

U.S. Income Tax Return for Homeowners Associations

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Form1120H for instructions and the latest information.

2024

For calendar year 2024 or tax year beginning , 2024, and ending , 20

Name: CONDOMINIUM ASSOCIATION OF THE VALIANT HOUSE
Employer identification number: 59-1370419
Date association formed: 01-29-1970
Address: 801 S. OCEAN PR, HOLLYWOOD FL 33019

Check if: (1) Final return (2) Name change (3) Address change (4) Amended return
A Check type of homeowners association: [X] Condominium management association [] Residential real estate association [] Timeshare association

B Total exempt function income: 674,303.14
C Total expenditures made for purposes described in 90% expenditure test: 647,106.25
D Association's total expenditures for the tax year: 647,106.25
E Tax-exempt interest received or accrued during the tax year

Table with 8 rows for Gross Income (excluding exempt function income). Rows include Dividends, Taxable interest, Gross rents, Gross royalties, Capital gain net income, Net gain or (loss) from Form 4797, Part II, line 17, Other income, and Gross income.

Table with 9 rows for Deductions (directly connected to the production of gross income, excluding exempt function income). Rows include Salaries and wages, Repairs and maintenance, Rents, Taxes and licenses, Interest, Depreciation, Other deductions, Total deductions, and Specific deduction of \$100.

Table with 12 rows for Tax and Payments. Rows include Taxable income, Enter 30% (0.30) of line 19, Tax credits, Total tax, Preceding year's overpayment, Current year's estimated tax payments, Tax deposited with Form 7004, Credit for tax paid on undistributed capital gains, Credit for federal tax paid on fuels, Elective payment election amount, Total payments and credits, Amount owed, Overpayment, and Enter amount of line 25 you want.

Sign Here: 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. Signature of officer: [Signature] Date: 4-15-25 Title: PRESIDENT

Paid Preparer Use Only: Print/Type preparer's name, Preparer's signature, Date, Check if self-employed, PTIN, Firm's name, Firm's EIN, Firm's address, Phone no.

