# **Rental/Royalty Income and Expenses**

If more than two properties, please copy this form. 4

Name/s of Owner/s:									
A Did you make any payments that v  B If "Yes" did you or will you file all requi		•	•	(s) 1099? 🗆			and leave B I eal Estate Pr	blank unless ofessional.	
	red 1099 forms	☐ YES	U NO	Dron					
Description  Please check type of Income: If royalty (1099-Misc, box 2) go to line 4			o line 4		erty A  ROYALTY	Property B  ☐ RENTAL ☐ ROYALTY			
1a Rental Property Street Address:	(1099-101150, 100)	( 2) go i	0 11116 4	U NEIVIAL	HOTALIT		NEIVIAL UIT	TOTALIT	
Rental Property City and State:									
<b>1b</b> Check box below that describes type of	property:								
☐ 1 SINGLE FAMILY RESIDENCE ☐ 2 MULTI-FAM		<b>3</b> VAC	ATION SHORT-T	ERM RENTAL	☐ 4 COMMERCIAL				
☐ 5 LAND ☐ 6 ROYALTIES		☐ 7 SELI	F-RENTAL	Į	■ 8 OTHER (DESCRIE	BE)			
1c Owners: please check (T) Taxpayer (S) Spouse or (J) Joint			OT OS OJ			ut us uj			
1d Did you sell this property? If yes, see next page Sheet 4.				☐ YES ☐ NO			☐ YES ☐ NO		
1e Did you have a personal residence in the				☐ YES	□ NO		☐ YES	□ NO	
1f Square footage of: Rental Apt(s) / Buildin		Rental	*	D)/50	%		D. 1/50	<u>%</u>	
2a Is this a Vacation Home? If no, skip to li		i	20.110.011	☐ YES	□ NO			□ NO	
<b>26</b> Did you / your family occupy this proper <b>2c</b> How many days / months did you rent tl	• •	iuring tr	ie year?	☐ YES	□ NO		☐ YES	□ NO	
2d How many days did you / your family oc		arty?							
<b>2e</b> Percentage of your / your family persona		orty:			%			%	
20. c.coage of your / your lanning persons	u. 400.	Pro	perty A		70	Pro	perty B	70	
3a Merchant Card / 3rd Party Payments									
<b>3b</b> Rental Income									
4 Royalty Income									
Expenses	Total Amt. Expended	% Alloc.	Rental Amount	Leave Blank	Total Amt. Expended	% Alloc.	Rental Amount	Leave Blank	
<b>5</b> Advertising									
6 Auto (58.0¢ per mile) & Travel									
7 Cleaning & Maintenance									
8 Commissions									
9 Insurance									
10 Legal & Accounting									
11 Management/Co-op/Condo Fees									
12 Mortgage Interest									
13 Other Interest									
14 Repairs (list):									
<b>15</b> Supplies									
16 Taxes									
17 Utilities									
18 Equipt/Furniture & Improvements	*				*				
19 Other (list):									
Income Transferred to Sheet #3									
20 Total Expenses									
<b>21</b> Net									

**Important Notes** ♦ If you live in a building that includes a rental apartment, you must prorate the expenses that are shared by the two (or more) units.

If you provided us with this information in prior years, it is not necessary to do so again.
See other side of sheet.

# **4562** Rental Property Depreciation Statement

#### ENTER CURRENT YEAR'S COSTS FIRST. DO NOT ENTER PRIOR YEARS COSTS IF WE PREPARED YOUR LAST YEAR'S TAX RETURN.

Description	PROI	PERTY	DATE	TOTAL COST	LAND VALUE	RENTAL	BASIS	YEARS	DEPREC
19.	A	В	ACQUIRED			% USE	LEAVE BLANK	LEAVE BLANK	LEAVE BLANK
Rental Property									
Rental Property									
Improvement:									
Improvement:									
Improvement:									

# 4562 Equipment and Furniture in or used for Rental Units

#### PART III ENTER CURRENT YEAR'S COSTS FIRST. DO NOT ENTER PRIOR YEARS COSTS IF WE PREPARED YOUR LAST YEAR'S TAX RETURN.

Description of Assets	PROPERTY		DATE	TOTAL COST	RENTAL		YEARS	S DEPRECIATION	
19. each costing \$2,500 or more	Α	В	ACQUIRED		% USE	LEAVE BLANK		LEAVE BLANK	
☐ You must adopt a capitalization policy						LEAVE BLANK		CUMULATIVE	CURRENT
			·	!		1			

Did you sell any property previously deducted in this section? ☐ YES ☐ NO	

### IF YES, PLEASE PROVIDE CLOSING STATEMENTS OF THE BUY AND SALE OF THE SOLD PROPERTY

	Property A	Property B
Sale Date:		
Sale Amount:		