

## Rental Real Estate Organizer

Client Name(s): \_\_\_\_\_

Phone: \_\_\_\_\_

**Property Number One** (Check appropriate box)

Single Family residence

Multi - Family residence

Condo

Commercial

Land

Other (describe \_\_\_\_\_)

Property Address: \_\_\_\_\_

City / State/ Zip \_\_\_\_\_

**Property Number Two** (Check appropriate box)

Single Family residence

Multi - Family residence

Condo

Commercial

Land

Other (describe \_\_\_\_\_)

Property Address: \_\_\_\_\_

City / State/ Zip \_\_\_\_\_

**Did you or your family use the property during the tax year for personal purposes more than 14 days?**

Yes                       No

**Did you or your family use the property during the tax year for personal purposes more than 14 days?**

Yes                       No

Type of ownership:	<b>Percentage</b>	
Joint	<input type="checkbox"/>	_____
Taxpayer	<input type="checkbox"/>	_____
Spouse	<input type="checkbox"/>	_____

Number of days available for rent: \_\_\_\_\_

Number of days rented: \_\_\_\_\_

Number of personal-use days: \_\_\_\_\_

Payments made to individual(s) for >=\$600: \_\_\_\_\_

Forms 1099 Issued?    Yes \_\_\_\_\_ No \_\_\_\_\_

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Number of days rented: \_\_\_\_\_

Number of personal-use days: \_\_\_\_\_

Payments made to individual(s) for >=\$600: \_\_\_\_\_

Forms 1099 Issued?    Yes \_\_\_\_\_ No \_\_\_\_\_

**Income**

Rent Received \_\_\_\_\_

**Expenses**

Advertising \_\_\_\_\_

Cleaning & Maintenance \_\_\_\_\_

Commissions Paid \_\_\_\_\_

Insurance \_\_\_\_\_

Legal & Professional Fees \_\_\_\_\_

Management Fees \_\_\_\_\_

Mortgage Interest \_\_\_\_\_

Other Interest \_\_\_\_\_

Repairs \_\_\_\_\_

Supplies \_\_\_\_\_

Taxes \_\_\_\_\_

Utilities \_\_\_\_\_

Other Expenses \_\_\_\_\_

Travel to check on property:

Business Miles 1-1-22 to 06-30-22 \_\_\_\_\_

Business Miles 7-1-22 to 12-31-22 \_\_\_\_\_

Total 2022 Mileage for all purposes \_\_\_\_\_

Airfare \_\_\_\_\_

Hotel \_\_\_\_\_

Meals \_\_\_\_\_

Car Rental \_\_\_\_\_

Other \_\_\_\_\_

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Rent Received \_\_\_\_\_

**Expenses**

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Car Rental \_\_\_\_\_

Other \_\_\_\_\_

Asset Purchases	Date	Cost
Land	_____	_____
Home / Building	_____	_____
Improvements *	_____	_____
Furniture & Fixtures *	_____	_____
Other (List)	_____	_____

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Other (List)	_____	_____

\*For additional space, attach separate sheet or provide copies of receipts.

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