

CLIENT COPY

For calendar year 2019 or tax year beginning _____, and ending _____

TYPE OR PRINT	<small>Name</small>	Roosevelt Ridge Homeowners Association	<small>Employer identification number</small>
	<small>Number, street, and room or suite no. If a P.O. box, see instructions.</small>	1630A 30th Street, #442	20-3516170
	<small>City or town, state or province, country, and ZIP or foreign postal code</small>	Boulder, CO 80301-1014	<small>Date association formed</small>
			09/22/2005

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 Total exempt function income. Must meet 60% gross income test	See Statement 1	B	23,148.
C Total expenditures made for purposes described in 90% expenditure test	See Statement 2	C	29,558.
D Association's total expenditures for the tax year		D	29,558.
E Tax-exempt interest received or accrued during the tax year		E	0.

Gross Income (excluding exempt function income)

1 Dividends		1	
2 Taxable interest	See Statement 3	2	8.
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	8.

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.
17 Taxable income before specific deduction of \$100. Subtract line 16 from line 8		17	8.
18 Specific deduction of \$100		18	\$100

Tax and Payments

19 Taxable income. Subtract line 18 from line 17		19	-92.	
20 Enter 30% (0.30) of line 19. (Timeshare associations, enter 32% (0.32) of line 19.)		20	0.	
21 Tax credits		21		
22 Total tax. Subtract line 21 from line 20. See instructions for recapture of certain credits		22	0.	
23 a 2018 overpayment credited to 2019	23a			
b 2019 estimated tax payments	23b			
c Total	23c			0.
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.	
24 Amount owed. Subtract line 23g from line 22. See instructions		24		
25 Overpayment. Subtract line 22 from line 23g		25		
26 Enter amount of line 25 you want: Credited to 2020 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.

May the IRS discuss this return with the preparer shown below (see instr.)? Yes No

Signature of officer: _____ Date: _____ Title: **President**

<small>Print/Type preparer's name</small>	<small>Preparer's signature</small>	<small>Date</small>	<small>Check if self-employed</small> <input type="checkbox"/>	<small>PTIN</small>
Michael Whitmore, CPA		4/27/20		P01266875
<small>Firm's name</small>	<small>Firm's EIN</small>			
HMA CPA, PS	47-0888689			
<small>Firm's address</small>				
510 W. Riverside Ave., Ste 400				
Spokane, WA 99201-	<small>Phone no.</small> (509) 455-8173			

Roosevelt Ridge Homeowners Association

20-3516170

Form 1120-H	Exempt Function Income	Statement 1
<u>Description</u>		<u>Amount</u>
HOA Membership Dues		19,038.
Miscellaneous Income		4,110.
Total to Form 1120-H, Item B		23,148.

Form 1120-H	EXPENDITURES DESCRIBED IN 90% TEST	Statement 2
<u>Description</u>		<u>Amount</u>
Bank Fees		302.
Insurance		1,784.
Licenses & Fees		464.
Office Expense		655.
Postage & Delivery		500.
Professional Fees		7,596.
Repairs & Maintenance		16,415.
Utilities		1,842.
Total to Form 1120-H, Item C		29,558.

Form 1120-H	Interest Income	Statement 3
<u>Description</u>	<u>US</u>	<u>Other</u>
First National Bank of Colorado		8.
Total to Form 1120-H, Line 2		8.

Application for Automatic Extension of Time To File Certain Business Income Tax, Information, and Other Returns
▶ **File a separate application for each return.**
▶ **Go to www.irs.gov/Form7004 for instructions and the latest information.**

OMB No. 1545-0233

Print or Type	Name Roosevelt Ridge Homeowners Association	Identifying number 20-3516170
	Number, street, and room or suite no. (If P.O. box, see instructions.) 1630A 30th Street, #442	
	City, town, state, and ZIP code (If a foreign address, enter city, province or state, and country (follow the country's practice for entering postal code).) Boulder, CO 80301-1014	

Note: File request for extension by the due date of the return. See instructions before completing this form.

Part I Automatic Extension for Certain Business Income Tax, Information, and Other Returns. See instructions.

1 Enter the form code for the return listed below that this application is for 17

Application Is For:	Form Code	Application Is For:	Form Code
Form 706-GS(D)	01	Form 1120-ND (section 4951 taxes)	20
Form 706-GS(T)	02	Form 1120-PC	21
Form 1041 (bankruptcy estate only)	03	Form 1120-POL	22
Form 1041 (estate other than a bankruptcy estate)	04	Form 1120-REIT	23
Form 1041 (trust)	05	Form 1120-RIC	24
Form 1041-N	06	Form 1120S	25
Form 1041-QFT	07	Form 1120-SF	26
Form 1042	08	Form 3520-A	27
Form 1065	09	Form 8612	28
Form 1066	11	Form 8613	29
Form 1120	12	Form 8725	30
Form 1120-C	34	Form 8804	31
Form 1120-F	15	Form 8831	32
Form 1120-FSC	16	Form 8876	33
Form 1120-H	17	Form 8924	35
Form 1120-L	18	Form 8928	36
Form 1120-ND	19		

Part II All Filers Must Complete This Part

- 2 If the organization is a foreign corporation that does not have an office or place of business in the United States, check here
- 3 If the organization is a corporation and is the common parent of a group that intends to file a consolidated return, check here
If checked, attach a statement listing the name, address, and employer identification number (EIN) for each member covered by this application.
- 4 If the organization is a corporation or partnership that qualifies under Regulations section 1.6081-5, check here
- 5a The application is for calendar year **2019**, or tax year beginning _____, and ending _____
- b **Short tax year.** If this tax year is less than 12 months, check the reason: Initial return Final return
 Change in accounting period Consolidated return to be filed Other (See instructions - attach explanation.)

6 Tentative total tax	6	0.
7 Total payments and credits. See instructions	7	0.
8 Balance due. Subtract line 7 from line 6. See instructions	8	0.

LHA For Privacy Act and Paperwork Reduction Act Notice, see separate instructions.

Form 7004 (Rev. 12-2018)

Department of the Treasury
Internal Revenue Service Center
Ogden, UT 84201-0045