

NAME: \_\_\_\_\_

SALE OF RESIDENCE  
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2011 INDIVIDUAL INCOME TAX DATA SHEET

SALE OF RESIDENCE

(Please enclose copies of the HUD-1 closing statement)

1. Has your old residence been your principle residence for two of the last five years?  Yes  No
2. Was the selling price of your old residence less than \$250,000. for single filers or \$500,000. for taxpayers married filing jointly (provided property was jointly owned)?  Yes  No
3. Has your old residence been your principle residence for 5 consecutive years during the last 8 years?  Yes  No
4. Did you claim the First Time/Long Term Home Owner Credit in a prior year?  Yes  No  
Year \_\_\_\_\_ Amount \$ \_\_\_\_\_

IF EITHER QUESTION 1 OR 2 ARE MARKED NO - PAGE 2 MUST BE COMPLETED.

5. Did you use your old residence for business?  Yes  No  
If Yes:  
a) Total Square footage of old residence \_\_\_\_\_  
b) Total business use square footage \_\_\_\_\_  
c) Date old residence purchased \_\_\_\_\_  
d) Date old residence sold \_\_\_\_\_  
e) Total months used for business \_\_\_\_\_
6. Will you use your new residence for business?  Yes  No  
If Yes:  
a) Total square footage of new residence \_\_\_\_\_  
b) Total business use square footage \_\_\_\_\_

NOTES: If you sold any residence prior to May 7, 1997, please attach Form 2119 from the return on which the sale was reported.

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(Please enclose copies of the HUD-1 closing statement)

Original Purchase: Old Residence Address: \_\_\_\_\_

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

Purchase Price: \$ \_\_\_\_\_

Attorney Fees: \_\_\_\_\_

Title or other charges: \_\_\_\_\_

Improvements: (Other than normal decorating)

Tile/Carpeting: \_\_\_\_\_

Roofs: \_\_\_\_\_

Furnaces: \_\_\_\_\_

Fences: \_\_\_\_\_

Exterior Shrubs, Lawns (Excluding Normal Maint.) \_\_\_\_\_

Other: Itemize (By Year or Item) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

"Fix Up" Expenses Incurred 60 days before sale: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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

Sales Price: \$ \_\_\_\_\_

Expenses of Sale:

Realty Commissions or Advertising: \$ \_\_\_\_\_

Attorney Fees: \_\_\_\_\_

Title Search, Appraisal, Inspections: \$ \_\_\_\_\_

Other: Itemize \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Was the sale of this residence related to a change in employment,  
job location or health reasons?  YES  NO