

Note: The draft you are looking for begins on the next page.

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Most forms and publications have a page on IRS.gov: IRS.gov/Form1040 for Form 1040; IRS.gov/Pub501 for Pub. 501; IRS.gov/W4 for Form W-4; and IRS.gov/ScheduleA for Schedule A (Form 1040), for example, and similarly for other forms, pubs, and schedules for Form 1040. When typing in a link, type it into the address bar of your browser, not a Search box on IRS.gov.

If you wish, you can submit comments to the IRS about draft or final forms, instructions, or pubs at IRS.gov/FormsComments. Include "NTF" followed by the form or pub number (for example, "NTF1040", "NTFW4", "NTF501", etc.) in the body of the message to route your message properly. We cannot respond to all comments due to the high volume we receive and may not be able to consider many suggestions until the subsequent revision of the product, but we will review each "NTF" message. If you have comments on reducing paperwork and respondent (filer) burden, with respect to draft or final forms, please respond to the relevant information collection through the Federal Register process; for more info, click here.

TREASURY/IRS AND OMB USE ONLY DRAFT

| Form 1120-H | | | U.S. Income Tax Return for Homeowners Associations | | | | | | | OMB No. 1545-0123 | | | |
|---|---|--|---|----------|-------------------|---------------|-----------|----------------------|-------------|-------------------------|------------------------|--|--|
| Department of the Treasury Internal Revenue Service | | | For calendar year 2025 or tax year beginning, 2025, ending, 20 Go to www.irs.gov/Form1120H for instructions and the latest information. | | | | | | | 2 | 25 | | |
| Check | if: | | Name | | | | | | Emplo | oyer identi | fication number | | |
| (1) Final return | | | | | | | | | | | | | |
| (2) Name change (3) Address change | | | Number and street. If a P.O. box, see instructions. | | | | | | | Date association formed | | | |
| | | | | | | | | | | | | | |
| (4) Amended | | d return | City or town | | State or province | Country | ZIP or fo | oreign postal code | | | | | |
| - | | | | | | | | | | | | | |
| | | • • | | • | | • | | ial real estate asso | | | hare association | | |
| | Total exempt function income. Must meet 60% gross income test. See instructions | | | | | | | | B C | | | | |
| | | tal expenditures made for purposes described in 90% expenditure test. See instructions | | | | | | | | | | | |
| | | | tion's total expenditures for the tax year. See instructions | | | | | | | | | | |
| E | | c-exempt interest received or accrued during the tax year | | | | | | | | | | | |
| Gross Income (excluding exempt function income) | 1 | Divider | | | | | | | + | 1 | | | |
| | 2 | | | | | | | | + | 2 | | | |
| | 3 | | | | | | | | + | 3 4 | | | |
| | 4 | Gross royalties | | | | | | | | | | | |
| | 5 | Capital gain net income (attach Schedule D (Form 1120)) | | | | | | | | 5 | | | |
| | 6 | | | | | | | | | 7 | | | |
| | 7 | | | | | | | | | | | | |
| | 8 | Gross income (excluding exempt function income). Add lines 1 through 7 | | | | | | | | 9 | | | |
| the ome, income) | 9 | | - | | | | | | | 10 | | | |
| | 10 | • | | | | | | | t t | 11 | | | |
| a to E | 11 | | | | | | | | | 12 | | | |
| Deductions (directly connected to the production of gross income, excluding exempt function income) | 12 | | | | | | | | | 13 | | | |
| | 13 | | | | | | | | | 14 | | | |
| | 14 | | · | | | | | | | | | | |
| | 15 | | deductions (atta | | | | | | | 15 | | | |
| | 16 | | | | • | | | | | 16 17 | | | |
| | 17 18 | | c deduction of S | | | | | e8 | | 18 | \$100 | | |
| | 19 | | | | | | | <u></u> | • | 19 | Ψ 100 | | |
| Tax and Payments | 20 | | | | | | | | + | 20 | | | |
| | 21 | | Inter 30% (0.30) of line 19. (Timeshare associations, enter 32% (0.32) of line 19.) | | | | | | | | | | |
| | 22 | | • | , | | | | rtain credits . | | 21 | | | |
| | 23a | | ling year's over | | | • | 1 | 23a | | | | | |
| | b | | t year's estimat | = | | = | | 23b | | | | | |
| | C | | posited with Fo | | | | | 23c | | | | | |
| | d | | Credit for tax paid on undistributed capital gains (attach Form 2439) . 23d | | | | | | | | | | |
| | e | | for federal tax p | | | | · — | 23e | | | | | |
| | f | | e payment elect | - | | • | | 23f | | | | | |
| | g | | payments and o | | | | | | | 23g | | | |
| | 24 | _ | nt owed. Subtra | | | _ | | | | 24 | | | |
| | 25 | | ayment. Subtra | • | | | | | | 25 | | | |
| | 26 | - | ortion of line 25 yo | | • | timated tax . | | b Refur | nded | 26b | | | |
| | | c Rou | ıting number | | | d Type: | Che | cking Savin | gs | | | | |
| | | | | 1 1 1 1 | 1 1 1 1 | | | 1 1 | | | | | |
| | L. | e Acc | ount number | <u> </u> | <u> </u> | <u> </u> | | | | | | | |
| <u> </u> | Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of | | | | | | | | | | edge and belief, it is | | |
| Sign | | | | | | | | | | | discuss this return | | |
| Here | l s. | | | | | | | | | | arer shown below? | | |
| | Signatu | re of office | er | | Date | Title | | | <u> Ľ</u> | | | | |
| Preparer Use Only | | Prepare | er's name | | Preparer's signat | ure | | Date | 1 | k 🔲 if | PTIN | | |
| | | | | | | | | | self-e | employed | | | |
| | | Firm's r | m's name Fir | | | | | | | | irm's EIN | | |
| | | Firm's a | 's address P | | | | | | | Phone no. | | | |