

From:

To:

SHERMAN, KELLY & ASSOCIATES, P.C.
P.O. BOX 1455
SOUTH DENNIS, MA 02660

A barcode consisting of vertical bars of varying heights, used for automated mail sorting.

This information is complete and correct to the best of my (our) knowledge.

Taxpayer signature _____ Date _____

Spouse signature _____ Date _____

Preparer use only

2025 Information

Prior Year Information

Description _____ [2]
Taxpayer/Spouse/Joint (T, S, J) ____ [3] State postal code _____ [5]
Physical address: Street _____ [6]
City, state, zip code _____ [7] ____ [8] _____ [9]
Foreign country _____ [11]
Foreign province/county _____ [12]
Foreign postal code _____ [13]
Type (1=Single-family, 2=Multi-family, 3=Vacation/short-term, 4=Commercial, 5=Land, 6=Royalty, 7=Self-rental, 8=Other, 9=Personal ppty) [14]
Description of other type (Type code #8) _____ [15]
Did you make any payments in 2025 that require you to file Form(s) 1099? (Y,N) _____ [16]
If "Yes", did you or will you file all required Forms 1099? (Y, N) _____ [18]
Fair rental days (If not full year) (For types 1, 2, 4, 5, 7 and 8 only) (Use Rent-2 for type 3) _____ [20]
Percentage of ownership if not 100% _____ [22]
Business use percentage, if not 100% (Not vacation home percentage) _____ [24]

Rent and Royalty Income

Rents and royalties

2025 Information

Prior Year Information

_____ + _____ [33]

Rent and Royalty Expenses

2025 Information

Percent if not 100%

Prior Year Information

Advertising + _____ [35] _____ [36]
Auto + _____ [38] _____ [39]
Travel + _____ [41] _____ [42]
Cleaning and maintenance + _____ [44] _____ [45]
Commissions: _____ + _____ [47] _____ [49]
_____ + _____
Insurance: _____ + _____ [50] _____ [52]
_____ + _____
Legal and professional fees + _____ [54] _____ [55]
Management fees: _____ + _____ [57] _____ [59]
_____ + _____
Mortgage interest paid to banks, etc (Form 1098) _____ + _____ [60] _____ [62]
_____ + _____
Other mortgage interest + _____ [63] _____ [65]
Qualified mortgage insurance premiums + _____ [66] _____ [67]
Other interest: _____ + _____ [69] _____ [71]
_____ + _____
Repairs + _____ [72] _____ [73]
Supplies + _____ [75] _____ [76]
Taxes: _____ + _____ [78] _____ [80]
_____ + _____
Utilities + _____ [81] _____ [82]
Depreciation + _____ [84] _____ [85]
Depletion + _____ [87] _____ [88]
Other expenses: _____ + _____ [90]
_____ + _____
_____ + _____
_____ + _____

Control Totals +

Form ID: Rent