

INCOME & EXPENSE DATA WORKSHEET

INSTRUCTIONS

Enter 2021

Enter Property Address

Annual Income and Expense Statement for the year ending: _____

Property Address: _____

PROPERTY USE (check all that apply):

☐ Apartment

☐ Office

☐ Retail

☐ Mixed Use

☐ Shopping Center

☐ Industrial

☐ Other

CHECK HERE IF ANY PART OF THIS PROPERTY IS OWNER OCCUPIED: ☐

It is critical to check this box if you are using all or part of the property yourself

1. Total gross building area

(Including owner-occupied space)

2. Owner-occupied area

3. Net Leasable area

4. Number of rental units, including owner-occupied

Sq. Ft.

Sq. Ft.

Sq. Ft.

5. Number of parking spaces

6. Actual Year Built, if known

7. Year Remodeled

Enter **Net Sq Ft** excluding common areas

ACTUAL GROSS INCOME *

9. Apartment Rents (From Schedule A)

10. Office Rents (From Schedule B)

11. Retail Rents (From Schedule B)

12. Mixed Rents (From Schedule B)

13. Shopping Center Rents (From Schedule B)

14. Industrial Rents (From Schedule B)

15. Other Rents (From Schedule B)

16. Parking Rents

17. Other Misc income (e.g. CAM, INS or TAX Reimbursement)

18. TOTAL ACTUAL GROSS INCOME =

19. Less, losses from vacancy and credit collection

20. EFFECTIVE GROSS ANNUAL INCOME =

* Do not include estimates for vacancies

This is how much
income your property
would rent for if fully
occupied and leased

Subtract Line 19 from Line 18: Typically,
this amount would match income
reported on IRS Form 8825 or Schedule E

Enter all losses due to vacancy and credit

LESS, ACTUAL EXPENSES

21. Heating fuel

22. Gas and electricity

23. Water and sewer

24. Other utilities

25. Payroll (do not include management)

26. Supplies

27. Management

28. Insurance

29. Common Area Maintenance

30. Leasing Fees/Commissions/Advertising

31. Legal and Accounting

32. Elevator maintenance

33. Tenant improvements

34. General repairs

35. Other (specify) _

36. Other (specify) _

37. Other (specify) _

38. Reserves

39. Security

40. TOTAL ACTUAL EXPENSES =

41. NET OPERATING INCOME =

DO NOT INCLUDE TAXES, DEPRECIATION OR MORTGAGE PAYMENTS AS AN EXPENSE

Subtract Line 40 from Line 20

Apartment Income is reported on a **Monthly** Basis

Unit Type	No. Of Units				Unit Size	Monthly Rent		Typical
	Total	Rented	Rooms	Baths		Sq. Ft.	Per Unit	Total
Efficiency								
1 Bedroom								
2 Bedroom								
3 Bedroom								
4 Bedroom								
Other rentable units								
Owner/manager occupied								
Subtotal								
Parking								
Other income (specify)								
TOTAL								

ITEMS INCLUDED IN RENT

- ☐ Heat
- ☐ Electricity
- ☐ Other utilities
- ☐ Air conditioning
- ☐ Stove/Refrigerator
- ☐ Dishwasher
- ☐ Other (specify):
- ☐ Furnishings
- ☐ Security
- ☐ Pool
- ☐ Tennis courts
- ☐ Parking
- ☐ Garbage disposal

SCHEDULE B - OTHER NON-APARTMENT RENT SCHEDULE

<u>Tenant Name</u>	<u>Floor Location</u>	<u>Lease Terms</u>				<u>Annual Rent</u>		<u>Parking</u>		<u>Interior Finish</u>		
		Start Date	End Date	Sq. Ft. Rented	Base Mthly Rent \$	Escal/CAM/Overage	Total Rent \$	# of Spaces	Annual Rent \$	Owner Provided	Tenant Provided	If Owner Provided, \$ Cost to Fit Up/Renovate
TOTAL												

Total Annual Rent Includes and CAM, Taxes, Insurance, Escalations and/or Percentage Rent

Check Box(es) if tenant and/or owner provided fit up for leased space

Indicate the dollar amount of **fit up costs**

COPY AND ATTACH IF ADDITIONAL PAGES ARE NEEDED

PARCEL ID: _____

PURCHASE PRICE VERIFICATION

~ Complete this section if the property was purchased within the last 10 years ~

~ ALL OWNERS MUST SIGN AND DATE THE ATTESTATION BELOW ~

Purchase Price: \$ _____ Down Payment: \$ _____ Purchase Date: _____
Selling Broker: _____ Broker Telephone #: _____
Date of Last Appraisal: _____ Appraisal Firm: _____ Appraised Value: \$ _____

First Mortgage: \$ _____ Interest Rate: _____ % Payment Schedule Term: _____ Years ☐ Fixed ☐ Variable

Did the purchase price include monies allocated for: Furniture? \$ _____ Equipment? \$ _____ Other? \$ _____

PROPERTY CONDITION: _____

ESTIMATE OF REPAIRS NEEDED AT THE TIME OF SALE: \$ _____

Has the property been listed for sale since your purchase? ☐ Yes ☐ No

If yes, provide list price: \$ _____ Date listed: _____ Listing broker: _____ Broker's Telephone #: _____

COMMENTS: Please explain any special circumstances, or extraordinary factors that affected the purchase price, e.g., vacancy, seller motivation, conditions of sale, property condition, favorable seller financing, etc. Use this area for any other helpful information or comments.

**VERY IMPORTANT TO SIGN
AND DATE**

ATTESTATION:

I DO HEREBY DECLARE THAT THE FOREGOING INFORMATION, ACCORDING TO THE BEST OF MY KNOWLEDGE, MEMORY AND BELIEF, IS A COMPLETE AND TRUE STATEMENT OF ALL INCOME AND EXPENSES ATTRIBUTABLE TO THE ABOVE IDENTIFIED PROPERTY.

Signature: _____ Name (Print): _____ Date: _____

Title: _____ Telephone #: _____