

Schedule E - Income or Loss from Rental Real Estate & Royalties

Name: _____

SSN: _____

General Property Information

Property description _____

Address, city, state, ZIP _____

Select the property type

- Single family residence
 Vacation / short-term rental
 Land
 Self-rental
 Multi-family residence
 Commercial
 Royalties
 Other _____

Number of days property was rented _____ Number of days property was used for personal use _____

If the rental is a multi-dwelling unit and you occupied part of the unit, enter the percentage you occupied _____

- This property is your main home or second home
 Yes No Payments of \$600 or more were paid to an individual who is not your employee for services provided for this rental.
 This property was disposed of during 2020
 Yes No You filed Forms 1099 for the individuals
 This property was owned as a qualified joint venture

Income

	2020	2019		2020	2019
Rent Income	_____	_____	Royalties from oil, gas, mineral, copyright or patent	_____	_____

Expenses

	Rental unit expenses		Rental <u>and</u> homeowner expenses		
Advertising	_____	_____	_____	_____	If this Schedule E is for a multi-unit dwelling and you lived in one unit and rented out the other units, use the "Rental and homeowner expenses" column to show expenses that apply to the entire property. Use the "Rental unit expenses" column to show expenses that pertain ONLY to the rental portion of the property. If the Schedule E is not for a multi-unit property in which you lived in one unit, complete just the "Rental unit expenses" column.
Auto & travel	_____	_____	_____	_____	
Cleaning & maintenance	_____	_____	_____	_____	
Commissions	_____	_____	_____	_____	
Insurance	_____	_____	_____	_____	
Legal & professional fees	_____	_____	_____	_____	
Management fees	_____	_____	_____	_____	
Mortgage interest	_____	_____	_____	_____	
Other interest	_____	_____	_____	_____	
Repairs	_____	_____	_____	_____	
Supplies	_____	_____	_____	_____	
Taxes	_____	_____	_____	_____	
Utilities	_____	_____	_____	_____	
Depletion	_____	_____	_____	_____	
Other expenses (list)	_____	_____	_____	_____	
_____	_____	_____	_____	_____	
_____	_____	_____	_____	_____	
_____	_____	_____	_____	_____	
_____	_____	_____	_____	_____	
_____	_____	_____	_____	_____	
_____	_____	_____	_____	_____	
_____	_____	_____	_____	_____	

Expenses Related to Business

Name: _____

SSN: _____

Auto Expense

Name of business vehicle is used for _____

Description of vehicle _____ Date vehicle was placed in service _____

Yes No
 This vehicle is available for use during off-duty hours
 Another vehicle is available for personal use

Yes No
 There is evidence to support your deduction
 The evidence is written

Number of miles the vehicle was driven during 2020		2019	
	2020		2019
Business	_____	_____	_____
Commuting	_____	_____	_____
Other	_____	_____	_____

Number of miles driven in prior years		2019	
	2020		2019
Business	_____	_____	_____
Total	_____	_____	_____

	2020	2019
Garage rent	_____	_____
Gas	_____	_____
Insurance	_____	_____
Licenses	_____	_____
Oil	_____	_____
Parking fees	_____	_____
Rental fees	_____	_____
Interest	_____	_____
Property tax	_____	_____

	2020	2019
Repairs	_____	_____
Tires	_____	_____
Tolls	_____	_____
Lease addback	_____	_____
Other expenses	_____	_____
	_____	_____
	_____	_____

Business Use of Home

Name of business home is used for _____

What is the total square footage of your home that was used regularly and exclusively for business _____

What is the total square footage of your home _____

For daycare facilities not used exclusively for business, complete the following questions

How many days during the year was the area used _____

How many hours per day was the area used _____

The daycare facility was in operation for the entire year

Expenses	Office expenses		Home expenses	
	2020	2019	2020	2019
Mortgage interest	_____	_____	_____	_____
Real estate taxes	_____	_____	_____	_____
Excess mortgage interest	_____	_____	_____	_____
Excess real estate taxes	_____	_____	_____	_____
Insurance	_____	_____	_____	_____
Rent	_____	_____	_____	_____
Repairs & maintenance	_____	_____	_____	_____
Utilities	_____	_____	_____	_____
Other expenses	_____	_____	_____	_____

In the "Office expenses" column, enter those expenses that pertain exclusively to your office; in the "Home expenses" column, enter those expenses that pertain to the entire dwelling.