

For calendar year 2013 or tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_

TYPE OR PRINT	Name <b>Eagle Ridge Homeowners Association</b>	Employer identification number <b>90-0737183</b>
	Number, street, and room or suite no. If a P.O. box, see instructions. <b>c/o WEB Properties PO Box 21469</b>	Date association formed <b>02/05/1996</b>
	City or town, state or province, country, and ZIP or foreign postal code <b>Spokane, WA 99201</b>	

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	<b>See Statement 1</b>	B	<b>435,737.</b>
C Total expenditures made for purposes described in 90% expenditure test	<b>See Statement 2</b>	C	<b>358,190.</b>
D Association's total expenditures for the tax year		D	<b>358,190.</b>
E Tax-exempt interest received or accrued during the tax year		E	<b>0.</b>

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

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

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

**Tax and Payments**

19 <b>Taxable income.</b> Subtract line 18 from line 17		19	<b>&lt;100.&gt;</b>
20 Enter 30% of line 19. (Timeshare associations, enter 32% of line 19.)		20	<b>0.</b>
21 Tax credits		21	
22 <b>Total tax.</b> Subtract line 21 from line 20. See instructions for recapture of certain credits		22	<b>0.</b>
23 a 2012 overpayment credited to 2013	<b>23a</b>	c Total ▶	<b>0.</b>
b 2013 estimated tax payments	<b>23b</b>		
d Tax deposited with Form 7004	<b>23d</b>		
e Credit for tax paid on undistributed capital gains (attach Form 2439)	<b>23e</b>		
f Credit for federal tax paid on fuels (attach Form 4136)	<b>23f</b>		
g Add lines 23c through 23f	<b>23g</b>		
24 <b>Amount owed.</b> Subtract line 23g from line 22 (see instructions)		24	
25 <b>Overpayment.</b> Subtract line 22 from line 23g		25	
26 Enter amount of line 25 you want: <b>Credited to 2014 estimated tax</b> ▶ <b>Refunded</b> ▶		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.

Sign Here: *Wei E. Sun* | *9/12/14* | *Agent for HOA*  
 Signature of officer | Date | Title

May the IRS discuss this return with the preparer shown below (see instr.)?  Yes  No

Paid Preparer's Use Only

Print/Type preparer's name: **Jeri Self-Merritt** | Preparer's signature: *Jeri Self-Merritt, CPA* | Date: *9-11-14*

Firm's name: **Langenhorst & Self-Merritt CPAs, P.S.** | Firm's EIN: **91-1856792**

Firm's address: **522 W. Riverside, Suite 750** | Phone no: **509.444.6819**

Spokane, WA 99201

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Form 1120-H	Exempt Function Income	Statement	1
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Description	Amount
HOA Membership Dues	329,305.
HOA Special Assessment Fees	78,354.
HOA Late Payment Fees	6,907.
Other Income	6,171.
Developer Contributions	15,000.
Total to Form 1120-H, Item B	435,737.

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Form 1120-H	EXPENDITURES DESCRIBED IN 90% TEST	Statement	2
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Description	Amount
Capital Expenditures	1,469.
Community Events	13,151.
Insurance	18,900.
Landscaping	103,868.
Maintenance	25,417.
Management Fees	39,225.
Office Expense	5,337.
Other Administrative Expenses	7,074.
Payroll Expenses	65,082.
Professional Fees	3,777.
Snow Maintenance	1,068.
Taxes and Licenses	1,224.
Utilities	72,598.
Total to Form 1120-H, Item C	358,190.

**Application for Automatic Extension of Time To File  
 Certain Business Income Tax, Information, and Other Returns**

OMB No. 1545-0233

► **File a separate application for each return.**  
 ► Information about Form 7004 and its separate instructions is at [www.irs.gov/form7004](http://www.irs.gov/form7004).

<b>Print or Type</b>	Name <b>Eagle Ridge Homeowners Association</b>	Identifying number <b>90-0737183</b>
	Number, street, and room or suite no. (If P.O. box, see instructions.) <b>c/o WEB Properties PO Box 21469</b>	
	City, town, state, and ZIP code (If a foreign address, enter city, province or state, and country (follow the country's practice for entering postal code)). <b>Spokane, WA 99201</b>	

**Note.** File request for extension by the due date of the return for which the extension is granted. See instructions before completing this form.

**Part I Automatic 5-Month Extension**

1a Enter the form code for the return that this application is for (see below)  

Application Is For:	Form Code	Application Is For:	Form Code
Form 1065	09	Form 1041 (estate other than a bankruptcy estate)	04
Form 8804	31	Form 1041 (trust)	05

**Part II Automatic 6-Month Extension**

b Enter the form code for the return that this application is for (see below) 17

Application Is For:	Form Code	Application Is For:	Form Code
Form 706-GS(D)	01	Form 1120-ND (section 4951 taxes)	20
Form 706-GS(T)	02	Form 1120-PC	21
Form 1041 (bankruptcy estate only)	03	Form 1120-POL	22
Form 1041-N	06	Form 1120-REIT	23
Form 1041-QFT	07	Form 1120-RIC	24
Form 1042	08	Form 1120S	25
Form 1065-B	10	Form 1120-SF	26
Form 1066	11	Form 3520-A	27
Form 1120	12	Form 8612	28
Form 1120-C	34	Form 8613	29
Form 1120-F	15	Form 8725	30
Form 1120-FSC	16	Form 8831	32
Form 1120-H	17	Form 8876	33
Form 1120-L	18	Form 8924	35
Form 1120-ND	19	Form 8928	36

- 2 If the organization is a foreign corporation that does not have an office or place of business in the United States, check here
- 3 If the organization is a corporation and is the common parent of a group that intends to file a consolidated return, check here   
 If checked, attach a statement, listing the name, address, and Employer Identification Number (EIN) for each member covered by this application.

**Part III All Filers Must Complete This Part**

4 If the organization is a corporation or partnership that qualifies under Regulations section 1.6081-5, check here

5a The application is for calendar year 2013, or tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_

b **Short tax year.** If this tax year is less than 12 months, check the reason:  Initial return  Final return  
 Change in accounting period  Consolidated return to be filed  Other (see instructions-attach explanation)

6 Tentative total tax	6	0.
7 Total payments and credits (see instructions)	7	0.
8 <b>Balance due.</b> Subtract line 7 from line 6 (see instructions)	8	0.