

CODE- 4 TAX SERVICES

MAILING ADDRESS: 22431 Antonio Parkway B160-482, RSM, CA 92688

* 949-364-2121 * www.code-4tax.com * Fax: 877-794-9998

RENTAL PROPERTY DEDUCTIONS FOR TAX YEAR: _____

This form is to be used in conjunction with the General Information Worksheet. Please complete all information as thoroughly as possible. If sending supporting documentation, send photocopies only. Keep all receipts and documentation used to prepare this form in a safe location for 5-7 years. Please write legibly. Use separate sheet if needed.

ADDRESS OF PROPERTY: _____

NEW RENTAL PROPERTY? Y N DISCONTINUED/SOLD RENTAL PROPERTY THIS YEAR? Y N

Type of Property: Single Family Residence Multi-Family Residence Vacation/Short-term
Commercial Land Self-Rental Other: _____

PROPERTY VALUE WHEN PROPERTY WAS PURCHASED/SERVICE START DATE AS A RENTAL: _____

LAND VALUE AT PURCHASE/SERVICE START DATE AS RENTAL: _____ Percent Ownership: _____

(This value can be found on the property tax bill or purchase documents.)

INCOME

Rent received _____
Other income _____

Did you make payments requiring 1099's? Y N

If yes, were required forms filed? Y N

Major Repairs (structural repairs, remodeling, new fixtures or appliances, landscaping, hardscaping, etc.):

List individually with cost & date:

EXPENSES

Advertising _____

Cleaning and maintenance _____

Commissions _____

Insurance _____

Legal & professional services _____

Management Fees _____

Home Owners/Association dues _____

Mortgage Interest paid _____

Property Taxes paid _____

Other interest _____

General Repairs _____

Supplies _____

Utilities: _____

Gas _____

Water _____

Electricity _____

Internet/Cable _____

Trash _____

Gardener _____

Postage _____

Other _____

Did you use this property for personal use? Y N

If Yes, was it longer than 14 days total? Y N

Or 10% of the total days rented out? Y N

Property foreclosed/short sold? Y N

If Yes, attach copy of 1099-C or A.

Original purchase price _____

Original purchase date _____

Short sale price _____

Closing date _____

Costs associated with closing _____

Was this property ever your primary residence?

Y N

If Yes, what dates? From _____ to _____

AUTO/TRAVEL EXPENSES

Miles round trip to property _____

Number of trips to property _____

Travel expenses to property _____

(airfare, hotel, rental vehicles, etc.)

Code-4 Tax Services e-file & payment policy: Returns will be e-filed at no extra charge. E-files will not be submitted until signed acknowledgment & payment are received. Payment can be made by cash, check, Visa, Mastercard, Discover, American Express or Square Cash transfer. Mail-in Clients: a secure pay link will be sent to you if you prefer to pay by credit card.

