Caution: Forms printed from within Adobe Acrobat products may not meet IRS or state taxing agency specifications. When using Acrobat 5.x products, uncheck the "Shrink oversized pages to paper size" and uncheck the "Expand small pages to paper size" options, in the Adobe "Print" dialog. When using Acrobat 6.x and later products versions, select "None" in the "Page Scaling" selection box in the Adobe "Print" dialog.

2010 Tax Return(s)

Prepared for HUGUENOT HUNDRED COMMUNITY ASSOCIATION

c/o PETER STECH

Client Code: 45Huguent100

Account Number 790466
Release Number 2010.02041

Prepared by CHERRY, BEKAERT and HOLLAND, LLP

200 SOUTH 10TH STREET, SUITE 900

RICHMOND, VA

23219

804-673-4224

Processing Date: 02/09/2011

Time: 16:46:00

Special Instructions

Messages

****RETURN CONTAINS A WARNING DIAGNOSTIC****

Federal and State Returns signed and mailed February 11, 2011 Peter R. Stech. Treasurer

000071 05-01-10

Return Information

WARNING

- Balance Sheet. The beginning balance sheet is out of balance by \$10,751. (10132)
- Balance Sheet. The ending balance sheet is out of balance by \$11,634. (10133)

INFORMATIONAL

Virginia. The Virginia Form 500ES has not been calculated because the estimated tax liability is \$1,000 or less. If you prefer that estimates print, choose Payments/Penalties worksheet / Estimates and Application of Overpayment / State Estimates and Application of Overpayment / Estimate Code = Mandatory estimate. (34650)

2010 Return Summary

HUGUENOT HUNDRED COMMUNITY ASSOCIATION c/o PETER STECH	!	54-1606438
	Federal	Virginia
Taxable Income before NOL & Special Ded. Special Deductions Taxable Income Total Tax	50. 100. <50.> 0.	<50.> 0. <50.> 0.
Additional Information:		
Net Income Per Books Unappropriated Retained Earnings	883. 11,634.	



200 South 10th Street – Suite 900 Richmond, Virginia 23219 phone 804.673.4224 fax 804.673.4290

February 9, 2011

HUGUENOT HUNDRED COMMUNITY ASSOCIATION C/O PETER STECH 3941 DARBY DRIVE MIDLOTHIAN, VA 23113

HUGUENOT HUNDRED COMMUNITY ASSOCIATION:

Enclosed are the original and one copy of your 2010 corporate tax returns, as follows...

2010 FEDERAL HOMEOWNERS ASSOCIATION TAX RETURN

2010 VIRGINIA CORPORATION INCOME TAX RETURN

Each original return should be dated, signed and filed in accordance with the filing instructions. Copies of each return should be retained for your files.

Very truly yours,

Cherry, Bekaert & Holland, L.L.P.

2010 TAX RETURN FILING INSTRUCTIONS

U.S. HOMEOWNERS ASSOCIATION INCOME TAX RETURN

FOR THE YEAR ENDING

December 31, 2010

Prepared for	HUGUENOT HUNDRED COMMUNITY ASSOCIATION c/o PETER STECH 3941 DARBY DRIVE MIDLOTHIAN, VA 23113
Prepared by	CHERRY, BEKAERT and HOLLAND, LLP 200 SOUTH 10TH STREET, SUITE 900 RICHMOND, VA 23219
To be signed and dated by	The appropriate corporate officer(s).
Amount of tax	Total tax \$ 0 Less: payments and credits \$ 0 Plus: other amount \$ 0 Plus: interest and penalties \$ 0 No pmt required \$
Overpayment	Credited to your estimated tax \$ 0 Other amount \$ 0 Refunded to you \$ 0
Make check payable to	Not applicable
Mail tax return and check (if applicable) to	Department of the Treasury Internal Revenue Service Center Cincinnati, OH 45999-0012
Return must be mailed on or before	March 15, 2011
Special Instructions	

CARRYOVER DATA TO NEXT YEAR

Name HUGUENOT HUNDRED COMMUNITY ASSOCIATION C/O PETER STECH	Employer Identification Number 54-1606438	
Based on the information provided with this return, the following are possible carryover amounts to next year.	•	
Section 277 Carryover	4,50)4.
2000201 2.77 0022,0.02		
		—

1120		Works for S	heet for F Small Corp	iguring the Grooration Exem	oss Receipt pt from the	s Tests AMT	
Name	HUGUENOT	HUNDRED	COMMUN	ITY ASSOC	IATION c	Federal ID Number	54-1606438
				Gross Receip if Short Year		umber of Months if Short Year	Annual Gross Receipts
For tax year 2007			<u> </u>				4,601.
						<u></u>	3,016.
							<2,702.>
\$7,500,000 Gross	\$7,500,000 Gross Receipts Test for the Prior 3-Tax-Year Period						
Annual gross rec	eipts:						
FOR TAX Y			<u> </u>	4,	501. 016.		
FOR TAX Y			· · · · <u> </u>				
FOR TAX Y	EAR 2009		<u> </u>	<2,	702.>		
Total annual gross							1 620
Average annual gr	ross receipts					(A	1,638.
\$5,000,000 Gross	s Receipts Test f	or the Prior Tax	Year (2009)				
Annual gross rec	eipts:						
Average annual gr	ross receipts					(B	3)
The corporation							
1. It was treate	ed as a small corp	ooration exempt	from the AMT	for all prior tax yea	ars and		
2. (A) Its avera	age annual gross	receipts for the	prior 3-tax-yea	ar period did not ex	ceed \$7.5 millio	n or	
(B) Its annu	ıal gross receipts	for the prior tax	year (if the co	rporation had only	1 prior tax year	did not exceed \$5 mill	lion.

Form 1120-H Department of the Treasury Internal Revenue Service

U.S. Income Tax Return for Homeowners Associations

OMB No.	1545-0127
---------	-----------

2010

For ca	alenda	r year 2010 or tax year beginning , and ending			
T.,		Name HUGUENOT HUNDRED COMMUNITY ASSOCIATION	Employer iden	tification r	number
Use IRS		c/o PETER STECH			
lab	el.	Number, street, and room or suite no. If a P.O. box, see instructions.	54-160	6438	
Oth wis	ier- se	3941 DARBY DRIVE	Date associatio	n formed	_
prii	nt	City or town, state, and ZIP code			
ort	type.	MIDLOTHIAN, VA 23113	06/08/	1978	
Check	< if: ('	1) Final return (2) Name change (3) Address change	(4)	Amer	nded return
A	Chec	k type of homeowners association: Condominium management association X Resider	itial real estate associ	ation	Timeshare association
В		exempt function income. Must meet 60% gross income test See Stater			3,265.
C		expenditures made for purposes described in 90% expenditure test See States			2,432.
D		ciation's total expenditures for the tax year			2,440.
Ε		exempt interest received or accrued during the tax year			0.
		Gross Income (excluding exempt function inco			
1	Divid	lends	•	1	
2	Taxa	ble interest See Stater	ment 3	2	58.
3		s rents			_
4		s royalties			
5		tal gain net income (attach Schedule D (Form 1120))			
6	Net o	pain or (loss) from Form 4797, Part II, line 17 (attach Form 4797)		6	
7		r income (excluding exempt function income) (attach schedule)			
8		is income (excluding exempt function income). Add lines 1 through 7			58.
<u> </u>	uios	Deductions (directly connected to the production of gross income, exclude			
9	Salar	ries and wages			
10		irs and maintenance			
11		S			
12				•	
13		s and licenses		. —	
		est (Attack Form 4500)		. —	
14	Debi	reciation (attach Form 4562)	mont 1	14	8.
15	Otne	r deductions (attach schedule) See Stater	Henr 4	. 15	8.
16	Tota	I deductions. Add lines 9 through 15		. 16	
17		ble income before specific deduction of \$100. Subtract line 16 from line 8			50.
18	Spec	ific deduction of \$100		. 18	\$100.00
	_	Tax and Payments		1 40 1	<u></u>
19	laxa	able income. Subtract line 18 from line 17		19	<50.>
20		r 30% of line 19. (Timeshare associations, enter 32% of line 19.)			0.
21	lax	credits		21	
22		I tax. Subtract line 21 from line 20. See instructions for recapture of certain credits		. 22	0.
23		009 overpayment credited to 2010 23a			
		010 estimated tax payments 23b c Total ▶ 23c	C	<u>'-</u>	
		ax deposited with Form 7004 23d			
		redit for tax paid on undistributed capital gains (attach Form 2439)			
		redit for federal tax paid on fuels (attach Form 4136)			
		dd lines 23c through 23f			0.
24		unt owed. Subtract line 23g from line 22 (see instructions)			
25	0ver	payment. Subtract line 22 from line 23g		. 25	
26	Ente	r amount of line 25 you want: Credited to 2011 estimated tax	Refunded ▶	26	
		Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and staten and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information			
Sigr	,	and donor, it is add, correct, and complete. Decial address of preparet (union than taxpayer) is based off all filloffillation.	or willon preparer has all	y Miowieuge	return with the preparer
Her					shown below (see instr.)?
		Signature of officer Date Title			Yes No
		Print/Type preparer's name Preparer's signature Da		Check	PTIN
.		Aaron T. Ellison		f self- employed	□ 1200625297
Paid		Firm's name CHERRY, BEKAERT and HOLLAND, LLP	1,	Firm's EIN	
Prepa		200 SOUTH 10TH STREET, SUITE 900			
Use C	Only	Firm's address ► RICHMOND, VA 23219		Phone no.8	04-673-4224

Form 1120-H	Exempt Function Inco	ome	Statement	1
Description			Amount	
HOA Membership Dues			3,2	65.
Total to Form 1120-H,	Item B		3,2	65.
Form 1120-H	EXPENDITURES DESCRIBED IN	90% TEST	Statement	2
Description			Amount	
ALLOCABLE ADMINISTRATIV INSURANCE KEYS MAINTENANCE OTHER PORTOPOTTY RENTAL REAL ESTATE TAX	E		3	35. 00. 39. 17. 15. 29.
Total to Form 1120-H,	Item C		2,4	32.
Form 1120-H	Interest Income		Statement	3
Description		us	Other	
				58.
Total to Form 1120-H,	Line 2			58.
Form 1120-H	Other Deductions		Statement	4
Description			Amount	
ALLOCABLE ADMINISTRATIV	E EXPENSE			8.
Total to Form 1120-H,	Line 15			8.

2010 TAX RETURN FILING INSTRUCTIONS

VIRGINIA FORM 500

FOR THE YEAR ENDING

December 31, 2010

Prepared for	HUGUENOT HUNDRED COMMUNITY ASSOCIATION c/o PETER STECH 3941 DARBY DRIVE MIDLOTHIAN, VA 23113
Prepared by	CHERRY, BEKAERT and HOLLAND, LLP 200 SOUTH 10TH STREET, SUITE 900 RICHMOND, VA 23219
To be signed and dated by	The appropriate corporate officer(s).
Amount of tax	Total tax \$ 0.00 Less: payments and credits \$ 0.00 Plus: other amount \$ 0.00 Plus: interest and penalties \$ 0.00 No pmt required \$
Overpayment	Credited to your estimated tax \$ 0.00 Other amount \$ 0.00 Refunded to you \$ 0.00
Make check payable to	Not applicable
Mail tax return and check (if applicable) to	Virginia Dept. of Taxation P.O. Box 1500 Richmond, VA 23218-1500
Return must be mailed on or before	April 15, 2011
Special Instructions	

FORM 500

Department of Taxation P.O. Box 1500 Richmond, VA 23218-1500

2010 Virginia Corporation Income Tax Return



	CAL or								Official Use Only	
	ORT Year Filer: Beginnir			; Ending Date						
	parer's FEIN, PTIN or SSN		_	Short Year Return Change in Ac		-				
By	checking the box to to deral Employer ID Number	the right, I (we) authorize th	ne Departn	nent of Taxation to discuss this retu	rn with	the under	signe	d prepa	rer.	
	54-1606438						Che	ck if:		
_	me							7	File	
Initial File										
1 1						Change ng Address Char	200			
_	ysical Address	THCII					F	_	ig Address Char cal Address Cha	_
1	3941 DARBY	DRIVE						_ FilySi	cai Address Glia	iliye
	ysical City Or Town	<u> </u>						State	ZIP Code	
l	MIDLOTHIAN							VA	23113	
	ailing Address (if different fro	m Physical Address)					Entity	Type Code		
Cit	y or Town				State	ZIP Code			NAICS	
									531390	
Da	te Incorporated	State or Country of Incorporation		Description of Business Activity		-				
(06/08/1978	VIRGINIA								
	Check Applicable	Povos	Final R	oturn		Tolocomi	muni	nations	Company	
	Check Applicable	Doxes	rillai N	eturri		relecomi	mum	Jalions	Company	
	Consolidated	I - Sch 500AC Attached	☐ Fir	nal Return - Check here and other	E	nter amo	unt fr	om Form	500T, Line 7:	
	Combined - S	Sch 500AC Attached	ар	plicable boxes below.					.00)
	Change in Fil	ing Status	☐ Wi	thdrawn		Noncorpor	ate T	elecomn	nunications	
		ch 500A Attached	Di:	ssolved-No longer liable for tax		Company:				
	Schedule 500			ssolved Date		mount fro				1
		AD Attaoned		erged	• ~	inount ne	,,,,,	0001	.00	<u>,</u>
				<u> </u>		Electric S	Suppl	ier Com		<u>, </u>
				erged Date						44.
				erged FEIN #	- 5	nter amo	unt fr	om Scn	500EL, Line 7 or	
				Corp Election					.00	<u>) </u>
	Amended Return			Amended Return - Check here a		None		doblo o	Refundable	
		and Cahadula FOOAD I			ına				Retundable	
		and Schedule 500ADJ. on of changes to income		other applicable boxes.				ange	01	
	and modifications.	on or onanges to moonie		Federal Audit - Attach					Changes 	
				copy of IRS final determination				oss Carr	-	
		FORM TO CARRYBACK OSS. File Form 500NOLE		Schedule 500A Changes		└── Othe	er-Att	ach Exp	lanation	
⊢	NET OPERATING E	.033. File Form 300NOLL	,	Schedule 500ADJ Changes						
	Questions and Re	lated Information								
							_			
A				n or a related individual or other rela						
	related to intangible	property (patents, tradem		rights and similar intangible propert						
				Enter Exception amount from Sch	edule 8	500AB, Li	ne 8			.00
1				d from Form 306, Line 11						.00
C			•	ng federal taxable income on the	(1)	Year of lo	oss			
	U.S. Corporation Inc	come Tax Return, provide t	he request	ted information. If NOL results from						
	merger, enter below	the FEIN of company gen	erating NO	L prior to merger date.	(3)	Percent	of fec	leral		
	FEIN					NOL use	ed this	year		%
1	(If there are NOL's for	or more than one year, atta	ich a sche	dule)						
D	If Pass-Through Enti	ity Withholding is claimed,	enter the r	number of Schedule						
1	VK-1's and complete	e and attach Schedule 500	ADJ, Page	2.						
E	Has your federal inc	ome tax liability been rede	termined w	ith the IRS and finalized for any price	or year(s) that		Yea	ar(s)	
1	has not previously b	een reported to the Viraini	a Departm	ent of Taxation? If Yes, provide the	years.					
F	Location of the Corp			71	-					
1										
1	Contact for Corpora	ation's books		Contact	Telepho	one Numb	er			

2010 Virginia Form 500

Federal Employer ID Number $\ \underline{54-1606}438$

Page 2



CC	

1	Federal taxable income (from attached federal return)	1	-50 _{.00}
	Total Additions from Schedule 500ADJ, Section A, Line 7		.00
	Total (add Lines 1 and 2)		-50 _{.00}
	Total Subtractions from Schedule 500ADJ, Section B, Line 10		.00
5			-50 _{.00}
_	Balance (subtract Line 4 from Line 3) Savings and Loan Association's Bad Debt Deduction (see Instructions)		
6			
′	Virginia Taxable Income (subtract Line 6 from Line 5)	·········· ′ 	30.00
T	AX COMPUTATION		
8	Multistate Corporation - If business conducted within and without Virginia (Multistate Corporation), attack	ch	
Ī	Schedule 500A and complete Lines 8(a) through 8(d). If entire business conducted in Virginia, skip to Line		
	(a) Income subject to Virginia tax from Schedule 500A, Line 16		.00
	(b) Apportionment factor from Schedule 500A, Line 2, 3, 4, 5 or 10		<u></u> %
	(c) Nonapportionable investment function income from Schedule 500A, Line 12(b)		
	(d) Nonapportionable investment function loss from Schedule 500A, Line 12(d)	8(d)	.00
9	Income tax (6% of Line 7 or 6% of Line 8(a))	9	0.00
	AYMENTS AND CREDITS		
Ρ/	ATMENTS AND CREDITS		
10	Nonrefundable Tax Credits: Enter the amount from Schedule 500CR, Line 101	10	.00
11	Adjusted Corporate Tax (subtract Line 10 from Line 9)	11	.00
12	2010 estimated Virginia income tax payments and overpayment credit from 2009	12	.00
13	Extension payment	13	.00
	Refundable Tax Credits from Schedule 500CR, Line 107		.00
	Pass-Through Entity total withholding from Schedule 500ADJ, Section D		.00
	Total payments and credits (add Lines 12 through 15)		.00
RI	EFUND OR TAX DUE		
17	Tax owed (if Line 11 is greater than Line 16, subtract Line 16 from Line 11)	17	.00
	Penalty (see Instructions)		.00
	Interest (see Instructions)		.00
	Additional charge from Form 500C, Line 17 (attach Form 500C)		.00
	Total due (add Lines 17 through 20). Attach Form 500V with payment or if paid by EFT, check this box:		.00
	Overpayment (if Line 16 is greater than Line 11, subtract Line 11 from Line 16)		.00
	Amount to be credited to 2011 estimated tax		.00
24	Amount to be refunded (subtract Line 23 from Line 22)	24	.00
Ma	il this return to the Virginia Department of Taxation, P.O. Box 1500, Richmond, Virginia 23218-1500 on or before the	e fifteenth day of the fou	rth month (15th dav
of t	the sixth month for nonprofit corporations) following the close of the taxable year. Make checks payable to the Virgin	ia Department of Taxati	on.
	e undersigned president, vice-president, treasurer, assistant treasurer, chief accounting officer, or other officer duly authorized to act, of the co penalties provided by law that this return (including any accompanying schedules and statements) has been examined by me and is, to the be		
com	plete return, made in good faith, for the taxable year stated, pursuant to the income tax laws of the Commonwealth of Virginia. If prepared by a		
on a	all information of which they have any knowledge.		
_	(Date) (Signature of officer)	(Title)	
	CHERRY, BEKAER'	T and HOLLA	ND TITE
	200 SOUTH 10TH		•
	804-673-4224 RICHMOND, VA 2		71E 900
_	(Date) (Individual or firm, signature of preparer, and phone number)	(Address)	
Ann	roved Vendor Code 1019		

2010 Virginia Schedule 500FED

Schedule of Federal Line Items



Name as shown on Virginia return HUGUENOT HUNDRED COMMUNITY ASSOCIATION Federal Employer ID Number 54-1606438

Ivalité às shown on virginia retuin	inployer ib realiber	
Form 1120-Deductions and Taxable Income		
Domestic Production Activities Deduction	1 <u> </u>	.00
Federal Taxable income before NOL and Special Deductions	2	
3. Net operating loss deduction		.00
4. Special Deductions		.00
5. Federal Taxable Income after NOL and Special Deductions	5	-50 _{.00}
Form 1120, Schedule C-Dividends and Special Deductions		
6. Subpart F Income	6	.00
7. Foreign dividend gross-up		
Form 1120, Schedule K or M-3		
8. Tax exempt interest	8	.00
Form 5884		_
Salaries and Wages not deducted due to the WOTC	9	.00
Form 4562-Special Depreciation Allowance and Other Depreciation		
10. Special depreciation allowance for qualified property placed in service during the		
tax year	10	.00
11. Property subject to 168(f)(1) election	11	.00
12. Other depreciation	12	.00
Form 1118, Schedule A, Income or Loss Before Adjustments-Gross Income or Loss		
13. Total: Deemed Dividends (Exclude Gross-up)		
14. Total: Deemed Dividend (Gross-up)		
15. Total: Other Dividends (Exclude Gross-up)		
16. Total: Other Dividends (Gross-up)		
17. Total: Interest		
18. Total: Gross Rents, Royalties, and License Fees		
19. Total: Gross Income from Performance of Services		
20. Total: Other		
21. Total: Total Gross Income or Loss from Outside The US	21	.00.
Form 1118, Schedule A, Income or Loss Before Adjustments-Deductions		
22. Total: Definitely Allocable-Rental, Royalty, and Licensing Expenses-		
Depreciation, Depletion, and Amortization	22	.00
23. Total: Definitely Allocable-Rental, Royalty, and Licensing Expenses-	00	00
Other Expenses	23	.00
24. Total: Definitely Allocable-Expenses Related to Gross Income From	24	00
Performance of Services 25. Total: Definitely Allocable Other Definitely Allocable Deductions		
25. Total: Definitely Allocable Definitely Allocable Deductions26. Total: Total Definitely Allocable Deductions		
27. Total: Apportioned Share of Deductions Not Definitely Allocable		
28. Total: Net Operating Loss Deduction		
29. Total: Total Deductions	· · · · · · · · · · · · · · · · · · ·	
Form 1118, Schedule A, Income or Loss-Total Income or Loss		.50
30. Total: Total Income or (Loss) Before Adjustments	30	.00
ou. Total mount of (Loss) perote Aujustinents	30	.00