

LABEL HERE

Fr h r J . 1 D . 31, 2005, r h r r , 2005, , 20

Fr h r J . 1 D . 31, 2005, r h r r , 2005, , 20	Fr h r J . 1 D . 31, 2005, r h r r , 2005, , 20
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Fr h r J . 1 D . 31, 2005, r h r r , 2005, , 20	Fr h r J . 1 D . 31, 2005, r h r r , 2005, , 20
Fr h r J . 1 D . 31, 2005, r h r r , 2005, , 20	Fr h r J . 1 D . 31, 2005, r h r r , 2005, , 20

Ch h r r r f f .

Ch h r f f , r r f f \$3 h f (16)

1 3 4 H f h h (h f r) . (17.) If

2 M r r f (f h) h f r h r

Ch 3 M r r f . E , N h h ' h r .

5 f (r) h (17)

6 . If h 6

(1) First name	Last name	(2) Dependent's social security number	(3) Dependent's relationship to you	(4) <input checked="" type="checkbox"/> if qualifying child for child tax credit (see page 19)
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

IR 16.)

Ch

E m

If r h f r 19.

I m

A F m () -2

F m -2G

1099-R

If -2, 22.

E

F m 1040-

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A G I m

F D , P A , P R A N , 78.

