

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

**2001**

Department of the Treasury  
Internal Revenue Service

For calendar year 2001 or tax year beginning , 2001, and ending , 20

Use IRS label. Otherwise, please print or type.	Name <i>Big Park Regional Coordinating Council</i>	Employer identification number (see page 4) <i>86-0947848</i>
	Number, street, and room or suite no. (if a P.O. box, see page 4.) <i>P.O. Box 20248</i>	Date association formed <i>2000</i>
	City or town, state, and ZIP code <i>Sedona, AZ 86341</i>	

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	<i>1,760</i>
C Total expenditures made for purposes described in 90% expenditure test (see instructions) . . . . .	C	<i>1,939</i>
D Association's total expenditures for the tax year (see instructions) . . . . .	D	<i>1,939</i>
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	
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 18 (attach Form 4797) . . . . .	6	
7 Other income (excluding exempt function income) (attach schedule) . . . . .	7	
8 <b>Gross income</b> (excluding exempt function income). Add lines 1 through 7 . . . . .	8	

**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 schedule) . . . . .	15	
16 <b>Total deductions.</b> Add lines 9 through 15 . . . . .	16	
17 Taxable income before specific deduction of \$100. Subtract line 16 from line 8 . . . . .	17	
18 <b>Specific deduction of \$100</b> . . . . .	18	<b>\$100.00</b>

**Tax and Payments**

19 <b>Taxable income.</b> Subtract line 18 from line 17 . . . . .	19	
20 Enter 30% of line 19. (Timeshare associations, enter 32% of line 19.) . . . . .	20	
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	
23 <b>Payments:</b> a 2000 overpayment credited to 2001 . . . . .	23a	
b 2001 estimated tax payments . . . . .	23b	
c Total ▶ . . . . .	23c	
d Tax deposited with Form 7004 . . . . .	23d	
e Credit for tax paid on undistributed capital gains (attach Form 2439) . . . . .	23e	
f Credit for Federal tax on fuels (attach Form 4136) . . . . .	23f	
g Add lines 23c through 23f . . . . .	23g	
24 <b>Tax due.</b> Subtract line 23g from line 22. See instructions for depository method of tax payment . . . . .	24	
25 <b>Overpayment.</b> Subtract line 22 from line 23g . . . . .	25	
26 Enter amount of line 25 you want: <b>Credited to 2002 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.

Sign Here ▶	<i>Donald P. Beard</i> <i>4/2/02</i>	▶ <i>Treasurer</i>	May the IRS discuss this return with the preparer shown below (see instructions)? <input type="checkbox"/> Yes <input type="checkbox"/> No
	Signature of officer <i>Donald P. Beard</i> Date		

Paid Preparer's Use Only	Preparer's signature ▶	Date	Check if self-employed <input type="checkbox"/>	Preparer's SSN or PTIN
	Firm's name (or yours if self-employed), address, and ZIP code ▶	EIN	Phone no.	

1120-H

2001

Income		EXP	Bal
Balance from 2000	\$ 885.99	corp commi \$ 10	
Dues - 2001	\$ 1760	Liability Ins \$ 1150	
MISC - 2001	\$ 22	office Supplies \$ 1671	
Total Income	\$ 2667.99	postage/printing \$ 339.60	
		Meeting Room \$ 300	
		MISC \$ 122.59	
		Total Expenses 1938.90	
Net Balance	\$ 729.09	( \$ 2667.99 - \$ 1938.90 )	

BIG PARK REGIONAL COORDINATING COUNCIL  
TREASURER'S REPORT  
JANUARY 2001

INCOME

This month	10.00
Year to date	\$ 1880.00
Balance from previous year	519.64
Total Income year to date	\$ 2399.64

EXPENSES

	<u>Current mo</u>	<u>Yr. to Date</u>
Advertising		
Ariz. Corp Comm.		10.00
Bank Services		
Liability Insurance		1,000.00
Office Supplies		10.45
Postage & Printing	\$25.44	\$425.14
Miscellaneous	150.00	237.50
TOTALS	175.44	\$1,683.09
Bank Balance End of Period		\$ 716.55

**BIG PARK REGIONAL COORDINATING COUNCIL**  
**Financial Report, 2001**  
 National Bank Account No. 380004598

	JUL	AUG	SEP	OCT	NOV	DEC	year to-date	BUDGET
<b>INCOME</b>								
Dues	0	0	0	0	0	0	1760.00	\$1870.00
Misc.	0	0	0	0	0	0	22.00	
Income for month	0	0	0	0	0	0	1782.00	1870.00
Balance from 2000							885.99	890.00
Total income							\$2667.99	\$2760.00
<b>EXPENSES</b>								
AZ Corp. Comm.	0	0	0	0	0	0	10.00	10.00
Liability Insurance	1150.00	0	0	0	0	0	1150.00	1000.00
Office Supplies	0	0	11.76	0	4.95		16.71	
Postage & Printing	0	0	76.50	68.00	1.49		339.60	400.00
Meet Rm Donation	0	0	150.00	0			300.00	300.00
Misc.	0	0	0	50.00			122.59	100.00
Total expenses	1150.00	0	238.26	118.00	6.44		1938.90	1810.00
Net Balance 2001							\$ 729.09	\$950.00

National Bank Account No. 380004952 (Recreation Committee)  
 10-31 Balance \$165.50  
 Office supplies and copies 72.81  
 11-30 Balance: \$ 92.64

**BIG PARK REGIONAL COORDINATING COUNCIL**  
**Financial Report, 2002**  
 National Bank Account No. 380004598

	JAN	FEB	MAR	APR	MAY	JUN	year to-date	Budget (02)
<b>INCOME</b>								
Dues	0						0	\$1800.00 (15 members @ \$120 ea.)
Misc.	0						0	
Income for month	0							1800.00
Balance from 2001							686.57	686.57
<b>Total income</b>							<b>\$686.57</b>	<b>\$2486.57</b>
<b>EXPENSES</b>								
AZ Corp. Comm.	0						0	10
Liability Insurance	0						0	1300
Office Supplies	0						0	20
Postage & Printing	0						0	400
Meet Rm Cost	0						0	300
Misc.	0						0	100
<b>Total expenses</b>	0						0	2130
<b>Net Balance 2002</b>							<b>\$686.57</b>	<b>\$356.57</b>

National Bank Account No. 380004992 (Recreation Committee)

12-31-01 Balance      \$92.64  
 No activity in January  
 1-24-02 Balance      \$92.64



**STATE OF ARIZONA  
CORPORATION COMMISSION  
CORPORATION ANNUAL REPORT  
& CERTIFICATE OF DISCLOSURE**



DUE ON OR BEFORE 05/19/2001

FY00-01

FILING FEE \$10.00

The following information is required by A.R.S. §10-1622 & §10-11622 for all corporations organized pursuant to Arizona Revised Statutes, Title 10. The Commission's authority to prescribe this form is A.R.S. §10-121.A. & §10-3121.A. **YOUR REPORT MUST BE SUBMITTED ON THIS ORIGINAL FORM.** Make changes or corrections where necessary. Information for the report should reflect the current status of the corporation. See instructions for proper format. REFER TO THE INSTRUCTIONS ON PAGE 4.

-0800710-5

1. BIG PARK REGIONAL COORDINATING COUNCIL,  
% BARBARA BENSON  
56 W CORTEZ DR STE A  
SEDONA, AZ 86351

Business Phone: \_\_\_\_\_ (Business phone is optional.)  
State of Domicile: ARIZONA Type of Corporation: NON-PROFIT

2. Arizona Statutory Agent: BARBARA BENSON  
Street Address: 56 W CORTEZ DR STE A  
(NOT P.O. BOX)  
City, State, Zip: SEDONA AZ 86351-

*Use this box only if appointing a new Statutory Agent*

ACC USE ONLY	
Fee	\$ _____
Penalty	\$ _____
Reinstate	\$ _____
Expedite	\$ _____
Resubmit	\$ _____

*If appointing a new statutory agent, the new agent MUST consent to that appointment by signing below.*

*I, (individual) or We, (corporation or limited liability company) having been designated the new Statutory Agent, do hereby consent to this appointment until my removal or resignation pursuant to law.*

\_\_\_\_\_  
Signature of new Statutory Agent

3. Secondary Address:  
(Foreign Corporations are **REQUIRED** to complete this section.)

4. Check the one category below which best describes the CHARACTER OF BUSINESS of your corporation.

- BUSINESS CORPORATIONS**
- 1. Accounting
  - 2. Advertising
  - 3. Aerospace
  - 4. Agriculture
  - 5. Architecture
  - 6. Banking/Finance
  - 7. Barbers/Cosmetology
  - 8. Construction
  - 9. Contractor
  - 10. Credit/Collection
  - 11. Education
  - 12. Engineering
  - 13. Entertainment
  - 14. General Consulting
  - 15. Health Care
  - 16. Hotel/Motel
  - 17. Import/Export
  - 18. Insurance
  - 19. Science/Research
  - 20. Manufacturing
  - 21. Mining
  - 22. News Media
  - 23. Pharmaceutical
  - 24. Publishing/Printing
  - 25. Ranching/Livestock
  - 26. Real Estate
  - 27. Restaurant/Bar
  - 28. Retail Sales
  - 29. Science/Research
  - 30. Sports/Sporting Events
  - 31. Technology(Computers)
  - 32. Technology(General)
  - 33. Television/Radio
  - 34. Tourism/Convention Services
  - 35. Transportation
  - 36. Utilities
  - 37. Veterinary Medicine/Animal Care

**NON-PROFIT CORPORATIONS**

- 1. Charitable
- 2. Benevolent
- 3. Educational
- 4. Civic
- 5. Political
- 6. Religious
- 7. Social
- 8. Literary
- 9. Cultural
- 10. Athletic
- 11. Science/Research
- 12. Hospital/Health Care
- 13. Agricultural
- 14. Animal Husbandry
- 15. Homeowner's Association
- 16. Professional, commercial industrial or trade association
- 17. Other

**9. FINANCIAL DISCLOSURE (A.R.S. §§10-1622.B & 10-11622.A.9)**

Nonprofit corporations **must attach** a financial statement (balance sheet including assets, liabilities and equity). All other forms of corporations are exempt from filing a financial disclosure.

**9A. MEMBERS (A.R.S. § 10-11622.A.6) Nonprofit Corporations Only.**

This corporation **does**  **does not**  have members.

**10. CERTIFICATE OF DISCLOSURE (A.R.S. §§10-1622.A.8 & 10-11622.A.7)**

Has ANY person serving either by election or appointment as an officer, director, trustee, incorporator and person controlling or holding more than 10% of the issued and outstanding common shares or 10% of any other proprietary, beneficial or membership interest in the corporation been: [Underlined portion pertains to profit corporations only]

1. Convicted of a felony involving a transaction in securities, consumer fraud or antitrust in any state or federal jurisdiction within the seven year period immediately preceding the execution of this certificate?
2. Convicted of a felony, the essential elements of which consisted of fraud, misrepresentation, theft by false pretenses or restraint of trade or monopoly in any state or federal jurisdiction within the seven year period immediately preceding execution of this certificate?
3. Or are subject to an injunction, judgment, decree or permanent order of any state or federal court entered within the seven year period immediately preceding execution of this certificate where such injunction, judgment, decree or permanent order involved the violation of
  - (a) fraud or registration provisions of the securities laws of that jurisdiction, or
  - (b) the consumer fraud laws of that jurisdiction, or
  - (c) the antitrust or restraint of trade laws of that jurisdiction?

One box **must** be marked: **YES**  **NO**

If "YES", the following information must be submitted as an attachment to this report for each person subject to one or more of the actions stated in Items 1. through 3. above.

- |   |   |
|---|---|
| 1. Full name and prior names used.                          | 5. Date and location of birth.  |
| 2. Full birth name.   | 6. Social Security Number   |
| 3. Present home address.                                    | 7. The nature and description of each conviction or judicial action; the date and location; the court and public agency involved, and the file or cause number of the case. |
| 4. Prior addresses (for immediate preceding 7 year period). |   |

**11. STATEMENT OF BANKRUPTCY (A.R.S. §§10-202.D.2 & 10-3202.02)**

Has ANY person serving either by election or appointment as an officer, director, trustee, incorporator and person controlling or holding more than 20% of the issued and outstanding common shares or 20% of any other proprietary, beneficial or membership interest in the corporation served in such capacity or held a 20% interest in any other corporation during the bankruptcy, receivership, or charter revocation of the other corporation? [Underlined portion pertains to profit corporations only]

One box **must** be marked: **YES**  **NO**

Chapter \_\_\_\_\_ Date Filed \_\_\_\_\_ Case Number \_\_\_\_\_

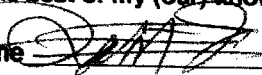
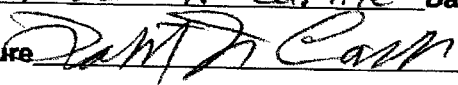
If "YES", the following information **must be submitted** as an attachment to this report for each person subject to the statement above.  
1) The names and addresses of each corporation and the person or persons involved. 2) The state in which each corporation was a) incorporated b) transacted business. 3) The dates of corporate operation.

**12. SIGNATURES**

**CAUTION:** Annual Reports must be signed by a duly authorized officer. Annual Reports submitted with incorrect signatures will be rejected.

I DECLARE, UNDER PENALTY OF LAW, THAT ALL CORPORATE INCOME TAX RETURNS REQUIRED BY TITLE 43 OF THE ARIZONA REVISED STATUTES HAVE BEEN FILED WITH THE ARIZONA DEPARTMENT OF REVENUE. *I have sent in Federal Form 1120-H.*

I further declare under penalty of law that I (we) have examined this report and the certificate, including any attachments, and to the best of my (our) knowledge and belief they are true, correct and complete.

Name  Date \_\_\_\_\_ Name Robert W. Carlisle Date 5-14-01  
 Signature \_\_\_\_\_ Signature   
 Title \_\_\_\_\_