of | your | home only on line 30. | | | |
| 8 | Advertising | 8 | 3,323 | 18 | Office expense (see instructions) | | 18 | |
| 9 | Car and truck expenses (see | | | 19 | Pension and profit-sharing plans | | 19 | |
| | instructions) | 9 | 867 | 20 | Rent or lease (see instructions): | | | |
| 10 | Commissions and fees | 10 | | a | Vehicles, machinery, and equipm | ent | 20a | |
| 11 | Contract labor (see instructions) | 11 | 12,711 | b | Other business property | | 20b | and the second se |
| 12 | Depletion | 12 | | 21 | Repairs and maintenance | | 21 | E10 |
| 13 | Depreciation and section 179 | | | 22 | Supplies (not included in Part III) | | 22 | 519 |
| | expense deduction (not included in Part III) (see | | | 23 | Taxes and licenses | | 23 | 8,769 |
| | instructions) | 13 | 1,700 | 24 | Travel and meals: | | | |
| 14 | Employee benefit programs | | | 8 | Travel | | 24a | |
| | (other than on line 19) | 14 | 700 | b | Deductible meals (sec | | 24b | 80 |
| 15 | insurance (other than health) | 15 | 720 | - | instructions) | | 240 | 00 |
| 16 | Interest (see instructions): | 16a | | 25 26 | Utilities Wages (less employment credits | | 26 | |
| a | Mortgage (paid to banks, etc.) | 16b | | 20 | Mages (ress employment means | · | | |
| D | Other | 100 | | 273 | Other expenses (from line 48) | | 27a | 4,478 |
| 17 | Legal and professional services | 17 | 1,500 | | Reserved for future use | | 27b | |
| 28 | Total expenses before expenses fi | | and the second se | _ | | | 28 | 34,667 |
| 29 | Tentative profit or (loss). Subtract li | | | | • | | 29 | 325,156 |
| 30 | Expenses for business use of your | | | ses eb | sewhere. Attach Form 8829 | | | |
| | unless using the simplified method. | | | | | | | |
| | Simplified method filers only: en | | | your h | nome: | | | |
| | and (b) the part of your home used | | | | | | | 1 10 2 10 10 10 10 10 10 10 10 10 10 10 10 10 |
| | Method Worksheet in the instruction | | | | | | 30 | 3,201 |
| 31 | Net profit or (loss). Subtract line 3 | 0 from line 2 | 9. | | | | | |
| | · If a profit, enter on both Schedul | e 1 (Form 1 | 040), line 3 and on \$ | chedu | le SE, line 2. (If you | Г | | |
| | checked the box on line 1, see inst | tructions). Est | tates and trusts, ente | r on Fe | orm 1041, line 3. | | 31 | 321,955 |
| | If a loss, you must go to line 32. | | | | | _ | | |
| 32 | If you have a loss, check the box t | | | | | Г | 1 | |
| | . If you checked 32a, enter the los | | | | | | 32a | All investment is at risk. |
| | SE, line 2. (If you checked the box | on line 1, so | the line 31 instruct | ions). I | Estates and trusts, enter on | | 32b | Some investment is not |
| | Form 1041, line 3. | | | | | | | at nek |
| | . If you checked 32b, you must at | tach Form 61 | 198 Your loss may h | n limite | er l | | | |

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| | dule C (Form 1040) 2020 UTILITIES BROKER | | | |
|-----------------|--|------------|--------------|----------------------------------|
| 'a | rt III Cost of Goods Sold (see instructions) | | | |
| | Method(s) used to value closing inventory: a Cost b Lower of cost or market c Other (attach explanation) | nation) | VC | |
| | Was there any change in dotermining quantities, costs, or valuations between opening and closing inventory? | | | |
| | If "Yes," attach explanation | | Yes | |
| | | 35 | | |
| | Inventory at beginning of year. If different from last year's closing inventory, attach explanation | | | |
| | Purchases less cost of items withdrawn for personal use | 36 | | |
| | | | | |
| | Cost of labor. Do not include any amounts paid to yourself | 37 | | |
| | | 38 | | |
| | Materials and supplies | 04 | | |
| | Other costs | 39 | | |
| | Other costs | | | |
| | Add lines 35 through 39 | 40 | | |
| | | | | |
| | Inventory at end of year | 41 | | |
| | Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on line 4 | 42 | | |
| 3 | Information on Your Vehicle. Complete this part only if you are claiming car or true and are not required to file Form 4562 for this business. See the instructions for line file Form 4562. | 13 to find | out if you r | nust |
| | When did you place your vehicle in service for business purposes? (month, day, year) Of the total number of miles you drove your vehicle during 2020, enter the number of miles you used your vehicle for the number of miles you used | ior: | | |
| a | Of the total number of miles you drove your vehicle during 2020, enter the number of miles you used your vehicle f Business b Commuting (see instructions) c Ott Was your vehicle available for personal use during off-duty hours? | | Yes | - H 1 |
| a | Of the total number of miles you drove your vehicle during 2020, enter the number of miles you used your vehicle for Business b Commuting (see instructions) c Other Was your vehicle available for personal use during off-duty hours? Do you (or your spouse) have another vehicle available for personal use? | | Yes | |
| 3 | Of the total number of miles you drove your vehicle during 2020, enter the number of miles you used your vehicle for Business b Commuting (see instructions) c Other Was your vehicle available for personal use during off-duty hours? Do you (or your spouse) have another vehicle available for personal use? Do you have evidence to support your deduction? | | Yes Yes | E |
| a | Of the total number of miles you drove your vehicle during 2020, enter the number of miles you used your vehicle for Business b Commuting (see instructions) c Other Was your vehicle available for personal use during off-duty hours? Do you (or your spouse) have another vehicle available for personal use? Do you have evidence to support your deduction? | ver | Yes | E: |
| a b Pa | Of the total number of miles you drove your vehicle during 2020, enter the number of miles you used your vehicle for Business b Commuting (see instructions) c Other Section 2010 Business b Commuting (see instructions) c Other Expenses. List below business expenses not included on lines 8-26 or line 30 | ver | Yes Yes | |
| a b Pi B | Of the total number of miles you drove your vehicle during 2020, enter the number of miles you used your vehicle for Business b Commuting (see instructions) c Other Commuting (see instructions) Was your vehicle available for personal use during off-duty hours? Do you (or your spouse) have another vehicle available for personal use? Do you have evidence to support your deduction? If "Yes," is the evidence written? If "Yes," is the evidence written? If art V Other Expenses. List below business expenses not included on lines 8-26 or line 30 ANK CHARGES & FEES | ver | Yes Yes | 62 |
| a b PBD | Of the total number of miles you drove your vehicle during 2020, enter the number of miles you used your vehicle for Business b Commuting (see instructions) c Other Section 2010 Business b Commuting (see instructions) c Other Expenses. List below business expenses not included on lines 8-26 or line 30 | ver | Yes Yes | 62 1,00 |
| a b PBDP | Of the total number of miles you drove your vehicle during 2020, enter the number of miles you used your vehicle for Business b Commuting (see instructions) c Otto Was your vehicle available for personal use during off-duty hours? Do you (or your spouse) have another vehicle available for personal use? Do you have evidence to support your deduction? If "Yes," is the evidence written? art V Other Expenses. List below business expenses not included on lines 8-26 or line 30 ANK CHARGES & FEES UES & SUBSCRIPTIONS | ver | Yes Yes | 62 1,00 1,53 |
| a b PBDPT | Of the total number of miles you drove your vehicle during 2020, enter the number of miles you used your vehicle for Business b Commuting (see instructions) c Otter Business b Commuting off-duty hours? 0 you (or your spouse) have another vehicle available for personal use? 0 you have evidence to support your deduction? if "Yes," is the evidence written? If "Yes," is the evidence written? art V Other Expenses. List below business expenses not included on lines 8-26 or line 30 ANK CHARGES & FEES UES & SUBSCRIPTIONS OSTAGE | ver | Yes Yes | 62 1,00 1,53 |
| a b PBDPT | Of the total number of miles you drove your vehicle during 2020, enter the number of miles you used your vehicle for Business b Commuting (see instructions) c Otto Was your vehicle available for personal use during off-duty hours? Do you (or your spouse) have another vehicle available for personal use? Do you have evidence to support your deduction? If "Yes," is the evidence written? art V Other Expenses. List below business expenses not included on lines 8-26 or line 30 ANK CHARGES & FEES UES & SUBSCRIPTIONS OSTAGE ELEPHONE | ver | Yes Yes | 62 1,00 1,53 |
| a b PBDPT | Of the total number of miles you drove your vehicle during 2020, enter the number of miles you used your vehicle for Business b Commuting (see instructions) c Otto Was your vehicle available for personal use during off-duty hours? Do you (or your spouse) have another vehicle available for personal use? Do you have evidence to support your deduction? If "Yes," is the evidence written? art V Other Expenses. List below business expenses not included on lines 8-26 or line 30 ANK CHARGES & FEES UES & SUBSCRIPTIONS OSTAGE ELEPHONE | ver | Yes Yes | 62 1,00 1,53 |
| a b PBDPT | Of the total number of miles you drove your vehicle during 2020, enter the number of miles you used your vehicle for Business b Commuting (see instructions) c Otto Was your vehicle available for personal use during off-duty hours? Do you (or your spouse) have another vehicle available for personal use? Do you have evidence to support your deduction? If "Yes," is the evidence written? art V Other Expenses. List below business expenses not included on lines 8-26 or line 30 ANK CHARGES & FEES UES & SUBSCRIPTIONS OSTAGE ELEPHONE | ver | Yes Yes | 62 1,00 1,53 |
| a b P B D P T | Of the total number of miles you drove your vehicle during 2020, enter the number of miles you used your vehicle for Business b Commuting (see instructions) c Otto Was your vehicle available for personal use during off-duty hours? Do you (or your spouse) have another vehicle available for personal use? Do you have evidence to support your deduction? If "Yes," is the evidence written? art V Other Expenses. List below business expenses not included on lines 8-26 or line 30 ANK CHARGES & FEES UES & SUBSCRIPTIONS OSTAGE ELEPHONE | ver | Yes Yes | 62 1,00 1,5 |
| a b Pi B.D.P.T. | Of the total number of miles you drove your vehicle during 2020, enter the number of miles you used your vehicle for Business b Commuting (see instructions) c Otto Was your vehicle available for personal use during off-duty hours? Do you (or your spouse) have another vehicle available for personal use? Do you have evidence to support your deduction? If "Yes," is the evidence written? art V Other Expenses. List below business expenses not included on lines 8-26 or line 30 ANK CHARGES & FEES UES & SUBSCRIPTIONS OSTAGE ELEPHONE | ver | Yes Yes | 62 1,00 1,5 |
| a b Pi B.D.P.T. | Of the total number of miles you drove your vehicle during 2020, enter the number of miles you used your vehicle for Business b Commuting (see instructions) c Otto Was your vehicle available for personal use during off-duty hours? Do you (or your spouse) have another vehicle available for personal use? Do you have evidence to support your deduction? If "Yes," is the evidence written? art V Other Expenses. List below business expenses not included on lines 8-26 or line 30 ANK CHARGES & FEES UES & SUBSCRIPTIONS OSTAGE ELEPHONE | ver | Yes Yes | 62 1,00 1,5 |
| a b Pi B.D.P.T. | Of the total number of miles you drove your vehicle during 2020, enter the number of miles you used your vehicle for Business b Commuting (see instructions) c Otto Was your vehicle available for personal use during off-duty hours? Do you (or your spouse) have another vehicle available for personal use? Do you have evidence to support your deduction? If "Yes," is the evidence written? art V Other Expenses. List below business expenses not included on lines 8-26 or line 30 ANK CHARGES & FEES UES & SUBSCRIPTIONS OSTAGE ELEPHONE | ver | Yes Yes | 62 1,00 1,5 |
| a b PBDPT | Of the total number of miles you drove your vehicle during 2020, enter the number of miles you used your vehicle for Business b Commuting (see instructions) c Otto Was your vehicle available for personal use during off-duty hours? Do you (or your spouse) have another vehicle available for personal use? Do you have evidence to support your deduction? If "Yes," is the evidence written? art V Other Expenses. List below business expenses not included on lines 8-26 or line 30 ANK CHARGES & FEES UES & SUBSCRIPTIONS OSTAGE ELEPHONE | ver | Yes Yes | 62 1,00 1,53 |
| a b P B D P T | Of the total number of miles you drove your vehicle during 2020, enter the number of miles you used your vehicle for Business b Commuting (see instructions) c Otto Was your vehicle available for personal use during off-duty hours? Do you (or your spouse) have another vehicle available for personal use? Do you have evidence to support your deduction? If "Yes," is the evidence written? art V Other Expenses. List below business expenses not included on lines 8-26 or line 30 ANK CHARGES & FEES UES & SUBSCRIPTIONS OSTAGE ELEPHONE | ver | Yes Yes | 62 1,00 1,53 |
| a b P B D P T | Of the total number of miles you drove your vehicle during 2020, enter the number of miles you used your vehicle for Business b Commuting (see instructions) c Otto Was your vehicle available for personal use during off-duty hours? Do you (or your spouse) have another vehicle available for personal use? Do you have evidence to support your deduction? If "Yes," is the evidence written? art V Other Expenses. List below business expenses not included on lines 8-26 or line 30 ANK CHARGES & FEES UES & SUBSCRIPTIONS OSTAGE ELEPHONE | ver | Yes Yes | 62 1,00 1,53 |
| a b P B D P T | Of the total number of miles you drove your vehicle during 2020, enter the number of miles you used your vehicle for Business b Commuting (see instructions) c Otto Was your vehicle available for personal use during off-duty hours? Do you (or your spouse) have another vehicle available for personal use? Do you have evidence to support your deduction? If "Yes," is the evidence written? art V Other Expenses. List below business expenses not included on lines 8-26 or line 30 ANK CHARGES & FEES UES & SUBSCRIPTIONS OSTAGE ELEPHONE | ver | Yes Yes | 62 1,06 1,53 |
| a b PBDPT | Of the total number of miles you drove your vehicle during 2020, enter the number of miles you used your vehicle for Business b Commuting (see instructions) c Otto Was your vehicle available for personal use during off-duty hours? Do you (or your spouse) have another vehicle available for personal use? Do you have evidence to support your deduction? If "Yes," is the evidence written? art V Other Expenses. List below business expenses not included on lines 8-26 or line 30 ANK CHARGES & FEES UES & SUBSCRIPTIONS OSTAGE ELEPHONE | ver | Yes Yes | 62 1,06 1,53 |
| a b PBDPT | Of the total number of miles you drove your vehicle during 2020, enter the number of miles you used your vehicle for Business b Commuting (see instructions) c Otto Was your vehicle available for personal use during off-duty hours? Do you (or your spouse) have another vehicle available for personal use? Do you have evidence to support your deduction? If "Yes," is the evidence written? art V Other Expenses. List below business expenses not included on lines 8-26 or line 30 ANK CHARGES & FEES UES & SUBSCRIPTIONS OSTAGE ELEPHONE | ver | Yes Yes | 62 1,06 15 1,53 1,09 |

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| 106 | - | For calendar year 2019, or t | S. Return of Partne | , ending | | - | 0MB No. 1545-0128 |
|---------------------------------------|---|---|---|------------------------|-------------------------|-----------------|-------------------------|
| atment of the Tre nai Revenue Serv | | Go to www.ii | s.gov/Form1065 for instructi | ons and the lates | t Information. | | 2019 |
| Principal busines | | Name of partnership | | | DEn | ployer Identif | leation number |
| | - 12 | | | (352) | C | OF | |
| CONSULT | | | ENERGY ADVISORS | LLC | 1 | | |
| Principal product | or service Type | Therefore, device, or other | m or suite no. If a P.O. box, see the inst | | | te business st | |
| SERVICE | Prin | # #272 4700 | GILBERT, SUIT | | | 5/06/2 | 2011 |
| Business code n | umber | | ownex, country, and ZIP or foreign posts | | | e instructions) | 66,977 |
| | | WESTERN | SPRINGS IL | 60558 | * | - | 00,57 |
| 541990 | | | X Final return (3) | ame change (4) | Address chan | ce (5) | Amended return |
| Check applic | | | | ther (specify) | | 8- (0) L | |
| | unting method: (1) | | who was a partner at any time | | | | |
| | redules C and M-3 | | Who was a peruici or any unit | during the tax yes | | | |
| Check if Sch | teoretic: (4) | Anomanalari activitias fre | r section 465 at-risk purposes | 2) Grouped ; | activities for section | n 469 pass | ive activity purpose |
| Check if par | mership: (1) | riggregated activities for | inses on lines 1a through 22 b | alraw See instruction | ons for more inform | nation. | ,,,,,, |
| | receipts or sales | stiess income and expe | sises on lines to provin an o | 1a | 301,823 | | |
| | ins and allowances | | | 10 | **=/ | | |
| | ce. Subtract line 1t | | | | | 10 | 301,82 |
| | of goods sold (atta- | | | | | 2 | |
| 2 Cost o | profit. Subtract lin | | | | | 3 | 301,82 |
| | | | , and trusts (attach statement) | | | 4 | |
| 4 Ordina | | | | | | 5 | |
| | | tach Schedule F (Form | | | | 6 | |
| - | | m 4797, Part II, line 17 | (attach Form 4797) | | | 7 | |
| | income (loss) (att | | | | | 8 | 301,82 |
| | | ombine lines 3 through | | | | | 301,02 |
| 9 Salari | ies and wages (oth | her than to partners) (le | ss employment credits) | | | 9 | |
| 10 Guara | anteed payments to | | | | | 10 | |
| 11 Repai | irs and maintenand | ce | | | | 11 | |
| 10 Guara 11 Repai 12 Bad o | iebts | | | | | 12 | |
| | | | | | | 13 | |
| 13 Rent 14 Taxes 15 Intere | and licenses | | | | | 14 | 9,01 |
| 15 Intere | st (see instruction | | | | | 15 | |
| | | I, attach Form 4562) | | 16a | | | |
| | | ted on Form 1125-A an | d elsewhere on return | 16b | | 16c | |
| 17 Deck | | uct oil and gas depleti | | | | 17 | |
| 40 Batin | ement plans, ctc. | | | | | 18 | |
| 19 Empl | ovec benefit progra | sme | | | | 19 | 1.52.0 March 1. |
| | deductions (attac | | | SEE STAT | EMENT 1 | 20 | 29,51 |
| 21 Total | | | the far right column for lines 9 | | | 21 | 38,53 |
| | | come (loss). Subtract li | | | | 22 | 263,29 |
| | | | | ach Ecom 8897) | | 23 | |
| 23 Intere | | | pleted long-term contracts (att | | | 24 | |
| | | | me forecast method (attach Fo | | | 25 | |
| 25 BBA | | erpayment (see instruct | ions) | | | | |
| | r taxes (see instruc | | | | | 26 | |
| 27 Total 28 Paym | balance due. Add | d lines 23 through 28 | | | | 27 | |
| | nent (see instructio | | | | | 28 | |
| | | | 7, enter amount owed | | | 29 | |
| - 20 0.00 | payment. If line 28 | 8 is larger than line 27, | enter overpayment | and determined and a | the heat of my branches | 30 | |
| ign and b | elief, it is true, correct, an | actare that I have examined the ind complete. Declaration of pre | return, including accompanying scheckle parer (other than partner or limited liability | r company member) is b | ased on al information | " May the IRS | discuss this return |
| lere | preparer has any knowle | ledge | | • | | | serer slaven below (coo |
| | South the of nations on the | mited liability company member | | Date | | instructions)/ | X Yes |
| | signature of partner of in VType preparer's name | mand sound company manual | Preparer's signature | | Date | Check | # PTIN |
| | BARA G. MCCALL | La constant | BARBARA G. MCCALL | | 04/20/20 | self-employ | |
| | | ADD, MCCALL | | CPAS, PA | Firmi's | EN 5 | 6-2226954 |
| | | .O. BOX 2430 | the second se | | | | and the second second |
| as only rin | | ORNELIUS, NO | | 031 | Phone | 70 | 4-896-2870 |
| | | | | | | - | |

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| Sch | 065 (2019) INERTIA ENERGY | | | | | | |
|--|--|--|---|---|---------------------------|------------------|-----------------------------|
| | edule B Other Information | t the sector bis bis | | | lv | es | No |
| · r | What type of entity is filing this return? Chec | | what astrophin | | | 6.9 | NU |
| a | Domestic general partnership | | mited partnership mited liability partnershi | | | | |
| - r | Domestic limited liability company | - | miled liability paralelarit | 00 | DV | | |
| 0 | Foreign partnership | f Other | | | - 3 | 1 | |
| | At the end of the tax year: Did any foreign or domestic corporation, par | incusio Goducina am | active treated as a part | tourship) level or tax- | 1 1 2 | | |
| | | | | | | | |
| | exempt organization, or any foreign governn oss, or capital of the partnership? For rules | | | | | | |
| | or capital or the partnership / Por rules Information on Partners Owning 50% or | | | res, anacri schedule | | | x |
| | Did any individual or estate own, directly or | | | refit loss or capital of | | | - |
| | he partnership? For rules of constructive or | | | | 1 | | |
| | on Partners Owning 50% or Morc of the Pa | | | | | x | |
| | At the end of the tax year, did the partnershi | | | a second s | | | |
| | Dwn directly 20% or more, or own, directly of | | ore of the total voting po | ower of all classes of | | | |
| | stock entitled to vote of any foreign or dome | | | | | | |
| | f "Yes," complete (i) through (iv) below | | | | | | x |
| - | | III Ecolog | er identification | (III) Country of | (M) Per | | |
| | (I) Name of Corporation | | er (f sry) | Incorporation | Owned i Str | in voer tick | 0 |
| | | | | | _ | | |
| | | | | | | | |
| | | | | | | | |
| | | | Complete States | | | _ | |
| | | | | | | | _ |
| | Own directly an interest of 20% or more, or | | | | | | |
| | or capital in any foreign or domestic partner | | | | | | |
| | interest of a trust? For rules of constructive | summer to be a set in a set of the set of th | | Children and did balance | | | x |
| _ | | ownersnip, see instru | ctions. If "Yes," complete | e (i) through (v) below | | | |
| _ | | (II) Employer | (III) Type of | (N) Country of | (V) Mi Percentsp | akimum e Owre | |
| | (i) Name of Entity | the second s | | | | H Dwn | n be |
| | | (II) Employer Identification | (III) Type of | (N) Country of | Percentage | H Dwn | ni be |
| | | (II) Employer Identification | (III) Type of | (N) Country of | Percentage | H Dwn | ed in |
| | | (II) Employer Identification | (III) Type of | (N) Country of | Percentage | H Dwn | ed in |
| | | (II) Employer Identification | (III) Type of | (N) Country of | Percentage | H Dwn | ed in |
| | (i) Name of Entity | (II) Employer Identification Number (I' any) | (III) Type of | (N) Country of | Percentage Profit Loss | H Data | ed in apital |
| 4 | (i) Neme of Entity Does the partnership satisfy all four of the | (II) Employer Identification Number (I' any) | (W) Type of Entity | (N) Country of | Percentage Profit Loss | H Dwn | ed in apital |
| 4 | (i) Name of Entity Does the partnership satisfy all four of the The partnership's total receipts for the tax y | (II) Employer Identification Number (If any) Following conditions? par were less than \$2 | (III) Type of Entity 50,000. | (N) Country of | Percentage Profit Loss | H Data | ed in apital |
| 4 a b | (i) Name of Entity Does the partnership satisfy all four of the The partnership's total receipts for the tax y The partnership's total assets at the end of | (II) Employer Identification Number (If any) Number (If any) following conditions? car were less than \$2 the tax year were less | (III) Type of Entity 50,000. a than \$1 million. | (N) Country of Organization | Percentage Profit Loss | H Data | ed in apital |
| | (i) Neme of Entity Does the partnership satisfy all four of the The partnership's total receipts for the tax y The partnership's total assets at the end of Schedules K-1 are filed with the return and | (II) Employer Identification Number (If any) Number (If any) following conditions? car were less than \$2 the tax year were less | (III) Type of Entity 50,000. a than \$1 million. | (N) Country of Organization | Percentage Profit Loss | H Data | ed in apital |
| c | (i) Neme of Entity Does the partnership satisfy all four of the The partnership's total receipts for the tax y The partnership's total assets at the end of Schedules K-1 are filed with the return and extensions) for the partnership return. | (II) Employer Identification Number (IF any) following conditions? car were less than \$2 the tax year were less furnished to the partn | (III) Type of Entity 50,000. a than \$1 million. ers on or before the due | (N) Country of Organization | Percentage Profit Loss | Yes | ed in apital |
| c | (i) Neme of Entity Does the partnership satisfy all four of the The partnership's total receipts for the tax y The partnership's total assets at the end of Schedules K-1 are filed with the return and extensions) for the partnership return. The partnership is not filing and is not requi | (II) Employer Identification Number (IF any) following conditions? car were less than \$2 the tax year were less furnished to the partm ired to file Schedule M | (III) Type of Entity 50,000. 2 than \$1 million. ers on or before the due 1-3 | (N) Country of Organization | Percentage Profit Loss | H Data | ed in apital |
| c | (i) Neme of Entity Does the partnership satisfy all four of the The partnership's total receipts for the tax y The partnership's total assets at the end of Schedules K-1 are filed with the ratum and extensions) for the partnership return. The partnership is not filing and is not requi If "Yes," the partnership is not required to co | (II) Employer Identification Number (IF any) following conditions? car were less than \$2 the tax year were less furnished to the partm ired to file Schedule M | (III) Type of Entity 50,000. 2 than \$1 million. ers on or before the due 1-3 | (N) Country of Organization | Percentage Profit Loss | Yes | ed in apital |
| c d | (i) Neme of Entity Does the partnership satisfy all four of the The partnership's total receipts for the tax y The partnership's total assets at the end of Schedules K-1 are filed with the ratum and extensions) for the partnership return. The partnership is not filing and is not requi If "Yes," the partnership is not required to co or item L on Schedule K-1. | (II) Employer Identification Number (Fary) following conditions? car were less than \$2 the tax year were less furnished to the partn ired to file Schedule M omplete Schedules L, | (III) Type of Entity 50,000. a than \$1 million. ers on or before the due 1-3 M-1, and M-2; item F or | (N) Country of Organization | Percentage Profit Loss | Yes | No |
| c d 5 | (i) Neme of Entity Does the partnership satisfy all four of the The partnership's total receipts for the tax y The partnership's total assets at the end of Schedules K-1 are filed with the ratum and extensions) for the partnership return. The partnership is not filing and is not requi if "Yes," the partnership is not required to co or item L on Schedule K-1. Is this partnership a publicly traded partnership | (II) Employer Identification Number (Fary) following conditions? car were less than \$2 the tax year were less furnished to the partn ired to file Schedule M omplete Schedules L, ship as defined in sec | (III) Type of Entity 50,000. a than \$1 million. ers on or before the due 1-3 M-1, and M-2; item F or tion 469(k)(2)? | (N) Country of Organization | Percentage Profit Loss | Yes | No |
| c d 5 | (i) Neme of Entity Does the partnership satisfy all four of the The partnership's total receipts for the tax y The partnership's total assets at the end of Schedules K-1 are filed with the return and extensions) for the partnership return. The partnership is not filing and is not requi if "Yes," the partnership is not required to co or item L on Schedule K-1. Is this partnership a publicly traded partners During the tax year, did the partnership hav | (II) Employer Identification Number (P any) following conditions? car were less than \$2 the tax year were less furnished to the partm ired to file Schedules L, omplete Schedules L, ship as defined in sec re any debt that was c | (III) Type of Entity 50,000. a than \$1 million. ers on or before the due 1-3 M-1, and M-2; item F or tion 469(k)(2)? | (N) Country of Organization | Percentage Profit Loss | Yes | No |
| c d 5 6 | (i) Neme of Entity Does the partnership satisfy all four of the The partnership's total receipts for the tax y The partnership's total assets at the end of Schedules K-1 are filed with the return and extensions) for the partnership return. The partnership is not filing and is not requi if "Yes," the partnership is not required to co or item L on Schedule K-1. Is this partnership a publicly traded partners During the tax year, did the partnership hav so as to reduce the principal amount of the | (II) Employer Identification Number (Fary) following conditions? car were less than S2 the tax year were less furnished to the partn ired to file Schedule N omplete Schedules L, ship as defined in sec re any debt that was o debt? | (III) Type of Entity 50,000. It than \$1 million. ers on or before the due I-3 M-1, and M-2; item F or tion 469(k)(2)? anceled, was forgiven, o | (N) Country of Organization | Percentage Profit Loss | Yes | No |
| c d 5 6 | (i) Neme of Entity Does the partnership satisfy all four of the The partnership's total receipts for the tax y The partnership's total assets at the end of Schedules K-1 are filed with the return and extensions) for the partnership return. The partnership is not filing and is not required to co or item L on Schedule K-1. Is this partnership a publicly traded partnership During the tax year, did the partnership hav so as to reduce the principal amount of the Has this partnership filed, or is it required to | (II) Employer Identification Number (Fany) following conditions? car were less than \$2 the tax year were less furnished to the partm ired to file Schedule N omplete Schedules L, ship as defined in sec re any debt that was o debt? o file, Form 8918, Mat | (III) Type of Entity 50,000. It than \$1 million. ers on or before the due I-3 M-1, and M-2; item F or tion 469(k)(2)? anceled, was forgiven, o | (N) Country of Organization | Percentage Profit Loss | Yes | No X |
| c d 5 6 | (i) Neme of Entity Does the partnership satisfy all four of the The partnership's total receipts for the tax y The partnership's total assets at the end of Schedules K-1 are filed with the return and extensions) for the partnership return. The partnership is not filing and is not required to co or item L on Schedule K-1. Is this partnership a publicly traded partners During the tax year, did the partnership hav so as to reduce the principal amount of the Has this partnership filed, or is it required to information on any reportable transaction? | (II) Employer Identification Number (Fany) following conditions? car were less than \$2 the tax year were less furnished to the partm ired to file Schedule N omplete Schedules L, ship as defined in sec re any debt that was o debt? o file, Form 8918, Mat | (III) Type of Entity 50,000. 2 than \$1 million. 2 t | (N) Country of Organization a date (including a date (including a page 1 of Form 1065; or had the terms modified Statement, to provide | Percentage Profit Loss | Yes | No X |
| c d 5 6 | (i) Neme of Entity Does the partnership satisfy all four of the The partnership's total receipts for the tax y The partnership's total assets at the end of Schedules K-1 are filed with the ratum and extensions) for the partnership return. The partnership is not filing and is not required to co or item L on Schedule K-1. Is this partnership a publicly traded partnership buring the tax year, did the partnership haw so as to reduce the principal amount of the Has this partnership filed, or is it required to information on any reportable transaction? At any time during calendar year 2019, did | (II) Employer Identification Number (Fary) following conditions? car were less than \$2 the tax year were less furnished to the partm ired to file Schedule N omplete Schedules L, ship as defined in sec re any debt that was o debt? o file, Form 8918, Mat | (III) Type of Entity 50,000. 50,000. 50,000. 50,000. 50,000. 50,000. 50,000. 51,000. 52,000. 53,000. 53,000. 54,000. 54,000. 54,000. 54,000. 55,000. 5 | (N) Country of Organization a date (including a date (including a page 1 of Form 1065; or had the terms modified Statement, to provide ture or other authority over | Percentage Profit Loss | Yes | No X |
| c d 5 6 | (i) Neme of Entity Does the partnership satisfy all four of the The partnership's total receipts for the tax y The partnership's total assets at the end of Schedules K-1 are filed with the ratum and extensions) for the partnership return. The partnership is not fling and is not requi if "Yes," the partnership is not required to co or item L on Schedule K-1. Is this partnership a publicly traded partners During the tax year, did the partnership hav so as to reduce the principal amount of the Has this partnership filed, or is it required to information on any reportable transaction? At any time during calendar year 2019, did a financial account in a foreign country (sur | (II) Employer Identification Number (Fary) following conditions? car were less than S2 the tax year were less furnished to the partn ired to file Schedule M omplete Schedules L, ship as defined in sec re any debt that was o debt? o file, Form 8918, Mai the partnership have a ch as a bank account. | (III) Type of Entity 50,000. 50,000. 50,000. 50,000. 50,000. 50,000. 50,000. 50,000. 50,000. 50,000. 50,000. 50,000. 50,000. 50,000. 50,000. 50,000. 50,000. 50,000. 51,000. 5 | (N) Country of Organization a date (including a date (including a page 1 of Form 1065; by had the terms modified Statement, to provide ture or other authority over other financial account)? | Percentage Profit Loss | Yes | No X |
| c d 5 8 | (i) Neme of Entity Does the partnership satisfy all four of the The partnership's total receipts for the tax y The partnership's total assets at the end of Schedules K-1 are filed with the ratum and extensions) for the partnership return. The partnership is not fling and is not requi if "Yes," the partnership is not required to co or item L on Schedule K-1. Is this partnership a publicly traded partners During the tax year, did the partnership hav so as to reduce the principal amount of the Has this partnership filed, or is it required to information on any reportable transaction? At any time during calendar year 2019, did a financial account in a foreign country (sur- See instructions for exceptions and filing re | (II) Employer Identification Number (Fary) following conditions? car were less than S2 the tax year were less furnished to the partn ired to file Schedule M omplete Schedules L, ship as defined in sec re any debt that was o debt? o file, Form 8918, Mai the partnership have a ch as a bank account, quirements for FinCEI | (III) Type of Entity 50,000. 51,000. 5 | (N) Country of Organization a date (including a date (including a page 1 of Form 1065; by had the terms modified Statement, to provide ture or other authority over other financial account)? | Percentage Profit Loss | Yes | No X X |
| c d 5 6 8 | (i) Neme of Entity Does the partnership satisfy all four of the The partnership's total receipts for the tax y The partnership's total assets at the end of Schedules K-1 are filed with the ratum and extensions) for the partnership return. The partnership is not filing and is not requi If "Yes," the partnership is not required to co or item L on Schedule K-1. Is this partnership a publicly traded partners During the tax year, did the partnership hav so as to reduce the principal amount of the Has this partnership filed, or is it required to information on any reportable transaction? At any time during calendar year 2019, did a financial account in a foreign country (sur See instructions for exceptions and filing re Financial Accounts (FBAR). If "Yes," enter | (II) Employer Identification Number (Fary) following conditions? ear were less than S2 the tax year were less furnished to the partn ired to file Schedule M omplete Schedules L, ship as defined in sec re any debt that was o debt? o file, Form 8918, Mar the partnership have a ch as a bank account, quirements for FinCE the name of the foreig | (III) Type of Entity 50,000. 5 | (N) Country of Organization e date (including in page 1 of Form 1065; or had the terms modified Statement, to provide ture or other authority over other financial account)? Foreign Bank and | Percentage Profit Loss | Yes | No X X |
| c d 5 6 8 | (i) Neme of Entity Does the partnership satisfy all four of the The partnership's total receipts for the tax y The partnership's total assets at the end of Schedules K-1 are filed with the return and extensions) for the partnership return. The partnership is not filing and is not requi if "Yes," the partnership is not required to co or item L on Schedule K-1. Is this partnership a publicly traded partners During the tax year, did the partnership hav so as to reduce the principal amount of the Has this partnership filed, or is it required to information on any reportable transaction? At any time during calendar year 2019, did a financial account in a foreign country (sur See instructions for exceptions and filing re <u>Financial Accounts (FBAR). If "Yes," enter 1</u> At any time during the tax year, did the part | (II) Employer Identification Number (Fary) following conditions? car were less than S2 the tax year were less furnished to the partn ired to file Schedule N omplete Schedules L, ship as defined in sec re any debt that was o debt? o file, Form 8918, Mar the partnership have a ch as a bank account, quirements for FinCEI the name of the foreig thership receive a dist | (III) Type of Entity 50,000. a than \$1 million. ars on or before the due 1-3 M-1, and M-2; item F or 10n 469(k)(2)? anceled, was forgiven, of terial Advisor Disclosure an interest in or a signat securities account, or of N Form 114, Report of F in country. ribution from, or was it t | (N) Country of Organization e date (including n page 1 of Form 1065; or had the terms modified Statement, to provide ture or other authority over other financial account)? Foreign Bank and he granitor of, or | Percentage Profit Loss | Yes | No X X |
| c d 5 3 8 | (i) Neme of Entity Does the partnership satisfy all four of the The partnership's total receipts for the tax y The partnership's total assets at the end of Schedules K-1 are filed with the return and extensions) for the partnership return. The partnership is not filing and is not requi if "Yes," the partnership is not required to co or item L on Schedule K-1. Is this partnership a publicly traded partners During the tax year, did the partnership hav so as to reduce the principal amount of the Has this partnership filed, or is it required to information on any reportable transaction? At any time during calendar year 2019, did a financial account in a foreign country (sur See instructions for exceptions and filing re Financial Accounts (FBAR). If "Yes," enter 1 At any time during the tax year, did the part transferor to, a foreign trust? If "Yes," the partnership filed, and the part transferor to, a foreign trust? If "Yes," the partnership filed to be a first the partnership filed to be a first file of the partnership filed to be a first the partnership filed to be a first file of the partnership filed to be a first file of the partnership filed to be a first file of the partnership file of th | (II) Employer Identification Number (Fary) following conditions? car were less than S2 the tax year were less furnished to the partne ired to file Schedule N omplete Schedules L, ship as defined in sec re any debt that was o debt? o file, Form 8918, Mai the partnership have a ch as a bank account, quirements for FinCEI the name of the foreig thership receive a dist artnership may have t | (III) Type of Entity 50,000. a than \$1 million. ars on or before the due 1-3 M-1, and M-2; item F or 100 469(k)(2)? anceled, was forgiven, of terial Advisor Disclosure an interest in or a signat securities account, or of N Form 114, Report of F in country. ribution from, or was it to o file Form 3520, Annual | (N) Country of Organization e date (including a date (including a date (including a page 1 of Form 1065; or had the terms modified Statement, to provide ture or other authority over other financial account)? Foreign Bank and the grantor of, or al Return To Report | Percentage Profit Loss | Yes | No X X X X |
| c d 5 8 7 8 | (i) Neme of Entity Does the partnership satisfy all four of the The partnership's total receipts for the tax y The partnership's total assets at the end of Schedules K-1 are filed with the return and extensions) for the partnership return. The partnership is not filing and is not required to co or item L on Schedule K-1. Is this partnership a publicly traded partners During the tax year, did the partnership hav so as to reduce the principal amount of the Has this partnership filed, or is it required to information on any reportable transaction? At any time during calendar year 2019, did a financial account in a foreign country (sur See instructions for exceptions and filing re Financial Accounts (FBAR). If "Yes," enter At any time during the tax year, did the part transferor to, a foreign trust? If "Yes," the p Transactions With Foreign Trusts and Reco | (II) Employer Identification Number (Fary) following conditions? car were less than \$2 the tax year were less furnished to the partn ired to file Schedule N omplete Schedules L, ship as defined in sec re any debt that was of debt? o file, Form 8918, Mai the partnership have a ch as a bank account, quirements for FinCEI the name of the foreig thership receive a dist artnership may have t eipt of Certain Foreign | (III) Type of Entity 50,000. a than \$1 million. ers on or before the due 1-3 M-1, and M-2; Item F or tion 469(k)(2)? anceled, was forgiven, of terial Advisor Disclosure an interest in or a signat securities account, or o N Form 114, Report of F m country. ribution from, or was it to o file Form 3520, Annua o Gifts. See instructions | (N) Country of Organization a date (including a date (including a date (including a page 1 of Form 1065; or had the terms modified Statement, to provide ture or other authority over other financial account)? Foreign Bank and the grantor of, or al Return To Report | Percentage Profit Loss | Yes | No X X X X X |
| c d 5 8 8 7 | (i) Neme of Entity Does the partnership satisfy all four of the The partnership's total receipts for the tax y The partnership's total assets at the end of Schedules K-1 are filed with the ratum and extensions) for the partnership return. The partnership is not filing and is not requi If "Yes," the partnership is not required to co or item L on Schedule K-1. Is this partnership a publicly traded partners During the tax year, did the partnership hav so as to reduce the principal amount of the Has this partnership filed, or is it required to information on any reportable transaction? At any time during calendar year 2019, did a financial account in a foreign country (sur See instructions for exceptions and filing re Financial Accounts (FBAR). If "Yes," enter the transferor to, a foreign trust? If "Yes," the part Transactions With Foreign Trusts and Reco Is the partnership making, or had it previou | (II) Employer Identification Number (Fary) following conditions? car were less than \$2 the tax year were less furnished to the partn ired to file Schedule N omplete Schedules L, ship as defined in sec re any debt that was of debt? o file, Form 8918, Mail the partnership have a ch as a bank account quirements for FinCEI the name of the foreig thership receive a dist artnership may have t eigt of Certain Foreign isly made (and not rev | (III) Type of Entity 50,000. a than \$1 million. ers on or before the due 1-3 M-1, and M-2; Item F or tion 469(k)(2)? anceled, was forgiven, of terial Advisor Disclosure an interest in or a signat securities account, or o N Form 114, Report of F m country. ribution from, or was it to o file Form 3520, Annua o Gifts. See instructions | (N) Country of Organization a date (including a date (including a date (including a page 1 of Form 1065; or had the terms modified Statement, to provide ture or other authority over other financial account)? Foreign Bank and the grantor of, or al Return To Report | Percentage Profit Loss | Yes | No X X X X X |
| c d 5 6 7 8 9 9 | (i) Neme of Entity Does the partnership satisfy all four of the The partnership's total receipts for the tax y The partnership's total assets at the end of Schedules K-1 are filed with the ratum and extensions) for the partnership return. The partnership is not filing and is not requi If "Yes," the partnership is not required to co or item L on Schedule K-1. Is this partnership a publicly traded partners During the tax year, did the partnership hav so as to reduce the principal amount of the Has this partnership filed, or is it required to information on any reportable transaction? At any time during calendar year 2019, did a financial account in a foreign country (sur See instructions for exceptions and filing re Financial Accounts (FBAR). If "Yes," enter 11 At any time during the tax year, did the part transferor to, a foreign Trusts and Reco Is the partnership making, or had it previou See instructions for details regarding a sco | (II) Employer Identification Number (Fary) following conditions? car were less than \$2 the tax year were less furnished to the partn ired to file Schedule N omplete Schedules L, ship as defined in sec re any debt that was of debt? o file, Form 8918, Mail the partnership have a ch as a bank account, quirements for FinCEI the name of the foreign thership receive a dist artnership may have t eigt of Certain Foreign isly made (and not revi- tion 754 election. | (III) Type of Entity 50,000. a than \$1 million. ers on or before the due 1-3 M-1, and M-2; Item F or tion 469(k)(2)? anceled, was forgiven, or erial Advisor Disclosure an interest in or a signat securities account, or o N Form 114, Report of F in country. ribution from, or was it to o file Form 3520, Annua o file Form 3520, Annua o file See instructions oked), a section 754 ele | (N) Country of Organization e date (including a date (including a date (including a page 1 of Form 1065; by had the terms modified Statement, to provide ture or other authority over other financial account)? Foreign Bank and the grantor of, or al Return To Report ection? | Percentage Profit Loss | Yes | No X X X X X |
| c d 5 6 7 8 9 10a | (i) Neme of Entity Does the partnership satisfy all four of the The partnership's total receipts for the tax y The partnership's total assets at the end of Schedules K-1 are filed with the ratum and extensions) for the partnership return. The partnership is not filing and is not requi If "Yes," the partnership is not required to co or item L on Schedule K-1. Is this partnership a publicly traded partners During the tax year, did the partnership hav so as to reduce the principal amount of the Has this partnership filed, or is it required to information on any reportable transaction? At any time during calendar year 2019, did a financial account in a foreign country (sur See instructions for exceptions and filing re Financial Accounts (FBAR). If "Yes," enter the transferor to, a foreign trust? If "Yes," the part Transactions With Foreign Trusts and Reco Is the partnership making, or had it previou | (II) Employer Identification Number (Fary) following conditions? car were less than S2 the tax year were less furnished to the partn ired to file Schedule M omplete Schedules L, ship as defined in sec re any debt that was of debt? o file, Form 8918, Mail the partnership have a ch as a bank account, quirements for FinCEI the name of the foreign thership receive a dist artnership may have t eigt of Certain Foreign rest made (and not rev dion 754 election, an optional basis adjust | (III) Type of Entity 50,000. a than \$1 million. ers on or before the due 1-3 M-1, and M-2; Item F or tion 469(k)(2)? anceled, was forgiven, or erial Advisor Disclosure an interest in or a signat securities account, or or N Form 114, Report of F in country. ribution from, or was it to o file Form 3520, Annua o files See instructions oked), a section 754 ele stment under section 744 | (N) Country of Organization e date (including a date (including a page 1 of Form 1065; by had the terms modified Statement, to provide ture or other authority over other financial account)? Foreign Bank and the grantor of, or al Return To Report ection? 3(b) or 734(b)? If "Yes," | Percentage Profit Loss | Yes | n be |

DAA

INERTIAENER 04/20/2020 1/27 PM

| _ | 1065 (2019) INERTIA ENERGY ADVISORS, LLC | | | | |
|------|--|-------------|----------------|-------|--------|
| 30 | heddie D Odiel Information (contailood) | 1733 | | Yes | No |
| c | Is the partnership required to adjust the basis of partnership assets under section 743(b) or 734(b) because of a | | | | |
| • | substantial built-in loss (as defined under section 743(d)) or substantial basis reduction (as defined under section | | are all | 24 | |
| | 734(d))? If "Yes," attach a statement showing the computation and allocation of the basis adjustment. See instructions | | 1/1 | _ | X |
| 1 | Check this box if, during the current or prior tax year, the partnership distributed any property received in a like- | UT | | 1 | |
| | kind exchange or contributed such property to another entity (other than disregarded entities wholly owned by the | ~ 1 | | | |
| | partnership throughout the tax year) | | | | 1 |
| 12 | At any time during the tax year, did the partnership distribute to any partner a tenancy-in-common or other | | | 1.0.5 | |
| 14 | undivided interest in partnership property? | | | | X |
| 13 | If the partnership is required to file Form 8858, Information Return of U.S. Persons With Respect To Foreign | | | | 0.0 |
| 10 | Disregarded Entities (FDEs) and Foreign Branches (FBs), enter the number of Forms 8858 attached. See | | | - | |
| | instructions | | | | |
| | Does the partnership have any foreign partners? If "Yes," onter the number of Forms 8805, Foreign Partner's | | | | |
| 14 | Information Statement of Section 1446 Withholding Tax, filed for this partnership. | | | | x |
| | Enter the number of Forms 8885, Return of U.S. Persons With Respect to Certain Foreign Partnerships, attached | | | | |
| 15 | | | 0 | | |
| | to this return Did you make any payments in 2019 that would require you to file Form(s) 1099? See instructions | | STATE OF STATE | X | |
| 16a | | | | X | |
| b | If "Yes," did you or will you file required Form(s) 1099? Enter the number of Form(s) 5471, Information Return of U.S. Persons With Respect To Certain Foreign | | | 1 | |
| 17 | | • | 0 | | |
| | Corporations, attached to this return Enter the number of partners that are foreign governments under section 892 | • | 0 | | |
| 18 | During the partnership's tax year, did the partnership make any payments that would require it to file Form 1042 | - | | | |
| 19 | and 1042-S under chapter 3 (sections 1441 through 1464) or chapter 4 (sections 1471 through 1474)? | | | | x |
| | and 1042-S under chapter 3 (sections 1441 through 1404) of chapter 4 (sections 1471 through 1474) | | | 1 | - |
| 20 | Was the partnership a specified domestic entity required to file Form 8938 for the tax year? See the Instructions | | | | x |
| | for Form 8938 | | | | X |
| 21 | Is the partnership a section 721(c) partnership, as defined in Regulations section 1.721(c) 1T(b)(14)? | | | | |
| 22 | During the tax year, did the partnership pay or accrue any interest or royalty for which the deduction is not allowed update section 26742. See just under an entry interest of the disallowed deductions. | | | | x |
| | Under second 207A7 oue instructions. If 166, enter the total amount of the distribution of the | | | 100 | |
| 23 | Did the partnership have an election under section 163(j) for any real property trade or business or any farming | | | 1 | x |
| | business in effect during the tax year? See instructions | | | - | X |
| 24 | Does the partnership satisfy one or more of the following? See instructions | | | - | - |
| a | The partnership owns a pass-through entity with current, or prior year carryover, excess business interest | | | - | |
| | expense. | | | 0.0 | |
| b | The partnership's aggrogate average annual gross receipts (determined under section 448(c)) for the 3 tax years | | | | |
| | preceding the current tax year are more than \$26 million and the partnership has business interest. | | | | |
| C | The partnership is a tax shelter (see instructions) and the partnership has business interest expense. | | | | 1 |
| | If "Yes" to any, complete and attach Form 8990. | | | | X |
| 25 | | | | | |
| | If "Yes," the partnership must complete Schedule 8-2 (Form 1065). Enter the total from Schedule B-2, Part III, | | | | |
| | Ine 3 | ····· | | | |
| | If "No," complete Designation of Partnership Representative below. | | 100 M | | - |
| | signation of Partnership Representative (see instructions) | | | | |
| | er below the information for the partnership representative (PR) for the tax year covered by this return. | | | | |
| Name | ed PR F ERIC HUTCHINS | • | - | | |
| U.S. | edgress of PR 1118 PARK LANE US procenuither of PR US procenuither of PR | 2 | 8-390 | 1-22 | 14 |
| | | , | | - | |
| | PR is an onthy, name of the descrubed individual for the PR | • | | | |
| | activess of US phone number of designated individual | | | | |
| | | , | | 1 | X |
| 26 | Is the partnership attaching Form 8996 to certify as a Qualified Opportunity Fund? | 17 . 200.00 | | | - |
| | It res, enter the amount north Forth 6550, the 14 | | | | 1 |
| 27 | Enter the number of foreign partners subject to section 864(c)(8) as a result of transferring all or a portion of an | | 0 | | |
| | Interest in the partnership or of receiving a distribution from the partnership | | 0 | - | - |
| 28 | At any time during the tax year, were there any transfers between the partnership and its partners subject to the | | | 1000 | x |
| | disclosure requirements of Regulations section 1.707-8? | | | _ | 5 (20) |

| | 65 (2019) INERTIA ENERGY ADVISORS, LLC | - N To | stal amount |
|----------------------------|--|--|-------------|
| | 1 Ordinary business income (loss) (page 1, line 22) | 1 | 263,292 |
| - | 2 Net rental real estate income (loss) (attach Form 8825) | 2 | |
| | 3a Other gross rental income (loss) 3a | 189 | |
| | | | |
| | b Expenses from other rental activities (attach statement) c Other net rental income (loss). Subtract line 3b from line 3a d Guaranteed payments: a Services 4a b Capital 4b | 30 | |
| - | 4 Guaranteed payments: a Services 4a b Capital 4b | | 1 |
| (Loss) | a Total Add load do and th | 40 | |
| Į Į | c Total. Add lines 4a and 40 5 Interest income | 5 | |
| 9 | 6 Dividends and dividend equivalents: a Ordinary dividends | 6a | |
| ncome | b Qualified dividends 6b c Dividend equivalents 6c | | |
| ê | | 7 | |
| - | 7 Royalties 8 Net short-term capital gain (loss) (attach Schedule D (Form 1055)) | 8 | |
| | Net shore term excited eater (less) (attack Schedule D (Form 1000)) | 9a | |
| | 9a Net long-term capital gain (loss) (attach Schedule D (Form 1065)) | 20 | |
| - 1 | B Concentra (2019) gain (road) | | |
| | • enclosed octain have gen part of the second of the secon | | |
| | 10 Net section 1231 gain (loss) (attach Form 4797) | 10 | |
| | 11 Other income (loss) (see instructions) Type | 12 | |
| Deductions | 12 Section 179 deduction (attach Form 4562) | 13a | |
| ÷ | 13a Contributions | | _ |
| ž | b Invostment interest expense | 13b | |
| ĕ | c Section 59(e)(2) expenditures (1) Type (2) Amount | 130(2) | |
| _ | d Other deductions (see instructions) Type | 13d | 062 000 |
| Employ- | 14a Net earnings (loss) from self-employment | 14a | 263,292 |
| and | b Gross farming or fishing income | 14b | 201 002 |
| ωĒ | c Gross nonfarm income | 14c | 301,823 |
| | 15a Low-income housing credit (section 42(j)(5)) | 15a | |
| | b Low-income housing credit (other) | 15b | |
| Credits | Qualified rehabilitation expenditures (rental real estate) (attach Form 3468, if applicable) | 150 | |
| 2 | d Other rental real estate credits (see instructions) Type | 15d | |
| • | e Other rental credits (see instructions) Type | 150 | |
| | f Other credits (see instructions) Type | 151 | |
| | 16a Name of country or U.S. possession | | |
| | b Gross income from all sources | 16b | |
| - | c Gross income sourced at partner level | 16c | |
| tions | Foreign gross income sourced at partnership level | | |
| Ť. | d Reserved for future use e Foreign branch category | 16e | |
| Sac | f Passive category g General category h Othor | 16h | |
| an | Deductions allocated and apportioned at partner level | | |
| Ē | I Interest expense j Other | 16j | |
| E | Deductions allocated and apportioned at partnership level to foreign source income | | |
| eig | k Reserved for future use I Foreign branch category | 161 | |
| Foreign Transac | m Passive category o Other | 160 | |
| - | p Total foreign taxes (check one): Paid Accrued | 16p | |
| | q Reduction in taxes available for credit (attach statement) | 16q | |
| | r Other foreign tax information (attach statement) | E.J. | |
| × | 17a Post-1988 depreciation adjustment | 178 | |
| ns Ta | b Adjusted gain or loss | 17b | |
| 23 | c Depletion (other than oil and gas) | 17c | |
| | d Oil, gas, and goothermal properties - gross income | 17d | |
| 225 | e Oil, gas, and geothermal properties - deductions | 170 | |
| Minimum Tax (AMT) Items | f Other AMT items (attach statement) | 17f | |
| | 18a Tax-exempt interest income | | |
| io | h Other tax exempt income | 18b | |
| nat | c Nondeductible expenses SEE STATEMENT 2 | 18c | 1,118 |
| E | 19a Distributions of cash and marketable securities | and the second sec | 269,150 |
| nfe | b Distributions of other property | 19b | |
| Other Information | | 20a | |
| Φ | 20a Investment income b Investment expenses | 20b | |
| F | | | |

| | ENER 04/20/2020 1:2 1065 (2019) | INERTIA ENERGY | ADVISORS, | LI | LC . | 5-21 | 50181 | | Page 6 |
|---------|---|--|---|------------|---|--|------------|---------------------------------------|-----------------------|
| | | ncome (Loss) | a second procession | | | | - | | |
| 1 | Net income (loss). (| Combine Schedule K, lines 1 th | rough 11. From the res. | uit, subli | ract the sum of | f Schedule K, lines 1 | 2 trough | 13d, and 18p 1 | 263,292 |
| 2 | Analysis by partner type: | (i) Corporate | (ii) Individual (active) | | i) Individual (passive) | (iv) Partne | ership | (v) Exempt Organization | (vi) Nominee/Other |
| а | General partners | 5 | | | | | | | |
| ь | Limited partners | | 230,651 | - | 32,6 | 41 | | 001 | |
| Sc | hedule L | Balance Sheets per Boo | ks E | Beginn | ing of tax ye | lar | | End of tax | : year |
| | | Assets | (a) | | | (b) | | (C) | (d) |
| 1 | Cash | | 12251 2012 | 2017 | 100 | 73,911 | 0.00 | | 66,977 |
| 2a | Trade notes and | accounts receivable | | | No. | State State | | | THE REAL PROPERTY OF |
| | | for bad debts | | | | | | | |
| | | | | 1 | | | SHEW | | |
| | U.S. governmen | | | | | | - | - 10 S S S S S | |
| 5 | Tax-exempt sec Other current assets | urities | | | - | | | F | |
| 7- | | (or persons related to partners) | | | 12 | | | | |
| | Mortgage and re | al estate loans | | | | | | | |
| 0 9a | Other investments (attach statement) Buildings, and of | her depreciable assets | 120100109/00 | | 1000 | 10-10-40 - 10-00 | 100000 | | TALIFUT TO CARE |
| | Less accumulate | | | - | | | | | |
| | Depletable asse | - | | - | 18 (32) | | | | MARKEN STREET |
| | Less accumulate | | (A.) | | | | | | and the second second |
| | | / amortization) | Prophile Scorel | 1000 | 633 | | 1000 | Salar Social S | |
| | | s (amortizable only) | | | Sec. 10 | and the second second | 1 | | A CANADA COM |
| | T. C. | ed amortization | | | | | | | |
| | Other assets | | CALCULAR ON CONTRACT | 1000 | | | | | |
| 14 | (attach statement) Total assets | | 11 10 10 10 10 10 | | | 73,911 | 1 | | 66,977 |
| | | ties and Capital | ···· | | | and the second | 1 | | 176-12-190 AB |
| 15 | Accounts payab | | | | | | 1100 | Contraction of the | |
| | | bonds payable in less than 1 y | BBT | | | | | | |
| | Other current Babilise (attach statement) | SEE STMT 4 | | | | 5,274 | | | 5,322 |
| 18 | All nonrecourse loans | | | | | | | | |
| 19a | Loans from partne | rs (or persons related to partne | rs) | | | | | | |
| b | Mortgages, notes, box | nds payable in 1 year or more | | | 2.0 | | | | |
| 20 | Other labilities | | | | | | | | |
| 21 | (attach statement) Partners' capital accou | nts | | | 100 | 68,637 | | | 61,655 |
| 22 | Total liabilities a | ind capital | | | | 73,911 | Sec. 1 | | 66,977 |
| S | chedule M-1 | Reconciliation of | f Income (Loss) | per | Books W | ith Income (Lo | oss) pe | r Return | |
| | | Note: The partnership | may be required to | file Sc | hedule M-3. | See instructions. | 2.4 | | |
| 1 | Net income (los | s) per books | 262, | 174 | 6 Incom | e recorded on boo | oks this y | sar not included | |
| 2 | 5, 6a, 7, 8, 9a, 10, books this year | n Schedule K, lines 1, 2, 3c, and 11, not recorded on | | | | hedule K, lines 1 t rempt interest \$ | | | |
| 34 | Guaranteed payments Expenses recorder Included on Scheo 13d, and 16p (iten | (other than health insurance) d on books this year not tule K, lines 1 through many | | | and 16p | ns included on Schedule not charged against boo ciation \$ | | | |
| ab | Depreciation S Travel and s | 1,118 | | | | | | | |
| | | ATEMENT 5 | - | 118 | | nes 6 and 7 e (loss) (Analysis | of Mat Is | | |
| 5 | Add lines 1 thro | unh 4 | 263, | | | line 1). Subtract | | | 263,292 |
| | chedule M-2 | Analysis of Part | the second se | | the second se | , line 1). Suburaci | ane o no | n line 5 | 205,252 |
| 1 | Balance at begi | | 68, | | | utions: a Cash | | · · · · · · · · · · · · · · · · · · · | 269,156 |
| | | | 00, | 0.57 | o usuu | | | ······ - | 200,200 |
| 2 | Capital contribu | b Property | | | 7 Other | decreases | | | |
| 34 | Other increases | s) per books | 262, | 174 | | ze): | | | |
| | (40mi20): | | | | 8 Add lin | nes 6 and 7 | | and encomposition of a | 269,156 |
| 5 | Add lines 1 thro | ugh 4 | 330, | 811 | 9 Balan | ce at end of year. | Subtract | line 8 from line 5 | 61,655 |
| DAA | | | | | | | | | Form 1065 (2019) |

| PARTNER# 1 Schedule K-1 2010 | _ | Final K-1 Amended H | | OMB No. 1545-0123 |
|--|---------|--|--------------|--|
| chedule K-1 2019 | Pa | nt III Partner's Share of Deductions, Cred | | |
| quatment of the Treasury | 1 | Ordinary business income (loss) | 15 | Credits |
| ernsi Revenue Senice For calendar year 2019, or tax yoar | | 198,010 | - | Contrast of Contra |
| Partner's Share of Income, Deductions, Credits, etc. See back of form and separate instructions. | 2 | Net rentel real extelle income (loss) | C | OPY |
| Part I Information About the Partnership | 3 | Other net rental income (loss) | 15 | Foreign transactions |
| A Partnership's employer identification number 45-2150337 | 40 | Guaranteed payments for services | | |
| Patnership's name, address, chy. state, and ZIP code INERTIA ENERGY ADVISORS, LLC | 4b | Guaranteed payments for capital | | |
| #272 4700 GILBERT, SUITE 47 WESTERN SPRINGS IL 60558 | ác, | Total guaranteed payments | - | |
| | 5 | Interest income | \vdash | |
| C RS Center where pertnership filed return E-FILE | Ga | Ordinary dividends | | |
| D Check if this is a publicly traded partnership (PTP) | | | - | |
| Part II Information About the Partner | 60 | Qualified dividends | 17 | Alternative minimum tax (AMT) terms |
| E Partner's SSN or TIN (Do not use TIN of a disregarded antily, Soc instr.) | 6¢ | Dividend equivalents | | |
| F Name, address, dity, state, and ZIP code for partner entered in E. See instructions. ERIC HUTCHINS | 7 | Royalises | \mathbb{H} | |
| 1118 PARK LANE | 8 | Net short-term capital gain (loss) | 10 | Tax-waverigt income and minimum approximation expenses |
| WESTERN SPRINGS IL 60558 | 90 | Net long-term capital gain (laxe) | c* | 841 |
| General partner or LLC member member member H1 X Domestic partner | 96 | Collectibles (28%) (pain (luxia) | | |
| HZ II the periner is a disrugarded critity (DE), enter the partner's: | 96 | Unrecaptured section 1250 gain | | |
| TIN | 10 | Net section 1231 (pain (izza) | 19 | Detributions |
| H What type of entity is litis partner? INDIVIDUAL | 11 | Other maanne (lass) | A | 203,262 |
| If this partner is a relinement plan (IRA/SEP/Kaoghialo), dhock here J Partner's share of profit, loss, and capital (see instructions): | | | 20 | Other Information |
| Profit 50.00000 % 100.00000 % | 12 | Section 179 deduction | Z* | STM |
| Loss 50.000000 % 100.000000 % Cspild 50.000000 % 100.000000 % | 13 | Other deductions | AH* | STM |
| Check if decrease is due to sale or exchange of partnership interest K Pariner's share of labilities: Beginning Ending Nonrecourse | | | | |
| Qualified nonsecurate Interang 8 5 | | | | |
| (bezzurze \$ 3,966 \$ 5,322 | 14 | Self-employment earnings (loss) | 1207 | - ALA LEON DE LA DISTRICT |
| Check this box if them K includes liability amounts from lower for patherships. Cripturp Partner's Capital Account Analysia | A | 198,010 | _ | |
| Begiming capital account | c | 226,987 | | |
| Capital contributed during the year | 21 22 | More than one activity for al-risk p More than one activity for papare | | oses* |
| Other increase (decrease) (atlach explanation) 8 | *9 | See attached statement for a | | |
| Withdrawals & distributions | 2 | | | |
| Ending capital account | Only | | | |
| M Did the partner contribute property with a built-in gain or loss? | IRS Use | | | |
| Yes Xes No If "Yos," attach statement. See instructions. N Partner's Share of Net Unrecognized Section 704(c) Gain or (Loss) | RS | | | |
| BeginningS | For | | | |
| Ending 8 | | and the second sec | | |

Exhibit C-3"Forecasted Financial Statements." provide two years of forecasted serimcome attements for the applicant's Natural Gas related business activities in the state of Ohio Only, along with a list of assumptions, and the name, address, email address, and telephone number of the preparet. The forecasts should be in an annualized format for the two years succeeding the Application year. Set

Inertia Energy Advisors LLC has provided Ohio only forecasted income statements for 2022-2023. Assumptions used to generate forecast: Obtain gas for current customers, existing contracts expiring, timely signed contracts, and no enrollment issues.

Any questions should be directed to the following:

Eric Hutchins

4700 Gilbert Suite 47

Western Springs, IL 60558

548-390-2214

INCOME STATEMENT

Inertia Energy Advisors, LLC

2022

| 00.711,51 | Net Income (Loss) |
|-----------|------------------------------------|
| 00.288,0 | Total Operational Expenses |
| 00.0 | Vehicle Expenses |
| 00.0 | seitilitU |
| £'000'00 | Tavel |
| 00.0 | Telephone |
| 00.0 | Rent |
| 200.00 | Permits and Licenses |
| 00.0 | Ottice Expenses |
| 00.000.1 | Miscellaneous |
| 00.001 | Marketing |
| 00.0 | Maintenance & Repairs |
| 200.00 | Jusurance |
| 00.0 | noütszihomA |
| 00.008,8 | Other Operational Expenses |
| 00.0 | Payroll Taxes |
| 00.0 | sabeM |
| 00.0 | Personnel expenses |
| 00.0 | Interest |
| 83.00 | Bank Charges and commissions |
| 83.00 | essneqxe leionenii |
| | :səsuədx3 |
| 20,000.00 | Gross Income |
| 00.01 | Interest received |
| 00.0 | ctack of Asle of Asle of Assets |
| 00.0 | Rental income |
| 00.0 | Discount received |
| 00.0 | Other Income: |
| 20,000.00 | Gross Profit (Loss) |
| 00.0 | Other direct expenses |
| 00.0 | Materials |
| 00.0 | cost of Goods Sold: |
| 00.0 | Less: Sales Returns and Allowances |
| 20,000.00 | Gross Sales |
| 20,000.00 | :ənuəʌəչ |
| 2022 | |

INCOME STATEMENT

Inertia Energy Advisors, LLC

5023

| 28,900.00 | Net Income (Loss) |
|-----------|------------------------------------|
| 00.001,11 | Total Operational Expenses |
| 00.0 | Vehicle Expenses |
| 00.0 | sedildU |
| 00.000,8 | Ieveit |
| 00'0 | Telephone |
| 00.0 | Rent |
| 200.00 | Permits and Licenses |
| 00.0 | Ottice Expenses |
| 2,000.00 | Miscellaneous |
| 300.00 | Marketing |
| 00.0 | Maintenance & Repairs |
| 200.00 | lnsurance |
| 00.0 | notiszthomA |
| 00.000,11 | Other Operational Expenses |
| 00.0 | Payroll Taxes |
| 00.0 | sageW |
| 00.0 | Sersonnel expenses |
| 00.0 | Interest |
| 00.001 | Bank Charges and commissions |
| 00.001 | seaneqxs leionaniil |
| | :səsuədx <u>∃</u> |
| 40,000,04 | Gross Income |
| 00.0 | Interest received |
| 00.0 | Cain (Loss) on Sale of Assets |
| 00.0 | Rental income |
| 00.0 | Discount received |
| 00.0 | Other Income: |
| 00.000,04 | Gross Profit (Loss) |
| 00.0 | Other direct expenses |
| 00.0 | sleinetsM |
| 00.0 | Cost of Goods Sold: |
| 00.0 | Less: Sales Returns and Allowances |
| 40,000.04 | Gross Sales |
| 00.000,04 | Sevenue: |
| 5023 | |

Exhibit C-1 "Financial Reporting," provide the most recent 10-K/8-K Filings with the SEC. If the applicant does not have such filings, it may submit those of its parent company. An applicant may submit a current link to the filings or provide them in paper form. If the applicant does not have such filings, then the applicant may indicate that the applicant is not required to file with the SEC and why. 300

Inertia Energy Advisors LLC is not set up to file 10-k/8-k and is not publicly traded, therefore we are not required to file SEC documents.

Exhibit C-3"Forecasted Financial Statements," provide two years of forecasted income statements for the applicant's Natural Gas related business activities in the state of Ohio Only, along with a list of assumptions, and the name, address, email address, and telephone number of the preparer. The forecasts should be in an annualized format for the two years succeeding the Application year. In the state of the state of the preparer.

Inertia Energy Advisors LLC has provided Ohio only forecasted income statements for 2022-2023. Assumptions used to generate forecast: Obtain gas for current customers, existing contracts expiring, timely signed contracts, and no enrollment issues.

Any questions should be directed to the following:

Eric Hutchins

4700 Gilbert Suite 47

Western Springs, IL 60558

248-390-2214

INCOME STATEMENT

Inertia Energy Advisors, LLC

2022

| | 2022 |
|------------------------------------|-----------|
| Revenue: | 20,000.00 |
| Gross Sales | 20,000.00 |
| Less: Sales Returns and Allowances | 0.00 |
| Cost of Goods Sold: | 0.00 |
| Materials | 0.00 |
| Other direct expenses | 0.00 |
| Gross Profit (Loss) | 20,000.00 |
| Other Income: | 0.00 |
| Discount received | 0.00 |
| Rental income | 0.00 |
| Gain (Loss) on Sale of Assets | 0.00 |
| Interest received | 19.00 |
| Gross Income | 20,000.00 |
| Expenses: | |
| Financial expenses | 83.00 |
| Bank Charges and commissions | 83.00 |
| Interest | 0.00 |
| Personnel expenses | 0.00 |
| Wages | 0.00 |
| Payroll Taxes | 0.00 |
| Other Operational Expenses | 6,800.00 |
| Amortization | 0.00 |
| Insurance | 200.00 |
| Maintenance & Repairs | 0.00 |
| Marketing | 100.00 |
| Miscellaneous | 1,000.00 |
| Office Expenses | 0.00 |
| Permits and Licenses | 500.00 |
| Rent | 0.00 |
| Telephone | 0.00 |
| Travel | 5,000.00 |
| Utilities | 0.00 |
| Vehicle Expenses | 0.00 |
| Total Operational Expenses | 6,883.00 |
| Net Income (Loss) | 13,117.00 |

INCOME STATEMENT

Inertia Energy Advisors, LLC

2023

| | 2023 |
|------------------------------------|-----------|
| Revenue: | 40,000.00 |
| Gross Sales | 40,000.00 |
| Less: Sales Returns and Allowances | 0.00 |
| Cost of Goods Sold: | 0.00 |
| Materials | 0.00 |
| Other direct expenses | 0.00 |
| Gross Profit (Loss) | 40,000.00 |
| Other Income: | 0.00 |
| Discount received | 0.00 |
| Rental income | 0.00 |
| Gain (Loss) on Sale of Assets | 0.00 |
| Interest received | 0.00 |
| Gross Income | 40,000.00 |
| Expenses: | |
| Financial expenses | 100.00 |
| Bank Charges and commissions | 100.00 |
| Interest | 0.00 |
| Personnel expenses | 0.00 |
| Wages | 0.00 |
| Payroll Taxes | 0.00 |
| Other Operational Expenses | 11,000.00 |
| Amortization | 0.00 |
| Insurance | 200.00 |
| Maintenance & Repairs | 0.00 |
| Marketing | 300.00 |
| Miscellaneous | 2,000.00 |
| Office Expenses | 0.00 |
| Permits and Licenses | 500.00 |
| Rent | 0.00 |
| Telephone | 0.00 |
| Travel | 8,000.00 |
| Utilities | 0.00 |
| Vehicle Expenses | 0.0 |
| Total Operational Expenses | 11,100.00 |
| Net Income (Loss) | 28,900.00 |

Exhibit D-1 "Operations," Include details of the applicant's business operations and plans for arranging and/or aggregating for the supply of natural gas to retail customers.

Inertia Energy Advisors plan is to provide detailed offers from different suppliers, highlighting the similarities and differences in programs. Plan is to review all contracts and make customers aware of risks, while encouraging them to have internal legal counsel review and redline. Once customer has selected a program, will forward a supplier initiated contract for signature. Exhibit 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.

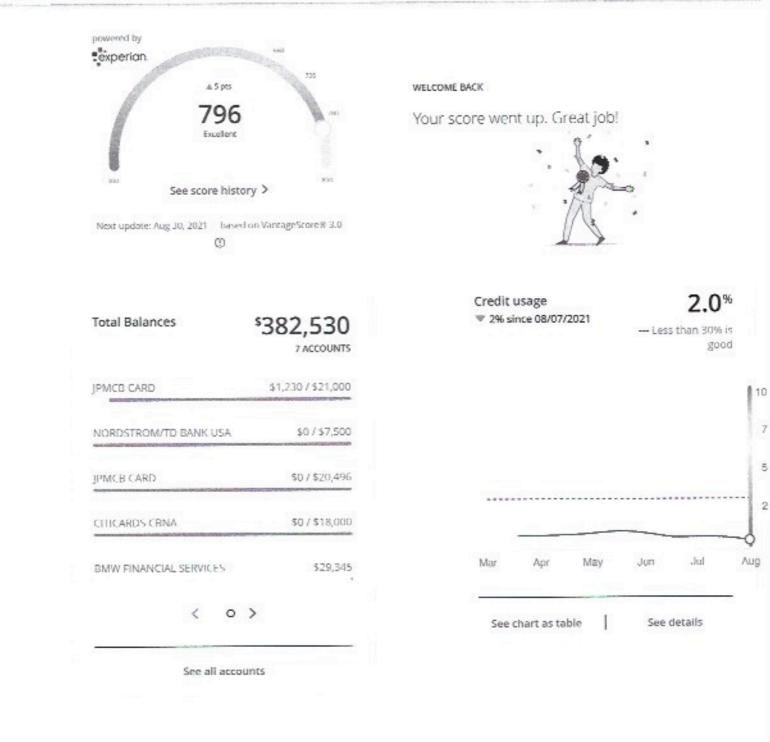
Inertia Energy Advisors LLC has provided credit report from applicant.

Back to dashboard

Chase Credit journey

Sign Quit

Credit Alerts Offers Insights Support



What brings you to Credit Journey? Tell us about yourself so we can improve your experience.



https://secure06a.chase.com/web/auth/cjp#/cjp/score/index/index

Page 1 of 3



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Additional Information

VantageScore® 3.0, with scores ranging from 300 to 850, is a user-friendly credit score model developed by the three major nationwide credit reporting agencies, Experian®, IransUnion[®], and Equifac[®], VantageScore 3.0 is used by some but not all lenders. Higher scores represent a greater likelihood that you'll pay back your debts so you are viewed as being a lower credit risk to lenders. A lower score indicates to lenders that you may be a higher credit risk.

There are three different major credit reporting agencies, Experian, TransUnion and Equifax, that maintain a record of your credit history known as your credit file. Credit scores are based on the information in your credit file at the time it is requested. Your credit file information can vary from agency to agency because some lenders report your credit history to only one or two of the agencies; so your credit scores can vary if the information they have on file for you is different. Since the information in your file can change over time, your credit scores also may be different from day to day. Different credit scoring models can also give a different assessment of the credit risk (risk of default) for the same consumer and same credit file.

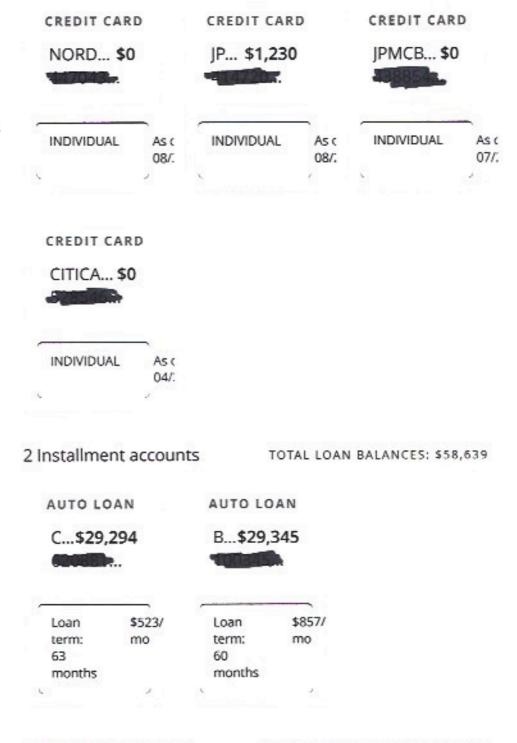
There are different credit scoring models which may be used by lenders and insurers. Your lender may not use VantageScore 3.0, so don't be surprised if your lender gives you a

https://secure05a.chase.com/web/auth/cjp#/cjp/score/index/index

Page 2 of 3

| Back | to dashboa | rd Chas | e Credit Jo | urney | Sign Out |
|-----------|---------------|-------------------------------------|------------------------------|---|--|
| Credit | Alerts | Offers | Insights | Support | |
| | Yo | our Ex | neria | an creo | dit |
| | | | pene | | |
| | | r | epoi | t | |
| | - | /our updated cr an item to see r | edit report. nore detail. | Within each car If there's any ac w to report it. | CONTRACTOR AND A DESCRIPTION OF A DESCRI |
| | | don trecogr | lize, <u>see no</u> | | ig 23, 2021 Powered by Exper |
| | | | | | 1.0.700 |
| CATEGORI | | 7 Open acco | ounts | | |
| Open ac | | 1.7 | | | A DER L LOYAL CREDIT. |
| Closed a | ccounts | 4 Revolving accounts | | TOTAL BALANCES: \$1,230 / | \$66,996 |
| Credit ch | iecks | | | | |
| Derogato | ory marks | | | | |
| Collectio | ns | | | | |
| Public re | cords | | | | |
| Consum | er statement | s | | | |
| Davaaaa | l information | | | | |
| Personal | | | | | |

Page 1 of 6



1 Real estate account TOTAL LOAN BALANCES: \$322,661

| IM | ORTGA | 1200.000 |
|----|--------|----------|
| 1 | | N |
| | | |
| - | oan | \$3,129/ |
| t | erm: | mo |
| 1 | 80 | |
| | | |
| п | nonths | |
| | nonths | , |

- 9 Closed accounts
- 5 Credit checks
- O Derogatory marks
- O Collections
- ▶ 0 Public records
- Consumer statements
 - ✓ As of August 23, you don't have any consumer statements.

Personal information .

Name

ERIC HUTCHINS

Also known as

Birth year

1970

Employers

INTERTIA ENERGY ADVISORIGS ENERGY

Addresses

1118 PARK LN WESTERN SPRINGS IL 60558-2116 3 SWEETWOOD CT INDIAN HEAD PARK IL 60525-4457 11340 HIAWATHA LN INDIAN HEAD PARK IL 60525-4332

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Additional Information

VantageScore[®] 3.0, with scores ranging from 300 to 850, is a user-friendly credit score model developed by the three major nationwide credit reporting agencies, Experian[®], TransUnion[®], and Equifax[®]. VantageScore 3.0 is used by some but not all lenders. Higher scores represent a greater likelihood that you'll pay back your debts so you are viewed as being a lower credit risk to lenders. A lower score indicates to lenders that you may be a higher credit risk.

There are three different major credit reporting agencies, Experian, TransUnion and Equifax, that maintain a record of your credit history known as your credit file. Credit scores are based on the information in your credit file at the time it is requested. Your credit file information can vary from agency to agency because some lenders report your credit history to only one or two

https://secure05a.chase.com/wcb/auth/cjp#/cjp/report/index/index

of the agencies; so your credit scores can vary if the information they have on file for you is different. Since the information in your file can change over time, your credit scores also may be different from day to day. Different credit scoring models can also give a different assessment of the credit risk (risk of default) for the same consumer and same credit file.

There are different credit scoring models which may be used by lenders and insurers. Your lender may not use VantageScore 3.0, so don't be surprised if your lender gives you a score that's different from your VantageScore. (And your VantageScore 3.0 may differ from your score under other types of VantageScores). Just remember that your associated risk level is often the same even if the number is not. For some consumers, however, the risk assessment of VantageScore 3.0 could vary, sometimes substantially, from a lender's score. If the lender's score is lower than your VantageScore 3.0, it is possible this difference can lead to higher interest rates and sometimes credit denial.

The credit scores presented in Credit Journey are not so-called FICO scores, and follow the VantageScore 3.0 consumer credit scoring model, which is not affiliated with Fair, Isaac and Company. The credit scores presented in Credit Journey may not be identical in every respect to any consumer credit scores provided by any other company.

The Identity Theft Insurance is underwritten and administered by American Bankers Insurance Company of Florida, an Assurant company under group or blanket policy(ies). The description herein is a summary and intended for informational purposes only and does not include all terms, conditions and exclusions of the policies described. Please refer to the actual policies for terms, conditions, and exclusions of coverage. Coverage may not be available in all jurisdictions. Review the <u>Summary of Benefits</u>.

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Exhibit 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.

Inertia Energy Advisors is a stand-alone entity with no affiliate or subsidiary company.

Exhibit D-2 "Operations Expertise and Key Technical Personnel," Provide evidence of the applicant's experience and technical expertise in performing the operations described in this application. Include the names, titles, e-mail addresses, telephone numbers and background of key personnel involved in the operational aspects of the applicant's business.

Eric Hutchins- Inertia Energy Advisors, LLC

President

4700 Gilbert Suite 47

Western Springs, IL 60558

248-390-2214

eric@inertiaenergyadvisors.net

Eric Hutchins joined the energy business in 2009, developing an understanding of business from the supply side and helping customers understand all aspects of energy buying process. Only after years of learning the many intricacies of energy, a decision was made to establish Inertia Energy Advisors to provide a broader energy management platform. Eric is the only contributor to Inertia Energy Advisors, this way customers get the eduction, transparency, and communication required.

Competitive Retail Natural Gas Service Affidavit

County of <u>COOK</u>: State of <u>IL</u>:

ERic Hutchins, President, Afriant, being duly swom/affirmed, hereby states that:

- 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.
- The applicant will timely file an annual report of its intrastate gross receipts and sales of hundred cubic feet of natural gas pursuant to Sections 4905.10(A), 4911.18(A), and 4929.23(B), Ohio Revised Code.
- The applicant will timely pay any assessment made pursuant to Sections 4905.10 and 4911.18(A), Ohio Revised Code.
- Applicant will comply with all applicable rules and orders adopted by the Public Utilities Commission of Ohio pursuant to Title 49, Ohio Revised Code.
- 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.
- Applicant will comply with Section 4929.21, Ohio Revised Code, regarding consent to the jurisdiction of the Ohio courts and the service of process.
- Applicant will comply with all state and/or federal rules and regulations concerning consumer protection, the environment, and advertising/promotions.
- 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.
- The facts set forth above are true and accurate to the best of his/her knowledge, information, and belief and that hc/she expects said applicant to be able to prove the same at any hearing hereof.

10. Affiant further sayeth naught. MARGARET MARTIGAN OFFICIAL SEAL Hutchins, Presider Ric Notary Public, State of Illinois My Commission Expires Signature of Affiant & Title May 14, 2022 day of 1 Sworn and subscribed before me this nature of official administering oath My commission expires on

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in

Case No(s). 21-0883-GA-AGG

Summary: In the Matter of the Application of Inertia Energy Advisors, LLC