



1050 Wall St West Ste 350
 Lyndhurst NJ 07071
 201-773-0777 Main
 877-825-2479 Fax
 accounting@taxbizpro.com

Rental Property Expense Worksheet for tax year 2021

Name of the business X _____ EIN _____

Name of the legal representative/owner X _____ Last 4 of SS# _____

Indicate below your business structure (only for new clients)

- Self-employed (Property is owned by individual)
- Single Member LLC (Property is owned by the LLC-Sch. E of form 1040)
- Single Member LLC taxed as Corporation (From 1120 or 1120S)
- Multi Member LLC taxed as Partnership (Form 1065)
- Multi Member LLC taxed as Corporation (Form 1120 or 1120S)
- Corporation (INC, Corp, Co, PC) (Form 1120 or 1120S)
- Partnership (LLP, LP, GP) (Form 1065)

RENTAL INCOME RECEIVED (IF NOT REPORTED ON 1099) \$

**All expenses/deductions MUST have supporting documentation
 (receipts, check, bill, letter, etc) to support the deductions, don't submit the receipts to us**

Expenses	AMOUNT/YEAR
1 Advertising & Marketing	1 \$
2 Bank Fees	2 \$
3 Business Loan Payments (interest only)	3 \$
4 Business Insurance (Liability, E&O, General etc)	4 \$
5 Car (gas, oil change, repairs) - Is the car(s) registered on the business? YES <input type="checkbox"/> NO <input type="checkbox"/>	5 \$
6 Car Insurance	6 \$
7 Car Lease	7 \$
8 Cell Phone	8 \$



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9 Charity Contributions	9	\$
10 Entertainment Exp. NOT DEDUCTABLE	10	\$
11 Equipment purchased (indicate purchase date)	11	\$
12 Furniture and Fixtures Purchased (indicate purchase date)	12	\$
13 Licenses and Permits	13	\$
14 Meals (with clients, business related)	14	\$
15 Office Cleaning and Maintenance	15	\$
16 Office Expenses (telephone, internet, etc)	16	\$
17 Office Rent	17	\$
18 Repairs & Maintenance	18	\$
19 Office Supplies	19	\$
20 Outside Help/Temps	20	\$
21 Parking Exp	21	\$
22 Postage & Shipping	22	\$
23 Professional Education (seminars, books, etc)	23	\$
24 Professional Fees (Accountant/Attorney etc)	24	\$
25 Property Purchase (include closing documents)	25	\$
26 Property Management Fees	26	\$
27 Property Taxes	27	\$
28 Property Insurance	28	\$
29 Salaries & Wages	29	\$
30 Tolls	30	\$
31 Travel (long range to and from client)	31	\$
32 Utilities	32	\$
33 Other Expenses - indicate what it is	33	\$



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For Auto Expenses

(update only if you changed the car from last year, or you are a new client)

Make/Model

Purchase Date

Purchase Price/Cost

\$

Mileage Info

Total mileage driven this year

(i.e. between business or customers)

Home Office Deduction: (update only if anything changed from last year, or you are a new client)

Total square footage of the house

Square footage of the office area used exclusively for business in the house

Please list any additional info not listed above

Please sign X

Date