

2019 RENTAL ORGANIZER

CLIENT NAME _____

| Prop # | H W J | S M V L C | Description of Property and Location | Name on Deed | Name on Mortgage | Mortgage Balance 12-31-19 |
|--------|-------------|-----------------------|--------------------------------------|--------------|------------------|---------------------------|
| 1 | | | | | | |
| 2 | | | | | | |
| 3 | | | | | | |
| 4 | | | | | | |

H= Husband W= Wife J=Joint /// S= Single Family M= Multi Family V= Vacation L= Land C= Commercial

| INCOME | 1 | 2 | 3 | 4 |
|--|---|---|---|---|
| 1. Rents Received (Not security deposit) | | | | |
| 2. Royalties Received | | | | |
| 3. Other | | | | |

| EXPENSES | 1 | 2 | 3 | 4 |
|--|---|---|---|---|
| 10. Advertising | | | | |
| 11. Auto and Travel (complete "Vehicle Expenses" section on back also) | | | | |
| 12. Association Dues | | | | |
| 13. Cleaning and Maintenance | | | | |
| 14. Insurance | | | | |
| 15. Legal & Other Professional Fees | | | | |
| 16. Management Fees | | | | |
| 17. Mortgage Int Paid Banks, provide 1098 | | | | |
| 18. Other Interest (security deposit interest) | | | | |
| 19. Repairs | | | | |
| 20. Supplies | | | | |
| 21. Property Taxes - 2019 | | | | |
| 23. Utilities | | | | |
| 24. License (Rental) | | | | |
| 25. Wages and Salaries | | | | |
| 26. Other (please list): | | | | |
| | | | | |

List on back, purchases of Equipment, Furniture, Vehicles, or Property Improvements

IF YOU USE THIS FORM, PLEASE ALSO COMPLETE THE RENTAL QUESTIONNAIRE

IF A PURCHASE, SALE, OR 1031 EXCHANGE, PLEASE PROVIDE THE CLOSING STATEMENT

| NEW EQUIPMENT/CAPITAL IMPROVEMENTS | | | | | | |
|--|-------------|------|------|-----------|------|----------------------|
| If during the year you purchased Equipment, Furniture, Vehicles, or made Property Improvements, list below. (Do not duplicate the other side.) | | | | | | |
| Property Number | Description | Date | Cost | Asset Was | | If Trade-In Involved |
| | | | | New | Used | Description |
| | | | | | | |
| | | | | | | |
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| | | | | | | |

| DEPRECIABLE ASSETS SOLD OR DISPOSED OF | | | | | |
|---|-------------|---------------|---------------|------------------|----------------------------|
| Property Number | Description | Date Acquired | Original Cost | Date Disposed of | Describe Means of Disposal |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

| VEHICLE EXPENSES (vehicle used in association with rental property only) | Vehicle 1 | Vehicle 2 |
|---|-----------|-----------|
| 1. Enter date vehicle was placed in service | | |
| 2. Total mileage vehicle was used from Jan. 1 to Dec. 31 2019 | | |
| 3. Miles included on line 2 that vehicle was used for rental business Jan 1 to Dec 31, 2019 | | |
| 4. Do you or your spouse have another vehicle available for personal purposes? | ___ YES | ___ NO |
| 5. If your employer provided you with a vehicle, is personal use during off-duty hours permitted? | ___ YES | ___ NO |
| 6A. Do you have evidence to support your deduction? | ___ YES | ___ NO |
| 6B. If "Yes," is the evidence written? | ___ YES | ___ NO |