

Small Business Accounting & Complete Income Tax Services

email: tax@accountingconsortium.com www.accountingconsortium.com Bay Creek Business Center 305 Cooper Road, Ste 200 Loganville, GA 30052

> Ph: 678.696.0829 Fax: 866.442.8824 Text: 678-696-0829

January 01, 2022

To Our Valued Clients:

Happy New Year!

We appreciate the opportunity to work with you again this year and to advise you regarding your income tax obligation for the 2021 tax year. We hope that this year brings you abundant happiness and good health after yet another challenging year for most of us.

This year the IRS requires that taxpayers include on their tax returns, the amounts received for the 3rd stimulus payment and the amounts received for the Advanced Child Tax Credit.

Stimulus Payment #3: If you received the 3rd stimulus payment in 2021, you should have received IRS Notice 1444-C or IRS Letter 6475. Both detail the amount of the payment you received. If you did not receive either document, please check your banking ledger to confirm the amount you received, if any. If the amount reported is incorrect, it will delay processing of your tax return and cause the IRS to change the amount of your refund or the amount you owe them.

Advanced Child Tax Credit: If you received any of the ACTC during 2021, you should have received IRS Letter 6419. The letter details the total of the ACTC you received. As with the stimulus, if the amount reported is incorrect, it will delay processing of your tax return and cause the IRS to change the amount of your refund or the amount you owe them. Keep in mind that the ACTC is an advance of what you would expect to receive when filing your 2021 tax return. If you received the credit, you should expect a lower refund.

Tax Identity Theft: Once again, tax identity theft is on the rise. The IRS makes every effort to prevent this crime from occurring and as your tax preparer, we too have measures in place to prevent anyone from obtaining your personal information from our systems. We strongly recommend that each taxpayer apply for an Identity Protection Personal Identification Number (IP PIN). To obtain a pin number you need to complete IRS Form 15227. The form can be obtained on the IRS website at www.IRS.gov. We also have the forms in our office and can email one to you as well. Each taxpayer and spouse should apply separately for the pin numbers. You can also apply for a pin for your dependents.

Tax Organizer: We have made the tax organizer available for our clients, on-line through our website, at accountingconsortium.com, by selecting the Tax Organizer Package link on our home page. You will also find it attached with this package. If you prefer to have an organizer mailed to you, we will be happy to mail one at your request. You can contact the office by phone or text at 678-696-0829. We strongly encourage all of our clients to make use of the tax organizer. It provides a tool for taxpayers to gather the necessary documents that we will need to complete your tax return. It also aids in reducing the need for us to contact you later for additional information that we need to complete your tax return.

Secure Client Portal & Covid 19: As a result of the continued Covid 19 situation, we encourage clients to utilize our Secure Client Portal. By uploading your tax papers to the portal, we are able to securely download your documents and work on your tax return. Once we've completed the return, we will upload a finalized, signed return to the portal for you to print or save electronically. This method provides for a contactless transaction. If you're already active in the portal, you can upload your documents whenever you're ready to do so. If you would like to participate in our Secure Client Portal process, contact the office and we will send you an email invitation to establish an account. There is no fee for this service. If you prefer not to use the portal, we encourage you to consider dropping off or mailing your documents to the office and we will accommodate your request. For your personal security, we're asking all clients not to email any documents to us that contain social security numbers as unsecure email just invites the opportunity for identity fraud. This is where using the portal becomes a benefit. If you choose to use the portal, please email the office to inform us that you've completed your upload and are ready for us to process your tax return.

Residency Requirements: As the need for proof of residency and dependency is necessary, it is important to understand that the requests we make are mandated by the IRS and, in accordance with circular 230, we as tax professionals must comply with their requirements. Each year, every taxpayer must show proof of identity and although we may have previously asked to see, or for you to provide the information from your drivers license, we must update that information each tax season. There is a space on the first page of the tax organizer where you can provide your drivers license information. Confirming residency & dependency provides for certain tax credits and filing statuses. Falsely claiming a tax credit or filing status will subject the taxpayer to substantial penalties by the IRS which may include the revocation of future tax credits. Please refer to the tax organizer for documents we may need to establish residency and dependency.

Other Important Information:

- RMD from retirement accounts now begin at age 72.
- Business & travel meals are now deductible at 100%.
- Residential energy credit is back. Still a \$500.00 cumulative credit.
- \$15,000.00 a year of 529 funds can be transferred from a 529 ABLE account for K-12.
- Student loan forgiveness due to death or disability will no longer be taxed.
- Stepped up basis of estate assets for heirs will remain intact, for now.
- Unemployment compensation exemption was \$10,200.00. So far it has not been extended to 2021.
- 1099K threshold changed from \$20,000 to \$600. This especially impacts small businesses.

Of course there have been other changes but these are the items we feel impact a greater number of taxpayers.

Tax Season: Begins January 24th!

Our office hours are **Monday—Wednesday**, **9am to 5pm and Thursday 9am to 4pm**. There are no office hours on Fridays as we work offsite at various client locations. After hour appointments are available upon request. Saturday appointments, if preferred, will be available on February 19th and March 19th. If you consider dropping by the office during our office hours, we suggest you call or text prior to stopping by to make sure we're here and available to meet with you.

If you have any questions please call the office and we'll address any concerns you may have for the current tax season.

Thank you for the privilege of serving you.

Mark Br

Mark Bove, AFSP Tax Accountant

We are listed in the IRS directory of Federal Tax Return Preparers with Credentials and Select Qualifications





ENGAGEMENT LETTER CALENDAR YEAR 2021

Taxpayer Name

Spouse Name

SCOPE OF ENGAGEMENT:

We appreciate the opportunity to work with you and to advise you regarding your income tax obligations. In order to ensure we have an understanding of our mutual responsibilities we ask that all clients, for whom returns are prepared, to read and confirm the following arrangements.

- Tax Year: All services quoted will be provided for the 2020 calendar year.
- Like Kind Work: All services quoted are for "like kind work." A general assumption will be made about your work based on prior year tax filings.
- Additional Billing: Any additional items will be discussed and billed at the time of preparation or later, if necessary.
- Engagement Effective Date: January 01, 2021. All fees quoted are valid for the balance of the year.
- Payment of Fees: Unless payment arrangements are made prior to completion of your tax returns, payment for services rendered is expected when our work is complete.

SERVICES PROVIDED UNDER THIS ENGAGEMENT:

- Annual personal tax returns with schedules
- Annual sole proprietor business schedule
- Estimated tax payments
- Tax review
- 1st IRS and or resident state notice received by client Review & reply, if applicable.
- Client communications Phone/text/email at no additional charge
- Client meetings

ADDITIONAL FEES:

- o Additional fees will apply for any advance research to resolve a tax position on your return.
- Audit assistance is billed at an hourly rate of \$75.00. We also offer "Audit Protection" for an additional fee of \$45.00 which is billed in addition to your tax preparation fee and paid when your tax return is completed. This service is provided by a third party, approved by Accounting Consortium, and negates our \$75.00 hourly fee.
- Returned payments for our services will be assessed a \$25.00 return check/payment fee.
- If you fail to pick up your tax returns or request that we mail your completed tax package to you, an \$18.00 fee for Priority Mail Postage and processing will be assessed.

Out of Scope Additional Billing: This will include accounting/tax work for clients/entities not listed on this engagement. If additional fees apply, your approval will be necessary. You will be notified and sent an additional engagement letter.

YOUR RESPONSIBILITIES:

You represent that the information you provide is accurate and complete to the best of your knowledge, supported by records as required by law, including information that may qualify you to receive the Earned Income Tax Credit, Education Credits and the Child and Dependent Tax Credits. We make no audit or other verification of the data you submit. However, we may ask you for clarification of some of the information to establish a reasonable basis for your tax position. We will return to you all your original records. You should retain all documents, cancelled checks, receipts and data that may be necessary to support the completeness of the tax returns to a taxing authority. We only retain electronic copies of documents to support our retention requirement for proof that provides certain tax credits for our clients.

Under the law, the taxpayer has the final burden of responsibility for the accuracy of the tax return, regardless of who ** prepared the return. We urge all clients to review their completed return while in our office. We will not electronically file the tax return until you have approved and signed the return and Form 8879 - IRS efile signature authorization. If you choose not to review the return in the office, we urge you to examine the data when you're home and contact the office within 24 hours if you feel there is an issue that needs our attention prior to electronically filing the return.

RESPONSIBILITIES OF ACCOUNTING CONSORTIUM, INC:

- Strict Client Privacy: Our firm continues to adhere to professional standards of confidentiality that are even more stringent than those required by law. We have always protected the security and privacy of your personal and financial information.
- Information Collected: The only nonpublic personal information we collect is provided to us by you or obtained with your authorization.
- Disclosure of Information: We do not disclose any nonpublic personal information obtained in the course of our practice except as required or required by law or by your request. In all situations, we stress the confidential nature of the information being shared.
- Security of our Clients Information: We may retain records relating to the professional services we provide as well as to comply with professional guidelines and to better serve your professional needs. In order to do this, we maintain strict physical, electronic and procedural safeguards that comply with our professional standards.
- We assume no responsibility for the accuracy of prior year income tax returns prepared by other sources where carry forward information from their return to our return resulted in an inaccuracy on the tax return we prepared.

DISPUTE RESOLUTION:

If any dispute arises between the parties from our professional services or under this engagement letter, the parties agree to submit the dispute for resolution by binding arbitration according to the rules of the American Arbitration Association.

By agreeing to Binding Arbitration, each party agrees to waive its right to a jury trial and agrees to waive its right to have the dispute decided in a court of law. Accounting Consortium will pay one half of the cost of the arbitration and the claimants shall pay the other half.

FILING REQUIREMENTS & EXTENSIONS:

Unless modified by the taxing authorities, tax returns are due on April 18 2022. If you require an extension of time to file, remember that the extension only provides for a late filing of the income tax return. It DOES NOT extend your tax payment liability beyond the tax filing deadline. In order for us to prepare your tax return without having to file an extension, we request that you have your paperwork to us no later than March 31st, otherwise we will automatically file an extension for you, on your behalf. If you prefer for us not to automatically file an extension, you will need to notify us prior to the March 31st deadline. If you present your data to us after March 31st and require a completed tax return by the April 18th deadline, a 25% rush fee will be assessed in addition to our regular pricing.

If the foregoing fairly sets forth your understanding, please sign this engagement letter in the space indicated and return to our office. If any other services or tax returns are requested, please let us know.

Please return all pages of this letter, signing below, when you return your information so that we may begin your return.

We appreciate the opportunity to serve you and we value your business.

Sincerely, Accounting Consortium, Inc

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Mark Bove

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Taxpayer:	Date:
Spouse:	Date:

305 Cooper Road, Ste 200 . Loganville, GA 30052 . 678-696-0829 . tax@accountingconsortium.com



INCOME TAX AND ACCOUNTING

www.accountingconsortium.com tax@accountingconsortium.com

Personal Information:

Individual Income Tax Organizer

Bay Creek Business Center 305 Cooper Road, Ste 200 Loganville, GA 30052

Office: 678-696-0829 | Fax: 866-442-8824 Text: 678-696-0829

TAX YEAR: 2021

Taxpayer Na	ime			SS #		Personal	DOB
Occupation Cell Ph #							
Spouse Na	ime			SS #			DOB
Occupat	ion		Cell Ph #			Personal Email	
Home Addre	ess						
County	of Residence				Home Phone		
MUST HAVE	Taxpayer Dri	vers License or	State ID #				State
THIS INFO		Issue Date :		Expiration Date:			
FOR	Spouse Dri	Spouse Drivers License or State ID # Issue Date :					
EFILE					ration Date: _		
Head of Household Div				Divorced or Sepa	arated During t	he Year?	Married Filing Separate Date:
Depende	ents: 🗆	No Dependents	s - Please (Check This Box	lf You Have N	O DEPEN	DENTS to file with this return
5			Relationship to taxpayers	Child Care Expenses	Disabled	Is dependent a college student If so, What year of study	
1					\$	Y N	1 2 3 4 or Grad Student
2					\$	Y N	1 2 3 4 or Grad Student
3					\$	Y N	1 2 3 4 or Grad Student
4					\$	Y N	1 2 3 4 or Grad Student

Child Care Expenses Note: All of this information is required to qualify for the dependent care tax credit You must include a statement from your daycare provider(s) including their taxpayer ID number

Name of Provider	SS or EIN #	Street Address of Provider	Amount Paid
			\$
			¢

ECONOMIC IMPACT PAYMENT (STIMULUS) & ADVANCED CHILD TAX CREDIT

Accuracy is important when reporting this information. Incorrect figures can impact your refund & delay processing of your return by the IRS

Economic Impact Payments - STIMULUS



Advanced Child Tax Credit

🗆 Y 🗔 N	Did you receive Advance Child Tax Credit Payments?
\$	How much did you receive in the name of the taxpayer?
\$	How much did you receive in the name of the spouse, if any?
🗆 Y 🗔 N	Did you receive IRS Letter 6419? If you did, please include it with your paperwork

FOR TAXPAYERS EXPECTING REFUNDS

Y N Would You Like Direct Deposit of Your Refunds?

If your deposit information is not included with your paperwork, you will receive checks instead of direct deposit

Name of Financial Institution	Routing Number	Account Number	Checking	Savings

If you're depositing into a checking account, attaching a voided check will be sufficient for your direct deposit

Y N If you're expecting to owe income tax to the IRS and, or your state in the following year do you want to carry forward your 2021 refund(s) to be applied to your 2022 anticipated tax debt?

 Y
 N
 Federal

 Y
 N
 State

CP01A

IRS IDENTITY PROTECTION PIN (IP PIN)

If you, your spouse or any dependents were issued an Identity Protection Pin (IP PIN) please provide IRS Notice CP01A that you received which reports to you the IP Pin Number and enter the PIN Numbers below. Your return can not be e-filed without this number

Taxpayer Pin Number
Spouse Pin Number
Dependent Pin Number
Dependent Pin Number
Dependent Pin Number
Dependent Pin Number

IMPORTANTTax identity fraud is on the rise. We make every effort possible to protect your data from identity thieves.INFORMATIONTo protect your account with the IRS, it is strongly recommended that you apply for an IP Pin. There are 2YOU SHOULD KNOWways to apply for the Identity Protection Pin at IRS.gov.

1 The fastest way to receive an IP PIN is by using the online "Get an IP PIN tool." If you wish to get an IP PIN and you don't alread an account on IRS.gov, you must register to validate your identity. The IP PIN tool is available starting in mid-Jan through mid-N 2 Face JBC and dearded and dearded to face and the face for the face for the face of the

2 From IRS.gov, download and complete Form 15227 and mail or fax to the IRS. Instructions are included on the form.

Questions For All Taxpayers:

	Y			Would you like an electronic copy of your tax return in a PDF format, emailed encrypted to you?
H	Y	_		Are either you or your spouse legally blind or declared disabled?
	Y		IN	Did you pay or receive alimony in a divorce order prior to 12-31-18? Paid \$ Received \$
	v		Ν	Recipients Name:
H	Ý	H	N	Did you receive social security benefits or railroad retirement? If so, Include Form SSA1099 and or RRB1099R
H		H		Do you have any educator classroom expenses? If so, are they greater than \$250.00? Amount \$
H	Ŷ			Were any children born or adopted this tax year? Provide adoption costs paid during the tax year
H	Ŷ	H		Did you receive any dividends? If so, include Form 1099DIV
H	Ŷ	H		Did you receive any interest income? If so, include Form 1099INT
H	Ŷ	่่่	N	Did you receive any refund of state and or local tax withholdings? If so, include Form 1099G
H	Ý	_	N	Did you receive any unemployment benefits? If so, include Form 1099G
H	Ŷ	-	N	Did you have distributions from a retirement account? If so, include Form 1099R
H		H		Did you sell your primary residence and did you reside in the home for 2 years or longer? If so, include Form 1099S
H	Ŷ			Did you pay any mortgage interest and real property taxes? If so, include Form 1098
H	Ŷ		N	Do you own any rental property? If so, please see the Rental Real Estate page of this organizer
H	Ý		N	Do you have any children who earned more than \$2,200.00 of investment income?
H	Ŷ			Will there be any significant changes in your income or deductions next year, such as retirement?
H	Ý			Are you self-employed and work from home? If so, please see the Profit or Loss from business page
H	Ŷ			Did you have income and expenses from a car sharing business (Uber or Lyft)?
H	Ý			Did you sell or transfer any stock or sell rental or investment property during the tax year? If so, include Form 1099B
H	Ŷ			Did you incur gains or losses from virtual currencies (Bitcoin, Litecoin, or XPR)?
H	Ý		N	Did you make any contributions to a retirement savings account? If so, see the IRA & Retirement page
H	Ý		N	Did you have any investments become worthless during the tax year?
H	Ý	_		Did you pay any investment interest?
H	Ý			Did you have any income and/or expenses from short-term rentals (Airbnb or HomeAway)?
H	Ý			Did you have any gambling winnings and losses? Please provide Form W2G
H	Ý			Did you have any student loan interest? If so, include Form 1098E
H	Ý	_	N	Did you pay any college tuition? If so, include Form 1098T
H	Ý		N	Did you have distributions from a college savings account? If so, include Form 1099Q
H	Ŷ			Did you receive any income from an installment sale?
H		H		Do you own a business or an interest in a partnership, LLC, corporation or other venture? If so, Include Form K-1
H		H		Were you granted or did you exercise any employer stock options during the tax year?
H	Ŷ			Did you engage in any farming activities?
H	v	H		Have you had any mortgage, credit card or loan debt cancelled during the tax year? If so, Include Form 1099C
H	v	H	N	Have you abandoned any property? If so, Include Form 1099A
H	v	H	N	Are you in bankruptcy?
H	v	H		Are you a member of the military?
H	v	H		Were you a citizen of or live in a foreign country and receive income in that country?
H	v	H		Do you have an interest in or signature over a bank, securities or other financial account in a foreign country?
	'		IN	If so, you will need to complete Form 8938
	v		Ν	Did you have any military moving expenses related to new orders? If so, provide costs to include
	'		IN	Costs to transport your belongings and your travel expenses related to the move
	v		Ν	Have you received any correspondence from the IRS and/or any State taxing agency? If yes, please
	1			provide those notices with your tax documents
	v		Ν	Did you engage in any bartering transactions during the tax year? Include Form 1099B
	'			bid you onguyo in any bartoning iransactions during the tax your : include Form To 775
Sta	te	Re	sic	dency Information:

Y N Were you a full year resident of GA? If not, please list the states and the date you left the state

StateDate LeftStateDate Left

Health Care Information:

\$

Although the penalty no longer applies, if you had health insurance coverage from the government marketplace, you will receive a Form 1095A. Please submit that form with your tax papers. **Y N** Did you receive any distributions from a Health Savings Account (HSA), Archer MSA or Medicare Advantage plan during the year? If so, include Form 1099SA What was the cost of your annual premium(s) paid for medical insurance, including dental & vision plans Y N Did you pay any long term care benefits? If so, include Form 1099LTC Taxpayer Premiums \$_ _ Spouse Premiums \$_ Common Tax Documents That Are Provided To Taxpayers

** Please check the box which applies to you and provide us with the documents that you received **

W-2 W-2G 1099-SSA RRB 1099R	Wage & Tax Statement - How Many Are You Including? Gambling Winnings - How Many Are You Including? Social Security Benefit Statement - How Many Are You Including? Railroad Retirement Payments - How Many Are You Including?
1095-A 1095-B 1095-C	Health Insurance Statement From ACA Marketplace (Obamacare) Health Insurance Statement From Insurance Providers Health Insurance Statement From Employer
1099-NEC	Original Issue Discount Acquisition or Abandonment of Secured Property Proceeds From Broker & Barter Exchange Transactions - <i>You Must Include Basis Information</i> Cancellation of Debt Changes in Corporate Control & Capital Structure Dividends & Distributions Certain Government Payments (Unemployment Compensation & Refunds of State Income Tax) Health Care Tax Credit (HCTC) Advance Payments Interest Income Merchant Card & Third Party Network Payments (Now for payments \$600 & above) Long-term Care & Accelerated Death Benefits Miscellaneous Income Non Employee Compensation (In place of the 1099MISC, Box 7) Taxable Distributions Received From Cooperatives Payments From Qualified Educational Programs (529 Accounts) Distributions From Pensions, IRA's, Annuities, Retirement & Profit Sharing Plans <i>How Many Are You Including?</i> Proceeds From Real Estate Transactions Distributions From HSA or MSA Accounts (Health Savings Accounts)
1098 1098-C 1098-E 1098-MA 1098-T K-1	Mortgage Interest Statement. <i>If you refinanced this tax year, include your closing statement</i> Contributions of Motor Vehicles, Boats & Airplanes Student Loan Interest Mortgage Assistance Payments Tuition/Education Statement - <i>Must Provide ALL pages Including the Payment Summaries</i> Share of Income From S-corporations, Partnerships & Trusts
5498 5498-SA	IRA Contribution Information Health Savings Account Contributions

IRA's and Retirement Plans:

□ Y □ □ Y □	5	your spouse participate in an employer provided retirement plan?						
		Taxpayer: Spouse:			Traditional IF		ROTH ROTH	SEP SEP
□ Y □ □ Y □	 Y I N Did you convert a traditional IRA to a ROTH or Rollover any amounts from a retirement account? Y N Did you receive a distribution from a qualified retirement account? If yes, attach Form 1099-R 							
Estimate	d Tax Pa	yments:	*Please c	omplete t	his section if you	made an	y estima	ited tax payments*
		Federal Paid	Date Paid		State Paid	Date Paid		Refunds from the prior
Quarter 1	(04-15-21)	\$			\$			tax year carried forward
Quarter 2	(06-15-21)	\$			\$			to 2021
Quarter 3	(09-15-21)	\$			\$			Federal \$

Residency & Dependency Requirements:

Proof of residency and dependency is necessary in order to obtain certain filing statuses and to determine that the dependent(s) does in fact reside with the taxpayer and that the taxpayer is legally entitled to certain tax credits.

State \$

Documents that are acceptable to satisfy the residency & dependency requirements.....

Very Important and Necessary

Quarter 4 (01-18-22)

Child care expense statements, dependent child's school record (such as report card or statement from the school), medical bill or statement from a doctor that provides your child's name at your address, a divorce decree that would support the selection of filing as Head of Household, education expenses including Form 1098T from the college or university. The dependent proof documents must include the name of the dependent at the taxpayers address.

NOTES OR OTHER INFORMATION YOU BELIEVE IS NECESSARY FOR THE COMPLETION OF YOUR TAX RETURN

Profit or Loss from Business - *Include additional pages for multiple businesses*

Pusinoss Trado				Employer ID #:
Y N Was this t	ousiness started during 202 ousiness disposed of during	2021?	pleas	eived Forms 1099NEC from your clients, se include them with your paperwork
	ments of \$600 or more paid e Forms 1099MISC for the			employee for services provided to you? e?
Income				
Gross Receipts of Sales	\$	Other Income		_(Describe)
Returns & Allowances	\$	Other Income	e <u>\$</u>	_(Describe)
Expenses				
Advertising	\$	Travel	\$	Business Mileage
Car & Truck Expenses	\$	Parking & Tolls	\$	Personal Mileage
Commissions & Fees	\$	Phone	\$	
Contract Labor	\$	Fuel	\$	Y N Vehicle available for personal use?
Depletion	\$	Internet	\$	Y N Other vehicle available for use?
Employee Benefit Programs	\$	Utilities	\$	Y N Evidence to support deduction?
Insurance (not health)	\$	Wages	\$	Y N Is evidence written?
Interest - Mortgage	\$	Meals 50%	\$	
Interest - Other	\$	Meals 80%	\$	Vehicle Description
Legal & Professional Fees	\$	Meals 100%	\$	Date placed in service
Office Expenses	\$			
Pension & Profit Sharing	\$	Other Expenses	\$	(Describe)
Rent or Lease Equipment	\$	Other Expenses	\$	(Describe)
Rent or Lease Office/Other	\$	Other Expenses	\$	(Describe)
Repairs & Maintenance	\$			-
Supplies	\$	(Capital Eq	uipment Purchased
Property Taxes	\$	Date	_Amount \$	Description
Payroll Taxes	\$			Description
Other Taxes & licenses	\$	Date	_Amount \$	Description
Cost of Goods So				
Inventory at Beginning of Yr	\$	Cost of Labor	\$	_
Inventory at End of Yr	\$	Materials	\$	_
Purchases	\$	Supplies	\$	_
Purchases for Personal Use	\$	Other Costs	\$	(Describe)
Business Use of F	Home Deduction			

We utilize the Simplified Method for calculating the Business Use of Home Deduction. Please provide the following Total Square Feet of Home (Heated Space)_____ Total Square Feet of Area Used For Business_____

Income or Loss from Rental Real Estate - *Include additional pages for multiple properties*

Property Description			Original Purchase Price \$
Address, City, State, Zip			
Property Type (Select One)	Single Family F Commercial Other Rental ([Land Self-rent	ily Residence Vacation / Short Term Rental al Royalties
Number of Days Proper	ty Was Rented_	Number of I	Days Property Was Used For Personal Use
If the rental is a mul	t-dwelling unit &	you occupied part of the un	it, enter the percentage you occupied%
V N This prop	orty is your main	home or second home?	If you received Forms 1099MISC from your tenants,
Y N This prop Y N N This prop Y N N Were pay	erty was dispose erty was owned a ments of \$600 o	who is not your employee for services provided for this rental baid more than \$600?	
Income			
Rental Income	\$		
Royalty Income	\$	- (From Oil, Gas, Mineral,	Copyright or Patents)
Expenses		_	
Advertising	\$	Maintenance	\$
Auto & Travel	\$	- Supplies	\$
Cleaning	\$	Taxes	\$
Commissions	\$	Yard Maint	
Insurance	\$	Utilities	<u>\$</u>
Legal & Professional Fees	\$	Pest Control	\$
Management Fees	\$	HOA Dues	\$
Mortgage Interest	\$	Depletion	\$
Other Interest	\$	Bank Fees	\$
Repairs	\$	Paint	\$
HVAC Replaced	\$	Date of Purchase	
Roof Replaced	\$	Date of Purchase	
Fence Purchased	\$	Date of Purchase	
Appliances	\$	Date of Purchase	Description
Appliances	\$	Date of Purchase	Description
Appliances	\$	Date of Purchase	Description
Appliances	\$	Date of Purchase	Description
Furniture	\$	Date of Purchase	Description
Furniture	\$	Date of Purchase	Description
Furniture	\$	Date of Purchase	Description
Furniture	\$	Date of Purchase	Description
Other Capital Purchase	\$	Date of Purchase	Description
Other Capital Purchase	\$	Date of Purchase	Description