RENTAL PROPERTY

Number of days rented during the year. Property 1: _____ Property 2: _____

Please choose type of property:

☐ ☐ Single Family 1 2 ☐ ☐ Multi Family 1 2 ☐ ☐ Vacation 1 2 ☐ ☐ Commercial 1 2

☐ ☐ Land 1 2 ☐ ☐ Royalties 1 2 ☐ ☐ Self Rental 1 2 ☐ ☐ Other(describe)_____ 1 2

Address **Rent Received**

Property 1: _____ $ _____

Property 2: _____ $ _____

	Property 1	Property 2		Property 1	Property 2
Advertising	$ _____	$ _____	Supplies	$ _____	$ _____
Travel	$ _____	$ _____	Taxes Paid	$ _____	$ _____
Maintenance	$ _____	$ _____	Utilities	$ _____	$ _____
Insurance	$ _____	$ _____	Other	$ _____	$ _____
Legal/Professional	$ _____	$ _____	_____	$ _____	$ _____
Management	$ _____	$ _____	_____	$ _____	$ _____
Interest	$ _____	$ _____	_____	$ _____	$ _____
Repairs	$ _____	$ _____	_____	$ _____	$ _____
Did you make improvements? ☐ Yes ☐ No	$ _____	$ _____	or get new equipment? ☐ Yes ☐ No	$ _____	$ _____

Mileage log? ☐ Yes ☐ No Record keeping system _____

Did you make payments of $600 or more to any vendors in 2016 that would require you to file form(s) 1099? ☐ Yes ☐ No

If yes, did you or will you file form(s) 1099? ☐ Yes ☐ No

Questions or Comments:

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