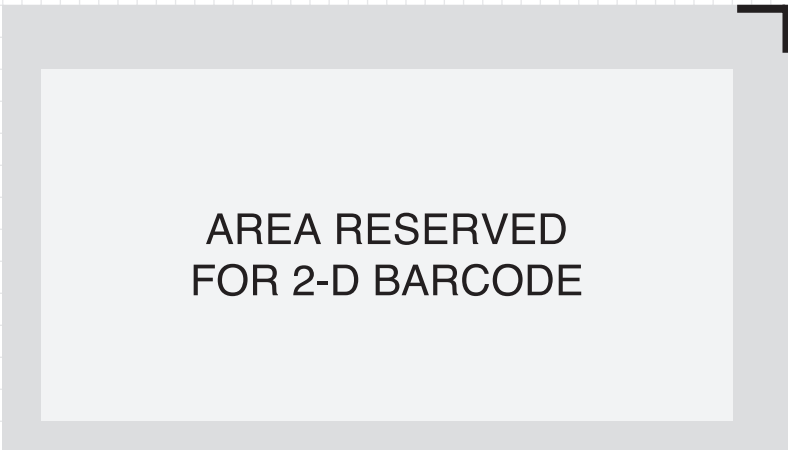


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2021 Schedule DI

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AREA RESERVED
FOR 2-D BARCODE

FIRSTNAMEXXXXXX I LASTNAMEXXXXXXXXXXXX SOCIALSECNO

Schedule DI. Dependent Information

FIRSTNAMEXXXXXX	I	LASTNAMEXXXXXXXXXXXX	SOCIALSECNO
RELATIONSHIPTOTA		Is dependent a qualifying child for earned income credit?	X DATEOFBI
		Is dependent disabled?	X
FIRSTNAMEXXXXXX	I	LASTNAMEXXXXXXXXXXXX	SOCIALSECNO
RELATIONSHIPTOTA		Is dependent a qualifying child for earned income credit?	X DATEOFBI
		Is dependent disabled?	X
FIRSTNAMEXXXXXX	I	LASTNAMEXXXXXXXXXXXX	SOCIALSECNO
RELATIONSHIPTOTA		Is dependent a qualifying child for earned income credit?	X DATEOFBI
		Is dependent disabled?	X
FIRSTNAMEXXXXXX	I	LASTNAMEXXXXXXXXXXXX	SOCIALSECNO
RELATIONSHIPTOTA		Is dependent a qualifying child for earned income credit?	X DATEOFBI
		Is dependent disabled?	X
FIRSTNAMEXXXXXX	I	LASTNAMEXXXXXXXXXXXX	SOCIALSECNO
RELATIONSHIPTOTA		Is dependent a qualifying child for earned income credit?	X DATEOFBI
		Is dependent disabled?	X
FIRSTNAMEXXXXXX	I	LASTNAMEXXXXXXXXXXXX	SOCIALSECNO
RELATIONSHIPTOTA		Is dependent a qualifying child for earned income credit?	X DATEOFBI
		Is dependent disabled?	X
FIRSTNAMEXXXXXX	I	LASTNAMEXXXXXXXXXXXX	SOCIALSECNO
RELATIONSHIPTOTA		Is dependent a qualifying child for earned income credit?	X DATEOFBI
		Is dependent disabled?	X

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