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The filing fee per reporting form is \$10.00 (if you enter online, the fee is \$7.00). After January 10th, add \$5.00 per reporting form for previous tax year.

# 1099-S Reporting Form

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.

(PLEASE PRINT OR TYPE)

[ ] CORRECTED FORM

### 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: \_\_\_\_\_

### 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