

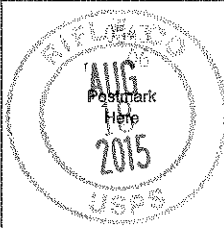
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PS Form 3800, August 2005

See Reverse for Instructions

Form **1120-H**Department of the Treasury
Internal Revenue ServiceU.S. Income Tax Return
for Homeowners Associations

OMB No. 1545-0123

2014◆ Information about Form 1120-H and its separate instructions is at www.irs.gov/form1120h.

For calendar year 2014 or tax year beginning , and ending

TYPE OR PRINT	Name 100WA OWNER ASSOC	Employer identification number 26-2517023
	Number, street, and room or suite no. If a P.O. box, see instructions. PO BOX 1926	Date association formed 06/07/2007
	City or town, state or province, country, and ZIP or foreign postal code RIFLE CO 81650	

Check if: (1)	Final return (2)	Name change (3)	Address change (4)	Amended return
A Check type of homeowners association: <input checked="" type="checkbox"/> Condominium management association <input type="checkbox"/> Residential real estate association <input type="checkbox"/> Timeshare association				
B Total exempt function income. Must meet 60% gross income test (see instructions)				17,582
C Total expenditures made for purposes described in 90% expenditure test (see instructions)				12,298
D Association's total expenditures for the tax year (see instructions)				12,298
E Tax-exempt interest received or accrued during the tax year				

Gross Income (excluding exempt function income)

1 Dividends	1
2 Taxable interest	1
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 Gross income (excluding exempt function income). Add lines 1 through 7	1

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	0
17 Taxable income before specific deduction of \$100. Subtract line 16 from line 8	1
18 Specific deduction of \$100	100

Tax and Payments

19 Taxable income. Subtract line 18 from line 17	19	-99
20 Enter 30% of line 19. (Timeshare associations, enter 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 2013 overpayment credited to 2014 23a	23b	c Total 23c
b 2014 estimated tax payments 23b		23d
d Tax deposited with Form 7004		23e
e Credit for tax paid on undistributed capital gains (attach Form 2439)		23f
f Credit for federal tax paid on fuels (attach Form 4136)		
g Add lines 23c through 23f	23g	
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 2015 estimated tax ◆	Refunded ◆	26

Sign Here	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.)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	Signature of officer <i>Peggy E. Stricklin</i>	Date 8/18/15 Title <i>PRES.</i>

Paid	Print/Type preparer's name PEGGY E. STRICKLIN, CPA	Preparer's signature PEGGY E. STRICKLIN, CPA	Date 08/18/15	Check <input type="checkbox"/> if self-employed	PTIN P00294953
Preparer Use Only	Firm's name ◆ HARPER HOFER & ASSOCIATES, LLC	Firm's EIN ◆ 20-1605886			
	Firm's address ◆ 1580 LINCOLN ST STE 1100				
	Firm's address ◆ DENVER, CO 80203-1530	Phone no. 303-486-0000			

For Paperwork Reduction Act Notice, see separate instructions.

Form **1120-H** (2014)