

## Rental Income and Expenses

Name: \_\_\_\_\_ Tax Year: \_\_\_\_\_

Property Location: \_\_\_\_\_ Property Type: \_\_\_\_\_

Check property owner:  Taxpayer  Spouse  Joint

Ownership Percentage (if not 100%): \_\_\_\_\_ Yes  No

If not 100%, are you reporting 100% of the income and expenses?  Yes  No

Check this box if some of this investment was **not** at-risk  Yes  No

Did you have personal use of this rental property?  Yes  No

If **yes**, enter number of days: Rented \_\_\_\_\_ Personal use \_\_\_\_\_ Owned \_\_\_\_\_

Does this rental have multiple living units and you live in one of the units?  Yes  No

If **yes**, enter percentage of rental use: \_\_\_\_\_ %

Did you actively participate in this property's management?  Yes  No

Did you materially participate in this property's management?  Yes  No

Did you fully dispose of this property?  Yes  No

INCOME	Total (list at 100%)
Rent Received:	
EXPENSES	Total (list at 100%)
Advertising:	
Automobile:	
Travel:	
Cleaning and maintenance:	
Commissions:	
Insurance:	
Legal and professional fees:	
Management fees:	
Mortgage interest paid to banks (provide form 1098):	
Other interest:	
Repairs:	
Supplies:	
Real estate taxes:	
Other taxes:	
Utilities:	
Gardening:	
Licenses and permits:	
Painting and decorating:	
Pest control:	
Telephone:	
Trash removal:	
Other expenses (i.e. appliances, new equipment, etc.):	
a.	
b.	
c.	
d.	