



Cannon Tax & Accounting, Inc.

Rental Property Worksheet

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Client ID #
Client Initials

This worksheet is designed for those that receive income from a Rental Property.
 Please use a separate worksheet for additional property.

Physical Address of Property: _____ (address, street, city, state, zip)

Type of Property:

<input type="checkbox"/> Single Family Residence	<input type="checkbox"/> Vacation/Short Term Rental	<input type="checkbox"/> Land	<input type="checkbox"/> Self Rental
<input type="checkbox"/> Multi-Family Residence	<input type="checkbox"/> Commercial	<input type="checkbox"/> Royalties	<input type="checkbox"/> Other (describe)

General Info:

Number of Days Rented (if not 365) _____

Number of Days for Personal Use (if not rented entire year) _____

% of Ownership (if not 100%) _____ %

Date Purchased _____

Date Became a Rental _____

Purchase Amount \$ _____

Income:

Total Rent Received For The Year \$ _____

Expenses:

Advertising \$ _____	Real Estate Tax \$ _____
Cleaning and Maintenance \$ _____	Refinancing Points \$ _____
Commissions \$ _____	Repairs \$ _____
HOA Dues \$ _____	Security \$ _____
Insurance \$ _____	Supplies \$ _____
Legal / Professional Fees \$ _____	Utilities \$ _____
Management Fees \$ _____	Waste Removal \$ _____
Mortgage Insurance \$ _____	Yard Maintenance \$ _____
Mortgage Interest \$ _____	Other \$ _____
Other Interest \$ _____	Other \$ _____
Pest Control \$ _____	Other \$ _____

Mileage: (any miles to / from the property whether to check on it, pick up rent, maintenance & repairs....)

Total Mileage on Vehicle for Year..... _____	Mileage Log Yes _____ No _____
Total Miles Driven for Rental..... _____	
Vehicle Make..... _____	
Vehicle Year..... _____	

Note : Bring your invoices, bank/CC statements, receipts, etc so we may properly prepare your return.