REESE HENRY & COMPANY, INC. 400 EAST MAIN STREET, SUITE 2 ASPEN, COLORADO 81611

THE HOMESTEAD AT SNOWMASS ASSOCIATION C/O SNOWMASS LODGING COMPANY PO BOX 6077 SNOWMASS VILLAGE, CO 81615

Dear Board Members:

Enclosed are your completed income tax returns for the year ended December 31, 2013 which include federal Form 1120 and state Form 112.

This return has qualified for electronic filing. After you have reviewed the return for completeness and accuracy, please sign, date and return Form 8879-C to our office. We will transmit your return electronically to the IRS, and no further action is required. Return federal Form 8879-C to us by March 17, 2014.

No payment is required with this return when filed.

The federal return has no tax due and no prepayments made. The return, however, must still be filed by the due date.

The Colorado Form 112 return has qualified for electronic filing. After you have reviewed your return for completeness and accuracy, please sign, date and return DR 8453-C to our office. We will then transmit your return electronically to the CDOR. Do not mail the paper copy of the return to the CDOR. Return DR 8453-C to us by April 15, 2014.

No payment is required with this return when filed.

We prepared the returns from information you furnished us without verification. Upon examination of the returns by taxing authorities, requests may be made for underlying data. We therefore recommend that you preserve all records which you may be called upon to produce in connection with such and examination.

We sincerely appreciate this opportunity to serve you. If you have any questions regarding the returns, please do not hesitate to call.

Very truly yours,

Denise Jurgens, CPA

-	-1	120		U.S. Corporation income Tax Return		OMB No. 1545-0123
Form		ILU		For calendar year 2013 or tax year g, ending		
			beginnin	2013		
•		of the Treasury	İ			LUIU
Intern	al Reve	anue Service		▶ Information about Form 1120 and its separate instructions is at www.irs.gov/form1120.		
A Ch	eck if	ded salves		NameTHE HOMESTEAD AT SNOWMASS ASSOCIATION		Employer Identification number
(all	ach Fo	ated return irin 851)	TYPE	C/O SNOWMASS LODGING COMPANY		844
dal	ed retu	le consoll-	OR	Number, street, and room or suite no. If a P.O. box, see instructions.	C	Date incorporated
		holding co. th. PH)	PRINT	PO BOX 6077		10/13/1988
3 Per (se	sonal : e instru	service corp.	1	City or town, state, or province, country and ZIP or foreign postal code	D	Total assets (see instructions)
4 Scl	redule		<u> </u>	SNOWMASS VILLAGE, CO 81615	\$	124,568.
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	E Chec	k if: (1) Initial return (2) Final return (3) Name change (4) Ado	iress ch	
	1 a	Gross receipts o		1a 229,261		
		•	• • • •	16	1	
				om line 1a	1c	229,261.
a)	n	Cost of anode s	old (attach	Form 1195.A\	2	229,261.
	3	Green profit Cu	ibtroot line (Form 1125-A)		227,201.
		Dividenda (Cala	ndula O line	? from line 1c	4	
income				19)		84.
일	5					04.
	6					
	7	Ciross royalties			7	
	8			ach Schedule D (Form 1120))		
	9			n 4797, Part II, line 17 (atlach Form 4797)		
	10	Other income (a	ittach stater	nent)	10	
	11	Total income.	Add lines 3	through 10	- 11	84.
instructions for limitations on deductions.)		Compensation of o				
	13	Salaries and wa	13			
cţi						
- P						
ğ				,		
ō	17	Taxes and licens	ses		17	
ons						
ati						
m:	20			62 not claimed on Form 1125-A or elsewhere on return (attach Form 4562)		
;;;	21					
sfc						
ion				nlage		
rot	0.4	Employee banef	Statuty, cu	., plans	24	
strı	24	Complete perier	nt program:	S	24	
e ii.	20	Our endeduction	CHON ACUVI	ties deduction (attach Form 8903)	25	Ο 1
Sec				alement) SEE STATEMENT 1	26	84.
) SI				s 12 through 26	27	84.
ior				alling loss deduction and special deductions. Subtract line 27 from line 11	28	0.
nc				in (see instructions) STATEMENT 2 29a 0	•	
Deductions (Se				ıle C, line 20)	_	
	C	Add lines 29a ar	nd 29b		29c	
Tax, Refundable Gredits, and Payments				line 29c from line 28 (see instructions)	30	0.
Srec		Total tax (Sched			31	0.
le (32	Total payments	and refund	able credits (Schedule J, Part II, line 21)	32	
함				instructions). Check if Form 2220 is attached 🕨 🗀	33	
첉				smaller than the total of lines 31 and 33, enter amount owed	34	10.
유				arger than the total of lines 31 and 33, enter amount overpaid <u>and the lines of the lines are the l</u>	35	Here I are a second of the second
ă		Enter amount fro	om line 35 '	vou want: Credited to 2014 estimated tax 🕨 💮 🗀 🗀 🙃 😁 . Refunded 🕟 🕨	. 36	Stage of the stages to the
		Under penalties	of perfury, I c	eclare that I have examined this return, including accompanying schedules and statements, and to the best of a along openers (ether they tax payer) is based in all promation of which preparer has any knowledge.	ny knowle	odge and belief, It is true,
Sig		Correc	land a	and displayed better that the tax party to a summary in a formation of which preparer has any knowledge.		May the IRS discuss this return with the preparer shown below?
Her	e.	1 / 1	1/11	PRESIDENT		X Yes No
		Signature of o		/ Title		
ם יים		Print/Type prepare DENISE		NS, CPA Preparer's signature	neck self-	PTIN
Paid					nployed [
Prep				· · · · · · · · · · · · · · · · · · ·	ım's EIN)	
Use (JUIÀ	1		•	ione no,	
31160	1		ASPEN		<u> </u>	
12-18	-13 c	ovva For Paper	work Hedu	otion Act Notice, see separate instructions.	red i di	ed, she bit Form 1120.(2013)

	1 1120 (2013) THE HOMESTEAD AT SNOWMASS ASSOCIATI	ON C/	8	ge 2 € 1
	Schedule C Dividends and Special Deductions (see instructions)	(a) Dividends received	(b) %	(c) Special deductions (a) x (b)
1	Dividends from less-than-20%-owned domestic corporations (other than debt-financed stock)		70	
2	Dividends from 20%-or-more-owned domestic corporations (other than debt-financed stock)		80	
3	Dividends on debt-financed stock of domestic and foreign corporations		see Instructions	<u> </u>
4	Dividends on certain preferred stock of less-than-20%-owned public utilities		42	
5	Dividends on certain preferred stock of 20%-or-more-owned public utilities		48	
6	Dividends from less-than-20%-owned foreign corporations and certain FSCs		70	
7	Dividends from 20%-or-more-owned foreign corporations and certain FSCs		80	
8	Dividends from wholly owned foreign subsidiaries		100	
9	Total. Add lines 1 through 8			
10	Dividends from domestic corporations received by a small business investment company operating under the Small Business Investment Act of 1958		100	
11	Dividends from affiliated group members		100	
12	Dividends from certain FSCs		100	
13	Dividends from foreign corporations not included on lines 3, 6, 7, 8, 11, or 12		en floren en de endane ja von de energian en	mazzmenim ta iz vijago store pajejimaja iz vystovici — w is siste
14	Income from controlled foreign corporations under subpart F (attach Form(s) 5471)			. **
15	Foreign dividend gross-up			e series
16	IC -DISC and former DISC dividends not included on lines 1, 2, or 3	A-C		
17	Other dividends			
18	Deduction for dividends paid on certain preferred stock of public utilities			
19	Total dividends. Add lines 1 through 17. Enter here and on page 1, line 4			
วก	Total engoist deductions Add lines 0, 10, 11, 10, and 10. Enter have and as year 1 line 20	Na.		

m 1120 (2013) THE HOMESTEAD AT SNOWMASS ASSOCI	IATION C/			β	Page 3
Schedule J Tax Computation and Payment (see instructions)					
rt I - Tax Computation					
Check if the corporation is a member of a controlled group (attach Schedule O (Form	1120))	▶□			
2 Income tax. Check if a qualified personal service corporation					
(see instructions)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	2			0.
3 Alternative minimum tax (attach Form 4626)		3			
Add lines 2 and 3	*******************************				0.
5a Foreign tax credit (attach Form 1118)					
b Credit from Form 8834 (see instructions)	5b				
e General business credit (atlach Form 3800)	5c				
d Credit for prior year minimum tax (attach Form 8827)	5d				
e Bond credits from Form 8912					
Total credits. Add lines 5a through 5e		6			
7 Subtract line 6 from line 4	***************************************	7			0.
Personal holding company tax (attach Schedule PH (Form 1120))		8			
a Recapture of investment credit (attach Form 4255)	9a				
b Recapture of low-income housing credit (attach Form 8611)	9b				
c Interest due under the lack-back method-completed long-term contracts	····				
(attach Form 8697)	9c				
d Interest due under the look-back method-income forecast method (attach Form 8866	9d				
e Alternative tax on qualifying shipping activities (attach Form 8902)					
f Other (see instructions - attach statement)					
Total, Add lines 9a through 9f	31		,		
• • • • • • • • • • • • • • • • • • • •	•••••	1			0.
Total tax. Add lines 7, 8, and 10. Enter here and on page 1, line 31			<u> </u>		- 0 •
rt II - Payments and Refundable Credits			.		
2 2012 overpayment credited to 2013	•••••	1			
3 2013 estimated tax payments					
2013 refund applied for on Form 4466		1		· · ·	
Combine lines 12, 13, and 14					
3 Tax deposited with Form 7004				: .	
Withholding (see instructions)					
Total payments. Add lines 15, 16, and 17	***************************************		8	.:	
Refundable credits from:	1 1				
a Form 2439	*****				
b Form 4136					
c Form 8827, line 8c					
d Other (attach statement - see instructions)					
Total credits. Add lines 19a through 19d		2	0		
Total payments and credits. Add lines 18 and 20. Enter here and on page 1, line 32.			1		
Schedule K Other Information (see instructions)		414504444444444444444444444444444444444			
Check accounting method: a Cash b X Accrual c Other	(specify)			Yes	No
See the instructions and enter the:					
Business activity code no. ► 813000					
Business activity CONDO ASSOC					
					1
Product or service MANAGEMENT					
Product or service MANAGEMENT	oup?				x
	oup?			· · ·	x
Product or service MANAGEMENT Is the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled gr	oup?				X
Product or service MANAGEMENT Is the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled gr If "Yes," enter name and EIN of the parent corporation	11 - 12 - 12 - 12 - 12 - 12 - 12 - 12 -			-	X
Product or service MANAGEMENT Is the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled graph of "Yes," enter name and EIN of the parent corporation At the end of the tax year: Did any foreign or domestic corporation, partnership (including any entity treated as a parent corporation).	partnership), trust; or lax-c	exemptoose na ner	BETTER AT I	41,777	i prv i mar, te.
Product or service MANAGEMENT Is the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled graph of "Yes," enter name and EIN of the parent corporation At the end of the tax year: Did any foreign or domestic corporation, partnership (including any entity treated as a porganization own directly 20% or more, or own, directly or indirectly, 50% or more of the state of the corporation of the corporati	partnership), trust, or lax-one total voting power of all	exémpto oca ma nam I classes of the			i yay imerina Lisa da an
Product or service MANAGEMENT Is the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled graph of "Yes," enter name and EIN of the parent corporation At the end of the tax year: Did any foreign or domestic corporation, partnership (including any entity treated as a parent corporation).	partnership), trust, or tax- ne total voting power of all) (attach Schedule G)	exempt work the second	arerranic in the		i prv i mar, te.

1	5	· a•		
Form 1120 (2013) THE HOMESTEAD AT SNOWM	ASS ASSOCIATIO	N C/		Page 4
Schedule K Other Information continued (see inst	ructions)			
			Yes	No
5 At the end of the tax year, did the corporation:				
a Own directly 20% or more, or own, directly or indirectly, 50% or m	ore of the total voting power of	f all classes of stock entitled to vote of any		
foreign or domestic corporation not included on Form 851, Affiliat	ions Schedule? For rules of cor	istructive ownership, see instructions		x
If "Yes," complete (i) through (iv) below.				1-2-
(i) Name of Corporation	(il) Employer Identification Number	(ili) Country of	(iv) Perce	
	(if any)	(ili) Country of Incorporation	Owned in	
b Own directly an interest of 20% or more, or own, directly or indirect	tly, an interest of 50% or more	in any foreign or domestic partnership		
(including an entity treated as a partnership) or in the beneficial into	erest of a trust? For rules of co	nstructive ownership, see instructions		X
If "Yes," complete (i) through (iv) below.		T		
(i) Name of Entity	(ii) Employer Identification Number	(iii) Country of	(iv) Maxi Percentage	
	(if any)	Organization	Profil, Loss,	
·			`	
the state of the s				
6 During this lax year, did the corporation pay dividends (other than s	clock dividends and distribution	I a probance for check in		T
excess of the corporation's current and accumulated earnings and	nrofite? /See eactions 201 and	246 /		7.7
If "Yes," file Form 5452, Corporate Report of Nondividend Distributi	nue	3 10.)		X
If this is a consolidated return, answer here for the parent corporati		uheidigev		
7 At any time during the tax year, did one foreign person own, directly	on and on round oo ride each a or indirectly, at least 25% of (a) the total voting power of all		
classes of the corporation's stock entitled to vole or (b) the total val	ue of all classes of the cornora	tion's stock?		x
For rules of attribution, see section 318. If "Yes," enter:	are ar an oldebee of the obligation	non a arcox:		+
(i) Percentage owned ► and (ii) Owner	s country >		İ	
(c) The corporation may have to file Form 5472, Information Retur		Corporation or a Foreign		
Corporation Engaged in a U.S. Trade or Business. Enter the number	of Forms 5472 attached >	o corporation of a rotting it		
8 Check this box if the corporation issued publicly offered debt instru	ments with original issue disco	unt		
If checked, the corporation may have to file Form 8281, Information	Return for Publicly Offered Or	iginal Issue Discount Instruments		
9 Enter the amount of tax-exempt interest received or accrued during		· · · · · · · · · · · · · · · · · · ·		
O Enter the number of shareholders at the end of the tax year (if 100 c	or fewer)			
1 If the corporation has an NOL for the tax year and is electing to fore	go the carryback period, check	here		
If the corporation is filing a consolidated return, the statement required by Regul	alions section 1,1502-21(b)(3) must	be attached or the election will not be valid		
2 Enter the available NOL carryover from prior tax years (do not reduc	e it by any deduction on line 29	9a.) ▶ \$ 669 .		
3 Are the corporation's total receipts (page 1, line 1a, plus lines 4 through 10) for the	he tax year and its total assets at the	end of the tax year less than \$250,000?	X	1
it "Yes," the corporation is not required to complete Schedules L, M-	1, and M-2. Instead, enter the	total amount of eash (1997) is the against the against the	areas in the second	1
distributions and the book value of property distributions (other that	n cash) made during the lax ye	ar. 🛌 \$500 cm - 1740 mm O. py zpengerijie	me trace car	

Form 1120 (2013) THE HOMESTEAD	AT SNOWMASS A	SSOCIATION C/	tan	S. Page 5	
Schedule L Balance Sheets per Books	Beginning o		End of lax year		
Assets	(a)	(b)	(c)	(d)	
1 Cash		106,574.		124,568.	
2a Trade notes and accounts receivable					
b Less allowance for bad debts	<u> </u>		(1	
3 Inventories					
4 U.S. government obligations					
5 Tax-exempt securities					
6 Other current assets (att. stmt.)					
7 Loans to shareholders		· · · · · · · · · · · · · · · · · · ·			
8 Mortgage and real estate loans					
9 Other investments (att. stmt.)		·			
10a Buildings and other depreciable assets					
b Less accumulated depreciation	1	***		1	
11a Depletable assets					
b Less accumulated depletion			(1	
12 Land (net of any amortization) 13a Intangible assets (amortizable only)					
b Less accumulated amortization					
14 Other assets (alt. stmt.)				1	
***************************************		100 551			
15 Total assets		106,574.		124,568.	
16 Accounts payable		47 606			
17 Mortgages, notes, bonds payable in less than 1 year	.	47,686.		18,759.	
18 Other current liabilities (att. stmt.)					
19 Loans from shareholders	-				
20 Mortgages, notes, bonds payable in 1 year or more					
21 Other liabilities (att. stmt.)	-				
22 Capital stock: a Preferred stock					
b Common stock		74E.		-	
23 Additional paid-in capital		E0 000		105 000	
24 Retained earnings - Appropriated (attach statement)		58,888.	. Kili	105,809.	
25 Retained earnings - Unappropriated			e de electric		
Adjustments to shareholders' equity (attach statement)	· · ·		2.00		
27 Less cost of treasury stock		1		,	
28 Total liabilities and shareholders' equity		106,574.		124 500	
	Income (Loss) per E	Books With Income	per Return	124,568.	
Note: Schedule M-3 requ	ired instead of Schedule M-1 if	total assets are \$10 million of	or more - see instructions		
1 Net income (loss) per books					
2 Federal income tax per books		included on this return			
3 Excess of capital losses over capital gains		Tax-exempt interest			
4 Income subject to tax not recorded on books this year		-	v		
(itemize):					
		8 Deductions on this ret	urn not charged		
5 Expenses recorded on books this year not		against book income ti	-		
deducted on this return (Itemize):		a Depreciation	\$		
a Depreciation \$	*	b Charitable contributions	\$		
b contributions \$					
Travel and \$ sentertainment \$					
		9 Add lines 7 and 8			
6 Add lines 1 through 5	. 0 .	1.10 Income (page 1-line 2)	8) - line 6 less line 0	Λ.	
Schedule M-2 Analysis of Unap	propriated Retained	Earnings per Books	s (Line 25, Schedul	e L) managati teranga	
1 Balance at beginning of year		∫ 5 Distributions:∵ a : Ca:	sh ::	:	
2 Net income (loss) per books	0.	in in a second by Sto	ock		
3 Other increases (itemize):		c Pro	operty"		
		6 Other decreases (itemi	ze):		
		•			
		7 Add lines 5 and 6	***************************************		
4 Add lines 1, 2, and 3	0.	Balance at end of year	(line 4 less line 7)	0.	
111631 2-18-13 JWA	n .	A CARAGO BARRANTA DE LA CARAGO BARRANTA DE LA CARAGO BARRANTA DE LA CARAGO BARRANTA DE LA CARAGO BARRANTA DE L Carago de la Carago Barranta de La Carago Barranta de La Carago Barranta de La Carago Barranta de La Carago Ba		Form 1120 (2013)	

Form 1125-A

(Rev. December 2012)

Cost of Goods Sold

Attach to Form 1120, 1120-C, 1120-F, 1120S, 1065, or 1065-B.

OMB No. 1545-2225

Department of the Treasury Internal Revenue Service ▶ Information about Form 1125-A and its instructions is at www.irs.gov/form1125a.

IN THE HOMESTEAD AT SNOWMASS ASSOCIATION	- 1	employer identification number
C/O SNOWMASS LODGING COMPANY		
1 Inventory at beginning of year	1	
2 Purchases	2	
3 Cost of labor	3	
4 Additional section 263A costs (attach schedule)	4	
5 Other costs (attach schedule) SEE STATEMENT 3	5	229,261.
3 Total. Add lines 1 through 5	6	229,261.
7 Inventory at end of year	7	
3 Cost of goods sold. Subtract line 7 from line 6. Enter here and on Form 1120, page 1, line 2 or the		
appropriate line of your tax return (see instructions)	8	229,261.
(i) ☐ Cost (ii) ☐ Lower of cost or market (iii) ☐ Other (Specify method used and attach explanation) ▶		
b Check if there was a writedown of subnormal goods	·	▶ 🔲
c Check if the LIFO inventory method was adopted this tax year for any goods (if checked, attach Form 970)		▶ □
d If the LIFO inventory method was used for this tax year, enter amount of closing inventory computed under LIFO	9d	
e If property is produced or acquired for resale, do the rules of Section 263A apply to the corporation?		Yes 💢 No
f Was there any change in determining quantities, cost, or valuations between opening and closing inventory?		Yes X No
or Panerwork Reduction Act Notice, see senarate instructions		Form 1125-A (Rev. 12-2012)



FORM 1120		OTHER DEDUCTION	ទេ	STATEMENT	1
DESCRIPTION	N			AMOUNT	
ADMINISTRA	TIVE FEES			. !	84.
TOTAL TO F	ORM 1120, LINE 26				84.
	NET	OPERATING LOSS DE	EDUCTION	STATEMENT	 2
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR	
12/31/06 12/31/08 12/31/09	23. 589. 127.	23. 47.	0. 542. 127.	0. 542. 127.	
NOL AVAILA	BLE THIS YEAR		669.	669.	:
FORM 1125-	A	OTHER COSTS	· · · · · · · · · · · · · · · · · · ·	STATEMENT	3
DESCRIPTIO	N		engage de la companya de la companya de la companya de la companya de la companya de la companya de la companya	AMOUNT	
ADMINISTRA MAINTENANC UTILITIES	TIVE EXPENSES E EXPENSES		en en en en en en en en en en en en en e	51,1 108,1 69,9	59.
TOTAL TO L	INE 5			229,2	61.

Form **8879-C**

IRS e-file Signature Authorization for Form 1120

OMB No.	1545-1864
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Department	oſ	the	Treasury
Internal Day	nnı	10 6	Condoo

For calendar year 2013, or lax year beginning ______ , 2013, ending _____

2013

Form 8879-C (2013)

Name of corporation THE HOMESTEAD AT SNOWMASS ASSOCIATION Emp

C/O SNOWMASS LODGING COMPANY

Employer identification number

 Part I
 Tax Return Information (Whole dollars only)

 1 Total income (Form 1120, line 11)
 1
 84.

 2 Taxable income (Form 1120, line 30)
 2

 3 Total tax (Form 1120, line 31)
 3

 4 Amount owed (Form 1120, line 34)
 4

 5 Overpayment (Form 1120, line 35)
 5

Part II Declaration and Signature Authorization of Officer (Be sure to get a copy of the corporation's return)
Under penalties of perjury, I declare that I am an officer of the above corporation and that I have examined a copy of the corporation's 2013 electronic

Under penalties of perjury, I declare that I am an officer of the above corporation and that I have examined a copy of the corporation's 2013 electronic income tax return and accompanying schedules and statements and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts shown on the copy of the corporation's electronic income tax return. I consent to allow my electronic return originator (ERO), transmitter, or intermediate service provider to send the corporation's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the corporation's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the corporation's electronic income tax return and, if applicable, the corporation's consent to electronic funds withdrawal.

Officer's PIN: check one box only

For Paperwork Reduction Act Notice, see instructions.

X lauthorize REESE HENRY & COMPA	ANY, INC.	to enter my PIN	81611
as my signature on the corporation's 2013 electro	ERO firm name onically filed income tax return.		do not enter all zeros
As an officer of the corporation, I will enter my PIN		n's 2013 electronically filed income	tax return.
Officer's signature >	Date >	Title ▶ PRESIDENT	784-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1
Part III Certification and Authentication			
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your		do not enter all zeros	
I certify that the above numeric entry is my PIN, which is my above. I confirm that I am submitting this return in accordan and Pub. 4163, Modernized e File (MeF) Information for Autl	ce with the requirements of Pub. 3	112. IRS e-file Application and Parti	poration indicated cipation,
ERO's signature >		Date ▶	
	Retain This Form - See Ins Form to the IRS Unless Re		

LHA

Form 112 (08/13/13) COLORADO DEPARTMENT OF REVENUE Denver, CO 80261-0006 (0023)

Colorado C Corporation Income Tax Form 112

Do not submit federal return, forms or schedules when filing this return.

2013

-or-

130112 11019

Fiscal Year Beginning (MM/DD) Year Ending (MM/DD/YYYY)	11.7	130112	11019
01/01 2013 12/31/20 Name of Corporation THE HOMESTEAD AT SNOWMASS		Colorado Account Nu	mber
C/O SNOWMASS LODGING COMPANY	•		
Address		FEIN	
PO BOX 6077		Stat	HT TIME
SNOWMASS VILLAGE		CC	
	mitting a statement disclo saction, mark this box	sing a listed or	•
• A. Apportionment of Income. This return is being filed for:			
X (42) A corporation not apportioning income;		A corporation electing to pay a tax Colorado sales;	on its gross
A corporation engaged in interstate business (43) apportioning Income using single-factor apportionment (Schedule SF required);		A corporation claiming an exempt P.L. 86-272;	ion under
(44) A corporation engaged in interstate business apportioning income using special regulation (Schedule SF required);	. (47)	Other appointment method, must by the department (fill in below)	be pre-approved
B. Separate/Consolidate/Combined Filing. This return is being filed for:		1	
A single corporation filing a separate return; An affiliated group of corporations electing to file a consolidated return. Warning: such election is binding for four years. If your election was made in a prior year, enter the year of election in line below. (Schedule C required);	return (S An affilia return th	ted group of corporations required Schedule C required.); ted group of corporations required tat includes another affiliated, consider C required.)	i to file a combined
Enter the year of election (YYYY)	- (condu		
Federal Taxable Income		Roun	i to the nearest dollar
4 5 1 H albit 4 5 1 H 4 100 200 7			0 00
1. Federal taxable income from Federal form 1120 or 990-T		• 1	0 00
2. Federal taxable income of companies not included in this return		9 2	0 00
Net federal taxable income, line 1 minus line 2 Additions		3	0 00
4. Federal net operating loss deduction	i a seriestiski	entodina kara in 1800 inta 🌘 🛊	00
5. Colorado income tax deduction		. art apart as Table as to	00
6. Other additions, include explanation			00
7. Total of lines 3 through 6	engran and	tor word 4t 7	0 00

Form 112 THE HOMESTEAD AT SNOWMASS ASSOCIATI





Subtractions		
8. Exempt federal interest	▶ 8	00
9. Excludable foreign source income	• g	00
10. Colorado source capital gain (assets acquired on or after 5/9/94, held five years)	• 10	00
11. Other subtractions, include explanation	• 11	00
12. Total of lines 8 through 11	12	0 00
Taxable Income		
13. Modified federal taxable income, line 7 minus line 12	13	0 00
14. Colorado laxable income before net operating loss deduction		
	<u> </u>	0 00
15. Colorado net operating loss deduction (May not exceed \$250,000)	• 15	00
16. Colorado laxable income, line 14 minus line 15	16	0 00
17. Tax, 4.63% of the amount on line 16		
Credits	• 17	0 00
18. Total nonrefundable credits from line 22, Form 112CR (may not exceed tax on line 17)		
	• 18	00
	• 19	00
20. Net tax, line 17 minus lines 18 and 19	20	0 00
21. Recapture of prior year credits		
	21	00
22. Total of lines 20 and 21	22	0 00
23. Estimated tax and extension payments and credits	23	0 00
24. W-2G Withholding from lottery winnings	24	20
	24	00
25. Innovative Motor Vehicle Credit from line 36 form DR 0617	25	00
26. Authorized Instream Flow Incentive Credit	26	00
27. Total of lines 23 through 26	27	00
	£. [
28. Net lax due. Subtract line 27 from line 22	28	00
	29	00
30. Interest	30	00
21 Entimated to a populity due		
	31	00
32. Total due. Enter the sum of lines 28 through 31	32	0 00

Do Not Submit Federal Return, Forms or Schedules when Filing this Returnment. Forms or Schedules

Form 112

THE HOMESTEAD AT SNOWMASS ASSOCIATI





					T	
33. Overpayment, line 27 minus line 22				33		00
34. Amount from line 33 to carry forward for future year	estimated lax			● 34		00
35. Amount from line 33 to be refunded		Radiana katalon de l'architectura de l'architect		• 35		00
Direct Routing Number			Type:	Checking	Savings	
Deposit Account Number						
Pay electronically at www.Colorado.gov/RevenueOnlir Mail and Make Checks Payable to; Colorado Departmer						
Denver, CO 80261-0 The State may convert your check to a one time electronic If converted, your check will not be returned. If your check directly from your bank account electronically.	006 banking transaction. You is rejected due to insuffic	r bank account m ient or uncollecte	ay be debited as earl d funds, the Departn	y as the same day re lent of Revenue may	eceived by y collect th	the State. e payment
C. The corporation's books are in care of:						
Last Name	First Name		Middle Ini		nber 9 2 2 – 4	0 = 0
GEORGE Address	MIKE City			970-3 State		
425 WOOD ROAD	, ,	SS VILLA	GE	CC	- 1	615
D. Business code number per federal return (NAICS)		E. Year corpo	ration began doing b	usiness in Colorado)	
• 813000			1988		4400	
F. May the Colorado Department of Revenue discuss this return with the paid preparer shown below (see instruc	tions)	• •	• X Yes	No		
G. Kind of business in detail CONDO ASSOC				- 1		
H. Has the Internal Revenue Service made any adjustmen corporation's income or tax or have you filed amended tax returns at any time during the last four years?			• Yes	No		
If yes, for which year(s)? (YYYY)						
Did you file amended Colorado returns to reflect such cha submit copies of the Federal Agent's reports?	nges or		Yes	No No		
Last Name of person or firm preparing return URGENS CPA	First na	me ENISE				Middle Initial
Address of person or firm preparing return	UITE 2			Phone Number • (970)		3771
City ASPEN					State CO	ZIP • 81611
Under penalties of perjury in the second degree, I declare knowledge is true, correct and complete. Declaration of prwhich preparer has any knowledge.					4	
Signature and Title of Officer PRESIDENT	Maria Paril 150	Card Card	(*************************************	Date (MM/DD/YY	2/4/	14

DR 8453C (10/17/13) COLORADO DEPARTMENT OF REVENUE Denver, CO 80261-0006 www.TaxColorado.com



State of Colorado Corporate Income Tax Declaration for Electronic Filing

When feasible attach in PDF format to your e-filed return **Do not mail** this form to the IRS or the Colorado Department of Revenue

Do not mail this form to the moo	i lile Ook	JIAUU De	•						
Retain with your records			Tax Year Beginning (MM/DD/YY) 01/01/13				Tax Year End (MM/DD/YY) 12/31/13		
Last Name THE HOMESTEAD AT SNOWMASS	First Name		Middle Initial			itial			
Address PO BOX 6077							FEIN		
City SNOWMASS VILLAGE			State CO	ZIP 816	15		Phone Number 970-923-3232		
Part I - Tax Return Information									
1. Total Income, from federal Form 1120							\$ 84		
2. Federal Taxable Income from federal Form 1120						2	\$		
3. Colorado Tax, line 17 on Colorado Form 112						3	\$		
4. Colorado Payments, line 23 on Colorado Form 1	12					4	\$		
5. Amount You Owe, line 32 on Colorado Form 112	2					5	\$		
6. Refund, line 35 Colorado Form 112						6	\$		
Part II - Declaration of Tax Payer									
amounts shown in Part I above agree with the amount returns, statements, schedules and attachments army Electronic Return Originator (ERO) if applicable) schedules and attachments upon request by the Originitations.	e true, correct may be requir	and compled to provid	ete to the be e paper copi	st of my knov ies of this dec	vledge and daration, m	beli ıy ret	ef. I understand that I (or turns, withholding statements,		
Signature		Date (мм/о	D/YY)	Title					
				PRESIDENT					
	- Declarati)/Prepare	r/Transmi	tter		WWW.		
If the transmitter did not prepare the tax return, che	ck here	[X]							
If I am not the preparer, I declare only that the amout Colorado income tax returns. If I am the preparer, u Colorado income tax returns and that the information amounts shown on said tax returns, and that said to best of my knowledge and belief. As preparer, I furthave provided the taxpayer with copies of all forms covered by the Colorado statute of limitations, and and attachments upon request by the Colorado Departments.	nder penalties on provided to ax returns, sta her declare th and informatic to provide pap	of perjury I me by the t tements, so at I have obl on filed. I als per copies o	declare that axpayer and hedules, and the tained the tained to magree to mag	I have review the amounts I attachments xpayer's sign aintain this si tion, said ret	ed the abo shown in F are true, c ature on thi gned Form urns, withho	ove ta Part corre is fo is (DF oldin	axpayer's 2013 Federal/ I above agree with the act, and complete to the arm at the time of filing and a 8453C) for the period and a statements, schedules		
340151 10-30-13					,				
ERO's Signature			er en 1. Tara di 1.			Pr	Preparer Identification Number or Your SSN		
Check if also Preparer X			Date (MM/dd/yŸ)/scarer 1 💢 1		P00087338				