

Schedule E - Income or Loss from Rental Real Estate & Royalties

Name:

SSN:

General Property Information

TSJ

Property description _____

Address, city, state, ZIP _____

Select the property type

Single family residence Vacation / short-term rental Land Self-rental
 Multi-family residence Commercial Royalties Other _____

Number of days property was rented _____ Number of days property was used for personal use _____

If the rental is a multi-dwelling unit and you occupied part of the unit, enter the percentage you occupied _____

- This property was placed in service during 2025.
- This property was disposed of during 2025.
- This property is your main home or second home.
- This property was owned as a qualified joint venture.

Yes No Payments of \$600 or more were paid to an individual, who is not your employee, for services provided for this rental.
 If "Yes," did you file Forms 1099 for the individuals?

Income

2025

2025

Rent income Royalties from oil, gas, mineral, copyright or patent

Expenses

Rental Unit Expenses Rental and Homeowner Expenses

Advertising	.....	.....	If this Schedule E is for a multi-unit dwelling and you lived in one unit and rented out the other units, use the "Rental and homeowner expenses" column to show expenses that apply to the entire property. Use the "Rental unit expenses" column to show expenses that pertain ONLY to the rental portion of the property.
Auto & travel	.....	.....
Cleaning & maintenance	.....	.....
Commissions	.....	.....
Insurance	.....	.....
Legal & professional fees	.....	.....
Management fees	.....	.....
Mortgage interest	.....	.....
Other interest	.....	.....
Repairs	.....	.....
Supplies	.....	.....
Taxes	.....	.....
Utilities	.....	.....
Depletion	.....	.....
Other expenses	.....	.....

If this Schedule E is for a multi-unit dwelling and you lived in one unit and rented out the other units, use the "Rental and homeowner expenses" column to show expenses that apply to the entire property. Use the "Rental unit expenses" column to show expenses that pertain ONLY to the rental portion of the property.

If the Schedule E is not for a multi-unit property in which you lived in one unit, complete just the "Rental unit expenses" column.

Expenses Related to Business

Name:

SSN:

Auto Expense

Name of business vehicle is used for _____

Description of vehicle _____ Date vehicle was placed in service _____

Yes No

Was this vehicle available for use during off-duty hours?
 Was another vehicle available for personal use?

Yes No

Do you have evidence to support your deduction?
 If "Yes," is the evidence written?

Mileage

Number of miles the vehicle was driven during 2025

Business Other

Commuting

Expenses

Garage rent Repairs

Gas Tires

Insurance Tolls

Licenses Lease addback

Oil Other expenses

Parking fees _____

Rental fees _____

Interest _____

Property tax _____

Business Use of Home

Name of business home is used for _____

What is the total square footage of your home that was used regularly and exclusively for business? _____

What is the total square footage of your home? _____

For daycare facilities not used exclusively for business, complete the following questions

How many days during the year was the area used? _____

How many hours per day was the area used? _____

 The daycare facility was in operation for the entire year

Expenses

Office expenses

Home expenses

Mortgage interest _____

In the "Office expenses" column,

Real estate taxes _____

enter those expenses that

Excess mortgage interest _____

pertain exclusively to your office;

Excess real estate taxes _____

in the "Home expenses" column,

Insurance _____

enter those expenses that

Rent _____

pertain to the entire dwelling.

Repairs & maintenance _____

Utilities _____

Other expenses _____