

Department of the Treasury  
Internal Revenue Service

Go to [www.irs.gov/Form1120H](http://www.irs.gov/Form1120H) for instructions and the latest information.

For calendar year 2024 or tax year beginning , 2024, and ending ,

<b>TYPE OR PRINT</b>	SPRING WOODS MOBILE HOME SUBDIVISION HOMEOWNER'S ASSOCIATION, INC 2375 VOYSIA LN NORTH FORT MYERS, FL 33917	<b>Employer identification number</b>
		59-2400296 Date association formed 12/31/1982

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>B</b> Total exempt function income. Must meet 60% gross income test. See instructions . . . . .	<b>B</b> 151,495.
<b>C</b> Total expenditures made for purposes described in 90% expenditure test. See instructions . . . . .	<b>C</b> 147,491.
<b>D</b> Association's total expenditures for the tax year. See instructions . . . . .	<b>D</b> 147,491.
<b>E</b> Tax-exempt interest received or accrued during the tax year . . . . .	<b>E</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 . . . . .	8	0.

**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 . . . . .	16	0.
17 Taxable income before specific deduction of \$100. Subtract line 16 from line 8 . . . . .	17	0.
18 Specific deduction of \$100 . . . . .	18	\$100

**Tax and Payments**

19 <b>Taxable income.</b> Subtract line 18 from line 17 . . . . .	19	-100.
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 <b>Total tax.</b> Subtract line 21 from line 20. See instructions for recapture of certain credits . . . . .	22	0.
23 a Preceding year's overpayment credited to the current year . . . . .	23a	
b Current year's estimated tax payments . . . . .	23b	
c Tax deposited with Form 7004 . . . . .	23c	
d Credit for tax paid on undistributed capital gains (attach Form 2439) . . . . .	23d	
e Credit for federal tax paid on fuels (attach Form 4136) . . . . .	23e	
f Elective payment election amount from Form 3800 . . . . .	23f	
g <b>Total payments and credits.</b> Combine lines 23a through 23f . . . . .	23g	0.
24 <b>Amount owed.</b> Subtract line 23g from line 22. See instructions . . . . .	24	0.
25 <b>Overpayment.</b> Subtract line 22 from line 23g . . . . .	25	
26 Enter amount of line 25 you want: <b>Credited to 2025 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	President	Title	May the IRS discuss this return with the preparer shown below? See instr. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's signature	Date	Check <input checked="" type="checkbox"/> self-employed if	PTIN
	KAREN ATKINSON	KAREN ATKINSON	4-21-25		P01438030
	Firm's name	Firm's EIN			
	Atkinson & Associates	47-2400262			
Firm's address	Phone no.				
3443 Hancock Bridge Pkwy., Suite 101	239-997-1441				
North Fort Myers, FL 33903					

**Federal Income Tax Summary**  
 SPRING WOODS MOBILE HOME SUBDIVISION  
 HOMEOWNER'S ASSOCIATION, INC

	2024	2023	Diff
<b>EXEMPT FUNCTION INCOME AND EXPENDITURES</b>			
Total exempt function income.....	151,495	120,166	31,329
Expenditures described in 90% test.....	147,491	213,607	-66,116
Total expenditures for the tax year.....	147,491	213,607	-66,116
<b>GROSS INCOME (NON-EXEMPT FUNCTION INCOME)</b>			
Gross income.....	0	0	0
<b>DEDUCTIONS</b>			
Total deductions.....	0	0	0
<b>TAXABLE INCOME</b>			
Specific deduction of \$100.....	100	100	0
Taxable income.....	-100	-100	0
<b>TAX COMPUTATION</b>			
Tax (30% of taxable income).....	0	0	0
Net tax.....	0	0	0
<b>PAYMENTS AND CREDITS</b>			
Total payments and credits.....	0	0	0
<b>REFUND OR AMOUNT DUE</b>			
Overpayment.....	0	0	0
Tax due.....	0	0	0
<b>TAX RATES</b>			
Marginal tax rate.....	30.0%	30.0%	0.0%

**Florida Income Tax Summary**  
**SPRING WOODS MOBILE HOME SUBDIVISION**  
**HOMEOWNER'S ASSOCIATION, INC**

	2024	2023	Diff
<b>FEDERAL INCOME</b>			
Federal taxable income.....	-100	-100	0
<b>STATE INCOME (LOSS)</b>			
Adjusted federal income.....	-100	-100	0
Florida portion of adjusted fed inc.....	-100	-100	0
Florida net income.....	0	0	0
<b>TAX COMPUTATION</b>			
Income/Franchise tax.....	0	0	0
Total taxes.....	0	0	0
Penalties and interest.....	0	0	0
Total due.....	0	0	0
<b>PAYMENTS</b>			
Total payments.....	0	0	0
<b>REFUND OR AMOUNT DUE</b>			
Overpayment.....	0	0	0
Tax due.....	0	0	0
<b>TAX RATES</b>			
Marginal tax rate.....	0.0%	0.0%	0.0%

## Application for Automatic Extension of Time To File Certain Business Income Tax, Information, and Other Returns

▶ **File a separate application for each return.**  
▶ **Go to [www.irs.gov/Form7004](http://www.irs.gov/Form7004) for instructions and the latest information.**

**Print  
or  
Type**

Name <b>SPRING WOODS MOBILE HOME SUBDIVISION</b> <small>Number, street, and room or suite no. (If P.O. box, see instructions.)</small>	Identifying number <b>59-2400296</b>
<b>2375 VOYSIA LN</b> <small>City, town, state, and ZIP code (If a foreign address, enter city, province or state, and country (follow the country's practice for entering postal code).)</small>	
<b>NORTH FORT MYERS, FL 33917</b>	

**Note:** File request for extension by the due date of the return. See instructions before completing this form.

**Part I Automatic Extension for Certain Business Income Tax, Information, and Other Returns.** See instructions.

1 Enter the form code for the return listed below that this application is for. 17

Application Is For:	Form Code	Application Is For:	Form Code
Form 706-GS(D)	01	Form 1120-ND (section 4951 taxes)	20
Form 706-GS(T)	02	Form 1120-PC	21
Form 1041 (bankruptcy estate only)	03	Form 1120-POL	22
Form 1041 (estate other than a bankruptcy estate)	04	Form 1120-REIT	23
Form 1041 (trust)	05	Form 1120-RIC	24
Form 1041-N	06	Form 1120S	25
Form 1041-QFT	07	Form 1120-SF	26
Form 1042	08	Form 3520-A	27
Form 1065	09	Form 8612	28
Form 1066	11	Form 8613	29
Form 1120	12	Form 8725	30
Form 1120-C	34	Form 8804	31
Form 1120-F	15	Form 8831	32
Form 1120-FSC	16	Form 8876	33
Form 1120-H	17	Form 8924	35
Form 1120-L	18	Form 8928	36
Form 1120-ND	19		

**Part II All Filers Must Complete This Part**

- 2 If the organization is a foreign corporation that does not have an office or place of business in the United States, check here.
- 3 If the organization is a corporation and is the common parent of a group that intends to file a consolidated return, check here.   
If checked, attach a statement listing the name, address, and employer identification number (EIN) for each member covered by this application.
- 4 If the organization is a corporation or partnership that qualifies under Regulations section 1.6081-5, check here.
- 5 a The application is for calendar year 20 24, or tax year beginning \_\_\_\_\_, 20 \_\_, and ending \_\_\_\_\_, 20 \_\_
- b **Short tax year.** If this tax year is less than 12 months, check the reason:  Initial return  Final return  
 Change in accounting period  Consolidated return to be filed  Other (See instructions – attach explanation.)

6 Tentative total tax.....	6	0.
7 Total payments and credits. See instructions.....	7	0.
8 Balance due. Subtract line 7 from line 6. See instructions.....	8	0.