1099 Reporting Worksheet

Provided by Signature Information Solutions LLC

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Section 6045(e) of the Internal Revenue Code, as amended by the Tax Reform Act of 1986, requires that information regarding certain real estate transactions be reported to the Internal Revenue Service. You are required to provide the closing agent with your correct taxpayer identification number. If you fail to furnish the required information and your correct taxpayer identification number, you may be subject to civil or criminal penalties imposed by law.

SELLER INFORMATION:

Taxpayer ID Number: _____ Type of Taxpayer ID Number: ☐ Social Security Number ☐ Employer ID Number

Seller Name Line 1: _____

Seller Name Line 2: _____

(cont'd.) Line 2 provided for spouse, trustee or business name of sole proprietorship. Use a separate form to report multiple sellers.

Forwarding Address (as of 1/31 next year): Street: _____

City: _____ State: _____ Zip: _____

FOREIGN DISCLOSURE (MANDATORY REQUIREMENT):

Is the seller a foreign person (nonresident alien, foreign partnership, foreign estate or foreign trust? ☐ Yes ☐ No

PROPERTY INFORMATION:

Brief Property Description: Block _____ Lot _____ Street Address _____

City _____ State _____ Zip _____

Contract Sale Price or Gross Proceeds: $ _____ Gross Allocated Proceeds: (multiple sellers) $ _____

Buyer's Portion of Real Estate Tax (i.e., tax credits received by seller): $ _____

Type of Property: ☐ Principal Residence ☐ Other Real Estate

Closing Date: _____ Exchange of other property or services (as part of consideration): ☐ Yes ☐ No

SELLER CERTIFICATION:

Under penalties of perjury, I certify that the above information is correct and that the number shown on this statement is my correct taxpayer identification number. Furthermore, I understand that this information will be furnished to the Internal Revenue Service.

Date: _____ **Signature:** _____

(Seller) Please indicate if Power of Attorney or Attorney in Fact

CLOSING AGENT OR ATTORNEY INFORMATION
(all information required by IRS)

_____
CJ Account Number

_____ _____
Name Telephone Number

_____ _____
Address Taxpayer ID Number

_____ _____
City State Zip Your Case/File Number

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