**D R TAX SERVICE**

**Tax Payer Rental Property Deduction**

**Tax Payer Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Tax Payer Phone #** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**THIS IS FOR TAX YEAR \_\_\_\_\_\_\_\_\_\_\_\_\_**

**Federal Refund \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Owe Federal \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**State Refund \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Owe State \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | **Information Needed For Tax Preparation** | | ***Amount*** | | ***Comments*** | |
|  | **RENTS RECEIVED CASH, CHECK OR DEPOSIT** | |  | |  | |
|  | **RENT RECEIVED FROM 1099M** | | | | |  | |
|  | **ADVERTISEMNT EXPENSES** | |  |  |  | |
|  | **AUTO MILES EXPENSES** | |  |  |  | |
|  | **CLEANING AND MAINTENANCE** | |  |  |  | |
|  | **COMMISSIONS** | |  | |  | |
|  | **INSURANCE (*eg. AllState, Farmers,CottonState*)** | |  | |  | |
|  | **LEGAL / PROFESSIONAL FEES** | |  | |  | |
|  | **MANAGEMENT FEES** | |  | |  | |
|  | **MORTGAGE INTEREST** | |  | |  | |
|  | **PROPERTY/REAL ESTATE TAXES** | |  | |  | |
|  | **REPAIRS** | |  | |  | |
|  | **SUPPLIES** | |  | |  | |
|  | **UTLITILITES** | |  | |  | |
|  | **DEPRECCIATION EXPENSE** | |  | |  | |
|  | **DEPLETION** | |  | |  | |
|  | **OTHER EXPENSE** | |  | |  | |
|  | **PLEASE LABEL TYPE RENTAL DWELLING/FAMILY**  **SINGLE MULTI VACATION COMMERICAL LAND OTHER** | |  | |  | |
|  | ***ADDRESS OF PROPERTY***  ***STREET \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***  ***CITY\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***  ***STATE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***  ***ZIP\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ TYPE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*** |  | | | | |
|  | ***Additional Comments or Questions:*** | | | | |  |
| ***X*** | | | | |
| ***By signing this form you agree that all information submitted is true and accurate to the best of your knowledge and corresponds with verified documents.*** | | | | |

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