

Name of Estate or Trust

Alabama Department of Revenue Supplemental Income and Loss

2019

Federal Employer Identification Number

(From Rental Real Estate, Royalties, Partnerships, S Corporations, Estates, Trusts, etc.)

► ATTACH TO FORM 41. ► SEE INSTRUCTIONS FOR SCHEDULE E (FORM 41).

1 Show the kind and location of each Rental Real Estate Property:							2 For ea	2 For each rental real estate property Y						
A •							ed on line 1, did you or your family		Α .					
								during the tax year					<u> </u>	
B ●								es for more than t	ne greater of:		В	•	•	
							• 14 da	•	بلمند	-4 f-:-			┼	
C)							of the total days re I value?	ntea a	at fair	С	•	•	
			T		Dro	perties	Terria	i value :	Г		- de la			
Income:			Α		110	B	С			Totals (Add Columns A, B, and C)				
3	Rents received.	3	•	00	•	00	•	00	<u>'</u>	•		., _,	00	
4	Royalties received	_	•	00		00		00	4	_			00	
	enses:							30	Ť				+ 33	
	Advertising	5	•	00	•	00	•	00						
6	Auto and travel	6	•	00	•	00	•	00						
7	Cleaning and maintenance	7	•	00	•	00	•	00						
8	Commissions	8	•	00	•	00	•	00	1					
9	Insurance	9	•	00	•	00	•	00						
10	Legal and other professional fees	10	•	00	•	00	•	00						
11	Management fees	11	•	00	•	00	•	00						
12	Mortgage interest	12	•	- 00	•	00	•	00	12	•			00	
13	Other interest	13	•	00	•	00	•	00						
14	Repairs	14		00	•	00	•	00						
15	Supplies	15		- 00	•	00	•	00						
16	Taxes	16	•	00	•	00	•	00						
17	Utilities	17	•	00	•	00	•	00	-					
18	Other (list) ► _	18	•	00	•	00	•	00	-					
	•		•	00	•	00	•	00	-					
	•		•	- 00	•	00	•	00	-					
	•		•	00		00	•	00	-					
10	Add lines 5 through 18	19	•	00	•	00	•	00	10				00	
19	•	20	•	00	•	00	•	00	19	•			00	
20 21	Depreciation expense or depletion	21	1	00	_	00	•	00	20	-			00	
22	Income or (loss). Subtract line 21 from line 3 (rents) and/or	- 21		100		00		00	1					
22	line 4 (royalties)	22		00		00		00						

PART II	Income or (loss) from Partnerships and/or S Corporations	(h) \	(i) Federal Employer			(j)			
	(g) Name and Address	Check One	Ship	tion	Identification Number			Amount	
•			•	•	•		•		00
•			•	•	•		•		00
•			•	•	•		•		00
•			•	•	•		•		00
24 TOTAL	INCOME OR (LOSS) FROM PARTNERSHIPS AND/OR S CORPORATION	S. Add the amounts in	Colum	nn (j).					Т
Enter the total here and include on line 25 below							•		00
25 TOTAL INCOME OR (LOSS). Combine lines 23 and 24. Enter total here and on Form 41, page 3, Schedule C, Column C, line 5a, or Schedule G, Column a, line 5							•	·	00

PART III Income (or loss) from Estates and/or Trusts (k) Name and Address	(I) Check One			(m)	Federal Employer Identification Number		(n) Amount		
•		•	•	•			•	0	00
•		•	•	•			•	О	00
•		•	•	•			•	C	00
•		•	•	•			•	0	00
26 TOTAL INCOME OR (LOSS) FROM ESTATES AND/OR TRUSTS. Add the amounts in column (n). Enter total here and on Form 41, Schedule C, Column C, line 5b, or Schedule G, Column a, line 6								0	00

ADOR Schedule E (Form 41) 2019