

**PERSONAL ACCOUNTING GROUP**

**Profit and Loss Rental Property**

*Please provide a separate sheet for each Rental Property*

|  |                                 |                                   |                                    |  |                                       |
|--|---------------------------------|-----------------------------------|------------------------------------|--|---------------------------------------|
| <b>Property Address:</b>                                       |                                 |                                   |                                    |  |                                       |
| <b>Type of Rental:</b>   | SFR<br><input type="checkbox"/> | Condo<br><input type="checkbox"/> | Duplex<br><input type="checkbox"/> | Multi-Unit<br><input type="checkbox"/> | Mixed Use<br><input type="checkbox"/> |
| <b>Accounting Method:</b>                                      | Cash <input type="checkbox"/>   | Accrual <input type="checkbox"/>  |                                    |  |                                       |
| Did you "materially participate" in operations of this rental? | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/>    |                                    |  |                                       |

**Rents:** *State rents received from tenant and Section-8 for the calendar year*

|                      |  |
|----------------------|--|
| <b>Rental Income</b> |  |
| <b>Total Income</b>  |  |

**Expenses:** *State expenses incurred for the calendar year*

|  | Amount | You have receipts |
|--|--------|-------------------|
| <b>Advertising:</b>  |        |                   |
| Auto: Make & Model <input type="text"/> Date In Service <input type="text"/>       |        |                   |
| Total Miles Per Yr <input type="text"/> Business Miles Per Yr <input type="text"/> |        |                   |
| Cleaning and Maintenance:  |        |                   |
| Commissions:   |        |                   |
| Insurance:   |        |                   |
| Legal and Professional:  |        |                   |
| Management Fees:   |        |                   |
| Mortgage Interest:   |        |                   |
| Other Interest:  |        |                   |
| Property Taxes:  |        |                   |
| Repairs:   |        |                   |
| Supplies:  |        |                   |
| Licenses:  |        |                   |
| Telephone:   |        |                   |
| Travel:  |        |                   |
| Utilities:   |        |                   |
| Other Expenses (please attach itemized list):                                      |        |                   |
| <b>Total Expenses</b>  |        |                   |
| <b>Net Profit and Loss</b>   |        |                   |

\_\_\_\_\_  
**Owner**

Page \_\_\_\_ of \_\_\_\_

"Under the penalties of perjury, I declare that I examined the facts stated in this document, including any accompanying schedule and, to the best of my knowledge and belief, they are true, correct and complete."