

Name of Estate or Trust



Alabama Department of Revenue Supplemental Income and Loss

2023

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:								For each rental real esta	ate property			Yes	No	
A								listed on line 1, did you	r for personal		Α			
								use it during the tax year				_	ļ	
В								purposes for more than	the gr	he greater of:		•	•	
								• 14 days, or		-4.6-1				
С								10% of the total days r rental value?	entea	at tair	С	•	•	
						Properties		rental value?	1					
Inc	Income: A B							C	\dashv $_{\prime}$	Totals (Add Columns A, B, and C)				
	Rents received	3	•	00	•	00				•	7	ι, Β, αι	00	
4	Royalties received		•	00		00	_						00	
Fyr	enses:			100		00	+	00	+ -	+			100	
	Advertising	5	•	00	•	00		00						
6	Auto and travel	6	•	00	•	00	_		-					
7	Cleaning and maintenance	7	•	00	•	00	_		_					
8	Commissions	8	•	00	•	00	_		_					
9	Insurance	9	•	00	•	00	_		-					
10	Legal and other professional fees	10	•	00	•	00	_	00	1					
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						
	<u>•</u>		•	00	•	00	•	• 00						
	<u>•</u>		•	00	•	00	_	- 00	_					
	•		•	00	•	00	_	- 00	_					
19	Add lines 5 through 18	19	•	00	•	00	_	- 00	_				00	
20	Depreciation expense or depletion	20	•	00	•	00	_	00		•			00	
21	•	21	•	00	•	00		00	4					
22	Income or (loss). Subtract line 21 from line 3 (rents) and/or													
	line 4 (royalties)	22	•	00	•	00		00		1				

Schedule E (Form 41) 2023 ADOR



SCHEDULE E FORM 41 - 2023



PART II Income or (loss) from Partnerships and/or S Corporations (g) Name and Address	(h) Ratifice S	Corpora	tion	(i)	Federal Employer Identification Number	(j)	Amount	
		•	•	•		•		00
		•	•	•		•		00
		•	•	•		•		00
		•	•	•		•		00
24 TOTAL INCOME OR (LOSS) FROM PARTNERSHIPS AND/OR S CORPORATIONS	6. Add the amounts in 0	Colum	ın (j).					
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 line 5a, or Schedule G, Column a, line 5		-			> 25	•		00

PART III Income (or loss) from Estates and/or Trusts (k) Name and Address	(I) Check One Sign They			(m) Federal Em Identifica Numbe	tion	(n) Amount		
		•	•	•		•		00
		•	•	•		•		00
		•	•	•		•		00
		•	•	•		•		00
26 TOTAL INCOME OR (LOSS) FROM ESTATES AND/OR TRUSTS. Add the amour Enter total here and on Form 41, Schedule C, Column C, line 5b, or Schedule G, Column C, line 5b, or Schedule C, Column C, line 5b, or Schedul	` '				▶ 26	•		00

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