

# Rental Income & Expense Worksheet

Tax Year  
**20** \_\_\_\_\_

Taxpayer's Name: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Business Name (if any): \_\_\_\_\_ Employer ID Number (EIN), if any: \_\_\_\_\_

Property	Property Address, City & State or Description	Type of Property (Single Family, Condo, Duplex, etc.)	Did You or Family Use the Property During the Year?	Number of Days Used for Personal Use
<b>A</b>			<input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>B</b>			<input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>C</b>			<input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>D</b>			<input type="checkbox"/> Yes <input type="checkbox"/> No	
INCOME				
	Property A	Property B	Property C	Property D
Rents Collected (Include Prepaid Rent)	\$	\$	\$	\$
Deposits (Non-Returnable)	\$	\$	\$	\$
Expenses Paid by Tenant for Landlord	\$	\$	\$	\$
Property and/or Services in Lieu of Rent	\$	\$	\$	\$
Early Lease Termination Fees	\$	\$	\$	\$
Lease Payments with Option to Buy	\$	\$	\$	\$
Other Income (Describe):	\$	\$	\$	\$
EXPENSES				
	\$ Amount	\$ Amount	\$ Amount	\$ Amount
Advertising				
Auto Mileage for Rental (Number of Miles)				
Travel (Do NOT Include Auto Mileage)				
Cleaning & Maintenance				
Lawn Care				
Commissions				
Insurance				
Legal & Other Professional Fees				
Management Fees				
Mortgage Interest (Forms 1098)				
Other Interest				
Repairs (Do NOT Include Improvements!)				
Supplies				
Real Estate Taxes				
Utilities				
Water / Sewer				
Pest Control				
Homeowners or Condo Assoc. Fees				
License				
Tangible Tax				
Telephone				
Postage				
OTHER (List):				

## ASSETS - Appliances / Furniture / Improvements

List ALL new appliances, flooring, furniture, improvements, fences, roads, shrubbery, etc., that have been made to the property during the tax year. If this is FIRST year of the rental property, list all assets and improvements from prior years.

Description of Asset	Date Placed in Service	Cost	New	Used	Which Property? A,B,C, or D
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	

During the tax year, did you dispose of any assets that have been reported on prior years tax returns?  Yes  No  
 If YES, please list:

Description of Asset Removed or Disposed	Date Removed/Disposed	How was Item Disposed?

Additional documents we need:

- ✓ HUD-1 or other Settlement Statement for Purchases and Refinancing of Properties

**IMPORTANT:** Notes about income/expense items you wish to discuss:

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