

Name _____

SSN _____

Interest Income

Please provide copies of all Form 1099-INT or other statements reporting interest income.

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

*F/S/J	Payer		Current Year Amount	Prior Year Amount
<input type="checkbox"/>	1		
<input type="checkbox"/>	2		
<input type="checkbox"/>	3		
<input type="checkbox"/>	4		
<input type="checkbox"/>	5		
<input type="checkbox"/>	6		
<input type="checkbox"/>	7		
<input type="checkbox"/>	8		
<input type="checkbox"/>	9		
<input type="checkbox"/>	10		
<input type="checkbox"/>	11		
<input type="checkbox"/>	12		
<input type="checkbox"/>	13		
<input type="checkbox"/>	14		
<input type="checkbox"/>	15		
<input type="checkbox"/>	16		
<input type="checkbox"/>	17		
<input type="checkbox"/>	18		
<input type="checkbox"/>	19		
<input type="checkbox"/>	20		
<input type="checkbox"/>	21		
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<input type="checkbox"/>	23		
<input type="checkbox"/>	24		
<input type="checkbox"/>	25		
<input type="checkbox"/>	26		
<input type="checkbox"/>	27		
<input type="checkbox"/>	28		
<input type="checkbox"/>	29		
<input type="checkbox"/>	30		
<input type="checkbox"/>	31		
<input type="checkbox"/>	32		
<input type="checkbox"/>	33		
<input type="checkbox"/>	34		
<input type="checkbox"/>	35		
<input type="checkbox"/>	36		
<input type="checkbox"/>	37		
<input type="checkbox"/>	38		

Seller Financed Mortgage Interest

*F/S/J		Current Year Amount	Prior Year Amount
<input type="checkbox"/>	39 Name SSN/EIN		
	Address		0
<input type="checkbox"/>	40 Name SSN/EIN		
	Address		0
<input type="checkbox"/>	41 Name SSN/EIN		
	Address		0
<input type="checkbox"/>	42 Name SSN/EIN		
	Address		0