



Taxpayer Name _____

Tax Year _____

Rental Worksheet

Type of Property					
Address					
Fair Rental Days		Personal Use Days			
Date Placed In Service		Rental Income			
Total Basis		Land Cost			
Auto and Travel					
Business Miles		Commuting Miles		Personal Miles	
Date Auto Placed in Service		Tolls		Parking	
Airfare		Hotel		Dining	
Expenses					
Advertising		Legal/Professional		Repairs	
Cleaning		Management Fees		Supplies	
Commissions		Mortgage Interest		Taxes	
Insurance		Other Interest		Utilities	
HOA Fees		Other Expenses			

List below all purchases of equipment, furniture, vehicles, or leasehold improvements.

Taxpayer Signature _____ Date _____

Spouse's Signature _____ Date _____