

Label (See instructions on page 16.) Use the IRS label. Otherwise, please print or type. Presidential Election Campaign

For the year Jan. 1-Dec. 31, 2005, or other tax year beginning _____, 2005, ending _____, 20

OMB No. 1545-0074

LABEL HERE

Your first name and initial: **LISA A** Last name: **BULLOCK** Your social security number: [REDACTED]

If a joint return, spouse's first name and initial: **STEPHEN C** Last name: **BULLOCK** Spouse's social security number: [REDACTED]

Home address (number and street). If you have a P.O. box, see page 16. [REDACTED] Apt. no. _____

City, town or post office, state, and ZIP code. If you have a foreign address, see page 16. **HELENA, MT 59601**

You must enter **▲ your SSN(s) above ▲**

Checking a box below will not change your tax or refund.

Check here if you, or your spouse if filing jointly, want \$3 to go to this fund (see page 16) ... You Spouse

Filing Status

1 Single

2 Married filing jointly (even if only one had income)

3 Married filing separately. Enter spouse's SSN above and full name here. _____

4 Head of household (with qualifying person). If the qualifying person is a child but not your dependent, enter this child's name here. _____

5 Qualifying widow(er) with dependent child (see page 17)

Exemptions

6a Yourself. If someone can claim you as a dependent, do not check box 6a

b Spouse

c Dependents:

(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 16)
CAROLINE G	BULLOCK	[REDACTED]	DAUGHTER	<input checked="" type="checkbox"/>
ALEXANDRIA F	BULLOCK	[REDACTED]	DAUGHTER	<input checked="" type="checkbox"/>

Boxes checked on 6a and 6b: **2**

No. of children on 6c who: **2**

- lived with you
- did not live with you due to divorce or separation (see page 20)

Dependents on 6c not entered above: _____

Add numbers on lines above: **4**

Income

7 Wages, salaries, tips, etc. Attach Form(s) W-2 **7 28,170.**

8a Taxable interest. Attach Schedule B if required **8a 15.**

b Tax-exempt interest. Do not include on line 8a **8b**

9a Ordinary dividends. Attach Schedule B if required **9a 1,115.**

b Qualified dividends (see page 23) **9b 377.**

10 Taxable refunds, credits, or offsets of state and local income taxes **10 505.**

11 Alimony received **11**

12 Business income or (loss). Attach Schedule C or C-EZ **12 112,734.**

13 Capital gain or (loss). Attach Schedule D if required. If not required, check here **13 233.**

14 Other gains or (losses). Attach Form 4797 **14**

15a IRA distributions **15a** b Taxable amount (see page 25) **15b**

16a Pensions and annuities **16a** b Taxable amount (see page 25) **16b**

17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E **17 -3,700.**

18 Farm income or (loss). Attach Schedule F **18**

19 Unemployment compensation **19**

20a Social security benefits **20a** b Taxable amount (see page 27) **20b**

21 Other income. List type and amount (see page 29) **21**

22 Add the amounts in the far right column for lines 7 through 21. This is your total income **22 139,072.**

Adjusted Gross Income

23 Educator expenses (see page 29) **23**

24 Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ **24**

25 Health savings account deduction. Attach Form 8889 **25**

26 Moving expenses. Attach Form 3903 **26**

27 One-half of self-employment tax. Attach Schedule SE **27 7,090.**

28 Self-employed SEP, SIMPLE, and qualified plans **28 20,214.**

29 Self-employed health insurance deduction (see page 30) **29**

30 Penalty on early withdrawal of savings **30**

31a Alimony paid b Recipient's SSN **31a**

32 IRA deduction (see page 31) **32**

33 Student loan interest deduction (see page 33) **33**

34 Tuition and fees deduction (see page 34) **34**

35 Domestic production activities deduction. Attach Form 8903 **35**

36 Add lines 23 through 31a and 32 through 35 **36 27,304.**

37 Subtract line 36 from line 22. This is your adjusted gross income **37 111,768.**

Tax and Credits

Standard Deduction for - People who checked any box on line 39a or 39b of who can be claimed as a dependent

All others: Single or Married filing separately, \$5,000

Married filing jointly or Qualifying widow(er), \$10,000

Head of household, \$7,300

Table with 3 columns: Line number, Description, and Amount. Includes lines 38-57 for Tax and Credits.

Other Taxes

Table with 3 columns: Line number, Description, and Amount. Includes lines 58-63 for Other Taxes.

Payments

If you have a qualifying child, attach Schedule EIC.

Table with 3 columns: Line number, Description, and Amount. Includes lines 64-71 for Payments.

Refund

Direct deposit? See page 59 and fill in 73b, 73c, and 73d.

Table with 3 columns: Line number, Description, and Amount. Includes lines 72-74 for Refund.

Amount You Owe

Table with 3 columns: Line number, Description, and Amount. Includes lines 75-76 for Amount You Owe.

Third Party Designee

Do you want to allow another person to discuss this return with the IRS (see page 61)? [X] Yes. Complete the following.

Sign Here

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Paid Preparer's Use Only

Preparer's signature: JUSTIN HIGGINS, CPA. Date: 4/13/06. Firm's name: GALUSHA HIGGINS AND GALUSHA. Address: P.O. BOX 1699, HELENA, MT 59624-1699.