

Debra A. Erickson, P.A.
8819 North Virginia Avenue
Palm Beach Gardens, FL 33418
561-626-7650

October 14, 2024

CONFIDENTIAL

UltraVision Corporation
11911 US Highway 1, Suite 204
North Palm Beach, FL 33408-2862

Dear Walter:

We have prepared the following returns from information provided by you without verification or audit:

U.S. Corporation Income Tax Return (Form 1120)
Florida Corporate Income/Franchise Tax Return (Form F-1120)

We suggest that you examine these returns carefully to fully acquaint yourself with all items contained therein to ensure that there are no omissions or misstatements. Attached are instructions for signing and filing each return. Please follow those instructions carefully.

Also enclosed is any material you furnished for use in preparing the returns. If the returns are examined, requests may be made for supporting documentation. Therefore, we recommend that you retain all pertinent records for at least seven years.

In order that we may properly advise you of tax considerations, please keep us informed of any significant changes in your financial affairs or of any correspondence received from taxing authorities.

If you have any questions, or if we can be of assistance in any way, please call.

Sincerely,

Debra A. Erickson, P.A.

Filing Instructions

UltraVision Corporation

Form 8879-CORP

E-file Authorization for Corporations

Taxable Year Ended December 31, 2023

Date Due: October 15, 2024

Remittance: None is required. No amount is due or overpaid.

Signature: You are using the Personal Identification Number (PIN) for signing your return electronically. Form 8879-CORP, *E-file* Authorization for Corporations should be signed and dated by an authorized officer of the corporation and returned to:

Debra A. Erickson, P.A.
8819 North Virginia Avenue
Palm Beach Gardens, FL 33418

Important: Your return will not be filed with the IRS until the signed Form 8879-CORP, *E-file* Authorization for Corporations has been received by this office.

Other: Your return is being filed electronically with the IRS and is not required to be mailed. If you mail a paper copy of Form 1120 to the IRS it will delay processing of your return.

Form **8879-CORP**

E-file Authorization for Corporations

(December 2022)

For calendar year 2023, or tax year beginning _____, ending _____

OMB No. 1545-0123

Department of the Treasury
Internal Revenue Service

**Use for efile authorizations for Form 1120, 1120-F or 1120S.
Do not send to the IRS. Keep for your records.
Go to www.irs.gov/Form8879CORP for the latest information.**

Name of corporation

Employer identification number

UltraVision Corporation

65-0949567

Part I Information (Whole dollars only)

1 Total income (Form 1120, line 11)	1	774,951
2 Total income (Form 1120-F, Section II, line 11)	2	
3 Total income (loss) (Form 1120-S, line 6)	3	

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

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

Officer's PIN: check one box only

I authorize Debra A. Erickson, P.A. to enter my PIN 85694 as my signature
ERO firm name do not enter all zeros
on the corporation's electronically filed income tax return.

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

Officer's signature Walter G Scott Date 10/11/24 Title President

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 65796101652
do not enter all zeros

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

ERO's signature _____ Date 10/11/24

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

For Paperwork Reduction Act Notice, see instructions.

Form **8879-CORP** (12-2022)

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

U.S. Corporation Income Tax Return
For calendar year 2023 or tax year beginning _____, ending _____
Go to www.irs.gov/Form1120 for instructions and the latest information.

OMB No. 1545-0123
2023

- A Check if:**
- 1a Consolidated return (attach Form 851)
 - b Life/nonlife consolidated return
 - 2 Personal holding co. (attach Sch. PH)
 - 3 Personal service corp. (see instructions)
 - 4 Schedule M-3 attached

TYPE OR PRINT	Name UltraVision Corporation
	Number, street, and room or suite no. If a P.O. box, see instructions. 11911 US Highway 1, Suite 204
	City or town, state or province, country, and ZIP or foreign postal code North Palm Beach FL 33408-2862

B Employer identification number 65-0949567
C Date incorporated 09/23/1999
D Total assets (see instructions) \$ 534,164

E Check if: (1) Initial return (2) Final return (3) Name change (4) Address change

Income	1a Gross receipts or sales	1a	1,226,065	
	b Returns and allowances	1b		
	c Balance. Subtract line 1b from line 1a	1c		1,226,065
	2 Cost of goods sold (attach Form 1125-A)	2		486,540
	3 Gross profit. Subtract line 2 from line 1c	3		739,525
	4 Dividends and inclusions (Schedule C, line 23)	4		
	5 Interest	5		1,619
	6 Gross rents	6		
	7 Gross royalties	7		
	8 Capital gain net income (attach Schedule D (Form 1120))	8		
	9 Net gain or (loss) from Form 4797, Part II, line 17 (attach Form 4797)	9		
10 Other income (see instructions—attach statement)	10	See Stmt 1	33,807	
11 Total income. Add lines 3 through 10	11		774,951	
Deductions (See instructions for limitations on deductions.)	12 Compensation of officers (see instructions—attach Form 1125-E)	12		
	13 Salaries and wages (less employment credits)	13		441,929
	14 Repairs and maintenance	14		468
	15 Bad debts	15		
	16 Rents	16		73,337
	17 Taxes and licenses	17		35,355
	18 Interest (see instructions)	18		67,360
	19 Charitable contributions	19		
	20 Depreciation from Form 4562 not claimed on Form 1125-A or elsewhere on return (attach Form 4562)	20		
	21 Depletion	21		
	22 Advertising	22		
	23 Pension, profit-sharing, etc., plans	23		
	24 Employee benefit programs	24		
	25 Energy efficient commercial buildings deduction (attach Form 7205)	25		
	26 Other deductions (attach statement)	26	See Stmt 2	360,016
	27 Total deductions. Add lines 12 through 26	27		978,465
	28 Taxable income before net operating loss deduction and special deductions. Subtract line 27 from line 11	28		-203,514
Tax, Refundable Credits, and Payments	29a Net operating loss deduction (see instructions)	29a		
	b Special deductions (Schedule C, line 24)	29b		
	c Add lines 29a and 29b	29c		
30 Taxable income. Subtract line 29c from line 28. See instructions	30		-203,514	
31 Total tax (Schedule J, Part I, line 11)	31		0	
32 Reserved for future use	32			
33 Total payments and credits (Schedule J, Part II, line 23)	33			
34 Estimated tax penalty. See instructions. Check if Form 2220 is attached <input type="checkbox"/>	34			
35 Amount owed. If line 33 is smaller than the total of lines 31 and 34, enter amount owed	35			
36 Overpayment. If line 33 is larger than the total of lines 31 and 34, enter amount overpaid	36			
37 Enter amount from line 36 you want: Credited to 2024 estimated tax <input type="checkbox"/> Refunded <input checked="" type="checkbox"/>	37			

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. May the IRS discuss this return with the preparer shown below? See instructions. Yes No

Sign Here

Signature of officer **Walter G Scott** Date _____ Title **President**

Paid Preparer Use Only

Print/Type preparer's name Debra A. Erickson, P.A.	Preparer's signature	Date 10/14/24	Check <input type="checkbox"/> if self-employed	PTIN P00438599
Firm's name Debra A. Erickson, P.A.	Firm's EIN 65-0322656	Phone no. 561-626-7650		
Firm's address 8819 North Virginia Avenue Palm Beach Gardens, FL 33418				

Schedule C Dividends, Inclusions, and Special Deductions (see instructions)		(a) Dividends and inclusions	(b) %	(c) Special deductions (a) x (b)
1	Dividends from less-than-20%-owned domestic corporations (other than debt-financed stock)		50	
2	Dividends from 20%-or-more-owned domestic corporations (other than debt-financed stock)		65	
3	Dividends on certain debt-financed stock of domestic and foreign corporations		See instructions	
4	Dividends on certain preferred stock of less-than-20%-owned public utilities		23.3	
5	Dividends on certain preferred stock of 20%-or-more-owned public utilities		26.7	
6	Dividends from less-than-20%-owned foreign corporations and certain FSCs		50	
7	Dividends from 20%-or-more-owned foreign corporations and certain FSCs		65	
8	Dividends from wholly owned foreign subsidiaries		100	
9	Subtotal. Add lines 1 through 8. See instructions for limitations		See instructions	
10	Dividends from domestic corporations received by a small business investment company operating under the Small Business Investment Act of 1958		100	
11	Dividends from affiliated group members		100	
12	Dividends from certain FSCs		100	
13	Foreign-source portion of dividends received from a specified 10%-owned foreign corporation (excluding hybrid dividends) (see instructions)		100	
14	Dividends from foreign corporations not included on line 3, 6, 7, 8, 11, 12, or 13 (including any hybrid dividends)			
15	Reserved for future use			
16a	Subpart F inclusions derived from the sale by a controlled foreign corporation (CFC) of the stock of a lower-tier foreign corporation treated as a dividend (attach Form(s) 5471) (see instructions)		100	
b	Subpart F inclusions derived from hybrid dividends of tiered corporations (attach Form(s) 5471) (see instructions)			
c	Other inclusions from CFCs under subpart F not included on line 16a, 16b, or 17 (attach Form(s) 5471) (see instructions)			
17	Global Intangible Low-Taxed Income (GILTI) (attach Form(s) 5471 and Form 8992)			
18	Gross-up for foreign taxes deemed paid			
19	IC-DISC and former DISC dividends not included on line 1, 2, or 3			
20	Other dividends			
21	Deduction for dividends paid on certain preferred stock of public utilities			
22	Section 250 deduction (attach Form 8993)			
23	Total dividends and inclusions. Add column (a), lines 9 through 20. Enter here and on page 1, line 4			
24	Total special deductions. Add column (c), lines 9 through 22. Enter here and on page 1, line 29b			

Schedule J Tax Computation and Payment (see instructions)

Part I—Tax Computation

Table with 11 main rows and sub-rows (5a-5e, 9a-9z) for tax computation. Includes items like Income tax, Base erosion minimum tax amount, Corporate alternative minimum tax, Foreign tax credit, Total credits, Personal holding company tax, and Total tax. Total tax is 0.

Part II—Payments and Refundable Credits

Table with 11 main rows and sub-rows (20a-20z) for payments and refundable credits. Includes items like Reserved for future use, Preceding year's overpayment, Current year's estimated tax payments, Total payments, Refundable credits, and Total payments and credits. Total payments and credits is 0.

Schedule K Other Information (see instructions)

1 Check accounting method: a Cash b Accrual c Other (specify) _____

2 See the instructions and enter the:

a Business activity code no. 339110

b Business activity Research & Development

c Product or service Ultrasound

3 Is the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? Yes No
If "Yes," enter name and EIN of the parent corporation _____

4 At the end of the tax year:

a Did any foreign or domestic corporation, partnership (including any entity treated as a partnership), trust, or tax-exempt organization own directly 20% or more, or own, directly or indirectly, 50% or more of the total voting power of all classes of the corporation's stock entitled to vote? If "Yes," complete Part I of Schedule G (Form 1120) (attach Schedule G) Yes No

b Did any individual or estate own directly 20% or more, or own, directly or indirectly, 50% or more of the total voting power of all classes of the corporation's stock entitled to vote? If "Yes," complete Part II of Schedule G (Form 1120) (attach Schedule G) Yes No

5 At the end of the tax year, did the corporation:

a Own directly 20% or more, or own, directly or indirectly, 50% or more of the total voting power of all classes of stock entitled to vote of any foreign or domestic corporation not included on Form 851, Affiliations Schedule? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (iv) below. Yes No

(i) Name of Corporation	(ii) Employer Identification Number (if any)	(iii) Country of Incorporation	(iv) Percentage Owned in Voting Stock

b Own directly an interest of 20% or more, or own, directly or indirectly, an interest of 50% or more in any foreign or domestic partnership (including an entity treated as a partnership) or in the beneficial interest of a trust? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (iv) below. Yes No

(i) Name of Entity	(ii) Employer Identification Number (if any)	(iii) Country of Organization	(iv) Maximum Percentage Owned in Profit, Loss, or Capital

6 During this tax year, did the corporation pay dividends (other than stock dividends and distributions in exchange for stock) in excess of the corporation's current and accumulated earnings and profits? See sections 301 and 316 Yes No
If "Yes," file Form 5452, Corporate Report of Nondividend Distributions. See the instructions for Form 5452.
If this is a consolidated return, answer here for the parent corporation and on Form 851 for each subsidiary.

7 At any time during this tax year, did one foreign person own, directly or indirectly, at least 25% of the total voting power of all classes of the corporation's stock entitled to vote or at least 25% of the total value of all classes of the corporation's stock? Yes No
For rules of attribution, see section 318. If "Yes," enter:
(a) Percentage owned _____ and (b) Owner's country _____
(c) The corporation may have to file Form 5472, Information Return of a 25% Foreign-Owned U.S. Corporation or a Foreign Corporation Engaged in a U.S. Trade or Business. Enter the number of Forms 5472 attached _____

8 Check this box if the corporation issued publicly offered debt instruments with original issue discount
If checked, the corporation may have to file Form 8281, Information Return for Publicly Offered Original Issue Discount Instruments.

9 Enter the amount of tax-exempt interest received or accrued during this tax year \$ 0

10 Enter the number of shareholders at the end of the tax year (if 100 or fewer) _____

11 If the corporation has an NOL for the tax year and is electing to forego the carryback period, check here (see instructions)
If the corporation is filing a consolidated return, the statement required by Regulations section 1.1502-21(b)(3) must be attached or the election will not be valid.

12 Enter the available NOL carryover from prior tax years (do not reduce it by any deduction reported on page 1, line 29a) \$ 7,596,604

Schedule K Other Information (continued from page 4)

Table with 3 columns: Question number, Question text, and Yes/No response columns. Rows include questions 13 through 31 regarding receipts, assets, tax forms, and ownership changes.

Schedule L Balance Sheets per Books		Beginning of tax year		End of tax year	
		(a)	(b)	(c)	(d)
Assets					
1	Cash		83,782		102,220
2a	Trade notes and accounts receivable	244,721		258,774	
b	Less allowance for bad debts		244,721		258,774
3	Inventories		19,248		35,000
4	U.S. government obligations				
5	Tax-exempt securities (see instructions)				
6	Other current assets (att. stmt.) Stmt 3		137,720		138,170
7	Loans to shareholders				
8	Mortgage and real estate loans				
9	Other investments (attach stmt.)				
10a	Buildings and other depreciable assets	13,122		13,122	
b	Less accumulated depreciation	13,122	0	13,122	0
11a	Depletable assets				
b	Less accumulated depletion				
12	Land (net of any amortization)				
13a	Intangible assets (amortizable only)				
b	Less accumulated amortization				
14	Other assets (attach stmt.)				
15	Total assets		485,471		534,164
Liabilities and Shareholders' Equity					
16	Accounts payable		56,298		
17	Mortgages, notes, bonds payable in less than 1 year				
18	Other current liabilities (att. stmt.) Stmt 4		499,168		791,050
19	Loans from shareholders		486,398		507,093
20	Mortgages, notes, bonds payable in 1 year or more		333,333		533,333
21	Other liabilities (attach statement)				
22	Capital stock: a Preferred stock				
	b Common stock	12,221	12,221	12,221	12,221
23	Additional paid-in capital		7,613,752		7,613,752
24	Retained earnings—Appropriated (att. stmt.)				
25	Retained earnings—Unappropriated		-8,515,699		-8,923,285
26	Adjustments to SH equity (att. stmt.)				
27	Less cost of treasury stock				
28	Total liabilities and shareholders' equity		485,471		534,164

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

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

1	Net income (loss) per books	-407,586	7	Income recorded on books this year not included on this return (itemize):	
2	Federal income tax per books			Tax-exempt interest \$	
3	Excess of capital losses over capital gains				
4	Income subject to tax not recorded on books this year (itemize):		8	Deductions on this return not charged against book income this year (itemize):	
5	Expenses recorded on books this year not deducted on this return (itemize):			a Depreciation \$	
a	Depreciation \$			b Charitable contributions \$	
b	Charitable contributions \$				
c	Travel and entertainment \$ 2,114		9	Add lines 7 and 8	
	Stmt 5 201,958	204,072	10	Income (page 1, line 28)—line 6 less line 9	-203,514
6	Add lines 1 through 5	-203,514			

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

1	Balance at beginning of year	-8,515,699	5	Distributions: a Cash	
2	Net income (loss) per books	-407,586		b Stock	
3	Other increases (itemize):			c Property	
			6	Other decreases (itemize):	
			7	Add lines 5 and 6	
4	Add lines 1, 2, and 3	-8,923,285	8	Balance at end of year (line 4 less line 7)	-8,923,285

Form **1125-A**

(Rev. November 2018)
Department of the Treasury
Internal Revenue Service

Cost of Goods Sold

OMB No. 1545-0123

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

Name UltraVision Corporation Employer identification number 65-0949567

1	Inventory at beginning of year	1	<u>19,248</u>
2	Purchases	2	<u>502,292</u>
3	Cost of labor	3	
4	Additional section 263A costs (attach schedule)	4	
5	Other costs (attach schedule)	5	
6	Total. Add lines 1 through 5	6	<u>521,540</u>
7	Inventory at end of year	7	<u>35,000</u>
8	Cost of goods sold. Subtract line 7 from line 6. Enter here and on Form 1120, page 1, line 2 or the appropriate line of your tax return. See instructions	8	<u>486,540</u>

9a Check all methods used for valuing closing inventory:

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

b Check if there was a writedown of subnormal goods ▶

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

d If the LIFO inventory method was used for this tax year, enter amount of closing inventory computed under LIFO **9d**

e If property is produced or acquired for resale, do the rules of section 263A apply to the entity? See instructions Yes No

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

For Paperwork Reduction Act Notice, see instructions.

Form **1125-A** (Rev. 11-2018)

**SCHEDULE G
(Form 1120)**

(Rev. December 2011)
Department of the Treasury
Internal Revenue Service

**Information on Certain Persons Owning the
Corporation's Voting Stock**

▶ **Attach to Form 1120.**
▶ **See instructions on page 2.**

OMB No. 1545-0123

Name <u>UltraVision Corporation</u>	Employer identification number (EIN) <u>65-0949567</u>
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Part I Certain Entities Owning the Corporation's Voting Stock. (Form 1120, Schedule K, Question 4a). Complete columns (i) through (v) below for any foreign or domestic corporation, partnership (including any entity treated as a partnership), trust, or tax-exempt organization that owns directly 20% or more, or owns, directly or indirectly, 50% or more of the total voting power of all classes of the corporation's stock entitled to vote (see instructions).

(i) Name of Entity	(ii) Employer Identification Number (if any)	(iii) Type of Entity	(iv) Country of Organization	(v) Percentage Owned in Voting Stock

Part II Certain Individuals and Estates Owning the Corporation's Voting Stock. (Form 1120, Schedule K, Question 4b). Complete columns (i) through (iv) below for any individual or estate that owns directly 20% or more, or owns, directly or indirectly, 50% or more of the total voting power of all classes of the corporation's stock entitled to vote (see instructions).

(i) Name of Individual or Estate	(ii) Identifying Number (if any)	(iii) Country of Citizenship (see instructions)	(iv) Percentage Owned in Voting Stock
<u>Walter G Scott</u>	<u>545-57-8246</u>	<u>USA</u>	<u>39.000</u>

Form **6765**

Credit for Increasing Research Activities

OMB No. 1545-0619

(Rev. December 2023)
Department of the Treasury
Internal Revenue Service

Attach to your tax return.
Go to www.irs.gov/Form6765 for instructions and the latest information.

Attachment
Sequence No. **676**

Name(s) shown on return UltraVision Corporation Identifying number 65-0949567

Section A – Regular Credit. Skip this section and go to Section B if you are electing or previously elected (and are not revoking) the alternative simplified credit.

1	Certain amounts paid or incurred to energy consortia (see instructions)		1	
2	Basic research payments to qualified organizations (see instructions)	2		
3	Qualified organization base period amount	3		
4	Subtract line 3 from line 2. If zero or less, enter -0-		4	0
5	Wages for qualified services (do not include wages used in figuring the work opportunity credit)	5		
6	Cost of supplies	6		
7	Rental or lease costs of computers (see instructions)	7		
8	Enter the applicable percentage of contract research expenses. See instructions	8		
9	Total qualified research expenses. Add lines 5 through 8	9		
10	Enter fixed-base percentage, but not more than 16% (0.16) (see instructions)	10	%	
11	Enter average annual gross receipts. See instructions	11		
12	Multiply line 11 by the percentage on line 10	12		
13	Subtract line 12 from line 9. If zero or less, enter -0-	13	0	
14	Multiply line 9 by 50% (0.50)	14		
15	Enter the smaller of line 13 or line 14		15	
16	Add lines 1, 4, and 15		16	
17	Are you electing the reduced credit under section 280C? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If "Yes," multiply line 16 by 15.8% (0.158). If "No," multiply line 16 by 20% (0.20) and see the instructions for the statement that must be attached. Members of controlled groups or businesses under common control, see instructions for the statement that must be attached		17	

Section B – Alternative Simplified Credit. Skip this section if you are completing Section A.

18	Certain amounts paid or incurred to energy consortia (see the line 1 instructions)		18	
19	Basic research payments to qualified organizations (see the line 2 instructions)	19		
20	Qualified organization base period amount (see the line 3 instructions)	20		
21	Subtract line 20 from line 19. If zero or less, enter -0-		21	
22	Add lines 18 and 21		22	
23	Multiply line 22 by 20% (0.20)		23	
24	Wages for qualified services (do not include wages used in figuring the work opportunity credit)	24		
25	Cost of supplies	25		
26	Rental or lease costs of computers (see the line 7 instructions)	26		
27	Enter the applicable percentage of contract research expenses. See the line 8 instructions	27		
28	Total qualified research expenses. Add lines 24 through 27	28		
29	Enter your total qualified research expenses for the prior 3 tax years. If you had no qualified research expenses in any one of those years, skip lines 30 and 31	29		
30	Divide line 29 by 6.0	30		
31	Subtract line 30 from line 28. If zero or less, enter -0-	31		
32	Multiply line 31 by 14% (0.14). If you skipped lines 30 and 31, multiply line 28 by 6% (0.06)		32	
33	Add lines 23 and 32		33	
34	Are you electing the reduced credit under section 280C? Yes <input type="checkbox"/> No <input type="checkbox"/> If "Yes," multiply line 33 by 79% (0.79). If "No," enter the amount from line 33 and see the line 17 instructions for the statement that must be attached. Members of controlled groups or businesses under common control, see instructions for the statement that must be attached		34	

For Paperwork Reduction Act Notice, see separate instructions.

Form **6765** (Rev. 12-2023)

Section C—Current Year Credit

35 Enter the portion of the credit from Form 8932, line 2, that is attributable to wages that were also used to figure the credit on line 17 or line 34 (whichever applies)	35	
36 Subtract line 35 from line 17 or line 34 (whichever applies). If zero or less, enter -0-	36	
37 Credit for increasing research activities from partnerships, S corporations, estates, and trusts	37	
38 Add lines 36 and 37	38	0
<ul style="list-style-type: none"> • Estates and trusts, go to line 39. • Partnerships and S corporations not electing the payroll tax credit, stop here and report this amount on Schedule K. • Partnerships and S corporations electing the payroll tax credit, complete Section D and report on Schedule K the amount on this line reduced by the amount on line 44. • Eligible small businesses, stop here and report the credit on Form 3800, Part III, line 4i. See instructions for the definition of eligible small business. • Filers other than eligible small businesses, stop here and report the credit on Form 3800, Part III, line 1c. <p>Note: Qualified small business filers, other than partnerships and S corporations, electing the payroll tax credit must complete Form 3800 before completing Section D.</p>		
39 Amount allocated to beneficiaries of the estate or trust (see instructions)	39	
40 Estates and trusts, subtract line 39 from line 38. For eligible small businesses, report the credit on Form 3800, Part III, line 4i. See instructions. For filers other than eligible small businesses, report the credit on Form 3800, Part III, line 1c	40	

Section D—Qualified Small Business Payroll Tax Election and Payroll Tax Credit. Skip this section if the payroll tax election does not apply. See instructions.

41 Check this box if you are a qualified small business electing the payroll tax credit. See instructions <input checked="" type="checkbox"/>		
42 Enter the portion of line 36 elected as a payroll tax credit (do not enter more than \$500,000). See instructions	42	78,377
43 General business credit carryforward from the current year (see instructions). Partnerships and S corporations skip this line and go to line 44	43	
44 Partnerships and S corporations, enter the smaller of line 36 or line 42. All others, enter the smallest of line 36, line 42, or line 43. Enter here and on the applicable line of Form 8974, Part 1, column (e). Members of controlled groups or businesses under common control, see instructions for the statement that must be attached	44	

Net Operating Loss Carryover Worksheet

Form **1120**

2023

For calendar year 2023 or tax year beginning _____, ending _____

Name **UltraVision Corporation** Employer Identification Number **65-0949567**

Preceding Taxable Year	Adj. To NOL Inc/(Loss) After Adj.	Prior Year		Current Year	Next Year
		NOL Utilized (Income Offset)	Carryovers	Income Offset By NOL Carryback/Carryover NOL Utilized	Carryover
20th 12/31/03					
19th 12/31/04					
18th 12/31/05					
17th 12/31/06					
16th 12/31/07					
15th 12/31/08					
14th 12/31/09					
13th 12/31/10	-222,876		222,876		222,876
12th 12/31/11					
11th 12/31/12	-259,322		259,322		259,322
10th 12/31/13	-589,902		589,902		589,902
9th 12/31/14	-805,942		805,942		805,942
8th 12/31/15	-1,680,718		1,680,718		1,680,718
7th 12/31/16	-795,107		795,107		795,107
6th 12/31/17	-933,651		933,651		933,651
5th 12/31/18	-679,922		679,922		679,922
4th 12/31/19	-729,099		729,099		729,099
3rd 12/31/20	-569,880		569,880		569,880
2nd 12/31/21	-261,488		261,488		261,488
1st 12/31/22	-68,697		68,697		68,697
NOL Carryover Available To Current Year			7,596,604		
Current Year	0 -203,514				203,514
NOL Carryover Available To Next Year					7,800,118

Current year net operating losses available to be utilized:

Aggregate amount of NOL arising in taxable years beginning before 1/1/18 (Pre TCJA NOL)	5,287,518
Aggregate amount of NOL arising in taxable years beginning after 12/31/17 (Post TCJA NOL)	2,309,086

Form 3800	General Business Credit Carryover / Carryback Detail Wrk	2023
Name UltraVision Corporation		Employer Identification Number 65-0949567
For calendar year 2023 or tax year beginning _____, ending _____		

General Business Credit Carryover for Form 6765S

Credit for Increasing Research Activities for Eligible Small Businesses

	Preceding Tax Year	Credit Amount Generated	Credit Amount Utilized		Credit Carried Back to Prior Year	Credit Carryover to Next Year
			Prior Year	Current Year		
	20th 12/31/03					
	19th 12/31/04					
	18th 12/31/05					
	17th 12/31/06					
	16th 12/31/07					
	15th 12/31/08					
	14th 12/31/09					
	13th 12/31/10					
	12th 12/31/11					
	11th 12/31/12					
	10th 12/31/13					
	9th 12/31/14					
	8th 12/31/15					
	7th 12/31/16					
	6th 12/31/17					
	5th 12/31/18					
	4th 12/31/19					
	3rd 12/31/20					
Stmt 6	2nd 12/31/21	94,366	94,366			
	1st 12/31/22					
	Current Year	0		0		0
	Total	94,366	94,366	0		0
	General Business Credit Carryover Available To Next Year					0

Credit Carryback for Form 6765S

Preceding Tax Year	Current Year		Next Year
	Tax Available to be Offset	Tax Offset by Credit Carryback	Tax Available to be Offset
5th			
4th			
3rd			
2nd			
1st			
Current Year	0		0

Federal Statements**Statement 1 - Form 1120, Page 1, Line 10 - Other Income**

<u>Description</u>	<u>Amount</u>
Tax credits received	\$ 33,807
Total	\$ 33,807

Statement 2 - Form 1120, Page 1, Line 26 - Other Deductions

<u>Description</u>	<u>Amount</u>
Medical insurance	\$ 27,025
Small tools & Supplies	2,136
Professional fees	11,920
Regulatory	23,807
Freight & Delivery	10,610
Computer & internet	4,616
Utilities	288
Office	7,258
Software	7,527
Insurance-Commercial	1,758
Workers comp	2,133
Bank & CC Fees	1,554
Travel	266
Auto	7,622
Miscellaneous	1,151
Management Fee	60,000
Research & development	188,230
50% of Meals	2,115
Total	\$ 360,016

Statement 3 - Form 1120, Page 6, Schedule L, Line 6 - Other Current Assets

<u>Description</u>	<u>Beginning of Year</u>	<u>End of Year</u>
Investment in Smart	\$ 126,720	\$ 126,720
Deposits	11,000	11,000
Prepaid		450
Total	\$ 137,720	\$ 138,170

Statement 4 - Form 1120, Page 6, Schedule L, Line 18 - Other Current Liabilities

<u>Description</u>	<u>Beginning of Year</u>	<u>End of Year</u>
Line of Credit	\$ 94,531	\$ 91,639
Customer Deposits	39,580	39,580
Payroll liab	4,886	14,297
SBA EIDL Loan	150,000	150,000
PayPal Loan	79,379	59,012
Yard Card	3,108	2,350
Amazon	6,726	4,259
American Express		474

Federal Statements**Statement 4 - Form 1120, Page 6, Schedule L, Line 18 - Other Current Liabilities**
(continued)

<u>Description</u>	<u>Beginning of Year</u>	<u>End of Year</u>
Harbor Freight	\$ 455	\$ 8
Chase-1208		9,697
Chase-8143		220
Chase-9642		7,360
Bank of America CC	2,473	48,878
Bank of American LOC	17,698	15,085
Chase LOC		187,832
Due to affiliate	100,332	160,359
Total	<u>\$ 499,168</u>	<u>\$ 791,050</u>

Statement 5 - Form 1120, Page 6, Schedule M-1, Line 5 - Expenses on Books Not on Return

<u>Description</u>	<u>Amount</u>
Accrued Officer Comp	\$ 200,000
Life Insurance	1,958
Total	<u>\$ 201,958</u>

Federal Statements

6765S
Statement 6 - GBC Carryover Detail Wrk - Credit Amount Utilized - 2nd Preceding Year

<u>Tax Year Utilized</u>	<u>Amount Utilized</u>
12/31/21	\$ <u>94,366</u>
Total	\$ <u><u>94,366</u></u>

Filing Instructions

UltraVision Corporation

Form F-1120 - Income/Franchise Tax Return

Taxable Year Ended December 31, 2023

Date Due: November 1, 2024

Remittance: None is required. No amount is due or overpaid.

Signature: Florida Department of Revenue does not require an electronic filing signature document.

Your return is being filed electronically with the Florida Department of Revenue and is not required to be mailed. If you mail a paper copy of your return, it will delay processing of your return.

Other: Every business entity with active status is required to file an annual report each year with the Department of State, Division of Corporations to maintain active status. The annual report may be filed online using the Division's website, www.Sunbiz.org.



Florida Corporate Income/Franchise Tax Return
FEIN 65-0949567

CSOL
F-1120, R. 01/24
Rule 12C-1.051
Florida Administrative Code
Effective 01/24
Page 1 of 6

For calendar year 2023 or tax year beginning
ending

840702023123100020050374365094956700002



Name UltraVision Corporation
Address 11911 US Highway 1, Suite 204
City/State/ZIP North Palm Beach FL 33408-2862

Computation of Florida Net Income Tax

Check here if any changes have been made to name or address

Table with 3 columns: Line number, Description, and Amount. Includes lines 1 through 19 for tax computation.

Payment Coupon for Florida Corporate Income Tax Return

Do Not Detach

YEAR ENDING 12/31/23

CSOL
F-1120
R. 01/24

To ensure proper credit to your account, enclose your check with tax return when mailing.

Name UltraVision Corporation
Address 11911 US Highway 1, Suite 204
City/State/ZIP North Palm Beach FL 33408-2862

If 6/30 year end, return is due 1st day of the 4th month after the close of the
taxable year, otherwise return is due 1st day of the 5th month after the close
of the taxable year.

Table with 4 columns: Identification number, Amount, and other values.



UltraVision Corporation
FEIN 65-0949567

CSOL
F-1120
R. 01/24
Page 2 of 6

This return is considered incomplete unless a copy of the federal return is attached.

If your return is not signed, or improperly signed and verified, it will be subject to a penalty. The statute of limitations will not start until your return is properly signed and verified. Your return must be completed in its entirety.

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

Sign here	Signature of officer (must be an original signature)	Date	Title	President
	Preparer's signature	Date 10/14/24	Preparer check if self-employed <input type="checkbox"/>	Preparer's PTIN P00438599
Paid preparers only	Firm's name (or yours if self-employed) and address	Debra A. Erickson, P.A. 8819 North Virginia Avenue Palm Beach Gardens FL		
		FEIN	65-0322656	
		ZIP	33418	

All Taxpayers Must Answer Questions A Through L Below — See Instructions

- A. State of incorporation: DE
- B. Florida Secretary of State document number: F09000000476
- C. Florida consolidated return? YES NO
- D. Initial return Final return (final federal return filed)
- E. Principal Business Activity Code (as pertains to Florida)
339110
- F. A Florida extension of time was timely filed? YES NO
- G-1. Corporation is a member of a controlled group? YES NO If yes, attach list.
- G-2. Part of a federal consolidated return? YES NO If yes, provide:
FEIN from federal consolidated return: _____
Name of corporation: _____
- G-3. The federal common parent has sales, property, or payroll in Florida? YES NO
- H. Location of corporate books:
11911 US Highway 1, Suite 204
City: North Palm Beach State: FL
ZIP: 33408-2862
- I. Taxpayer is a member of a Florida partnership or joint venture? YES NO
- J. Enter date of latest IRS audit: _____
a) List years examined: _____
- K. Contact person concerning this return: Walter Scott
a) Contact person telephone number: 561-626-4055
b) Contact person e-mail address: hscott@ultravisionusa.com
- L. Type of federal return filed 1120 1120S or _____

Remember:

- ✓ **Make your check payable to the Florida Department of Revenue.**
- ✓ **Write your FEIN on your check.**
- ✓ **Sign your check and return.**
- ✓ **Attach a copy of your federal return.**
- ✓ **Attach a copy of your Florida Form F-7004 (extension of time) if applicable.**

If Filing Paper Return

Where to Send Payments and Returns

Make check payable to and mail with return to:
Florida Department of Revenue
5050 W Tennessee Street
Tallahassee FL 32399-0135

If you are requesting a **refund** (Line 19), send your return to:
Florida Department of Revenue
PO Box 6440
Tallahassee FL 32314-6440



NAME UltraVision Corporation

FEIN 65-0949567 TAXABLE YEAR ENDING 12/31/23

Schedule I — Additions and/or Adjustments to Federal Taxable Income

1. Interest excluded from federal taxable income (see instructions)	1.	.
2. Undistributed net long-term capital gains (see instructions)	2.	.
3. Net operating loss deduction (attach schedule)	3.	.
4. Net capital loss carryover (attach schedule)	4.	.
5. Excess charitable contribution carryover (attach schedule)	5.	.
6. Employee benefit plan contribution carryover (attach schedule)	6.	.
7. Enterprise zone jobs credit (Florida Form F-1156Z)	7.	.
8. Ad valorem taxes allowable as an enterprise zone property tax credit (Florida Form F-1158Z)	8.	.
9. Guaranty association assessment(s) credit	9.	.
10. Rural and/or urban high-crime area job tax credits	10.	.
11. State housing tax credit	11.	.
12. Florida tax credit scholarship program credit (credit for contributions to nonprofit scholarship-funding organizations)	12.	.
13. New worlds reading initiative credit	13.	.
14. Strong families tax credit (credit for contributions to eligible charitable organizations)	14.	.
15. Live local program credit	15.	.
16. New markets tax credit	16.	.
17. Entertainment industry tax credit	17.	.
18. Research and development tax credit	18.	.
19. Experiential learning tax credit program	19.	.
20. Credit for qualified railroad reconstruction or replacement expenditures	20.	.
21. Credit for manufacturing of human breast milk derived human milk fortifiers	21.	.
22. s.168(k), IRC, special bonus depreciation	22.	.
23. Depreciation of qualified improvement property (see instructions)	23.	.
24. Expenses for business meals provided by a restaurant (see instructions)	24.	.
25. Film, television, and live theatrical production expenses (see instructions)	25.	.
26. Other additions (attach schedule)	26.	.
27. Total Lines 1 through 26. Enter total on this line and on Page 1, Line 3.	27.	.

Schedule II — Subtractions from Federal Taxable Income

1. Gross foreign source income less attributable expenses (a) Enter s. 78, IRC, income \$ _____ (b) plus s. 862, IRC, dividends \$ _____ (c) plus s. 951A, IRC, income \$ _____ (d) less direct and indirect expenses and related amounts deducted under s. 250, IRC \$ _____	Total ▶	1.	.
2. Gross subpart F income less attributable expenses (a) Enter s. 951, IRC, subpart F income \$ _____ (b) less direct and indirect expenses \$ _____	Total ▶	2.	.
Note: Taxpayers doing business outside Florida enter zero on Lines 3 through 6, and complete Schedule IV.			
3. Florida net operating loss carryover deduction (see instructions)		3.	.
4. Florida net capital loss carryover deduction (see instructions)		4.	.
5. Florida excess charitable contribution carryover (see instructions)		5.	.
6. Florida employee benefit plan contribution carryover (see instructions)		6.	.
7. Nonbusiness income (from Schedule R, Line 3)		7.	.
8. Eligible net income of an international banking facility (see instructions)		8.	.
9. s. 168(k), IRC, special bonus depreciation (see instructions)		9.	1,525.
10. Depreciation of qualified improvement property (see instructions)		10.	.
11. Film, television, and live theatrical production expenses (see instructions)		11.	.
12. Other subtractions (attach schedule)		12.	.
13. Total Lines 1 through 12. Enter total on this line and on Page 1, Line 5.		13.	1,525.



NAME UltraVision Corporation

FEIN 65-0949567 TAXABLE YEAR ENDING 12/31/23

Schedule III — Apportionment of Adjusted Federal Income

III-A For use by taxpayers doing business outside Florida, except those providing insurance or transportation services.

	(a) WITHIN FLORIDA (Numerator)	(b) TOTAL EVERYWHERE (Denominator)	(c) Col. (a) ÷ Col. (b) Rounded to Six Decimal Places	(d) Weight If any factor in Column (b) is zero, see note on Page 9 of the instructions.	(e) Weighted Factors Rounded to Six Decimal Places
1. Property (Schedule III-B below)	.	.		X 25% or	
2. Payroll	.	.		X 25% or	
3. Sales (Schedule III-C below)	.	.		X 50% or	
4. Apportionment fraction (Sum of Lines 1, 2, and 3, Column [e]). Enter here and on Schedule IV, Line 2.					

III-B For use in computing average value of property (use original cost).

	WITHIN FLORIDA		TOTAL EVERYWHERE	
	a. Beginning of year	b. End of year	c. Beginning of year	d. End of year
1. Inventories of raw material, work in process, finished goods
2. Buildings and other depreciable assets
3. Land owned
4. Other tangible and intangible (financial org. only) assets (attach schedule)
5. Total (Lines 1 through 4)

6. Average value of property
- a. Add Line 5, Columns (a) and (b) and divide by 2 (for within Florida) . 6a. _____
 - b. Add Line 5, Columns (c) and (d) and divide by 2 (for total everywhere) . 6b. _____
7. Rented property (8 times net annual rent)
- a. Rented property in Florida . 7a. _____
 - b. Rented property Everywhere . 7b. _____
8. Total (Lines 6 and 7). Enter on Line 1, Schedule III-A, Columns (a) and (b).
- a. Enter Lines 6 a. plus 7 a. and also enter on Schedule III-A, Line 1, Column (a) for total average property in Florida . 8a. _____
 - b. Enter Lines 6 b. plus 7 b. and also enter on Schedule III-A, Line 1, Column (b) for total average property Everywhere . 8b. _____

III-C Sales Factor	(a) TOTAL WITHIN FLORIDA (Numerator)	(b) TOTAL EVERYWHERE (Denominator)
1. Sales (gross receipts)	N/A	.
2. Sales delivered or shipped to Florida purchasers	.	N/A
3. Other gross receipts (rents, royalties, interest, etc. when applicable)	.	.
4. TOTAL SALES (Enter on Schedule III-A, Line 3, Columns [a] and [b])	.	.

III-D Special Apportionment Fractions (see instructions)	(a) WITHIN FLORIDA	(b) TOTAL EVERYWHERE	(c) FLORIDA Fraction ([a] ÷ [b]) Rounded to Six Decimal Places
1. Insurance companies (attach copy of Schedule T—Annual Report)	.	.	
2. Transportation services	.	.	

Schedule IV — Computation of Florida Portion of Adjusted Federal Income

1. Apportionable adjusted federal income from Page 1, Line 6	1.	.
2. Florida apportionment fraction (Schedule III-A, Line 4)	2.	
3. Tentative apportioned adjusted federal income (multiply Line 1 by Line 2)	3.	.
4. Net operating loss carryover apportioned to Florida (attach schedule; see instructions)	4.	.
5. Net capital loss carryover apportioned to Florida (attach schedule; see instructions)	5.	.
6. Excess charitable contribution carryover apportioned to Florida (attach schedule; see instructions)	6.	.
7. Employee benefit plan contribution carryover apportioned to Florida (attach schedule; see instructions)	7.	.
8. Total carryovers apportioned to Florida (add Lines 4 through 7)	8.	.
9. Adjusted federal income apportioned to Florida (Line 3 less Line 8; see instructions)	9.	.



NAME UltraVision Corporation FEIN 65-0949567 TAXABLE YEAR ENDING 12/31/23

Schedule V — Credits Against the Corporate Income/Franchise Tax		
1. Florida health maintenance organization consumer assistance assessment credit (attach assessment notice)	1.	.
2. Capital investment tax credit (attach certification letter)	2.	.
3. Enterprise zone jobs credit (from Florida Form F-1156Z attached)	3.	.
4. Community contribution tax credit (attach certification letter)	4.	.
5. Enterprise zone property tax credit (from Florida Form F-1158Z attached)	5.	.
6. Rural job tax credit (attach certification letter)	6.	.
7. Urban high-crime area job tax credit (attach certification letter)	7.	.
8. Hazardous waste facility tax credit	8.	.
9. Florida alternative minimum tax (AMT) credit	9.	.
10. Contaminated site rehabilitation tax credit (voluntary cleanup tax credit) (attach tax credit certificate)	10.	.
11. State housing tax credit (attach certification letter)	11.	.
12. Florida tax credit scholarship program credit (credit for contributions to nonprofit scholarship-funding organizations) (attach certificate)	12.	.
13. New worlds reading initiative credit (attach certificate)	13.	.
14. Strong families tax credit (credit for contributions to eligible charitable organizations) (attach certificate)	14.	.
15. Live local program credit (attach certificate)	15.	.
16. New markets tax credit	16.	.
17. Entertainment industry tax credit	17.	.
18. Research and development tax credit	18.	.
19. Experiential learning tax credit	19.	.
20. Credit for qualified railroad reconstruction or replacement expenditures	20.	.
21. Credit for manufacturing of human breast milk derived human milk fortifiers	21.	.
22. Other credits (attach schedule)	22.	.
23. Total credits against the tax (sum of Lines 1 through 22 not to exceed the amount on Page 1, Line 11). Enter total credits on Page 1, Line 12	23.	.

Schedule R — Nonbusiness Income

Line 1. Nonbusiness income (loss) allocated to Florida

<u>Type</u>	<u>Amount</u>
_____	_____
_____	_____
_____	_____
Total allocated to Florida (Enter here and on Page 1, Line 8)	1. _____

Line 2. Nonbusiness income (loss) allocated elsewhere

<u>Type</u>	<u>State/country allocated to</u>	<u>Amount</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
Total allocated elsewhere		2. _____

Line 3. Total nonbusiness income

Grand total. Total of Lines 1 and 2	3. _____	0.
(Enter here and on Schedule II, Line 7)		



NAME **UltraVision Corporation** FEIN **65-0949567** TAXABLE YEAR ENDING **12/31/23**

Estimated Tax Worksheet For Taxable Years Beginning On or After January 1, 2024

- | | | | |
|--|----|--------------------|--------------------|
| 1. Florida income expected in taxable year | | 1. \$ | <u>0.</u> |
| 2. Florida exemption \$50,000 (Members of a controlled group, see instructions on Page 14 of Florida Form F-1120N) | | 2. \$ | <u> .</u> |
| 3. Estimated Florida net income (Line 1 less Line 2) | | 3. \$ | <u>0.</u> |
| 4. Total Estimated Florida tax (5.5% of Line 3) | \$ | <u>0.</u> | |
| Less: Credits against the tax | \$ | <u> .</u> | 4. \$ <u>0.</u> |

5. Computation of installments:

Payment due dates and payment amounts:	If 6/30 year end, last day of 4th month, otherwise last day of 5th month - Enter 0.25 of Line 4	5a.	<u> .</u>
	Last day of 6th month - Enter 0.25 of Line 4	5b.	<u> .</u>
	Last day of 9th month - Enter 0.25 of Line 4	5c.	<u> .</u>
	Last day of fiscal year - Enter 0.25 of Line 4	5d.	<u> .</u>

NOTE: If your estimated tax should change during the year, you may use the amended computation below to determine the amended amounts to be entered on the declaration (Florida Form F-1120ES).

- | | | | |
|--|----------|--------------------|--------------------|
| 1. Amended estimated tax | | 1. \$ | <u> .</u> |
| 2. Less: | | | |
| (a) Amount of overpayment from last year elected for credit to estimated tax and applied to date | 2a. - \$ | <u> .</u> | |
| (b) Payments made on estimated tax declaration (Florida Form F-1120ES) | 2b. - \$ | <u> .</u> | |
| (c) Total of Lines 2(a) and 2(b) | 2c. \$ | <u> .</u> | |
| 3. Unpaid balance (Line 1 less Line 2(c)) | 3. \$ | <u> .</u> | |
| 4. Amount to be paid (Line 3 divided by number of remaining installments) | 4. \$ | <u> .</u> | |

References

The following documents were mentioned in this form and are incorporated by reference in the rules indicated below. The forms are available online at floridarevenue.com/forms.

Form F-2220	Underpayment of Estimated Tax on Florida Corporate Income/Franchise Tax	Rule 12C-1.051, F.A.C.
Form F-7004	Florida Tentative Income/Franchise Tax Return and Application for Extension of Time to File Return	Rule 12C-1.051, F.A.C.
Form F-1120A	Florida Corporate Short Form Income Tax Return	Rule 12C-1.051, F.A.C.
Form F-1156Z	Florida Enterprise Zone Jobs Credit Certificate of Eligibility for Corporate Income Tax	Rule 12C-1.051, F.A.C.
Form F-1158Z	Enterprise Zone Property Tax Credit	Rule 12C-1.051, F.A.C.
Form F-1120N	Instructions for Corporate Income/Franchise Tax Return	Rule 12C-1.051, F.A.C.
Form F-1120ES	Declaration/Installment of Florida Estimated Income/Franchise Tax	Rule 12C-1.051, F.A.C.

Form F-1120		FL Net Operating Loss Carryover Worksheet				2023
For calendar year 2023, or tax year beginning					ending	
Name UltraVision Corporation					Employer Identification Number 65-0949567	
Preceding Taxable Year	Adjusted Federal Income (Loss)	Apportionment Fraction	Adj to NOL FL Apport Inc (Loss)	NOL Carryover Applied	FL Portion of Adjusted Federal Income (Loss)	Next Year Carryover
20th 12/31/03		1.000000				
19th 12/31/04		1.000000				
18th 12/31/05		1.000000				
17th 12/31/06		1.000000				
16th 12/31/07		1.000000				
15th 12/31/08		1.000000				
14th 12/31/09	-172,480	1.000000	-172,480		-172,480	-172,480
13th 12/31/10	-29,338	1.000000	-29,338		-29,338	-201,818
12th 12/31/11	5,952	1.000000	5,952	-5,952		-195,866
11th 12/31/12	-259,322	1.000000	-259,322		-259,322	-455,188
10th 12/31/13	-585,297	1.000000	-585,297		-585,297	-1,040,485
9th 12/31/14	-806,709	1.000000	-806,709		-806,709	-1,847,194
8th 12/31/15	-1,681,485	1.000000	-1,681,485		-1,681,485	-3,528,679
7th 12/31/16	-795,874	1.000000	-795,874		-795,874	-4,324,553
6th 12/31/17	-934,418	1.000000	-934,418		-934,418	-5,258,971
5th 12/31/18	-680,689	1.000000	-680,689		-680,689	-5,939,660
4th 12/31/19	-729,869	1.000000	-729,869		-729,869	-6,669,529
3rd 12/31/20	-569,880	1.000000	-569,880		-569,880	-7,239,409
2nd 12/31/21	-251,469	1.000000	-251,469		-251,469	-7,490,878
1st 12/31/22	-68,751	1.000000	-68,751		-68,751	-7,559,629
Current Year	-205,039	1.000000	-205,039	0	-205,039	-7,764,668
Current year net operating loss deduction				0		

Form F-1120	FL Net Operating Loss Carryover Worksheet, Page 2	2023
Name UltraVision Corporation		Employer Identification Number 65-0949567
For calendar year 2023, or tax year beginning		ending

Current Year Net Operating Income (Loss)

State income taxes deducted	
Additions to federal taxable income (Schedule I)	
Subtractions to federal taxable income (Schedule II)	-1,525
Total adjustments	-1,525
Apportionment fraction	1.000000
Total apportioned adjustments	-1,525
Schedule R, carryovers and other adjustments	
Net adjustments to federal taxable income	-1,525
Federal income (loss)	-203,514
Apportionment fraction	1.000000
Total apportioned adjustments	-203,514
Net adjustments to federal taxable income	-1,525
Current year net operating income (loss)	-205,039

Name <u>UltraVision Corporation</u>	Federal Employer Identification No. <u>65-0949567</u>
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		2022	2023	Differences	
	Federal taxable income	-68,697	-203,514	-134,817	
	State income taxes				
	Interest excluded from federal taxable income				
	Undistributed net long-term capital gains				
	Net operating loss deduction				
	Net capital loss carryover				
	Excess charitable contribution carryover				
	Employee benefit plan contribution carryover				
	Enterprise zone jobs credit				
	Ad valorem taxes allowable as enterprise zone prop tax cr				
	Guaranty association assessment(s) credit				
	Rural and/or urban high-crime area job credits				
Additions	State housing tax credit				
	Florida tax credit scholarship program credits				
	New worlds reading initiative credit				
	Strong families tax credit				
	Live local program credit				
	New markets tax credit				
	Entertainment industry tax credit				
	Research and development tax credit				
	Experiential learning tax credit				
	Railroad reconstruction credit				
	Credit for manufacturing of human breast milk fortifiers				
	Energy economic zone tax credit				
	Section 168(k) IRC special bonus depreciation				
	Depreciation of qualified improvement property				
	Expenses for business meals provided by a restaurant	1,471		-1,471	
	Film, television, and live theatrical production expenses				
	Internship tax credit				
	Other additions				
		Total additions	-67,226	-203,514	-136,288
	Subtractions	Gross foreign source income less attributable expenses			
Gross subpart F income less attributable expenses					
Florida net operating loss carryover deduction					
Florida net capital loss carryover deduction					
Florida excess charitable contribution carryover					
Florida employee benefit plan contribution carryover					
Nonbusiness income					
Eligible net income of an international banking facility					
Section 168(k) IRC special bonus depreciation		1,525	1,525	0	
Depreciation of qualified improvement property					
Film, television, and live theatrical production expenses					
Other subtractions					
	Total subtractions	1,525	1,525	0	

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		2022	2023	Differences
Tax and Payments	Adjusted federal income	-68,751	-205,039	-136,288
	Apportionment fraction	1.000000	1.000000	0.000000
	Florida portion of adjusted federal income	-68,751	-205,039	-136,288
	Nonbusiness income allocated to Florida			
	Florida exemption			
	Florida net income	0	0	0
	Tax due	0	0	0
	Credit against tax			
	Penalty F-2220			
	Penalty - other			
	Interest F-2220			
	Interest - other			
	Total income tax, interest and penalty due	0	0	0
	Estimated tax payments			
	Tentative tax payment			
Total payments				
Total amount due	0	0	0	
Overpayment credited to next year's estimated tax				
Refund				