



Tax Year _____ **Schedule E/RENTALS**

Complete one for EACH rental property in service during the year

Property Location

Street Address _____
 City, State, Zip _____

Type of Rental Property

_____ Single Family _____ Commerical _____ Land
 _____ Multi Family _____ Vacation _____ Royalties

Number of days rented _____ Date placed in service _____

INCOME

Rents Received _____ Royalties _____

EXPENSES

Advertising _____	Plumbing and electrical _____
Association Dues _____	Repairs _____
Cleaning and Maintenance _____	Supplies _____
Commissions _____	Taxes _____
Gardening _____	Property _____
Insurance _____	Rental Tax _____
Interest _____	Telephone _____
Mortgage _____	Utilities _____
Qualified Mortgage Insurance Premiums _____	Other Expenses _____
Painting and decorating _____	_____
Pest Control _____	_____

IMPROVEMENTS/MAJOR REPAIRS (OVER \$500)

DESCRIPTION	DATE	COST