

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

2017

Department of the Treasury
Internal Revenue Service

▶ Go to www.irs.gov/Form1120H for instructions and the latest information.

For calendar year 2017 or tax year beginning April 1, 2017, and ending March 31, 2018

TYPE OR PRINT	Name BROWN RANCH COMMUNITY ASSOCIATION, INC.	Employer identification number 20-1001186
	Number, street, and room or suite no. If a P.O. box, see instructions. PO BOX 516	Date association formed 04/08/2004
	City or town, state or province, country, and ZIP or foreign postal code FRUITA, CO 81521	

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

A Check type of homeowners association: <input type="checkbox"/> Condominium management association <input checked="" type="checkbox"/> Residential real estate association <input type="checkbox"/> Timeshare association	B Total exempt function income. Must meet 60% gross income test. See instructions	B	42,025	00
C Total expenditures made for purposes described in 90% expenditure test. See instructions	C	37,612	04	
D Association's total expenditures for the tax year. See instructions	D			
E Tax-exempt interest received or accrued during the tax year	E			

Gross Income (excluding exempt function income)

1 Dividends	1		
2 Taxable interest	2	1	50
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		
8 Gross income (excluding exempt function income). Add lines 1 through 7	8	1	50

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		
16 Total deductions. Add lines 9 through 15	16	0	00
17 Taxable income before specific deduction of \$100. Subtract line 16 from line 8	17	1	50
18 Specific deduction of \$100	18	\$100	00

Tax and Payments

19 Taxable income. Subtract line 18 from line 17	19	0	00
20 Enter 30% (0.30) of line 19. (Timeshare associations, enter 32% (0.32) of line 19.)	20	0	00
21 Tax credits (see instructions)	21		
22 Total tax. Subtract line 21 from line 20. See instructions for recapture of certain credits	22		
23 a 2016 overpayment credited to 2017 23a			
b 2017 estimated tax payments 23b			
c Total ▶ 23c		0	00
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		0	00
24 Amount owed. Subtract line 23g from line 22. See instructions	24	0	00
25 Overpayment. Subtract line 22 from line 23g	25	0	00
26 Enter amount of line 25 you want: Credited to 2018 estimated tax ▶ Refunded ▶ 26			

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 _____ Date _____ Title _____

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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Paid Preparer Use Only	Print/Type preparer's name DANIEL BRESNAHAN, CPA	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN P00713830
	Firm's name ▶ EIDE BAILLY, LLP	Firm's EIN ▶ 45-0250958			
	Firm's address ▶ 655 N 12TH ST. GRAND JUNCTION, CO 81501	Phone no. 970-245-5181			

For Paperwork Reduction Act Notice, see separate instructions.