

Reverse Exchange Worksheet for Leasehold Improvements

Exchangor Information:

Name: _____

Individual(s) Trust

Partnership Corporation State of Formation: _____ Other _____

Contact Person, if not an Individual: _____

Mailing Address: _____

Phone: _____ Email: _____

Affiliate / Titleholder Information:

LLC Corporation Partnership Other _____

Name: _____ State of formation _____

Property Information

Address or Legal Description: _____

County: _____ State: _____ Date acquired by Affiliate: _____

Brief description of improvements to be made _____

Estimated value of improvements _____

Relinquished Property Information:

Address or Legal Description: _____

County: _____ State: _____ Expected Close Date: _____

Estimated amounts, if known:

Expected Sale Price: _____

Mortgage Payoff: _____

Cost Basis: _____

**Reverse Exchange Worksheet
for Leasehold Improvements**

Exchangor's Legal / Tax Advisor, if any:

Firm Name: _____

Contact Name: _____

Phone: _____ Email: _____

Replacement Property Lender, if any:

Firm Name: _____

Contact Name: _____

Phone: _____ Email: _____

Relinquished Property Escrow / Closer, if known:

Company Name: _____

Contact Name: _____ File # _____

Phone: _____ Email: _____