

Line	Description	Amount	Amount
1	Dividends		
2	Capital gain distributions		
3	Qualified dividends		
4	Other income		
5	Net capital gain		
6	Net rental income		
7	Net self-employment income		
8	Net unearned income		
9	Net tax-exempt income		
10	Net tax-exempt interest		
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100	Net tax-exempt interest		

Signature _____ Date _____
 Name _____
 Address of filer _____
 Phone No. _____
 E-mail _____