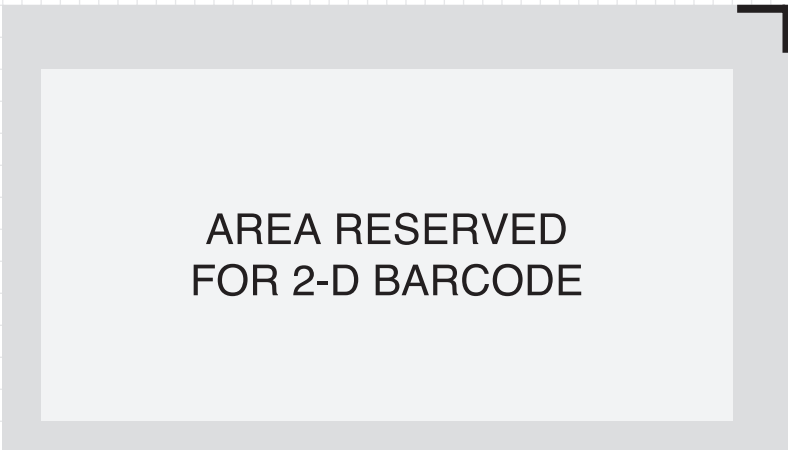
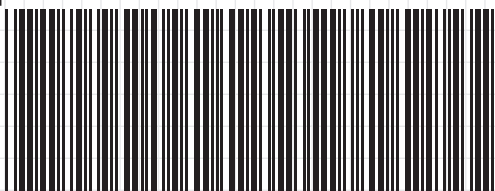


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2020 Schedule LP

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Credit for Removing or Covering Lead Paint on Residential Premises

TAXPAYERNAMEXXXXXXXXXXXXXXXXXXXXXXXXX SOCIALSECNO

Part 1. Interim Control Deleading

1a. Address(es) of Massachusetts unit(s) under an emergency lead management plan	b. Lic. number	c. Date of compliance or payment	d. Total cost	e. 50% of col. d	f. Lesser of col. e or \$500
XXXXXXXXXXXXXX CITYTOWNPOSTOFFICEXXXXXX	XXXX	XXXXXXXX	XXXXXXXXXXXXXX	XXXXXXXXXXXXXX	XXX
XXXXXXXXXXXXXX CITYTOWNPOSTOFFICEXXXXXX	XXXX	XXXXXXXX	XXXXXXXXXXXXXX	XXXXXXXXXXXXXX	XXX
XXXXXXXXXXXXXX CITYTOWNPOSTOFFICEXXXXXX	XXXX	XXXXXXXX	XXXXXXXXXXXXXX	XXXXXXXXXXXXXX	XXX
4. Total amounts qualifying for interim control deleading			4	XXXXXXXXXXXXXX	

XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

