Form 1120-H

U.S. Income Tax Return for Homeowners Associations

OMB No. 1545-0123

2016

Department of the Treasury Internal Revenue Service

▶ Information about Form 1120-H and its separate instructions is at www.irs.gov/form1120h.

For ca	lendar y	year 2016 or tax year beginni	ng		, 2016,	and	ending			, 20	
TYPE	Nam	Name Employer identific						n numt	oer		
		OAK HOLLOW HOMEONERS ASSOCIATION, INC.									
OR	Num	Number, street, and room or suite no. If a P.O. box, see instructions. Date association forms									
PRIN1	P.O.	P.O. BOX 620921									
l	City or town, state or province, country, and ZIP or foreign postal code										
OVIEDO, FL 32762											
Check		I) Final return	(2) Name c				ess change	<u> </u>		ended return	
A	Check type of homeowners association: Condominium management association Residential real estate association									hare association	
В		xempt function income. Mus	•					_	В	8808	
С	Total expenditures made for purposes described in 90% expenditure test. See instructions								С	6397	
D	Association's total expenditures for the tax year. See instructions								D	6397	
_ <u>E</u>	Tax-exempt interest received or accrued during the tax year								E		
Gross Income (excluding exempt function income)											
1		nds							1		
2		e interest .							2		
3	Gross rents								3		
4	Gross royalties								4		
5	Capital gain net income (attach Schedule D (Form 1120))								5	12	
6	Net gain or (loss) from Form 4797, Part II, line 17 (attach Form 4797)								6		
7		ncome (excluding exempt fu							7		
8		income (excluding exempt f							8	0	
	Deductions (directly connected to the production of gross income, excluding exempt function income)										
9									9		
10	Repairs	s and maintenance				5 5			10		
11	Rents								11		
12									12		
13	Interest								13		
14	Depreciation (attach Form 4562)								14		
15	Other deductions (attach statement)								15		
	Total deductions. Add lines 9 through 15								16	0	
17		e income before specific dec						L	17	0	
18	Specifi	c deduction of \$100							18	\$100 00	
				ax and Payme							
19		e income. Subtract line 18 f							19	(100)	
20	Tax credits (see instructions)							20	0		
							_	21			
	Total tax. Subtract line 21 from line 20. See instructions for recapture of certain credits								22	0	
23	a 2015 overpayment credited to 2016 23a										
		6 estimated tax payments .	23b		c Total ►			_			
		deposited with Form 7004	* * * * *		* - *	23	1	_			
		dit for tax paid on undistributed			2 2 2	23		_			
		dit for federal tax paid on fue	•		¥ ¥ ¥	23	f	- 1			
	_	d lines 23c through 23f			2 2 2		* * * * * * *		3g		
		nt owed. Subtract line 23g fro			* * *	2 2	* * * * * * *	_	24	0	
		ayment. Subtract line 22 from	_			<u> </u>	N N N N N N		25	0	
26		mount of line 25 you want: Cr					Refunded		26	0	
Sign	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the b correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.							est of my	knowledge	and belief, it is true,	
_									May the IRS discuss this return with the preparer shown below?		
Here	Signature of officer Date Secretary Title									ns. Yes No	
	, signi	1			iiie		Data			DTIN	
Paid		Print/Type preparer's name	Type preparer's name Preparer's signature Date					i if	PTIN		
Preparer									self-employed		
Use C	nly	Firm's name •							Firm's EIN ▶		
		Firm's address ▶						Phone no.			