

# SPECIALTY WORK SHEET for SALE OF PROPERTY

In order to maximize your deductions, please complete this form.

CLIENT \_\_\_\_\_

TAX YEAR \_\_\_\_\_

Please bring in **CLOSING STATEMENT** for when you **PURCHASED** property.

Please bring in **CLOSING STATEMENT** for when you **SOLD** property.

Type of property sold: \_\_\_\_\_

Was property ever used as rental property: ☐ Yes ☐ No

Location of property sold: \_\_\_\_\_

Date Sold: \_\_\_\_\_

**SALE PRICE:** \$ \_\_\_\_\_

Date Purchased: \_\_\_\_\_

**PURCHASE PRICE:** \$ \_\_\_\_\_

## ADDITIONAL PURCHASE COSTS:

Credit Report	\$ _____	Reconveyance Fee	\$ _____
Escrow Fee	_____	Recording Document	_____
Legal Fees	_____	Termite Report	_____
Loan Fees	_____	Title Policy	_____
Notary Fee	_____		_____

## IMPROVEMENT COSTS:

Air Conditioner	\$ _____	Landscaping	\$ _____
Carpeting	_____	Patio	_____
Drapes	_____	Plumbing	_____
Electrical	_____	Remodeling	_____
Fences	_____	Roof Improvements	_____
Fixtures	_____	Walks	_____
Floor Improvements	_____		_____
Garage	_____		_____
Heating	_____		_____
Insulation	_____		_____

## SELLING EXPENSES:

Credit Report	\$ _____	Reconveyance Fee	_____
Escrow Fee	_____	Recording Document	_____
Legal Fee	_____	Termite Report	_____
Loan Fees	_____	Title Policy	_____
Notary Fee	_____		_____
Realtor's Commission	_____		_____

## FIXING UP EXPENSES (Last 90 days):

Electrical	\$ _____	_____	_____
Glass and Screens	_____	_____	_____
Paint	_____	_____	_____
Plumbing	_____	_____	_____

**TOTAL COST:** \$ \_\_\_\_\_ 0.00

**NET GAIN:** \$ \_\_\_\_\_ 0.00

If property was sold on contract: Down Payment at time of sale: \$ \_\_\_\_\_  
Contact balance on 12/31 \$ \_\_\_\_\_

Was the property sold your principal residence in 2 of the last 5 years? ☐ Yes ☐ No

Was the property sold used as a home/office in year of sale? ☐ Yes ☐ No

Amount of Depreciation, if any, allowed on property sold: \$ \_\_\_\_\_

Have you ever deferred any gain on the sale of exchange of a personal residence? ☐ Yes ☐ No

Date: \_\_\_\_\_ Amount of previous gain: \$ \_\_\_\_\_

I DECLARE THIS TO BE A TRUE, COMPLETE AND CORRECT DOCUMENT

TAXPAYER'S SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_