

Name _____

SSN _____

Dividend Income

Please provide copies of all Form 1099-DIV or other statements reporting dividend income.

* F/S/J - enter ownership (F)iler, (S)pouse, or (J)oint.

		Ordinary Dividends		Qualified Dividends		Capital Gains	
		Current Year Amount	Prior Year Amount	Current Year Amount	Prior Year Amount	Current Year Amount	Prior Year Amount
	1						
	2						
	3						
	4						
	5						
	6						
	7						
	8						
	9						
	10						
	11						
	12						
	13						
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	42						
	43						
	44						
	45						

*F/S/J	Payer	
	1	1
	2	2
	3	3
	4	4
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	7	7
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	9	9
	10	10
	11	11
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	42	42
	43	43
	44	44
	45	45