

Amended U.S. Individual Income Tax Return

OMB No. 1545-0074

▶ See separate instructions.

This return is for calendar year ☐ 2011 ☐ 2010 ☐ 2009 ☐ 2008**Other year.** Enter one: calendar year or fiscal year (month and year ended):

Your first name and initial	Last name	Your social security number
If a joint return, spouse's first name and initial		Last name
		Spouse's social security number
Home address (number and street). If you have a P.O. box, see instructions.		Apt. no.
		Your phone number
City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below (see instructions).		
Foreign country name	Foreign province/county	Foreign postal code

Amended return filing status. You must check one box even if you are not changing your filing status.**Caution.** You cannot change your filing status from joint to separate returns after the due date.

- ☐ Single ☐ Married filing jointly ☐ Married filing separately
☐ Qualifying widow(er) ☐ Head of household (If the qualifying person is a child but not your dependent, see instructions.)

Use Part III on the back to explain any changes

Income and Deductions

		A. Original amount or as previously adjusted (see instructions)	B. Net change— amount of increase or (decrease)— explain in Part III	C. Correct amount
1	Adjusted gross income. If net operating loss (NOL) carryback is included, check here ▶ <input type="checkbox"/>	1		
2	Itemized deductions or standard deduction	2		
3	Subtract line 2 from line 1	3		
4	Exemptions. If changing, complete Part I on the back and enter the amount from line 30	4		
5	Taxable income. Subtract line 4 from line 3	5		

Tax Liability

6	Tax. Enter method used to figure tax: .	6		
7	Credits. If general business credit carryback is included, check here ▶ <input type="checkbox"/>	7		
8	Subtract line 7 from line 6. If the result is zero or less, enter -0-	8		
9	Other taxes	9		
10	Total tax. Add lines 8 and 9	10		

Payments

11	Federal income tax withheld and excess social security and tier 1 RRTA tax withheld (if changing, see instructions)	11		
12	Estimated tax payments, including amount applied from prior year's return	12		
13	Earned income credit (EIC)	13		
14	Refundable credits from <input type="checkbox"/> Schedule M or Form(s) <input type="checkbox"/> 2439 <input type="checkbox"/> 4136 <input type="checkbox"/> 5405 <input type="checkbox"/> 8801 <input type="checkbox"/> 8812 <input type="checkbox"/> 8839 <input type="checkbox"/> 8863 <input type="checkbox"/> 8885 or <input type="checkbox"/> other (specify):	14		
15	Total amount paid with request for extension of time to file, tax paid with original return, and additional tax paid after return was filed	15		
16	Total payments. Add lines 11 through 15	16		

Refund or Amount You Owe (Note. Allow 8–12 weeks to process Form 1040X.)

17	Overpayment, if any, as shown on original return or as previously adjusted by the IRS	17		
18	Subtract line 17 from line 16 (If less than zero, see instructions)	18		
19	Amount you owe. If line 10, column C, is more than line 18, enter the difference	19		
20	If line 10, column C, is less than line 18, enter the difference. This is the amount overpaid on this return	20		
21	Amount of line 20 you want refunded to you	21		
22	Amount of line 20 you want applied to your (enter year): estimated tax	22		

Complete and sign this form on Page 2.

Part I ExemptionsComplete this part **only** if you are:

- Increasing or decreasing the number of exemptions (personal and dependents) claimed on line 6d of the return you are amending, or
- Increasing or decreasing the exemption amount for housing individuals displaced by a Midwestern disaster in 2008 or 2009.

See Form 1040 or Form 1040A instructions and Form 1040X instructions.

		A. Original number of exemptions or amount reported or as previously adjusted	B. Net change	C. Correct number or amount
23	Yourself and spouse. Caution. If someone can claim you as a dependent, you cannot claim an exemption for yourself	23		
24	Your dependent children who lived with you	24		
25	Your dependent children who did not live with you due to divorce or separation	25		
26	Other dependents	26		
27	Total number of exemptions. Add lines 23 through 26	27		
28	Multiply the number of exemptions claimed on line 27 by the exemption amount shown in the instructions for line 28 for the year you are amending	28		
29	If you are claiming an exemption amount for housing individuals displaced by a Midwestern disaster, enter the amount from Form 8914, line 2 for 2008, or line 6 for 2009	29		
30	Add lines 28 and 29. Enter the result here and on line 4 on page 1 of this form	30		
31	List ALL dependents (children and others) claimed on this amended return. If more than 4 dependents, see instructions.			

(a) First name	Last name	(b) Dependent's social security number	(c) Dependent's relationship to you	(d) Check box if qualifying child for child tax credit (see instructions)
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

Part II Presidential Election Campaign Fund

Checking below will not increase your tax or reduce your refund.

- ☐ Check here if you did not previously want \$3 to go to the fund, but now do.
- ☐ Check here if this is a joint return and your spouse did not previously want \$3 to go to the fund, but now does.

Part III Explanation of changes. In the space provided below, tell us why you are filing Form 1040X.

▶ Attach any supporting documents and new or changed forms and schedules.

Sign Here**Remember to keep a copy of this form for your records.**

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

Your signature	Date	Spouse's signature. If a joint return, both must sign.	Date

Paid Preparer Use Only

Preparer's signature	Date	Firm's name (or yours if self-employed)	
PTIN		<input type="checkbox"/> Check if self-employed	
			EIN