STUART KATTER, CPA, LLP 2689 NORTHWEST CROSSING DRIVE BEND, OR 97703 541-639-7299



March 19, 2019

BELLA VISTA HOMES HOMEOWNERS ASSOCIATION C/O CRYSTAL LAKE COMMUNITY MGMT, INC. PO BOX 8550 BEND, OR 97708

Dear Client:

Enclosed is your 2018 Federal Income Tax Return for Homeowners Associations. The original should be signed at the bottom of page one. No tax is payable with the filing of this return. Mail the Federal return on or before April 15, 2019 to:

DEPARTMENT OF THE TREASURY INTERNAL REVENUE SERVICE CENTER OGDEN, UT 84201-0012

Enclosed is your 2018 Oregon Corporation Excise Tax Return. The original should be signed at the bottom of page three. No tax is payable with the filing of this return. Mail the Oregon return on or before May 15, 2019 to:

REFUND P.O. BOX 14777 SALEM, OR 97309-0960

Please be sure to call if you have any questions.

Sincerely,

STUART KATTER

Department of the Treasury Internal Revenue Service

U.S. Income Tax Return for Homeowners Associations

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

OMB No. 1545-0123

2018

LOL (calendar	year 2018 or tax year beg	inning		, 2018, and ending		,			
						Employer ide	ntification r	number		
			90-0877	90-0877531						
TYF	E BE	LLA VISTA HOMES		Date association formed						
OR	C/	O CRYSTAL LAKE C	1							
PRI	PO	BOX 8550								
	BE	ND, OR 97708				0 /17 /6	010			
<u> </u>	1					8/17/2				
Chec	ck if:	(1) Final return	(2) Name change	e (3) L	Address change	(4) Am	ended re	eturn		
Α	Check type	e of homeowners association:	Condominium management	t association	X Residential real estate	e association		Timeshare association		
В	Total ex	empt function income. Mi	ust meet 60% gross inco	me test. See inst	ructions		В	103,637.		
C		penditures made for purp					С	86,575.		
D	Association's total expenditures for the tax year. See instructions.							86,672.		
Ε							E	00,0121		
	E Tax-exempt interest received or accrued during the tax year									
1	Dividend	ds					1			
2		interest					2	183.		
3	Gross re	ents					3			
4	Gross ro	oyalties					4			
5		gain net income (attach S					5			
6		or (loss) from Form 479					6			
7		come (excluding exempt					7			
8		ncome (excluding exempt					8	183.		
		luctions (directly cor								
9		and wages					9	i income)		
10		and maintenance					10			
11							11			
12		nd licenses					12			
13							13			
14	Denreci	ation (attach Form 4562)					14			
15	Other de	eductions (attach stateme	nt)		SEE STATEME	NT 1	15	97.		
16	Total de	eductions. Add lines 9 thr	ough 15				16	97.		
17		income before specific d					17	86.		
18		deduction of \$100					18	\$100.		
				x and Paymer				1-331		
19	Taxable	income. Subtract line 18					19	-14.		
20		0% (0.30) of line 19. (Tim					20	0.		
21		dits (see instructions)			,		21	0.		
		x. Subtract line 21 from li					22			
		7 overpayment credited to					22	0.		
23		B estimated tax payments								
			AMAZINIAN ANDREAD DIFFERENCE		otal > 23c	0.				
		deposited with Form 7004 t for tax paid on undistributed ca					272			
		dit for federal tax paid on	253							
	177	lines 23c through 23f					23 g	0.		
		owed. Subtract line 23g f					24	0.		
		ment. Subtract line 22 fro					25			
26	Enter am	ount of line 25 you want: C				Refunded >	26			
		Under penalties of perjury, I dec belief, it is true, correct, and cor	lare that I have examined this ret uplete. Declaration of preparer (o	turn, including accompa	anying schedules and statem based on all information of w	ents, and to the be	est of my kr	nowledge and		
Sig: Her	n			May the	IRS discuss this return					
nere		Signature of officer Date Title						preparer shown below?		
		Print/Type preparer's name	I Proposada circad		I Dete			Yes No		
D - '	J.		Preparer's signat	MA	Date 3-15-10	Check X	if PTIN			
Proparer		STUART KATTER	STUART K		3-15-19	self-employed		0236705		
Preparer Use Only			KATTER, CPA, L			Firm's EIN	▶ 82	-4132496		
J30	Office		ORTHWEST CROSSI	NG DKIAE			E 4.4	620 5000		
DAA	Fa:: Da::		OR 97703			Phone no.	541-	-639-7299		

2018

FEDERAL STATEMENTS

PAGE 1

BELLA VISTA HOMES HOMEOWNERS ASSOCIATION C/O CRYSTAL LAKE COMMUNITY MGMT, INC.

90-0877531

STATEMENT 1 FORM 1120-H, LINE 15 OTHER DEDUCTIONS

ADMINISTRATION \$ TOTAL \$

Department of the Treasury Internal Revenue Service

Oregon Tax - Exempt HOA"

U.S. Income Tax Return for Homeowners Associations

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

OMB No. 1545-0123

2018

For	alendar y	ear 2018 or t	tax year begii	nning			, 2018, ar	nd ending		,		
								Employer identification number				
							90-0877531					
TYP	F DE								rement rement is	I STATE OF		
OR									Date associat	Date association formed		
PRI				DMMONTI	Y MGMT, IN	NC.			1			
		BOX 8550										
1	BEND, OR 97708							8/17/2	17/2012			
Chas												
Chec	heck if: (1) Final return (2) Name change (3) Address change (4) An								ended	eturri		
Α	Check type	of homeowners	association:	Condomin	um management as	ssociation	X Resident	ial real estate a	ssociation		Timeshare association	
В	Total ex	empt function	income Mu	st meet 60	% gross income	e test. See inst	ructions			В	103,637.	
C										C		
	Total expenditures made for purposes described in 90% expenditure test. See instructions								D	86,575.		
D											86,672.	
E	Tax-exempt interest received or accrued during the tax year.									E		
	Gross Income (excluding exempt function income)											
1	Dividend	ls								1		
2	Taxable	interest								2	183.	
3	Gross re	nts								3		
4	Gross ro	valties								4		
5					(Form 1120))					5		
70.00										-		
6					ne 17 (attach Fo					6		
7					ome) (attach st					7		
8					come). Add line					8	183.	
	Ded	uctions (d	irectly coni	nected to	the product	tion of gross	income,	excluding	exempt f	unctic	n income)	
9										9		
10	Repairs	and maintena	ance							10		
11	Rents									11		
12										12		
13										13		
14		Interest. Depreciation (attach Form 4562). Other deductions (attach statement). SEE STATEMENT 1								14		
	Other de	allon (allacin	-01111 4302)				SEE S	STATEMEN	ir 1	15		
15											97.	
16					***************************************					16	97.	
17		Taxable income before specific deduction of \$100. Subtract line 16 from line 8								17	86.	
_18	Specific	Specific deduction of \$100								18	\$100.	
					Tax	and Payme	nts					
19	Taxable	income. Sub	tract line 18	from line 1	7					19	-14.	
20					ciations, enter					20	0.	
21										21	0.	
		Tax credits (see instructions)										
						recapture of c	ertain credit	IS		22	0.	
23	a 2017	overpaymer	it credited to									
	b 2018	3 estimated ta	ax payments.	2	3b	c ·	Total ► 23 c		0.			
	d Tax	deposited wit	h Form 7004				230	d				
	e Credit	t for tax paid on	undistributed car	oital gains (at	tach Form 2439)	DUNC PROPERTY AND A STATE OF THE STATE OF TH	236	3				
										- 00	•	
	-									23 g	0.	
					. See instruction					24	0.	
25	Overpay	ment. Subtra	ct line 22 from	m line 23g						25		
26	Enter am	ount of line 25	you want: Cr	edited to 20)19 estimated ta	ix ►		R	Refunded >	26		
					examined this return tion of preparer (other		anying schedul	es and statemen	nts, and to the b	est of my	knowledge and	
Sign	n	belief, it is true,	correct, and com	plete. Declara	ion of preparer (other	er than taxpayer) is	based on all in	formation of whi	ch preparer has			
Sign Here										May t	he IRS discuss this return he preparer shown below?	
		Signature	of officer			Date	Title			See ii	nstrs. X Yes No	
		Print/Type prepa	arer's name		Preparer's signature	e	/ Date		[F-	PT		
Paid Preparer Use Only						,		5-19	Check X	if		
		STUART F		T/A mmm	STUART KA		5 7	, , ,	self-employed		00236705	
			STUART						Firm's EIN	▶ 8	2-4132496	
USE	Only	Firm's address			T CROSSING	G DRIVE						
			BEND, (JR 9770	3				Phone no.	541	L-639-7299	

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