

# TKCB

5600 U.S. Highway 1 North  
Cocoa, FL 32927

Telephone: 321-639-1124  
Facsimile: 321-639-1134

claim of confidentiality  
 notice of intent  
 request for confidentiality  
 filed by OPC

For DN 04687-13 which  
is in locked storage. You must be  
authorized to view this DN.-CLK

July 12, 2012

COMMISSION  
CLERK

12 JUL 16 AM 10:36

RECEIVED FPSC

Florida Public Service Commission  
2540 Shumard Oak Boulevard  
Tallahassee, Florida 32399-0850

REDACTED

Re: TKCB, Inc.  
Application for Staff Assisted Rate Case  
Docket No. 120078-SU – Audit Control No 12-128-02-1

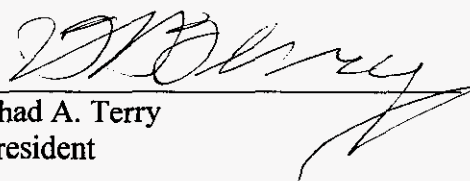
Dear Mr. McRoy,

Please find in this packet a letter of Request for confidential classification, and the documentation referenced with the appropriate highlights.

We are at this time waiting on two pieces of information we wish to be included for consideration in the funding determination.

1. A bid from Bouchard Insurance for insurance coverage on the utility.
2. We received a letter from Florida Department of Environmental Protection recommending that a communitor be installed at the surge tank to control paper products that affect the treatment plant and are in the process of attaining the cost of this item.

COM \_\_\_\_\_  
 AFD \_\_\_\_\_  
 APA \_\_\_\_\_  
 ECO \_\_\_\_\_  
 ENG \_\_\_\_\_  
 GCL \_\_\_\_\_  
 IDM \_\_\_\_\_  
 TEL \_\_\_\_\_  
 CLK T-MM

  
 \_\_\_\_\_  
 Thad A. Terry  
 President

DOCUMENT NUMBER-DATE  
 04686 JUL 16 2012  
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# TKCB

5600 U.S. Highway 1 North

Cocoa, FL 32927

Telephone: 321-639-1124

Facsimile: 321-639-1134

## Request for Confidential Classification

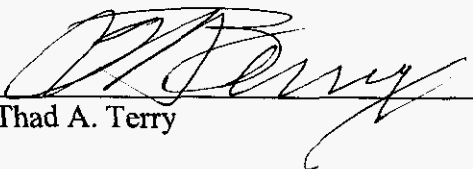
TKCB, Inc. (the "Utility") files this Request for Confidential Classification in relation to documents submitted in connection with the Utility's responses to Staff Audit in connection with Docket No. 120078-SU.

1. Under Section 367.156, Florida Statutes, this Commission has the authority to classify certain materials as proprietary confidential business information. This classification exempts the material from public disclosure under section 119.07(1), Florida Statutes.
2. The Utility requests that certain information provided to Staff auditors in connection with Docket No. 120078-SU be classified as proprietary confidential business information under Section 367.156(2), Florida Statutes, and Rule 25-22.06, Florida Administrative Code ( the "Confidential Information"). If this request is granted, then the subject portions of said response to Docket No. 120078-SU will be exempt from Section 119.07(1), Florida Statutes. Attached hereto as Exhibit "A" is a Justification Matrix providing a justification for the Utility's request. The information is enclosed herein both in highlighted and redacted format.
3. The information produced in response to Staff's Audit for contracts and Federal Tax Return information is intended to be and is treated by the utility as private and confidential and has not been disclosed externally and has been strictly controlled internally.

WHEREFORE, TKCB, Inc. prays for the entry of an order treating the information identified in this Motion as confidential and exempt from disclosure.

Respectfully submitted on this 12<sup>th</sup> day of July, 2012 by:

Thad A. Terry  
President

  
Thad A. Terry

SEARCHED  
SERIALIZED

DOCUMENT NUMBER-DATE

04686 JUL 16 2012

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Update:

This is the Bid

ON Insurance It  
Come in Today

Jan

# NEWMARKETS

## INSURANCE AGENCY

11575 Great Oaks Way, Suite 200  
Alpharetta, GA 30022  
GA License #882396

### Public/Educational Entity Pollution Liability Insurance Policy (claims-made coverage) Coverage Quotation

#### ACE ENVIRONMENTAL RISK

DATE: JUNE 25, 2012

TO: CAROL HILLS - BOUCHARD INSURANCE AGENCY.

#### QUOTATION #1

SURPLUS LINES INSURER: ILLINOIS UNION INSURANCE COMPANY

A.M. BEST RATING: A+ XV

NAMED INSURED: TKCB SEWER PLANT

ADDRESS: 5600 NORTH COCOA BOULEVARD, COCOA, FL 32927

HOME STATE: FLORIDA

*FOR POLICIES EFFECTIVE JULY 21, 2011 AND SUBSEQUENT, WE REQUIRE THE PRODUCER TO PROVIDE THE "HOME STATE" AS DEFINED IN THE NONADMITTED AND REINSURANCE REFORM ACT (NRRA) UPON THE BINDING OF THIS PLACEMENT. WE WILL ASSUME THE "HOME STATE" IS THE STATE IN THE NAMED INSURED'S ADDRESS SHOWN ABOVE UNLESS WE ARE INSTRUCTED OTHERWISE BY THE PRODUCER.*

INCEPTION DATE: JULY 1, 2012

EXPIRATION DATE: PER TERM OPTIONS BELOW

RETROACTIVE DATE: JULY 1, 2012 Coverage A (Covered Locations)  
JULY 1, 2012 Coverage B (Covered Operations)

#### LIMITS / SIR / TERM / PREMIUM:

LIMITS OF LIABILITY	SELF-INSURED RETENTION	TERM (YEARS)	PREMIUM*	PREMIUM WITH TRIA**
\$1,000,000 PER POLLUTION CONDITION \$1,000,000 AGGREGATE ALL POLLUTION CONDITIONS	\$10,000 PER POLLUTION CONDITION	1	\$7,938	\$8,335
\$1,000,000 PER POLLUTION CONDITION \$1,000,000 AGGREGATE ALL POLLUTION CONDITIONS	\$10,000 PER POLLUTION CONDITION	3	\$15,082	\$15,836

\* The premium in this quote includes commission in an amount equal to 10.0% of such premium.

COMMISSION: 10.0%

TRIA PREMIUM (Optional\*\*): 5% of quoted premium

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**\*THE OPTIONAL TERRORISM RISK INSURANCE ACT (TRIA) PREMIUM AS QUOTED ABOVE IS THE ADDITIONAL PREMIUM THAT WILL BE INCLUDED IN THE TOTAL PREMIUM FOR THIS POLICY IF TRIA COVERAGE IS ELECTED. THIS CHARGE IS FOR TRIA COVERAGE PER THE ATTACHED DISCLOSURE LETTER. WE MUST RECEIVE A SIGNED COPY OF THE ATTACHED DISCLOSURE LETTER INDICATING THAT TRIA COVERAGE HAS BEEN ACCEPTED OR DECLINED.**

<b>TERMS &amp; CONDITIONS</b>	
<b>Covered Locations:</b>	➤ <b>616 Emerald Lake, Cocoa, FL 32926</b>
<b>Policy Form:</b>	PF-29206a (08/10) Public/Educational Entity Pollution Liability Insurance Policy
<b>Additional Terms:</b>	<input checked="" type="checkbox"/> Coverage A (Covered Locations) Applies <input checked="" type="checkbox"/> Coverage B (Covered Operations) Applies  1. Premium is one-hundred percent (100%) Minimum-Earned as of inception of this Policy 2. PF-30559 (08/10): Basic Extended Reporting Period (90 Days) Endorsement 3. PF-29238 (04/10): Notice of Cancellation (90 Days) Endorsement 4. PF-27658 (06/09): Other Insurance (Primary) Endorsement
<b>TRIA Forms:</b>	<p><b>IF THE INSURED ELECTS TO PURCHASE TERRORISM COVERAGE PER THE ATTACHED DISCLOSURE LETTER FOR THE ADDITIONAL PREMIUM NOTED ABOVE, THE FOLLOWING ENDORSEMENTS WILL APPLY:</b></p> 1. PF-23728 (01/08) - Terrorism Risk Insurance Act Endorsement 2. TRIA11b (01/08) - Disclosure Pursuant To Terrorism Risk Insurance Act  <p><b>IF THE INSURED ELECTS TO DECLINE TERRORISM COVERAGE PER THE ATTACHED DISCLOSURE LETTER, THE FOLLOWING ENDORSEMENTS WILL APPLY:</b></p> 1. TRIA15c (01/08) - Policyholder Disclosure Notice of Terrorism Insurance Coverage
<b>Additional Exclusions:</b>	Per Policy Form

**ALL TERMS, CONDITIONS, AND PRICING ARE SUBJECT TO RECEIPT, REVIEW, AND APPROVAL OF THE FOLLOWING, PRIOR TO BINDING:**

1. Completed and signed ACE Environmental Application.
2. Completed and signed copy of the attached TRIA disclosure form.
3. The Named Insured's "Home State" as defined in the Nonadmitted and Reinsurance Reform Act (NRRRA).
4. Satisfactory review of the last 2 years audited financial statements.
5. Satisfactory ACE Engineering review.
6. Satisfactory review of the last 3 to 5 years of currently valued GL and property loss runs.

<b>Surplus Lines Information</b>	<p><b>Surplus Lines Insurer: <u>ILLINOIS UNION INSURANCE COMPANY</u></b>  Coverage will be provided on a surplus lines basis. Collection and filing of all taxes and fees is the responsibility of the producing surplus lines broker, as is inclusion of state-mandated surplus lines disclaimer language on or in the policy. Please forward a copy of your surplus lines license for our records.</p> <p>Please advise your client that NewMarkets Insurance Agency is offering this quote as representative of its affiliated surplus lines insurance company, Illinois Union Insurance Company. NewMarkets is not acting on behalf of your client and does not seek placements in other surplus lines markets.</p>
<b>Forms</b>	<p><b>Policy Form: <u>PF-29206a (08/10) Public/Educational Entity Pollution Liability Insurance Policy</u></b>  This quotation contemplates the use of ACE USA forms, issued on the paper indicated above in this document. All terms and conditions are per those forms and endorsements unless otherwise noted herein.</p>
<b>OFAC</b>	<p><b>OFAC NOTICE: The Office of Foreign Assets Control (OFAC) administers and enforces sanctions policy, based on Presidential declarations of "national emergency." OFAC has identified and listed numerous Foreign agents, Front organizations, Terrorists, Terrorist organizations, and Narcotics traffickers as "Specially Designated Nationals and Blocked Persons." This list can be located on the United States Treasury's web site – <a href="http://www.treas.gov/ofac">http://www.treas.gov/ofac</a>. In accordance with OFAC regulations, if it is determined that you or any other proposed named insured has violated U.S. sanctions law or is a Specially Designated National or Blocked Person, as identified by OFAC, we reserve the right to withdraw this quote at any time prior to binding.</b></p>
<b>TRIA</b>	<p><b>TRIA NOTICE: Presently, the Terrorism Risk Insurance Act ("TRIA") expires on 12/31/14. The premium quoted above includes a separate premium charge for terrorism coverage over the entire Policy Period. In the unlikely event that you elect to receive TRIA coverage and it is not renewed before 12/31/14, or TRIA otherwise expires at some point during the Policy Period, we will refund the unearned portion of our TRIA premium to you on a pro-rata basis. In the event that new legislation is enacted requiring the Insurer to offer coverage for terrorism that is materially different than the coverage requirements included in the current version of TRIA that expires on 12/31/14, the ACE Group of Companies reserve the right to re-price and tailor TRIA coverage to conform with the statutory requirements and risks presented in the new legislation.</b></p>
<b>Disclaimer</b>	<p>Please read this quotation carefully, as the limits, coverage and other terms and conditions may vary significantly from those requested in your submission and/or from the expiring policy. Terms and conditions that are not specifically mentioned in this quotation are not included. The terms and conditions of this quotation supersede the submitted insurance specifications and all prior proposals and binders. Actual coverage will be provided by and in accordance with the policy as issued.</p> <p>The insurer is not bound by any statements made in the submission purporting to bind the insurer unless such statement is reflected in the policy or in an agreement signed by someone authorized to bind the insurer.</p> <p>This quotation has been constructed on reliance of the data provided in the submission. A material change or misrepresentation of that data voids this quotation.</p>
<b>Premium Payment</b>	<p><b>IN THE EVENT COVERAGE IS BOUND, THE PREMIUM INDICATED ABOVE MUST BE REMITTED TO US THIRTY (30) DAYS FROM THE EFFECTIVE MONTH OF THIS POLICY AS OUTLINED ON YOUR AGENCY'S MONTHLY STATEMENT BILL.</b></p>
<b>Quotation Expiration</b>	<p><b>THIS BINDABLE QUOTATION SHALL EXPIRE AT 5:00 pm E.S.T. on: JULY 1, 2012</b></p>

Thank you for the opportunity to quote on this risk. For underwriting questions or concerns, please contact Hoa Nguyen at (321) 832-1655 (phone) or [hnguyen@publicrisk.com](mailto:hnguyen@publicrisk.com) (email).

*Hoa Nguyen, CPSR*  
Underwriting Assistant  
Public Risk Underwriters of Florida, Inc.®  
P.O. Box 958455  
Lake Mary, FL 32795-8455  
[hnguyen@publicrisk.com](mailto:hnguyen@publicrisk.com)  
Phone: 321-832-1655  
Fax: 321-832-1489

**POLICYHOLDER DISCLOSURE  
NOTICE OF TERRORISM  
INSURANCE COVERAGE**

You are notified that under the Terrorism Risk Insurance Act, as amended, that you have a right to purchase insurance coverage for losses resulting from acts of terrorism, *as defined in Section 102(1) of the Act*. The term "act of terrorism" means any act that is certified by the Secretary of the Treasury---in concurrence with the Secretary of State, and the Attorney General of the United States---to be an act of terrorism; to be a violent act or an act that is dangerous to human life, property, or infrastructure; to have resulted in damage within the United States, or outside the United States in the case of certain air carriers or vessels or the premises of a United States mission; and to have been committed by an individual or individuals as part of an effort to coerce the civilian population of the United States or to influence the policy or affect the conduct of the United States Government by coercion.

**YOU SHOULD KNOW THAT WHERE COVERAGE IS PROVIDED BY THIS POLICY FOR LOSSES RESULTING FROM CERTIFIED ACTS OF TERRORISM, SUCH LOSSES MAY BE PARTIALLY REIMBURSED BY THE UNITED STATES GOVERNMENT UNDER A FORMULA ESTABLISHED BY FEDERAL LAW. HOWEVER, YOUR POLICY MAY CONTAIN OTHER EXCLUSIONS WHICH MIGHT AFFECT YOUR COVERAGE, SUCH AS AN EXCLUSION FOR NUCLEAR EVENTS. UNDER THE FORMULA, THE UNITED STATES GOVERNMENT GENERALLY REIMBURSES 85% OF COVERED TERRORISM LOSSES EXCEEDING THE STATUTORILY ESTABLISHED DEDUCTIBLE PAID BY THE INSURANCE COMPANY PROVIDING THE COVERAGE. THE PREMIUM CHARGED FOR THIS COVERAGE IS PROVIDED BELOW AND DOES NOT INCLUDE ANY CHARGES FOR THE PORTION OF LOSS THAT MAY BE COVERED BY THE FEDERAL GOVERNMENT UNDER THE ACT.**

YOU SHOULD ALSO KNOW THAT THE TERRORISM RISK INSURANCE ACT, AS AMENDED, CONTAINS A \$100 BILLION CAP THAT LIMITS U.S. GOVERNMENT REIMBURSEMENT AS WELL AS INSURERS' LIABILITY FOR LOSSES RESULTING FROM CERTIFIED ACTS OF TERRORISM WHEN THE AMOUNT OF SUCH LOSSES IN ANY ONE CALENDAR YEAR EXCEEDS \$100 BILLION. IF THE AGGREGATE INSURED LOSSES FOR ALL INSURERS EXCEED \$100 BILLION, YOUR COVERAGE MAY BE REDUCED.

**Acceptance or Rejection of Terrorism Insurance Coverage**

	I hereby elect to purchase terrorism coverage for a prospective premium of \$_____
	I hereby decline to purchase terrorism coverage for certified acts of terrorism. I understand that I will have no coverage for losses resulting from certified acts of terrorism.

\_\_\_\_\_  
Policyholder/Applicant's Signature

\_\_\_\_\_  
Insurance Company

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Policy Number

\_\_\_\_\_  
Date

6/12/12

**REDACTED**

# AEROBIC BIOMASS CLARIFYING

## AGREEMENT

This agreement is between TKCB and Jerry Padrick to operate the wastewater facility at Sun Lake Estates.

I, Jerry Padrick, agree to operate the wastewater facility and effect repairs to the lift station and anything that is within my knowledge of the trade for TKCB for the next 2 years at [REDACTED] dollars per month, paid at the end of each month. Also any lift station work or repairs will be at an additional charge of [REDACTED] dollars per hour upon arrival at the job site.

I will also pull lab samples and take to the lab at least once a month, but the lab will pick up the other sample bimonthly at a [REDACTED] dollar charge. I am on call 24/7.

All sludge removal charges will be paid by the owner at the hauler's current set price.

All DMRs and monitoring well reports are included in the [REDACTED] dollar per month charge. Any additional reporting for PSC etc. at an additional charge.

This agreement is in effect from 02/01/2012 until 02/01/2014.

Jerry Padrick, operator

**CONFIDENTIAL**



Source: \_\_\_\_\_

DOCUMENT NUMBER-DATE

04686 JUL 16 2012

FPSC-COMMISSION CLERK

11-1



TKCB, INC.  
5600 N US HIGHWAY 1  
Cocoa, FL 32927  
[Barcode]

**CONFIDENTIAL**

10/1/2011

DAVIES, HOUSER & SECREST, CPA, P.A.  
P.O. BOX 129  
COCOA, FL 32923-0129  
321-636-0426

July 23, 2011

CONFIDENTIAL

TKCB, INC.  
5600 N US HIGHWAY 1  
Cocoa, FL 32927

Dear Thad:

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

U.S. Income Tax Return for an S Corporation (Form 1120S)

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,

DAVIES, HOUSER & SECREST, CPA, P.A.

Source: PBC

6/1/11

Staff-Assisted Rate Case  
 Docket No. 120078-SU - APA# 12-128-02-1  
 12-Month Period Ending April 30, 2012

6/12/11

**Filing Instructions**

**TKCB, INC.**

**Form 8879-S**

**U.S. S Corporation Income Tax Declaration for an IRS e-file Return  
 with Electronic Filing Personal Identification Number**

**Taxable Year Ended December 31, 2010**

**Date Due:** September 15, 2011

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

**Signature:** You are using the Personal Identification Number (PIN) for signing your return electronically. The IRS e-file Signature Authorization form should be signed and dated by an authorized officer of the corporation and returned to DAVIES, HOUSER & SECREST, CPA, P.A.

**Other:** Initial and date the copies of the IRS e-file Signature Authorization and Form 1120S, and retain them for your records.

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

2011-11

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Form **8879-S** IRS e-file Signature Authorization for Form 1120S

Department of the Treasury Internal Revenue Service For calendar year 2010, or tax year beginning \_\_\_\_\_, ending \_\_\_\_\_ See Instructions. Do not send to the IRS. Keep for your records.

OMB No. 1545-1983 **2010**

Name of corporation **TKCB, INC.** Employer identification number **59-2389300**

**Part I Tax Return Information (Whole dollars only)**

1	Gross receipts or sales less returns and allowances (Form 1120S, line 1c)	1	
2	Gross profit (Form 1120S, line 3)	2	
3	Ordinary business income (loss) (Form 1120S, line 21)	3	-144
4	Net rental real estate income (loss) (Form 1120S, Schedule K, line 2)	4	
5	Income (loss) reconciliation (Form 1120S, Schedule K, line 15)	5	-130

**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 2010 electronic income tax return and accompanying schedules and statements and to the best of my knowledge and belief, it is 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 **DAVIES, HOUSER & SECREST, CPA, P.A.** to enter my PIN **96251** as my signature on the corporation's 2010 electronically filed income tax return. ERO firm name do not enter all zeros

As an officer of the corporation, I am providing my signature on the corporation's 2010 electronically filed income tax return.

Officer's signature **THAD TERRY** Date **07/23/11** Title **PRESIDENT**

**Part III Certification and Authentication**

ERO's EFIN/PIN. Enter your six-digit ERIN followed by your five-digit self-selected PIN. **59807904260** do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2010 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. 4143, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature **EDWARD R. CHRISTENSEN CPA** Date **07/23/11**

**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-S (2010)

CONFIDENTIAL

Client Copy

Source: PBC

6/12/09

12/18/09

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9825 07/29/2011 1:58 PM

Form **1120S** U.S. Income Tax Return for an S Corporation  
 OMB No. 1545-0030  
**2010**

Form 1120S (2010) **TKCB, INC.** 59-2389300 Page 2  
 Schedule A: **Cost of Goods Sold** (see instructions)

For calendar year 2010 or tax year beginning ending

A S election effective date **01/01/84**

B Business activity code number (see instructions) **531390**

C Check if Sec. 1361 attached

Name **TKCB, INC.**

Employer identification number **59-2389300**

Date incorporated **12/15/1983**

Number, street, and room or suite no. if a P.O. box, see instructions. **5600 N US HIGHWAY 1**

City or town, state, and ZIP code **Cocoa FL 32927**

1	Inventory at beginning of year	1	
2	Purchases	2	
3	Cost of labor	3	
4	Additional section 263A costs (attach statement)	4	
5	Other costs (attach statement)	5	
6	Total. Add lines 1 through 5	6	
7	Inventory at end of year	7	
8	Cost of goods sold. Subtract line 7 from line 6. Enter here and on page 1, line 2	8	0

9a Check all methods used for valuing closing inventory: (i)  Cost as described in Regulations section 1.471-3 (ii)  Lower of cost or market as described in Regulations section 1.471-4 (iii)  Other (Specify method used and attach explanation.)

b Check if there was a writedown of subnormal goods as described in Regulations section 1.471-2(c)

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 percentage (or amounts) of closing inventory computed under LIFO

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

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

D Is the corporation electing to be an S corporation beginning with this tax year?  Yes  No

H Check if: (1)  Final return (2)  Name change (3)  Address change (4)  Amended return (5)  S election termination or revocation

I Enter the number of shareholders who were shareholders during any part of the tax year **2**

Schedule B: Other Information (see instructions)

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

2 See the instructions and enter: a Business activity **DEVELOPMENT** b Product or service **REAL ESTATE**

3 At the end of the tax year, did the corporation own, directly or indirectly, 50% or more of the voting stock of a domestic corporation? (For rules of attribution, see section 267(c).) If "Yes," attach a statement showing: (a) name and employer identification number (EIN), (b) percentage owned, and (c) if 100% owned, was a qualified subchapter S subsidiary election made?  Yes  No

4 Has this corporation filed, or is it required to file, Form 8818, Material Advisor Disclosure Statement, to provide information on any reportable transaction?  Yes  No

5 Check this box if the corporation issued publicly offered securities with original issue discount. If checked, the corporation may have to file an information return to publicly offered securities discount instruments.

6 If the corporation: (a) was a C corporation before it elected to be an S corporation or the corporation acquired an asset with a basis determined by reference to the basis of the asset (or the basis of any other property) in the hands of a C corporation and (b) has net unrealized built-in gain in excess of the net recognized built-in gain from prior years, enter the net unrealized built-in gain reduced by net recognized built-in gain from prior years (see instructions)

7 Enter the accumulated earnings and profits of the corporation at the end of the tax year: \$

8 Are the corporation's total receipts (see instructions) for the tax year and its total assets at the end of the tax year less than \$250,000? If "Yes," the corporation is not required to complete Schedules L and M-1.  Yes  No

9 During the tax year, was a qualified subchapter S subsidiary election terminated or revoked? If "Yes," see instructions.  Yes  No

Caution. Include only trade or business income and expenses on lines 1a through 21. See the instructions for more information.

1a	Gross receipts or sales	1a	
2	Cost of goods sold (Schedule A, line 8)	2	
3	Gross profit. Subtract line 2 from line 1c	3	
4	Net gain (loss) from Form 4797, Part II, line 17 (attach Form 4797)	4	
5	Other income (loss) (see instructions - attach statement)	5	
6	Total income (loss). Add lines 3 through 5	6	

7	Compensation of officers	7	
8	Salaries and wages (less employment credits)	8	
9	Repairs and maintenance	9	
10	Bad debts	10	
11	Rents	11	
12	Taxes and licenses	12	
13	Interest	13	
14	Depreciation not claimed on Schedule A or other property (attach Form 4562)	14	
15	Depletion (Do not deduct oil and gas depletion)	15	
16	Advertising	16	
17	Pension, profit-sharing, etc., plans	17	
18	Employee benefit programs	18	
19	Other deductions (attach statement)	19	See Stmt 1
20	Total deductions. Add lines 7 through 19	20	
21	Ordinary business income (loss). Subtract line 20 from line 6	21	

22a	Excess net passive income or LIFO recapture tax (see instructions)	22a	
b	Tax from Schedule D (Form 1120S)	22b	
c	Add lines 22a and 22b (see instructions for additional taxes)	22c	
23a	2010 estimated tax payments and 2009 overpayment credited to 2010	23a	
b	Tax deposited with Form 7064	23b	
c	Credit for federal tax paid on fuels (attach Form 4136)	23c	
d	Add lines 23a through 23c	23d	
24	Estimated tax penalty (see instructions). Check if Form 2220 is attached	24	
25	Amount owed. If line 23d is smaller than the total of lines 22c and 24, enter amount owed	25	
26	Overpayment. If line 23d is larger than the total of lines 22c and 24, enter amount overpaid	26	
27	Enter amount from line 26. Credited to 2011 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/>	27	

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

Signature of officer: **THAD TERRY** Title: **PRESIDENT**

Signature of preparer: **EDWARD R. CHRISTENSEN CPA** Date: **07/23/11** Check  if self-employed PTD: **P00039868**

Firm's name: **DAVIES, HOUSER & SECREST, CPA, P.A.** Firm's EIN:

Firm's address: **P.O. BOX 129 COCOA, FL 32923-0129** Phone no.: **321-636-0426**

Schedule K: Shareholders' Pro Rata Share Items

1	Ordinary business income (loss) (page 1, line 21)	1	
2	Net rental real estate income (loss) (attach Form 8825)	2	
3a	Other gross rental income (loss)	3a	
b	Expenses from other rental activities (attach statement)	3b	
c	Other net rental income (loss). Subtract line 3b from line 3a	3c	
4	Interest income	4	
5	Dividends: a Ordinary dividends b Qualified dividends	5a	
6	Royalties	6	
7	Net short-term capital gain (loss) (attach Schedule D (Form 1120S))	7	
8a	Net long-term capital gain (loss) (attach Schedule D (Form 1120S))	8a	
b	Collectibles (28%) gain (loss)	8b	
c	Unrecaptured section 1250 gain (attach statement)	8c	
9	Net section 1231 gain (loss) (attach Form 4797)	9	
10	Other income (loss) (see instructions) Type <input type="checkbox"/>	10	

For Paperwork Reduction Act Notice, see separate instructions. Form 1120S (2010)

Form 1120S (2010)

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Staff-Assisted Rate Case Docket No. 120078-SU - APA# 12-128-02-1 12-Month Period Ending April 30, 2012

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Form 1120S (2010) TKCB, INC. 59-2389300 Page 3

Shareholders' Pro Rata Share Items (continued)

	Total amount
<b>Deductions</b>	
11 Section 179 deduction (attach Form 4562)	11
12a Contributions	12a
b Investment interest expense	12b
c Section 59(e)(2) expenditures (1) Type ▶ (2) Amount ▶	12c(2)
d Other deductions (see instructions) Type ▶	12d
<b>Credits</b>	
13a Low-income housing credit (section 420(k)(5))	13a
b Low-income housing credit (other)	13b
c Qualified rehabilitation expenditures (rental real estate) (attach Form 3468)	13c
d Other rental real estate credits (see instructions) Type ▶	13d
e Other rental credits (see instructions) Type ▶	13e
f Alcohol and cellulose biofuel fuels credit (attach Form 6476)	13f
g Other credits (see instructions) Type ▶	13g
<b>Foreign Transactions</b>	
14a Name of country or U.S. possession ▶	
b Gross income from all sources	14b
c Gross income sourced at shareholder level Foreign gross income sourced at corporate level	14c
d Passive category	14d
e General category	14e
f Other (attach statement)	14f
g Deductions allocated and apportioned at shareholder level	
h Interest expense	14g
i Other	14h
j Deductions allocated and apportioned at corporate level to foreign source income	
k Passive category	14i
l General category	14j
m Other (attach statement)	14k
n Other information	
o Total foreign taxes (check one): <input type="checkbox"/> L <input type="checkbox"/> A <input type="checkbox"/> C <input type="checkbox"/> M	14l
p Reduction in taxes available for credit (see instructions)	14m
q Other foreign tax information (attach statement)	
<b>Alternative Tax (AMT) Items</b>	
15a Post-1986 depreciation adjustment	15a
b Adjusted gain or loss	15b
c Depletion (other than oil and gas)	15c
d Oil, gas, and geothermal properties - gross income	15d
e Oil, gas, and geothermal properties - deductions	15e
f Other AMT items (attach statement)	15f
<b>Items Affecting Shareholders' Basis</b>	
16a Tax-exempt interest income	16a
b Other tax-exempt income	16b
c Nondeductible expenses	16c
d Distributions (attach statement if required) (see instructions)	16d
e Repayment of loans from shareholders	16e
<b>Other Information</b>	
17a Investment income	17a
b Investment expenses	17b
c Dividend distributions paid from accumulated earnings and profits	17c
d Other items and amounts (attach statement)	See Statement 2
<b>Reconciliation</b>	
18 Income/loss reconciliation. Combine the amounts on lines 1 through 10 in the far right column. From the result, subtract the sum of the amounts on lines 11 through 12d and 14	18

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Form 1120S (2010) TKCB, INC. 59-2389300 Page 4

Schedule L Balance Sheets per Books

	Beginning of tax year	End of tax year
	(a)	(b)
<b>Assets</b>	(a)	(b)
1 Cash		
2a Trade notes and accounts receivable		
b Less allowance for bad debts		
3 Inventories		
4 U.S. government obligations		
5 Tax-exempt securities (see instructions)		
6 Other smart assets (attach statement)		
7 Loans to shareholders		
8 Mortgage and real estate loans		
9 One investments (attach statement)		
10a Buildings and other depreciable assets		
b Less accumulated depreciation		
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 statement)		
15 Total assets		
<b>Liabilities and Shareholders' Equity</b>		
16 Accounts payable		
17 Mortgages, notes, bonds payable in less than 1 year		
18 Other current liabilities (attach statement) Stmt. 3		
19 Loans from shareholders		
20 Mortgages, notes, bonds payable in 1 year or more		
21 Other liabilities (attach statement)		
22 Capital stock		
23 Additional paid-in capital		
24 Retained earnings		
25 Adjustments to shareholders' equity (attach statement)		
26 Less cost of treasury stock		
27 Total liabilities and shareholders' equity		
<b>Schedule M-1 Reconciliation of Income (Loss) per Books With Income (Loss) per Return</b>		
Note: Schedule M-3 required instead of Schedule M-1 if total assets are \$10 million or more - see instructions		
1 Net income (loss) per books		5 Income recorded on books this year not included on Schedule K, lines 1 through 10 (itemize):
2 Income included on Schedule K, lines 1, 2, 3c, 4, 5a, 6, 7, 8a, 9, and 10, not recorded on books this year (itemize)		a Tax-exempt interest \$
3 Expenses recorded on books this year not included on Schedule K, lines 1 through 12 and 14i (itemize):		6 Deductions included on Schedule K, lines 1 through 12 and 14i, not charged against book income this year (itemize):
a Depreciation \$		4 Depreciation \$
b Travel and entertainment \$		
4 Add lines 1 through 3		7 Add lines 5 and 6
5 Income (total) Schedule K, line 18, Line 4 less line 7		8 Income (total) Schedule K, line 18, Line 4 less line 7
<b>Schedule M-2 Analysis of Accumulated Adjustments Account, Other Adjustments Account, and Shareholders' Undistributed Taxable Income Previously Taxed (see instructions)</b>		
	(a) Accumulated adjustments account	(b) Other adjustments account
1 Balance at beginning of tax year		(c) Shareholders' undistributed taxable income previously taxed
2 Ordinary income from page 1, line 21		
3 Other additions Stmt. 4		
4 Loss from page 1, line 21		
5 Other reductions		
6 Combine lines 1 through 5		
7 Distributions other than dividend distributions		
8 Balance at end of tax year. Subtract line 7 from line 6		

Form 1120S (2010)

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Staff-Assisted Rate Case Docket No. 120078-SU - APA# 12-128-02-1 12-Month Period Ending April 30, 2012

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

2010

For calendar year 2010, or tax year beginning ending

Final K-1 Amended K-1 OMB No. 1545-0130

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

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

Part I Information About the Corporation

A Corporation's employer identification number 59-2389300 B Corporation's name, address, city, state, and ZIP code TKCB, INC. 5600 N US HIGHWAY 1 COCOA FL 32927

C IRS Center where corporation filed return e-file

Part II Information About the Shareholder

D Shareholder's identifying number E Shareholder's name, address, city, state, and ZIP code THAD A. TERRY P.O. BOX 456 SHARPES FL 32927

F Shareholder's percentage of stock ownership for tax year



For IRS Use Only

Table with 17 rows and 3 columns: Line number, Description, and Amount. Includes items like Ordinary business income, Net rental real estate income, Interest income, Ordinary dividends, Qualified dividends, Foreign transactions, Royalties, Net short-term capital gain, Net long-term capital gain, Collectibles (28%) gain, Unrecaptured section 1250 gain, Net section 1231 gain, Other income, Alternative minimum tax (AMT) items, Section 179 deduction, Items affecting shareholder basis, Other deductions, and Other information.

\* See attached statement for additional information.

For Paperwork Reduction Act Notice, see instructions for Form 1120S.

Schedule K-1 (Form 1120S) 2010

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

2010

For calendar year 2010, or tax year beginning ending

Final K-1 Amended K-1 OMB No. 1545-0130

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

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

Part I Information About the Corporation

A Corporation's employer identification number 59-2389300 B Corporation's name, address, city, state, and ZIP code TKCB, INC. 5600 N US HIGHWAY 1 COCOA FL 32927

C IRS Center where corporation filed return e-file

Part II Information About the Shareholder

D Shareholder's identifying number E Shareholder's name, address, city, state, and ZIP code THAD A. TERRY, JR. P. O. BOX 456 SHARPES FL 32927

F Shareholder's percentage of stock ownership for tax year



For IRS Use Only

Table with 17 rows and 3 columns: Line number, Description, and Amount. Includes items like Ordinary business income, Net rental real estate income, Interest income, Ordinary dividends, Qualified dividends, Foreign transactions, Royalties, Net short-term capital gain, Net long-term capital gain, Collectibles (28%) gain, Unrecaptured section 1250 gain, Net section 1231 gain, Other income, Alternative minimum tax (AMT) items, Section 179 deduction, Items affecting shareholder basis, Other deductions, and Other information.

\* See attached statement for additional information.

For Paperwork Reduction Act Notice, see instructions for Form 1120S.

Schedule K-1 (Form 1120S) 2010

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Staff-Assisted Rate Case Docket No. 120078-SU - APA# 12-128-02-1 12-Month Period Ending April 30, 2012

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

Description	Amount
Bank charges	\$ [REDACTED]
Total	\$ [REDACTED]

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Statement 2 - Form 1120S, Page 3, Schedule K, Line 17d - Other Items and Amounts

Description	Amount
Interest from U.S. Obligations	\$ [REDACTED]

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59-2389300  
FYE: 12/31/2010

Federal Statements

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Statement 3 - Form 1120S, Page 4, Schedule L, Line 18 - Other Current Liabilities

Description	Beginning of Year	End of Year
Advances - Terry via Canavera Due to Atlantis Investment	\$ [REDACTED]	\$ [REDACTED]
Total	\$ [REDACTED]	\$ [REDACTED]

Statement 4 - Form 1120S, Page 4, Schedule M-2, Line 3(a) - Other Additions

Description	Amount
Interest Income	\$ [REDACTED]
Total	\$ [REDACTED]

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Form 1120S Schedule K-1 Summary Worksheet 2010

Name: TKCB, INC. Shareholder Name: [REDACTED] SSN: [REDACTED]  
 Employer Identification Number: 59-2389300  
 Column A: THAD A. TERRY  
 Column B: THAD A. TERRY, JR.  
 Column C: [REDACTED]  
 Column D: [REDACTED]

Schedule K Items	Column A	Column B	Column C	Column D	Sch K Total
1 Ordinary income	[REDACTED]	[REDACTED]			[REDACTED]
2 Net rental RE inc					
3c Net other rental inc					
4 Interest income	[REDACTED]	[REDACTED]			[REDACTED]
5a Ordinary dividends					
5b Qualified dividends					
6 Royalties					
7 Net ST capital gain					
8a Net LT capital gain					
8b Collectibles 28% gain					
8c Unrecap Sec 1250					
9 Net Sec 1231 gain					
10 Other income (loss)					
11 Sec 179 deduction					
12a Contributions					
12b Invest interest exp					
12c Sec 59(e)(2) exp					
12d Other deductions					
13a,e Low-inc house 425					
13b,d Low-inc house other					
13a Qualif rehab exp					
13f Rental RE credits					
13g Other rental credits					
13h Fuel alcohol credit					
13i Other credits					
14b Gross inc al arc					
14d,f Total foreign inc					
14g,k Total foreign decd					
14i Total foreign taxes					
14m Reduct in taxes					
15a Depr adjustment					
15b Adjusted gain (loss)					
15c Depletion					
15d Inc-ol/gas/geoth					
15e Ded-ol/gas/geoth					
15f Other AMT items					
16a Tax-exempt interest					
16b Other tax-exempt					
16c Nonfed expense					
16d Total property dist					
16e Srv loan repmt					
17a Investment income	[REDACTED]	[REDACTED]			[REDACTED]
17b Investment expense	[REDACTED]	[REDACTED]			[REDACTED]
18 Income (loss)	[REDACTED]	[REDACTED]			[REDACTED]

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Form <b>1120S</b>	<b>Retained Earnings Reconciliation Worksheet</b>	<b>2010</b>
For calendar year 2010 or tax year beginning _____, ending _____		
Name <b>TKCB, INC.</b>	Employer Identification Number <b>59-2389300</b>	

**Schedule L - Retained Earnings**

Retained Earnings - Unappropriated \_\_\_\_\_  
 Accumulated Adjustments Account \_\_\_\_\_  
 Other Adjustments Account \_\_\_\_\_  
 Undistributed Previously Taxed Income \_\_\_\_\_  
 Schedule L, Line 24 - Retained Earnings \_\_\_\_\_

**Schedule M-2 - Retained Earnings**

	Accumulated Adjustments Account	Other Adjustments Account	Undistributed Previously Taxed Income	Retained Earnings Unappropriated Timing Differences	Total Retained Earnings
Beg Yr Bal	_____	0	0	0	_____
Ordinary Inc (Loss)	_____				_____
Other Additions					
Other Reductions					
Distributions					
End Yr Bal	_____			0	_____

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Form <b>1120S</b>	<b>Two Year Comparison Worksheet Page 1</b>	<b>2009 &amp; 2010</b>
Name <b>TKCB, INC.</b>		Employer Identification Number <b>59-2389300</b>

	2009	2010	Differences
<b>Income</b>			
Gross profit percentage			
Gross receipts less returns and allowances			
Cost of goods sold			
Gross profit			
Net gain (loss) from Form 4797			
Other income (loss)			
<b>Total income (loss)</b>			
<b>Deductions</b>			
Compensation of officers			
Salaries and wages less employment credits			
Repairs and maintenance			
Bad debts			
Rents			
Taxes and licenses			
Interest			
Depreciation			
Depletion			
Advertising			
Pension, profit-sharing, etc., plans			
Employee benefit programs			
Other deductions			
<b>Total deductions</b>			
<b>Ordinary business income (loss)</b>			
<b>Tax and Payments</b>			
Excess net passive income or LIFO recapture tax			
Tax from Schedule D			
<b>Total tax</b>	0	0	0
Estimated tax and prior year overpayment			
Tax deposited with Form 7004			
Credit for federal tax paid on fuels			
Refund applied for on Form 4466			
<b>Total payments and credits</b>			
<b>Tax due (overpayment)</b>	0	0	0
Estimated tax penalty from Form 2220			
Penalties and interest			
<b>Net tax due (overpayment)</b>	0	0	0
Overpayment credited to next year's estimated tax			
Overpayment refunded			

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Form 1120S	Two Year Comparison Worksheet Page 2	2009 & 2010
------------	--------------------------------------	-------------

Name TKCB, INC. Employer Identification Number 59-2389300

		2009	2010	Differences
Income (Loss)	Ordinary business income (loss)			
	Net rental real estate income (loss)			
	Other net rental income (loss)			
	Interest income			
	Dividends			
	Royalties			
	Net short-term capital gain (loss)			
	Net long-term capital gain (loss)			
	Net Section 1231 gain (loss)			
	Other income (loss)			
Deductions	Section 179 deduction			
	Charitable contributions			
	Investment interest expense			
	Section 59(e)(2) expenditures Other deductions			
Credits	Low-income housing credit (Section 42(j)(2))			
	Low-income housing credit (other)			
	Qualified rehabilitation expenditures (rental real estate)			
	Other rental real estate credits			
	Other rental credits Alcohol and cellulosic biofuel fuels credit Other credits			
Foreign Transactions	Total foreign gross income			
	Total foreign deductions			
	Total foreign taxes Reduction in taxes available for credit			
AMT Items	Post-1986 depreciation adjustment			
	Adjusted gain or loss			
	Depletion (other than oil and gas)			
	Oil, gas, and geothermal properties-gross income			
	Oil, gas, and geothermal properties-deductions Other AMT items			
Items Affecting SM Basis	Tax-exempt interest income			
	Other tax-exempt income			
	Nondeductible expenses			
	Distributions Repayment of loans from shareholders			
Other Information	Investment income			
	Investment expenses			
	Dividend distributions paid from accumulated E&P Income (loss) (if Schedule M-1 is required)			

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Form 1120S	Two Year Comparison Worksheet Page 3	2009 & 2010
------------	--------------------------------------	-------------

Name TKCB, INC. Employer Identification Number 59-2389300

		2009	2010	Differences
Schedule L	Beginning assets			
	Beginning liabilities and equity			
	Ending assets Ending liabilities and equity			
Schedule M-1	Net income (loss) per books			
	Taxable income not on books			
	Book expenses not deducted			
	Income on books not on return Return deductions not on books Income (loss) per return			
Schedule M-2 AAA	Balance at beginning of year			
	Ordinary income (loss) from page 1 Other additions			
	Other reductions Distributions other than dividend distributions Balance at end of year			
Schedule M-2 OAA	Balance at beginning of year			
	Other additions			
	Other reductions Distributions other than dividend distributions Balance at end of year			
Schedule M-2 PTI	Balance at beginning of year			
	Distributions other than dividend distributions Balance at end of year			
Schedule M-3	Total income (loss) items:			
	Income (loss) per income statement			
	Temporary difference			
	Permanent difference			
	Income (loss) per tax return			
	Total expense/deduction items:			
	Expense per income statement			
	Temporary difference			
	Permanent difference			
	Deduction per tax return			
Other items with no differences:				
Income (loss) per income statement				
Income (loss) per tax return				
Reconciliation total:				
Income (loss) per income statement				
Temporary difference				
Permanent difference				
Income (loss) per tax return				

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Form <b>1120S</b> Schedule K-1	Shareholder's Basis Worksheet Page 1	2010
For calendar year 2010 or tax year beginning ending		
Name <b>TRCB, INC.</b> <b>THAD A. TERRY</b>	Taxpayer Identification Number <b>59-2389300</b>	

**Stock Basis**

1. Beginning of year stock basis	0
2. Capital contributions	
3. Ordinary business income	
4. Net rental real estate income	
5. Other net rental income	
6. Interest, dividends and royalties	
7. Net capital gains	
8. Net section 1231 gain	
9. Tax-exempt interest and other income	
10. Other income	
11. Other increases	
12. Subtotal (Add line 1 through line 11)	
Subtractions:	
13. Distributions	
14. Total losses and deductions applied against stock basis (See Shareholder's Basis Worksheet Page 2)	
15. Other decreases	
16. Amount used to restore loan basis	
17. End of year stock basis (Subtract the sum of lines 13 through 16 from line 12)	0

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**Gain Recognized on Excess Distributions**

27. Distributions	
28. Stock basis before distributions and loss items	
29. Gain recognized on excess distributions (Subtract line 28 from line 27)	

**Gain Recognized on Repayment of Shareholder Loan**

30. Loan basis at beginning of tax year	
31. Basis restored - amount used in prior years to offset losses	
32. Loan basis before loan repayment (Add line 30 and line 31)	
33. Face amount of shareholder loan at beginning of tax year	
34. Loan repayments to shareholder during tax year	
35. Nontaxable return of loan basis ((Line 32 divided by line 33) multiplied by line 34)	
36. Gain recognized on repayment of shareholder loan (Subtract line 35 from line 34)	

Note to shareholder: This worksheet was prepared based on corporation records. Please consult with your tax advisor for adjustments.

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Form <b>1120S</b> Schedule K-1	Shareholder's Basis Worksheet Page 2	2010
For calendar year 2010 or tax year beginning ending		
Name <b>TRCB, INC.</b> <b>THAD A. TERRY</b>	Taxpayer Identification Number <b>59-2389300</b>	

**Loss Allocated to Stock and Loan Basis**

Nondeductible nonrec expenses Deductible items:	Suspended Losses	Current Year Loss	Total Loss	Percent	Allowed Stock Loss	Disallowed Stock Loss	Allowed Loan Loss	Disallowed Loss to Carryforward	Total Allowed Loss
Ordinary business loss									
Net rental real estate loss									
Other net rental loss									
Short-term capital loss									
Long-term capital loss									
Net section 1231 loss									
Other portfolio loss									
Section 170 expense									
Cash contributions (50%)									
Cash contributions (20%)									
Noncash contributions (50%)									
Dual consen contrib (50%)									
Net gain prop (20%)									
Cap gain prop 50% org (30%)									
Dual consen contrib (100%)									
Portfolio deductions (2% floor)									
Portfolio deductions (other)									
Treatment interest expense									
Deductions-royalty income									
Section 561(e)2 expend									
Prepaid expense period exp									
Commercial revitalization ded									
Refravation expense ded									
Other deductions									
Foreign taxes									
Total deductible items									
Total nonded and deductible items									

Note to shareholder: This worksheet was prepared based on corporation records. Please consult with your tax advisor for adjustments.

6/12/12

6/19/12

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Shareholder's Basis Worksheet Page 1

Form **1120S** Schedule **K-1** For calendar year **2010** or tax year beginning ending **2010**

Name **TKCB, INC.** Taxpayer Identification Number **59-2389300**

**THAD A. TERRY, JR.**

**Stock Basis**

- Beginning of year stock basis
- Capital contributions
- Ordinary business income
- Net rental real estate income
- Other net rental income
- Interest, dividends and royalties
- Net capital gains
- Net section 1231 gain
- Tax-exempt interest and other income
- Other income
- Other increases
- Subtotal (Add line 1 through line 11)
- Distributions
- Total losses and deductions applied against stock basis (See Shareholder's Basis Worksheet Page 2)
- Other decreases
- Amount used to restore loan basis
- End of year stock basis (Subtract the sum of lines 13 through 16 from line 12)

**Loan Basis**

- Beginning of year loan basis
- Loans to corporation
- Loan basis restored - amount used in prior years to offset losses
- Other increases
- Loan repayments
- Total losses and deductions applied against loan basis (See Shareholder's Basis Worksheet Page 2)
- Other decreases
- End of year loan basis (Subtract the sum of lines 22 through 24 from the sum of lines 18 through 21)
- End of year stock and loan basis (Add line 17 and line 25)

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**Gain Recognized on Excess Distributions**

- Distributions
- Stock basis before distributions and loss items
- Gain recognized on excess distributions (Subtract line 28 from line 27)

**Gain Recognized on Repayment of Shareholder Loan**

- Loan basis at beginning of tax year
- Basis restored - amount used in prior years to offset losses
- Loan basis before loan repayment (Add line 30 and line 31)
- Face amount of shareholder loan at beginning of tax year
- Loan repayments to shareholder during tax year
- Nontaxable return of loan basis ((Line 32 divided by line 33) multiplied by line 34)
- Gain recognized on repayment of shareholder loan (Subtract line 35 from line 34)

Note to shareholder: This worksheet was prepared based on corporation records. Please consult with your tax advisor for adjustments.

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Shareholder's Basis Worksheet Page 2

Form **1120S** Schedule **K-1** For calendar year **2010** or tax year beginning ending **2010**

Name **TKCB, INC.** Taxpayer Identification Number **59-2389300**

**THAD A. TERRY, JR.**

**Loss Allocated to Stock and Loan Basis**

Nondeductible noncap expenses Deductible items:	Suspended Losses	Current Year Loss	Total Loss	Percent	Allowed stock Loss	Disallowed Stock Loss	Percent	Allowed Loan Loss	Disallowed Loss to Carryforward	Total Allowed Loss
Ordinary business loss										
Net rental real estate loss										
Other net rental loss										
Short-term capital loss										
Long-term capital loss										
Net section 1231 loss										
Other portfolio loss										
Other losses										
Section 179 expense										
Cash contributions (50%)										
Cash contributions (20%)										
Noncash contributions (50%)										
Noncash contributions (20%)										
Qual contrib (50%)										
Qual contrib (20%)										
Cap gain prop 50% org (20%)										
Cap gain prop (20%)										
Qual contrib (100%)										
Portfolio deductions (2% floor)										
Investment interest expense										
Deduction-royalty income										
Section 59(e)(2) expend										
Preproductive period exp										
Commercial revitalization ded										
Reinstatement expense ded										
Other deductions										
Foreign taxes										
Total deductible items										
Total nonded and deductible items										

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Note to shareholder: This worksheet was prepared based on corporation records. Please consult with your tax advisor for adjustments.

6/19/12  
9625 TKCB, INC. 7/23/2011 1:56 PM  
59-2389300  
FYE: 12/31/2010  
**Federal Statements**  
**THAD A. TERRY**

Schedule K-1, Box 17, Code U - Other Information

Description	Shareholder Amount
Interest from U.S. Obligations	

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59-2389300  
FYE: 12/31/2010  
**Federal Statements**  
**THAD A. TERRY, JR.**

Schedule K-1, Box 17, Code U - Other Information

Description	Shareholder Amount
Interest from U.S. Obligations	

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62-1-13

Form 1120S, Page 2, Schedule K, Line 4 - Interest Income

Description	Amount
Interest income	\$ [REDACTED]
Total	\$ [REDACTED]

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Form 1120S, Page 3, Schedule K, Line 17a - Investment Income

Description	Amount
Interest Income	\$ [REDACTED]
Total	\$ [REDACTED]

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59-2389300  
FYE: 12/31/2010

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Federal Statements

Form 1120S, Page 4, Schedule L, Line 3 - Inventories

Description	Beginning of Year	End of Year
Inventory - raw land	\$ [REDACTED]	\$ [REDACTED]
Inventory - rented lots	[REDACTED]	[REDACTED]
Capitalized interest	[REDACTED]	[REDACTED]
Capitalized real estate taxes	[REDACTED]	[REDACTED]
Water & sewage (phase III)	[REDACTED]	[REDACTED]
Engineering - other	[REDACTED]	[REDACTED]
Ollie & Tom (phase III)	[REDACTED]	[REDACTED]
Permits (phase III)	[REDACTED]	[REDACTED]
Survey (phase III)	[REDACTED]	[REDACTED]
Engineering - Sheffield	[REDACTED]	[REDACTED]
Total	\$ [REDACTED]	\$ [REDACTED]

Form 1120S, Page 4, Schedule L, Line 8 - Mortgage and Real Estate Loans

Description	Beginning of Year	End of Year
M/R SUNLAKE HOMEOWNERS ASSOC	\$ [REDACTED]	\$ [REDACTED]
Total	\$ [REDACTED]	\$ [REDACTED]

Form 1120S, Page 4, Schedule L, Line 20 - Mortgages, Notes, Bonds Payable in One Year or More

Description	Beginning of Year	End of Year
Advances - Terry	\$ [REDACTED]	\$ [REDACTED]
Advances - Terry (King purch)	[REDACTED]	[REDACTED]
Advances - Terry (Rice purch)	[REDACTED]	[REDACTED]
Advances - Terry (Barnes)	[REDACTED]	[REDACTED]
Advances - Terry (B. Clifton)	[REDACTED]	[REDACTED]
Adv. - Terry Jr. (M. Clifton)	[REDACTED]	[REDACTED]
TA TERRY SUNLAKES VIA TKCB	[REDACTED]	[REDACTED]
Loan - Fidelity Bank	[REDACTED]	[REDACTED]
Total	\$ [REDACTED]	\$ [REDACTED]

Form 1120S, Page 4, Schedule L, Line 23 - Additional Paid-in Capital

Description	Beginning of Year	End of Year
Additional paid in capital	\$ [REDACTED]	\$ [REDACTED]
Total	\$ [REDACTED]	\$ [REDACTED]

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DAVIES, HOUSER & SECREST, CPA, P.A.  
P.O. BOX 129  
COCOA, FL 32923-0129

THAD A. TERRY  
P.O. BOX 456  
SHARPE, FL 32959  
[Barcode]

Handwritten: 7/19/11-2009

6/12/11

DAVIES, HOUSER & SECREST, CPA, P.A.  
 P.O. BOX 129  
 COCOA, FL 32923-0129  
 321-636-0426

July 23, 2011

CONFIDENTIAL

THAD A. TERRY  
 P.O. BOX 456  
 SHARPES, FL 32959

Dear THAD:

We have prepared the enclosed copy of Form 1120S, Schedule K-1 for TKCB, INC.. It contains your share of the corporation's items of income (loss), credits and deductions, and other information for the corporation's tax year ended December 31, 2010. These items are to be reported on your federal income tax return; therefore, this Schedule should be retained with your tax records and documentation.

Also enclosed is state K-1 information, if applicable. This information should also be retained with your tax records and documentation.

Also enclosed is shareholder basis information. This information consists of your stock and loan basis in the corporation and, if applicable, your share of any suspended or disallowed losses. Retain this information with your tax records; it may be needed to complete your federal income tax return.

We have retained a copy of Form 1120S, Schedule K-1 and other relevant documents for use in preparing your federal income tax return and, if applicable, all State K-1 information for use in preparing any state tax returns. We urge you to call for an appointment at your earliest convenience so that we might begin preparation of your individual tax returns.

If you have any questions, or if we can be of assistance in any way, please do not hesitate to call.

Sincerely,

DAVIES, HOUSER & SECREST, CPA, P.A.

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471110  
OMB No. 1545-0040

Schedule K-1 (Form 1120S) 2010  
 Department of the Treasury Internal Revenue Service

For calendar year 2010, or tax year beginning ending

Final K-1  Amended K-1

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

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

\* See attached statement for additional information.

For Paperwork Reduction Act Notice, see Instructions for Form 1120S. Schedule K-1 (Form 1120S) 2010

DAA

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Staff-Assisted Rate Case  
 Docket No. 120078-SU - APA# 12-128-02-1  
 12-Month Period Ending April 30, 2012

Source: PBC

9/18/11-20

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Schedule K-1 (Form 1120S) 2010

This list identifies the codes used on Schedule K-1 for all shareholders and provides summarized reporting information for shareholders who file Form 1040. For detailed reporting and filing information, see the separate Shareholder's Instructions for Schedule K-1 and the instructions for your income tax return.

1. Ordinary business income (loss). Determine whether the income (loss) is passive or nonpassive and enter on your return as follows:	Code	Report on
Passive loss	M	Credit for increasing research activities
Passive income	N	Credit for employer social security and Medicare taxes
Nonpassive loss	O	Backup withholding
Nonpassive income	P	Other credits
2. Net rental real estate income (loss)		
3. Other net rental income (loss)		
4. Interest income		
5a. Ordinary dividends		
5b. Qualified dividends		
6. Royalties		
7. Net short-term capital gain (loss)		
8a. Net long-term capital gain (loss)		
8b. Collectibles (28%) gain (loss)		
8c. Unrecaptured section 1250 gain		
9. Net section 1231 gain (loss)		
10. Other income (loss)		
Code		
A. Other portfolio income (loss)		
B. Involuntary conversions		
C. Sec. 1256 contracts & straddles		
D. Mining exploration costs recapture		
E. Other income (loss)		
11. Section 179 deduction		
12. Other deductions		
A. Cash contributions (50%)		
B. Cash contributions (30%)		
C. Noncash contributions (50%)		
D. Noncash contributions (30%)		
E. Capital gain property to a 50% organization (30%)		
F. Capital gain property (20%)		
G. Contributions (100%)		
H. Investment interest expense		
J. Deductions—royalty income		
J. Section 213(j)2) expenditures		
K. Deductions—portfolio (2% floor)		
L. Deductions—portfolio (other)		
M. Reproductive medical expenses		
N. Commercial rehabilitation deduction from rental real estate activities		
O. Reforestation expense deduction		
P. Domestic production activities information		
Q. Qualified production activities income		
R. Employer's Form W-2 wages		
S. Other deductions		
13. Credits		
A. Low-income housing credit (section 42(i)(5)) from pre-2006 buildings		
B. Low-income housing credit (other) from pre-2008 buildings		
C. Low-income housing credit (section 42(i)(5)) from post-2007 buildings		
D. Low-income housing credit (other) from post-2007 buildings		
E. Qualified rehabilitation expenditures (rental real estate)		
F. Other rental real estate credits		
G. Other rental credits		
H. Underutilized capital gains credit		
I. Allocated and cellular telephonic line credit		
J. Work opportunity credit		
K. Disabled access credit		
L. Employment zone and renewal community employment credit		
Code		
M. Credit for increasing research activities		
N. Credit for employer social security and Medicare taxes		
O. Backup withholding		
P. Other credits		
14. Foreign transactions		
A. Name of country or U.S. possession		
B. Gross income from all sources		
C. Gross income sourced at shareholder level		
D. Foreign gross income sourced at corporate level		
E. Passive category		
F. Other		
G. Deductions allocated and apportioned at shareholder level		
H. Interest expense		
I. Other		
J. Deductions allocated and apportioned at corporate level to foreign source income		
K. Passive category		
L. General category		
M. Other		
N. Total foreign taxes paid		
O. Total foreign taxes accrued		
P. Reduction in taxes available for credit		
Q. Foreign trading gross receipts		
R. Extraterritorial income exclusion		
S. Other foreign transactions		
15. Alternative minimum tax (AMT) items		
A. Post-1986 depreciation adjustment		
B. Excess depletion deduction		
C. Disallowed interest expense		
D. Disallowed net operating loss carryovers		
E. Other AMT items		
16. Items affecting shareholder basis		
A. Tax-exempt interest income		
B. Other tax-exempt income		
C. Nondeductible expenses		
D. Distributions		
E. Repayment of loans from shareholders		
17. Other information		
A. Investment income		
B. Investment expenses		
C. Qualified rehabilitation expenditures (other than rental real estate)		
D. Basis of energy property		
E. Recapture of low-income housing credit (section 42(i)(5))		
F. Recapture of low-income housing credit (other)		
G. Recapture of investment credit		
H. Recapture of other credits		
I. Look-back interest—completed long-term contracts		
J. Look-back interest—income forecast method		
K. Disposition of property with section 179 deductions		
L. Recapture of section 179 deduction		
M. Section 453(j)(2) information		
N. Section 453A(j) information		
O. Section 1280(a) information		
P. Interest allocable to production expenditures		
Q. CCF nonqualified withdrawals		
R. Disposition information—oil and gas		
S. Amortization of reforestation costs		
T. Section 106(a) information		
U. Other information		

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Schedule K-1, Box 17, Code U - Other Information

Description	Shareholder Amount
Interest from U.S. Obligations	



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Form <b>1120S</b>	Shareholder's Basis Worksheet Page 1		2010
Schedule K-1	For calendar year 2010 or tax year beginning ending		
Name <b>TKCB, INC.</b>	Taxpayer Identification Number <b>59-2389300</b>		
<b>THAD A. TERRY</b>			

**Stock Basis**

1. Beginning of year stock basis	0
2. Capital contributions	
Additions:	
3. Ordinary business income	
4. Net rental real estate income	
5. Other net rental income	
6. Interest, dividends and royalties	
7. Net capital gains	
8. Net section 1231 gain	
9. Tax-exempt interest and other income	
10. Other income	
11. Other increases	
12. Subtotal (Add line 1 through line 11)	
Subtractions:	
13. Distributions	
14. Total losses and deductions applied against stock basis (See Shareholder's Basis Worksheet Page 2)	
15. Other decreases	
16. Amount used to restore loan basis	
17. End of year stock basis (Subtract the sum of lines 13 through 16 from line 12)	0

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**Loan Basis**

15. Beginning of year loan basis	
19. Loans to corporation	
20. Loan basis restored - amount used in prior years to offset losses	
21. Other increases	
22. Loan repayments	
23. Total losses and deductions applied against loan basis (See Shareholder's Basis Worksheet Page 2)	
24. Other decreases	
25. End of year loan basis (Subtract the sum of lines 22 through 24 from the sum of lines 18 through 21)	
26. End of year stock and loan basis (Add line 17 and line 25)	

**Gain Recognized on Excess Distributions**

27. Distributions	
28. Stock basis before distributions and loss items	
29. Gain recognized on excess distributions (Subtract line 28 from line 27)	

**Gain Recognized on Repayment of Shareholder Loan**

30. Loan basis at beginning of tax year	
31. Basis restored - amount used in prior years to offset losses	
32. Loan basis before loan repayment (Add line 30 and line 31)	
33. Face amount of shareholder loan at beginning of tax year	
34. Loan repayments to shareholder during tax year	
35. Nontaxable return of loan basis ((Line 32 divided by line 33) multiplied by line 34)	
36. Gain recognized on repayment of shareholder loan (Subtract line 35 from line 34)	

Note to shareholder: This worksheet was prepared based on corporation records. Please consult with your tax advisor for adjustments.

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Form <b>1120S</b>	Shareholder's Basis Worksheet Page 2		2010
Schedule K-1	For calendar year 2010 or tax year beginning ending		
Name <b>TKCB, INC.</b>	Taxpayer Identification Number <b>59-2389300</b>		
<b>THAD A. TERRY</b>			

**Loss Allocated to Stock and Loan Basis**

Suspended Losses	Current Year Loss	Total Loss	Percent	Allowed Stock Loss	Disallowed Stock Loss	Percent	Allowed Loan Loss	Disallowed Loan Loss to Corporation	Total Allowed Loss
Non-deductible noncap expenses									
Deductible items:									
Ordinary business loss									
Net rental real estate loss									
Other net rental loss									
Short-term capital loss									
Long-term capital loss									
Net section 1231 loss									
Other portfolio loss									
Other losses									
Section 179 expense									
Cash contributions (50%)									
Cash contributions (30%)									
Noncash contributions (50%)									
Qual company contrib (50%)									
Noncash contributions (30%)									
Cap gain prop 50% org (30%)									
Cap gain prop (20%)									
Qual company contrib (100%)									
Portfolio deductions (2% floor)									
Portfolio deductions (other)									
Investment interest expense									
Deductions-royalty income									
Section 56(a)(2) expense									
Preproductive period exp									
Commercial revitalization ded									
Refundation expense/ded									
Other deductions									
Foreign losses									
Total deductible items									
Total non-ded and deductible items									

Note to shareholder: This worksheet was prepared based on corporation records. Please consult with your tax advisor for adjustments.



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Schedule K-1 (Form 1120S)

2010

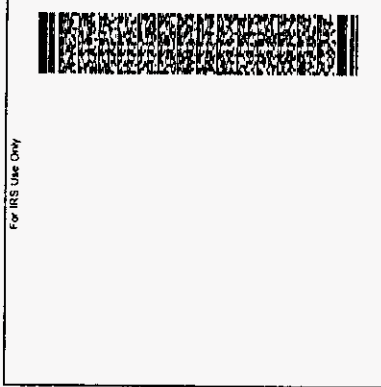
671110 OMB No. 1545-0130

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

Part I Information About the Corporation
A Corporation's employer identification number 59-2389300
B Corporation's name, address, city, state, and ZIP code TKCB, INC. 5600 N US HIGHWAY 1 Cocoa FL 32927
C IRS Center where corporation filed return e-file

Part II Information About the Shareholder
D Shareholder's identifying number
E Shareholder's name, address, city, state, and ZIP code THAD A. TERRY, JR. P. O. BOX 456 SHARPE FL 32909
F Shareholder's percentage of stock ownership for last year

Table with 3 columns: Line number, Description, and Code. Rows include Ordinary business income, Net rental real estate income, Interest income, Ordinary dividends, Qualified dividends, Royalties, Net short-term capital gain, Net long-term capital gain, Collectibles (20%) gain, Unrecaptured section 1250 gain, Net section 1231 gain, Other income, Section 179 deduction, Other deductions, Section 179 deduction, and Other deductions.



For Paperwork Reduction Act Notice, see Instructions for Form 1120S.

Schedule K-1 (Form 1120S) 2010

Schedule K-1 (Form 1120S) 2010

Page 2

This list identifies the codes used on Schedule K-1 for all shareholders and provides summarized reporting information for shareholders who file Form 1040. For detailed reporting and filing information, see the separate Shareholder's Instructions for Schedule K-1 and the Instructions for your income tax return.

- 1. Ordinary business income (loss). Determine whether the income (loss) is passive or nonpassive and enter on your return as follows:
2. Net rental real estate income (loss)
3. Other net rental income (loss)
4. Interest income
5a. Ordinary dividends
5b. Qualified dividends
6. Royalties
7. Net short-term capital gain (loss)
7a. Net long-term capital gain (loss)
8b. Collectibles (20%) gain (loss)
8c. Unrecaptured section 1250 gain
8d. Net section 1231 gain (loss)
10. Other income (loss)
11. Section 179 deduction
12. Other deductions
13. Alternative minimum tax (AMT) items
14. Foreign transactions
15. Alternative minimum tax (AMT) items
16. Items affecting shareholder basis
17. Other information

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Staff-Assisted Rate Case Docket No. 120078-SU - APA# 12-128-02-1 12-Month Period Ending April 30, 2012

Source: PBC

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2-29-10

9625 TKCB, INC. 7/23/2011 1:56 PM  
 59-2389300  
 FYE: 12/31/2010

**Federal Statements**  
**THAD A. TERRY, JR.**

Schedule K-1, Box 17, Code U - Other Information

Description	Shareholder Amount
Interest from U.S. Obligations	

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Shareholder's Basis Worksheet Page 1

Form **1120S** | Schedule K-1 | For calendar year 2010 or tax year beginning ending **2010**

Name **TKCB, INC.** | Taxpayer Identification Number **59-2389300**  
**THAD A. TERRY, JR.**

Stock Basis

- Beginning of year stock basis
- Capital contributions
- Ordinary business income
- Net rental real estate income
- Other net rental income
- Interest, dividends and royalties
- Net capital gains
- Net section 1231 gain
- Tax-exempt interest and other income
- Other income
- Other increases
- Subtotal (Add line 1 through line 11)
- Distributions
- Total losses and deductions applied against stock basis (See Shareholder's Basis Worksheet Page 2)
- Other decreases
- Amount used to restore loan basis
- End of year stock basis (Subtract the sum of lines 13 through 16 from line 12)

Loan Basis

- Beginning of year loan basis
- Loans to corporation
- Loan basis restored - amount used in prior years to offset losses
- Other increases
- Loan repayments
- Total losses and deductions applied against loan basis (See Shareholder's Basis Worksheet Page 2)
- Other decreases
- End of year loan basis (Subtract the sum of lines 22 through 24 from the sum of lines 18 through 21)
- End of year stock and loan basis (Add line 17 and line 25)

Gain Recognized on Excess Distributions

- Distributions
- Stock basis before distributions and loss items
- Gain recognized on excess distributions (Subtract line 28 from line 27)

Gain Recognized on Repayment of Shareholder Loan

- Loan basis at beginning of tax year
- Basis restored - amount used in prior years to offset losses
- Loan basis before loan repayment (Add line 30 and line 31)
- Face amount of shareholder loan at beginning of tax year
- Loan repayments to shareholder during tax year
- Non-taxable return of loan basis ((Line 32 divided by line 33) multiplied by line 34)
- Gain recognized on repayment of shareholder loan (Subtract line 35 from line 34)

Note to shareholder: This worksheet was prepared based on corporation records. Please consult with your tax advisor for adjustments.

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Staff-Assisted Rate Case  
Docket No. 120078-SU - APA# 12-128-02-1  
12-Month Period Ending April 30, 2012

Source: PBC

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Form 1120S Shareholder's Basis Worksheet Page 2  
 Schedule K-1 For calendar year 2010 or tax year beginning ending 2010

Name TKCB, INC.  
 THAD A. TERRY, JR. Taxpayer Identification Number 59-2389300

Loss Allocated to Stock and Loan Basis

	Suspended Losses	Current Year Loss	Total Loss	Percent	Allowed Stock Loss	Disallowed Stock Loss	Percent	Allowed Loan Loss	Disallowed Loss to Carryforward	Total Allowed Loss
Nondeductible noncap expenses										
Deductible items:										
Ordinary business loss										
Net rental real estate loss										
Other net rental loss										
Short-term capital loss										
Long-term capital loss										
Net section 1231 loss										
Other portfolio loss										
Other losses										
Section 179 expense										
Cash contributions (50%)										
Cash contributions (30%)										
Noncash contributions (50%)										
Qual conserv contrib (50%)										
Noncash contributions (30%)										
Cap gain prop 50% org (30%)										
Cap gain prop (20%)										
Qual conserv contrib (100%)										
Portfolio deductions (2% floor)										
Portfolio deductions (other)										
Investment interest expense										
Deductions-royalty income										
Section 56(e)(2) expend										
Preproductive period exp										
Commercial revitalization ded										
Reforestation expense ded										
Other deductions										
Foreign losses										
Total deductible items										
Total nonded and deductible items										

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Note to shareholder: This worksheet was prepared based on corporation records. Please consult with your tax advisor for adjustments.

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6/11/8

16-2-20

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Form **8879-C** IRS e-file Signature Authorization for Form 1120 OMB No. 1545-1864  
 For calendar year 2010, or tax year beginning \_\_\_\_\_ ending **2010**  
 Department of the Treasury Internal Revenue Service See instructions. Do not send to the IRS. Keep for your records.

Name of corporation: **SUN LAKE ESTATES HOMEOWNERS ASSOC.** Employer identification number: **59-2593278**  
**Part I Tax Return Information (Whole dollars only)**

1 Total income (Form 1120, line 11)	1	
2 Taxable income (Form 1120, line 30)	2	
3 Total tax (Form 1120, line 31)	3	
4 Amount owed (Form 1120, line 34)	4	
5 Overpayment (Form 1120, line 35)	5	

**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 2010 electronic income tax return and accompanying schedules and statements and to the best of my knowledge and belief, it is 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 acknowledgment 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 **DAVIES, HOUSER, SECREST, CPA, P.A.** ERO's PIN **96261** as my signature on the corporation's 2010 electronically filed tax return.  
 As an officer of the corporation, I will enter my PIN as my signature on the corporation's 2010 electronically filed income tax return.

Officer's signature: **THAD TERRY** Date: \_\_\_\_\_ Title: **PRESIDENT**

**Part III Certification and Authentication**  
 ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. **59807904260**  
 do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2010 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: **EDWARD R. CHRISTENSEN CPA** Date: **07/23/11**

**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-C** (2010)

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Form **1120** U.S. Corporation Income Tax Return OMB No. 1545-0123  
 For calendar year 2010 or tax year beginning \_\_\_\_\_ ending **2010**  
 Department of the Treasury Internal Revenue Service See separate instructions.

Name: **SUN LAKE ESTATES HOMEOWNERS ASSOC.** Employer identification number: **59-2593278**  
 Address: **5600 US HWY 1 N COCOA FL 32927** Date incorporated: **07/13/1983**  
 E Check F (1)  Mail return (2)  First return (3)  Name change (4)  Address change (5)

1a Compensation (attach Form 991)	Print or Type	1c	
1b Leasehold interest (attach Form 991)		2	
2 Personal holding company (attach Sols. Pt.)		3	
3 Personal service corp. (see instructions)		4	
4 Schedule M-3 attached		5	
1a Gross receipts or sales	b Less returns and allowances	c Net	1c
2 Cost of goods sold (Schedule A, line 8)			2
3 Gross profit. Subtract line 2 from line 1c			3
4 Dividends (Schedule C, line 19)			4
5 Interest			5
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 schedule)			10
11 Total income. Add lines 3 through 10			11
12 Compensation of officers (Schedule E, line 4)			12
13 Salaries and wages (less employment credits)			13
14 Repairs and maintenance			14
15 Bad debts			15
16 Rents			16
17 Taxes and licenses			17
18 Interest			18
19 Charitable contributions			19
20 Depreciation from Form 4562 not claimed on Schedule 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 Domestic production activities deduction (attach Form 9903)			25
26 Other deductions (attach schedule)			26
27 Total deductions. Add lines 12 through 26			27
28 Taxable income before net operating loss deduction and special deductions. Subtract line 27 from line 11			28
29 Loss: a Net operating loss deduction (see instructions)	29a	<b>15,044</b>	29c
b Special deductions (Schedule C, line 20)	29b		29c
30 Taxable income. Subtract line 29c from line 28 (see instructions)			30
31 Total tax (Schedule J, line 10)			31
32a 2009 overpayment credited to 2010	32a		32d
b 2010 estimated tax payments	32b		32d
c 2010 refund applied for on Form 4466	32c		32d
d Tax deposited with Form 7004	32e		32d
f Credits: (1) Form 708 (2) Form 4138	32f		32d
g Refundable credits from Form 3800, line 18c, and Form 8827, line 8c	32g		32d
33 Estimated tax penalty (see instructions). Check if Form 2220 is attached			33
34 Amount owed. If line 32h is smaller than the total of lines 31 and 33, enter amount owed			34
35 Overpayment. If line 32h is larger than the total of lines 31 and 33, enter amount overpaid			35
36 Enter amount from line 35 you want. Credited to 2011 estimated tax			36

Under penalties of perjury, I declare that I have examined the 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 the return with the preparer shown below (see instructions)?  Yes  No

Signature of officer: **THAD TERRY** Date: \_\_\_\_\_ Title: **PRESIDENT**  
 Signature of preparer: **EDWARD R. CHRISTENSEN CPA** Date: **07/23/11** Check self-employed  PTIN: **P00039668**  
 Preparer name: **DAVIES, HOUSER & SECREST, CPA, P.A.** Firm's EIN: \_\_\_\_\_  
 Firm's address: **P.O. BOX 129 COCOA, FL 32923-0129** Phone no.: **321-636-0426**

For Paperwork Reduction Act Notice, see separate instructions. Form **1120** (2010)

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Staff-Assisted Rate Case Docket No. 120078-SU - APA# 12-128-02-1 12-Month Period Ending April 30, 2012

Source: PBC





Schedule K-1 Continued

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).

(i) Name of Entity	(ii) Employer Identification Number (if any)	(iii) Country of Organization	(iv) Maximum Percentage Owned in Profit, Loss, or Capital	Yes	No
					X

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). If "Yes," file Form 4412, Corporate Report of Nondividend Distributions.

7 At any time during the tax year, did one foreign person own, directly or indirectly, at least 25% of (a) the total voting power of all classes of the corporation's stock entitled to vote or (b) the total value of all classes of the corporation's stock? For rules of attribution, see section 318. If "Yes," enter:

(i) Percentage owned  $\rightarrow$  and (ii) Owner's country  $\rightarrow$

(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 Form 5472s attached.

8 Check this box if the corporation issued publicly traded securities during the tax year. If checked, the corporation may have to file Form 1099-DIV, Dividend or Distribution, for each security holder. Discount Instruments.

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

10 Enter the number of shareholders at the end of the tax year (if 100 or fewer)  $\rightarrow$  0

11 If the corporation has an NOL for the tax year and is electing to forego the carryback period, check here. 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 on line 28a)  $\rightarrow$  \$

13 Are the corporation's total receipts (line 1a plus lines 4 through 10 on page 1) for the tax year and its total assets at the end of the tax year less than \$250,000? If "Yes," the corporation is not required to complete Schedules L, M-1, and M-2 on page 5. Instead, enter the total amount of cash distributions and the book value of property distributions (other than cash) made during the tax year  $\rightarrow$  \$

14 Is the corporation required to file Schedule UTP (Form 1120), Uncertain Tax Position Statement (see instructions)? If "Yes," complete and attach Schedule UTP.

Form 1120 (2010)

Schedule M-1 Balance Sheets per Books

	Beginning of tax year		End of tax year	
	(a)	(b)	(c)	(d)
<b>Assets</b>				
1 Cash				
2a Trade notes and accounts receivable				
b Less allowance for bad debts				
3 Inventories				
4 U.S. government obligations				
5 Tax-exempt securities (see instructions)				
6 Other current assets (at sch.)				
7 Loans to shareholders				
8 Mortgage and real estate loans				
9 Other investments (attach sch.) Stmt. 4				
10a Buildings and other depreciable assets				
b Less accumulated depreciation				
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 sch.)				
15 Total assets				
<b>Liabilities and Shareholders' Equity</b>				
16 Accounts payable				
17 Mortgages, notes, bonds payable in less than 1 year				
18 Other current liabilities (at sch.)				
19 Loans from shareholders				
20 Mortgages, notes, bonds payable in 1 year or more				
21 Other liabilities (see instructions) Stmt. 5				
22 Capital stock a Preferred stock				
b Common stock				
23 Additional paid-in capital				
24 Retained earnings—appropriated (at sch.)				
25 Retained earnings—Unappropriated				
26 Advances to SH equity (at sch.)				
27 Less cost of treasury stock				
28 Total liabilities and shareholders' equity				

Schedule M-1: Reconciliation of Income (Loss) per Books With Income per Return  
Note: Schedule M-3 required instead of Schedule M-1 if total assets are \$10 million or more—see instructions.

1 Net income (loss) per books	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):	
5 Expenses recorded on books this year not deducted on this return (itemize):	8 Deductions on this return not charged against book income this year (itemize):
a Depreciation \$	a Depreciation \$
b Charitable contributions \$	b Charitable contributions \$
c Travel and entertainment \$	
6 Add lines 1 through 5	9 Add lines 7 and 8
Schedule M-2: Analysis of Unappropriated Retained Earnings per Books (Line 25, Schedule L)	10 Income (page 1, line 28)—line 6 less line 9
1 Balance at beginning of year	11 Distributions: a Cash
2 Net income (loss) per books	b Stock
3 Other increases (itemize):	c Property
4 Add lines 1, 2, and 3	12 Other decreases (itemize):
	7 Add lines 5 and 8
	8 Balance at end of year (line 4 less line 7)

Form 1120 (2010)

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5-2-2011

Staff-Assisted Rate Case Docket No. 120078-SU - APA# 12-128-02-1 12-Month Period Ending April 30, 2012

Form **4562**

Department of the Treasury  
Internal Revenue Service

**Depreciation and Amortization**  
(Including Information on Listed Property)

OMB No. 1545-0172

**2010**

Attachment  
Sequence No. 67

Name(s) shown on return

SUN LAKE ESTATES HOMEOWNERS ASSOC.

Identifying number  
59-2593278

Business or activity to which this form relates

**Schedule A**

**Part I Election To Expense Certain Property Under Section 179**

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2009 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2011. Add lines 9 and 10, less line 12	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

**Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions)**

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(k)(1) election	15	
16	Other depreciation (including ACRS)	16	

**Part III MACRS Depreciation (Do not include listed property.) (See instructions)**

17	MACRS deductions for assets placed in service in tax years beginning before 2010	17	
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input type="checkbox"/>		

**Section B—Assets Placed in Service During 2010 Tax Year Using the General Depreciation System**

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
18a	3-year property					
b	5-year property					
c	7-year property					
d	10-year property					
e	15-year property					
f	20-year property					
g	25-year property		25 yrs.		SL	
h	Residential rental property		27.5 yrs.	MM	SL	
i	Nonresidential real property		27.5 yrs.	MM	SL	
			39 yrs.	MM	SL	
				MM	SL	

**Section C—Assets Placed in Service During 2010 Tax Year Using the Alternative Depreciation System**

28a	Class life			
b	12-year		12 yrs.	SL
c	40-year		40 yrs.	MM
				SL

**Part IV Summary (See instructions.)**

21	Listed property. Enter amount from line 28	21	
22	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	22	
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.  
DAA

Form 4562 (2010)

There are no amounts for Page 2

Form **1120**

**Charitable Contribution Carryover Worksheet**

**2010**

Name

SUN LAKE ESTATES HOMEOWNERS ASSOC.

Employer identification number

59-2593278

**Regular Tax Calculations**

Preceding Tax Year	Excess Contributions	Prior Year		Current Year		Next Year
		Utilized Or Reclassified to NOL	Carryover	Reclassified to NOL Reg. Sec. 1.170A-11(e)(2)	Carryovers Utilized	
12/31/05						
12/31/06						
12/31/07						
12/31/08						
12/31/09						
Charitable Contribution Carryover To Current Year - Regular				0		
Current Year				0		0
Charitable Contribution Carryover Available To Next Year						0

**Alternative Minimum Tax Calculations**

Preceding Tax Year	Excess Contributions	Prior Year		Current Year		Next Year
		Utilized Or Reclassified to NOL	Carryover	Reclassified to NOL Reg. Sec. 1.170A-11(e)(2)	Carryovers Utilized	
12/31/05						
12/31/06						
12/31/07						
12/31/08						
12/31/09						
AMT Charitable Contribution Carryover To Current Year				0		
Current Year				0		0
AMT Charitable Contribution Carryover Available To Next Year						0

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Form **1120** Net Operating Loss Carryover Worksheet - Regular Tax **2010**  
 For calendar year 2010 or tax year beginning ending  
 Name **SUN LAKE ESTATES HOMEOWNERS ASSOC.** Employer Identification Number **59-2593278**

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		
15th 12/31/95							
14th 12/31/96							
13th 12/31/97							
12th 12/31/98							
11th 12/31/99							
10th 12/31/00							
9th 12/31/01							
8th 12/31/02							
7th 12/31/03							
6th 12/31/04							
5th 12/31/05							
4th 12/31/06							
3rd 12/31/07							
2nd 12/31/08							
1st 12/31/09							
NOL Carryover Available To Current Year							
Current Year							
NOL Carryover Available To Next Year							

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Form **1120** Net Operating Loss Carryover Worksheet - AMT **2010**  
 For calendar year 2010 or tax year beginning ending  
 Name **SUN LAKE ESTATES HOMEOWNERS ASSOC.** Employer Identification Number **59-2593278**

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		
15th 12/31/95							
14th 12/31/96							
13th 12/31/97							
12th 12/31/98							0
11th 12/31/99							0
10th 12/31/00							
9th 12/31/01							
8th 12/31/02							
7th 12/31/03							
6th 12/31/04							
5th 12/31/05							
4th 12/31/06							
3rd 12/31/07							
2nd 12/31/08							
1st 12/31/09							
NOL Carryover Available To Current Year							
Current Year							0
NOL Carryover Available To Next Year							

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62-2-7

Staff-Assisted Rate Case  
Docket No. 120078-SU - APA# 12-128-02-1  
12-Month Period Ending April 30, 2012

Source: PBC

6/12/11

6/22/11

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

Description	Amount
Licenses and Fees	\$ [REDACTED]
Office Expense	[REDACTED]
Bank Charges	[REDACTED]
Total	\$ [REDACTED]

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Statement 2 - Form 1120, Page 2, Schedule A, Line 4 - Additional 263A Costs

Description	Amount
Depreciation	\$ [REDACTED]
Total	\$ [REDACTED]

Statement 3 - Form 1120, Page 2, Schedule A, Line 5 - Other Costs

Description	Amount
Supplies	\$ [REDACTED]
Chemicals	[REDACTED]
Repairs	[REDACTED]
Yard Care	[REDACTED]
Management Services	[REDACTED]
Water	[REDACTED]
Electricity	[REDACTED]
Total	\$ [REDACTED]

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Source: PBC

6/11/12

6-2-12

**Statement 4 - Form 1120, Page 5, Schedule L, Line 9 - Other Investments**

Description	Beginning of Year	End of Year
Phase III Investment	\$ [REDACTED]	\$ [REDACTED]
Total	\$ [REDACTED]	\$ [REDACTED]

**Statement 5 - Form 1120, Page 5, Schedule L, Line 21 - Other Liabilities**

Description	Beginning of Year	End of Year
Impact Fees	\$ [REDACTED]	\$ [REDACTED]
Total	\$ [REDACTED]	\$ [REDACTED]

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Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Base for Depr.	Per Conv Meth	Prior	Current
<b>Prior MACRS:</b>									
6	Trees Sharpes Lake	1/25/90	[REDACTED]			15	HY 150DB	[REDACTED]	[REDACTED]
7	Pressure washer	5/15/98	[REDACTED]			7	HY 200DB	[REDACTED]	[REDACTED]
8	Sewer Plant Machine	12/05/07	[REDACTED]			7	MQ 200DB	[REDACTED]	[REDACTED]
<b>Other Depreciation:</b>									
1	Sewer plant	1/01/88	[REDACTED]			50	MO SL	[REDACTED]	[REDACTED]
2	Pump	12/22/88	[REDACTED]			50	MO SL	[REDACTED]	[REDACTED]
3	Sewer expansion	1/28/93	[REDACTED]			50	MO SL	[REDACTED]	[REDACTED]
4	Sewer expansion	9/16/93	[REDACTED]			50	MO SL	[REDACTED]	[REDACTED]
5	Scales-wgh chlor bottles	10/27/88	[REDACTED]			50	MO SL	[REDACTED]	[REDACTED]
Total Other Depreciation			[REDACTED]			[REDACTED]		[REDACTED]	[REDACTED]
Total ACRS and Other Depreciation			[REDACTED]			[REDACTED]		[REDACTED]	[REDACTED]
Grand Total			[REDACTED]			[REDACTED]		[REDACTED]	[REDACTED]
Less: Dispositions and Transfers			[REDACTED]			[REDACTED]		[REDACTED]	[REDACTED]
Less: Start-up/Org Expense			[REDACTED]			[REDACTED]		[REDACTED]	[REDACTED]
Net Grand Total			[REDACTED]			[REDACTED]		[REDACTED]	[REDACTED]

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6/12/10

9/12/10

9626 SUN LAKE ESTATES HOMEOWNERS ASSOC.  
59-2593278  
FYE: 12/31/2010

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**AMT Asset Report**  
Schedule A

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv Meth	Prior	Current
<b>Prior MACRS:</b>									
6	Trees Sharpes Lake	1/25/90				15	HY 150DB		
7	Pressure washer	6/15/98				7	HY 150DB		
8	Sewer Plant Machine	12/05/07				7	MQ 150DB		
<b>Other Depreciation:</b>									
1	Sewer plant	1/01/88				50	MO S/L		
2	Pump	12/22/88				50	MO S/L		
3	Sewer expansion	1/28/93				50	MO S/L		
4	Sewer expansion	9/16/93				50	MO S/L		
5	Scales-wgh chlor bottles	10/27/88				50	MO S/L		
Total Other Depreciation									
Total ACRS and Other Depreciation									
Grand Totals									
Less: Dispositions and Transfers									
Net Grand Totals									

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9626 SUN LAKE ESTATES HOMEOWNERS ASSOC.  
59-2593278  
FYE: 12/31/2010

07/23/2011 2:02 PM  
**ACE Asset Report**  
Schedule A

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv Meth	Prior	Current
<b>Prior MACRS:</b>									
6	Trees Sharpes Lake	1/25/90				15	HY S/L		
7	Pressure washer	6/15/98				7	HY 150DB		
8	Sewer Plant Machine	12/05/07				7	MQ 150DB		
<b>Other Depreciation:</b>									
1	Sewer plant	1/01/88				50	MO S/L		
2	Pump	12/22/88				50	MO S/L		
3	Sewer expansion	1/28/93				50	MO S/L		
4	Sewer expansion	9/16/93				50	MO S/L		
5	Scales-wgh chlor bottles	10/27/88				50	MO S/L		
Total Other Depreciation									
Total ACRS and Other Depreciation									
Grand Totals									
Less: Dispositions and Transfers									
Net Grand Totals									

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6/12/11

6-22-2011

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Form 1120		Two Year Comparison Worksheet Page 1		2009 & 2010
Name SUN LAKE ESTATES HOMEOWNERS ASSOC.		Employer Identification Number 59-2593278		
		2009	2010	Differences
Income	Gross profit percentage			
	Gross receipts less returns and allowances			
	Cost of goods sold			
	Gross profit			
	Dividends			
	Interest			
	Gross rents			
	Gross royalties			
	Capital gain net income from Schedule D			
	Net gain or (loss) from Form 4797			
Other income				
Total income				
Deductions	Compensation of officers			
	Salaries and wages less employment credits			
	Repairs and maintenance			
	Bad debts			
	Rents			
	Taxes and licenses			
	Interest			
	Charitable contributions			
	Depreciation			
	Depletion			
	Advertising			
	Pension, profit-sharing, etc. plans			
	Employee benefit programs			
	Domestic production activities deduction			
	Other deductions			
Total deductions				
Taxable income before NOL & special deductions				
Net operating loss				
Special deductions				
Tax and Credits	Taxable income			
	Income tax			
	Alternative minimum tax			
	Foreign tax credit			
	Credit from Form 6834			
	General business credit			
	Credit for prior year minimum tax			
	Bond credits			
	Personal holding company tax			
	Other taxes			
Total tax (including additional taxes)				

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Form 1120		Two Year Comparison Worksheet Page 2		2009 & 2010
Name SUN LAKE ESTATES HOMEOWNERS ASSOC.		Employer Identification Number 59-2593278		
		2009	2010	Differences
Payments and Refundable Credits	Prior year overpayment credited to current year			
	Current year estimated tax payments			
	Refund applied for on Form 4468			
	Tax deposited with Form 7004			
	Credit from Form 2439			
Tax Due or Refund	Credit for federal tax paid on fuels			
	Refundable credits			
	Backup withholding			
	Total payments and credits			
	Tax due (overpayment)			
Sch L	Estimated tax penalty from Form 2220			
	Penalties and interest			
	Net tax due (overpayment)			
Sch M-1	Amount of overpayment credited to next year's tax			
	Amount of overpayment refunded			
	Beginning assets			
Sch M-2	Beginning liabilities and equity			
	Ending assets			
	Ending liabilities and equity			
Sch M-3	Net income (loss) per books			
	Federal income tax per books			
	Excess of capital losses over capital gains			
Sch M-2	Taxable income not on books			
	Book expenses not deducted			
	Income on books not on return			
Sch M-3	Return deductions not on book			
	Income per return			
	Beginning of year balance			
Sch M-2	Net income (loss) per books			
	Other increases			
	Cash distributions			
Sch M-3	Stock distributions			
	Property distributions			
	Other decreases			
Sch M-2	Balance at end of year			
	Total income (loss) items:			
	Income (loss) per income statement			
Sch M-3	Temporary difference			
	Permanent difference			
	Income (loss) per tax return			
Sch M-2	Total expense/deduction items:			
	Expense per income statement			
	Temporary difference			
Sch M-3	Permanent difference			
	Deduction per tax return			
	Other items with no differences:			
Sch M-2	Income (loss) per income statement			
	Income (loss) per tax return			
	Reconciliation total:			
Sch M-3	Income (loss) per income statement			
	Temporary difference			
	Permanent difference			
Sch M-2	Income (loss) per tax return			

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Staff-Assisted Rate Case  
Docket No. 120078-SU - APA# 12-128-02-1  
12-Month Period Ending April 30, 2012

Source: PBC



6/12/12

6/22-29

9626 SUN LAKE ESTATES HOMEOWNERS ASSOC. 7/23/2011 2:02 PM  
59-2593278 Federal Statements  
FYE: 12/31/2010

Form 1120, Page 1, Line 1a - Gross Receipts

Description	Amount
Operating Revenue	\$ [REDACTED]
Total	\$ [REDACTED]

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9626 SUN LAKE ESTATES HOMEOWNERS ASSOC. 7/23/2011 2:02 PM  
59-2593278 Federal Statements  
FYE: 12/31/2010

Form 1120, PS, Sch L, Line 20 - Mortgage, Notes, Bonds Pay in One Year or More

Description	Beginning of Year	End of Year
N/P TKCB, Inc. - Sewer Plant Loan - TA Terry via Canaveral	\$ [REDACTED]	\$ [REDACTED]
Loan - Thad Terry Due to TA Terry via Atlantis	\$ [REDACTED]	\$ [REDACTED]
Loan - Thad A Terry Jr	\$ [REDACTED]	\$ [REDACTED]
Total	\$ [REDACTED]	\$ [REDACTED]

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6/17/12

6-2-12

0626 07/23/2011 2:02 PM

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### Florida Form F-1120 Return Summary

For calendar year 2010 or tax year beginning \_\_\_\_\_ ending \_\_\_\_\_  
SUN LAKE ESTATES HOMEOWNERS ASSOC. 59-2593278

Taxable Income  
 Federal taxable income  
 State income taxes deducted  
 Additions  
 Subtractions  
 Florida portion of adjusted federal income  
 Nonbusiness income allocated to Florida  
 Florida exemption  
 Taxable Income \_\_\_\_\_

Tax Computation  
 Corporate income tax  
 Tax credits  
 Emergency excise tax  
 Total tax \_\_\_\_\_

Payments / Penalties  
 Payments  
 Form F-2220 penalty  
 Failure to file  
 Form F-2220 interest  
 Late filing interest  
 Total payments / penalties \_\_\_\_\_

Tax due \_\_\_\_\_ 0

Overpayment credited to next year's tax \_\_\_\_\_

Refund \_\_\_\_\_

Next Year's Estimates		Apportionment	
1st quarter	_____	Property factor	_____
2nd quarter	_____	Payroll factor	_____
3rd quarter	_____	Sales factor	_____
4th quarter	_____	Apportionment factor	_____
Total	_____		

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UNSUBSTANTIATED

### Florida Tentative Income / Franchise and Emergency Excise Tax Return and Application for Extension of Time to File Return

CSOL  
F-7004  
R. 01/11  
Rule 12C-1.001  
Florida Administrative Code  
Effective 01/11

# Client Copy

OUT HERE  
Florida Tentative Income / Franchise and Emergency Excise Tax  
Return and Application for Extension of Time to File Return  
CSOL  
F-7004  
R. 01/11

Name SUN LAKE ESTATES HOMEOWNERS ASSOC. FEIN 59-2593278  
 Address 5600 US HWY 1 N Taxable Year End 12/31/10  
 City/State/ZIP COCOA FL 32927 FILING STATUS Corporation  Partnership  
 Check here if you transmitted funds electronically   
 Tentative Tax Due \$ 0

Under penalties of perjury, I declare that I have been authorized by the above named taxpayer to make this application, that to the best of my knowledge and belief the statements herein are true and correct.  
Sign Here: \_\_\_\_\_ Date: \_\_\_\_\_

592593278	0	0	0
1	0	0	0
20101231	0	0	0
0	0	0	0
001	0	0	0
0	0	0	0
0	0	0	0
0	0	0	0

0 8122 0 20101231 0002005030 3 3592593278 0000 1

Staff-Assisted Rate Case  
Docket No. 120078-SU - APA# 12-128-02-1  
12-Month Period Ending April 30, 2012

Source: PBC

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62-20

**Filing Instructions**

**SUN LAKE ESTATES HOMEOWNERS ASSOC.**

**Form F-1120 - Income/Franchise & Emergency Excise Rtn**

**Taxable Year Ended December 31, 2010**

**Date Due:** October 3, 2011

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

**Other:** Initial and date the copy, and retain it for your records. 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.

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.

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Form **7004** Application for Automatic Extension of Time To File Certain Business Income Tax, Information, and Other Returns  
 (Rev. December 2008) Department of the Treasury Internal Revenue Service  
 ▶ File a separate application for each return.  
 ▶ See separate instructions.

OMB No. 1545-0233

**Type or Print** Name: **SUN LAKE ESTATES HOMEOWNERS ASSOC.** Identifying number: **59-2593278**

File by the due date for the return for which an extension is requested. See instructions.

Number, street, and room or suite no. (if P.O. box, see instructions.): **5600 US HWY 1 N**

City, town, state, and ZIP code (if a foreign address, enter city, province or state, and country (follow the country's practice for entering postal code)): **COCOA FL 32927**

**Note. See instructions before completing this form.**

**Part I: Automatic 5-Month Extension Complete if Filing Form 1065, 1041, or 8804**

1a Enter the form code for the return that this application is for (see below)

Application Is For:	Form Code	Application Is For:	Form Code
Form 1065	09	Form 1041 (estate)	04
Form 8804	31	Form 1041 (trust)	05

**Part II: Automatic 6-Month Extension Complete if Filing Other Forms**

1b Enter the form code for the return that this application is for (see below)

Application Is For:	Form Code	Application Is For:	Form Code
Form 706-GS(D)	01	Form 1120-PC	21
Form 706-GS(T)	02	Form 1120-POL	22
Form 1041-N	06	Form 1120-REIT	23
Form 1041-QFT	07	Form 1120-RIC	24
Form 1042	08	Form 1120-S	25
Form 1065-B	10	Form 1120-SE	26
Form 1066	11	Form 9520	27
Form 1120	12	Form 9521	28
Form 1120-C	34	Form 9913	29
Form 1120-E	15	Form 9725	30
Form 1120-FSC	16	Form 9931	31
Form 1120-H	17	Form 9978	32
Form 1120-L	18	Form 9924	33
Form 1120-ND	19	Form 9926	34
Form 1120-ND (section 4951 taxes)	20		

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- 2 If the organization is a foreign corporation that does not have an office or place of business in the United States, check here
- 3 If the organization is a corporation and is the common parent of a group that intends to file a consolidated return, check here
- If checked, attach a schedule, listing the name, address, and Employer Identification Number (EIN) for each member covered by this application.

**Part III: All Filers Must Complete This Part**

- 4 If the organization is a corporation or partnership that qualifies under Regulations section 1.6081-5, check here
- 5a The application is for calendar year 2010, or tax year beginning \_\_\_\_\_ and ending \_\_\_\_\_
- 5b Short tax year. If this tax year is less than 12 months, check the reason:  
 Initial return  Final return  Change in accounting period  Consolidated return to be filed

6 Tentative total tax	0
7 Total payments and credits (see instructions)	0
8 Balance due. Subtract line 7 from line 6. Generally, you must deposit this amount using the Electronic Federal Tax Payment System (EFTPS), a Federal Tax Deposit (FTD) Coupon, or Electronic Funds Withdrawal (EFW) (see instructions for exceptions).	0

For Privacy Act and Paperwork Reduction Act Notices, see separate instructions. Form 7004 (Rev. 12-2008)

Staff-Assisted Rate Case Doclet No. 120078-SU - APA# 12-128-02-1 12-Month Period Ending April 30, 2012

Source: PBC



Florida Corporate Income/Franchise and Emergency Excise Tax Return

CSOL F-1120, R. 01/11 Rule 15C-9.99 Florida Administrative Code Effective 06/11

For calendar year 2010 or tax year beginning ending

812202010123100020050376359259327800001

Name SUN LAKE ESTATES HOMEOWNERS ASSOC.

Address 5600 US HWY 1 N COCOA FL 32927

Computation of Florida Net Income and Emergency Excise Tax

Table with 2 columns: Description and Amount. Rows include Federal taxable income, State income taxes, Additions to federal taxable income, Total of Lines 1, 2 and 3, Subtractions from federal taxable income, Adjusted federal income, Florida portion of adjusted federal income, Nonbusiness income allocated to Florida, Florida exemption, Florida net income, Tax due, Credits against the tax, Emergency excise tax due, Total corporate income/franchise and emergency excise tax due, Payment credits, Total amount due, Credit, Refund.



SUN LAKE ESTATES HOMEOWNERS ASSOC. FEIN 59-2593278

CSOL F-1120 R. 01/11 Page 2

Declaration of preparer and signature section. Includes fields for Signature of officer (must be an original signature), Date, Title (PRESIDENT), Preparer's signature (EDWARD R. CHRISTENSEN CPA), Date (07/23/11), Firm's name (DAVIES, HOUSER & SECREST, CPA, P.A.), P.O. BOX 129, COCOA, FL, and FEIN (59-2593278).

Part of a federal consolidated return? and Florida Secretary of State document number. Includes fields for Name of corporation, Location of corporate books, and Principal Business Activity Code (531390).

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.

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.

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Florida Corporate Income Tax Return

CSOL F-1120 R. 01/11

To ensure proper credit to your account, enclose your check with tax return when mailing. Return is Due 1st Day of the 4th Month After Close of the Taxable Year

Name SUN LAKE ESTATES HOMEOWNERS ASSOC. Address 5600 US HWY 1 N COCOA FL 32927

Table with 3 columns: ID, Amount, and another column. Rows include 592593278, 20100101, 20101231, 00000000, 001, 201, 0, 0.

8122 0 20101231 0002005037 6 3592593278 0000 1

59-2593278

Staff-Assisted Rate Case Docket No. 120078-SU - APA# 12-128-02-1 12-Month Period Ending April 30, 2012

Source: PBC



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CSOL F-1120 R. 01/11 Page 3

NAME SUN LAKE ESTATES HOMEOWNERS ASSOC. FEIN 59-2593278 TAXABLE YEAR ENDING 12/31/10

Schedule A - Computation of Emergency Excise Tax (for assets placed in service 1/1/81 to 12/31/86)	
1. Total depreciation expense deducted on federal Form 1120	1.
2. Florida portion of adjusted federal income from F-1120, Page 1, Line 7 or Schedule VI, Line 7 (see instructions)	2.
3. Loss carry forward (Enter the loss as a positive number)	3.
4. Subtract Line 3 from Line 2 and enter result here	4.
Note: If a loss carry forward shown on Line 3 exceeds a loss on Line 2, enter positive difference of the loss amounts shown	
5. Depreciation deducted pursuant to Internal Revenue Code (IRC) s. 168 for assets placed in service 1/1/81 to 12/31/86	5.
6. Straight-line depreciation deducted pursuant to IRC s. 168(b)(3) and 80% of amounts of depreciation previously based on Schedule VI (for assets placed in service 1/1/81 to 12/31/86)	6.
7. All depreciation deducted pursuant to IRC s. 168 directly related to any amount shown as nonbusiness income	7.
8. Subtract the sum of Lines 5 and 7 from the amount on Line 4 and enter result here	8.
9. Multiply Line 8 by .40 (40%) and enter result here	9.
10. Florida apportionment fraction shown in Schedule IIIA or IID of F-1120 (Taxpayers that are 100% in Florida enter 1.0)	10.
11. Multiply Line 9 by Line 10 and enter result here	11.
12. Determine the amount of depreciation deducted pursuant to IRC s. 168 (except pursuant to s. 168(b)(3)) used in computing nonbusiness income allocated to Florida; multiply the amount by .40 (40%), and enter result here	12.
13. Add Lines 11 and 12 and enter result here	13.
14. Loss shown on Line 4. Note: If Line 4 does not show a loss, enter 0	14.
15. The portion of the exemption provided in s. 220.14, F.S., not used for Chapter 220, F.S. purposes, if any, if none, enter 0	15.
16. Subtract the sum of Lines 14 and 15 from the amount on Line 13 and enter result here	16.
17. Multiply Line 16 by 2.5 (not 2.8%) and enter result here. Note: If Line 16 shows a loss, enter 0	17.
18. Total tax due (2.2% of Line 17)	18.
19. (a) Emergency excise tax credit	19.
(b) Emergency excise tax credit carryover (attach schedule) Total ▶	20.
20. Balance of tax due (enter on Page 1, Line 13)	0.

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Schedule I - Additions and/or Adjustments to Federal Taxable Income	Column (a) For page 1	Column (b) For Schedule VI, AMT
1. Interest included from federal taxable income (see instructions)	1.	1.
2. Undistributed net long-term capital gains (see instructions)	2.	2.
3. Net operating loss deduction (attach schedule)	3.	3.
4. Net capital loss carryover (attach schedule)	4.	4.
5. Excess charitable contribution carryover (attach schedule)	5.	5.
6. Employee benefit plan contribution carryover (attach schedule)	6.	6.
7. Enterprise zone jobs credit (Form F-1156Z)	7.	7.
8. Ad valorem taxes allowable as enterprise zone property tax credit (Form F-1156Z)	8.	8.
9. Guaranty association assessment(s) credit	9.	9.
10. Rural and/or urban high crime area job tax credits	10.	10.
11. State housing tax credit	11.	11.
12. Credit for contributions to nonprofit scholarship funding organizations	12.	12.
13. Renewable energy tax credits	13.	13.
14. New markets tax credit	14.	14.
15. Other additions (attach statement)	15.	15.
16. Total Lines 1 through 15 in Column (a) and (b). Enter totals for each column on Line 16, Column (a) total is also entered on Page 1, Line 3 (of the F-1120 return), Column (b) total is also entered on Schedule VI, Line 3.	16.	16.

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NAME SUN LAKE ESTATES HOMEOWNERS ASSOC. FEIN 59-2593278 TAXABLE YEAR ENDING 12/31/10

Schedule II - Subtractions from Federal Taxable Income	Column (a) For page 1	Column (b) For Schedule VI, AMT
1. Gross foreign source income less attributable expenses (a) Enter s. 79, IRC income \$ (b) plus s. 862, IRC dividends \$ Total ▶	1.	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.	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) See NOL Wrk	3.	3.
4. Florida net capital loss carryover deduction (see instructions)	4.	4.
5. Florida excess charitable contribution carryover (see instructions)	5.	5.
6. Florida employee benefit plan contribution carryover (see instructions)	6.	6.
7. Nonbusiness income (from Schedule R, Line 3)	7.	7.
8. Eligible net income of an international banking facility (see instructions)	8.	8.
9. s. 179, IRC expense above \$128,000 (see instructions)	9.	9.
10. s. 168(j), IRC special 50% bonus depreciation (see instructions)	10.	10.
11. Other subtractions (attach statement)	11.	11.
12. Total Lines 1 through 11 in Column (a) and (b). Enter totals for each column on Line 12, Column (a) total is also entered on Page 1, Line 5 (of the F-1120 return), Column (b) total is also entered on Schedule VI, Line 5.	12.	12.

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) Cot. (a) + Cot. (b) Rounded to Six Decimal Places	(d) Weight (If it zero, see note on Page 10 of the form.)	(e) Weighted Factors Rounded to Six Decimal Places
1. Property (Schedule III-B below)				3.25% or	
2. Payroll				3.25% or	
3. Sales (Schedule III-C below)				3.50% or	
4. Apportionment fraction (Sum of Lines 1, 2, and 3, Column (a)). Enter here and on Schedule IV, Line 2.					

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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 materials, work in process, finished goods				
2. Buildings and other depreciable assets				
3. Land owned				
4. Other tangible and intangible (franchise, etc.) 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	TOTAL WITHIN FLORIDA (Numerator)	TOTAL EVERYWHERE (Denominator)
1. Sales (gross receipts)	N/A	N/A
2. Sales delivered or shipped to Florida purchasers		
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			

Source: PBC

Staff-Assisted Rate Case Docket No. 120078-SU - APA# 12-128-02-1 12-Month Period Ending April 30, 2012

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NAME SUN LAKE ESTATES HOMEOWNERS ASSOC. FEN 59-2593278 TAXABLE YEAR ENDING 12/31/10

Schedule IV - Computation of Florida Portion of Adjusted Federal Income		
	Column (a) Adjusted Federal Income	Column (b) Adjusted AMT Income
1. Apportionable adjusted federal income from Pt. 1, Ln. 6 for Line 6, Schedule VI for AMT in Col. (b)	1.	1.
2. Florida apportionment fraction (Schedule III-A, Line 4 or Schedule III-D, Column (c))	2.	2.
3. Tentative apportioned adjusted federal income (multiply Line 1 by Line 2)	3.	3.
4. Net operating loss carryover apportioned to Florida (attach schedule; see instructions)	4.	4.
5. Net capital loss carryover apportioned to Florida (attach schedule; see instructions)	5.	5.
6. Excess charitable contribution carryover apportioned to Florida (attach schedule; see instructions)	6.	6.
7. Employee benefit plan contribution carryover apportioned to Florida (attach schedule; see inst.)	7.	7.
8. Total carryovers apportioned to Florida (add Lines 4 through 7)	8.	8.
9. Adjusted federal income apportioned to Florida (Line 3 less Line 8; see instructions)	9.	9.

Schedule V - Credits Against the Corporate Income/Franchise Tax		
1. Florida health maintenance organization credit (attach assessment notice)	1.	
2. Capital investment tax credit (attach certification letter)	2.	
3. Enterprise zone jobs credit (from Form F-11562 attached)	3.	
4. Community contribution tax credit (attach certification letter)	4.	
5. Enterprise zone property tax credit (from Form F-11562 attached)	5.	
6. Rural job tax credit (attach certification letter)	6.	
7. Urban high crime area job tax credit (attach certification letter)	7.	
8. Emergency excise tax (EET) credit (see instructions and attach schedule)	8.	
9. Hazardous waste facility tax credit	9.	
10. Florida alternative minimum tax (AMT) credit	10.	
11. Contaminated site rehabilitation tax credit (attach certification letter)	11.	
12. Child care tax credits (attach certification letter)	12.	
13. State housing tax credit (attach certification letter)	13.	
14. Credit for contributions to nonprofit scholarship funding organizations (attach certificate)	14.	
15. Florida renewable energy technologies investment tax credit	15.	
16. Florida renewable energy production tax credit	16.	
17. New markets tax credit	17.	
18. Jobs for the unemployed tax credit	18.	
19. Other credits (attach schedule)	19.	
20. Total credits against the tax (sum of Lines 1 through 19 not to exceed the amount on Page 1, Line 11) Enter total credits on Page 1, Line 12.	20.	

Schedule VI - Computation of Florida Alternative Minimum Tax (AMT)		
1. Federal alternative minimum taxable income after exemption (attach Federal Form 4626)	1.	
2. State income taxes deducted in computing federal taxable income (attach schedule)	2.	
3. Additions to federal taxable income (from Schedule I, Column (b))	3.	
4. Total of Lines 1 through 3	4.	
5. Subtractions from federal taxable income (from Schedule II, Column (b))	5.	
6. Adjusted federal alternative minimum taxable income (Line 4 minus Line 5)	6.	
7. Florida portion of adjusted federal income (see instructions)	7.	
8. Nonbusiness income allocated to Florida (see instructions)	8.	
9. Florida exemption	9.	
10. Florida net income (Line 7 plus Line 8 minus Line 9)	10.	
11. Florida alternative minimum tax due (3.3% of Line 10). See instructions for Page 1, Line 11	11.	

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NAME SUN LAKE ESTATES HOMEOWNERS ASSOC. FEN 59-2593278 TAXABLE YEAR ENDING 12/31/10

Schedule R - Nonbusiness Income		
Line 1. Nonbusiness income (loss) allocated to Florida	Type	Amount
Total allocated to Florida (Enter here and on Page 1, Line 6 or Schedule VI, Line 8 for AMT)		
Line 2. Nonbusiness income (loss) allocated elsewhere	Type	State/country allocated to
Total allocated elsewhere		
Line 3. Total nonbusiness income		
Grand total. Total of Lines 1 and 2 (Enter here and on Schedule II, Line 7)		

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Source: PBC

Staff-Assisted Rate Case  
Docket No. 120078-SU - APA# 12-128-02-1  
12-Month Period Ending April 30, 2012

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Form F-1120 FL NOL Carryover Worksheet 2010  
For calendar year 2010, or tax year beginning ending  
Name SUN LAKE ESTATES HOMEOWNERS ASSOC. Employer Identification Number 59-2593278

Preceding Taxable Year	Apportionment Fraction	Adj to NOL FL Inc (Loss) After Adj	Prior Year NOL Util (Inc Offset) Carryovers	Current Year Carryover NOL Utilized	Next Year Carryover
15th 12/31/95	1.000000				
14th 12/31/96	1.000000				
13th 12/31/97	1.000000				
12th 12/31/98	1.000000				
11th 12/31/99	1.000000				
10th 12/31/00	1.000000				
9th 12/31/01	1.000000				
8th 12/31/02	1.000000				
7th 12/31/03	1.000000				
6th 12/31/04	1.000000				
5th 12/31/05	1.000000				
4th 12/31/06	1.000000				
3rd 12/31/07	1.000000				
2nd 12/31/08	1.000000				
1st 12/31/09	1.000000				
NOL Carryover Available To Current Year					
Current Year	1.000000				
NOL Carryover Available To Next Year					

Adjustments to Federal Taxable Income

State income taxes deducted	
Schedule I additions	
Schedule II subtractions before NOL	
Apportionment fraction	
Schedule IV carryovers	
Net adjustments	

Current Year Income (Loss)

Federal Income (Loss)	0
Apportionment fraction	
Net adjustments	
Current Year Income (Loss)	

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Form F-1120 FL Contribution Carryover Worksheet 2010  
For calendar year 2010, or tax year beginning ending  
Name SUN LAKE ESTATES HOMEOWNERS ASSOC. Employer Identification Number 59-2593278

Preceding Tax Year	Fed Charitable App. Factor	Florida Excess Contributions	Prior Year Utilized	Prior Year Carryover	Current Year Carryovers Utilized	Next Year Carryover
5th 12/31/05	1.000000					
4th 12/31/06	1.000000					
3rd 12/31/07	1.000000					
2nd 12/31/08	1.000000					
1st 12/31/09	1.000000					
Charitable Contribution Carryover To Current Year				0		
Current Year	1.000000	0				0
Charitable Contribution Carryover Available To Next Year						0

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Staff-Assisted Rate Case  
Docket No. 120078-SU - APA# 12-128-02-1  
12-Month Period Ending April 30, 2012

Source: PBC



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

**U.S. Corporation Income Tax Return**  
For calendar year 2010 or tax year beginning ending  
2010

OMB No. 1545-0023

**1** Check if:  (a) Consolidated return (attach Form 990)  (b) Intergovernmental or foreign government owned return  (c) Personal holding company (see instructions)  (d) Schedule M-3 attached

**2** Name: **SUN LAKE ESTATES HOMEOWNERS ASSOC.**  
**3** Address: **5600 US HWY 1 N**  
**4** City/State/Zip: **COCOA FL 32927**

**5** Employer identification number: **59-2593278**  
**6** Date incorporated: **07/13/1983**

**7** Total assets (see instructions):

**1a** Gross receipts or sales: **2** **1c** **2**

**3** Cost of goods sold (Schedule A, line 8): **3** **2**

**4** Gross profit. Subtract line 3 from line 2c: **4** **3**

**5** Dividends (Schedule C, line 19): **5** **4**

**6** Interest: **6** **5**

**7** Gross rents: **7** **6**

**8** Gross royalties: **8** **7**

**9** Capital gain net income (attach Schedule D (Form 1120)):

**10** Net gain or (loss) from Form 4797, Part II, line 17 (attach Form 4797): **9**

**11** Other income (see instructions - attach schedule): **10**

**12** Total income. Add lines 3 through 10: **11**

**13** Compensation of officers (Schedule E, line 4): **12**

**14** Salaries and wages (less employment credits): **13**

**15** Repairs and maintenance: **14**

**16** Bad debts: **15**

**17** Rents: **16**

**18** Taxes and licenses: **17**

**19** Interest: **18**

**20** Charitable contributions: **19**

**21** Depreciation from Form 4562 not claimed on Schedule A or elsewhere on return (attach Form 4562): **20**

**22** Depreciation: **21**

**23** Advertising: **22**

**24** Pension, profit-sharing, etc., plans: **23**

**25** Employee benefit programs: **24**

**26** Domestic production activities deduction (attach Form 8903): **25**

**27** Other deductions (attach schedule): **26** See Stmt 1

**28** Total deductions. Add lines 12 through 26: **27**

**29** Taxable income before net operating loss deduction and special deductions. Subtract line 27 from line 11: **28**

**30** Less: a Net operating loss deduction (see instructions): **29a**

**31** Special deductions (Schedule C, line 20): **29b**

**32** Taxable income. Subtract line 29c from line 28 (see instructions): **30** **0**

**33** Total tax (Schedule J, line 10): **31** **0**

**34** 2009 overpayment credited to 2010: **32a**

**35** 2010 estimated tax payments: **32b**

**36** 2010 refund applied for on Form 4468: **32c**

**37** Tax deposited with Form 7004: **32d**

**38** Credits: (1) Form 2439: **32e**

**39** Refundable credits from Form 3600, line 19c, and Form 8827, line 6c: **32f**

**40** Estimated tax penalty (see instructions). Check if Form 2220 is attached: **33**

**41** Amount owed. If line 32h is smaller than the total of lines 31 and 33, enter amount owed: **34**

**42** Overpayment. If line 32h is larger than the total of lines 31 and 33, enter amount overpaid: **35**

**43** Enter amount from line 35 you want credited to 2011 estimated tax: **36**

**Sign Here**

Signature of officer: **THAD TERRY** Date: \_\_\_\_\_ Title: **PRESIDENT**

Preparer's name: **EDWARD R. CHRISTENSEN CPA** Date: **07/23/11** Check self-employed:  P/TIN: **P00039868**

Firm's name: **DAVIES, HOUSER & SECREST, CPA, P.A.** Firm's EIN: \_\_\_\_\_

Firm's address: **P.O. BOX 129** Phone no.: **32923-0129**

**COCOA, FL 32923-0129** **321-636-0426**

**Form 1120 (2010) SUN LAKE ESTATES HOMEOWNERS ASSOC. 59-2593278** Page 2

**Schedule A: Cost of Goods Sold (see instructions)**

1	Inventory at beginning of year	1
2	Purchases	2
3	Cost of labor	3
4	Additional section 263A costs (attach schedule)	Stat 2
5	Other costs (attach schedule)	Stat 3
6	Total. Add lines 1 through 5	
7	Inventory at end of year	
8	Cost of goods sold. Subtract line 7 from line 6. Enter here and on page 1, line 2	

**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.)

**9b** Check if there was a writedown of subnormal goods:

**9c** Check if the LIFO inventory method was adopted this tax year for any goods (if checked, attach Form 970):

**9d** If the LIFO inventory method was used for the tax year, enter percentage (or amounts) of closing inventory computed under LIFO:

**9e** If property is produced or acquired for resale, do the rules of section 263A apply to the corporation?  Yes  No

**9f** Was there any change in determining quantities, cost, or valuations between opening and closing inventory? If "Yes," attach explanation:  Yes  No

**Schedule C: Dividends and Special Deductions (see instructions)**

	(a) Dividends received	(b) %	(c) Special deductions (a) x (b)
1	Dividends from less-than-20%-owned domestic corporations (other than debt-financed stock)	70	
2	Dividends from 20%-or-more-owned domestic corporations (other than debt-financed stock)	80	
3	Dividends on debt-financed stock of domestic and foreign corporations	various	
4	Dividends on certain preferred stock of less-than-20%-owned public utilities	42	
5	Dividends on certain preferred stock of 20%-or-more-owned public utilities	48	
6	Dividends from less-than-20%-owned foreign corporations (other than FSCs)	70	
7	Dividends from 20%-or-more-owned foreign corporations (other than FSCs)	80	
8	Dividends from wholly owned foreign subsidiaries	100	
9	Total. Add lines 1 through 8. See instructions for limitation		
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	Dividends from foreign corporations not included on lines 3, 6, 7, 8, 11, or 12		
14	Income from controlled foreign corporations under subpart F (attach Form(s) 5471)		
15	Foreign dividend gross-up		
16	IC-DISC and former DISC dividends not included on lines 1, 2, or 3		
17	Other dividends		
18	Deduction for dividends paid on certain preferred stock of public utilities		
19	Total dividends. Add lines 1 through 17. Enter here and on page 1, line 4		
20	Total special deductions. Add lines 9, 10, 11, 12, and 18. Enter here and on page 1, line 29b		

**Schedule E: Compensation of Officers (see instructions for page 1, line 12)**

**Note: Complete Schedule E only if total receipts (line 1a plus lines 4 through 10 on page 1) are \$500,000 or more.**

(a) Name of officer	(b) Social security number	(c) Percent of line devoted to business	Percent of corporation stock owned		(f) Amount of compensation
			(d) Common	(e) Preferred	
1					
2					
3					
4					
5					
6					
7					
8					
9					
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2010-2010

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**Schedule J Tax Computation** (see instructions)

1 Check if the corporation is a member of a controlled group (attach Schedule O (Form 1120))

2 Income tax. Check if a qualified personal service corporation (see instructions)

3 Alternative minimum tax (attach Form 4626)

4 Add lines 2 and 3

5a Foreign tax credit (attach Form 1118)

b Credit from Form 8534, line 29

c General business credit (attach Form 3800)

d Credit for prior year minimum tax (attach Form 8527)

e Bond credits from Form 8912

f Total credits. Add lines 5a through 5e

7 Subtract line 6 from line 4

8 Personal holding company tax (attach Schedule PH (Form 1120))

9 Other taxes. Check if from:  Form 4255  Form 8611  Form 8697  
 Form 5866  Form 5902  Other (attach schedule)

10 Total tax. Add lines 7 through 9. Enter here and on page 1, line 31

**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.  531390

b Business activity  HOMEOWNERS ASSOC.

c Product or service  SERVICES

3 Is the corporation a subsidiary in an affiliated group or a parent-subidiary controlled group? 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)

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)

6 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, Affiliated Schedule? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (iv).

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

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**Schedule K Continued**

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).

(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 318.) If "Yes," file Form 9432, Corporate Report of Nondividend Distributions.

7 At any time during the tax year, did one foreign person own, directly or indirectly, at least 25% of (a) the total voting power of all classes of the corporation's stock entitled to vote or (b) the total value of all classes of the corporation's stock? For rules of attribution, see section 318. If "Yes," enter:

(i) Percentage owned  and (ii) 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 Form 5472s attached.

8 Check this box if the corporation issued stock during the tax year with original issue discount (OID). If checked, the corporation may have to file Form 10811, Information Return for Original Issue Discount Instruments.

9 Enter the amount of tax-exempt interest received or accrued during the 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

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 on line 29a)  \$ [REDACTED]

13 Are the corporation's total receipts (line 1a plus lines 4 through 10 on page 1) for the tax year and its total assets at the end of the tax year less than \$250,000?

If "Yes," the corporation is not required to complete Schedules L, M-1, and M-2 on page 5. 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)?

If "Yes," complete and attach Schedule UTP.

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Balance Sheets per Books. Table with columns: Beginning of tax year, End of tax year. Rows include Assets (Cash, Trade notes, Inventories, etc.) and Liabilities and Shareholders' Equity (Accounts payable, Mortgages, etc.).

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

Table for Schedule M-1 reconciliation. Rows include Net income (loss) per books, Federal income tax per books, Expenses recorded on books this year not deducted on the return, etc.

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

Table for Schedule M-2 analysis. Rows include Balance at beginning of year, Net income (loss) per books, Other increases, and Balance at end of year.

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Department of the Treasury Internal Revenue Service (97) See separate instructions. Attach to your tax return. 2010 Attachment Sequence No. 67

Name(s) shown on return: SUN LAKE ESTATES HOMEOWNERS ASSOC. Identifying number: 59-2593278

Schedule A Part I Election To Expense Certain Property Under Section 179

Table for Part I election. Rows include Maximum amount, Total cost of section 179 property placed in service, Threshold cost of section 179 property before reduction in limitation, etc.

Table for Part II Special Depreciation Allowance and Other Depreciation. Rows include Listed property, Total elected cost of section 179 property, Tentative deduction, etc.

Part III MACRS Depreciation (Do not include listed property.)

Table for Part III MACRS Depreciation. Rows include MACRS deductions for assets placed in service in tax years beginning before 2010.

Section B—Assets Placed in Service During 2010 Tax Year Using the General Depreciation System

Table for Section B assets. Columns: Classification of property, Month and year placed in service, Date for depreciation, Recovery period, Convention, Method, Depreciation deduction.

Section C—Assets Placed in Service During 2010 Tax Year Using the Alternative Depreciation System

Table for Section C assets. Columns: Class life, Month and year placed in service, Date for depreciation, Recovery period, Convention, Method, Depreciation deduction.

Part IV Summary (See instructions.)

Table for Part IV summary. Rows include Listed property, Total, and For assets shown above and placed in service during the current year.

For Paperwork Reduction Act Notice, see separate instructions. Form 4562 (2010) There are no amounts for Page 2

Staff-Assisted Rate Case Docket No. 120078-SU - APA# 12-128-02-1 12-Month Period Ending April 30, 2012

Source: PBC

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Form **1120** Charitable Contribution Carryover Worksheet **2010**  
 For calendar year 2010 or tax year beginning ending  
 Name **SUN LAKE ESTATES HOMEOWNERS ASSOC.** Employer Identification Number **59-2593278**

Regular Tax Calculations						
Preceding Tax Year	Excess Contributions	Prior Year		Current Year		Next Year
		Utilized Or Reclaimed to NOL	Carryover	Reclassified to NOL (Reg. Sec. 1.170A-11(c)(2))	Carryovers Utilized	Carryover
12/31/05						
12/31/06						
12/31/07						
12/31/08						
12/31/09						
Charitable Contribution Carryover To Current Year - Regular				0		
Current Year				0		0
Charitable Contribution Carryover Available To Next Year						0

Alternative Minimum Tax Calculations						
Preceding Tax Year	Excess Contributions	Prior Year		Current Year		Next Year
		Utilized Or Reclaimed to NOL	Carryover	Reclassified to NOL (Reg. Sec. 1.170A-11(c)(2))	Carryovers Utilized	Carryover
12/31/05						
12/31/06						
12/31/07						
12/31/08						
12/31/09						
AMT Charitable Contribution Carryover To Current Year				0		
Current Year				0		0
AMT Charitable Contribution Carryover Available To Next Year						0

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Form **1120** Net Operating Loss Carryover Worksheet - Regular Tax **2010**  
 For calendar year 2010 or tax year beginning ending  
 Name **SUN LAKE ESTATES HOMEOWNERS ASSOC.** Employer Identification Number **59-2593278**

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
12/31/95					
12/31/96					
12/31/97					
12/31/98					
12/31/99					
12/31/00					
12/31/01					
12/31/02					
12/31/03					
12/31/04					
12/31/05					
12/31/06					
12/31/07					
12/31/08					
12/31/09					
NOL Carryover Available To Current Year					
Current Year					0
NOL Carryover Available To Next Year					

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Staff-Assisted Rate Case  
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12-Month Period Ending April 30, 2012

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Net Operating Loss Carryover Worksheet - AMT  
 Form 1120 For calendar year 2010 or tax year beginning and ending 2010

Name: SUN LAKE ESTATES HOMEOWNERS ASSOC.  
 Employer Identification Number: 59-2593278

Preceding Taxable Year	Adj. To NOL Incl(Loss) After Adj.	Prior Year		Current Year	Next Year
		NOL Utilized (Income Offset)	Carryovers	Income Offset By NOL Carryback/Carryover/ NOL Utilized	Carryover
15th 12/31/95					
14th 12/31/96					
13th 12/31/97					
12th 12/31/98					
11th 12/31/99					
10th 12/31/00					
9th 12/31/01					
8th 12/31/02					
7th 12/31/03					
6th 12/31/04					
5th 12/31/05					
4th 12/31/06					
3rd 12/31/07					
2nd 12/31/08					
1st 12/31/09					
NOL Carryover Available To Current Year					
Current Year					
NOL Carryover Available To Next Year					

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9626 SUN LAKE ESTATES HOMEOWNERS ASSOC. 7/23/2011 2:02 PM  
 59-2593278 Federal Statements  
 FYE: 12/31/2010

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

Description	Amount
Licenses and Fees	\$ [REDACTED]
Office Expense	\$ [REDACTED]
Bank Charges	\$ [REDACTED]
Total	\$ [REDACTED]

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Staff-Assisted Rate Case  
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Statement 2 - Form 1120, Page 2, Schedule A, Line 4 - Additional 263A Costs

Description	Amount
Depreciation	\$ [REDACTED]
Total	\$ [REDACTED]

Statement 3 - Form 1120, Page 2, Schedule A, Line 5 - Other Costs

Description	Amount
Supplies	\$ [REDACTED]
Chemicals	[REDACTED]
Repairs	[REDACTED]
Yard Care	[REDACTED]
Management Services	[REDACTED]
Water	[REDACTED]
Electricity	[REDACTED]
Total	\$ [REDACTED]

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Statement 4 - Form 1120, Page 5, Schedule L, Line 9 - Other Investments

Description	Beginning of Year	End of Year
Phase III Investment	\$ [REDACTED]	\$ [REDACTED]
Total	\$ [REDACTED]	\$ [REDACTED]

Statement 5 - Form 1120, Page 5, Schedule L, Line 21 - Other Liabilities

Description	Beginning of Year	End of Year
Impact Fees	\$ [REDACTED]	\$ [REDACTED]
Total	\$ [REDACTED]	\$ [REDACTED]

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10/2/11

Asset	Description	Date In Service	Cost	Basis for Depr.	FL Prior	FL Current	Federal Current	Difference Fed - FL
<b>Prior MACRS:</b>								
8	Sewer Plant Machine	12/05/07	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
<b>Other Depreciation:</b>								
1	Sewer plant	1/01/88	0	0	0	0	[REDACTED]	[REDACTED]
2	Pump	12/22/88	0	0	0	0	[REDACTED]	[REDACTED]
3	Sewer expansion	1/28/93	0	0	0	0	[REDACTED]	[REDACTED]
4	Sewer expansion	9/16/93	0	0	0	0	[REDACTED]	[REDACTED]
5	Scales-wgh chlor bottles	10/27/88	0	0	0	0	[REDACTED]	[REDACTED]
6	Trees Sharpes Lake	1/25/90	0	0	0	0	[REDACTED]	[REDACTED]
7	Pressure washer	6/15/98	0	0	0	0	[REDACTED]	[REDACTED]
Total Other Depreciation			0	0	0	0	[REDACTED]	[REDACTED]
Total ACRS and Other Depreciation			0	0	0	0	[REDACTED]	[REDACTED]
<b>Grand Totals</b>			[REDACTED]					
Less: Dispositions			[REDACTED]					
Less: Start-up/Org Expense			[REDACTED]					
Net Grand Totals			[REDACTED]					

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Asset	Description	Date In Service	Cost	FL
<b>Prior MACRS:</b>				
6	Trees Sharpes Lake	1/25/90	[REDACTED]	[REDACTED]
7	Pressure washer	6/15/98	[REDACTED]	[REDACTED]
8	Sewer Plant Machine	12/05/07	[REDACTED]	[REDACTED]
<b>Other Depreciation:</b>				
1	Sewer plant	1/01/88	0	0
2	Pump	12/22/88	0	0
3	Sewer expansion	1/28/93	0	0
4	Sewer expansion	9/16/93	0	0
5	Scales-wgh chlor bottles	10/27/88	0	0
Total Other Depreciation			0	0
Total ACRS and Other Depreciation			0	0
<b>Grand Totals</b>			[REDACTED]	[REDACTED]

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Form **F-1120** **FL Two Year Comparison Worksheet** **2009 & 2010**

Name **SUN LAKE ESTATES HOMEOWNERS ASSOC.** Federal Employer Identification No. **59-2593278**

	2009	2010	Differences
Additions	Federal taxable income		
	State income taxes		
	Total interest excluded		
	Undistributed net long-term capital gains		
	Net operating loss deducted		
	Net capital loss carryover		
	Excess charitable contribution carryover		
	Employee benefit plan contribution carryover		
	Enterprise zone jobs credit		
	Ad valorem taxes		
	Guaranty association credit		
	Rural/urban high crime job credit		
	State housing tax credit		
	Nonprofit scholarship contribution credit		
	Renewable energy tax credits		
	Section 179 expense deduction addback		
	Special 50% depreciation allowance addback		
	Deferred income from cancellation of debt		
	New markets tax credit		
	Other additions		
<b>Total federal taxable income plus additions</b>			
Subtractions	Foreign source income		
	Subpart F income		
	FL NOL (from Sch II or Sch IV)		
	FL net capital loss (from Sch I or Sch II)		
	FL excess charitable contribution carryover (Sch I or IV)		
	FL employee benefit plan contribution carryover (Sch II or IV)		
	Nonbusiness income		
	International banking facility		
	Section 179 expense above \$126,000		
	Special bonus depreciation expense		
Other subtractions			
<b>Total subtractions</b>			
Tax and Payments	Adjusted federal income		
	Apportionment factor		
	Adjusted federal income apportioned to Florida		
	Nonbusiness income allocated to Florida		
	Florida exemption		
	Florida net income		
	Florida income tax		
	Tax credits		
	Emergency excise tax		
	Penalty F-2220		
	Penalty - other		
	Interest F-2220		
	Interest - other		
	Total income tax, interest and penalty due		
	Estimated tax payments and prior year overpayment		
Tax deposited with F-7004			
Total payments			
Net tax due	0	0	
Overpayment credited to next year's estimated tax			
Amount of overpayment refunded			

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