

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

Name:

****ONLY ONE RENTAL PER PAGE****

SSN:

General Property Information

TSJ _____

Property description _____

Address, city, state, ZIP _____

Select the property type

Single family residence
 Multi-family residence

Vacation / short-term rental
 Commercial

Land
 Royalties

Self-rental
 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 was placed in service during 2025.
 This property was disposed of during 2025.
 This property is your main home or second home.
 This property was owned as a qualified joint venture.

Yes No
 Payments of \$600 or more were paid to an individual, who is not your employee, for services provided for this rental.
 If "Yes," did you file Forms 1099 for the individuals?

Income

2025

2025

Rent income Royalties from oil, gas, mineral, copyright or patent

Expenses**Rental Unit Expenses****Rental and Homeowner Expenses**

Advertising	.....	.....	<p>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.</p> <p>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.</p>
Auto & travel TRAVEL ONLY HERE. AUTO ON NEXT PAGE	.....	.....
Cleaning & maintenance	.....	.....
Commissions	.....	.....
Insurance	.....	.....
Legal & professional fees	.....	.....
Management fees	.....	.....
Mortgage interest	.....	.....
Other interest	.....	.....
Repairs	.....	.....
Supplies	.....	.....
Taxes	.....	.....
Utilities	.....	.....
Depletion	.....	.....
Other expenses	.....	.....
.....	
.....	
.....	
.....	
.....	
.....	
.....	

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

Was this vehicle available for use during off-duty hours?
 Was another vehicle available for personal use?

Yes No

Do you have evidence to support your deduction?
 If "Yes," is the evidence written?

Mileage

Number of miles the vehicle was driven during 2025

Business Other

Commuting

Expenses

Garage rent Repairs

Gas Tires

Insurance Tolls

Licenses Lease addback

Oil Other expenses

Parking fees _____

Rental fees _____

Interest _____

Property tax _____

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

Mortgage interest _____

In the "Office expenses" column,
enter those expenses that

Real estate taxes _____

pertain exclusively to your office;

Excess mortgage interest _____

In the "Home expenses" column,

Excess real estate taxes _____

enter those expenses that

Insurance _____

pertain to the entire dwelling.

Rent _____

Repairs & maintenance _____

Utilities _____

Other expenses _____