

U.S. Income Tax Return for Homeowners Associations

2015

Department of the Treasury Internal Revenue Service

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

For calendar year 2015 or tax year beginning

, 2015, and ending

Name: LAKEVIEW ESTATS, Employer identification number: 61-1729264, Date association formed: 03/01/12, Address: P.O. BOX 486, SPRING HILL, TN 37174

Check if: (1) Final return (2) Name change (3) Address change (4) Amended return

A Check type of homeowners association: [X] Condominium management association [] Residential real estate association [] Timeshare association
B Total exempt function income: 9,500
C Total expenditures made for purposes described in 90% expenditure test: 9,280
D Association's total expenditures for the tax year: 9,280
E Tax-exempt interest received or accrued during the tax year

Gross Income (excluding exempt function income)

1 Dividends
2 Taxable interest
3 Gross rents
4 Gross royalties
5 Capital gain net income
6 Net gain or (loss) from Form 4797, Part II, line 17
7 Other income
8 Gross income (excluding exempt function income). Add lines 1 through 7

Deductions (directly connected to the production of gross income, excluding exempt function income)

9 Salaries and wages
10 Repairs and maintenance
11 Rents
12 Taxes and licenses
13 Interest
14 Depreciation
15 Other deductions
16 Total deductions. Add lines 9 through 15
17 Taxable income before specific deduction of \$100. Subtract line 16 from line 8
18 Specific deduction of \$100

Tax and Payments

19 Taxable income. Subtract line 18 from line 17: -100
20 Enter 30% of line 19. (Timeshare associations, enter 32% of line 19.)
21 Tax credits
22 Total tax. Subtract line 21 from line 20. See instructions for recapture of certain credits
23 a 2014 overpayment credited to 2015
23 b 2015 estimated tax payments
23 c Total
23 d Tax deposited with Form 7004
23 e Credit for tax paid on undistributed capital gains
23 f Credit for federal tax paid on fuels
23 g Add lines 23c through 23f
24 Amount owed. Subtract line 23g from line 22
25 Overpayment. Subtract line 22 from line 23g
26 Enter amount of line 25 you want: Credited to 2016 estimated tax Refunded

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.

Signature of officer

Date

Title

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

Paid Preparer Use Only

Print/Type preparer's name: David A. Reed, Preparer's signature: David A. Reed, Date: 01/19/16, PTIN: P00071899, Firm's name: BUCHANAN & ASSOCIATES, CPAS, Firm's EIN: 62-1519702, Firm's address: 211 DONELSON PIKE, STE 204, NASHVILLE, TN 37214, Phone no.: (615) 874-8821