

RENTAL PROPERTY ORGANIZER

Property 1 Address		<input type="checkbox"/> Residential	<input type="checkbox"/> Commercial
Property 2 Address		<input type="checkbox"/> Residential	<input type="checkbox"/> Commercial
Property 3 Address		<input type="checkbox"/> Residential	<input type="checkbox"/> Commercial
Property 4 Address		<input type="checkbox"/> Residential	<input type="checkbox"/> Commercial

	Property 1	Property 2	Property 3	Property 4
Was the property used for personal purposes for more than 14 days or 10% of the total days rented at fair rental value, whichever is greater?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Total rent received				
Advertising expense				
Auto and travel				
Cleaning and maintenance				
Commissions				
Insurance				
Legal and professional fees				
Management fees				
Mortgage interest paid				
Other interest				
Repairs				
Supplies				
Taxes				
Utilities				
Homeowners' association				
Other: _____				
Other: _____				

New Equipment Purchases

Description	Date Purchased	Cost	Amount Financed	Months	Rate

New clients: Please provide depreciation schedule.