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Department of the Treasury Internal Revenue Service

## **U.S. Income Tax Return**

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

for Homeowners Associations

OMB No. 1545-0123

| For cal                                                             | endar y                                                                                                                                                                                                                   | ear 2023 or tax year beginnir                                                                                                               | ng            |                     | , 2   | 2023, and e | enaing_               |           |                   |                                              | , 20                   |
|---------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------|---------------|---------------------|-------|-------------|-----------------------|-----------|-------------------|----------------------------------------------|------------------------|
|                                                                     | Name                                                                                                                                                                                                                      | Name                                                                                                                                        |               |                     |       |             | Employe               | r identif | ication           | numb                                         | er                     |
| TYPE                                                                | Number, street, and room or suite no. If a P.O. box, see instructions.                                                                                                                                                    |                                                                                                                                             |               |                     |       |             |                       | ciation   | formed            |                                              |                        |
| OR                                                                  |                                                                                                                                                                                                                           |                                                                                                                                             |               |                     |       |             |                       |           |                   |                                              |                        |
| PRINT                                                               |                                                                                                                                                                                                                           | or town, state or province, country, a                                                                                                      | nd ZIP or fo  | projan poetal codo  | _     |             | <del>/ /</del> /      |           |                   |                                              |                        |
|                                                                     | City                                                                                                                                                                                                                      | or town, state or province, country, a                                                                                                      | ilu zir or ic | oreign postar code  |       |             |                       |           | ١.                |                                              |                        |
| <u> </u>                                                            |                                                                                                                                                                                                                           |                                                                                                                                             | (0)           |                     | (2)   |             |                       |           | 1) 🗆              |                                              |                        |
| Check                                                               |                                                                                                                                                                                                                           | 1) ☐ Final return                                                                                                                           |               | Name change         | (3)   |             | ss change             | (2        |                   |                                              | nded return            |
|                                                                     |                                                                                                                                                                                                                           | ype of homeowners association:                                                                                                              | -             |                     |       |             | ntial real estate ass | sociatio  |                   | imes                                         | hare association       |
|                                                                     |                                                                                                                                                                                                                           | xempt function income. Mus                                                                                                                  |               |                     |       |             |                       |           | В                 |                                              |                        |
|                                                                     | Total expenditures made for purposes described in 90% expenditure test. See instructions                                                                                                                                  |                                                                                                                                             |               |                     |       |             |                       |           |                   |                                              |                        |
|                                                                     | Association's total expenditures for the tax year. See instructions                                                                                                                                                       |                                                                                                                                             |               |                     |       |             |                       |           |                   | $\perp$                                      |                        |
| E                                                                   | Tax-exempt interest received or accrued during the tax year                                                                                                                                                               |                                                                                                                                             |               |                     |       |             |                       |           |                   |                                              |                        |
| <b>Gross Income</b> (excluding exempt function income)  1 Dividends |                                                                                                                                                                                                                           |                                                                                                                                             |               |                     |       |             |                       |           |                   |                                              |                        |
|                                                                     |                                                                                                                                                                                                                           |                                                                                                                                             |               |                     |       |             |                       |           | 1                 | -                                            |                        |
|                                                                     |                                                                                                                                                                                                                           | e interest                                                                                                                                  |               |                     |       |             | A . I.                |           | 2                 | -                                            |                        |
|                                                                     | Gross I                                                                                                                                                                                                                   |                                                                                                                                             |               |                     |       | · · · · ·   | 7 3 · J-              |           | 3                 | -                                            |                        |
|                                                                     |                                                                                                                                                                                                                           | royalties                                                                                                                                   |               |                     |       |             |                       |           | 5                 | 1                                            |                        |
|                                                                     | Capital gain net income (attach Schedule D (Form 1120))                                                                                                                                                                   |                                                                                                                                             |               |                     |       |             |                       |           |                   | 1                                            |                        |
|                                                                     | •                                                                                                                                                                                                                         | n or (loss) from Form 4797, I                                                                                                               | •             | •                   | ,     |             |                       |           | 6                 |                                              |                        |
|                                                                     |                                                                                                                                                                                                                           | ncome (excluding exempt fu                                                                                                                  |               |                     |       |             |                       |           | 7                 |                                              |                        |
| 8                                                                   |                                                                                                                                                                                                                           | income (excluding exempt f                                                                                                                  |               |                     |       |             |                       |           | 8                 |                                              |                        |
|                                                                     |                                                                                                                                                                                                                           | ductions (directly connect                                                                                                                  | ted to th     |                     |       |             | cluding exemp         | ot fun    |                   | inco                                         | me)                    |
|                                                                     |                                                                                                                                                                                                                           | s and wages                                                                                                                                 |               |                     |       |             | .,                    | 4         | 9                 | 1                                            |                        |
|                                                                     | •                                                                                                                                                                                                                         | s and maintenance                                                                                                                           |               |                     |       |             |                       |           | 10                | _                                            |                        |
| 11                                                                  |                                                                                                                                                                                                                           |                                                                                                                                             |               |                     |       |             |                       |           | 11                | _                                            |                        |
| 12                                                                  |                                                                                                                                                                                                                           | and licenses                                                                                                                                |               |                     |       |             |                       |           | 12                | 1                                            |                        |
| 13                                                                  | Interes                                                                                                                                                                                                                   |                                                                                                                                             |               |                     |       |             |                       |           | 13                | _                                            |                        |
|                                                                     | -                                                                                                                                                                                                                         | ciation (attach Form 4562) .                                                                                                                |               |                     |       |             |                       |           | 14                | _                                            |                        |
|                                                                     |                                                                                                                                                                                                                           | deductions (attach statement                                                                                                                |               |                     |       |             |                       | ı illə    | 15                | -                                            |                        |
|                                                                     |                                                                                                                                                                                                                           | leductions. Add lines 9 thro                                                                                                                |               |                     |       |             |                       |           | 16                | -                                            |                        |
|                                                                     |                                                                                                                                                                                                                           | e income before specific dec                                                                                                                |               |                     |       |             |                       |           | 17                |                                              |                        |
| 18                                                                  | Specifi                                                                                                                                                                                                                   | c deduction of \$100                                                                                                                        |               |                     |       |             |                       |           | 18                |                                              | \$100                  |
|                                                                     |                                                                                                                                                                                                                           | 0.11.11.40.6                                                                                                                                |               | Tax and F           |       |             |                       |           | 10                | _                                            |                        |
|                                                                     |                                                                                                                                                                                                                           | e income. Subtract line 18 f                                                                                                                |               |                     |       |             |                       |           | 19                |                                              |                        |
|                                                                     |                                                                                                                                                                                                                           | 0% (0.30) of line 19. (Timesh                                                                                                               |               |                     |       | •           |                       |           | 20                | -                                            |                        |
|                                                                     | Tax credits (see instructions)                                                                                                                                                                                            |                                                                                                                                             |               |                     |       |             |                       |           |                   | -                                            |                        |
| 22                                                                  |                                                                                                                                                                                                                           |                                                                                                                                             |               |                     |       | 1           | 1                     |           | 22                |                                              |                        |
|                                                                     | Preceding year's overpayment credited to the current year                                                                                                                                                                 |                                                                                                                                             |               |                     |       |             |                       |           | _                 |                                              |                        |
|                                                                     |                                                                                                                                                                                                                           |                                                                                                                                             |               |                     |       |             | 23b                   |           | -                 |                                              |                        |
|                                                                     | Tax deposited with Form 7004                                                                                                                                                                                              |                                                                                                                                             |               |                     |       | <u> </u>    | 23c                   |           | -                 |                                              |                        |
|                                                                     | Credit for tax paid on undistributed capital gains (attach Form 2439) 23d                                                                                                                                                 |                                                                                                                                             |               |                     |       |             |                       |           |                   |                                              |                        |
|                                                                     | Credit for federal tax paid on fuels (attach Form 4136)                                                                                                                                                                   |                                                                                                                                             |               |                     |       |             |                       |           | _                 |                                              |                        |
|                                                                     | Elective payment election amount from Form 3800                                                                                                                                                                           |                                                                                                                                             |               |                     |       |             |                       |           | 23g               |                                              |                        |
| _                                                                   | _                                                                                                                                                                                                                         | nt owed. Subtract line 23g fr                                                                                                               |               | _                   |       |             |                       |           | 24                | <u>'                                    </u> |                        |
|                                                                     |                                                                                                                                                                                                                           | ayment. Subtract line 22 from                                                                                                               |               |                     |       |             |                       |           | 25                | +                                            |                        |
| 26                                                                  | _                                                                                                                                                                                                                         |                                                                                                                                             |               | -                   |       |             |                       | <br>ınded | -                 | +                                            |                        |
|                                                                     | Enter amount of line 25 you want: Credited to 2024 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 n |                                                                                                                                             |               |                     |       |             |                       |           |                   | l<br>knowle                                  | edge and belief. it is |
| Sign                                                                |                                                                                                                                                                                                                           | true, correct, and complete. Declaration of preparer (other than taxpaver) is based on all information of which preparer has any knowledge. |               |                     |       |             |                       |           |                   |                                              | discuss this return    |
| Here                                                                |                                                                                                                                                                                                                           |                                                                                                                                             |               |                     |       |             |                       | e prep    | arer shown below? |                                              |                        |
|                                                                     |                                                                                                                                                                                                                           | e of officer                                                                                                                                |               | Date                | Title |             |                       |           | See ins           | tructio                                      | ns. Yes No             |
| Do:d                                                                | 1 3                                                                                                                                                                                                                       | Print/Type preparer's name                                                                                                                  |               | Preparer's signatur |       |             | Date                  | Ch        | eck               | if                                           | PTIN                   |
| Paid                                                                | - w c                                                                                                                                                                                                                     |                                                                                                                                             |               |                     |       |             |                       |           | f-emplo           |                                              |                        |
| Prepa                                                               |                                                                                                                                                                                                                           | Firm's name Firm                                                                                                                            |               |                     |       |             |                       | n's EIN   |                   | L                                            |                        |
| Use C                                                               | Only                                                                                                                                                                                                                      |                                                                                                                                             |               |                     |       |             |                       |           | Phone no.         |                                              |                        |
|                                                                     |                                                                                                                                                                                                                           | 5 444.555                                                                                                                                   |               |                     |       |             |                       | 1         |                   |                                              |                        |