Rental Income-Schedule E

Client Name: _____ **Tax Year:** _____

PART I

Kind and Location of Property

Property A _____

Property B _____

Property C _____

	Property A	Property B	Property C
Rents Received			

PART II- Expenses

Advertising			
Cleaning & Maintenance			
Commissions			
Insurance			
Legal and Accounting			
Management Fees			
Interest			
Repairs: (Depreciable Assets see bottom)			
Supplies			
Taxes			
Utilities			
Association Dues			
Gardening			
Office Supplies			
Salaries			
Telephone			
Other (list):			
Total Expenses	0.00	0.00	0.00

(add lines in Part II).

Auto Miles Driven			
# Days Rented			
# Days Personal Use			

PART III- Depreciable Assets

Property A, B or C	**N**=New Asset **I**= Improvement **R**=Restoration **A**=Adaptation to New Use	Description	Date placed in Service	Cost