Form 1120-H

U.S. Income Tax Return for Homeowners Associations

► See separate instructions.

OMB No. 1545-0127

2009

2009, and ending For calendar year 2009 or tax year beginning Employer identification number Use IRS 57-0925311 PINE FOREST COUNTRY CLUB ASSOCIATION, label. Date association formed INC. Otherwise. P.O. BOX 2134 print or SUMMERVILLE, SC 29484 type. 12/28/1990 Final return Amended return Check if: (1) Name change Address change **A** Check type of homeowner's association: Condominium management association X Residential real estate association Timeshare association 71,923. Total exempt function income. Must meet 60% gross income test (see instructions)..... С 64,229. 64,229. Association's total expenditures for the tax year (see instructions) D Tax-exempt interest received or accrued during the tax year. . . . Ε **Gross Income** (excluding exempt function income) 3 Gross rents 3 4 5 Net gain (or loss) from Form 4797, Part II, line 17 (attach Form 4797)..... 6 7 **8 Gross income** (excluding exempt function income). Add lines 1 through 7...... 8 0. **Deductions** (directly connected to the production of gross income, excluding exempt function income) Salaries and wages..... 9 10 Repairs and maintenance 10 11 11 12 12 13 13 Depreciation (attach Form 4562)..... 14 15 Other deductions (attach schedule) 15 Total deductions. Add lines 9 through 15..... 16 17 0. 17 \$100. 18 18 Specific deduction of \$100. Tax and Payments **Taxable income.** Subtract line 18 from line 17..... 19 -100.20 Enter 30% of line 19. (Timeshare associations, enter 32% of line 19.)..... 20 0. Tax credits (see instructions)..... 21 0. Total tax. Subtract line 21 from line 20. See instructions for recapture of certain credits 22 23 Payments: a 2008 overpayment credited to 2009. 23 a **b** 2009 estimated tax payments. . . . | **23 b** 23 c 0. 23 d e Credit for tax paid on undistributed capital gains (attach Form 2439)..... **q** Add lines 23c through 23f..... 23 a 0. **24 Amount owed.** Subtract line 23g from line 22 (see instructions)...... 24 0. 25 Overpayment. Subtract line 22 from line 23g. 25 26 Enter amount of line 25 you want: Credited to 2010 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 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. Sign Here Signature of officer Date Title X Yes Date Preparer's signature WILLIAM A. RUSSELL, III Paid 3/31/10 P00547628 Firm's name (or yours if self-employed), Preparer's JARRARD, NOWELL & RUSSELL, EIN 20-2078804 975 MORRISON DR Use Only address, and ZIP code CHARLESTON, SC 29403-4270 (843) 723-2768