

Year _____

General Information

Taxpayer Name	_____	SSN	_____
Business Name (if any)	_____	Business EIN (if any)	_____
Property Description	_____		
Address (if not personal address)	_____		
City, State, Zip	_____		
Is this rental activity your primary job (no W-2?)	Yes _____	No	_____
If not, do you make all rental/repair decisions?	Yes _____	No	_____
Percentage of Property you own:	_____ %		
Type of Property	Single Family _____	Commercial	_____
(choose one)	Multi-Family _____	Land	_____
	Vacation _____	Other	_____
Number of Days Rented at Fair Value:	_____	Number of Personal Use Days:	_____

Income (or attach a Profit and Loss Statement)

Rental Income	_____	
Other Income (description)	_____	Amount _____

Expenses

Advertising _____	Interest _____
Work Car Mileage _____	Mortgage _____
Personal Use Mileage _____	Other Debt _____
Car Yr/Make/Model _____	Repairs _____
Cleaning _____	Supplies _____
Commissions _____	Taxes _____
Dues/Licenses _____	Travel _____
Insurance _____	Cell Phone _____
P & C _____	(business percentage) _____
Mortgage PMI _____	Internet/Cable Access _____
Legal & Professional _____	Utilities _____
Maintenance _____	Other _____
Management Fees _____	Other _____

Other Information

Did you make major improvements to the property beyond normal repairs and maintenance?	_____
Or purchase furniture, appliances or other items with a long useful life used at the property?	_____
Item _____	Cost _____ Date _____
Item _____	Cost _____ Date _____