

Form **1120-H**

**U.S. Income Tax Return  
for Homeowners Associations**

OMB No. 1545-0123

**2019**

Department of the Treasury  
Internal Revenue Service

Go to [www.irs.gov/Form1120H](http://www.irs.gov/Form1120H) for instructions and the latest information.

For calendar year 2019 or tax year beginning **04/01/19**, and ending **03/31/20**

<b>TYPE OR PRINT</b>	Name <b>COUNTRY CREEK PATIO HOME ASSOCIATIO</b>	Employer identification number <b>84-1474599</b>
	Number, street, and room or suite no. If a P.O. box, see instructions. <b>P.O. BOX 516</b>	Date association formed <b>04/16/1998</b>
	City or town, state or province, country, and ZIP or foreign postal code <b>FRUITA CO 81521</b>	

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

**A** Check type of homeowners association:  Condominium management association  Residential real estate association  Timeshare association

<b>B</b> Total exempt function income. Must meet 60% gross income test. See instructions	<b>B</b> <b>343,713</b>
<b>C</b> Total expenditures made for purposes described in 90% expenditure test. See instructions	<b>C</b> <b>311,147</b>
<b>D</b> Association's total expenditures for the tax year. See instructions	<b>D</b>
<b>E</b> Tax-exempt interest received or accrued during the tax year	<b>E</b>

**Gross Income** (excluding exempt function income)

1 Dividends	1 <b>761</b>
2 Taxable interest	2 <b>8,040</b>
3 Gross rents	3
4 Gross royalties	4
5 Capital gain net income (attach Schedule D (Form 1120))	5
6 Net gain or (loss) from Form 4797, Part II, line 17 (attach Form 4797)	6
7 Other income (excluding exempt function income) (attach statement)	7
<b>8 Gross income</b> (excluding exempt function income). Add lines 1 through 7	<b>8</b> <b>8,801</b>

**Deductions** (directly connected to the production of gross income, excluding exempt function income)

9 Salaries and wages	9
10 Repairs and maintenance	10
11 Rents	11
12 Taxes and licenses	12
13 Interest	13
14 Depreciation (attach Form 4562)	14
15 Other deductions (attach statement)	15
<b>16 Total deductions.</b> Add lines 9 through 15	<b>16</b> <b>0</b>
<b>17 Taxable income</b> before specific deduction of \$100. Subtract line 16 from line 8	<b>17</b> <b>8,801</b>
<b>18 Specific deduction</b> of \$100	<b>18</b> <b>100</b>

**Tax and Payments**

19 <b>Taxable income.</b> Subtract line 18 from line 17	19 <b>8,701</b>						
20 Enter 30% (0.30) of line 19. (Timeshare associations, enter 32% (0.32) of line 19.)	20 <b>2,610</b>						
21 Tax credits (see instructions)	21						
<b>22 Total tax.</b> Subtract line 21 from line 20. See instructions for recapture of certain credits	<b>22</b> <b>2,610</b>						
23a 2018 overpayment credited to 2019	23a						
b 2019 estimated tax payments	23b						
c Total	23c						
d Tax deposited with Form 7004	23d						
e Credit for tax paid on undistributed capital gains (attach Form 2439)	23e						
f Credit for federal tax paid on fuels (attach Form 4136)	23f						
g Add lines 23c through 23f	23g						
<b>24 Amount owed.</b> Subtract line 23g from line 22. See instructions	<b>24</b> <b>2,610</b>						
<b>25 Overpayment.</b> Subtract line 22 from line 23g	<b>25</b>						
<b>26</b> Enter amount of line 25 you want: <b>Credited to 2020 estimated tax</b> <input type="checkbox"/> <b>Refunded</b> <input type="checkbox"/>	<b>26</b>						

**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.

May the IRS discuss this return with the preparer shown below? See instr.  Yes  No

Signature of officer **JOHN MOIR** Date \_\_\_\_\_ Title **PRESIDENT**

<b>Paid</b>	Print/Type preparer's name <b>KENNETH L PALMER, CPA</b>	Preparer's signature <b>KENNETH L PALMER, CPA</b>	Date <b>05/27/20</b>	Check <input type="checkbox"/> if self-employed	PTIN <b>P00007508</b>
	<b>Preparer</b>	Firm's name <input type="checkbox"/> <b>PALMER, BRADY &amp; COMPANY, PLLC</b>	Firm's EIN <input type="checkbox"/> <b>83-2474636</b>		
<b>Use Only</b>	Firm's address <input type="checkbox"/> <b>PO BOX 147 FRUITA, CO 81521-0147</b>	Phone no. <b>970-242-3320</b>			

For Paperwork Reduction Act Notice, see separate instructions.

Form **1120-H** (2019)

Form <b>1120/ 1120-S</b>	Federal Estimated Tax Payments Worksheet	For calendar year 2020 or tax year beginning <b>04/01/20</b> , ending <b>03/31/21</b>	<b>2020</b>
Name <b>COUNTRY CREEK PATIO HOME ASSOCIATIO</b>			Employer Identification Number <b>84-1474599</b>

1. Tax .....	1.	<b>2,610</b>		
2. Tax increase/decrease .....	2.			
3. Net tax .....	3.	<b>2,610</b>		
4. If large corporation, 2020 expected liability .....	4.			
5. Estimates before rounding, overpayment applied and estimates already paid:				
	<b>Estimate 1</b>	<b>Estimate 2</b>	<b>Estimate 3</b>	<b>Estimate 4</b>
	<b>653</b>	<b>652</b>	<b>653</b>	<b>652</b>
6. Estimates after rounding, but before overpayment applied and estimates already paid:				
	<b>660</b>	<b>660</b>	<b>660</b>	<b>660</b>
<b>Less:</b>				
7. 2019 overpayment applied to 2020 estimates:				
<b>Less:</b>				
8. 2020 estimates already paid:				
9. Final estimates after rounding, overpayment applied and estimates already paid:				
	<b>660</b>	<b>660</b>	<b>660</b>	<b>660</b>
10. Estimate due dates:	<b>07/15/20</b>	<b>09/15/20</b>	<b>12/15/20</b>	<b>03/15/21</b>