

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

2008

Department of the Treasury
Internal Revenue Service

▶ See separate instructions.

For calendar year 2008 or tax year beginning _____, 2008, and ending _____, 20

Use IRS label. Other- wise, print or type.	Name WELLINGTON VILLAGE OWNERS ASSOCIATION, INC.	Employer identification number 20 3971523
	Number, street, and room or suite no. If a P.O. box, see instructions. 520 N 71ST AVENUE	Date association formed 12/28/2005
	City or town, state, and ZIP code GREELEY, CO 80634	

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	24050	00
C Total expenditures made for purposes described in 90% expenditure test (see instructions)	C	73411	00
D Association's total expenditures for the tax year (see instructions)	D	88215	00
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	32	00
3 Gross rents	3	4854	00
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 schedule)	7		
8 Gross income (excluding exempt function income). Add lines 1 through 7	8	4886	00

Deductions (directly connected to the production of gross income, excluding exempt function income)

9 Salaries and wages	9		
10 Repairs and maintenance	10	14804	00
11 Rents	11		
12 Taxes and licenses	12		
13 Interest	13		
14 Depreciation (attach Form 4562)	14		
15 Other deductions (attach schedule)	15		
16 Total deductions. Add lines 9 through 15	16	14804	00
17 Taxable income before specific deduction of \$100. Subtract line 16 from line 8	17		00
18 Specific deduction of \$100	18	\$100	00

Tax and Payments

19 Taxable income. 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 Total tax. Subtract line 21 from line 20. See instructions for recapture of certain credits.	22		
23 Payments: a 2007 overpayment credited to 2008	23a		
b 2008 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 paid on fuels (attach Form 4136)	23f		
g Add lines 23c through 23f	23g		
24 Amount owed. Subtract line 23g from line 22 (see instructions)	24		
25 Overpayment. Subtract line 22 from line 23g	25		
26 Enter amount of line 25 you want: Credited to 2009 estimated tax ▶ Refunded ▶	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

Signature of officer: *[Signature]* Date: **4/27/09** Title: **PRESIDENT**

May the IRS discuss this return with the preparer shown below (see instructions)? Yes No

Paid Preparer's Use Only	Preparer's signature: <i>[Signature]</i>	Date: 4/27/09	Check if self-employed <input type="checkbox"/>	Preparer's SSN or PTIN: P00356703
	Firm's name (or yours if self-employed), address, and ZIP code: BRUCE J LICHTENBERGER, CPA P.C. 7257 W 4TH STREET, SUITE 1, GREELEY, CO 80634	EIN: 84 1379187	Phone no.: (970) 353-2949	

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

2007

Department of the Treasury
Internal Revenue Service

For calendar year 2007 or tax year beginning _____, 2007, and ending _____, 20

Use IRS label. Other- wise, print or type.	Name WELLINGTON VILLAGE OWNERS ASSOCIATION, INC.	Employer identification number (see page 5) 20 3971523
	Number, street, and room or suite no. (If a P.O. box, see page 5.) 520 N 71ST AVENUE	Date association formed 12/28/2005
	City or town, state, and ZIP code GREELEY, CO 80634	

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	30847	00
C Total expenditures made for purposes described in 90% expenditure test (see instructions)	C	25291	00
D Association's total expenditures for the tax year (see instructions)	D	25579	00
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	72	00
3 Gross rents	3	355	00
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 schedule)	7		
8 Gross income (excluding exempt function income). Add lines 1 through 7	8	427	00

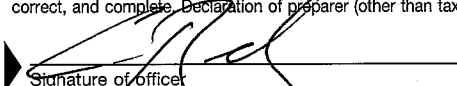
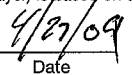
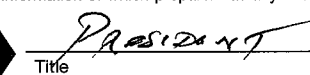
Deductions (directly connected to the production of gross income, excluding exempt function income)

9 Salaries and wages	9		
10 Repairs and maintenance	10	288	00
11 Rents	11		
12 Taxes and licenses	12		
13 Interest	13		
14 Depreciation (attach Form 4562)	14		
15 Other deductions (attach schedule)	15		
16 Total deductions. Add lines 9 through 15	16		
17 Taxable income before specific deduction of \$100. Subtract line 16 from line 8	17	139	00
18 Specific deduction of \$100	18	\$100	00

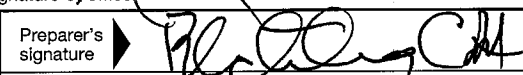
Tax and Payments

19 Taxable income. Subtract line 18 from line 17	19	39	00
20 Enter 30% of line 19. (Timeshare associations, enter 32% of line 19.)	20	12	00
21 Tax credits (see instructions)	21		
22 Total tax. Subtract line 21 from line 20. See instructions for recapture of certain credits.	22	12	00
23 Payments: a 2006 overpayment credited to 2007	23a		
b 2007 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 Amount owed. Subtract line 23g from line 22 (see instructions)	24	12	00
25 Overpayment. Subtract line 22 from line 23g	25		
26 Enter amount of line 25 you want: Credited to 2008 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/>	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  **Signature of Officer**  **Date**  **Title**

May the IRS discuss this return with the preparer shown below (see instructions)? Yes No

Paid Preparer's Use Only	Preparer's signature 	Date 4/27/09	Check if self-employed <input type="checkbox"/>	Preparer's SSN or PTIN P00356703
	Firm's name (or yours if self-employed), address, and ZIP code BRUCE J. LICHTENBERGER, CPA, P.C. 7257 W. 4TH STREET, GREELEY, CO 80634	EIN 84 1379187	Phone no. (970) 353-2949	

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

2006

Department of the Treasury
Internal Revenue Service

For calendar year 2006 or tax year beginning _____, 2006, and ending _____, 20

Use IRS label. Other- wise, print or type.	Name WELLINGTON VILLAGE OWNERS ASSOCIATION, INC.	Employer identification number (see page 5) 20 3971523
	Number, street, and room or suite no. (If a P.O. box, see page 5.) 520 N 71ST AVENUE	Date association formed 12/28/2005
	City or town, state, and ZIP code GREELEY, CO 80634	

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	5896	00
C Total expenditures made for purposes described in 90% expenditure test (see instructions)	C	4447	00
D Association's total expenditures for the tax year (see instructions)	D	4447	00
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	6	00
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 schedule)	7		
8 Gross income (excluding exempt function income). Add lines 1 through 7	8	6	00

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 Total deductions. Add lines 9 through 15	16		
17 Taxable income before specific deduction of \$100. Subtract line 16 from line 8	17	6	00
18 Specific deduction of \$100	18	\$100	00

Tax and Payments

19 Taxable income. Subtract line 18 from line 17	19		00
20 Enter 30% of line 19. (Timeshare associations, enter 32% of line 19.)	20		
21 Tax credits (see instructions)	21		
22 Total tax. Subtract line 21 from line 20. See instructions for recapture of certain credits.	22		
23 Payments: a 2005 overpayment credited to 2006	23a		
b 2006 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 Credit for federal telephone excise tax paid (attach Form 8913)	23g		
h Add lines 23c through 23g	23h		
24 Amount owed. Subtract line 23h from line 22. See instructions for depository method of tax payment	24		
25 Overpayment. Subtract line 22 from line 23h	25		
26 Enter amount of line 25 you want: Credited to 2007 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/>	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

Signature of officer: *[Signature]* Date: **4/27/09** Title: *[Signature]*

May the IRS discuss this return with the preparer shown below (see instructions)? Yes No

Paid Preparer's Use Only	Preparer's signature: <i>[Signature]</i> Date: 4/27/09	Check if self-employed <input type="checkbox"/>	Preparer's SSN or PTIN: P00356703
	Firm's name (or yours if self-employed), address, and ZIP code: BRUCE J LIGHTENBERGER, CPA 7257 W 4TH STREET, SUITE 1, GREELEY, CO 80634	EIN 84 1379187	Phone no. (970) 353-2949