

INDIVIDUAL TAX RETURN ORGANIZER TAX YEAR 2024

Rental Property

| Hoskins Quiros Patel & Loid, CPA, LLC 1201 6th Ave West, Suite 324 Bradenton, FL 34205 941-358-8275 Fax 407-227-2841 | | |
|----------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|--------|
| Taxpayer: | | |
| Rental Property: | | |
| Address of Rental Property: | | |
| Street | | |
| City State | : Zip: | |
| Did you materially participate in business? $\Box Y \Box N$ | | |
| Did you make any payments in 2024 that would requ | uire you to file Form(s) 1099? 🛛 Y 🗆 | IN |
| If yes, Did you or will you file required Form(s) 1099 | ?? 🗆 Y 🗆 N | |
| How many days did you personally use the property | ? | |
| Were you actively managing the property? $\Box Y \ \Box N$ | | |
| Rent | Bank Fees | |
| Expenses: | Dues and Subscriptions | |
| Advertising | Utilities | |
| Auto and Travel | HOA | |
| Cleaning and Maintenance | | |
| Commissions | Other Expenses: | |
| Insurance | Description | Amount |
| Legal and Professional | | |
| Interest | | |
| Repairs | | |
| Taxes | | |
| | | |

Signature(s)

I/We believe that the information disclosed in this organizer to be complete & accurate. I /We understand that incorrect or incomplete information may result in an erroneous return.

Sign form by typing your name in the block provided.

| Taxpayer I: | Date: |
|-------------|-------|
| | |

 Taxpayer 2:
 Date: