

**U.S. Income Tax Return
for Homeowners Associations**

2017

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

For calendar year 2017 or tax year beginning **10/01/17**, and ending **09/30/18**

TYPE OR PRINT	Name Alpine Condominium Association	Employer identification number 84-0937202
	Number, street, and room or suite no. If a P.O. box, see instructions. P.O. Box 2023	Date association formed
	City or town, state or province, country, and ZIP or foreign postal code Crested Butte CO 81224	06/25/1969

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 instructions	B	46,517
C Total expenditures made for purposes described in 90% expenditure test. See instructions	C	20,957
D Association's total expenditures for the tax year. See instructions	D	
E Tax-exempt interest received or accrued during the tax year	E	

Gross Income (excluding exempt function income)

1 Dividends	1	
2 Taxable interest	2	3
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	3

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	3
18 Specific deduction of \$100	18	100

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Tax and Payments

19 Taxable income. Subtract line 18 from line 17	19	-97		
20 Enter 30% (0.30) of line 19. (Timeshare associations, enter 32% (0.32) of line 19.)	20	0		
21 Tax credits (see instructions)	21			
22 Total tax. Subtract line 21 from line 20. See instructions for recapture of certain credits	22	0		
23 a 2016 overpayment credited to 2017 23a		c Total ▶		23g
b 2017 estimated tax payments 23b			23c	
d Tax deposited with Form 7004 23d			23d	
e Credit for tax paid on undistributed capital gains (attach Form 2439) 23e			23e	
f Credit for federal tax paid on fuels (attach Form 4136) 23f			23f	
g Add lines 23c through 23f				
24 Amount owed. Subtract line 23g from line 22. See instructions	24	0		
25 Overpayment. Subtract line 22 from line 23g	25			
26 Enter amount of line 25 you want: Credited to 2018 estimated tax ▶ Refunded ▶	26			

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

Sign Here Signature of officer _____ Date _____ Title _____

Paid	Print/Type preparer's name Nikki Hewitt	Preparer's signature <i>Nikki Hewitt</i>	Date 01/02/19	Check <input type="checkbox"/> if self-employed	PTIN P01232158
Preparer	Firm's name ▶ Hewitt Accounting, LLC			Firm's EIN ▶ 26-3537739	
Use Only	Firm's address ▶ P.O. Box 486 Gunnison, CO 81230-0486			Phone no. 970-641-6100	



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DR 0112 (10/13/17)
 COLORADO DEPARTMENT OF REVENUE
 Colorado.gov/Tax
(0023)

2017 Colorado C Corporation Income Tax Return

Do not submit federal return, forms or schedules when filing this return.

Fiscal Year Beginning (MM/DD/17)		Year Ending (MM/DD/YY)	
10/01/17		2017 09/30/18	
Name of Corporation			• Colorado Account Number
Alpine Condominium Association			
Address			• FEIN
P.O. Box 2023			84-0937202
City	State	ZIP	
Crested Butte	CO	81224	
Final Return • <input type="checkbox"/>		If you are submitting a statement disclosing a listed or reported transaction, mark this box • <input type="checkbox"/>	

A. Apportionment of Income. This return is being filed for:

<input checked="" type="checkbox"/> (42) A corporation not apportioning income;	<input type="checkbox"/> (45) A corporation electing to pay a tax on its gross Colorado sales;
<input type="checkbox"/> (43) A corporation engaged in interstate business apportioning income using single-factor apportionment (DR 0112SF required);	<input type="checkbox"/> (46) A corporation claiming an exemption under P.L. 86-272;
<input type="checkbox"/> (44) A corporation engaged in interstate business apportioning income using special regulation (DR 0112SF required);	<input type="checkbox"/> (47) Other apportionment method, must be pre-approved by the department (fill in below)

B. Separate/Consolidated/Combined Filing. This return is being filed for:

<input checked="" type="checkbox"/> A single corporation filing a separate return;	<input type="checkbox"/> An affiliated group of corporations required to file a combined return (Schedule C required);
<input type="checkbox"/> An affiliated group of corporations electing to file a consolidated return. Warning: such election is binding for four years. If your election was made in a prior year, enter the year of election in line below. (Schedule C required);	<input type="checkbox"/> An affiliated group of corporations required to file a combined return that includes another affiliated, consolidated group (Schedule C required)

• Enter the year of election (YYYY)

Federal Taxable Income	Round to nearest dollar
1. Federal taxable income from Federal form 1120 or 990-T • 1	-97 00
2. Federal taxable income of companies not included in this return • 2	00
3. Net federal taxable income, subtract line 2 from line 1 • 3	-97 00
Additions	
4. Federal net operating loss deduction • 4	00
5. Colorado income tax deduction • 5	00
6. Other additions, submit explanation • 6	00
7. Sum of lines 3 through 6 • 7	-97 00



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Name		Account Number
Alpine Condominium Association		
Subtractions		
8. Exempt federal interest	• 8	00
9. Excludable foreign source income	• 9	00
10. Colorado source capital gain (assets acquired on or after 5/9/94, held five years)	• 10	00
11. Colorado Marijuana Business Deduction	• 11	00
12. Agricultural asset lease deduction. Enter CADA certificate number and submit a copy of your certificate with your return	• 12	00
• CADA Certificate Number		
13. Other subtractions, submit explanation	• 13	00
14. Sum of lines 8 through 13	14	00
Taxable Income		
15. Modified federal taxable income, subtract line 14 from line 7	15	-97 00
16. Colorado taxable income before net operating loss deduction	• 16	-97 00
17. Colorado net operating loss deduction	• 17	00
18. Colorado taxable income, subtract line 17 from line 16	18	-97 00
19. Tax, 4.63% of the amount on line 18	• 19	0 00
Credits		
20. Sum of nonrefundable credits from line 26, form DR 0112CR (the sum of lines 20 and 21 cannot exceed tax on line 19). You must submit the DR 0112CR with your return.	• 20	00
21. Non-refundable Enterprise Zone credits used – as calculated, or from the DR 1366 line 87 (the sum of lines 20 and 21 cannot exceed tax on line 19). You must submit the DR 1366 with your return.	• 21	00
22. Net tax, sum of lines 20 and 21. Subtract that sum from line 19.	22	0 00
23. Recapture of prior year credits	• 23	00
24. Sum of lines 22 and 23	24	00
25. Estimated tax and extension payments and credits	• 25	00
26. W-2G Withholding from lottery winnings, you must submit the W-2G(s) with your return.	• 26	00
27. Gross Conservation Easement Credit from the DR 1305G line 33, you must submit the DR 1305G with your return.	• 27	00
28. Innovative Motor Vehicle Credit from form DR 0617, you must submit the DR 0617(s) with your return.	• 28	00
29. Business Personal Property Credit: Use the worksheet in the 112 book instructions to calculate, you must submit copy of assessor's statement with your return.	• 29	00

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Name		Account Number
Alpine Condominium Association		
30. Renewable Energy Tax Credit from form DR 1366 line 88, you must submit the DR 1366 with your return.	• 30	00
31. Sum of lines 25 through 30	31	00
32. Net tax due. Subtract line 31 from line 24	32	0 00
33. Penalty	• 33	00
34. Interest	• 34	00
35. Estimated tax penalty due	• 35	00
36. Total due. Enter the sum of lines 32 through 35	• 36	0.00
37. Overpayment, subtract line 24 from line 31	37	00
38. Amount from line 37 to carry forward for future year estimated tax	• 38	00
39. Amount from line 37 to be refunded	• 39	00

Direct Deposit Routing Number Type: Checking Savings

Account Number

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The State may convert your check to a one-time electronic banking transaction. Your bank account may be debited as early as the same day received by the State. If converted, your check will not be returned. If your check is rejected due to insufficient or uncollected funds, the Department of Revenue may collect the payment directly from your bank account electronically.

Pay electronically at Colorado.gov/RevenueOnline or
Mail and Make Checks Payable to: Colorado Department of Revenue
Denver, CO 80261-0006



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84-0937202

Name		Account Number	
Alpine Condominium Association			
C. The corporation's books are in care of:			
Last Name	First Name	Middle Initial	Phone Number
Management	Peak Property		970-349-6339
Address	City	State	Zip
P.O. Box 2023	Crested Butte	CO	81224
D. Business code number per federal return (NAICS)		E. Year corporation began doing business in Colorado	
• 531390		• 06/25/1969	
F. May the Colorado Department of Revenue discuss this return with the paid preparer shown below (see instructions)		• <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
G. Kind of business in detail Condominium Management Association			
H. Has the Internal Revenue Service made any adjustments in the corporation's income or tax or have you filed amended federal income tax returns at any time during the last four years?		• <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
If yes, for which year(s)? (YYYY)			
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Did you file amended Colorado returns to reflect such changes or submit copies of the Federal Agent's reports? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Last Name of person or firm preparing return		First Name	Middle Initial
Hewitt		Nikki	
Address of person or firm preparing return		Phone Number	
P.O. Box 486		970-641-6100	
City	State	Zip	
Gunnison	CO	81230-0486	
Under penalties of perjury in the second degree, I declare that I have examined this return and to the best of my knowledge is true, correct and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.			
Signature or Title of Officer		Date (MM/DD/YY)	
Do Not Submit Federal Return, Forms or Schedules when Filing this Return			

<p>If you are filing this return with a check or payment, please mail the return to:</p> <p>COLORADO DEPARTMENT OF REVENUE Denver, CO 80261-0006</p>	<p>If you are filing this return without a check or payment, please mail the return to:</p> <p>COLORADO DEPARTMENT OF REVENUE Denver, CO 80261-0005</p>
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CO Net Operating Loss Carryover Worksheet

Form **112**

2017

For calendar year 2017 or tax year beginning **10/01/17**, ending **09/30/18**

Name Alpine Condominium Association	Employer Identification Number 84-0937202	Colorado Account Number
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Preceding Taxable Year	Adjustment to NOL Income / (Loss) After Adj.	Prior Year		Current Year	Next Year Carryover
		Utilized (Offset)	Carryovers	Carryover Utilized (Offset)	Adjustment Income (Loss)
20th 09/30/98					
19th 09/30/99					
18th 09/30/00					
17th 09/30/01					
16th 09/30/02					
15th 09/30/03					
14th 09/30/04	-173		173		173
13th 09/30/05	-5,533		5,533		5,533
12th 09/30/06	-97		97		97
11th 09/30/07	-99		99		99
10th 09/30/08	-96		96		96
9th 09/30/09	-89		89		89
8th 09/30/10	-77		77		77
7th 09/30/11	-96		96		96
6th 09/30/12	-91		91		91
5th 09/30/13					
4th 09/30/14	-98		98		98
3rd 09/30/15	-95		95		95
2nd 09/30/16	-89		89		89
1st 09/30/17					
NOL Carryover Available To Current Year			6,633		
Current Year	-97				97
NOL Carryover Available To Next Year					6,730