

Morris, Paris & Associates  
3417 Universal Road  
Pittsburgh, PA 15235  
412-795-6610

March 29, 2019

Rustic Ridge Homeowners Association  
PO BOX 14461  
pittsburgh, PA 15239

Rustic Ridge Homeowners Association:

Enclosed are the original and one copy of your 2018 corporate tax return, as follows...

2018 U.S. Income Tax Return for Homeowners Associations

The original should be dated, signed and filed in accordance with the filing instructions. The copy should be retained for your files.

Very truly yours,

Morris, Paris & Associates

## Filing Instructions

Prepared for:

Rustic Ridge Homeowners Association  
PO BOX 14461  
pittsburgh, PA 15239

Prepared by:

Morris, Paris & Associates  
3417 Universal Road  
Pittsburgh, PA 15235

2018 HOMEOWNERS ASSOCIATION INCOME TAX RETURN

No payment is required.

The appropriate corporate officer(s) should sign and date the return.

Mail by April 15, 2019 to:           Department of the Treasury  
Internal Revenue Service Center  
Cincinnati, OH 45999-0012

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 \_\_\_\_\_, and ending \_\_\_\_\_

<b>TYPE OR PRINT</b>	Name <b>RUSTI C RI DGE HOMEOWNERS ASSOCI ATI ON</b>	Employer identification number <b>* * - * * * 4719</b>
	Number, street, and room or suite no. If a P.O. box, see instructions. <b>PO BOX 14461</b>	Date association formed <b>10/08/1993</b>
	City or town, state or province, country, and ZIP or foreign postal code <b>PI TTSBURGH, PA 15239</b>	

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

A	Check type of homeowners association: Condominium management association <input type="checkbox"/> Residential real estate association <input checked="" type="checkbox"/> Timeshare association <input type="checkbox"/>	
B	Total exempt function income. Must meet 60% gross income test ~ ~ ~ ~ ~ <b>SEE STATEMENT 1</b> ~ ~ ~ ~ ~	B <b>25,869.</b>
C	Total expenditures made for purposes described in 90% expenditure test ~ ~ ~ <b>SEE STATEMENT 2</b> ~ ~ ~	C <b>6,438.</b>
D	Association's total expenditures for the tax year ~ ~ ~ ~ ~	D <b>6,438.</b>
E	Tax-exempt interest received or accrued during the tax year ~ ~ ~ ~ ~	E <b>0.</b>

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

1	Dividends ~ ~ ~ ~ ~	
2	Taxable interest ~ ~ ~ ~ ~	
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) ~ ~ ~ ~ ~	
8	<b>Gross income (excluding exempt function income). Add lines 1 through 7 ~ ~ ~ ~ ~</b>	<b>0.</b>

**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) ~ ~ ~ ~ ~	
16	<b>Total deductions. Add lines 9 through 15 ~ ~ ~ ~ ~</b>	<b>0.</b>
17	<b>Taxable income before specific deduction of \$100. Subtract line 16 from line 8 ~ ~ ~ ~ ~</b>	<b>0.</b>
18	<b>Specific deduction of \$100 ~ ~ ~ ~ ~</b>	<b>\$100.00</b>

**Tax and Payments**

19	Taxable income. Subtract line 18 from line 17 ~ ~ ~ ~ ~	<b>- 100.</b>																																																						
20	Enter 30% (0.30) of line 19. (Timeshare associations, enter 32% (0.32) of line 19.) ~ ~ ~ ~ ~	<b>0.</b>																																																						
21	Tax credits ~ ~ ~ ~ ~																																																							
22	<b>Total tax. Subtract line 21 from line 20. See instructions for recapture of certain credits ~ ~ ~ ~ ~</b>	<b>0.</b>																																																						
23	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:20%;">a 2017 overpayment credited to 2018</td> <td style="width:10%;">23a</td> <td style="width:10%;"></td> <td style="width:10%;"></td> <td style="width:10%;"></td> <td style="width:10%;"></td> <td style="width:10%;"></td> <td style="width:10%;"></td> <td style="width:10%;"></td> </tr> <tr> <td>b 2018 estimated tax payments</td> <td>23b</td> <td></td> <td>c Total</td> <td>23c</td> <td></td> <td><b>0.</b></td> <td></td> <td></td> </tr> <tr> <td>d Tax deposited with Form 7004</td> <td></td> <td></td> <td></td> <td>23d</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>e Credit for tax paid on undistributed capital gains (attach Form 2439)</td> <td></td> <td></td> <td></td> <td>23e</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>f Credit for federal tax paid on fuels (attach Form 4136)</td> <td></td> <td></td> <td></td> <td>23f</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>g Add lines 23c through 23f</td> <td></td> <td></td> <td></td> <td>23g</td> <td></td> <td><b>0.</b></td> <td></td> <td></td> </tr> </table>	a 2017 overpayment credited to 2018	23a								b 2018 estimated tax payments	23b		c Total	23c		<b>0.</b>			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		<b>0.</b>			
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g Add lines 23c through 23f				23g		<b>0.</b>																																																		
24	Amount owed. Subtract line 23g from line 22. See instructions ~ ~ ~ ~ ~																																																							
25	Overpayment. Subtract line 22 from line 23g ~ ~ ~ ~ ~																																																							
26	Enter amount of line 25 you want: Credited to 2019 estimated tax   Refunded																																																							

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.

<b>Sign Here</b>	<b>PRESI DENT</b>	
Signature of officer	Date	Title

May the IRS discuss this return with the preparer shown below (see instr.)?

Yes  No

Print/Type preparer's name <b>BRAD K STANDER</b>	Preparer's signature	Date	Check if self-employed	PTIN <b>P01289007</b>
Firm's name <b>MORRI S, PARI S &amp; ASSOCI ATES</b>	Firm's EIN <b>* * - * * * 1846</b>			
Firm's address <b>3417 UNI VERSAL ROAD PI TTSBURGH, PA 15235</b>				Phone no <b>4127956610</b>

