

Form at bottom of page.

**Installment 1 -** File and Pay by the 15th day of the 4th month of taxable year. When the due date falls on a weekend or holiday, the deadline to file and pay without penalty is extended to the next business day.

**If no payment is due, do not mail this form.**

EFT TAXPAYERS: DO NOT MAIL THIS FORM.

**WHERE TO FILE:** Using blue or black ink, make check or money order payable to the "Franchise Tax Board." Write the corporation number and "2010 Form 100-ES" on the check or money order. Detach form below. Enclose, but **do not** staple, payment with form and mail to:

**FRANCHISE TAX BOARD  
PO BOX 942857  
SACRAMENTO CA 94257-0531**

Make all checks or money orders payable in U.S. dollars and drawn against a U.S. financial institution.

**WORKSHEET FOR COMPUTATION OF ESTIMATED TAX**  
(Complete and retain for your files)

1. Estimated Income .....	\$	<u>-158,679.</u>
2. Tax - Amount on line 1 X <u>8.8400%</u> .....	\$	<u>800.</u>
3. Tax Credits .....	\$	
4. Balance (subtract line 3 from line 2) (not less than minimum tax, if applicable) .....	\$	<u>800.</u>
5. Other taxes .....	\$	
6. Total estimated tax - Add lines 4 and 5 (not less than minimum tax, if applicable) .....	\$	<u>800.</u>
7. Overpayment on prior year return designated to be credited to this estimate .....	\$	
8. Amount already paid towards estimated tax .....	\$	
9. Net estimated tax .....	\$	<u>800.</u>

----- DETACH HERE ----- IF NO PAYMENT IS DUE, DO NOT MAIL THIS FORM ----- DETACH HERE -----

TAXABLE YEAR

**2010**

**Corporation Estimated Tax**

**Installment 1  
CALIFORNIA FORM  
100-ES**

2424198 USCL 88-0338090 10 FORM 1  
TYB 07-01-10 TYE 06-30-11  
USCL CORPORATION

2433 GARFIELD AVENUE  
CARMICHAEL CA 95608-5121

Est Tax Amt 800. QSub Tax Amt  
Total Payment Amt 800.

### Form at bottom of page.

**Installment 2 -** File and Pay by the 15th day of the 6th month of taxable year. When the due date falls on a weekend or holiday, the deadline to file and pay without penalty is extended to the next business day.  
**If no payment is due, do not mail this form.**  
EFT TAXPAYERS: DO NOT MAIL THIS FORM.

**WHERE TO FILE:** Using blue or black ink, make check or money order payable to the "Franchise Tax Board." Write the corporation number and "2010 Form 100-ES", on the check or money order. Detach form below. Enclose, but do **not** staple, payment with form and mail to:

**FRANCHISE TAX BOARD  
PO BOX 942857  
SACRAMENTO CA 94257-0531**

Make all checks or money orders payable in U.S. dollars and drawn against a U.S. financial institution.

-----DETACH HERE ----- IF NO PAYMENT IS DUE, DO NOT MAIL THIS FORM ----- DETACH HERE -----

TAXABLE YEAR

**Installment 2**  
CALIFORNIA FORM  
**100-ES**

### 2010 Corporation Estimated Tax

2424198	88-0338090	10	FORM 1
TYB 07-01-10	TYE 06-30-11		
USCL CORPORATION			

2433 GARFIELD AVENUE  
CARMICHAEL CA 95608-5121

Est Tax Amt	QSub Tax Amt	Total Payment Amt
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**Form at bottom of page.**

**Installment 3 -** File and Pay by the 15th day of the 9th month of taxable year. When the due date falls on a weekend or holiday, the deadline to file and pay without penalty is extended to the next business day.  
**If no payment is due, do not mail this form.**  
 EFT TAXPAYERS: DO NOT MAIL THIS FORM.

**WHERE TO FILE:** Using blue or black ink, make check or money order payable to the "Franchise Tax Board." Write the corporation number and "2010 Form 100-ES", on the check or money order. Detach form below. Enclose, but do **not** staple, payment with form and mail to:

**FRANCHISE TAX BOARD  
 PO BOX 942857  
 SACRAMENTO CA 94257-0531**

Make all checks or money orders payable in U.S. dollars and drawn against a U.S. financial institution.

-----DETACH HERE ----- IF NO PAYMENT IS DUE, DO NOT MAIL THIS FORM ----- DETACH HERE -----

TAXABLE YEAR

**Installment 3**  
CALIFORNIA FORM

**2010 Corporation Estimated Tax**

**100-ES**

2424198                      88-0338090                      10                      FORM 1  
 TYB 07-01-10              TYE 06-30-11  
 USCL CORPORATION

2433 GARFIELD AVENUE  
 CARMICHAEL                      CA 95608-5121

Est Tax Amt                                      QSub Tax Amt                                      Total Payment Amt

**Form at bottom of page.**

**Installment 4 -** File and Pay by the 15th day of the 12th month of taxable year. When the due date falls on a weekend or holiday, the deadline to file and pay without penalty is extended to the next business day.

**If no payment is due, do not mail this form.**  
EFT TAXPAYERS: DO NOT MAIL THIS FORM.

**WHERE TO FILE:** Using blue or black ink, make check or money order payable to the "Franchise Tax Board." Write the corporation number and "2010 Form 100-ES", on the check or money order. Detach form below. Enclose, but do **not** staple, payment with form and mail to:

**FRANCHISE TAX BOARD  
PO BOX 942857  
SACRAMENTO CA 94257-0531**

Make all checks or money orders payable in U.S. dollars and drawn against a U.S. financial institution.

-----DETACH HERE ----- IF NO PAYMENT IS DUE, DO NOT MAIL THIS FORM ----- DETACH HERE -----

TAXABLE YEAR

**2010**

**Corporation Estimated Tax**

**Installment 4  
CALIFORNIA FORM**

**100-ES**

2424198                      88-0338090                      10                      FORM 1  
TYB 07-01-10              TYE 06-30-11  
USCL CORPORATION

2433 GARFIELD AVENUE  
CARMICHAEL              CA 95608-5121

Est Tax Amt                      QSub Tax Amt                      Total Payment Amt

**2009 Underpayment of Estimated Tax by Corporations**

**5806**

For calendar year 2009 or fiscal year beginning month **JULY** day **1** year 2009, and ending month **JUNE** day **30** year **2010**

Corporation name **USCL CORPORATION** California corporation number **2424198**

**Part I Figure the Underpayment** If line 7 shows an underpayment for any installment, complete the remainder of this form.

1 Current year's tax. See instructions				1	800.
	(a)	(b)	(c)	(d)	
2 Installment due dates. See instructions	2	10/15/2009	12/15/2009	03/15/2010	06/15/2010
3 Percentage required. See instructions	3	30% (not less than min.)	60% less 1st	80% less prior	100% less prior
4 Amount due. See instructions	4	800.			
5 a Amount paid or credited for each installment	5a				
b Overpayment from previous installment	5b				
6 Add line 5a and line 5b	6				
7 Underpayment (subtract line 6 from line 4). See instructions. Overpayment (subtract line 4 from line 6). (If line 7 shows an underpayment for any installment, go to <b>Part IV, Exceptions Worksheets.</b> )	7	800.			

**Part II Exceptions to the Penalty**  
If Exception A, line 8a is met for all four installments, **do not** attach this form to the return.

	(check the applicable boxes)	Yes	No	Yes	No	Yes	No	Yes	No
8 a Exception A - Regular Corporations, line 26	8a		X		X		X		X
b Exception A - Large Corporations	8b								
9 Exception B (line 42) met?	9								
10 Exception C (line 64) met?	10								

**Part III Figure the Penalty** If line 7 shows an underpayment for any installment and one of the three exceptions was not met, figure the penalty for that installment by completing line 11 through line 22.

11 Enter the earlier of the payment date, or the 15th day of the 3rd month after the close of the taxable year. Form 109 filers, see instructions.	11	09/15/2010			
12 Number of days from date shown on line 2 to date shown on line 11	12	335			
13 Number of days on line 12 before 7/01/09	13				
14 Number of days on line 12 after 6/30/09 and before 1/01/10	14	77			
15 Number of days on line 12 after 12/31/09 and before 7/01/10	15	181			
16 Number of days on line 12 after 6/30/10 and before 1/01/11. See instr.	16	77			
17 Number of days on line 12 after 12/31/10 and before 2/15/11	17				
18 Number of days on line 13 Number of days in taxable year x 5% x line 7	18				
19 Number of days on line 14 Number of days in taxable year x 5% x line 7	19	8.			
20 Number of days on line 15 Number of days in taxable year x 4% x line 7	20	16.			
21 Number of days on line 16 Number of days in taxable year x % (see instr.) x line 7	21	7.			
22 Number of days on line 17 Number of days in taxable year x % (see instr.) x line 7	22				
22a Add amounts for each column from line 18 through line 22	22a	31.			
22b Total estimated penalty due. Add line 22a, column (a) through column (d). Enter here and on Form 100, line 42a; Form 100W, line 41a; Form 100S, line 41a; or Form 109, line 25	22b	SEE STATEMENT 1			31.

For calendar year 2009 or fiscal year beginning month **JULY** day **1** year **2009**, and ending month **JUNE** day **30** year **2010**

Corporation name <b>USCL CORPORATION</b>		California corporation number <b>2424198</b>
Address (suite, room, or PMB no.) <b>2433 GARFIELD AVENUE</b>		FEIN <b>88-0338090</b>
City <b>CARMICHAEL</b>	State <b>CA</b>	ZIP Code <b>95608-5121</b>

**Schedule Q Questions**

**A 1. FINAL RETURN?** •  Dissolved  Surrendered (withdrawn)  
 Merged/Reorganized  IRC Section 338 sale  QSub election.  
 Enter date • \_\_\_\_\_

**2. DEFERRED INCOME.** Did this corporation elect to defer income from the discharge of indebtedness as described in IRC Section 108(i) for federal purposes? ..... •  Yes  No  
 If "Yes," enter the federal deferred income from discharge of indebtedness ..... • \$ \_\_\_\_\_

**B 1. Is income incl in a combined report of a unitary group?** ..... •  Yes  No

**2. If "Yes," indicate:**  wholly within CA (R&TC 25101.15)  
 within and outside of CA

**3. Is there a change in the members listed in Schedule R-7 from the prior year?** ..... •  Yes  No

**4. Enter the number of members (including parent or key corporation) listed in the Schedule R-7, Part I, Section A, subject to income or franchise tax.** ..... • \_\_\_\_\_

**5. Is form FTB 3544 attached to the return?** ... •  Yes  No

<b>State Adjustments</b>	1 Net income (loss) before state adjustments. See instructions	• 1	-158,679.00
	2 Amount deducted for foreign or domestic tax based on income or profits from Schedule A	• 2	00
	3 Amount deducted for tax under the provisions of the Corporation Tax Law from Schedule A	• 3	00
	4 Interest on government obligations	• 4	00
	5 Net California capital gain from Side 5, Schedule D, line 11	• 5	00
	6 Depreciation and amortization in excess of amount allowed under California law. Attach form FTB 3885	• 6	00
	7 Net income from corporations not included in federal consolidated return. See instructions	• 7	00
	8 Other additions. Attach schedule(s)	• 8	00
	9 Total. Add line 1 through line 8	• 9	-158,679.00
	10 Intercompany dividend deduction. Attach Schedule H (100)	• 10	00
	11 Dividends received deduction. Attach Schedule H (100)	• 11	00
	12 Additional depreciation allowed under CA law. Attach form FTB 3885	• 12	00
	13 Capital gain from federal Form 1120, line 8	• 13	00
	14 Contributions <b>SEE STATEMENT 2</b>	• 14	0.00
	15 EZ, LAMBRA, or TTA business expense and EZ net interest deduction	• 15	00
	16 Other deductions. Attach schedule(s)	• 16	00
	17 Total. Add line 10 through line 16	• 17	00
	18 Net income (loss) after state adjustments. Subtract line 17 from line 9.	• 18	-158,679.00
<b>CA Net Income</b>	19 Net income (loss) for state purposes. Complete Sch. R if apportioning income. See instructions	• 19	-158,679.00
	20 Net operating loss (NOL) carryover deduction. See instructions	• 20	00
	21 Pierce's disease, EZ, LARZ, TTA, or LAMBRA NOL carryover deduction. See instructions	• 21	00
	22 Disaster loss carryover deduction. See instructions	• 22	00
	23 Net income for tax purposes. Combine line 20 through line 22. Then, subtract from line 19	• 23	-158,679.00
<b>Taxes</b>	24 Tax. <b>8.8400</b> % x line 23 (not less than minimum franchise tax, if applicable)	• 24	800.00
	25 New jobs credit a) amount generated b) amount claimed	• 25b	00
	26a Credit name _____ code no. _____ amount	▶ 26a	00
	26b Credit name _____ code no. _____ amount	▶ 26b	00
	27 To claim more than two credits, see instructions	• 27	00
	28 Add line 25b through line 27	• 28	00
	29 Balance. Subtract line 28 from line 24 (not less than minimum franchise tax, if applicable)	• 29	800.00
	30 Alternative minimum tax. Attach Schedule P (100). See instructions	• 30	00
	31 Total tax. Add line 29 and line 30	• 31	800.00
	<b>Payments</b>	32 Overpayment from prior year allowed as a credit	• 32
33 2009 Estimated tax payments. See instructions		• 33	00
34 2009 Resident/nonresident or real estate withholding. See instructions.		• 34	00
35 Amount paid with extension of time to file tax return		• 35	00
36 Total payments. Add line 32 through line 35		• 36	00

Refund or Amount Due	37 Franchise or income tax due. If line 31 is more than line 36, subtract line 36 from line 31. Go to line 40	• 37	800.00
	38 Overpayment. If line 36 is more than line 31, subtract line 31 from line 36	• 38	00
	39 Amount of line 38 to be credited to 2010 estimated tax	• 39	00
	40 Use Tax. This is not a total line. See instructions	• 40	00
	41 Refund. If the sum of line 39 and line 40 is less than line 38, then subtract the result from line 38. See instructions to have the refund directly deposited. a. Routing number	• 41	00
	b Type: Checking <input type="checkbox"/> Savings <input type="checkbox"/> c Account number	• 41a • 41c	
42 a Penalties and interest SEE STATEMENT 4	• 42	112.00	
b <input type="checkbox"/> Check if estimate penalty computed using Exception B or C. See instructions			
43 Total amount due. Add line 37, line 39, line 40, and line 42a. Then, subtract line 38 from the result	43	912.00	

**Schedule Q Questions (continued from Side 1)**

**C** If the corporation filed on a water's edge basis pursuant to R&TC Sections 25110 and 25113 in previous years, enter the date the water's edge election ended • \_\_\_\_\_

**D** Was the corporation's income included in a consolidated federal return? •  Yes  No

**E** Principal business activity code. (Do not leave blank): • 541330  
Business activity ENGINEERING SERVICES  
Product or service CONSULTING

**F** Date incorporated: 05/10/1995 • Where: State NV Country \_\_\_\_\_

**G** Date business began in California or date income was first derived from California sources • 05/10/1995

**H** First return? •  Yes  No If "Yes" and this corporation is a successor to a previously existing business, check the appropriate box.  
• (1)  sole proprietorship (2)  partnership (3)  joint venture (4)  corporation (5)  other  
(attach statement showing name, address and FEIN/SSN/ITIN of previous business)

**I** "Doing business as" name. • \_\_\_\_\_

**J** 1. For this taxable year, was there a change in control or majority ownership for this corporation or any of its subsidiaries that owned or leased real property in California? •  Yes  No

2. For this taxable year, did this corporation or any of its subsidiaries acquire control or majority ownership of any other legal entity that owned or leased real property in California? •  Yes  No

3. If this corporation or any of its subsidiaries owned or leased real property in California, has more than 50% of the voting stock of any one of them cumulatively transferred in one or more transactions since March 1, 1975, which was not reported on a previous year's tax return? •  Yes  No  
(Penalties may apply - see instructions.)

**K** At any time during the taxable year, was more than 50% of the voting stock:  
1. Of the corporation owned by any single interest? •  Yes  No  
2. Of another corporation owned by this corporation? •  Yes  No

3. Of this and one or more other corporations owned or controlled, directly or indirectly, by the same interests? •  Yes  No  
If 1 or 3 is "Yes" enter the country of the ultimate parent \_\_\_\_\_

If 1, 2, or 3 is "Yes," furnish a statement of ownership indicating pertinent names, addresses, and percentages of stock owned. If the owner(s) is an individual, provide the SSN/ITIN.

**L** Has the corp included a reportable transaction or listed transaction within this return? (See instructions for definitions.) If yes, complete and attach federal Form 8886 for each transaction. •  Yes  No

**M** Is this corporation apportioning income to California using Schedule R? •  Yes  No

**N** How many affiliates in the combined report are claiming immunity from taxation in California under Public Law 86-272? • \_\_\_\_\_ 0

**O** Corporation headquarters are: • (1)  Within California  
(2)  Outside of California, within the U.S. (3)  Outside of the U.S.

**P** Location of principal accounting records SEE STATEMENT 3

**Q** Accounting method: • (1)  Cash (2)  Accrual (3)  Other

**R** Does this corporation or any of its subsidiaries have a Deferred Intercompany Stock Account (DISA)? •  Yes  No  
Is "Yes," enter the total balance of all DISAs • \$ \_\_\_\_\_

**S** Is this corporation or any of its subsidiaries a RIC? •  Yes  No

**T** Is this corporation treated as a REMIC for California purposes? •  Yes  No

**U** Is this corporation a REIT for California purposes? •  Yes  No

**V** Is this corporation an LLC or limited partnership electing to be taxed as a corporation for federal purposes? •  Yes  No

**W** Is this corporation to be treated as a credit union? •  Yes  No

**X** Is the corporation under audit by the IRS or has it been audited by the IRS in a prior year? •  Yes  No

**Y** Have all required information returns (e.g. federal Forms 1099, 5471, 5472, 8300, 8865, etc.) been filed with the Franchise Tax Board?  N/A  Yes  No

**Z** Does the taxpayer (or any corporation of the taxpayer's combined group, if applicable) own 80% or more of the stock of an insurance company?  Yes  No

**AA** Did this corporation file the federal Schedule M-3 (Form 1120/1120F)? •  Yes  No

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

Signature of officer	Title <u>CEO</u>	Date	• Telephone <u>916-482-2000</u>
Preparer's signature	Date <u>03/15/11</u>	Check if self-employed <input checked="" type="checkbox"/>	• Preparer's SSN/PTIN <u>P00574164</u>
Firm's name (or yours, if self-employed) and address <u>JONES MCLEVICH GLAZER 641 FULTON AVE, SUITE 202 SACRAMENTO, CALIFORNIA 95825</u>	• FEIN <u>68-0314893</u>		
May the FTB discuss this return with the preparer shown above? See instructions ... • <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	• Telephone <u>(916) 481-0845</u>		

**Schedule A Taxes Deducted.** Use additional sheet(s) if necessary.

(a) Nature of tax	(b) Taxing authority	(c) Total amount	(d) Nondeductible amount
<b>TAXES &amp; LICENSES</b>		5,250.	00
			00
<b>Total.</b> Enter total of column (c) on Schedule F, line 17, and total of column (d) on Side 1, line 2 or line 3		5,250.	00

**Schedule F Computation of Net Income.** See instructions.

<b>Income</b>	1 a) Gross receipts or gross sales _____				
	b) Less returns and allowance _____	c) Balance	• 1c	00	
	2 Cost of goods sold. Attach federal Schedule A (California Schedule V)		• 2	00	
	3 Gross profit. Subtract line 2 from line 1c		• 3	00	
	4 Total dividends. Attach federal Schedule C, California Schedule H (100)		• 4	00	
	5 a) Interest on obligations of the United States and U.S. instrumentalities		• 5a	00	
	b) Other interest. Attach schedule		• 5b	00	
	6 Gross rents		• 6	00	
	7 Gross royalties		• 7	00	
	8 Capital gain net income. Attach federal Schedule D (California Schedule D)		• 8	00	
	9 Ordinary gain (loss). Attach federal Form 4797 (California Schedule D-1)		• 9	00	
10 Other income (loss). Attach schedule		• 10	00		
11 <b>Total income.</b> Add line 3 through line 10		• 11	00		
<b>Deductions</b>	12 Compensation of officers. Attach federal schedule E or equivalent schedule	• 12	00		
	13 Salaries and wages (not deducted elsewhere)	• 13	00		
	14 Repairs	• 14	730.00		
	15 Bad debts	• 15	00		
	16 Rents	• 16	19,800.00		
	17 Taxes (California Schedule A)	• 17	5,250.00		
	18 Interest. Attach schedule	• 18	00		
	19 Contributions. Attach schedule	• 19	0.00		
	20 Depreciation. Attach fed Form 4562 and FTB 3885	• 20	3,617.00		
	21 Less depreciation claimed elsewhere on return	• 21a	00.00	• 21b	3,617.00
	22 Depletion. Attach schedule	• 22	00		
	23 Advertising	• 23	834.00		
	24 Pension, profit-sharing plans, etc.	• 24	00		
	25 Employee benefit plans	• 25	3,610.00		
	26 a) Total travel and entertainment <u>21,463.</u>				
	b) Deductible amounts	• 26b	19,854.00		
	27 Other deductions. Attach schedule <b>SEE STATEMENT 5</b>	• 27	104,984.00		
	28 Specific deduction for organizations under R&TC Section 23701r or 23701t. See instr	• 28	00		
	29 <b>Total deductions.</b> Add line 12 through line 28	• 29	158,679.00		
30 Net income before state adjustments. Subtract line 29 from line 11. Enter here and on Side 1, line 1	• 30	-158,679.00			

**Schedule J Add-On Taxes and Recapture of Tax Credits.** See instructions.

1 LIFO recapture due to S corporation election, IRC Sec. 1363(d) deferral: \$ _____	• 1	00
2 Interest computed under the look-back method for completed long-term contracts (Attach form FTB 3834)	• 2	00
3 Interest on tax attributable to installment: a) Sales of certain timeshares and residential lots	• 3a	00
b) Method for nondealer installment obligations	• 3b	00
4 IRC Section 197(f)(9)(B)(ii) election	• 4	00
5 Credit recapture name: _____	• 5	00
6 Combine line 1 through line 5, revise Side 2, line 37 or line 38, whichever applies, by this amount. Write "Schedule J" to the left of line 37 or line 38	• 6	00



**Schedule V Cost of Goods Sold**

1	Inventory at beginning of year	1	00
2	Purchases	2	00
3	Cost of labor	3	00
4	a Additional IRC Section 263A costs. Attach schedule	4a	00
	b Other costs. Attach schedule	4b	00
5	Total. Add line 1 through line 4b	5	00
6	Inventory at end of year	6	00
7	Cost of goods sold. Subtract line 6 from line 5. Enter here and on Schedule F, line 2	7	00

Method of inventory valuation    
 Was there any change in determining quantities, costs of valuations between opening and closing inventory? If "Yes," attach an explanation.  Yes  No   
 Enter California seller's permit number, if any    
 Check if the LIFO inventory method was adopted this taxable year for any goods. If checked, attach federal Form 970    
 If the LIFO inventory method was used for this taxable year, enter the amount of closing inventory under LIFO    
 Do the rules of IRC Section 263A (with respect to property produced or acquired for resale) apply to the corporation?  Yes  No

The corporation may not be required to complete Schedules L, M-1, and M-2. See Schedule M-1 instructions for reporting requirements.

Schedule L Balance Sheet	Beginning of taxable year		End of taxable year	
	(a)	(b)	(c)	(d)
<b>Assets</b>				
1 Cash				•
2 a Trade notes and accounts receivable			•	
b Less allowance for bad debts	( )		• ( )	•
3 Inventories				•
4 Federal and state government obligations				•
5 Other current assets. Attach sch <b>STMT 6</b>		11,311.		2,000.
6 Loans to stockholders/officers. Att sch		116,759.		• 165,386.
7 Mortgage and real estate loans				•
8 Other investments. Attach sch				•
9 a Buildings and other fixed depreciable assets	45,772.		• 45,772.	
b Less accumulated depreciation	( 30,729 )	15,043.	• ( 34,346 )	• 11,426.
10 a Depletable assets				
b Less accumulated depletion	( )		( )	
11 Land (net of any amortization)				•
12 a Intangible assets (amortizable only)	550.		• 550.	
b Less accumulated amortization	( 129 )	421.	( 166 )	384.
13 Other assets. Attach sch				•
14 <b>Total assets</b>		143,534.		• 179,196.
<b>Liabilities and Stockholders' Equity</b>				
15 Accounts payable		150,520.		• 135,304.
16 Mortgages, notes, bonds payable in less than 1 year				•
17 Other current liabilities. Att. sch(s) <b>STMT 7</b>		29,670.		29,738.
18 Loans from stockholders. Att. sch(s)		101,724.		• 112,636.
19 Mortgages, notes, bonds payable in 1 year or more		42,575.		• 48,347.
20 Other liabilities. Attach sch(s) <b>STMT 8</b>		1,361,150.		• 1,534,980.
21 Capital stock: a Preferred stock			•	
b Common stock	2,275,193.	2,275,193.	• 2,416,621.	• 2,416,621.
22 Paid-in or capital surplus. Attach reconciliation				•
23 Retained earnings - Appropriated. Att. sch.				
24 Retained earnings - Unappropriated		-3,817,298.		-4,098,430.
25 Adjustments to shareholders' equity. Att. sch.				
26 Less cost of treasury stock		( )		( )
27 <b>Total liabilities and stockholders' equity</b>		143,534.		179,196.

**Schedule M-1 Reconciliation of Income (Loss) per Books With Income (Loss) Per Return.**  
If the corporation completed federal Sch M-3 (Form 1120/1120F), see instructions.

1 Net income per books	-281,132.	7 Income recorded on books this year not included in this return (itemize)	
2 Federal income tax		a Tax-exempt interest \$	
3 Excess of capital losses over capital gains		b Other \$	
4 Taxable income not recorded on books this year (itemize)		c Total. Add line 7a and line 7b	
5 Expenses recorded on books this year not deducted in this return (itemize)		8 Deductions in this return not charged against book income this year (itemize)	
a Depreciation \$		a Depreciation \$	
b State taxes \$		b State tax refunds \$	
c Travel and entertainment \$	1,609.	c Other \$	
d Other STMT 9 \$	120,844.	d Total. Add line 8a through line 8c	
e Total. Add line 5a through line 5d	122,453.	9 Total. Add line 7c and line 8d	
6 Total. Add line 1 through line 5e	-158,679.	10 Net income per return. Subtract line 9 from line 6	-158,679.

**Schedule M-2 Analysis of Unappropriated Retained Earnings per Books** (Schedule L, line 24)

1 Balance at beginning of year	-3,817,298.	5 Distributions: a Cash	
2 Net income per books	-281,132.	b Stock	
3 Other increases (itemize)		c Property	
4 Total. Add line 1 through line 3	-4,098,430.	6 Other decreases (itemize)	
		7 Total. Add line 5 and line 6	
		8 Balance at end of year. Subtract line 7 from line 4.	-4,098,430.

**Schedule D California Capital Gains and Losses**

**Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less.** Use additional sheet(s) if necessary.

(a) Kind of property and description (Example, 100 shares of Z Co.)	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)	(d) Gross sales price	(e) Cost or other basis plus expense of sale	(f) Gain (loss) ((d) less (e))
1					00
2 Short-term capital gain from installment sales from form FTB 3805E, line 26 or line 37				2	00
3 Unused capital loss carryover from 2008				3	00
4 Net short-term capital gain (loss). Combine line 1 through line 3				4	00

**Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year.** Use additional sheet(s) if necessary.

5					00
6 Enter gain from Schedule D-1, line 9 and/or any capital gain distributions				6	00
7 Long-term capital gain from installment sales from form FTB 3805E, line 26 or line 37				7	00
8 Net long-term capital gain (loss). Combine line 5 through line 7				8	00
9 Enter excess of net short-term capital gain (line 4) over net long-term capital loss (line 8)				9	00
10 Net capital gain. Enter excess of net long-term capital gain (line 8) over net short-term capital loss (line 4)				10	00
11 Total lines 9 and 10. Enter here and on Form 100, Side 1, line 5. If losses exceed gains, carry forward losses to 2010				11	00

Attach to Form 100 or Form 109.

Corporation name <b>USCL CORPORATION</b>	California corporation number <b>2424198</b>
---	---

**Part I Tentative Minimum Tax (TMT) and Alternative Minimum Tax (AMT) Computation**

1 Net income (loss) after state adjustments. Enter the amount from Form 100, line 18; Schedule R, line 1c; or Form 109, the lesser of line 1 or line 2 .....			1 <u>-158,679.00</u>
<b>2 Adjustments.</b> See instructions			
a Depreciation of tangible property placed in service after 1986 .....	2a	-220.00	
b Amortization of certified pollution control facilities placed in service after 1986 .....	2b	00	
c Amortization of mining exploration and development costs incurred after 1987 .....	2c	00	
d Basis adjustments in determining gain or loss from sale or exchange of property .....	2d	00	
e Long-term contracts entered into after February 28, 1986 .....	2e	00	
f Installment sales of certain property .....	2f	00	
g Tax shelter farm activities (personal service corporations only) .....	2g	00	
h Passive activities (closely held corporations and personal service corporations only) .....	2h	00	
i Certain loss limitations .....	2i	00	
j Beneficiaries of estates and trusts. Enter the amount from Schedule K-1 (541), line 12a .....	2j	00	
k Merchant marine capital construction funds .....	2k	00	
l Combine line 2a through line 2k .....	2l	-220.00	
<b>3 Tax preference items.</b> See instructions			
a Depletion .....	3a	00	
b Intangible drilling costs .....	3b	00	
c Accelerated depreciation of real property placed in service before 1987 .....	3c	00	
d Amortization of certified pollution control facilities placed in service before 1987 .....	3d	00	
e Charitable contributions including appreciated property. See instructions .....	3e	00	
f Add line 3a through line 3e .....	3f	00	
<b>4 Pre-adjustment alternative minimum taxable income (AMTI):</b>			
a Combine line 1, line 2l, and line 3f .....	4a	-158,899.00	
b Apportioned pre-adjustment AMTI. If inc is derived from sources both within and outside of CA, see instr. Otherwise, enter amt from ln 4a .....	4b	-158,899.00	
<b>5 Adjusted current earnings (ACE) adjustment:</b>			
a Enter ACE. See instructions .....	5a	-155,062.00	
b Apportioned ACE. If income is derived from sources both within and outside of California, see instructions. Otherwise, enter amount on line 5a .....	5b	-155,062.00	
c Subtract line 4b from line 5b (even if one or both of the figures are negative). If negative, use brackets .....	5c	3,837.00	
d Multiply line 5c by 75% (.75) and enter the result as a positive number .....	5d	2,878.00	
e Enter the excess, if any, of the corporation's total increases in AMTI from prior year ACE adjustments over its total reductions in AMTI from prior year ACE adjustments. Enter an amount on line 5e (even if line 5c is positive) .....	5e	32,410.00	
<b>f ACE adjustment:</b>			
• If line 5c is a positive amount or zero, enter the amount from line 5d on line 5f as a positive amount.			
• If line 5c is a negative amount, enter the smaller of line 5d or line 5e on line 5f as a negative amount. ....	5f	2,878.00	
6 Combine line 4b and line 5f. If zero or less, enter -0- .....	6	0.00	
7 a Reduction for disaster loss carryover deduction, if any, from Form 100, line 22 .....	7a	00	
b AMT net operating loss deduction. See instructions .....	7b	00	
c Combine line 7a and line 7b .....	7c	0.00	
8 AMTI. Subtract line 7c from line 6 .....	8	0.00	
9 Enter \$40,000 exemption. See instructions .....	9	40,000.00	
10 Enter \$150,000 limitation. See instructions .....	10	150,000.00	
11 Subtract line 10 from line 8. If zero or less, enter -0- .....	11	0.00	
12 Multiply line 11 by 25% (.25) .....	12	00	
13 Exemption. Subtract line 12 from line 9. If zero or less, enter -0- .....	13	40,000.00	
14 Subtract line 13 from line 8. If zero or less, enter -0- .....	14	0.00	
15 Multiply line 14 by 6.65% (.0665) .....	15	00	
16 Banks and financial corps. Multiply Form 100, line 23, by 2.00% (.0200). See instructions .....	16	00	

**Part I Tentative Minimum Tax (TMT) and Alternative Minimum Tax (AMT) Computation (continued)**

17 TMT. Add line 15 and line 16 from Side 1	17	0.00
18 Regular tax before credits. Enter amount from Form 100, line 24 or Form 109, line 10 See instructions	18	0.00
19 AMT. Subtract line 18 from line 17. If zero or less, enter -0-. See instructions	19	0.00

**Part II Credits that Reduce Tax**

1 Regular tax from Form 100, line 24 or Form 109, line 10. See instructions	1	800.00
2 TMT (before credits) from Part I, line 17 (but not less than the minimum franchise tax, if applicable)	2	800.00

	(a) Credit amount	* (b) Credit used this year	(c) Tax balance that may be offset by credits	(d) Credit carryover
<b>Section A - Credits that reduce excess regular tax.</b>				
3 Subtract line 2 from line 1. If zero or less, enter -0- and see instructions. This is the excess regular tax which may be offset by credits <b>Note:</b> Reduce the amount in column (c) by the New Jobs Credit amount claimed on Form 100, line 25b, if applicable.	3		0.	
<b>A1 Credits that reduce excess regular tax and have no carryover provisions.</b>				
4 Code: 162 Prison inmate labor credit. See instructions	4			
<b>A2 Credits that reduce excess regular tax and have carryover provisions. See instructions.</b>				
5 Code: _____ Credit Name: _____	5			
6 Code: _____ Credit Name: _____	6			
7 Code: _____ Credit Name: _____	7			
8 Code: _____ Credit Name: _____	8			
9 Code: 188 Credit for prior year AMT from Part III, line 3	9			
<b>Section B - Credits that may reduce regular tax below TMT.</b>				
10 If Part II, line 3 is zero, enter the amount from line 1 minus the minimum franchise tax, if applicable. If line 3 is more than zero, enter the total of Part II, line 2, minus the minimum franchise tax, if applicable, plus line 9, column (c) or the last entry in column (c).	10		0.	
<b>B Credits that reduce net tax and have carryover provisions. See instructions.</b>				
11 Code: <u>183</u> Credit Name: <u>RESEARCH</u>	11	9,466.	0.	9,466.
12 Code: _____ Credit Name: _____	12			
13 Code: _____ Credit Name: _____	13			
14 Code: _____ Credit Name: _____	14			
<b>Section C - Credits that may reduce AMT.</b>				
15 Enter the AMT from Part I, line 19	15			
16 Code: 180 Solar energy credit carryover from Section B, column (d) ...	16			
17 Code: 181 Commercial solar energy credit carryover from Section B, column (d)	17			
18 Adjusted AMT. Enter the balance from line 17, column (c) here and on Form 100, Side 1, line 30 or Form 109, Side 1, line 13	18			

**Part III Credit for Prior Year AMT**

1 Enter the AMT from the 2008 Schedule P (100), Part I, line 19. See instructions	1	00
2 Carryover of unused credit for prior year AMT. See instructions	2	00
3 Total available credit. Add line 1 and line 2. Enter here and on Part II, line 9, column (a). This credit is not subject to the 50% business tax credit limitation.	3	00

\* **Credit Limitation:** If the corporation is subject to the business tax credit limitation, the **total amounts** of credit claimed in Part II, column (b) **minus line 9** cannot exceed 50% of the regular tax reported on Part II, line 1. See Part II instructions, Business Tax Credit Limitation, for more information.

CA	Adjusted Current Earnings Adjustment Worksheet	2009
1	Pre-adjustment AMTI (enter the amount from Schedule P) .....	-158,899.
2	ACE depreciation adjustment:	
a	AMT depreciation .....	3,837.
b	ACE depreciation:	
	(i) Post-1989 property .....	
	(ii) Pre-1990 MACRS property .....	
	(iii) Pre-1990 ACRS property .....	
	(iv) Property described in sections 168(f)(1) through (4) ...	
	(v) Other property .....	
	(vi) Total ACE depreciation (add lns 2b(i) thru 2b(v)) .....	
c	ACE depreciation adjustment (subtract line 2b(vi) from line 2a) .....	3,837.
3	Inclusion in ACE of items included in E&P:	
a	Tax-exempt interest income .....	
b	Death benefits from life insurance contracts .....	
c	All other distributions from life insurance contracts (Including surrenders) .....	
d	Inside buildup of undistributed income in life insurance contracts .....	
e	Other items to be included in E&P .....	
f	Total increase in ACE due to inclusion in ACE of items included in E&P (Add lines 3a thru 3e) .....	
4	Disallowance of items not deductible in computing E&P:	
a	Certain dividends received .....	
b	Dividends paid on certain preferred stock of public utilities deductible under Section 247 .....	
c	Dividends paid to ESOP that are deductible under Section 404(k) .....	
d	Non-patronage dividends that are paid and deductible under Section 1382(c) .....	
e	Other disallowed items not deductible for E&P .....	
f	Total increase to ACE due to disallowance of items not deductible in computing E&P (Add lines 4a thru 4e) .....	
5	Certain other E&P adjustments:	
a	Intangible drilling costs .....	
b	Circulation expenditures .....	
c	Organizational expenditures .....	
d	LIFO inventory adjustments .....	
e	Installment sales .....	
f	Total other E&P adjustments (Combine lines 5a thru 5e) .....	
6	Loss on exchange of debt pools .....	
7	Acquisition expenses of life insurance companies for qualified foreign contracts .....	
8	Depletion .....	
9	Basis adjustments in determining gain or loss from sale or exchange of property .....	
10	Adjusted current earnings. Combine lines 1, 2c, 3f, 4f and 5f through 9 .....	-155,062.

946361  
04-24-09

# Research Credit

Attach to your California tax return.	SSN or ITIN or California corporation no. <b>2424198</b>
	FEIN <b>88-0338090</b>
Name(s) as shown on return  <b>USCL CORPORATION</b>	Secretary of State (SOS) file number

**Part I Credit Computation.** Read the instructions before completing this form.

**Section A Regular Credit.** Skip this section and go to Section B, Alternative Incremental Credit, if you are electing the alternative incremental credit.

**Line 1 through line 4 are to be completed only by corporations (other than S corporations, personal holding companies, and service organizations). Individuals, estates, trusts, partnerships, S corporations, and limited liability companies (LLCs), begin on line 5.**

1 Basic research payments paid or incurred during the taxable year. See instructions .....	<b>1</b>	00
2 Base period amount. See instructions .....	<b>2</b>	00
3 Subtract line 2 from line 1. If less than zero, enter -0- .....	<b>3</b>	00
4 Multiply line 3 by 24% (.24) .....	<b>4</b>	00
 <b>Qualified research expenses paid or incurred.</b>		
5 Wages for qualified services. See instructions .....	<b>5</b>	00
6 Cost of supplies. See instructions .....	<b>6</b>	00
7 Rental or lease costs of computers. See instructions .....	<b>7</b>	00
8 Enter the applicable percentage of contract research expenses. See instructions .....	<b>8</b>	00
9 Total qualified research expenses. Add line 5 through line 8 .....	<b>9</b>	00
10 Enter fixed-based percentage, but not more than 16% (.16). See instructions .....	<b>10</b>	00
11 Enter average annual gross receipts. See instructions .....	<b>11</b>	00
12 Base amount. Multiply line 11 by the percentage on line 10 .....	<b>12</b>	00
13 Subtract line 12 from line 9. If zero or less, enter -0- .....	<b>13</b>	00
14 Multiply line 9 by 50% (.50). See instructions .....	<b>14</b>	00
15 Enter the smaller of line 13 or line 14 .....	<b>15</b>	00
16 Multiply line 15 by 15% (.15) .....	<b>16</b>	00
17 a Regular credit. Add line 4 and line 16. If you do not elect the reduced credit under IRC Section 280C(c), enter the result here, and see instructions for the schedule to attach .....	<b>17a</b>	00
b Reduced regular credit under IRC Section 280C(c). Multiply line 17a by the applicable percentage below:		
• 90.45% (.9045) for individuals and estates or trusts		
• 91.16% (.9116) for corporations		
• 98.5% (.985) for S corporations		
Enter the reduced credit amount and write "Section 280C(c)" on the dotted line to the left of line 17b .....	<b>17b</b>	00

**Section B Alternative Incremental Credit.** Skip this section if you completed Section A, Regular Credit.

**Line 18 through line 21 are to be completed only by corporations (other than S corporations, personal holding companies, and service organizations). Individuals, estates, trusts, partnerships, S corporations, and LLCs, begin on line 22.**

<b>18</b> Basic research payments paid or incurred during the taxable year. See instructions .....	<b>18</b>	00
<b>19</b> Base period amount. See instructions .....	<b>19</b>	00
<b>20</b> Subtract line 19 from line 18. If less than zero, enter -0- .....	<b>20</b>	00
<b>21</b> Multiply line 20 by 24% (.24) .....	<b>21</b>	00
<b>Qualified research expenses paid or incurred.</b>		
<b>22</b> Wages for qualified services. See instructions .....	<b>22</b>	00
<b>23</b> Cost of supplies. See instructions .....	<b>23</b>	00
<b>24</b> Rental or lease costs of computers. See instructions .....	<b>24</b>	00
<b>25</b> Enter the applicable percentage of contract research expenses. See instructions .....	<b>25</b>	00
<b>26</b> Total qualified research expenses. Add line 22 through line 25 .....	<b>26</b>	00
<b>27</b> Enter average annual gross receipts. See instructions .....	<b>27</b>	00
<b>28</b> Multiply line 27 by 1% (.01) .....	<b>28</b>	00
<b>29</b> Subtract line 28 from line 26 .....	<b>29</b>	00
<b>30</b> Multiply line 27 by 1.5% (.015) .....	<b>30</b>	00
<b>31</b> Subtract line 30 from line 26. If zero or less, enter -0- .....	<b>31</b>	00
<b>32</b> Subtract line 31 from line 29. If zero or less, enter -0- .....	<b>32</b>	00
<b>33</b> Multiply line 27 by 2% (.02) .....	<b>33</b>	00
<b>34</b> Subtract line 33 from line 26. If zero or less, enter -0- .....	<b>34</b>	00
<b>35</b> Subtract line 34 from line 31. If zero or less, enter -0- .....	<b>35</b>	00
<b>36</b> Multiply line 32 by 1.49% (.0149) .....	<b>36</b>	00
<b>37</b> Multiply line 35 by 1.98% (.0198) .....	<b>37</b>	00
<b>38</b> Multiply line 34 by 2.48% (.0248) .....	<b>38</b>	00
<b>39 a</b> Alternative incremental credit. Add line 21, line 36, line 37, and line 38. If you do not elect the reduced credit under IRC Section 280C(c), enter the result here, and see instructions for the schedule that must be attached .....	<b>39a</b>	00
<b>b</b> Reduced alternative incremental credit under IRC Section 280C(c). Multiply line 39a by the applicable percentage below: • 90.45% (.9045) for individuals and estates or trusts • 91.16% (.9116) for corporations • 98.5% (.985) for S corporations Enter the reduced credit amount and write "Section 280C(c)" on the dotted line to the left of line 39b .....	<b>39b</b>	00
<b>40</b> Pass-through research credit(s) from S corporations, estates, trusts, partnerships, and LLCs. See instructions .....	<b>40</b>	00
<b>41</b> Current year research credit. If you did not elect the reduced credit under IRC Section 280C(c), add line 17a or line 39a to line 40 and enter the result here. If you elected the reduced credit under IRC Section 280C(c), add line 17b or line 39b to line 40 and enter the result here .....	<b>41</b>	00
<b>42</b> Enter the amount of credit on line 41 that is from passive activities. If none of the amount on line 41 is from passive activities, enter -0- .....	<b>42</b>	00
<b>43</b> Subtract line 42 from line 41 .....	<b>43</b>	00
<b>44</b> Enter the allowable credit from passive activities. See instructions .....	<b>44</b>	00
<b>45</b> Non-passive activity credit carryover from prior year. See instructions .....	<b>45</b>	9,466.00
<b>46</b> Total available research credit. Add line 43 through line 45 .....	<b>46</b>	9,466.00

**Part II Carryover Computation.** Do not complete this part if you file Schedule P (100, 100W, 540, 540NR, or 541).

<b>47</b> Amount of research credit claimed on current year tax return .....	<b>47</b>	00
Your credit may be limited. See instructions for line 47.		
<b>48</b> Credit carryover available to future years. Subtract line 47 from line 46 .....	<b>48</b>	00

# Net Operating Loss (NOL) Computation and NOL and Disaster Loss Limitations - Corporations

**2009**

**3805Q**

Attach to Form 100, Form 100W, Form 100S or Form 109.

Corporation name	California corporation number
<b>USCL CORPORATION</b>	<b>2424198</b>
During the taxable year the corporation incurred the NOL, the corporation was a(n): <input checked="" type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation	FEIN
<input type="checkbox"/> Exempt Organization <input type="checkbox"/> Limited Liability Company (electing to be taxed as a corporation)	<b>88-0338090</b>

If the corporation previously filed California tax returns under another corporate name, enter the corporation name and California corporation number:

If the corporation is included in a combined report of a unitary group, see instructions, General Information C, Combined Reporting.

**Part I Current year NOL.** If the corporation does not have a current year NOL, go to Part II.

1 Net loss from Form 100, line 19; Form 100W, line 19; Form 100S, line 16; or Form 109, line 2. Enter as a positive number .....	1	158,679.00
2 2009 disaster loss included in line 1. Enter as a positive number .....	2	00
3 Subtract line 2 from line 1. If zero or less, enter -0- and see instructions .....	3	158,679.00
4 a Enter the amount of the loss incurred by a new business included in line 3 .....	4a	00
b Enter the amount of the loss incurred by an eligible small business included in line 3 .....	4b	00
c Add line 4a and line 4b .....	4c	00
5 General NOL. Subtract line 4c from line 3 .....	5	158,679.00
6 2009 NOL carryover. Add line 2, line 4c, and line 5. See instructions .....	6	158,679.00

**Part II NOL carryover and disaster loss carryover limitations. See Instructions.**

1 Net income (loss) - Enter the amount from Form 100, line 19; Form 100W, line 19; Form 100S, line 16 less line 17 (but not less than -0-); or Form 109, line 2. If the corporation taxable income is \$500,000 or more, see instructions .....	(g)	
	Available balance	
		0.

**Prior Year NOLs**

(a) Year of loss	(b) Code - See instructions	(c) Type of NOL - See below *	(d) Initial loss	(e) Carryover from 2008	(f) Amount used in 2009		(h) Carryover to 2010 col. (e) - col. (f)
2			SEE STATEMENT 10				

**Current Year NOLs**

Year	Code	Type of NOL	Initial loss	Carryover from 2008	Amount used in 2009		col. (d) - col. (f)
3 2009		DIS					
4 2009		GEN	158,679.				158,679.
2009							
2009							
2009							

\* Type of NOL: General (GEN), New Business (NB), Eligible Small Business (ESB), or Disaster (DIS).

**Part III 2009 NOL deduction**

1 Total the amounts in Part II, line 2, column (f) .....	1	00
2 Enter the total amount from line 1 that represents disaster loss carryover deduction here and on Form 100, line 22; Form 100W, line 22; or Form 100S, line 20. Form 109 filers enter -0- .....	2	00
3 Subtract line 2 from line 1. Enter the result here and on Form 100, line 20; Form 100W, line 20; Form 100S, line 18; or Form 109, line 7 .....	3	00



2009

# Net Operating Loss (NOL) Computation and NOL and Disaster Loss Limitations - Corporations

3805Q

Attach to Form 100, Form 100W, Form 100S or Form 109.

## ALTERNATIVE MINIMUM TAX

Corporation name

California corporation number

**USCL CORPORATION**

2424198

During the taxable year the corporation incurred the NOL, the corporation was a(n):  C Corporation  S Corporation

FEIN

Exempt Organization  Limited Liability Company (electing to be taxed as a corporation)

88-0338090

If the corporation previously filed California tax returns under another corporate name, enter the corporation name and California corporation number:

**If the corporation is included in a combined report of a unitary group, see instructions, General Information C, Combined Reporting.**

**Part I Current year NOL.** If the corporation does not have a current year NOL, go to Part II.

1	Net loss from Form 100, line 19; Form 100W, line 19; Form 100S, line 16; or Form 109, line 2. Enter as a positive number .....	1	156,021.00
2	2009 disaster loss included in line 1. Enter as a positive number .....	2	00
3	Subtract line 2 from line 1. If zero or less, enter -0- and see instructions .....	3	156,021.00
4	a Enter the amount of the loss incurred by a new business included in line 3 .....	4a	00
	b Enter the amount of the loss incurred by an eligible small business included in line 3 .....	4b	00
	c Add line 4a and line 4b .....	4c	00
5	General NOL. Subtract line 4c from line 3 .....	5	156,021.00
6	2009 NOL carryover. Add line 2, line 4c, and line 5. See instructions .....	6	156,021.00

**Part II NOL carryover and disaster loss carryover limitations. See Instructions.**

1 Net income (loss) - Enter the amount from Form 100, line 19; Form 100W, line 19; Form 100S, line 16 less line 17 (but not less than -0-); or Form 109, line 2. <b>If the corporation taxable income is \$500,000 or more, see instructions</b> .....	(g)	
	Available balance	0.

**Prior Year NOLs**

(a) Year of loss	(b) Code - See instructions	(c) Type of NOL - See below *	(d) Initial loss	(e) Carryover from 2008	(f) Amount used in 2009		(h) Carryover to 2010 col. (e) - col. (f)
2		SEE STATEMENT 11					

**Current Year NOLs**

Year	Code	Type of NOL	Initial loss	Carryover from 2008	Amount used in 2009		col. (d) - col. (f)
3 2009		DIS					
4 2009		GEN	156,021.				156,021.
2009							
2009							
2009							

\* **Type of NOL:** General (GEN), New Business (NB), Eligible Small Business (ESB), or Disaster (DIS).

**Part III 2009 NOL deduction**

1	Total the amounts in Part II, line 2, column (f) .....	1	00
2	Enter the total amount from line 1 that represents disaster loss carryover deduction here and on Form 100, line 22; Form 100W, line 22; or Form 100S, line 20. Form 109 filers enter -0- .....	2	00
3	Subtract line 2 from line 1. Enter the result here and on Form 100, line 20; Form 100W, line 20; Form 100S, line 18; or Form 109, line 7 .....	3	00

**SCHED. P, LN 7B**

# Corporation Depreciation and Amortization

Attach to Form 100 or Form 100W.

Corporation name <b>USCL CORPORATION</b>	California corporation number <b>2424198</b>
---	---

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

1 Maximum deduction under Section 179 for California .....	1	\$25,000
2 Total cost of Section 179 property placed in service .....	2	
3 Threshold cost of Section 179 property before reduction in limitation .....	3	\$200,000
4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0- .....	4	
5 Dollar limitation for taxable year. Subtract line 4 from line 1. If zero or less, enter -0- .....	5	
<b>(a) Description of property (b) Cost (business use only) (c) Elected cost</b>		
6		
7 Listed property (elected Section 179 cost) .....	7	
8 Total elected cost of Section 179 property. Add amounts in column (c), line 6 and line 7 .....	8	
9 Tentative deduction. Enter the <b>smaller</b> of line 5 or line 8 .....	9	
10 Carryover of disallowed deduction from prior taxable years .....	10	
11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 .....	11	
12 Section 179 expense deduction. Add line 9 and line 10, but do not enter more than line 11 .....	12	
13 Carryover of disallowed deduction to 2010. Add line 9 and line 10, less line 12 .....	13	

**Part II Depreciation and Election of Additional First Year Expense Deduction Under R&TC Section 24356**

(a) Description property	(b) Date acquired	(c) Cost or other basis	(d) Depreciation allowed or allowable in earlier years	(e) Depreciation Method	(f) Life or rate	(g) Depreciation for this year	(h) Additional first year depreciation
14 SEE STATEMENT 12							
15 Add the amounts in column (g) and column (h). The combined total of column (h) may not exceed \$2,000. See instructions for line 14, column (h) .....						15	3,617.

**Part III Summary**

16 Total: If the corporation is electing: IRC Section 179 expense, add the amount on line 12 and line 15, column (g); or Additional first year depreciation under R&TC Section 24356, add the amounts on line 15, columns (g) and (h), or Depreciation (if no election is made), enter the amount from line 15, column (g) .....	16	3,617.
17 Total depreciation claimed for federal purposes from federal Form 4562, line 22 .....	17	3,617.
18 Depreciation adjustment. If line 17 is greater than line 16, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 17 is less than line 16, enter the difference here and on Form 100 or Form 100W, Side 1, line 12. (If California depreciation amounts are used to determine net income before state adjustments on Form 100 or Form 100W, no adjustment is necessary.) .....	18	0.

**Part IV Amortization**

(a) Description of property	(b) Date acquired	(c) Cost or other basis	(d) Amortization allowed or allowable in earlier years	(e) R&TC section (see instructions)	(f) Period or percentage	(g) Amortization for this year	
19 34 COPYRIGHTS/PATENTS	01/01/06	550.	129.		180M	37.	
20 Total. Add the amounts in column (g) .....						20	37.
21 Total amortization claimed for federal purposes from federal Form 4562, line 44 .....						21	37.
22 Amortization adjustment. If line 21 is greater than line 20, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 21 is less than line 20, enter the difference here and on Form 100 or Form 100W, Side 1, line 12 .....						22	0.

FORM 5806 COMPUTATION OF INTEREST ON UNDERPAYMENT STATEMENT 1

Q T R -	EVENT AMOUNT	REMAINING TYPE UNDERPAYMENT	PERIOD OF UNDERPAYMENT	DAYS	INTEREST RATE	AMOUNT OF PENALTY
A	800.	Q	800. 10/15/2009 12/31/2009	77	5.0000	8.
		R	800. 12/31/2009 06/30/2010	181	4.0000	16.
		R	800. 06/30/2010 09/15/2010	77	4.0000	7.
TOTAL TO FORM 5806 LINE 22B						31.

EVENT TYPE: Q = QUARTERLY AMOUNT DUE  
 P = PAYMENT  
 R = INTEREST RATE CHANGE  
 L = LEAP YEAR CHANGE  
 W = NONRESIDENT WITHHOLDING  
 O = PRIOR YEAR OVERPAYMENTS & PAYMENTS MADE AFTER AN  
 INSTALLMENT DUE DATE BUT BEFORE THE 1ST DAY OF THE MONTH  
 THE NEXT INSTALLMENT IS DUE - APPLIED AS LATE PAYMENT TO  
 A PREVIOUS INSTALLMENT

FORM 100/100W	CONTRIBUTIONS	STATEMENT	2
NET INCOME AFTER STATE ADJUSTMENTS	-158,679		
DEDUCTION FOR DIVIDENDS RECEIVED	0		
NET INCOME ADJUSTED FOR CONTRIBUTION PURPOSES		-158,679	
CARRYOVER OF PRIOR YEARS UNUSED CONTRIBUTIONS:			
FOR TAX YEAR 2004	111		
FOR TAX YEAR 2005	100		
FOR TAX YEAR 2006	56		
FOR TAX YEAR 2007	250		
FOR TAX YEAR 2008	0		
TOTAL OF UNUSED CARRYOVER CONTRIBUTIONS		517	
CURRENT YEAR CONTRIBUTIONS		0	
TOTAL AVAILABLE CONTRIBUTIONS		517	
10% OF NET INCOME AS ADJUSTED		0	
EXCESS CONTRIBUTIONS		517	
ALLOWABLE CONTRIBUTIONS DEDUCTION		0	

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FORM 100/100W

LOCATION OF PRINCIPAL ACCOUNTING RECORDS

STATEMENT 3

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2433 GARFIELD AVENUE  
CARMICHAEL, CA 95608-5121

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FORM 100/100W	PENALTY AND INTEREST	STATEMENT	4
BALANCE DUE FROM FORM 100			800
LATE PAYMENT INTEREST			17
LATE PAYMENT AND/OR LATE FILING PENALTIES			64
TOTAL LATE FILING AND/OR LATE PAYMENT PENALTIES AND INTEREST			81
UNDERPAYMENT PENALTY FROM FORM 5806			31
TOTAL PENALTIES AND INTEREST TO FORM 100			112

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FORM 100/100W, SCHEDULE F OTHER DEDUCTIONS STATEMENT 5

DESCRIPTION	AMOUNT
ACCOUNTING	9,235.
AMORTIZATION	37.
AUTO	1,842.
BANK CHARGES	784.
COMMUNICATIONS	8,257.
LEGAL & PROFESSIONAL	7,472.
OFFICE SUPPLIES	3,182.
OTHER EXPENSES	62,603.
OUTSIDE SERVICES	4,916.
POSTAGE	2,815.
REFERENCE MATERIALS	292.
UTITITIES	3,549.
TOTAL TO FORM 100/100W, PAGE 3, SCHEDULE F	104,984.

FORM 100/100W, SCHEDULE L OTHER CURRENT ASSETS STATEMENT 6

DESCRIPTION	BEGINNING OF TAX YEAR	END OF TAX YEAR
EMPLOYEE & TRAVEL ADVANCES	11,311.	2,000.
TOTAL TO FORM 100/100W, PAGE 4, SCHEDULE L	11,311.	2,000.

FORM 100/100W, SCHEDULE L OTHER CURRENT LIABILITIES STATEMENT 7

DESCRIPTION	BEGINNING OF TAX YEAR	END OF TAX YEAR
UNEARNED REVENUE	29,542.	29,542.
CASH OVERDRAFT	128.	196.
TOTAL TO FORM 100/100W, PAGE 4, SCHEDULE L	29,670.	29,738.

FORM 100/100W, SCHEDULE L OTHER LIABILITIES STATEMENT 8

DESCRIPTION	BEGINNING OF TAX YEAR	END OF TAX YEAR
ACCOUNTS PAYABLE - JACK MADOR	2,180.	
DEFERRED COMP - P FINE	41,666.	41,666.
DEFERRED COMP - TAMARKIN	528,310.	648,310.
DEFERRED COMP - TOLEDANO	19,327.	19,327.
DEFERRED COMP - E. TAMARKIN	145,500.	146,350.
BRIDGE LOANS	419,181.	451,462.
LOAN PAY. - RAY PRESGRAVE	31,035.	37,188.
LOAN PAY. - JEFFREY MICHEL	76,098.	82,758.
LOAN PAY. - CLARA MILLER	97,853.	107,919.
TOTAL TO FORM 100/100W, PAGE 4, SCHEDULE L	1,361,150.	1,534,980.

FORM 100/100W, SCHEDULE M-1 EXPENSES RECORDED ON BOOKS NOT DEDUCTED ON RETURN STATEMENT 9

DESCRIPTION	AMOUNT
ACCRUED WAGES	120,844.
TOTAL TO FORM 100/100W, SCHEDULE M-1	120,844.

FORM 3805Q PRIOR YEAR NOLS STATEMENT 10

(A) YEAR	(B) CODE	(C) TYPE OF NOL (D) LOSS	(E) C/O FROM 08	(F) AMOUNT USED IN 2009	(G) AVAILABLE BALANCE	(H) CARRYOVER TO 2010
2000	8711	280,986.	ESB	280,986.	0.	280,986.
2001	8711	232,342.	ESB	232,342.	0.	232,342.
2002	8711	193,774.	ESB	193,774.	0.	193,774.
2003	8711	262,465.	ESB	262,465.	0.	262,465.
2004	871	209,433.	ESB	209,433.	0.	209,433.
2005		361,075.	ESB	361,075.	0.	361,075.
2006		644,833.	ESB	644,833.	0.	644,833.



USCL CORPORATION

88-0338090

2007		GEN				
	370,725.		370,725.	0.	0.	370,725.
2008		GEN				
	163,254.		163,254.	0.	0.	163,254.
TOTALS			2,718,887.	0.		2,718,887.

FORM 3805Q PRIOR YEAR AMT NOL STATEMENT 11

(A) YEAR	(B) CODE (D) LOSS	(C) TYPE OF NOL (E) C/O FROM 08	(F) USED IN 2009	(G) AVAILABLE BALANCE	(H) CARRYOVER TO 2010
2004		ESB			
	199,565.		199,565.	0.	199,565.
2005		ESB			
	0.		0.	0.	0.
2005		ESB			
	355,979.		355,979.	0.	355,979.
2006		GEN			
	639,815.		639,815.	0.	639,815.
2007		GEN			
	366,063.		366,063.	0.	366,063.
2008		GEN			
	160,226.		160,226.	0.	160,226.
TOTAL	1,721,648.		1,721,648.		1,721,648.

FORM 3885 DEPRECIATION STATEMENT 12

ASSET NO.	DESCRIP-TION	DATE IN SERVICE	COST OR BASIS	PRIOR DEPR	METHOD	LIFE	DEPRE-CIATION	BONUS
25	PRODUCTION/R & D	01/01/05	700.	513.	200DB	7.00	62.	
29	COMPUTER EQUIPMENT	01/01/05	2,878.	2,784.	SL	5.00	94.	
30	PRODUCTION	01/01/04	337.	293.	SL	7.00	44.	
32	OFFICE EQUIPMENT	01/01/06	4,722.	2,363.	SL	7.00	675.	
35	OFFICE FURNITURE	01/01/07	3,922.	1,400.	SL	7.00	560.	
36	COMPUTER EQUIPMENT	01/01/07	2,601.	930.	SL	7.00	372.	
37	MARKETING EQUIPMENT	01/01/07	12,671.	4,525.	SL	7.00	1,810.	
TOTAL TO FORM 3885			27,831.	12,808.			3,617.	