

## Form 1120-H

Department of the Treasury Internal Revenue Service

## U.S. Income Tax Return for Homeowners Associations

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

OMB No. 1545-0123

2020

For calenda	r year 2020 or tax year begi	nning		2020, and endin			
				2020, and endin			
1					Employer ide	entification	ı number
TYPE	TO A CONTRACT OF THE CONTRACT				59-317	0935	
OR O	CEAN GARDENS TOWN	HOME OWNERS ASSOC			Date associa		d
T	O DOX 13/						n.
C	APE CANAVERAL, FL	32920-0137			i		
	,	11010 0107			W. D. C.		
Check if:	(1) Final return	<u> </u>			11/02/	1992	
		(2) Name change	(3) Ad	dress change	(4) An	nended i	return .
A Check ty	pe of homeowners association:	X Condominium management associ	viotion	D		icriaca i	
B Total	exempt function income Mu	st meet 60% gross income to	Jation	Residential real es	tate association		Timeshare association
C Total	expenditures made for pure	stiffeet 60% gross income te	est. See instruct	ions		В	47,070.
D Assoc	ation's total expenditures to	oses described in 90% expen	diture test. See	instructions			
E Tax-ex	empt interest reading	or the tax year. See instruction	ns			D	35,971.
- TGX-C/	complimerest received or a	or aca daring the tax year				E	35,971.
1 5: :1		Gross Income (exclud	ing exempt t	unction inco	mal		
Divide	nds,						
2 Taxab	e interest	***************************************				1	Regional in
						2	1,290.
4 Gross	royalties		**********			3	
5 Capita	gain net income (attach S.	chedulo D. (Town 1100)				4	
						5	
7 Other	111 of (loss) from Form 4797	, Part II, line 17 (attach Form	1 4797)				
8 Gross	income (excluding exempt f	nction income) (attach Formunction income) (attach state function income).	ement)		,	6	
o Gross	income (excluding exempt	function income). Add lines 1	through 7		,	7	
De	ductions (directly con	function income) (attach state function income). Add lines 1	milough /			8	1,290.
9 Salarie	es and wages.	to the production	il of gross in	come, exclud	ding exempt	function	on income)
io Repair	s and maintenance					9	
11 Rents.						10	And the second s
12 Taxes	and licenses				******	11	
13 Interes	it					12	166
14 Depred	ciation (attach Form 4560)	MARIO III III III III III II II III II III			\$2000000 Dd	13	
15 Other	deductions (attach state)	rt)				14	
16 Total	leductions (attach statemer	it)		See Stater	ment 1	15	
17 Taxabl	e income before	ugh 15duction of \$100. Subtract line	t to the area and analysis of				1,029.
18 Specif	e income before specific de	duction of \$100, Subtract line	e 16 from line 8			16	1,029.
-10 Specif	c deduction of \$100				************	17	261.
		Tay as	J D			18	\$100
19 Taxab	e income. Subtract line 18	from line 17share associations, enter 30	nd Payments				
20 Enter :	30% (0.30) of line 19 (Time	-b				19	1.61
21 Tax cr	edits (see instruction)	share associations, enter 32	% (0.32) of line	19.)		20	161 <u>.</u>
22 Total t	corts (see instructions)	e 20. See instructions for the	01 0* • • • • • • • • • • • • • • • • • • •	es and restricted total name			48.
22 10(a) (	ax. Subtract line 21 from lin	e 20. See instructions for rec	anture of certain	n orodita		21	
			I Certain	A Company of the Comp		22	48.
b 202	20 estimated tax payments	224		1 - 1 - 1		204	
d Ta:	deposited with Form 7004		c Total		0.	3.45	
e Cre	dit for tax paid on undistributed ear	ital main - A. H. L		23 d		100 CM	
						1,000	
	The state of the s	IRIS (attach Forms 41ac)				V Sadri	
						2.2.	1 8
24 Amoun	t owed. Subtract line 23g fro	om line 22. See instructions.				23 g	0
25 Overpa	yment. Subtract line 22 from	n line 23a	************			24	48.
26 Enter a	mount of line 25 you want.	n line 23g				25	777.454
	Under penalties of perium I doct-	re that I have examined this return, in lete. Declaration of preparer (other th	ax ►	1	Refunded ►	26	
Sign	belief, it is true, correct, and comp	plete. Declaration of preparer (other the	cluding accompanying	g schedules and state	ements, and to the h	oct of mul	
Here		1 -1-1-0, (outof a)	an taxpayer) is based	on all information of	f which preparer has	any know	ledge.
	Signature of officer			TREASURE	:R	I May th	no IDS discours this I
	Print/Type preparer's name		ate	Title		See in	ie brebarer snown below?
Paid		Preparer's signature 3	000	Date			X Yes No
Preparer	Donald Benson	Donald Bens	on Chi	3/22/2	_, Check	if PTI	
Use Only	Firm's name ► Donald	Benson, CPA	<u></u>	71277	self-employed	PC	00035884
Vac Only	Firm's address ► 1980 N	Atlantic Avenue S	to 707		Firm's EIN	► 83	3-3638115
5	Cocoa F	Beach, FL 32931	LE /U/				
BAA For Pa	perwork Reduction Act Not	ice, see separate instruction			Phone no.	321	-784-6130
		- Farato manucilor	15.	CPCA	3002L 07/23/20		Form 1120-H (2020)
							(0)

2020 Federal Statements				
Client 1014	Page 1			
3/22/21	OCEAN GARDENS TOWNHOME OWNERS ASSOC	<b>59-317093</b>		
Statement 1 Form 1120-H, Line 15 Other Deductions				
DIRECTOR & OFFICE LEGAL AND ACCOUNT	RS INSURANCE	75.		
	Total 3	1,029.		
		,		
	s a			