Form **1120-H**

U.S. Income Tax Return for Homeowners Associations

Department of the Treasury Internal Revenue Service

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

2023

OMB No. 1545-0123

For cal	endar y	ear 2023 or tax yea	r beginning			,	, 202	23, and end				, 20		
	Name							Employer	Employer identification number					
	Tow	nhomes at Sister	Creek Hon	neowr	ners Associ	ation Inc			8	80-0986828				
TYPE										Date association formed				
OR PRIN														
LKIN	PO Box 8, C/O CORE Services, LLC City or town, state or province, country, and ZIP or foreign postal code													
	Vancovuer, WA 98666 04/28/2										/2004			
Check											(4) Amended return			
		1) Final return		<u> </u>			<u>` </u>				<u> </u>	neshare association		
<u>A</u>		pe of homeowners as									-			
В		xempt function inco			-						В	88,533		
C		xpenditures made f				•					С	80,064		
D		ation's total expend		•							D	80,064		
E	Tax-ex	empt interest receiv									E			
	Gross Income (excluding exempt function income)													
1	Divider	nds									1	0		
2	Taxable	e interest									2	1,249		
3	Gross r	rents									3	0		
4	Gross r	oyalties									4			
5	Capital	gain net income (at	ttach Sched	lule D ((Form 1120))						5			
6	Net gai	n or (loss) from Fori	m 4797, Par	t II, lin	e 17 (attach	Form 4797)					6			
7	Other in	ncome (excluding e	xempt funct	tion inc	come) (attacl	n statement)					7	0		
8	Gross	income (excluding	exempt fund	ction ir	ncome). Add	lines 1 throu	igh T	7			8	1,249		
		ductions (directly									ction in			
9		· · ·									9	,		
10		and maintenance									10			
11	•										11			
12		and licenses									12			
13											13			
14	Interest								14					
		•	•								15	012		
15	Other deductions (attach statement)									813				
16	Total deductions. Add lines 9 through 15								16	813				
17											17	436		
18	Specifi	c deduction of \$100)							• •	18	\$100		
						nd Payment					1.0			
19		e income. Subtract									19 20	336		
20		, ,	`		,	`	,	,	ne 19.)			101		
21		edits (see instruction	,								21			
22		ax. Subtract line 21					e of	1			22	101		
23a		ing year's overpayn						23	_	0				
b	Current	t year's estimated to	ax payments	s				23	_	0				
С		posited with Form 7						23	С					
d	Credit 1	for tax paid on undi	stributed ca	pital g	ains (attach	Form 2439)		23	d					
е	Credit for federal tax paid on fuels (attach Form 4136)													
f	Elective payment election amount from Form 3800													
g	Total payments and credits. Combine lines 23a through 23f								23g	0				
24	Amour	nt owed. Subtract li	ne 23g from	line 2	2. See instru	ictions					24	101		
25	Overpa	ayment. Subtract lir	ne 22 from li	ine 23g	g						25	0		
26	-	mount of line 25 yo			-				Refu	nded	26	0		
	Under p	enalties of perjury, I declar	re that I have ex	amined t	this return, includ	ding accompanyir						<u>-</u>		
Sign	true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge									edge.	May the IRS discuss this return			
Here										with the p	oreparer shown below?			
	Signatur	e of officer			Date	Title				— I	See instru	uctions. Yes No		
Do:-J	<u> </u>	Print/Type preparer's na	ame		Preparer's sign	nature			Date	Ch	eck i	_f PTIN		
Paid		D. Douglas, Mcl							09/30/2024		еск г f-employe	·		
Prepa		D. Douglas, McLain D. Doug McLain 09/3						03/30/202	1		1 01002010			
Use (Only										Firm's EIN 82-2426287 Phone no. 360-524-9665			
		Firm's address PU BO	ux o, vanico	ouver,	, VVA 90000)				Pho	ne no. 3	00-024-9000		

Federal Statements

Association: Townhomes at Sister Creek Homeowners Association Inc

EIN: 80-0986828

Year Ended: December 31, 2023

Statement - Form 1120-H, Line 15 - OTHER DEDUCTIONS

Description	Amount
Tax Preparation Expenses	\$625
Management Fees	\$188
Total Other Deductions	\$813

(Rev. December 2018) Department of the Treasury Internal Revenue Service

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.

► Go to www.irs.gov/Form7004 for instructions and the latest information.

	Name	Identifying number	entifying number							
Print	Number street and room or quite no (If D.O. hov	, and instructions)							
or	Number, street, and room or suite no. (If P.O. box, see instructions.)									
Туре	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).)									
		•		practice for enterin	g postal code,,					
	File request for extension by the due date of the ret									
Part										
1	Enter the form code for the return listed below	w that this app	olication is for							
Applica	ation	Form		Form						
ls For:		Code	Is For:		Code					
Form 7	06-GS(D)	01	Form 1120-ND (section 4951 taxe	20						
Form 7	06-GS(T)	02	Form 1120-PC	21						
	041 (bankruptcy estate only)	03	Form 1120-POL	22						
Form 1	041 (estate other than a bankruptcy estate)	04	Form 1120-REIT		23					
Form 1	041 (trust)	05	Form 1120-RIC		24					
Form 1	041-N	06	Form 1120S		25					
Form 1	041-QFT	07	Form 1120-SF		26					
Form 1	042	08	Form 3520-A		27					
Form 1	065	09	Form 8612	28						
Form 1	066	11	Form 8613	29						
Form 1	120	12	Form 8725	30						
Form 1	120-C	34	Form 8804	31						
Form 1	120-F	15	Form 8831	32						
Form 1	120-FSC	16	Form 8876		33					
Form 1	120-H	17	Form 8924	35						
Form 1	120-L	18	Form 8928	36						
Form 1	120-ND	19								
Part I	All Filers Must Complete This Part									
	If the organization is a foreign corporation check here		·		States, ▶ □					
	If the organization is a corporation and is the				h return					
	check here									
	If checked, attach a statement listing the na covered by this application.									
	If the organization is a corporation or partner	shin that quali	ifies under Regulations section 1 608	1-5 check here	· • □					
- 5а	The application is for calendar year 20, or	tax vear hegi	nning 20 and e	ndina	, , , 20					
h	Short tax year. If this tax year is less than 12	months cha	ck the reason:	☐ Final retu	, 20 .					
		solidated retu								
6	Tentative total tax			6						
7	Total payments and credits. See instructions	s		7						
8	Balance due. Subtract line 7 from line 6. See	e instructions		8						

IRS DEPARTMENT OF THE TREASURY INTERNAL REVENUE SERVICE OGDEN UT 84201-0023

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HOMEOWNERS ASSOCIATION INC % C O R E SERVICES PO BOX 8 VANCOUVER WA 98666

TOWNHOMES AT SISTER CREEK

012583

Date of this notice: 07-16-2024

Employer Identification Number: 80-0986828

Form: 7004

Number of this notice: CP 576 A

For assistance you may call us at: 1-800-829-4933

IF YOU WRITE, ATTACH THE STUB OF THIS NOTICE.

WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

As we were processing your Form 7004 for tax period 122023, we found that your form didn't have a valid Employer Identification Number (EIN). Our records show that no EIN assigned to this business. Since an EIN is required by law, we assigned EIN 80-0986828 to this business. Please keep this notice for your records.

When filing tax documents, payments, and related correspondence, it is very important that you use your EIN and complete name and address exactly as shown above. Any variation may cause a delay in processing, result in incorrect information in your account, or even cause you to be assigned more than one EIN. If the information is not correct as shown above, please make the correction using the attached tear-off stub and return it to us.

Every taxpayer must figure taxable income on the basis of an annual accounting period, called a tax year. For trusts, your tax year generally must be a calendar year, unless you are a charitable trust or are exempt from tax under the law. For partnerships, your tax year must conform with either the tax year of the majority partners, the tax year of the principal owners, or a calendar year, in that order, unless you establish a business purpose for using a different tax year. A personal service corporation must use a calendar year as its tax year, unless you establish a business purpose for using a different tax year. For further information, see Publication 538, Accounting Periods and Methods, which is available at most IRS offices or from our Web site at www.irs.gov.

Please complete the Form SS-4, Application for Employer Identification Number, so we can complete our record of your account. Be sure to date the form and send it to us with the tear off stub from this notice. You can get Form SS-4, by calling 1-800-TAX-FORM (1-800-829-3676) or by downloading it from the IRS Web site at www.irs.gov.

If you already have an EIN for this business, please send a copy of the notice you received assigning you that EIN, along with the tear off stub from this notice, so we can update our records.

Your name control associated with this EIN is TOWN. You will need to provide this information, along with your EIN, if you file your returns electronically.

If you have questions about your EIN, you can contact us at the phone number or address listed at the top of this notice. If you write, please tear off the stub at the bottom of this notice and include it with your letter. Thank you for your cooperation.



12583

Keep this part for your records.

CP 576 A (Rev. 1-2013)

Return this part with any correspondence so we may identify your account. Please correct any errors in your name or address.

CP 576

0423305841

Your Telephone Number Best Time to Call

DATE OF THIS NOTICE: 07-16-2024 EMPLOYER IDENTIFICATION NUMBER: 80-0986828 FORM: 7004 NOBOD

TOWNHOMES AT SISTER CREEK HOMEOWNERS ASSOCIATION INC % C O R E SERVICES PO BOX 8 VANCOUVER WA 98666

INTERNAL REVENUE SERVICE OGDEN UT 84201-0023 ակմոլիկարկիկիկիկիկիկիանում