

Rental Property Worksheet

If this property was purchaed this year please include your closing statement. If this is the first year we are doing your taxes for an established property, please include the prior year depreciation schedule.

Property Description(single family, mutli, etc) _____

Property Address: Street _____

City, State and Zip Code _____

Employer Identification number (EIN), if applicable _____

Name of LLC for property, if applicable _____

Is this property owned by the taxpayer, spouse or jointly? _____

Days rented at fair rental value _____

Days of Personal use _____

Is the rental property occupied by the owner? **Yes or No** _____

If owner occupied, please note percent or square footage of rental occupied by owner. _____

Did you make any payments over \$600 that would require you to file Form 1099/1096? **Yes or No** _____

If yes, did you file the 1099/1096 forms? **Yes or No** _____

RENTAL INCOME: _____

EXPENSES:

Advertising _____

Travel- air, taxi(auto- see Vehicle Worksheet) _____

Cleaning and Maintenance _____

Commissions and Fees (paid to realtor) _____

Insurance _____

Legal and Professional Fees _____

Management/Condo/Short term rental Fees _____

Interest Expense- Mortgage _____

Interest Expenses-Business Credit Card, etc. _____

Repairs (items under \$3000) _____

Supplies (equipment, misc items) _____

Taxes- School/Property _____

Taxes- Other _____

Utilities(electric, heating fuel, cable) _____

Water & Sewer _____

OTHER EXPENSES:

List Details:

_____	_____
_____	_____
_____	_____
_____	_____

Major Improvements or furnishings over \$3,000? Please list the details below.

Description of Improvement	Cost	Date Paid
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Other Tax/Rental Information for BTG:

Auto/Truck Expenses- See Vehicle Worksheet

Auto and Truck Expense worksheet	Vehicle 1
Year of Vehicle	
Make and Model of vehicle	
Date Purchased or Acquired	
Date placed in business service	
Type of Vehicle (Auto or Truck)	
Total miles driven (sum equals 3 lines below)	
Business miles	
Commuting miles	
Personal miles	
Did you have another vehicle for personal use-	YES <input type="checkbox"/> NO <input type="checkbox"/>
Vehicle used primarily by owner or related person-	YES <input type="checkbox"/> NO <input type="checkbox"/>
Do you have written evidence (mileage log, report) of business use claimed-	YES <input type="checkbox"/> NO <input type="checkbox"/>
Is this vehicle leased-	YES <input type="checkbox"/> NO <input type="checkbox"/>
Actual Expenses (If using this method, typical of heavy or costly vehicles):	
Cost of Vehicle (including special installed equipment i.e. Tool box, Plow)	
Gasoline	
Oil, maintenance and repairs	
Insurance	
Registration and license	
Lease payments	
Interest ONLY portion of Vehicle loan payments (NOT full monthly payment)	
Did you sell or trade in a previously used business vehicle-	YES <input type="checkbox"/> NO <input type="checkbox"/>
If YES, please include the dealer invoice or other documentation.	