



<b>19</b> Interest, penalty, and late fee due (from Form 4U, line 17 or 26). If you annualized income on Form 4U, check (✓) the space after the arrow . . . . .	19	45.00
<b>20</b> Tax due. If the total of lines 14 and 19 is larger than line 18, enter amount owed . . . . .	20	2610.00
<b>21</b> Overpayment. If line 18 is larger than the total of lines 14 and 19, enter amount overpaid . . . . .	21	.00
<b>22</b> Enter amount of line 21 you want credited on 2011 estimated tax . . . . .	22	.00
<b>23</b> Subtract line 22 from line 21. <b>This is your refund</b> . . . . .	23	.00
<b>24</b> Enter total company gross receipts from all activities (see instructions) . . . . .	24	3500000.00
<b>25</b> Enter total company assets from federal Form 1120 . . . . .	25	9788175.00

**26a** If the corporation is the sole owner of any limited liability companies (LLCs), enter the names and FEINs of those LLCs below. Submit an additional schedule if necessary.

Name of LLC	FEIN

**26b** Did you include the income of the LLCs listed on line 26a on this return?  Yes  No

**Additional Information Required**

- 1 Person to contact concerning this return: JOE SMITH Phone #: 608-555-1212 Fax #: 608-555-1213
- 2 City and state where books and records are located for audit purposes: MADISON, WI
- 3 Did you purchase any taxable tangible personal property or taxable services for storage, use, or consumption in Wisconsin without payment of a state sales or use tax?  Yes  No If yes, you owe Wisconsin use tax. See instructions for how to report use tax.
- 4 Did any adjustments made by the Internal Revenue Service to your income for prior years become finalized during this year?  Yes  No If yes, see instructions and indicate years adjusted: \_\_\_\_\_

*Under penalties of law, I declare that this return and all attachments are true, correct, and complete to the best of my knowledge and belief.*

Signature of Officer	Title <u>PRESIDENT</u>	Date <u>3-15-10</u>
Preparer's Signature	Preparer's Federal Employer ID Number <u>11-0000011</u>	Date <u>3-15-10</u>

**You must file a copy of your federal return with Form 5, even if no Wisconsin activity.**

If you are not filing your return electronically, make your check payable to and mail your return to: Wisconsin Department of Revenue  
PO Box 8908  
Madison, WI 53708-8908



**SCHEDULE CR**

Wisconsin  
Department of Revenue

**Other Credits**

Enclose with Wisconsin  
Form 1, 1NPR, 2, 4, 4T, or 5

**2010**

Name <b>HIDE N SEEK FOODS INC</b>	Identifying Number <b>11-0000002</b>
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**Part I Credits for Individuals, Fiduciaries, and Corporations**

**A. Nonrefundable Credits (claimed before alternative minimum tax)**

1 Postsecondary education credit (Schedule PE, line 5 or 5b) .....	1	.00
2 Water consumption credit (Schedule WC, line 8 or 8b for fiduciaries) .....	2	.00
3 Health insurance risk-sharing plan assessments credit -		
• Corporations (see line 30 to claim this credit)		
• Fiduciaries (see instructions) - Beneficiaries portion		.00
• Individuals (enter amount from Schedule 2K-1, 3K-1, or 5K-1) .....	3	.00
4 Film production company investment credit carryforward (Schedule FP, line 8) .....	4	.00
5 Add lines 1 through 4 and enter on line 5.		
• Individuals and Fiduciaries: Enter this amount on line 25 of Form 1, line 51 of Form 1NPR, line 8 of Form 2, or line 17 of Form 4T.		
• Corporations: Enter this amount on line 28 of Part II .....	5	.00

**B. Nonrefundable Credits**

6 Film production services credit carryforward (Schedule FP, line 7) .....	6	.00
7 Manufacturer's sales tax credit carryforward (Schedule MS, line 3) .....	7	.00
8 Manufacturing investment credit (Schedule MI, line 6) .....	8	.00
9 Dairy and livestock farm investment credit (Schedule DI, line 9) .....	9	.00
10 Ethanol and biodiesel fuel pump credit (Schedule EB, line 7) .....	10	.00
11 Development zones credit (Schedule DC, lines 7, 15, and 23) .....	11	.00
12 Technology zone credit (Schedule TC, line 8) .....	12	.00
13 Economic development tax credit (Schedule ED, line 5) .....	13	.00
14 Early stage seed investment credit (Schedule VC, line 12) .....	14	.00
15 Angel investment credit - Individuals only (Schedule VC, line 6) .....	15	.00
16 Internet equipment credit (Schedule IE, line 5) .....	16	.00
17 Jobs tax credit (Schedule JT, line 5 or 5b) .....	17	.00
18 Add lines 6 through 17 and enter on line 18.		
• Individuals and Fiduciaries: Enter this amount on line 31 of Form 1, line 57 of Form 1NPR, line 13 of Form 2, or line 17 of Form 4T.		
• Corporations: Enter this amount on line 29 of Part II .....	18	.00

**C. Refundable Credits**

19 Enterprise zone jobs credit (Schedule EC, line 3 or 3b) .....	19	.00
20 Dairy manufacturing facility investment credit (Schedule DM, line 13 or 13b) .....	20	.00
21 Dairy cooperatives credit (Schedule DM, line 14 or 14b) .....	21	.00
22 Meat processing facility investment credit (Schedule MP, line 7 or 7b for fiduciaries) ...	22	.00
23 Film production services credit (Schedule FP, line 3 or 3b for fiduciaries) .....	23	.00
24 Film production company investment credit (Schedule FP, line 6 or 6b for fiduciaries) ..	24	.00
25 Woody biomass harvesting and processing credit (Schedule WB, line 5 or 5b for fiduciaries) ..	25	.00
26 Food processing plant and food warehouse investment credit (Schedule FW, line 7 or 7b for fiduciaries) .....	26	.00
27 Add lines 19 through 26 and enter on line 27.		
• Individuals and Fiduciaries: Enter this amount on line 50 of Form 1, line 75 of Form 1NPR, line 24 of Form 2, or line 28 of Form 4T.		
• Corporations: Enter this amount on line 46 of Part II .....	27	.00

L-048



Corporations - go to Part II →

Name <b>HIDE N SEEK FOODS INC</b>	Identifying number <b>11-0000002</b>
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**Part II Credits for Corporations Only**

**A. Nonrefundable Credits**

28 Amount from Part I, line 5 .....	28	.00
29 Amount from Part I, line 18 .....	29	.00
30 Health insurance risk-sharing plan assessments credit (Schedule HI, line 6) .....	30	.00
31 Research expense credit (Schedule R, line 30) .....	31	1258 .00
32 Research expense credit for activities related to internal combustion engines (Schedule R-1, line 29) .....	32	.00
33 Research expense credit for activities related to certain energy efficient products (Schedule R-2, line 29) .....	33	.00
34 Development zones research credit carryforward .....	34	.00
35 Research facilities credit (Schedule R, line 34) .....	35	.00
36 Research facilities credit for activities related to internal combustion engines (Schedule R-1, line 33) .....	36	.00
37 Research facilities credit for activities related to certain energy efficient products (Schedule R-2, line 33) .....	37	.00
38 Community development finance credit .....	38	.00
39 Development zones jobs credit carryforward .....	39	.00
40 Development zones sales tax credit carryforward .....	40	.00
41 Development zones location credit carryforward .....	41	.00
42 Development zones day care credit carryforward .....	42	.00
43 Development zones environmental remediation credit carryforward .....	43	.00
44 Supplement to federal historic rehabilitation credit (Schedule HR, line 7) .....	44	.00
45 Add lines 28 through 44. Enter here and on line 15 of Form 4, line 9 of Form 4T, or line 9 of Form 5 .....	45	1258 .00

**B. Refundable Credits**

46 Amount from Part I, line 27 .....	46	.00
47 Farmland preservation credit. a Schedule FC, line 18 .....	47a	.00
b Schedule FC-A, line 13 .....	47b	.00
48 Add lines 46 and 47. Enter here and on line 23 of Form 4, line 28 of Form 4T, or line 17 of Form 5 .....	48	.00



**Wisconsin Research Credits**

**2010**

Wisconsin Department of Revenue

File with Wisconsin Form 4, 4T, or 5

Read instructions before filling in this schedule

Name <b>HIDE N SEEK FOODS INC</b>	Federal Employer ID Number <b>11-0000002</b>
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**Part I Credit for Increasing Research Expenses**

1 Enter Wisconsin research wage expenses .....	1	51500
2 Enter Wisconsin research supplies expenses .....	2	3400
3 Enter Wisconsin research computer rental expenses .....	3	
4 Enter applicable percentage of Wisconsin contract research expenses .....	4	
5 Enter expenses used to compute the federal orphan drug credit that qualify as Wisconsin research expenses .....	5	
6 Add lines 1 through 5 .....	6	54900
7 Wages included on line 6 that qualify for the Wisconsin development zones credit .....	7	
8 Subtract line 7 from line 6. This is total Wisconsin research expenses .....	8	54900

**Section A Regular Credit.** Complete this section only if you are claiming the regular credit – see instructions. (Skip this section and go to section B if you are electing the alternative incremental credit.)  
Check (✓)  if this is a one-time only change in election.

9 Enter average annual Wisconsin gross receipts from the Worksheet on page 2, line 5 .....	9	
10 Enter Wisconsin fixed-base percentage, but not more than 16% (0.16), from the Worksheet on page 2, line 19 .....	10	----- %
11 Multiply line 9 by the percentage on line 10. This is the base amount .....	11	
12 Subtract line 11 from line 8. If zero or less, enter zero (0) .....	12	
13 Multiply line 8 by 50% (0.50) .....	13	
14 Enter the <b>smaller</b> of line 12 or line 13 .....	14	
15 Multiply line 14 by 5% (0.05). This is the regular Wisconsin credit for increasing research expenses ...	15	

**Section B Alternative Incremental Credit.** Complete this section only if you are claiming the alternative credit – see instructions. (Skip this section and go to line 29 if you completed section A.)  
Check (✓)  if this is a one-time only change in election.

16 Enter average annual Wisconsin gross receipts from the Worksheet on page 2, line 5 .....	16	1750000
17 Multiply line 16 by 1% (0.01) .....	17	17500
18 Subtract line 17 from line 8. If zero or less, enter zero (0) .....	18	37400
19 Multiply line 16 by 1.5% (0.015) .....	19	26250
20 Subtract line 19 from line 8. If zero or less, enter zero (0) .....	20	28650
21 Subtract line 20 from line 18. If zero or less, enter zero (0) .....	21	8750
22 Multiply line 16 by 2% (0.02) .....	22	35000
23 Subtract line 22 from line 8. If zero or less, enter zero (0) .....	23	19900
24 Subtract line 23 from line 20. If zero or less, enter zero (0) .....	24	8750
25 Multiply line 21 by 2.65% (0.0265) .....	25	232
26 Multiply line 24 by 3.2% (0.032) .....	26	280
27 Multiply line 23 by 3.75% (0.0375) .....	27	746
28 Add lines 25, 26, and 27. This is the Wisconsin alternative incremental credit .....	28	1258

29 Carryover of unused research expense credit .....	29	
30 Add line 15 <b>or</b> line 28 to line 29. This is the available research expense credit .....	30	1258

**Part II Credit for Research Facilities**

31 Total qualified research facility expenditures .....	31	
32 Multiply line 31 by 5% (0.05) .....	32	
33 Carryover of unused research facilities credit .....	33	
34 Add lines 32 and 33. This is the available research facilities credit .....	34	

**WORKSHEET**

<b>Average Annual Wisconsin Gross Receipts</b>	(a) 2006	(b) 2007	(c) 2008	(d) 2009
1 Total gross receipts .....	1 000 000	1 500 000	2 000 000	2 500 000
2 Out-of-state receipts included on line 1 .....				
3 Subtract line 2 from line 1 .....	1 000 000	1 500 000	2 000 000	2 500 000
4 Add line 3, columns a through d .....				7 000 000
5 Divide amount on line 4 by 4. This is average annual Wisconsin gross receipts to enter on Schedule R, line 9 or line 16 .....				1 750 000

<b>Wisconsin Fixed-Base Percentage</b>	(a) 1984	(b) 1985	(c) 1986	(d) 1987	(e) 1988
6 Wisconsin research wage expenses .....					
7 Wisconsin research supplies expenses .....					
8 Wisconsin research computer rental expenses .....					
9 Wisconsin contract research expenses .....					
10 Qualifying expenses used in federal orphan drug credit .....					
11 Add lines 6 through 10 .....					
12 Wages for Wisconsin development zones credit .....					
13 Subtract line 12 from line 11 .....					
14 Add line 13, columns a through e .....					
15 Total gross receipts .....					
16 Out-of-state receipts on line 15 .....					
17 Subtract line 16 from line 15 .....					
18 Add line 17, columns a through e .....					
19 Divide line 14 by line 18. This is the Wisconsin fixed-base percentage to enter on Schedule R, line 10 .....					

%

# Wisconsin Additions to Federal Income

# 2010

Wisconsin Department of Revenue

File with Wisconsin Form 4 or 5

Read instructions before filling in this schedule

Corporation or Designated Agent Name

Federal Employer ID Number

HIDE N SEEK FOODS INC

11-0000002

1	Interest income from state and municipal obligations	1		.00
2	State taxes accrued or paid	2	2100	.00
3	Related entity expenses (from Schedule RT, Part I, Sch. 2K-1, and Sch. 3K-1)	3		.00
4	Domestic production activities deduction	4		.00
5	Expenses related to nontaxable income	5		.00
6	Percentage depletion	6		.00
7	Federal section 179 expense deduction in excess of Wisconsin deduction	7		.00
8	Federal depreciation/amortization in excess of Wisconsin depreciation/amortization (attach schedule)	8	1800	.00
9	Amount by which the federal basis of assets disposed of exceeds the Wisconsin basis (attach schedule)	9		.00
10	Additions for certain credits computed:			
	a. Community development finance credit (Sch. CR, line 38)			
	b. Dairy and livestock farm investment credit (Sch. DI, line 7)			
	c. Dairy manufacturing facility investment credit (Sch. DM, line 11)			
	d. Development zones credits (Sch. DC, lines 5, 13, and 21, or 5b, 13b, and 21b)			
	e. Economic development credit (Sch. ED, line 3 or 3b)			
	f. Enterprise zone jobs credit (Sch. EC, line 3 or 3b)			
	g. Ethanol and biodiesel fuel pump credit (Sch. EB, line 5 or 5b)			
	h. Farmland preservation credit (from prior Sch. FC, line 18)			
	i. Film production credits (Sch. FP, lines 3, 6, or 3b, 6b)			
	j. Health Insurance Risk-Sharing Plan assessments credit (Sch. HI, line 4)			
	k. Internet equipment credit (Sch. IE, line 3 or 3b)			
	l. Manufacturing investment credit (Sch. MI, line 4 or 4b)			
	m. Meat processing facility investment credit (Sch. MP, line 7)			
	n. Research credits (Sch. R, line 15 or 28 and line 32)			
	o. Additional research credits (Sch. R-1 and R-2, line 14 or 27 and line 31)			
	p. Technology zone credit (Sch. TC, line 6)			
	q. Food processing plant and food warehouse investment credit			
	r. Jobs tax credit			
	s. Postsecondary education credit			
	t. Woody biomass harvesting and processing credit			
	u. Water consumption credit			
	Total additions for credits computed	10	1258	.00
11	Special additions for insurance companies (from Schedule 4I, line 4)	11		.00
12	Other (list):			
	a	12a		.00
	b	12b		.00
	c	12c		.00
	d	12d		.00
	Add lines 12a through 12d	12		.00
13	Total (enter on Form 4 or 5, page 1, line 2)	13	5158	.00



DRAFT 2010

Schedule **W**

# Wisconsin Subtractions From Federal Income

# 2010

Wisconsin Department of Revenue

File with Wisconsin Form 4 or 5

Read instructions before filling in this schedule

Corporation or Designated Agent Name

HIDE N SEEK FOODS INC

Federal Employer ID Number

11-0000002

<b>1</b>	Wisconsin subtraction modification for dividends (from Sch. Y, line 4)	<b>1</b>	.00
<b>2</b>	Related entity expenses eligible for subtraction (from Schedule RT, Part II, Sch. 2K-1, and Sch. 3K-1)	<b>2</b>	.00
<b>3</b>	Income from related entities whose expenses were disallowed (obtain Schedule RT-1 from related entity and submit with your return)	<b>3</b>	.00
<b>4</b>	Subpart F income	<b>4</b>	.00
<b>5</b>	Gross-up of foreign dividend income	<b>5</b>	.00
<b>6</b>	Nontaxable income (attach schedule)	<b>6</b>	.00
<b>7</b>	Foreign taxes (do not include deemed taxes)	<b>7</b>	.00
<b>8</b>	Cost depletion	<b>8</b>	82934198 .00
<b>9</b>	Wisconsin depreciation/amortization in excess of federal depreciation/amortization (attach schedule)	<b>9</b>	.00
<b>10</b>	Amount by which the Wisconsin basis of assets disposed of exceeds the federal basis (attach schedule)	<b>10</b>	.00
<b>11</b>	Federal work opportunity credit wages	<b>11</b>	.00
<b>12</b>	Federal research credit expenses	<b>12</b>	.00
<b>13</b>	Other (list, but do not include any adjustment for nontaxable income from life insurance operations)		
	a _____	<b>13a</b>	.00
	b _____	<b>13b</b>	.00
	c _____	<b>13c</b>	.00
	d _____	<b>13d</b>	.00
	e _____	<b>13e</b>	.00
	f _____	<b>13f</b>	.00
	g _____	<b>13g</b>	.00
	h _____	<b>13h</b>	.00
	Add lines 13a through 13h	<b>13</b>	.00
<b>14</b>	Nontaxable income from life insurance operations (from Schedule 4I, line 13)	<b>14</b>	.00
<b>15</b>	Total (enter on Form 4 or 5, page 1, line 4)	<b>15</b>	82934198 .00

DRAFT 7-12-2010



**Underpayment of Estimated Tax by Corporations**

File with Wisconsin Form 4, 4T, 5, or 5S

**2010**

Wisconsin Department of Revenue

Corporation or Designated Agent Name  
**HIDE N SEEK FOODS INC**

Federal Employer ID Number  
**11-0000002**

**Part I Computation of Underpayment and Interest Due on Underpayment**

1 a	Enter 2010 tax before the surcharge plus the recycling surcharge (see instructions) .....	10565		
b	Enter 2010 refundable credits (excluding estimated tax and surcharge paid) .....			
c	Subtract line 1b from line 1a. This is 2010 net tax and surcharge. If less than \$500, enter zero and go to Part II, if applicable .....	10565		
2	Enter 90% of line 1c .....	9509		
3 a	Enter 2009 tax before the surcharge plus the recycling surcharge, if applicable (see instructions) .....	14000		
b	Enter 2009 refundable credits (excluding estimated tax and surcharge paid) .....			
c	Subtract line 3b from line 3a. This is 2009 net tax and surcharge .....	14000		
4	If 2010 net income is less than \$250,000 and 2009 return covered 12 months, enter smaller of line 2, or 3c; otherwise, enter line 2 .....	9509		
5	Enter installment due dates (the 15th day of the 3rd, 6th, 9th, and 12th months of your taxable year) .....	(a)	(b)	(c)
6	Divide line 4 by 4 and enter the result in each column or, if you use the annualized income installment method for any period, first fill in Part III and enter the amounts from line 47 .....	2378	2377	2377
7	Estimated tax and surcharge paid .....	8000		
8	If line 7 is less than line 6, subtract line 7 from line 6. This is your underpayment .....			
9	If line 7 is more than line 6, subtract line 6 from line 7. This is your overpayment .....	5622		
10	Carryback of overpayment or late payment .....			
11	Carryforward of overpayment .....		2377	2377
12	Subtract the total of lines 10 and 11 from line 8. This is your net underpayment .....			868
13	Number of days from the due date of the installment to the date carryback on line 10 was paid .....			1509
14	Number of days from the due date of the installment to the date balance due on return was paid or unextended due date of return, whichever is earlier 12/15/10 to 3/15/11 .....			90
15	Interest: 12% per year on amount on line 10 for the number of days on line 13 .....			
16	Interest: 12% per year on amount on line 12 for the number of days on line 14 $90/365 \times .12 \times 1509$ .....			45
17	Add all of the amounts on lines 15 and 16 and enter the total. If your return is filed after the unextended due date and shows a tax due, enter the total on Part II, line 22. Otherwise, enter the total on the line provided on your tax return .....			45

**Part II Computation of Total Amount Due**

Complete this part only if your return is not filed by the unextended due date and shows a tax due.	(a) Interest at 18% per year	(b) Interest at 12% per year	(c) Total
18 If return filed late without an extension, enter net tax (including surcharge) .....			
19 If return filed with extended due date and shows –	(90%)	(10%)	
a Net tax (including surcharge) of \$500 or more, enter portion of net tax indicated ..			
b Net tax (including surcharge) of less than \$500, enter net tax .....			
20 Enter payments made (apply first to 18% per year column) .....			
21 Subtract line 20 from line 18 or 19a or 19b. This is amount due 15th day of 3rd month after end of taxable year .....			
22 Interest on underpayment from Part I, line 17 .....			
23 Add lines 21 and 22 .....			
24 Interest on amounts on line 23 to _____ (date return filed) .....	(18% per year)	(12% per year) *	
25 If your return is filed late without an extension or after the extended due date –			
a Enter penalty of 5% of net tax due on your return for each month or fraction thereof that your return is late, but not more than 25%			
b Enter a \$150 late fee .....			
26 Add lines 22, 24, 25a, and 25b. Enter the total on the line provided on your return and increase the "Amount Due" .....			

\* Note: See the instructions for line 24.

<b>A Check if:</b> 1a Consolidated return (attach Form 851) <input type="checkbox"/> b Life/nonlife consolidated return <input type="checkbox"/> 2 Personal holding co. (attach Sch. PH) <input type="checkbox"/> 3 Personal service corp. (see instructions) <input type="checkbox"/> 4 Schedule M-3 attached <input type="checkbox"/>	<b>Use IRS label.</b> Otherwise, print or type.	Name <b>HIDE N SEEK FOODS</b> Number, street, and room or suite no. If a P.O. box, see instructions. <b>32 ANY ST</b> City or town, state, and ZIP code <b>ANYTOWN TX 77287</b>	<b>B Employer identification number</b> <b>11-0000002</b> <b>C Date incorporated</b> <b>06-15-1979</b> <b>D Total assets (see instructions)</b> \$ <b>9,788,175</b>
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**E Check if:** (1)  Initial return (2)  Final return (3)  Name change (4)  Address change

<b>Income</b>	1a	Gross receipts or sales <b>496,482,805</b>		b Less returns and allowances <b>60,233,606</b>		c Bal ▶	1c	<b>436249199</b>
	2	Cost of goods sold (Schedule A, line 8)					2	<b>287440463</b>
	3	Gross profit. Subtract line 2 from line 1c					3	<b>148808736</b>
	4	Dividends (Schedule C, line 19)					4	<b>2304041</b>
	5	Interest					5	<b>2948781</b>
	6	Gross rents					6	<b>6132695</b>
	7	Gross royalties					7	<b>2707354</b>
	8	Capital gain net income (attach Schedule D (Form 1120))					8	<b>409042</b>
	9	Net gain or (loss) from Form 4797, Part II, line 17 (attach Form 4797)					9	<b>530308</b>
	10	Other income (see instructions—attach schedule)					10	<b>50072270</b>
	11	<b>Total income.</b> Add lines 3 through 10.					▶ 11	<b>213914127</b>

<b>Deductions (See instructions for limitations on deductions.)</b>	12	Compensation of officers (Schedule E, line 4)		▶ 12	<b>3563291</b>	
	13	Salaries and wages (less employment credits)		▶ 13	<b>30986825</b>	
	14	Repairs and maintenance		▶ 14	<b>598092</b>	
	15	Bad debts		▶ 15	<b>378768</b>	
	16	Rents		▶ 16	<b>3473590</b>	
	17	Taxes and licenses		▶ 17	<b>5726524</b>	
	18	Interest		▶ 18	<b>21434718</b>	
	19	Charitable contributions		▶ 19	<b>148769</b>	
	20	Depreciation from Form 4562 not claimed on Schedule A or elsewhere on return (attach Form 4562)		▶ 20	<b>1656534</b>	
	21	Depletion		▶ 21		
	22	Advertising		▶ 22	<b>1870199</b>	
	23	Pension, profit-sharing, etc., plans		▶ 23	<b>2227414</b>	
	24	Employee benefit programs		▶ 24	<b>3289542</b>	
	25	Domestic production activities deduction (attach Form 8903)		▶ 25		
	26	Other deductions (attach schedule)		▶ 26	<b>55481163</b>	
	27	<b>Total deductions.</b> Add lines 12 through 26.		▶ 27	<b>130835429</b>	
	28	Taxable income before net operating loss deduction and special deductions. Subtract line 27 from line 11.		▶ 28	<b>83078698</b>	
	29	Less: a Net operating loss deduction (see instructions)	29a		▶ 29c	
		b Special deductions (Schedule C, line 20)	29b		▶ 29c	

<b>Tax, Refundable Credits, and Payments</b>	30	Taxable income. Subtract line 29c from line 28 (see instructions)		▶ 30	<b>83078698</b>		
	31	Total tax (Schedule J, line 10)		▶ 31	<b>17867507</b>		
	32a	2009 overpayment credited to 2010	32a	<b>232650</b>			
	b	2010 estimated tax payments	32b	<b>20000000</b>			
	c	2010 refund applied for on Form 4466	32c	( )			
	d	Tax deposited with Form 7004			d Bal ▶	32d	<b>20232650</b>
	e	Credits: (1) Form 2439				32e	
	f	(2) Form 4136				32f	
	g	Refundable credits from Form 3800, line 19c, and Form 8827, line 8c				32g	
	32h					▶ 32h	<b>20232650</b>
33	Estimated tax penalty (see instructions). Check if Form 2220 is attached			▶ <input type="checkbox"/>	33		
34	<b>Amount owed.</b> If line 32h is smaller than the total of lines 31 and 33, enter amount owed			▶	34		
35	<b>Overpayment.</b> If line 32h is larger than the total of lines 31 and 33, enter amount overpaid			▶	35	<b>2365143</b>	
36	Enter amount from line 35 you want: <b>Credited to 2011 estimated tax</b> ▶			▶	36	<b>1365143</b>	
				▶			

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.

<b>Sign Here</b>	Signature of officer _____	Date _____	Title _____
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May the IRS discuss this return with the preparer shown below (see instructions)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's signature	Date	Check <input checked="" type="checkbox"/> if self-employed	PTIN <b>999-06-007</b>
	Firm's name ▶ <b>ELECTRONIC TAX FILERS INC</b>				Firm's EIN ▶ <b>11-0000011</b>
	Firm's address ▶ <b>100 EFILE DR, ANYTOWN TX 77287</b>				Phone no. <b>512-555-1212</b>