



MONTANA DEPARTMENT OF REVENUE INCOME & EXPENSE REPORTING FORM

Geo-code:
Assessment Code:

Name & Address:

Person filing this form (If different from above)

Return to: Department of Revenue PO Box 5805 Helena, MT 59604-5805

The Montana Department of Revenue requests the following applicable information to help us determine equitable values for assessment purposes. Please send your completed form back in the self-addressed envelope within 10 days. If you have questions or require assistance please call the local Department of Revenue Office at . Income and expense data is not a matter of public record and is held strictly confidential in accordance to 15-30-303 MCA. Leases are acceptable documentation.

PROPERTY DATA OFFICE / RETAIL / WAREHOUSE / MINI-WAREHOUSE / APARTMENT
PROPERTY ADDRESS:
BUILDING NAME:
STRUCTURE TYPE:

Table with 2 columns: Description and Amount. Rows include Reported Income (lines 1-12) and Expenses (lines 13-34). Total NET OPERATING INCOME is line 34.

ANNUAL RENTAL DATA (OFFICE, RETAIL, AND WAREHOUSE)										
Floor Level		Square Feet of Leased Area	Term of Lease		Annual Base Rent	Additional Annual Income	Annual Average Income	Utilities Included in Rent (check all that apply)		
			From Year	To Year				Electric	Water	Gas
From:	To:				\$	\$	\$			
From:	To:				\$	\$	\$			
From:	To:				\$	\$	\$			
From:	To:				\$	\$	\$			
From:	To:				\$	\$	\$			
From:	To:				\$	\$	\$			
From:	To:				\$	\$	\$			
From:	To:				\$	\$	\$			
From:	To:				\$	\$	\$			

MONTHLY RENTAL DATA - APARTMENTS										
Efficiency/Studio Apartments						Garage / Storage Rent	Utilities Included in Rent (check all that apply)			
Furnished	Units @	\$	# of Bathrooms		\$		Electric	Water	Gas	Cable TV
Unfurnished	Units @	\$	# of Bathrooms		\$					
Furnished	Units @	\$	# of Bathrooms		\$					
Unfurnished	Units @	\$	# of Bathrooms		\$					
1 Bedroom Units						Garage / Storage Rent	Utilities Included in Rent (check all that apply)			
Furnished	Units @	\$	# of Bathrooms		\$		Electric	Water	Gas	Cable TV
Unfurnished	Units @	\$	# of Bathrooms		\$					
Furnished	Units @	\$	# of Bathrooms		\$					
Unfurnished	Units @	\$	# of Bathrooms		\$					
2 Bedroom Units						Garage / Storage Rent	Utilities Included in Rent (check all that apply)			
Furnished	Units @	\$	# of Bathrooms		\$		Electric	Water	Gas	Cable TV
Unfurnished	Units @	\$	# of Bathrooms		\$					
Furnished	Units @	\$	# of Bathrooms		\$					
Unfurnished	Units @	\$	# of Bathrooms		\$					
3 Bedroom Units						Garage / Storage Rent	Utilities Included in Rent (check all that apply)			
Furnished	Units @	\$	# of Bathrooms		\$		Electric	Water	Gas	Cable TV
Unfurnished	Units @	\$	# of Bathrooms		\$					
Furnished	Units @	\$	# of Bathrooms		\$					
Unfurnished	Units @	\$	# of Bathrooms		\$					
4 Bedroom Units						Garage / Storage Rent	Utilities Included in Rent (check all that apply)			
Furnished	Units @	\$	# of Bathrooms		\$		Electric	Water	Gas	Cable TV
Unfurnished	Units @	\$	# of Bathrooms		\$					
Furnished	Units @	\$	# of Bathrooms		\$					
Unfurnished	Units @	\$	# of Bathrooms		\$					

MONTHLY RENTAL DATA - MINI-WAREHOUSES					
Unit Size		# Of Units	Monthly Rent	Project Amenities (check all that apply)	
x			\$	Security	
x			\$	On-site Manager	
x			\$	Electricity	
x			\$	Temperature Controlled Units	
x			\$	Yard Lights (leased)	
x			\$	Yard Lights (owned)	
x			\$	Fencing	
x			\$	Other	

Signed: _____ Dated: _____

Signature of Owner or Preparer

Print Name and Title

Telephone No. With Area Code