

P.O. BOX 20356 • 1615 ALDERSON AVENUE • BILLINGS, MT 59104 • 406-245-6261 • FAX 406-259-3914

RENTAL INCOME WORKSHEET – YEAR _____

Our records indicate that you have income from rental property. Please complete this worksheet showing Income and Expenses on each rental property you own.

Property # 1 Address

Property # 2 Address _____

Property # 3 Address _____

(ESTIMATES ARE NOT ACCEPTABLE)	Property #1	Property #2	Property #3
TOTAL RENTS RECEIVED FOR YEAR (attach any 1099s received)	\$	\$	\$
EXPENSES PAID:			
ADVERTISING			
ASSOCIATION DUES\CONDO FEES			
AUTO EXPENSES (If yes, complete other side)			
CLEANING			
COMMISSIONS-MANAGEMENT FEES			
LAWN CARE\SNOW REMOVAL			
INSURANCE			
LEGAL AND ACCOUNTING			
MISCELLANEOUS\POSTAGE\OFFICE SUPPLIES			
MORTGAGE INTEREST (Attach 1098 Form)			
PEST CONTROL			
OTHER INTEREST			
PAINTING			
REPAIRS			
SUPPLIES			
REAL ESTATE TAXES			
TELEPHONE\CELL PHONE			
UTILITIES			
TRAVEL (Plane, Bus, Taxi)			
LODGING WHILE AWAY FROM HOME			
MEALS WHILE AWAY FROM HOME OVERNIGHT			
NUMBER OF DAYS OUT OVERNIGHT			
ESCROW FEES			
REFUNDS			
IF PROPERTY NOT USED 100% FOR BUSINESS, ENTER NUMBER OF PERSONAL USE DAYS	# DAYS	# DAYS	# DAYS

(ESTIMATES ARE NOT ACCEPTABLE)

AUTOMOBILE EXPENSES - Date Auto Put In Service _____ Description of vehicle Total miles on automobile for year Total business mile on auto for year Interest * Gasoline, Oil, Lubrication * Repairs _____ Auto Licenses _____ * Tires, Supplies * Lease Payments * Insurance * Parking Fees & Tolls Vehicle Registration (please attach) * Items not necessary if using standard mileage deduction. The IRS now requires proof of odometer readings from auto maintenance receipts, i.e., oil change, tire rotation. All mileage must have a written log book. Please bring your log book with your tax information. GENERAL INFORMATION: (This information is mandatory to complete your return if you claimed an auto expense) Average daily round trip from home to work _____ Total commuting miles _____ miles. Other personal miles on vehicle miles.

- Do you have other personal vehicles Yes No
- Do you have written evidence to support your deduction? Yes
 No

FURNISHING, APPLIANCES & MAJOR IMPROVEMENTS

(Examples - Stove, Refrigeration, Hot Water Heater, Furnace, New Roof)

Property Number	Date	Description	Cost

NOTES

All information for which I have receipts, canceled checks or other written evidence, is true and correct as furnished by the undersigned FERRO, WILLETT & THOMPSON, PLLP for the preparation of Schedule E and/or Form 1065 for the year ended December 31, . I understand that Ferro, Willett & Thompson, PLLP will not audit or verify the data submitted, although they at ask me to clarify it. I will contact you immediately, if a discover additional information that will lead to a change in my return, or if I receive any letters from the IRS or state taxing authorities.