

Kilkenny Addition to Southbridge
Neighborhood Association Inc
2010 Cardinal Way
Waunakee, WI 53597

Department of the Treasury
Internal Revenue Service Center
Kansas City, MO 64999-0012
|||

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

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

For calendar year 2017 or tax year beginning , and ending

TYPE OR PRINT	Name Kilkenny Addition to Southbridge Neighborhood Association Inc	Employer identification number 81-4067752
	Number, street, and room or suite no. If a P.O. box, see instructions. 2010 Cardinal Way	Date association formed
	City or town, state or province, country, and ZIP or foreign postal code Waunakee WI 53597	10/06/2016

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. See instructions **B** 2,400

C Total expenditures made for purposes described in 90% expenditure test. See instructions **C** 1,077

D Association's total expenditures for the tax year. See instructions **D** 1,076

E Tax-exempt interest received or accrued during the tax year **E**

Gross Income (excluding exempt function income)

1 Dividends	1
2 Taxable interest	2 1
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 Gross income (excluding exempt function income). Add lines 1 through 7	8 1

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 Total deductions. Add lines 9 through 15	16 0
17 Taxable income before specific deduction of \$100. Subtract line 16 from line 8	17 1
18 Specific deduction of \$100	18 100

Tax and Payments

19 Taxable income. Subtract line 18 from line 17	19 -99
20 Enter 30% (0.30) of line 19. (Timeshare associations, enter 32% (0.32) of line 19.)	20 0
21 Tax credits (see instructions)	21
22 Total tax. Subtract line 21 from line 20. See instructions for recapture of certain credits	22 0

23 a 2016 overpayment credited to 2017	23a	c Total ▶	23c	23g
b 2017 estimated tax payments	23b		23d	
d Tax deposited with Form 7004			23e	
e Credit for tax paid on undistributed capital gains (attach Form 2439)			23f	
f Credit for federal tax paid on fuels (attach Form 4136)				
g Add lines 23c through 23f				

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 2018 estimated tax** ▶ **Refunded** ▶ **26**

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. May the IRS discuss this return with the preparer shown below? See instr. Yes No

Signature of officer **Tim Gaule** Date _____ Title **Treasurer**

Paid Print/Type preparer's name **Natasha Chambers, CPA** Preparer's signature *Tasha Chambers* Date **01/25/18** Check if self-employed PTIN **P00646886**

Preparer Use Only Firm's name ▶ **Chambers CPA, LLC** Firm's EIN ▶ **45-4012996**

Firm's address ▶ **1001 Arboretum Drive Ste 3
Waunakee, WI 53597-2674** Phone no. **608-467-4251**