

SCHEDULE D - LEASED OR RENTED EQUIPMENT

Account #

Tax Year **2024**

Name and Address of Lessor	Description	QTY	Date and Term of Lease	Cost at Beginning of Lease / Annual Rent
----------------------------	-------------	-----	------------------------	--

EXAMPLE

Name of Lessor
ABC LEASING

Lessor Address
**123 North Pole Cr. Suite 222
Salt Lake City, UT 88888**

Lease Agreement #
123456789

Description
DENTAL LASER

QTY	Date	Cost at Beginning
1	12-20-22	49179
	Term	Annual Rent
	60 MOS	
Asset ID #		

Name of Lessor

Lessor Address

Lease Agreement #

Description

QTY	Date	Cost at Beginning
<input style="width: 40px; height: 30px;" type="text"/>	<input style="width: 100%; height: 30px;" type="text"/>	<input style="width: 100%; height: 30px;" type="text"/>
	Term	Annual Rent
	<input style="width: 100%; height: 30px;" type="text"/>	<input style="width: 100%; height: 30px;" type="text"/>
Asset ID #		

Name of Lessor

Lessor Address

Lease Agreement #

Description

QTY	Date	Cost at Beginning
<input style="width: 40px; height: 30px;" type="text"/>	<input style="width: 100%; height: 30px;" type="text"/>	<input style="width: 100%; height: 30px;" type="text"/>
	Term	Annual Rent
	<input style="width: 100%; height: 30px;" type="text"/>	<input style="width: 100%; height: 30px;" type="text"/>
Asset ID #		

Name of Lessor

Lessor Address

Lease Agreement #

Description

QTY	Date	Cost at Beginning
<input style="width: 40px; height: 30px;" type="text"/>	<input style="width: 100%; height: 30px;" type="text"/>	<input style="width: 100%; height: 30px;" type="text"/>
	Term	Annual Rent
	<input style="width: 100%; height: 30px;" type="text"/>	<input style="width: 100%; height: 30px;" type="text"/>
Asset ID #		