

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

**2018**

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

For calendar year 2018 or tax year beginning \_\_\_\_\_, 2018, and ending \_\_\_\_\_, 20

<b>TYPE OR PRINT</b>	Name <b>EAGLES LANDING CONDOMINIUM ASSOCIATION</b>	Employer identification number 
	Number, street, and room or suite no. If a P.O. box, see instructions. <b>PO BOX 206</b>	Date association formed
	City or town, state or province, country, and ZIP or foreign postal code <b>ESTES PARK CO 80517</b>	<b>05-13-1983</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> 161,200#2
<b>C</b> Total expenditures made for purposes described in 90% expenditure test. See instructions . . . . .	<b>C</b> 136,501#3
<b>D</b> Association's total expenditures for the tax year. See instructions . . . . .	<b>D</b> 136,501#4
<b>E</b> Tax-exempt interest received or accrued during the tax year . . . . .	<b>E</b>

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

1 Dividends . . . . .	
2 Taxable interest . . . . .	212#1
3 Gross rents . . . . .	
4 Gross royalties . . . . .	
5 Capital gain net income (attach Schedule D (Form 1120)) . . . . .	
6 Net gain or (loss) from Form 4797, Part II, line 17 (attach Form 4797) . . . . .	
7 Other income (excluding exempt function income) (attach statement) . . . . .	
<b>8 Gross income</b> (excluding exempt function income). Add lines 1 through 7 . . . . .	<b>8</b> 212

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

9 Salaries and wages . . . . .	
10 Repairs and maintenance . . . . .	
11 Rents . . . . .	
12 Taxes and licenses . . . . .	
13 Interest . . . . .	
14 Depreciation (attach Form 4562) . . . . .	
15 Other deductions (attach statement) . . . . .	
<b>16 Total deductions.</b> Add lines 9 through 15 . . . . .	
17 Taxable income before specific deduction of \$100. Subtract line 16 from line 8 . . . . .	212
<b>18 Specific deduction of \$100</b> . . . . .	<b>18</b> \$100

**Tax and Payments**

19 <b>Taxable income.</b> Subtract line 18 from line 17 . . . . .	112
20 Enter 30% (0.30) of line 19. (Timeshare associations, enter 32% (0.32) of line 19.) . . . . .	34
21 Tax credits (see instructions) . . . . .	
<b>22 Total tax.</b> Subtract line 21 from line 20. See instructions for recapture of certain credits . . . . .	<b>22</b> 34
23 a 2017 overpayment credited to 2018 <span style="float:right;">23a</span>	
b 2018 estimated tax payments <span style="float:right;">23b</span>	
c Total ▶ <span style="float:right;">23c</span>	
d Tax deposited with Form 7004 . . . . . <span style="float:right;">23d</span>	
e Credit for tax paid on undistributed capital gains (attach Form 2439) . . . . . <span style="float:right;">23e</span>	
f Credit for federal tax paid on fuels (attach Form 4136) . . . . . <span style="float:right;">23f</span>	
g Add lines 23c through 23f . . . . . <span style="float:right;">23g</span>	
24 <b>Amount owed.</b> Subtract line 23g from line 22. See instructions . . . . .	34
25 <b>Overpayment.</b> Subtract line 22 from line 23g . . . . .	
26 Enter amount of line 25 you want: <b>Credited to 2018 estimated tax</b> ▶ <input type="checkbox"/> <b>Refunded</b> ▶ <input type="checkbox"/>	

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.

**Sign Here**

Signature of officer	Date	Title	
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May the IRS discuss this return with the preparer shown below? See instrs.  Yes  No

<b>Paid Preparer Use Only</b>	Print/Type preparer's name <b>DANA SCHMIDT</b>	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN 
	Firm's name ▶ <b>H AND R BLOCK</b>	Firm's EIN ▶			
	Firm's address ▶ <b>1140 MANFORD AVE BLDG B</b>	Phone no. <b>9705866106</b>			



2018 DETAIL STATEMENTS

EAGLES LANDING CONDOMINIUM ASS

STATEMENT #1 - INTEREST (FM 1120/C/H/POL 5/5/2/2)

INTERESTS INCOME..... 212

TOTAL CARRIED TO FM 1120/C/H/POL 5/5/2/2..... 212

STATEMENT #2 - TOTAL EXEMPT FUNCTION INCOME (FORM 1120-H LINE B)

ASSOCIATION DUES & ASSESSMENTS

TOTAL CARRIED TO FORM 1120-H LINE B

STATEMENT #3 - EXPEND PURPOSES IN 90% TEST (FORM 1120-H LINE C)

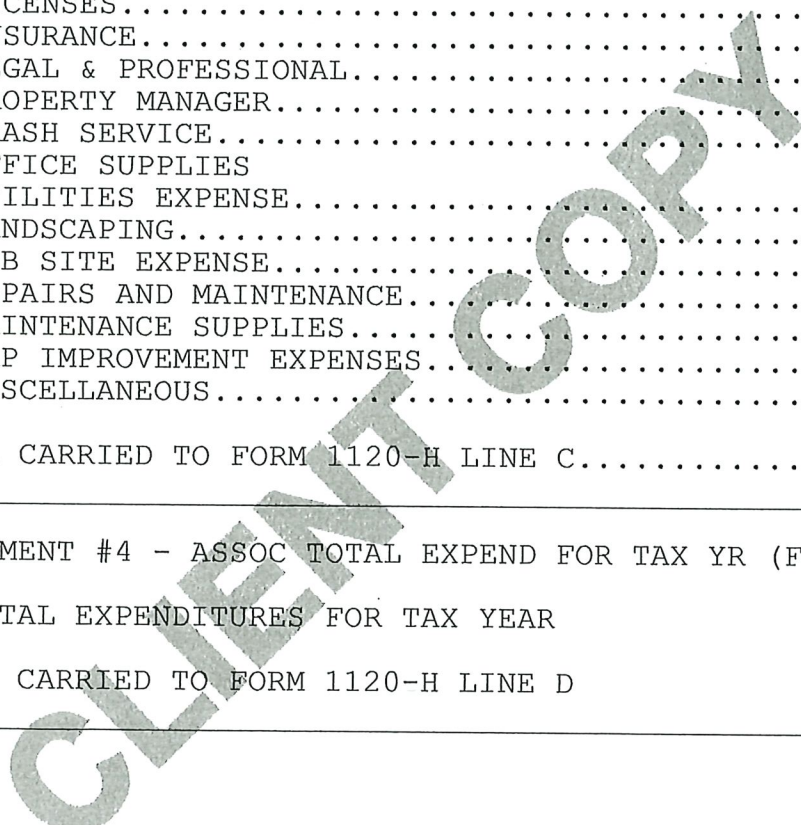
LICENSES.....	208
INSURANCE.....	8,929
LEGAL & PROFESSIONAL.....	4,990
PROPERTY MANAGER.....	16,568
TRASH SERVICE.....	6,555
OFFICE SUPPLIES	
UTILITIES EXPENSE.....	36,187
LANDSCAPING.....	11,091
WEB SITE EXPENSE.....	117
REPAIRS AND MAINTENANCE.....	34,964
MAINTENANCE SUPPLIES.....	1,555
CAP IMPROVEMENT EXPENSES.....	14,152
MISCELLANEOUS.....	1,185

TOTAL CARRIED TO FORM 1120-H LINE C..... 136,501

STATEMENT #4 - ASSOC TOTAL EXPEND FOR TAX YR (FORM 1120-H LINE D)

TOTAL EXPENDITURES FOR TAX YEAR

TOTAL CARRIED TO FORM 1120-H LINE D





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### 2018 Colorado C Corporation Income Tax Return

Do not submit federal return, forms or schedules when filing this return.

Fiscal Year Beginning (MM/DD/18)		Year Ending (MM/DD/YY)	
		2018	
Name of Corporation			Colorado Account Number
EAGLES LANDING CONDOMINIUM ASSOCIATION			
Address			FEIN
PO BOX 206			
City			State ZIP
ESTES PARK			CO 80517

Final Return  If you are submitting a statement disclosing a listed or reported transaction, mark this box

**A. Apportionment of Income.** This return is being filed for:

<input checked="" type="checkbox"/> (42) A corporation not apportioning income;	<input type="checkbox"/> (45) A corporation electing to pay a tax on its gross Colorado sales;
<input type="checkbox"/> (43) A corporation engaged in interstate business apportioning income using single-factor apportionment (DR 0112SF required);	<input type="checkbox"/> (46) A corporation claiming an exemption under P.L. 86-272;
<input type="checkbox"/> (44) A corporation engaged in interstate business apportioning income using special regulation (DR 0112SF required);	<input type="checkbox"/> (47) Other apportionment method (fill in below)

**B. Separate/Consolidated/Combined Filing.** This return is being filed for:

18 CO1121 BWF 1129 Form Software Copyright 1996 - 2019 HRB Tax Group, Inc.

<input checked="" type="checkbox"/> A single corporation filing a separate return;	<input type="checkbox"/> An affiliated group of corporations required to file a combined return (Schedule C required);
<input type="checkbox"/> An affiliated group of corporations electing to file a consolidated report. <b>Warning:</b> such election is binding for four years. If your election was made in a prior year, enter the year of election in line below. (Schedule C required);	<input type="checkbox"/> An affiliated group of corporations required to file a combined return that includes another affiliated, consolidated group (Schedule C required)

Enter the year of election (YYYY)

Federal Taxable Income		Round to nearest dollar	
1. Federal taxable income from Federal form 1120 or 990-T	1	112	00
2. Federal taxable income of companies not included in this return	2		00
3. Net federal taxable income, subtract line 2 from line 1	3	112	00
<b>Additions</b>			
4. Federal net operating loss deduction	4		00
5. Colorado income tax deduction	5		00
6. Other additions, submit explanation	6		00
7. Sum of lines 3 through 6	7	112	00



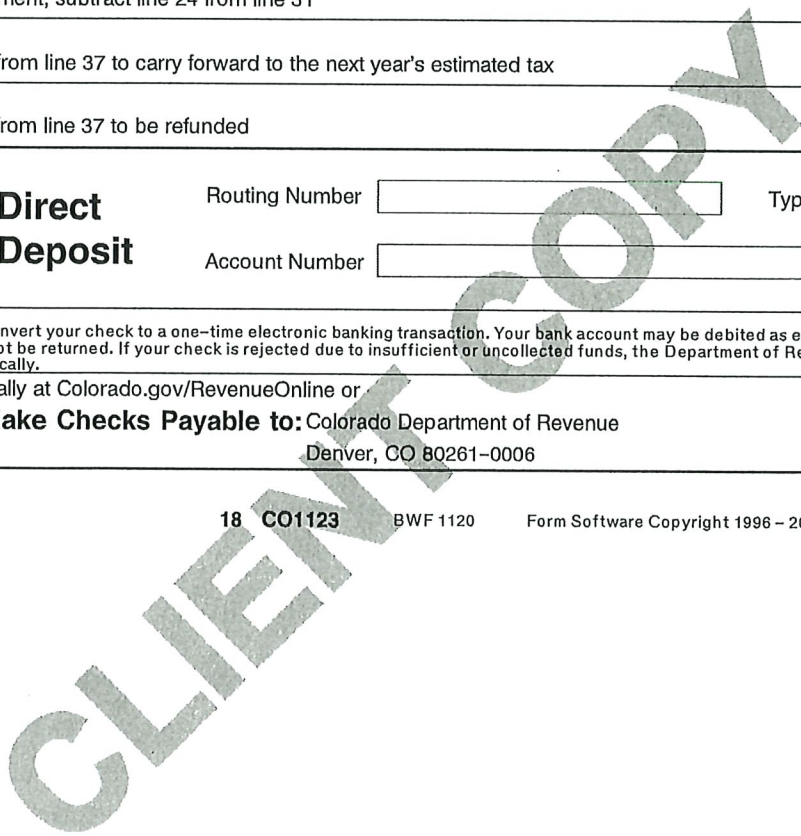
180112 22029

Name		Account Number
EAGLES LANDING CONDOMINIUM ASSOCIATION		
<b>Subtractions</b>		
8. Exempt federal interest	● 8	00
9. Excludable foreign source income	● 9	00
10. Colorado capital gain subtraction	● 10	00
11. Colorado Marijuana Business Deduction	● 11	00
12. Agricultural asset lease deduction. Enter CADA certificate number and submit a copy of your certificate with your return	● 12	00
<input type="checkbox"/> CADA Certificate Number <input style="width: 50px; height: 15px;" type="text"/>		
13. Other subtractions, submit explanation	● 13	00
14. Sum of lines 8 through 13	14	0 00
<b>Taxable Income</b>		
15. Modified federal taxable income, subtract line 14 from line 7	15	112 00
16. Colorado taxable income before net operating loss deduction	● 16	112 00
17. Colorado net operating loss deduction	● 17	00
18. Colorado taxable income, subtract line 17 from line 16	18	112 00
18 CO1122 BWF 1120 Form Software Copyright 1998 - 2019 HRB Tax Group, Inc.		
19. Tax, 4.63% of the amount on line 18	● 19	5 00
<b>Credits</b>		
20. Sum of nonrefundable credits from line 26, form DR 0112CR (the sum of lines 20 and 21 cannot exceed tax on line 19). You must submit the DR 0112CR with your return.	● 20	00
21. Non-refundable Enterprise Zone credits used - as calculated, or from the DR 1366 line 87 (the sum of lines 20 and 21 cannot exceed tax on line 19). You must submit the DR 1366 with your return.	● 21	00
22. Net tax, sum of lines 20 and 21. Subtract that sum from line 19.	22	5 00
23. Recapture of prior year credits	● 23	00
24. Sum of lines 22 and 23	24	5 00
25. Estimated tax and extension payments and credits	● 25	00
26. W-2G Withholding from lottery winnings, you must submit the W-2G(s) with your return.	● 26	0 00
27. Gross Conservation Easement Credit from the DR 1305G line 33, you must submit the DR 1305G with your return.	● 27	00
28. Innovative Motor Vehicle and Innovative Truck Credit from form DR 0617, you must submit the DR 0617(s) with your return.	● 28	00
29. Business Personal Property Credit: Use the worksheet in the 112 book instructions to calculate, you must submit copy of assessor's statement with your return.	● 29	00



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Name	Account Number
EAGLES LANDING CONDOMINIUM ASSOCIATION	
30. Renewable Energy Tax Credit from form DR 1366 line 88, you must submit the DR 1366 with your return.	● 30 00
31. Sum of lines 25 through 30	31 00
32. Net tax due. Subtract line 31 from line 24	32 5 00
33. Penalty	● 33 00
34. Interest	● 34 00
35. Estimated tax penalty due	● 35 00
36. Total due. Enter the sum of lines 32 through 35	● 36 5.00
37. Overpayment, subtract line 24 from line 31	37 00
38. Amount from line 37 to carry forward to the next year's estimated tax	● 38 0 00
39. Amount from line 37 to be refunded	● 39 0 00
<b>Direct Deposit</b> Routing Number <input type="text"/> Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings Account Number <input type="text"/>	
<small>The State may convert your check to a one-time electronic banking transaction. Your bank account may be debited as early as the same day received by the State. If converted, your check will not be returned. If your check is rejected due to insufficient or uncollected funds, the Department of Revenue may collect the payment directly from your bank account electronically.</small>	
Pay electronically at Colorado.gov/RevenueOnline or <b>Mail and Make Checks Payable to:</b> Colorado Department of Revenue Denver, CO 80261-0006	





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Name		Account Number	
EAGLES LANDING CONDOMINIUM ASSOCIATION			
C. The corporation's books are in care of:			
Last Name	First Name	Middle Initial	Phone Number
Address		City	State   Zip
D. Business code number per federal return (NAICS)		E. Year corporation began doing business in Colorado	
●		● 1983	
F. May the Colorado Department of Revenue discuss this return with the paid preparer shown below (see instructions)		● <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
G. Kind of business in detail CONDOMINIUM ASSOCIATION			
H. Has the Internal Revenue Service made any adjustments in the corporation's income or tax or have you filed amended federal income tax returns at any time during the last four years?		● <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
If yes, for which year(s)? (YYYY)			
Did you file amended Colorado returns to reflect such changes or submit copies of the Federal Agent's reports?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Last Name of person or firm preparing return		First Name	Middle Initial
SCHMIDT		DANA	
Address of person or firm preparing return		Phone Number	
1140 MANFORD AVE BLDG B		970-586-6106	
City		State	Zip
ESTES PARK		CO	80517
Under penalties of perjury in the second degree, I declare that I have examined this return and to the best of my knowledge is true, correct and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.			
Signature or Title of Officer		Date (MM/DD/YY)	
<b>Do Not Submit Federal Return, Forms or Schedules when Filing this Return</b>			

18 CO1124

BWF 1120

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If you are filing this return **with** a check or payment, please mail the return to:

COLORADO DEPARTMENT OF REVENUE  
Denver, CO 80261-0006

If you are filing this return **without** a check or payment, please mail the return to:

COLORADO DEPARTMENT OF REVENUE  
Denver, CO 80261-0005