

FORM

# 41 IDAHO CORPORATION INCOME TAX RETURN 1019 2016

EFO00025  
08-03-2016

AMENDED RETURN, check the box. See instr. for the reasons for amending and enter the number.

For calendar year 2016, or fiscal year beginning

Mo Day Year ending Mo Day Year

State use only

1216

Business name

GOLF

Federal employer identification number (EIN)

204119793

GOLF VISTA HOA

Current business mailing address

P.O. BOX 3393

City, State, and ZIP Code

JACKSON, WY 83001

531390 NAICS Code

1. If a federal audit was finalized this year, enter the latest year audited
2. Is this an inactive corporation or nameholder corporation?
3. a. Were federal estimated tax payments required?
- b. Were estimated tax payments based on annualized amounts?
4. Is this a final return?  
If yes, check the proper box below and enter the date the event occurred
- Withdrawn from Idaho    Dissolved    Merged or reorganized   Enter new EIN
5. Is this an electrical or telephone utility?
6. EIN of parent from consolidated Form 1120, Schedule K as filed with the IRS
7. Did you use the combined reporting method?
  - a. Does this corporation own more than 50% of another corporation?
  - b. Does another corporation own more than 50% of this corporation?
  - c. Are more than 50% of this corporation and another corporation owned by the same interest?
  - d. Are two or more corporations in this report operating in Idaho or authorized to do business in Idaho?
8. If you are a multinational unitary group, answer questions a, b, and c. Complete Form 42.
  - a. Check the box for your filing method:
    - worldwide return    water's-edge return   See Form 14.
  - b. If a water's-edge return is filed, do you elect not to file water's-edge spreadsheets?
  - c. If a worldwide return is filed, is foreign income computed by making book to tax adjustments?
9. Did you claim the property tax exemption for investment tax credit property acquired this tax year?
10. Are one or more corporations in this report paying the Idaho premium tax?

## ADDITIONS

- |  |      |       |
|--|------|-------|
| 11. Federal taxable income. See instructions                       | • 11 | <100> |
| 12. Interest and dividends not taxable under Internal Revenue Code | • 12 |       |
| 13. State, municipal, and local taxes measured by net income       | • 13 |       |
| 14. Net operating loss deducted on federal return                  | • 14 |       |
| 15. Dividends received deduction on federal return                 | • 15 |       |
| 16. Bonus depreciation. Include a schedule                         | • 16 |       |
| 17. Other additions, including additions from Form 42, Part II     | • 17 |       |
| 18. Add lines 11 through 17  | 18   | <100> |

## SUBTRACTIONS

- |   |      |       |
|---|------|-------|
| 19. Foreign dividend gross-up (Sec. 78, Internal Revenue Code)                  | • 19 |       |
| 20. Interest from Idaho municipal securities                                    | • 20 |       |
| 21. Interest on U.S. Government obligations. Include a schedule                 | • 21 |       |
| 22. Interest and other expenses related to lines 20 and 21                      | • 22 |       |
| 23. Add lines 20 and 21 and subtract line 22                                    | 23   |       |
| 24. Technological equipment donation  | • 24 |       |
| 25. Allocated income. Include a schedule  | • 25 |       |
| 26. Interest and other expenses related to line 25. Include a schedule          | • 26 |       |
| 27. Subtract line 26 from line 25   | 27   |       |
| 28. Bonus depreciation. Include a schedule                                      | • 28 |       |
| 29. Other subtractions, including subtractions from Form 42, Part II            | • 29 |       |
| 30. Total subtractions. Add lines 19, 23, 24, 27, 28, and 29                    | 30   |       |
| 31. Net business income subject to apportionment. Subtract line 30 from line 18 | • 31 | <100> |

MAIL TO: Idaho State Tax Commission, PO Box 56, Boise ID 83756-0056  
INCLUDE A COMPLETE COPY OF YOUR FEDERAL FORM 1120 OR 1120A.

Don't staple



32. Net business income subject to apportionment. Enter the amount from line 31	32	<100>
33. Corporations with all activity in Idaho enter 100%. Multistate/multinational corporations complete and include Form 42; enter the apportionment factor from Form 42, Part I, line 21	33	100.0000 %
34. Net business income apportioned to Idaho. Multiply line 32 by the percent on line 33	34	<100>
35. Income allocated to Idaho. See instructions	35	
36. Idaho net operating loss carryover carryback Enter tot.	36	
<b>SEE STATEMENT 1</b>		
37. Idaho taxable income. Add lines 34 and 35 then subtract line 36	37	<100>
38. Idaho income tax. Multiply line 37 by 7.4%. Minimum \$20 for each corporation (see instructions)	38	0

**CREDITS**

39. Credit for contributions to Idaho educational entities	39	
40. Credit for contributions to Idaho youth and rehabilitation facilities	40	
41. Total business income tax credits from Form 44, Part I, line 11. Include Form 44	41	
42. Total credits. Add lines 39 through 41	42	
43. Subtract line 42 from line 38. If line 42 is greater than line 38, enter zero	43	

**OTHER TAXES**

44. Permanent building fund tax. Enter \$10. Combined reports include \$10 for each corporation operating or authorized to do business in Idaho	44	10
45. Total tax from recapture of income tax credits from Form 44, Part II, line 7. Include Form 44	45	
46. Fuels tax due. Include Form 75	46	
47. Sales/Use tax due on Internet, mail order, and other nontaxed purchases	47	
48. Tax from recapture of qualified investment exemption (QIE). Include Form 49ER	48	
49. Total tax. Add lines 43 through 48	49	10
50. Underpayment interest. Include Form 41ESR	50	
51. Donation to Opportunity Scholarship Program	51	
52. Add lines 49 through 51	52	10

**PAYMENTS AND OTHER CREDITS**

53. Estimated tax payments. If made under other EIN(s), provide EIN(s), amount(s), and rollforward(s)	53	
54. Special fuels tax refund Gasoline tax refund Include Form 75	54	
55. Reimbursement Incentive Act credit. Include certificate	55	
56. Total payments and other credits. Add lines 53 through 55	56	

If line 52 is more than line 56, GO TO LINE 57. If line 52 is less than line 56, GO TO LINE 60.

**REFUND OR PAYMENT DUE**

57. Tax due. Subtract line 56 from line 52	57	10
58. Penalty Interest from due date Enter total	58	
59. TOTAL DUE. Add line 57 and line 58		10
60. Overpayment. Subtract line 52 from line 56	60	
61. REFUND. Amount of line 60 you want refunded to you		
62. ESTIMATED TAX. Amount you want credited to your 2017 estimated tax. Subtract line 61 from line 60	62	

**AMENDED RETURN ONLY. Complete this section to determine your tax due or refund.**

63. Total due (line 59) or overpayment (line 60) on this return	63	
64. Refund from original return plus additional refunds	64	
65. Tax paid with original return plus additional tax paid	65	
66. Amended tax due or refund. Add lines 63 and 64 then subtract line 65	66	

Within 180 days of receiving this return, the Idaho State Tax Commission may discuss this return with the paid preparer identified below. Under penalties of perjury, I declare that to the best of my knowledge and belief this return is true, correct, and complete.

Signature of officer	Date
SIGN HERE Title <b>PRESIDENT</b>	Phone number <b>307-733-5881</b>
Paid preparer's signature <i>Luhe Finster</i>	Preparer's EIN, SSN or PTIN <b>P01745790</b>
Address	Phone number <b>307-367-2858</b>

FAGNANT, LEWIS & BRINDA, P.C., CPA'S  
PO BOX 711  
PINEDALE, WY 82941

648302 09-27-16







Information about Form 1120-H and its separate instructions is at [www.irs.gov/form1120h](http://www.irs.gov/form1120h).

For calendar year 2016 or tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_

<b>TYPE OR PRINT</b>	Name <b>GOLF VISTA HOA</b>	Employer identification number <b>20-4119793</b>
	Number, street, and room or suite no. If a P.O. box, see instructions. <b>P.O. BOX 3393</b>	Date association formed <b>05/01/1981</b>
	City or town, state or province, country, and ZIP or foreign postal code <b>JACKSON, WY 83001</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>15,953.</b>
C Total expenditures made for purposes described in 90% expenditure test	<b>10,744.</b>
D Association's total expenditures for the tax year	<b>10,744.</b>
E Tax-exempt interest received or accrued during the tax year	<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	<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	<b>0.</b>
17 Taxable income before specific deduction of \$100. Subtract line 16 from line 8	<b>0.</b>
18 <b>Specific deduction of \$100</b>	<b>\$100.00</b>

**Tax and Payments**

19 <b>Taxable income.</b> Subtract line 18 from line 17	<b>&lt;100.&gt;</b>						
20 Enter 30% (0.30) of line 19. (Timeshare associations, enter 32% (0.32) of line 19.)	<b>0.</b>						
21 Tax credits	<b>0.</b>						
22 <b>Total tax.</b> Subtract line 21 from line 20. See instructions for recapture of certain credits	<b>0.</b>						
23 a 2015 overpayment credited to 2016 <table border="1" style="display:inline-table; border-collapse: collapse;"><tr><td style="width:50px;">23a</td><td></td></tr><tr><td>23b</td><td></td></tr></table> b 2016 estimated tax payments <table border="1" style="display:inline-table; border-collapse: collapse;"><tr><td style="width:50px;">23b</td><td></td></tr></table> c Total ▶	23a		23b		23b		<b>0.</b>
23a							
23b							
23b							
d Tax deposited with Form 7004	23d						
e Credit for tax paid on undistributed capital gains (attach Form 2439)	23e						
f Credit for federal tax paid on fuels (attach Form 4136)	23f						
g Add lines 23c through 23f	<b>0.</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 2017 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.

<b>Sign Here</b> Signature of officer	Date	<b>PRESIDENT</b> Title	Date
			May the IRS discuss this return with the preparer shown below (see instr.)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Print/Type preparer's name <b>LUKE R FIXTER, CPA</b>	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	PTIN <b>P01745790</b>
Firm's name ▶ <b>FAGNANT, LEWIS &amp; BRINDA, P.C., CPA'S</b>			Firm's EIN ▶ <b>83-0254900</b>	
Firm's address ▶ <b>PO BOX 711 PINEDALE, WY 82941</b>			Phone no. <b>307-367-2858</b>	

Section 1.263(a)-1(f) De Minimis Safe Harbor Election

Golf Vista HOA  
P.O. Box 3393  
Jackson, WY 83001

Employer Identification Number: 20-4119793

For the Year Ending December 31, 2016

Golf Vista HOA is making the de minimis safe harbor election under Reg. Sec. 1.263(a)-1(f).

---

---

FORM 1120-H

EXEMPT FUNCTION INCOME

STATEMENT 1

---

DESCRIPTION

AMOUNT

HOA MEMBERSHIP DUES

15,953.

TOTAL TO FORM 1120-H, ITEM B

15,953.

---

---