

Form **1065**Department of the Treasury  
Internal Revenue Service**U.S. Return of Partnership Income**  
For calendar year 2015, or tax year beginning Jul 6, 2015,  
ending Dec 31, 20 15.

OMB No. 1545-0123

**2015**Information about Form 1065 and its separate instructions is at [www.irs.gov/form1065](http://www.irs.gov/form1065).

<b>A</b> Principal business activity <u>Equipment Rental</u>	<b>Type or Print</b>	Name of partnership <u>Rental Marketplace LLC</u>	<b>D</b> Employer identification no. <u>47-4580421</u>
<b>B</b> Principal product or service <u>Rental Marketplace</u>		Number, street, and room or suite number. If a P.O. box, see the instructions. <u>14431 Ventura Blvd. # 232</u>	<b>E</b> Date business started <u>07/06/15</u>
<b>C</b> Business code number <u>532310</u>		City or town, state or province, country, and ZIP or foreign postal code <u>Sherman Oaks CA 91423</u>	<b>F</b> Total assets (see the instrs) \$

**G** Check applicable boxes: (1) ☒ Initial return (2) ☐ Final return (3) ☐ Name change (4) ☐ Address change (5) ☐ Amended return  
(6) ☐ Technical termination — also check (1) or (2)

**H** Check accounting method: (1) ☒ Cash (2) ☐ Accrual (3) ☐ Other (specify) \_\_\_\_\_

**I** Number of Schedules K-1. Attach one for each person who was a partner at any time during the tax year \_\_\_\_\_ **6**

**J** Check if Schedules C and M-3 are attached ☐

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

<b>INCOME</b>	<b>1 a</b> Gross receipts or sales . . . . .	<b>1 a</b>	
	<b>b</b> Returns and allowances . . . . .	<b>1 b</b>	
	<b>c</b> Balance. Subtract line 1b from line 1a . . . . .		<b>1 c</b>
	<b>2</b> Cost of goods sold (attach Form 1125-A) . . . . .		<b>2</b>
	<b>3</b> Gross profit. Subtract line 2 from line 1c . . . . .		<b>3</b>
	<b>4</b> Ordinary income (loss) from other partnerships, estates, and trusts (attach statement) . . . . .		<b>4</b>
	<b>5</b> Net farm profit (loss) (attach Schedule F (Form 1040)) . . . . .		<b>5</b>
	<b>6</b> Net gain (loss) from Form 4797, Part II, line 17 (attach Form 4797) . . . . .		<b>6</b>
<b>7</b> Other income (loss) (attach statement) . . . . .		<b>7</b>	
<b>8</b> Total income (loss). Combine lines 3 through 7 . . . . .		<b>8</b>	
<b>SEE INSTRUCTIONS FOR DEDUCTIONS</b>	<b>9</b> Salaries and wages (other than to partners) (less employment credits) . . . . .		<b>9</b>
	<b>10</b> Guaranteed payments to partners . . . . .		<b>10</b>
	<b>11</b> Repairs and maintenance . . . . .		<b>11</b> 199.
	<b>12</b> Bad debts . . . . .		<b>12</b>
	<b>13</b> Rent . . . . .		<b>13</b>
	<b>14</b> Taxes and licenses . . . . .		<b>14</b> 136.
	<b>15</b> Interest . . . . .		<b>15</b>
	<b>16 a</b> Depreciation (if required, attach Form 4562) . . . . .	<b>16 a</b>	
	<b>b</b> Less depreciation reported on Form 1125-A and elsewhere on return . . . . .	<b>16 b</b>	<b>16 c</b>
	<b>17</b> Depletion (Do not deduct oil and gas depletion.) . . . . .		<b>17</b>
	<b>18</b> Retirement plans, etc. . . . .		<b>18</b>
	<b>19</b> Employee benefit programs . . . . .		<b>19</b>
	<b>20</b> Other deductions (attach statement) . . . . .		<b>20</b> 84,693.
	<b>21</b> Total deductions. Add the amounts shown in the far right column for lines 9 through 20 . . . . .		<b>21</b> 85,028.
<b>22</b> Ordinary business income (loss). Subtract line 21 from line 8 . . . . .		<b>22</b> -85,028.	

**Sign  
Here**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than general partner or limited liability company member manager) is based on all information of which preparer has any knowledge.

Signature of general partner or limited liability company member manager	Date <u>12/05/16</u>	May the IRS discuss this return with the preparer shown below (see instrs)? <input type="checkbox"/> Yes <input type="checkbox"/> No
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**Paid  
Preparer  
Use Only**

Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
Firm's name <u>Self-Prepared</u>	Firm's EIN	Phone no.		
Firm's address				

BAA For Paperwork Reduction Act Notice, see separate instructions.

PTPA0112 08/03/15

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