

Rental Property

Rental Income

Please indicate type of property as 1-Single Family, 2-Multi Family, 3-Vacation/Short Term, 4-Commercial, 5-Land, 6-Self-rental, or 7-Other (explain)

	Property A	Property B	Property C
Location of Property			
Type			
Any Personal Use			
Fair Rental Days			
Personal Use Days			
Date Placed in Service			
Rents Received			

Expenses (Please provide a depreciation schedule if you are a first year/time client, attach other expenses as needed)

Advertising	\$	\$	\$
Cleaning & Maintenance	\$	\$	\$
Commissions	\$	\$	\$
Insurance	\$	\$	\$
Legal & Professional Fees	\$	\$	\$
Management Fees	\$	\$	\$
Mortgage Insurance	\$	\$	\$
Other Interest	\$	\$	\$
Repairs	\$	\$	\$
Supplies	\$	\$	\$
Taxes	\$	\$	\$
Utilities	\$	\$	\$
HOA	\$	\$	\$

Property Information (Any improvements with a life over a year) New Clients only: Please include the Property itself.

Which Property?	Asset	Date Purchased	Cost	Date Sold	Selling Price
					\$
					\$
					\$
					\$

If you have a home office or vehicle used for a rental, please continue to the next page.

Use of Home

Are you claiming use of a home office? Yes No

If yes, please provide the following information:

1. How many months was your home used for business? _____
2. How much square footage was used exclusively for business? _____
3. What is the total square footage of the home? _____

Additional Expenses (please attach information for any additional expenses)

Rent (not mortgage) \$ _____	Garbage \$ _____	HOA Dues \$ _____
Gas/Electric \$ _____	Insurance \$ _____	General Repair \$ _____
Water \$ _____	Cleaning \$ _____	Repair/Maintenance \$ _____

Vehicle Use for Rental Property A

Year/Make/Model	Date Placed in Service	Purchased Price	Purchased Date

Mileage

If business use is over 50%, include these totals:

Please attach information for additional vehicles.

Business Miles	Personal Miles	Total Miles

Fuel \$ _____	Registration \$ _____
Insurance \$ _____	Loan Interest \$ _____
Repairs \$ _____	Other \$ _____

Check any that apply:

<input type="checkbox"/>	Was the vehicle available for personal use during business hours?
<input type="checkbox"/>	Do you have another vehicle available for personal use?
<input type="checkbox"/>	Do you have written documentation to support these expenses?

Vehicle Use for Rental Property B

Year/Make/Model	Date Placed in Service	Purchased Price	Purchased Date

Mileage

If business use is over 50%, include these totals:

Please attach information for additional vehicles.

Business Miles	Personal Miles	Total Miles

Fuel \$ _____	Registration \$ _____
Insurance \$ _____	Loan Interest \$ _____
Repairs \$ _____	Other \$ _____

Check any that apply:

<input type="checkbox"/>	Was the vehicle available for personal use during business hours?
<input type="checkbox"/>	Do you have another vehicle available for personal use?
<input type="checkbox"/>	Do you have written documentation to support these expenses?

If applicable, please attach information for additional rental properties.