Cornerstone Accounting & Tax Service LLC 2 S Market St Ste 102 Elizabethtown, PA 17022-2004 717-367-1132

June 17, 2019

CONFIDENTIAL

WOODS EDGE OF ELIZABETHTOWN HOMEOWNERS ASSOCIATION, INC. C/O JAMES REEB, ONE ALPHA DRIVE ELIZABETHTOWN, PA 17022

Dear Woods Edge of Elizabethtown HOA:

We have prepared the following returns from information provided by you without verification or audit:

U.S. Income Tax Return for Homeowners Associations (Form 1120-H)

We suggest that you examine these returns carefully to fully acquaint yourself with all items contained therein to ensure that there are no omissions or misstatements. Attached are instructions for signing and filing each return. Please follow those instructions carefully.

Also enclosed is any material you furnished for use in preparing the returns. If the returns are examined, requests may be made for supporting documentation. Therefore, we recommend that you retain all pertinent records for at least seven years.

In order that we may properly advise you of tax considerations, please keep us informed of any significant changes in your financial affairs or of any correspondence received from taxing authorities.

If you have any questions, or if we can be of assistance in any way, please call.

Sincerely,

Cornerstone Accounting & Tax Service LLC

Filing Instructions

WOODS EDGE OF ELIZABETHTOWN

Corporation Tax Return

Taxable Year Ended December 31, 2018

Federal Filing Instructions

Your 2018 Form 1120-H shows no balance due.

An authorized officer of the corporation should sign and date the return and mail by April 15, 2019 to:

Department of the Treasury Internal Revenue Service Center Cincinnati, OH 45999-0012 Form 1120-H Department of the Treasury

U.S. Income Tax Return for Homeowners Associations

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

OMB No. 1545-0123

Internal Revenue Service For calendar year 2018 or tax year beginning and ending WOODS EDGE OF ELIZABETHTOWN Employer identification number 26-1300386 HOMEOWNERS ASSOCIATION, INC. **TYPE** Number, street, and room or suite no. If a P.O. box, see instructions. Date association formed C/O JAMES REEB, ONE ALPHA DRIVE OR **PRINT** City or town, state or province, country, and ZIP or foreign postal code **ELIZABETHTOWN** 17022 PA 02/16/2007 Check if: Final return Name change Address change Amended return **A** Check type of homeowners association: Condominium management association Residential real estate association Timeshare association 42,438 B Total exempt function income. Must meet 60% gross income test. See instructions 34,226 C Total expenditures made for purposes described in 90% expenditure test. See instructions D Association's total expenditures for the tax year. See instructions D Ε Tax-exempt interest received or accrued during the tax year Gross Income (excluding exempt function income) 1 Dividends 1 2 2 Taxable interest 3 Gross rents 3 Gross royalties Capital gain net income (attach Schedule D (Form 1120)) Net gain or (loss) from Form 4797, Part II, line 17 (attach Form 4797) 6 Other income (excluding exempt function income) (attach statement) 7 Gross income (excluding exempt function income). Add lines 1 through 7 **Deductions** (directly connected to the production of gross income, excluding exempt function income) Salaries and wages 9 9 Repairs and maintenance 11 11 Taxes and licenses 12 13 Interest Depreciation (attach Form 4562) 15 Other deductions (attach statement) Total deductions. Add lines 9 through 15 16 0 Taxable income before specific deduction of \$100. Subtract line 16 from line 8 17 Specific deduction of \$100 100 Tax and Payments Taxable income. Subtract line 18 from line 17 20 Enter 30% (0.30) of line 19. (Timeshare associations, enter 32% (0.32) of line 19.) 20 21 Tax credits (see instructions) 21 0 22 22 Total tax. Subtract line 21 from line 20. See instructions for recapture of certain credits 23a 23 a 2017 overpayment credited to 2018 **b** 2018 estimated tax payments 23c c Total • d Tax deposited with Form 7004 23d e Credit for tax paid on undistributed capital gains (attach Form 2439) f Credit for federal tax paid on fuels (attach Form 4136) g Add lines 23c through 23f 0 **24 Amount owed.** Subtract line 23g from line 22. See instructions 25 Overpayment. Subtract line 22 from line 23g 25 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 May the IRS discuss this return with the preparer 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 X Yes Sign Here Title Signature of officer Date X Print/Type preparer's name Preparer's signature Date Check Paid CHRIS MAGWOOD CHRIS MAGWOOD 06/17/19 P01010974 self-employed CORNERSTONE ACCOUNTING & 83-2132874 Firm's name ◆ TAX SERVICE Firm's EIN ◆ Preparer S MARKET ST STE 102 **Use Only** 17022-2004 ELIZABETHTOWN, 717-367-1132

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WOODSEDGEHO WOODS EDGE OF ELIZABETHTOWN 26-1300386 Federal Statements

FYE: 12/31/2018

Form 1120-H, Line B - Total Exempt Function Income

Description			 Amount	
HOMEOWNERS	ASSOCIATION	FEES	\$ 42,438	
TOTAL			\$ 42,438	

Form 1120-H, Line C - Total Expenditures For 90% Expenditure Test

Description	Amount	
INSURANCE	\$	865
LANDSCAPING/GROUNDSKEEPING		26,725
LEGAL & PROFESSIONAL		3,807
OFFICE EXPENSE		534
SNOW REMOVAL		2,295
TOTAL	\$	34,226