	Acknowledgement and General Information for Entities That File Returns Electronically	2019
Name(s) as shown on return		Employer Identification Number
Ultravision Corp	poration	**-***9567
Entity address		
11911 US Highw	ay 1	
North Palm Bea	ch, FL 33408	
Thank you for part	icipating in IRS e-file.	
1. x 2019 7004 The electronic filin	income tax retum for Federal was filed eg services were provided by _D Brooks and Associates CPAs PA	lectronically.
_	income tax return was accepted on	nal Identification Number (PIN) as nter or generate a PIN signature.
	OO NOT SEND A PAPER COPY OF ENTITY'S RETURN TO DO NOT SEND A PAPER COPY OF ENTITY'S RETURN TO DO NOT THE RETURN TO NOT T	

	1120	1		ı	J.S. Corpo	oration In	come Ta	x Return				OMB No. 1545-0123
		Treasury	For calend		r tax year beginning		, 2019, end			, 20	_ [2019
	Revenue S			► Go to w	/ww.irs.gov/Fo	rm1120 for ins	structions and	d the latest in	formatio			
A Chec	k if: olidated r	return —		Name						BE	mploy	er identification number
	h Form 8			Ultrav	ision Corp	oration						0949567
	onlife cor I return		TYPE	N						_ c հ	ate inc	orporated
_	onal holdi		OR	Number, stre	eet, and room or s	suite no. If a P.O.	box, see instruc	tionsste 204	Ŀ			
	h Sch. P		PRINT									23-1999
	onal servi instruction				US Highway					''نا إ	otal ass	sets (see instructions)
- '		attached		City or town	, state or province	, country and ZIF	or toreign posta	ii code				
		_			Palm Beach		FL	33408		\$_		555,969
			E Check		Initial return	(2) Final re		Name change		X Addı		inge
		•							59	5,561	L	
					1						1c	
		ū	`		5-A)						2	172,394
•		•			1c						3	423,167
Income	4 [Dividends and i	nclusions	(Schedule C	C, line 23)					• • •	4	
<u>u</u>											5	
											6	
		•									7	
					dule D (Form 11						8	
		-			art II, line 17 (at						9	
					h statement)						10	+
					10						11	
					tions - attach Fo						12	!
S.)					t credits)				_		13	
ţi	14 F									_	14	426
on R	15 E										15	i
ge	_										16	97,427
Deductions (See instructions for limitations on deductions.)	17	Taxes and licer	nses					Wks. '	Tax/Li	c	17	52,876
Suc	18 I	nterest (see ins	structions)								18	11,321
atic											19)
Ξ̈́	20 [Depreciation fro	om Form 4	562 not clai	imed on Form 1	125-A or elsew	here on return	(attach Form 4	562)		20	830
≔ ŏ	21 [Depletion									21	
is fo	22 /	Advertising .				4	,				22	!
ţi			-								23	
ב	24 E	Employee bene	fit progran	ns							24	21,544
nst											25	
ee i											26	708,121
S) S					ough 26						27	+ , - ,
ous					loss deduction			1 1	n line 11.		28	(729,099
Ę					tructions)			29a				
ed		Special deducti										
_											290	+
≪ ಶ			7		from line 28. Se						30	(127,000
Tax, Refundable Credits, & Payments											31	-
rs Cre					ule J, Part II, lin						32	
able					965 net tax liabil						33	
unda Payı			-		s. Check if Forn						34	
Ref					han the total of		*				35	
Тах,				Ü	n the total of lin	· ·	*	unt overpaid			36	
					Credited to 20				Refunde		•	
C;					nined this return, inclu (payer) is based on a				e best of my	knowledo	ge and b	elief, it is true, correct,
Sign	1				. , ,					May	the IRS	discuss this return
Here		alter G So	cott				Presid	lent		_ with	the prep	parer shown below?
	Si	gnature of officer			Date		Title	T	Г		instructi	Z les NO
ne! i		Print/Type prepar			Preparer's s	ignature		Date			if	PTIN
Paid		David D H					_	10-15-2		self-emplo		P01039037
Prepa		Firm's name			d Associat	es CPAs PA	A			IN ▶27	7-131	L9467
Use (אוחכ	Firm's address		PGA Bo					Phone r			
			Palm	ı Beach	Gardens FL	33410			(9	54)59	2-25	507

65-0949567

Scl	hedule C Dividends, Inclusions, and Special Deductions	(a) Dividends and	(b) %	(c) Special deductions
	(see instructions)	inclusiions		(a) x (b)
1	Dividends from less-than-20%-owned domestic corporations (other than debt-financed		50	
2	stock)		50	
2	·		65	
	stock)		00	
3	Dividends on certain debt-financed stock of domestic and foreign corporations		see instructions	
3	Divide to some training of the state of the			
4	Dividends on certain preferred stock of less-than-20%-owned public utilities		23.3	
•	Simulation of contain prototion district of the public dilities.		20.0	
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	
	ů ,			
7	Dividends from 20%-or-more-owned foreign corporations and certain FSCs		65	
8	Dividends from wholly owned foreign subsidiaries		100	
			see	
9	Subtotal. Add lines 1 through 8. See instructions for limitations		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)			
45	Coation OCE(a) inclusion		see instructions	
15 16a	Section 965(a) inclusion			
IUa	the stock of a lower-tier foreign corporation treated as a dividend (attach Form(s) 5471)			
	(see instructions)		100	
h	Subpart F inclusions derived from hybrid dividends of tiered corporations (attach Form(s)		100	
-	5471) (see instructions)			
С	Other inclusions from CFCs under subpart F not included on line 15, 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, li	ne 29b	▶	

So	chedule J Tax Computation and Payment (see instructions)		
Part	t I - Tax Computation		
1	Check if the corporation is a member of a controlled group (attach Schedule O (Form 1120)). See instructions ▶ ☐		
2	Income tax. See instructions	2	0
3	Base erosion minimum tax (attach Form 8991)	3	
4	Add lines 2 and 3	4	0
5a	Foreign tax credit (attach Form 1118)		
b	Credit from Form 8834 (see instructions)		
С	General business credit (attach Form 3800)		
d	Credit for prior year minimum tax (attach Form 8827)		
е	Bond credits from Form 8912		
6	Total credits. Add lines 5a through 5e	6	
7	Subtract line 6 from line 4	7	0
8	Personal holding company tax (attach Schedule PH (Form 1120))	8	0
9a	Recapture of investment credit (attach Form 4255)		
b	Recapture of low-income housing credit (attach Form 8611)		
С	Interest due under the look-back method - completed long-term contracts (attach		
	Form 8697)		
d	Interest due under the look-back method - income forecast method (attach Form 8866) 9d		
е	Alternative tax on qualifying shipping activities (attach Form 8902) 9e		
f	Other (see instructions - attach statement)		
10	Total. Add lines 9a through 9f	10	
11	Total tax. Add lines 7, 8, and 10. Enter here and on page 1, line 31	11	0
	t II - Section 965 Payments (see instructions)		
12	2019 net 965 tax liability paid from Form 965-B, Part II, column (k), line 3. Enter here an on page 1, line 32	12	
	t III - Payments, Refundable Credits, and Section 965 Net Tax Liability	T T	
13	2018 overpayment credited to 2019	13	
14	2019 estimated tax payments	14	
15	2019 refund applied for on Form 4466	15 ()
16	Combine lines 13, 14, and 15	16	
17	Tax deposited with Form 7004	17	
18		18	
19	Total payments. Add lines 16, 17, and 18	19	
20 a			
a b		_	
C			
d			
21	Total credits. Add lines 20a through 20d	21	
22	2019 net 965 tax liability from Form 965-B, Part I, column (d), line 3. See instructions	22	
23	Total payments, credits, and section 965 net tax liability Add lines 19, 21, and 22. Enter here and on page 1,		
-	line 33	23	

EEA Form **1120** (2019)

Sc	chedule K Other Information (see instructions)					
1	Check accounting method: a Cash b x Accrual c	Other (specify) ►			Yes	No
2						
	a Business activity code no. ▶ 339110					
	b Business activity Research and Development					
_	c Product or service V1trasound	-l'				
3	If IIVes II automorphism and FIN of the manner comparation.					Х
	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 en	ntity treated as a nartnershi	n) trust or tay-eyemnt			
	organization own directly 20% or more, or own, directly or indirectly, 5	•		he		
	corporation's stock entitled to vote? If "Yes," complete Part I of Sched		0.			х
	b Did any individual or estate own directly 20% or more, or own, directly					
	classes of the corporation's stock entitled to vote? If "Yes," complete	· · · · · · · · · · · · · · · · · · ·	= :		х	
5	At the end of the tax year, did the corporation:	`	, ,			
а	Own directly 20% or more, or own, directly or indirectly, 50% or more of the total v	oting power of all classes of st	ock entitled to vote of			
	any foreign or domestic corporation not included on Form 851, Affiliations Schedu	ile? For rules of constructive o	wnership, see instructions			х
	If "Yes," complete (i) through (iv) below.					
	(I) Name of Opposition	(ii) Employer Identification Number	(iii) Country of Incorporation		ercentage d in Votin	
	(i) Name of Corporation	(if any)	incorporation		Stock	ig
_						
D	Own directly an interest of 20% or more, or own, directly or indirectly, an interest of					
	(including an entity treated as a partnership) or in the beneficial interest of a trust? If	For rules of constructive owner	rsnip, see instructions			Х
	If "Yes," complete (i) through (iv) below.	(ii) Employer	(iii) Country of	(iv) 1	Maximun	n
	(i) Name of Entity	Identification Number (if any)	Organization	Percenta Profit, Lo		
		(4)			,	
	During this to war and the comparties and divided (attention at all of					
О	During this tax year, did the corporation pay dividends (other than stock d		,			
	excess of the corporation's current and accumulated earnings and profits If "Yes," file Form 5452, Corporate Report of Nondividend Distributions					X
	If this is a consolidated return, answer here for the parent corporation and					
7	At any time during the tax year, did one foreign person own, directly or inc		•			
•	classes of the corporation's stock entitled to vote or at least 25% of the	•	• .			х
	For rules of attribution, see section 318. If "Yes," enter:	iotal value of all olasses of	the corporation of dicoks			Λ
	(a) Percentage owned ► and (b) Owner's cou	ıntrv ▶				
	(c) The corporation may have to file Form 5472, Information Return of		S. Corporation or a Foreign			
	Corporation Engaged in a U.S. Trade or Business. Enter the number of	=	0			
8	Check this box if the corporation issued publicly offered debt instruments		-	. • 🗍		
	If checked, the corporation may have to file Form 8281, Information Re	•				
9	Enter the amount of tax-exempt interest received or accrued during the tax	•	-			
	Enter the number of shareholders at the end of the tax year (if 100 or few	· ·				
11	If the corporation has an NOL for the tax year and is electing to forego th	e carryback period, check	here (see instructions)	. > X		
	If the corporation is filing a consolidated return, the statement required by					
	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.)		▶ \$ 5.967	440		

Sc	Chedule K Other Information (continued from page 4)		
13	Are the corporation's total receipts (page 1, line 1a, plus lines 4 through 10) for the tax year and its total assets at the end of the	Yes	No
	tax year less than \$250,000?		x
	If "Yes," the corporation is not required to complete Schedules L, M-1, and M-2. Instead, enter the total amount of cash distributions		
	and the book value of property distributions (other than cash) made during the tax year ▶ \$		
14	Is the corporation required to file Schedule UTP (Form 1120), Uncertain Tax Position Statement? See instructions		x
	If "Yes," complete and attach Schedule UTP.		
15a	Did the corporation make any payments in 2019 that would require it to file Form(s) 1099?	х	
b	If "Yes," did or will the corporation file required Form(s) 1099?	х	
16	During this tax year, did the corporation have an 80% or more change in ownership, including a change due to redemption of its own stock?		x
17	During or subsequent to this tax year, but before the filing of this return, did the corporation dispose of more than 65% (by value)		
	of its assets in a taxable, non-taxable, or tax deferred transaction?		x
18	Did the corporation receive assets in a section 351 transfer in which any of the transferred assets had a fair market basis or fair		
	market value of more than \$1 million?		х
19	During the corporation's tax year, did the corporation make any payments that would require it to file Forms 1042 and 1042-S		
	under chapter 3 (sections 1441 through 1464) or chapter 4 (sections 1471 through 1474) of the Code?		х
20	Is the corporation operating on a cooperative basis?		х
21	During the tax year, did the corporation pay or accrue any interest or royalty for which the deducton is not allowed under section		
	267A? See instructions		х
	If "Yes," enter the total amount of the disallowed deductions \$ \]		
22	Does the corporation have gross receipts of at least \$500 million in any of the 3 preceding tax years? (See sections 59A(e)(2)		
	and (3))		х
	If "Yes," complete and attach Form 8991.		
23	Did the corporation have an election under section 163(j) for any real property trade or business or any farming business in effect		
	during the tax year? See instructions		х
24	Does the corporation satisfy one or more of the following conditions? See instructions		х
а	The corporation owns a pass-through entity with current, or prior year carryover, excess business interest expense.		
b	3, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,		
	current tax year are more than \$26 million and the corporation has business interest expense.		
С			
	If "Yes," to any, complete and attach Form 8990.		
25	Is the corporation attaching Form 8996 to certify as a Qualified Opportunity Fund?		х
	If "Yes," enter amount from Form 8996, line 14 > \$		

EEA Form **1120** (2019)

65-0949567

Schedule L Balance Sheets per Books		Beginning	of tax	year	End of tax year			
		Assets	(a)		(b)	(c)	(d)	
1	Cash				41,872		91,476	
2a	Trade notes and	d accounts receivable				109,431		
b	Less allowance	for bad debts	()			()	109,431	
3	Inventories .				53,279		228,080	
4	U.S. governmer	nt obligations						
5		curities (see instructions)					<u>-</u> -	
6		ssets (attach statement)	Statement #8		126,720		126,720	
7	Loans to shareh	nolders						
8	0 0	eal estate loans						
9		nts (attach statement)						
	=	ther depreciable assets				21,011		
		ted depreciation	, ,		1,092	(20,749)	262	
	•	ets						
		ted depletion	()			()		
12		/ amortization)						
	=	s (amortizable only)	,					
		ted amortization	()					
14	•	ttach statement)		_				
15				_	222,963		555,969	
		d Shareholders' Equity						
16	Accounts payab				129,193		38,633	
17		, bonds payable in less than 1 year			20,000		001 000	
18		abilities (attach statement)	Statement #11		80,000		221,072	
19 20		eholders			227 020		104,000	
21				1	227,920			
22	Capital stock:	(attach statement)				· ·		
22	Capital Stock.	b Common stock	13,107		13,107	12,221	12,221	
23	Additional paid-		13,107		5,572,275	12,221	7,538,752	
24		s-Appropriated (attach statement)			- 3,312,213		7,550,752	
25	_	gs-Unappropriated			(5,799,532)		(7,358,709)	
26		areholders' equity (attach statement)			(377337332)		(1/330/103)	
27	-	asury stock		()	()	
28		and shareholders' equity			222,963	, ,	555,969	
	nedule M-1	Reconciliation of Income	Loss) per Books Witl	h Ince			333,533	
		Note: The corporation may be			-			
1	Net income (los	s) per books	(2,033,394)	7	Income recorded	on books this year		
2	Federal income	tax per books			not included on th	is retum (itemize):		
3		al losses over capital gains			Tax-exempt interes	est \$		
4	Income subject	to tax not recorded on books						
	this year (itemiz	e):						
			_	8		s return not charged		
5	Expenses recor	ded on books this year not			against book inco	me this year (itemize):		
		s retum (itemize):		1	Depreciation	Ψ		
а	Depreciation .	• • • • • • • \$	_	b	Charitable contrib	utions \$		
		ributions \$	_					
С	Travel and ente	rtainment \$2,07	8					
				_	A 44 10 7 1 2			
	tatement #		_	9			(800,000)	
	Add lines 1 thro	Analysis of Unappropriate	<u></u>		" "	ne 28)-line 6 less line 9	(729,099)	
<u>SCI</u>	nedule M-2 Balance at begi	nning of year		Ī	•	a Cash		
2	_	s) per books		"		Stock		
3	Other increases	(!+:)·	(2,033,394)	t		Property		
•	Statement		0	6		(itemszeatement #20	680,783	
		1,133,00	1,155,000	7		· · · · · · · · · · · · · · · ·	680,783	
4	Add lines 1, 2, a	and 3		1		vear (line 4 less line 7)	(7,358,709)	

Form 1125-A

Cost of Goods Sold

(Rev. November 2018)

Department of the Treasury Internal Revenue Service

Name

► Attach to Form 1120, 1120-C, 1120-F, 1120S, or 1065.

► Go to www.irs.gov/Form1125A for the latest information.

OMB No. 1545-0123

ivame			Employeric	dentification no	umber
υlt	ravision Corporation		65-094	19567	
1	Inventory at beginning of year	1			53,279
2	Purchases	2		3	47,195
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		4	00,474
7	Inventory at end of year	7		2	28,080
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		1	72,394
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			>	· 🗌
С	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			
е	If property is produced or acquired for resale, do the rules of section 263A apply to the entity? See instructions			Yes	x No
f	Was there any change in determining quantities, cost, or valuations between opening and closing inventory? If	"Yes,"			
	attach explanation			Yes	x No
		_			

Name(s) shown on return

General Business Credit

OMB No. 1545-0895

► Go to www.irs.gov/Form3800 for instructions and the latest information. Department of the Treasury Internal Revenue Service (99)

► You must attach all pages of Form 3800, pages 1, 2, and 3, to your tax return.

Attachment Sequence No. **22**

Identifying number

<u>_</u> U1	travision Corporation	65-0949567	
Pa	rt I Current Year Credit for Credits Not Allowed Against Tentative Minimum Tax (1	TMT)	
	(See instructions and complete Part(s) III before Parts I and II.)		
1	General business credit from line 2 of all Parts III with box A checked	1	
2	Passive activity credits from line 2 of all Parts III with box B checked		
3	Enter the applicable passive activity credits allowed for 2019. See instructions	3	
4	Carryforward of general business credit to 2019. Enter the amount from line 2 of Part III with box C		
	checked. See instructions for statement to attach	4	
5	Carryback of general business credit from 2020. Enter the amount from line 2 of Part III with box D		
	checked. See instructions	5	
6	Add lines 1, 3, 4, and 5	6	0
Pa	rt II Allowable Credit		
7	Regular tax before credits:		
	 Individuals. Enter the sum of the amounts from Form 1040 or 1040-SR, line 12a, and 		
	Schedule 2 (Form 1040 or 1040-SR), line 2, or the sum of the amounts from Form		
	1040-NR, lines 42 and 44		
	• Corporations. Enter the amount from Form 1120, Schedule J, Part I, line 2; or the		
	applicable line of your return	7	
	• Estates and trusts. Enter the sum of the amounts from Form 1041, Schedule G,		
	lines 1a and 1b; or the amount from the applicable line of your returm		
8	Alternative minimum tax:		
	• Individuals. Enter the amount from Form 6251, line 11		
	• Corporations. Enter -0	8	
	• Estates and trusts. Enter the amount from Schedule I (Form 1041), line 54		
9	Add lines 7 and 8	9	0
10a	Foreign tax credit		
b	Certain allowable credits (see instructions)		
С	Add lines 10a and 10b	10c	0
11	Net income tax. Subtract line 10c from line 9. If zero, skip lines 12 through 15 and enter -0- on line 16	11	0
12	Net regular tax. Subtract line 10c from line 7. If zero or less, enter =0=	o	
13	Enter 25% (0.25) of the excess, if any, of line 12 over \$25,000. See		
	instructions		
14	Tentative minimum tax:		
	• Individuals. Enter the amount from Form 6251, line 9		
	• Corporations. Enter -0		
	• Estates and trusts. Enter the amount from Schedule I (Form 1041),		
	line 52		
15	Enter the greater of line 13 or line 14	15	0
16	Subtract line 15 from line 11. If zero or less, enter -0		0
17	Enter the smaller of line 6 or line 16		0
	C corporations: See the line 17 instructions if there has been an ownership change, acquisition, or		
	reorganization.		

38

0

Part II Allowable Credit (continued) Note: If you are not required to report any amounts on line 22 or 24 below, skip lines 18 through 25 and enter -0- on line 26. Multiply line 14 by 75% (0.75). See instructions 18 18 19 Enter the greater of line 13 or line 18 19 20 20 Subtract line 17 from line 20. If zero or less, enter -0-21 21 Combine the amounts from line 3 of all Parts III with box A, C, or D checked 22 22 Passive activity credit from line 3 of all Parts III with box B checked 23 23 Enter the applicable passive activity credit allowed for 2019. See instructions 24 25 Empowerment zone and renewal community employment credit allowed. Enter the smaller of line 21 26 26 Subtract line 13 from line 11. If zero or less, enter -0- 27 0 28 Add lines 17 and 26 28 0 Subtract line 28 from line 27. If zero or less, enter -0-29 29 0 Enter the general business credit from line 5 of all Parts III with box A checked 30 30 126,931 31 Passive activity credits from line 5 of all Parts III with box B checked 32 Enter the applicable passive activity credits allowed for 2019. See instructions 33 33 Carryforward of business credit to 2019. Enter the amount from line 5 of Part III with box C checked 34 and line 6 of Part III with box G checked. See instructions for statement to attach 34 Carryback of business credit from 2020. Enter the amount from line 5 of Part III with box D checked. See instructions . . 35 36 Add lines 30, 33, 34, and 35 36 126,931 37 37 0 Credit allowed for the current year. Add lines 28 and 37. Report the amount from line 38 (if smaller than the sum of Part I, line 6, and Part II, lines 25 and 36, see instructions) as indicated below or on the applicable line of your return. • Individuals. Schedule 3 (Form 1040 or 1040-SR), line 6, or Form 1040-NR, line 51

• Estates and trusts. Form 1041, Schedule G, line 2b

Name(s) shown on return Identifying number Ultravision Corporation 65-0949567 Part III General Business Credits or Eligible Small Business Credits (see instructions) Complete a separate Part III for each box checked below. See instructions. X E Α General Business Credit From a Non-Passive Activity Reserved В General Business Credit From a Passive Activity Reserved G \square С General Business Credit Carryforwards Eligible Small Business Credit Carryforwards D General Business Credit Carrybacks н Reserved If you are filing more than one Part III with box A or B checked, complete and attach first an additional Part III combining amounts from (a) Description of credit If claiming the credit Enter the Note: On any line where the credit is from more than one source, a separate Part III is needed for each from a pass-through appropriate pass-through entity. entity, enter the EIN amount Investment (Form 3468, Part II only) (attach Form 3468) 1 a b Reserved С d Low-income housing (Form 8586, Part I only) 1d Disabled access (Form 8826) (see instructions for limitation) 1e е f Renewable electricity, refined coal, and Indian coal production (Form 8835) 1f a 1g 1h h Small employer pension plan startup costs (Form 8881) (see instructions for limitation) 1j Employer-provided child care facilities and services (Form 8882) (see instructions 1k 1m 1n n Nonconventional source fuel (carryforward only) 1o 1p 1q 1r s 1s 1t t Mine rescue team training (Form 8923) u 1u Agricultural chemicals security (carryforward only) 1v Employer differential wage payments (Form 8932) 1w w X 1y У Qualified plug-in electric vehicle (carryforward only) 1z 1aa **bb** General credits from an electing large partnership (carryforward only) zz Other. Oil and gas production from marginal wells (Form 8904) and certain other 1zz 2 Add lines 1a through 1zz and enter here and on the applicable line of Part I 2 3 Enter the amount from Form 8844 here and on the applicable line of Part II 3 Investment (Form 3468, Part III) (attach Form 3468) 4 a 4a b 4b С d 4d Renewable electricity, refined coal, and Indian coal production (Form 8835) 4e f Employer social security and Medicare taxes paid on certain employee tips (Form 8846) 4f 4g a Small employer health insurance premiums (Form 8941) 4h h 4i 126,931 j 4j z 4z 5 5 Add lines 4a through 4z and enter here and on the applicable line of Part II 126,931 Add lines 2, 3, and 5 and enter here and on the applicable line of Part II

126,931

6

SCHEDULE G (Form 1120)

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

OMB No. 1545-0123

(Rev. December 2011) ► Attach to Form 1120. Department of the Treasury ► See instructions. Internal Revenue Service Employer identification number (EIN) 65-0949567 Ultravision Corporation Certain Entities Owning the Corporation's Voting Stock. (Form 1120, Schedule K, Question 4a). Complete Part I 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). (ii) Employer Identification (i) Name of Entity (iii) Type of Entity (iv) Country of Organization (v) Percentage Owned in Voting Stock Number (if anv) 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).

(ii) Identifying Number (if any)	(iii) Country of Citizenship (see instructions)	(iv) Percentage Owned in Voting Stock
545-57-8246	US	89

Form 1125-E

(Rev. October 2016)

Department of the Treasury
Internal Revenue Service

Compensation of Officers

► Attach to Form 1120, 1120-C, 1120-F, 1120-REIT, 1120-RIC, or 1120S.

▶ Information about Form 1125-E and its separate instructions is at www.irs.gov/form1125e.

OMB No. 1545-0123

Employer identification number

Ultravision Corporation

65-0949567

(a) Name of officer	(b) Social security number (c) Percent of time devoted to		Perd	(f) Amount of			
(a) Name of officer	(see instructions)	busine	ess	(d) Comm	non	(e) Preferred	compensation
Walter G Scott	545-57-8246	100	%	89	%	%	
			%		%	%	
			%		%	%	
			%		%	%	
			%		%	%	
			%		%	%	
			%		%	%	
			%		%	%	
			%		%	%	
			%		%	%	
			%		%	%	
			%		%	%	
			%		%	%	
			%		%	%	
			%		%	%	
			%		%	%	
			%		%	%	
			%		%	%	
			%		%	%	
			%		%	%	
Total compensation of officers						2	
Compensation of officers claimed on Form 1125-A or	elsewhere on retum					3	
Subtract line 3 from line 2. Enter the result here and o	- F 4400 4 1'	40					

Department of the Treasury

Internal Revenue Service (99)

Depreciation and Amortization

(Including Information on Listed Property)

Attach to your tax return.

▶ Go to www.irs.gov/Form4562 for instructions and the latest information.

OMB No. 1545-0172

Attachment Sequence No. 179

Name(s) shown on return Business or activity to which this form relates Identifying number FORM 1120 65-0949567 Ultravision Corporation **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I. 1 1 2 2 Threshold cost of section 179 property before reduction in limitation (see instructions)......... 3 3 4 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing 6 (b) Cost (business use only) (a) Description of property 7 8 8 9 9 10 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions 11 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 1.1. 12 Carryover of disallowed deduction to 2020. Add lines 9 and 10, less line № Note: Don't use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.) Special depreciation allowance for qualified property (other than listed property) placed in service 14 15 16 830 MACRS Depreciation (Don't include listed property. See instructions.) Section A 17 If you are electing to group any assets placed in service during the tax year into one or more general Section B - Assets Placed in Service During 2019 Tax Year Using the General Depreciation System (c) Basis for depreciation (b) Month and year (business/investment use (a) Classification of property placed in (e) Convention (f) Method (g) Depreciation deduction only-see instructions) 19a 3-year property b 5-year property 7-year property d 10-year property e 15-year property 20-year property 25-year property 25 yrs. Residential rental S/I 27.5 yrs. MM property 27.5 yrs. MM S/I 39 yrs. MM S/L Nonresidential real MM property Section C - Assets Placed in Service During 2019 Tax Year Using the Alternative Depreciation System 20a Class life S/L 12-year 12 yrs. S/L 30-year 30 yrs. MM S/L С d 40-year S/L Part IV **Summary** (See instructions.) Listed property. Enter amount from line 28 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instructions 830 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs 23

Form **6765**

Credit for Increasing Research Activities

► Attach to your tax return.

► Go to www.irs.gov/Form6765 for instructions and the latest information.

OMB No. 1545-0619

Attachment Sequence No. **81**

Department of the Treasury Internal Revenue Service Name(s) shown on return

| Identifying number

	ravision Corporation		094956	
Sec	tion A - Regular Credit. Skip this section and go to Section B if you are electing or previously elected (and a	re not re	evoking) the
alter	native simplified credit.			
1	Certain amounts paid or incurred to energy consortia (see instructions)		1	
2	Basic research payments to qualified organizations (see instructions) 2 634,6	556		
3	Qualified organization base period amount			
4	Subtract line 3 from line 2. If zero or less, enter -0		4	634,656
5	Wages for qualified services (do not include wages used in figuring the work			
	opportunity credit)			
6	Cost of supplies			
7	Rental or lease costs of computers (see instructions)			
8	Enter the applicable percentage of contract research expenses. See instructions 8			
9	Total qualified research expenses. Add lines 5 through 8 9	0		
10	Enter fixed-base percentage, but not more than 16% (0.16) (see instructions) 10	%		
11	Enter average annual gross receipts. See instructions			
12	Multiply line 11 by the percentage on line 10	0		
13	Subtract line 12 from line 9. If zero or less, enter -0	0		
14	Multiply line 9 by 50% (0.50)	0		
15	Enter the smaller of line 13 or line 14		15	0
16	Add lines 1, 4, and 15		16	634,656
17				
	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 statement	.#681	17	126,931
Sec	tion 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				
25	opportunity credit)			
25	Cost of supplies			
26	Enter the applicable percentage of contract research expenses. See the line 8			
21				
20	instructions			
28 29	Enter your total qualified research expenses for the prior 3 tax years. If you had			
23	no qualified research expenses in any one of those years, skip lines 30 and 31			
30	Divide line 29 by 6.0			
31	Subtract line 30 from line 28. If zero or less, enter -0			
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	
	Are you electing the reduced credit under section 280C? ► Yes No	• •		
J 4	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	
		-	-	

Form 6765 (Rev. 12-2019) Page **2**

Section C - Current Year Credit

that must be attached .

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	126,931
37	Credit for increasing research activities from partnerships, S corporations, estates, and trusts	37	
38	Add lines 36 and 37	38	126,931
	• 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.		
	Note: Qualified small business filers, other than partnerships and S corporations, electing the payroll tax		
	credit must complete Form 3800 before completing Section D.		
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	
	tion D - Qualified Small Business Payroll Tax Election and Payroll Tax Credit. Skip this section if the pa	ayroll	tax election does
not a	apply. See instructions.		
41	Check this box if you are a qualified small business electing the payroll tax credit. See instructions x		
42			
	instructions	42	126,931
43	General business credit carryforward from the current year (see instructions). Partnerships and S		
	corporations, skip this line and go to line 44	43	126,931
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).		

EEA Form **6765** (Rev. 12-2019)

44

126,931

Members of controlled groups or businesses under common control, see instructions for the statement

Form **7004**(Rev. December 2018) Department of the Treasury

Internal Revenue Service

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

OMB No. 1545-0233

► File a separate application for each return.

► Go to www.irs.gov/Form7004 for instructions and the latest information.

	Name Winprobe Corporation			Identifying number				
Drint	Ultravision Corporation							
Print			STE 204	65-0949567				
or								
Type	11911 US Highway 1							
	City, town, state, and ZIP code (If a foreign address	s, enter city, prov	vince or state, and country (follow the country's	oractice for entering post	tal code).)			
	North Palm Beach		FL 33408					
	File request for extension by the due date of the retu		· ·					
Part I			• • •			ons.		
1	Enter the form code for the return listed below	that this app	plication is for	· · · · · · · · · · · · · · · · · · ·	1	2		
Applica	ation	Form Code	Application Is For:		Form Code			
Form 7	06-GS(D)	01	Form 1120-ND (section 4951 tax	es)	20			
Form 7	06-GS(T)	02	Form 1120-PC		21			
Form 1	041 (bankruptcy estate only)	03	Form 1120-POL		22			
Form 1	041 (estate other than a bankruptcy estate)	04	Form 1120-REIT		23			
Form 1	041 (trust)	05	Form 1120-RIC		24			
Form 1	041-N	06	Form 1120S		25			
Form 1	041-QFT	07	Form 1120-SF		26			
Form 1	042	08	Form 3520-A		27			
Form 1	065	09	Form 8612		28			
Form 1	066	11	Form 8613		29			
Form 1	120	12	Form 8725		30			
Form 1	120-C	34	Form 8804		31			
Form 1	120-F	15	Form 8831		32			
Form 1	120-FSC	16	Form 8876		33			
Form 1	120-H	17	Form 8924		35			
Form 1	120-L	18	Form 8928		36			
Form 1	120-ND	19						
Part I	All Filers Must Complete This Par	t						
	If the organization is a foreign corporation that check here				. •	П		
	If the organization is a corporation and is the							
	check here		• .		. •			
	If checked, attach a statement listing the name covered by this application.			EIN) for each memb	per	_		
	If the organization is a corporation or partners	hip that qual	ifies under Regulations section 1 608	81-5 check here	•			
	The application is for calendar year 20 19 ,				, 20			
	Short tax year. If this tax year is less than 12			Final return	,	<u> </u>		
- [Change in accounting period Conso			ructions-attach exp	olonotion \			
	— Change in accounting period — Consc	muateu retur	This be liked — Other (See Inst	ructions-attach exp	nananon.)			
6	Tentative total tax			6		0		
7	Total payments and credits. See instructions			. 7		0_		
8	Balance due. Subtract line 7 from line 6. See	instructions		. 8		0		
								

Form 8879-C	IRS <i>e-file</i> Signature Authorization for Fo	rm 1120	OMB No. 1545-0123
	For calendar year 2019, or tax year beginning , 2019, ending		2040
Department of the Treasury	► Do not send to the IRS. Keep for your records.		- 2019
nternal Revenue Service	► Go to www.irs.gov/Form8879C for the latest informat	ion.	
lame of corporation		Employer identification i	number
Oltravision Con	rporation	65-0949567	
Part I Tax R	eturn Information (Whole dollars only)		
1 Total income (Form 1120, line 11)		1 423,167
2 Taxable incom	e (Form 1120, line 30)	. 	2 (729,099
•	n 1120, line 31)	İ	3
	(Form 1120, line 35)		4
	Form 1120, line 36)		5
Part II Decla	ration and Signature Authorization of Officer. Be sure to get a	copy of the co	i poration s return.
he U.S. Treasury and nstitution account indice the financial institution 1-888-353-4537 no late in the processing of the saues related to the passues related to	eason for any delay in processing the return or refund, and (c) the date of any refu- its designated Financial Agent to initiate an electronic funds withdrawal (direct debit, ated in the tax preparation software for payment of the corporation's federal taxes on to debit the entry to this account. To revoke a payment, I must contact the U.S. Treas- er than 2 business days prior to the payment (settlement) date. I also authorize the electronic payment of taxes to receive confidential information necessary to answe ayment. I have selected a personal identification number (PIN) as my signature for the if applicable, the corporation's consent to electronic funds withdrawal. The box only	entry to the financial wed on this return, are sury Financial Agent financial institutions r inquiries and resolv	al nd at s involved ve
	D Brooks and Associates CPAs to enter my PIN 67894 ERO firm name oration's 2019 electronically filed income tax return.	as my s	signature
As an office return.	er of the corporation, I will enter my PIN as my signature on the corporation's 2019 e	lectronically filed inc	come tax
Officer's signature	Date ► <u>07-02-2020</u>	Title ▶ Presid	dent
Part III Certif	ication and Authentication		
ERO's EFIN/PIN. Enter certify that the above corporation indicated a	or your six-digit EFIN followed by your five-digit self-selected PIN. numeric entry is my PIN, which is my signature on the 2019 electronically filed inconstatove. I confirm that I am submitting this return in accordance with the requirement pation, and Pub. 4163 , Modernized e-File (MeF) Information for Authorized IRS e-	ne tax return for the ts of Pub. 3112, IRS	t enter all zeros
RO's signature ►		Date ▶ <u>10-15-2</u>	2020

 $\hbox{ERO Must Retain This Form - See Instructions} \\ \hbox{Do Not Submit This Form to the IRS Unless Requested To Do So}$

Federal Supporting Statements	2019 PG01
me(s) as shown on return	Tax ID Number
ltravision Corporation	65-0949567
Form 1120 - Line 26 - Other De	ductions Statement #
escription	Amount
orm 6765 Credit Adjustment ccounting cost	(126,931)
ank charges	32,300 435
ommissions	16,625
ducation and training	910
nsurance	8,832
egal and professional eals 50% limit	83,747
iscellaneous	2,078 7,136
ffice expense	10,094
ostage/Shipping	7,634
oftware upplies	287
elephone	10,832 4,127
ravel	11,212
tilities	4,147
esearch and Development	634,656
otal	708,121
	PG01
Schedule L - Line 6	Statement #8
escription Be	g Of Year End Of Yea
nvestment in Smart	126,720 126,72
otal =	<u> 126,720</u>

	Federal Supporting Stateme	ents	2019 PG01
Hame(s) as shown on return Jltravision Corporati	on		Tax ID Number 65-0949567
S	chedule L - Line 18		Statement #11
Description Paypal LOan		Beg Of Yea	ar End Of Yea 82,69
Line of Credit		20,0	
Customer Deposits		60,0	00 138,38
[otal		80,0	221,07
Expen DESCRIPTION	schedule M-1 Line 5C ses recorded on Books		PG01 Statement #1 AMOUNT
Form 6765 Credit Adju Book-to-Tax Amortizat			126,931 1,175,286
[otal			1,302,217
Cabadalla M	2 Line 2 Other Inco		PG01
Schedule M-	2 - Line 3 - Other Incr	eases	Statement #19
Description Sale of Common Stock			Amount 1,155,000
Total			1,155,000

	Federal Supporting Statements	2019 PG01
ame(s) as shown on return	Corporation	Tax ID Number 65-0949567
S	chedule M-2 - LINE 6 - Other decreases	Statement #20
escription		Amount
	crease in intangible assets	680,783
otal		<u>680,783</u>
	Form 6765 - Line 17/34 - Explanation	PG01 Statement #6
.		
	cation Of Deduction Line d Development Costs 26	Amount 634,656

	Taxes and Licenses Attach Note: This information does not transmit to the IRS w Including with a paper filed return is optic	ith e-filed returns.	2019
PORATION NAME			EIN
ltravision Corpo	ration		65-0949567
			Form 1120, line 17
es and Licenses			Form 1120-C, line 15
			Form 1120-H, line 12
0			
State income taxes		1	
State franchise taxes		2	
City income taxes		3	
City franchise taxes		4	
Real estate taxes		5	
Local property taxes		6	
Intangible property taxe	es	7	
Payroll taxes		8	45,69
Less: credit from Form	8846	9	
Foreign taxes paid		10	
Occupancy taxes		11	
Other miscellaneous ta	axes	12	7,18
Licenses		13	

Depreciation Detail Listing

FORM 1120

2019

PAGE 1

for Section 199A calculations.

See "UBIA" in lower right corner.

Name(s) as shown on return

* Item is included in UBIA

For your records only

Social security number/EIN

1	Jltravision Corporation	1			,								65	-0949567		
No.	Description	Date	Cost	Basis Adjustment	Business percentage	Section 179	Bonus depreciation	Depreciable Basis	Life	N	Method	Rate	Prior Depreciation	Current Depreciation	Accumulated Depreciation	AMT Current
1	HP 4100 Printer	02052002	1,396		100.00		PY 977	419	5			0	1,396		1,396	
2	Sony E-Solution Lapto	01092003	2,173		100.00		PY 1,521	652	5			0	2,173		2,173	
3	Office Equipment	01232013	2,825		100.00		PY 1,413	1,412	5			0	2,825		2,825	
4	Office Equipment	06282013	1,059		100.00		PY 530	529	5			0	1,059		1,059	
5	Office Equipment	08292013	6,857		100.00		PY 3,429	3,428	7	SL	HY	14.286	6,124	490	6,614	
6	Office Equipment	01292014	2,470		100.00		PY 1,235	1,235	5	SL	HY	20	2,347	123	2,470	
7	Office Equipment	02252014	2,631		100.00		PY 1,316	1,315	5	SL	HY	20	2,500	131	2,631	
8	Office Equipment	03312014	270		100.00		PY 135	135	5	SL	HY	20	257	13	270	
9	Office Equipment	09242014	1,200		100.00		PY 600	600	5	SL	HY	20	1,140	60	1,200	
10	Office Equipment	01262016	130		100.00		PY 65	65	5	SL	НУ	20	98	13	111	
	Totals		21,011					9,790					19,919	830	20,749	

21,011

830

Form 1120, Line 29a, NOL Deduction Form 1120-C, Schedule G, Line 9a, Column (a), Patronage NOL Deduction

(Keep for your records)

2019

Name(s) as shown on return

Tax ID Number

Ultravision Corporation

65-0949567

Year	Loss Carryover/ Carryback	Increase of NOL Due to Sec 170(d)(2)(B) Contribution Reduction*	Loss Applied to 2019	Unused Loss	Unused Sec 170(d)(2)(B)
1000				Expiring	Expiring
1999				this year	this year
2000					
2001					
2002					
2003					
2004					
2005					
2006					
2007					
2008					
2009					
				, , , , , , , , , , , , , , , , , , ,	
2010	222,876			222,876	
2011					
2012	259,322			259,322	
2013	589,902			589,902	
2014	805,942			805,942	
2014	003,942			003,342	
2015	1,680,718			1,680,718	
2016	795,107			795,107	
2017	933,651			933,651	
2018	679,922			679,922	
2010				Remaining 2019	
	Current year NOL		Applied to Prior Years	NOL carryover	
2019	729,099			729,099	
	Future years NOL		Applied to 2019		
ure Years					

^{*} A corporation having a net operating loss (NOL) carryover from any taxable year must apply the special rule of §170(d)(2)(B). The rules are designed to prevent a double tax benefit through interaction of NOL and charitable contribution carryovers. The excess charitable deduction can reduce taxable income only once. Under these rules, a corporation's charitable contributions carryover (but not the NOL carryover) must be reduced, to the extent the charitable contribution deduction, in computing the taxable income of an intervening year, would increase the NOL to a succeeding year.

Worksheet for Figuring General Business Credit Carryforward

Tax ID Number

(Keep for your records) 2019 Form 6765

Name(s) as shown on return 65-0949567 Ultravision Corporation

2 = 0	14VIBION COIPCIACION		0717307
Fo	orm 6765, Section D, line 43		
1.	Enter the sum of the following lines from Form 3800, Part I, line 6, and Part II, line 25 and line 36	1	126,931
2.	Enter the amount from Form 3800, Part II, line 38	2.	0
3.	Subtract line 2 from line 1	3.	126,931
4.	Enter the amount from Form 3800, Part I, line 5, and Part II, line 35	4.	
5.	Current year general business credit carryforward. Subtract line 4 from line 3. If zero or less, enter -0	5.	126,931



Carryover/Carryforward Worksheet

Form 1120 (Keep for your records) 2019

Name(s) as shown on return Tax ID Number 65-0949567 Ultravision Corporation To Next Year Form 1120 6,696,539 Schedule D (Form 1120) Unused capital loss carryover Reserved for future use Carryover expiring this year Form 2220 Form 3800 General business credit carryforward Form 4562 Form 4797 Nonrecaptured net section 1231 losses from WK_1231C Reserved for future use Reserved Reserved for future use Form 8827

Minimum tax credit carryforward

1120 TAX RETURN COMPARISON 2017 / 2018 / 2019

2019

Name(s) as shown on return
Ultravision Corporation

Identifying number 65-0949567

	2017 FEDERAL	2018 FEDERAL	2019 FEDERAL	DIFFERENCE BETWEEN 2018 & 2019
Net receipts	141,007	225,478	595,561	370,083
Cost of goods sold	35,576		172,394	172,394
Gross profit	105,431	225,478	423,167	197,689
Dividends	-	,	,	
Interest				
Gross rents				
Gross royalties				
Capital gain net income				
Net gain/loss from 4797				
Other income		22	_	(22)
Total income	105,431	225,500	423,167	197,667
Compensation of officers	200,000	33,333		(33,333)
Salaries and wages	165,000	405,992	259,721	(146,271)
Repairs and maintenance	676	1,536	426	(1,110)
Bad debts				
Rents	81,819	68,595	97,427	28,832
Taxes and licenses	25,087	394	52,876	52,482
Interest	328		11,321	11,321
Charitable contributions				
Depreciation	1,548	1,355	830	(525)
Depletion	1/310	1,333	030	(323)
Advertising				
Pension, profit-sharing				
Employee benefits	16,215	15 075	21 544	F 660
· · ·	10,215	15,875	21,544	5,669
Domestic production activities ded Other deductions	F40 400	270 242	700 101	220 770
	548,409	378,342	708,121	329,779
Total deductions	1,039,082	905,422	1,152,266	246,844
NOL deduction				
Special deductions				
Taxable income	(933,651)	(679,922)	(729,099)	(49,177)
Total tax				
Estimated taxes paid				
Total payments line 33				
Amount owed				
Overpayment				
Applied to estimate				
Refund				
RESIDENT STATE	FL	FL	FL	
Taxable				
Tax				
Overpayment				
Balance Due				
	2017	2018	2019	DIFFERENCE

DS01

FEIN 65-0949567

F-1120, R. 01/20 Rule 12C-1.051 Florida Administrative Code Effective 01/20 Page 1 of 6

For calendar year 2019 or tax year beginning

803402019123100020050373365094956700002

ULTRAVISION CORPORATION Name 11911 US HIGHWAY 1, STE 2 Address City/State/ZIP NORTH PALM BEACH, FL 33408

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



Com	putation of Florida Net Income Tax	
1.	Federal taxable income (see instructions)	
	Attach pages 1-5 of federal return Check here if negative X	729099.00
2.	State income taxes deducted in computing federal taxable income	
	(attach schedule)	0.00
3.	Additions to federal taxable income (from Schedule I) Check here if negative	0.00
4.	Total of Lines 1, 2 and 3	729099.00
5.	Subtractions from federal taxable income (from Schedule II) Check here if negative	770.00
6.	Adjusted federal income (Line 4 minus Line 5) Check here if negative X	729869.00
7.	Florida portion of adjusted federal income (see instructions) Check here if negative X	729869.00
8.	Nonbusiness income allocated to Florida (from Schedule R) Check here if negative	0.00
9.	Florida exemption	0.00
10.	Florida net income (Line 7 plus Line 8 minus Line 9)	0.00
11.	Tax due: 4.458% of Line 10	0.00
12.	Credits against the tax (from Schedule V)	0.00
13.	Total corporate income/franchise tax due (Line 11 minus Line 12)	0.00
14.	a) Penalty: F-2220 b) Other 0 . 0 0	
	c) Interest: F-2220 d) Other 0 . 0 0 Line 14 Total ▶	0.00
15.	Total of Lines 13 and 14	0.00
16.	Payment credits: Estimated tax payments 16a \$ 0.00	
	Tentative tax payment 16b \$ 0.00	0.00
17.	Total amount due: Subtract Line 16 from Line 15. If positive, enter amount due here and on payment coupon.	
	If the amount is negative (overpayment), enter on Line 18 and/or Line 19	0.00
18.	Credit: Enter amount of overpayment credited to next year's estimated tax here and on payment coupon	0.00

Payment Coupon for Florida Corporate Income Tax Return Do Not Detach

YEAR ENDING 12-31-19

DS01 F-1120 R. 01/20

0.00

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

Name ULTRAVISION CORPORATION

11911 US HIGHWAY 1, STE 204 **Address** City/State/ZIPSTE 204

NORTH PALM BEACH, FL 33408

Refund: Enter amount of overpayment to be **refunded** here and on payment coupon

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.

650949567	0	0	0
20190101	77000	0	0
20191231	-72986900	0	0
10000000	0.00000	0	0
001	0	0	0
200	0	0	0
-72909900	0	0	0
0	0	0	0

19.





65-0949567 FEIN

	This return is considered incomplete	e unless a copy of the federal return is attached.
If your return is not	t signed, or improperly signed and verified, it will be subject to a penalty. The	ne statute of limitations will not start until your return is properly signed and verified. Your
return must be com	mpleted in its entirety.	
	Under penalties of perjury, I declare that I have examined this return	urn, 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)	er) is based on all information of which preparer has any knowledge.
Sign here	Signature of officer (must be an original signature)	Date 07/02/2020 Title PRESIDENT
Paid preparers	Preparer's signature D	Preparer check if self-employed Preparer's PTIN P01039037
only	it self-employed)	SSOCIATES CPAS FEIN 27-1319467
	and address 4044 PGA BOULEVA	YARD PALM BEAC ZIP ► 33410
	All Taxpavers Must Answer Ques	estions A Through M Below - See Instructions
	· ·	
A. State of inco	·	G-2. Part of a federal consolidated return? YES NO X If yes, provide:
	retary of State document number:	FEIN from federal consolidated return:
	solidated return? YES NO X	Name of corporation:
D. Initial re		G-3. The federal common parent has sales, property, or payroll in Florida? YES NO
E. Principal Bus	usiness Activity Code (as pertains to Florida)	H. Location of corporate books: 11911 US HIGHWAY 1 City: NORTH PALM BEAC State: FL ZIP: 33408
3 3	Ω 1 1 Λ	
		I. Taxpayer is a member of a Florida partnership or joint venture? YES NO NO Second Taxpayer is a member of a Florida partnership or joint venture?
F. A FIORIDA EXI	tension of time was timely filed?	a) List years examined:
G-1. Corporation	is a member of a controlled group? YES NO X If yes, atta	
·	, , , , , , , , , , , , , , , , , , ,	a) Contact person telephone number: (561)626-4405
		b) Contact person e-mail address: GSCOTT@WINPROBE.COM
		L. Type of federal return filed
New - On!	line Information Reporting Requirer	
information, due	tment website to obtain a list of the required e date, penalty rate and application to enter the	Remember:
`	See section 220.27, Florida Statutes)	Make your check payable to the Florida Department of Revenue.
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

- 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.



	FEIN	65-094956	
		DATA Page 1	of 2
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NAME ULTRAVISION CORPORATION

FEIN 65-0949567

TAXABLE YEAR ENDING 12-31-19

Sc	chedule I - Additions and/or Adjustments to Federal Taxable Income	TAXABLE TEAR EN
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 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 Credits	12.
13.	Florida Renewable energy production tax credit	13.
14.	New markets tax credit	14.
15.	Entertainment industry tax credit	15.
16.	Research and Development tax credit	16.
17.	Energy Economic Zone tax credit	17.
18.	s.168(k) IRC special bonus depreciation	18.
19.	Other additions (attach schedule)	19.
20.	Total Lines 1 through 19. Enter total on Line 20 and on Page 1, Line 3.	20.

Schedule II - Subtractions from Federal Taxable Income						
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 \$	1.					
(d) less direct and indirect expenses and related amounts deducted under s. 250, IRC Total ►						
2. Gross subpart F income less attributable expenses						
(a) Enter s. 951, IRC subpart F income	2.					
(b) less direct and indirect expenses \$ Total ▶						
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) SEE FL_NOL	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.179, IRC expense (see instructions)	9.					
10. s.168(k), IRC special bonus depreciation (see instructions) SEE FL DEPR	10.	770				
11. Other subtractions (attach statement)	11.					
12. Total Lines 1 through 11. Enter total on Line 12 and on Page 1, Line 5.	12.	770				



NAME ULTRAVISION CORPORATION

FEIN 65-0949567

TAXABLE YEAR ENDING 12-31-19

Schedule III - Apporti	onment of Adjust	ed Federal Inco	me					
III-A For use by taxpayers doing bus	siness outside Florida, except	t those providing insuranc	e or tran	sportation services.				
	(a) WITHIN FLORIDA (Numerator)	(b) TOTAL EVERYWHERE (Denominator)	1	(c) sol. (a) ÷ Col. (b) led to Six Decimal Places		(d) Weight ny factor in Column (b) is ze te on Page 9 of the instruc		(e) Weighted Factors Rounded to Six Decimal Places
1. Property (Schedule III-B below)	0	0				X 25% or	_	
2. Payroll	0	0				X 25% or	_	
3. Sales (Schedule III-C below)	0	0				X 50% or	_	
4. Apportionment fraction (Sum of Lines	s 1, 2, and 3, Column [e]). Ente	r here and on Schedule IV, L	Line 2.					
III-B For use in computing average va	alue of property (use original	WITI	HIN FL	ORIDA		T	OTAL E	VERYWHERE
cost).		a. Beginning of year	r	b. End of yea	ır	c. Beginning of year		d. End of year
1. Inventories of raw material, work in p	process, finished goods	0	.00		0.00	0	.00	0.00
2. Buildings and other depreciable asse	ets	0	.00		0.00	0	.00	0.00
3. Land owned		0	.00		0.00	0	.00	0.00
Other tangible and intangible (financi schedule)	ial org. only) assets (attach	0	.00		0.00	0	.00	0.00
5. Total (Lines 1 through 4)		0	.00		0.00	0	.00	0.00
 a. Add Line 5, Columns (a) and (b) b. Add Line 5, Columns (c) and (d) 7. Rented property (8 times net annual a. Rented property in Florida b. Rented property Everywhere 8. Total (Lines 6 and 7). Enter on Line a. Enter Lines 6 a. plus 7 a. and als Column (a) for total average prop b. Enter Lines 6 b. plus 7 b. and als Column (b) for total average prop 	and divide by 2 (for total everyorent) 1, Schedule III-A, Columns (a) so enter on Schedule III-A, Line perty in Florida so enter on Schedule III-A, Line so enter on Schedule III-A, Line	where) 7a			0.	00 7b.		0.00 0.00
III-C Sales Factor		-			TOTAL	WITHIN FLORIDA (Numerator)	то	TAL EVERYWHERE (Denominator)
Sales (gross receipts) Sales delivered or shipped	d to Florida purchasara		-	-		IN/A		N/A
Sales delivered or snipped The sales deliv		when applicable)						IN/A
Other gross receipts (rent TOTAL SALES (Enter on						0.00		0.00
III-D Special Apportionment Fra			(a) WIT	HIN FLORIDA	(b) TO		(c) FLC	DRIDA Fraction ([a] ÷ [b]) nded to Six Decimal Places
 Insurance companies (attage) Transportation services 	ach copy of Schedule T-	Annual Report)						

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



NAMEULTRAVISION CORPORATION	FEIN	65-0949567	TAXABLE YEAR EN	DING 12-31-19				
Schedule V - Credits Against the Corporate Income/Franchise Tax								
1. Florida health maintenance organization credit (attach assess	sment notice)			1.				
2. Capital investment tax credit (attach certification letter)				2.				
3. Enterprise zone jobs credit (from Florida Form F-1156Z attach	ned)			3.				
4. Community contribution tax credit (attach certification letter)				4.				
5. Enterprise zone property tax credit (from Florida Form F-1158	3Z 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 (attach tax credit ce	rtificate)			10.				
11. State housing tax credit (attach certification letter)				11.				
12. Florida Tax Credit: Scholarship Program Credits. (attach certi	ificate)			12.				
13. Florida renewable energy production tax credit				13.				
14. New markets tax credit				14.				
15. Entertainment industry tax credit				15.				
16. Research and Development tax credit				16.				
17. Energy Economic Zone tax credit				17.				
18. Other credits (attach schedule)				18.				
19. Total credits against the tax (sum of Lines 1 through 18 not to Enter total credits on Page 1, Line 12	exceed the an	nount on Page 1, Line 1).	19.				

Sche	dule R - Nonbusiness Income		
Line 1.	Nonbusiness income (loss) allocated to FI	orida	<u>Amount</u>
	Total allocated to Florida (Enter here and on Page 1, Line 8		1
Line 2.	Nonbusiness income (loss) allocated else	where State/country allocated to	Amount
Line 3.	Total nonbusiness income		



NAME ULTRAVISION CORPORATION

FEIN 65-0949567

TAXABLE YEAR ENDING12-31-19

Estimated Tax Worksheet For Taxable Years Beginning On or After January 1, 2020

1.	Florida income expected in taxable year		1.	\$
2.	Florida exemption \$50,000 (Members of			
			2.	\$
3.		s Line 2)		
4.	Total Estimated Florida tax (4.458% of L			
	Less: Credits against the tax			\$
5.	Computation of installments:			
٥.	Payment due dates and	If 6/30 year end, last day of 4th month,		
	payment amounts:	otherwise last day of 5th month - Enter 0.25 of Line 4	52	
	payment amounts.	Last day of 6th month - Enter 0.25 of Line 4		
		Last day of 9th month - Enter 0.25 of Line 4	50.	
		Last day of fiscal year - Enter 0.25 of Line 4		
		Last day of fiscal year - Effet 0.25 of Life 4	ou.	
_	NOTE: If your estimated toy should shange	during the year, you may use the amended computation		
	,	to be entered on the declaration (Florida Form F-1120ES).		
_	below to determine the amended amounts	to be entered on the declaration (Florida Form F-1/20ES).		
1	Amonded estimated tax		¢	
	Less:		Ψ_	
	(a) Amount of overpayment from last year	placted for cradit		
	. ,	2a \$		
		aration (Florida Form F-1120ES) 2b \$	æ	
		3.	_	
4.	Amount to be paid (Line 3 divided by numb	er of remaining installments)	Φ_	

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-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.

	OTHER SUBTRACTIONS FROM INCOME - FL NOLCD					
	(a)	(b)	(c)	(d)	(e)	(f)
Tax Year	Adjusted Federal Income/Loss	FL Apport. Fraction	FL Apportioned NOLCO	NOLCO Applied	FL Net Income or Loss	NOL Carry Forward to Next Year
i cai	micome/Loss	Traction	NOEGO		Oi E033	to Next Tear
1999						
2000						
2000						
2001						
2002						
2003						
2004						
0005						
2005						
2006						
2007						
			,			
2008						
2009	(172,480)	1.000000	(172,480)		(172,480)	(172,480)
0040	(20, 220)	1 00000	(20, 220)		(20. 220)	(201 010)
2010	(29,338)	1.000000	(29,338)		(29,338)	(201,818)
2011	5,952	1.000000	5,952	(5,952)		(195,866)
2012	(259 322)	1.000000	(259,322)		(259,322)	(455,188)
2013	(585,297)	1.000000	(585,297)		(585,297)	(1,040,485)
2014	(806,709)	1.000000	(806,709)		(806,709)	(1,847,194)
2245			(1 (01 405)		(1 601 405)	(2 520 670)
2015	(1,681,485)	1.000000	(1,681,485)		(1,681,485)	(3,528,679)
2016	(795,874)	1.000000	(795,874)		(795,874)	(4,324,553)
2017	(934,418)	1.000000	(934,418)		(934,418)	(5,258,971)
2018	(680,689)	1.000000	(680,689)		(680,689)	(5,939,660)
2019	(729,869)	1.000000	(729,869)		(729,869)	(6,669,529)

FEIN

TAXABLE YEAR ENDING

65-0949567

12-31-2019		12	-31	-2	01	9
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	FL Su	btractions for Bonus	Depreciation	
Tax Year	FL Bonus Depreciation Addback (Schedule I, Line 19)	Amount used in prior years	Subtraction Applied in the current tax year (Schedule II, line 10)	Amount Remaining
2013	5,372	4,602	770	
2014				
2015				
2016				
2017				
2018				
2019				
	FL Sub	otractions for Bonus	Depreciation (AMT)	
Tax Year	FL Bonus Depreciation Addback (Schedule I, line 15)	Amount used in prior years	Subtraction Applied in the current tax year (Schedule II, line 10)	Amount Remaining
2013				
2014				
2015				
2016				
2017				
2018				

2019

2019 FL1120 Filing Instructions Ultravision Corporation

Form filed:

FL1120 and supplemental forms and schedules

Filing method:

Your return will be e-filed, do not mail your return

Due date:

08-03-2020

The return reflects neither a refund nor a balance due