INDIVIDUAL CAPITAL GAINS INCOME DECLARATION SHEET

Tax Year: _____

1. Taxpayer Information

Full Name _____

Tax Identification Number (TIN / SSN) _____

Address _____

Contact Number / Email _____

2. Schedule of Capital Gains & Losses

Description of Asset	Date Acquired	Date Sold	Acquisition Cost	Sale Proceeds	Allowable Expenses	Net Gain / (Loss)
		Totals:				

3. Summary of Capital Gains

Total Short-Term Capital Gains _____

Total Short-Term Capital Losses _____

Total Long-Term Capital Gains _____

Total Long-Term Capital Losses _____

NET TAXABLE CAPITAL GAIN _____

4. Declaration & Authorization

I hereby declare that the information provided in this Capital Gains Income Declaration Sheet is true, correct, and complete to the best of my knowledge and belief, and is made in accordance with applicable tax laws and regulations.

_____

Taxpayer Signature

_____

Date

Note: Please attach supporting documents for all transactions listed above, including acquisition contracts, sales agreements, valuation reports, and expense receipts.