Form	11	20-H	U.S. I	nco	me Tax R	eturn fo	r Hom	eown	iers /	Associat	tions	OMB No. 1545-0123	
Departm		he Treasury e Service		,	0 - ta !na mau/	T 4 40011 60 = 1			- ! - - 6			2023	
		year 2023 or ta	av vear heni		Go to www.irs.gov/l	FORM 112UH TOF I	nstructions and e		est intorn	iation.		LULU	
T UI Oui	Ciluai y	Name	ax year bogii	Illing			, απα σ	illullig	E	mployer identifi	cation n	umber	_
	l	l _{VA}	LLEY	VIST	A ESTATES	HOA, I	NC						
TYPI OR	E I				If a P.O. box, see instru					**-***2	341		
PRIN	NT	PO	вох	3393						ate association f			
	ļ				y, and ZIP or foreign po	stal code							
		JA	.CKSON	<u>, WY</u>	83001					02/11/2	003		
Check	if: (1)	Final re	eturn	(2)	Name change	((3) L Add	dress chang	ge	(4)	Amen	ided return	
					Condominiur						on 🔲	Timeshare association	_
					et 60% gross incom						В	97,81	١.
					scribed in 90% expe						С	158,47	
					ıx year						D	159,47	
<u>E</u>	Tax-ex	empt interest	received or a	accrued o	during the tax year						E		<u>.</u>
						ncome (exclu			icome)				
1	Divider	nds					CDD	CT 3 MT		- ^	1	71	
											2	710	٠ (
	Gross										3		
4	Gross	royalties			D /Farra 1100\\						4		
5	Capitai	gain net ilicui	me (aπacii δ	Cheane	D (Form 1120))	4707\					5		
6	Net yar	in or (1088) it u	M FOIII 475	//, Part in	I, line 17 (attach For	m 4/9/)					7		
7 8	Ottoo	income (exclusion	ulliy exemp	TUTICUON + function	income) (attach sta n income). Add lines	tterrierit)					8	710	<u>-</u>
	GIUSS	IIICUIIIC (CACIL			(directly connected							<i>y</i> <u> </u>	, .
9	Salarie	es and wages			(uncerty connected					-	9		
											10		
											11		
											12		
											13		_
14	Deprec	ciation (attach	Form 4562)								14		_
15	Other o	deductions (at	tach stateme	ent)			SEE	STATE	EMEN	г 3	15	1,000	
16	Total d	deductions. A	dd lines 9 th	rough 15	j						16	1,000	
17	Taxable	e income befo	re specific d	eduction	of \$100. Subtract	line 16 from line	8				17	-284	Ι.
18	Specifi	ic deduction o	f \$100								18	\$	100
						Tax and							
19	Taxabl	le income. Su	ıbtract line 1	8 from lir	ne 17						19	-384	
					associations, enter 3						20).
21	Tax cre	edits									21		_
					See instructions for	•					22	,	0.
					d to the current year								
					s								
					pital gains (attach Fo								
					ach Form 4136) n Form 3800								
					e lines 23a through						23g	(ο.
24					e 22. See instruction						24	<u> </u>	<u> </u>
					23g						25		_
26	Enter a	amount of line	25 vou wan	t Credite	ed to 2024 estimate	ed tax				Refunded			
	U	Inder penalties o	of perjury, I dec	lare that I	ed to 2024 estimate have examined this retue. Declaration of prepare	urn, including accor	npanying sche	dules and stat	tements, ar	nd to the best of my	knowledge	May the IRS discuss th	
Oigii			AYER C			(00101 01011 00.00	ly Ci / io bacca c	II an intorna	011 01 111110.	i proparor nao an,	Howloage.	return with the preparer shown below? See inst	
Here	,	Signature o		<u> </u>		Date		Title				Wes I	

Print/Type preparer's name Check PTIN Preparer's signature Date if self-LUKE R. FIXTER, CPA P01745790 employed Paid **-***6586 TWO RIVERS CPA, LLC Firm's name Firm's EIN Preparer PO BOX 1369 Use Only Phone no. 307-231-0625 Firm's address PINEDALE, WY 82941

FORM 1120-H EXEMPT FUNCTION INCO	ME	STATEMENT 1
DESCRIPTION		AMOUNT
HOA MEMBERSHIP DUES HOA SPECIAL ASSESSMENT FEES HOA LATE PAYMENT FEES		70,471. 26,461. 878.
TOTAL TO FORM 1120-H, ITEM B		97,810.
FORM 1120-H INTEREST INCOME		STATEMENT 2
DESCRIPTION	US	OTHER
BANK INTEREST		716.
TOTAL TO FORM 1120-H, LINE 2		716.
FORM 1120-H OTHER DEDUCTIONS		STATEMENT 3
DESCRIPTION		AMOUNT
ALLOCATED PROFESSIONAL FEES		1,000.
TOTAL TO FORM 1120-H, LINE 15		1,000.

Form 41 Corporation Income Tax Return

1019 **2023**

	7	For calendar y 2023 or fiscal	ear _{Mo}	Day Year	Мо	Day Year	State use only
•	Amended Return? Check the box. See the instr. for reasons to amend, and enter the number that applies.	year beginning)		ending		1223
Business n	ame			State use only	Fede	ral Employer le	dentification Number (EIN)
				VALL			
	EY VISTA ESTATES HOA, INC					* * - *	**2341
	•				- 56	1700	
City B	OX 3393		State Z	IP code	Foreign count	51790	NAICS Code
JACK	ZON			3001	r or origin doding	1 y (11 1101 0.0.)	
		tod.				•	
1. a	deral audit was finalized this year, enter the latest year audits an inactive corporation or nameholder corporation?	.eu				· —	Yes • X No
2. 13 tm							
	ere estimated tax payments based on annualized amounts?						
	s a final return?						1 1 1 1 1
	, check the proper box below, and enter the date the event (
750	Withdrawn from Idaho Dissolved Me		ized		En	ter new EIN	-
5. Is thi	s an electrical or telephone utility?						
6. EIN o	f parent from consolidated Form 1120, Schedule K as filed	with the IRS	•				. — —
							Yes • X No
	oes this corporation own more than 50% of another corpora						
b. D	oes another corporation own more than 50% of this corpora	ation?					Yes • X No
c. D	oes one interest own more than 50% of this corporation and	d another corpo	ration?				Yes • X No
	re two or more corporations in this report operating in Idaho						
	rre a multinational unitary group, answer questions a, b, an						
a. C	neck the box for your filing method:	dwide return	•	Water's-edge retu	rn See Form 14.		
b. If	you're filing a water's-edge return, do you elect not to file th	ne water's-edge	spreadshe	ets?			Yes • No
	you're filing a worldwide return, did you compute foreign in						Yes • No
9. Did y	ou claim the property tax exemption for investment tax cred	it property acqu	ired this ta	x year?			Yes • X No
10. Are o	ne or more corporations in this report paying the Idaho pre	mium tax?					Yes • X No
Addition							
11. Fede	al taxable income. See instructions					• 11	-384
	est and dividends not taxable under Internal Revenue Code						
	, municipal, and local taxes measured by net income						
14. Net d	perating loss deducted on federal return					• 14	
	ends-received deduction on federal return						
	s depreciation. Include a schedule						
Chec	k the box if you have a current year loss limitation. See instr	uctions • L	J			. • 16	
	additions, including additions from Form 42, Part II						204
	ines 11 through 17					18	-384
Subtra							
	gn dividend gross-up (Sec. 78, Internal Revenue Code)					• 19	
	est from Idaho municipal securities			• 20			
21. Inter	est on U.S. government obligations. Include a schedule			• 21			
22. Inter	est and other expenses related to lines 20 and 21			• [22]		00	
	ines 20 and 21, then subtract line 22					23	
	nological equipment donation ated income. Include a schedule					• 24	
	***************************************			20			
	est and other expenses related to line 25. Include a schedule act line 26 from line 25					27	
						·· - 00	
	s depreciation. Include a schedule subtractions, including subtractions from Form 42, Part II					. —	
	1 4.1 40.00.04.07.00 1.00						
	usiness income subject to apportionment. Subtract line 30						-384
2 NOT L	assessesine subject to apportioniniona subtract line of				• • • • • • • • • • • • • • • • • • • •	• .	

Continue to page 2. - Include a complete copy of your federal Form 1120.

Return and payment - Mail to: Idaho State Tax Commission, PO Box 83784 Boise ID 83707-3784 Return only - Mail to: Idaho State Tax Commission, PO Box 56, Boise, ID 83756-0056

EFO00025 09-08-2023 348301 10-13-23

Page 1 of 2

32. Net business income subject to apportionment. Enter the amount from line 31 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 34. Net business income apportioned to Idaho. Multiply line 32 by the percent on line 33 35. Income allocated to Idaho. See instructions 36. Idaho net operating loss carryover • carryback • Enter total 37. Idaho taxable income. Add lines 34 and 35, then subtract line 36 38. Idaho income tax. Multiply line 37 by 5.8%. Minimum \$20 for each corporation. (See instructions.) 39. Credit for contributions to Idaho educational entities 40. Credit for contributions to Idaho youth and rehabilitation facilities 41. Total business income tax credits from Form 44, Part I, line 10. Include Form 44 42. Total credits. Add lines 39 through 41 43. Subtract line 42 from line 38. If line 42 is greater than line 38, enter zero 43. Other Taxes	IDAHO State Tax Commission	1019	Form	41	2023	(continued)
33 100.0000 % 134. Not to business income appendoment tool from form 42, Part I, line 2. 35 100.0000 % 36 Idation net operating loss carryover • carryback • Enter total . 36 Enter total . 37 Idation business income appendoment tool from form 42, Part I, line 2. 38 Idation net operating loss carryover • carryback • Enter total . 38 ESE STATEMENT 1 37 Idation business income. Add lines 34 and 35, then subtract line 36 38 Idation net operating loss carryover • carryback • Enter total . 39 Idation scome task. Multiply line 32 by 18-5, Maintone \$20 for each corporation. (See instructions.) • 36 30 Creditor contributions to Idation educational entities . 40 Idation entry of the contributions to Idation and entertities . 40 Idation contributions to Idation educational entities . 40 Idation contributions to Idation educational entities . 41 Total obsiless income but credits from form 44, Part I, line 10, Include form 44 42 Idation entry of the second state of the second reports receive to each corporation expensive operatory as uthorose to do business in teach . 44 Personal business income but credits from form 44, Part I, line 10, Include form 44 45 Fuelts to due. Include form 75 46 Idation entry of the second reports receive to each corporation expensive operatory as uthorose to do business in teach . 46 Idation entry of the second receive to each entry expensive operatory as uthorose to do business in teach . 46 Idation entry of the second receive to each entry expensive operatory as uthorose to do business in teach . 47 Idation entry of the second receive to each entry expensive operatory as uthorose to do business in teach . 48 Idation entry of the second receive to each entry expensive operatory as uthorose to do business in teach . 49 Idation (Control of the second receive to each entry expensive operatory as uthorose to do business in teach . 40 Idation (Control of the second receive to each . 41 Idation (Control of the second receive to each . 42 Idation (Control of the second receive		31	32			-384
34 36 disho net come apporting to lideb. Nutriley line 26 by the percent on line 33 3 4 38 disho net operating loss carryover • Carryback • Enter total 55						
34 36 36 36 36 36 36 36			•	33	100	0.0000 %
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48. Tax from recapture of qualified investment exemption (QIE). Include Form 49ER	***************************************			-		
49. 101 102 103						
50. Underpayment interest. Include Form 4 IESR 51. Donation to Opportunity Scholarship Program 51. Donation to Opportunity Scholarship Program 52. Add lines 49 through 51 52. 10 Payments and Other Credits 53. Estimated tax payments. If made under other EINs, provide EINs, amounts, and rollforwards 54. Tax paid by ABE on the corporation's behalf 55. Special fuels tax refund 66. Tax reimbursement incentive credit. 67. Total payments and other credits. Add lines 53 through 56 67. Total payments and other credits. Add lines 53 through 56 68. Tax due, If line 52 is more than line 57, subtract line 57 from line 52 69. Penalty 60. Nonrefundable credit from a prior year return. See Form 44 instructions 60. Nonrefundable credit from a prior year return. See Form 44 instructions 60. Refund 60. Verpayment. If line 52 is less than line 57, subtract line 57 from line 57 60. Refund 61. Total Due, Add lines 58 and 59, then subtract line 60 62. Overpayment. If line 52 is less than line 57, subtract line 57 from line 57 63. Refund 64. Total Que, Init explain the section to determine your tax due or refund. 64. Total Que, Init explain the section to determine your tax due or refund. 65. Refund from original return plus additional tax paid 66. Tax paid with original return plus additional tax paid 67. Amended tax due or refund. Add lines 64 and 65, then subtract line 66 68 69 60 60 60 60 60 60 60 60 60 60 60 60 60						10
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56. Tax reimbursement incentive credit.	FE Coopiel fuels toy refund	Include Form 75	 :	\vdash		
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58. Tax due. If line 52 is more than line 57, subtract line 57 from line 52 59. Penalty ● Interest from the due date ● Enter total 59. Coverpayment. If line 52 is less than line 57, subtract line 60 60. Coverpayment. If line 52 is less than line 57, subtract line 52 from line 57 63. Refund ● Apply to 2024 ● See instructions 64. Total due (line 61) or overpayment (line 62) on this return 65. Refund from original return plus additional refunds 66. Tax paid with original return plus additional tax paid 67. Amended tax due or refund. Add lines 64 and 65, then subtract line 66 68. Tax paid with original return plus additional tax paid 69. 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. See instructions. 60. Date 7 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. See instructions. 7 Itile 7 Preparer's EIN, SSN, or PTIN 8 Address PO BOX 1369 Phone number 9 Phone number 307-231-0625				37		
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Under penalties of perjury, I declare that to the best of my knowledge and belief this return is true, correct, and complete. See instructions. Signature of officer	67. Afficiaced tax due of ferund. Add lines 64 and 65, their subtract line 66			07		
TAXPAYER COPY Title Phone number 307-733-5881 Paid preparer's signature Preparer's EIN, SSN, or PTIN ***-***6586 Address PO BOX 1369 PINEDALE, WY 82941 307-231-0625						
## Title Phone number 307 - 733 - 5881 Paid preparer's signature Preparer's EIN, SSN, or PTIN * **-***6586 Address PO BOX 1369 Phone number PINEDALE, WY 82941 307 - 231 - 0625	TAXPAYER COPY	Date				
Paid preparer's signature Preparer's EIN, SSN, or PTIN **-**6586 Address PO BOX 1369 PINEDALE, WY 82941 307-231-0625	*					
• **-***6586 Address PO BOX 1369 PINEDALE, WY 82941 307-231-0625	Paid preparer's signature					
Address PO BOX 1369 PINEDALE, WY 82941 307-231-0625						
PINEDALE, WY 82941 307-231-0625	Address PO BOX 1369					
		07-231-0625				
	FF000025 00 00 0002					

Form 56 Net Operating Loss Schedule

2023 ¹⁰¹⁹

Names as shown on return

Social Security number or EIN

VALLEY VISTA ESTATES HOA, INC

-*2341

VALLEY VISTA ESTATES HOA, INC				3 2004 2005 2006 2007 2008					
Loss or Absorption Year	2001	2002	2003	2004	2005	2006	2007	2008	
Idaho adjusted income per return									
Idaho net operating loss carryforward/ carryback. Enter as positive									
Net capital loss. Enter as positive									
Idaho capital gains deduction. Enter as positive									
5. Idaho qualified business income deduction.									
Enter as positive. (For years beginning in 2019.)									
Casualty losses on Idaho property included in itemized deductions. Enter as negative									
7. Idaho net operating loss. Add lines 1									
through 6									
Idaho absorption income. Add lines 1 through 6									

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Names as shown on return

Social Security number or EIN

VALLEY VISTA ESTATES HOA, INC

-*2341

VALUEI VISIA ESIATES HOA, INC					""-""ZJ41			
Loss or Absorption Year	2009	2010	2011	2012	2013	2014	2015	2016
Idaho adjusted income per return					-100.	-100.	-100.	-100.
Idaho net operating loss carryforward/ carryback. Enter as positive								
Net capital loss. Enter as positive								
Idaho capital gains deduction. Enter as positive								
 Idaho qualified business income deduction. Enter as positive. (For years beginning in 2019.) 								
Casualty losses on Idaho property included in itemized deductions. Enter as negative								
7. Idaho net operating loss. Add lines 1 through 6					-100.	-100.	-100.	-100.
Idaho absorption income. Add lines 1 through 6								

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Form 56 2023 (continued)

IDAHO State Tax Commission

Names as shown on return

Social Security number or EIN

VALLEY VISTA ESTATES HOA, INC

-*2341

Loss or Absorption Year	2017	2018	2019	2020	2021	2022	2023	
Idaho adjusted income per return	-100.	-100.	-43.	-40.	-89.		-384.	
Idaho net operating loss carryforward/ carryback. Enter as positive						105.		
Net capital loss. Enter as positive								
Idaho capital gains deduction. Enter as positive								
Idaho qualified business income deduction. Enter as positive. (For years beginning in 2019.)								
Casualty losses on Idaho property included in itemized deductions. Enter as negative								
7. Idaho net operating loss. Add lines 1 through 6	-100.	-100.	-43.	-40.	-89.		-384.	
Idaho absorption income. Add lines 1 through 6						105.		

Form 56A Net Operating Loss Application

2023 ¹⁰¹⁹

Names as shown on return

Social Security number or EIN

VALLEY VISTA ESTATES HOA, INC

-*2341

ALLEY VISTA ESTATES HOA, INC	ESTATES HOA, INC								
Loss or Absorption Year	2001	2002	2003	2004	2005	2006	2007	2008	
1. Idaho loss. Form 56, line 7									
2. Idaho absorption income. Form 56, line 8									
Carryback			•						
3. Loss used in 2nd preceding year									
4. Loss used in 1st preceding year									
Carryforward									
5. Loss used in 2001									
6. Loss used in 2002									
7. Loss used in 2003									
3. Loss used in 2004									
9. Loss used in 2005									
D. Loss used in 2006									
I. Loss used in 2007									
2. Loss used in 2008									
3. Loss used in 2009									
4. Loss used in 2010									
5. Loss used in 2011									
6. Loss used in 2012									
7. Loss used in 2013									
3. Loss used in 2014									
9. Loss used in 2015									
D. Loss used in 2016									
1. Loss used in 2017									
2. Loss used in 2018									
3. Loss used in 2019									
1. Loss used in 2020									
5. Loss used in 2021	• •								
6. Loss used in 2022									
7. Loss used in 2023									
3. Remaining loss									
9. Total carryover loss remaining									

Form 56A Net Operating Loss Application

2023 ¹⁰¹⁹

Names as shown on return

Social Security number or EIN

VALLEY VISTA ESTATES HOA, INC

-*2341

VALLEY VISTA ESTATES HOA, INC	IC							
Loss or Absorption Year	2009	2010	2011	2012	2013	2014	2015	2016
1. Idaho loss. Form 56, line 7					-100.	-100.	-100.	-100.
2. Idaho absorption income. Form 56, line 8								
Carryback								
Loss used in 2nd preceding year								
4. Loss used in 1st preceding year								
Carryforward								
5. Loss used in 2001								
6. Loss used in 2002								
7. Loss used in 2003								
8. Loss used in 2004								
9. Loss used in 2005								
10. Loss used in 2006								
11. Loss used in 2007								
12. Loss used in 2008								
13. Loss used in 2009								
14. Loss used in 2010								
15. Loss used in 2011								
16. Loss used in 2012								
17. Loss used in 2013								
18. Loss used in 2014								
19. Loss used in 2015								
20. Loss used in 2016								
21. Loss used in 2017								
22. Loss used in 2018								
23. Loss used in 2019								
24. Loss used in 2020								
25. Loss used in 2021								
26. Loss used in 2022					100.	5.		
27. Loss used in 2023								
28. Remaining loss						-95.	-100.	-100.
29. Total carryover loss remaining								

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Form 56A Net Operating Loss Application

2023 ¹⁰¹⁹

Names as shown on return

Social Security number or EIN

VALLEY VISTA ESTATES HOA, INC

-*2341

VALLEY VISTA ESTATES HOA, INC						**2341		
Loss or Absorption Year	2017	2018	2019	2020	2021	2022	2023	
Idaho loss. Form 56, line 7	-100.	-100.	-43.	-40.	-89.		-384.	
Idaho absorption income. Form 56, line 8						105.		
Carryback				_				
Loss used in 2nd preceding year								
4. Loss used in 1st preceding year								
Carryforward								
5. Loss used in 2001								
6. Loss used in 2002								
7. Loss used in 2003								
8. Loss used in 2004								
9. Loss used in 2005								
10. Loss used in 2006								
11. Loss used in 2007								
12. Loss used in 2008								
13. Loss used in 2009								
14. Loss used in 2010								
15. Loss used in 2011								
16. Loss used in 2012								
17. Loss used in 2013								
18. Loss used in 2014								
19. Loss used in 2015								
20. Loss used in 2016								
21. Loss used in 2017								
22. Loss used in 2018								
23. Loss used in 2019								
24. Loss used in 2020								
25. Loss used in 2021								
26. Loss used in 2022								
27. Loss used in 2023								
28. Remaining loss	-100.	-100.	-43.	-40.	-89.		-384.	
29. Total carryover loss remaining							-1051.	

ID 41	IDAHO	BUSINESS LOSS	BUSINESS LOSS DEDUCTION					
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING					
12/31/13	100.00	100.00	0.00					
12/31/14	100.00	5.00	95.00					
12/31/15	100.00	0.00	100.00					
12/31/16	100.00	0.00	100.00					
12/31/17	100.00	0.00	100.00					
12/31/18	100.00	0.00	100.00					
12/31/19	43.00	0.00	43.00					
12/31/20	40.00	0.00	40.00					
12/31/21	89.00	0.00	89.00					
TOTAL LOSS	CARRYOVER AVAILABLE	THIS YEAR	667.00					