

Amended U.S. Individual Income Tax Return

See separate instructions.

Form header section with fields for name, address, and social security numbers.

All filers must complete lines A, B, and C.

A 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

B This return is for calendar year 2009, 2008, 2007, or 2006

Other year. Enter one: calendar year or fiscal year (month and year ended):

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

Income and Deductions table with columns for line number, description, and Correct Amount.

Tax Liability table with columns for line number, description, and Correct Amount.

Payments table with columns for line number, description, and Correct Amount.

Refund or Amount You Owe table with columns for line number, description, and Correct Amount.

Complete and sign this form on Page 2.

**Exemptions**

Complete 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 Hurricane Katrina or a Midwestern disaster.

See Form 1040 or Form 1040A instructions and page 10 of Form 1040X instructions.

		Correct Number or Amount
<b>23</b>	Yourself and spouse. <b>Caution.</b> If someone can claim you as a dependent, you cannot claim an exemption for yourself	<b>23</b>
<b>24</b>	Your dependent children who lived with you . . . . .	<b>24</b>
<b>25</b>	Your dependent children who did not live with you due to divorce or separation . . . . .	<b>25</b>
<b>26</b>	Other dependents . . . . .	<b>26</b>
<b>27</b>	Total number of exemptions. Add lines 23 through 26 . . . . .	<b>27</b>
<b>28</b>	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 (see page 10 of instructions) . . . . .	<b>28</b>
<b>29</b>	If you are claiming an exemption amount for housing individuals displaced by Hurricane Katrina, enter the amount from Form 8914, line 6 for 2006. 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	<b>29</b>
<b>30</b>	Add lines 28 and 29. Enter the result here and on line 4 on page 1 of this form . . . . .	<b>30</b>
<b>31</b>	List <b>ALL</b> dependents (children and others) claimed on this amended return. If more than 4 dependents, see page 10 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 page 10 of instructions)
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

**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.

**Checklist**

Before mailing this form, remember to

- Complete name, address, and social security number
- Complete lines A, B, and C on page 1
- Complete lines 1 through 22 on page 1
- Complete lines 23 through 31 on page 2, if required
- Attach any supporting documents and new or changed forms and schedules
- Sign and date this form

**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, <b>both</b> must sign.	Date

**Paid Preparer's Use Only**

Preparer's signature	Date	

Firm's name (or yours if self-employed), address, and ZIP code

	<input type="checkbox"/> Check if self-employed		
Preparer's SSN or PTIN		Phone number	EIN