Department of the Treasury—Internal Revenue Service

Amended U.S. Individual Income Tax Return

See separate instructions.

OMB No. 1545-0091

Thi	s re	turn	is for calendar year ▶ , OR fiscal year	ended	-			·			
be	Yo	ur firs	t name and initial	Last name					Your social security number		
it or type	lf a	f a joint return, spouse's first name and initial Last name							Spouse's social security number		
se print	Home address (no. and street) or P.O. box if mail is not delivered to your home Apt. no.						no.	Telephone number (optional)			
Please	City, town or post office, state, and ZIP code. If you have a foreign address, see page 2 of the instructions.									For Paperwork Reduction Act Notice, see page 6.	
В	Has the original return been changed or audited by the IRS or have you been notified that it will be?										
	USE PART II ON THE BACK TO EXPLAIN ANY CHANGES					A. Original ar as previously (see page	adjusted	B. Net ch amount of or (decre	increase	C. Correct amount	
Payments Tax Liability	3 4 5 6 7 8 9 10 11 12 13 14 15 16 17	Tax Tax Cre Sub Oth Tota Fec RR Esti yea Ear Add Cre Ame	Income and Deductions (see pages 2–5) usted gross income (see page 3) nized deductions or standard deduction (see page otract line 2 from line 1	3)				explain in	16 17		
	18		Refund or Amount You	ı Owe					18		
	 Overpayment, if any, as shown on original return or as previously adjusted by the IRS Subtract line 19 from line 18 (see page 5) AMOUNT YOU OWE. If line 10, column C, is more than line 20, enter the difference and see page 5 If line 10, column C, is less than line 20, enter the difference Amount of line 22 you want REFUNDED TO YOU Amount of line 22 you want APPLIED TO YOUR ESTIMATED TAX 24 						19 20 21 22 23				
Join See Kee	gn ere t retur page	n? 2. py for	Under penalties of perjury, I declare that I have filed an original re and statements, and to the best of my knowledge and belief, the taxpayer) is based on all information of which the preparer has a Your signature Date	turn and th	at I hav d retur dge.		is amend ect, and				
Paid Preparer's Use Only		r/c	Preparer's signature		Date Check if self-employed			f ployed	Preparer's SSN or PTIN		
			Firm's name (or yours if self-employed) and address						EIN ZIP cod	de	

Form	1040X (Rev. 11-99)									Page 2
Pa	If you are not of the lift claiming more	ons. See Form changing your exe e exemptions, c er exemptions, c	xemptions, do i	not comple 5–31.			A. Origina number of exemption reported or previously adjusted	of as as	Net chang	C. Correct e number of exemptions
26 27 28 29 30	(even if they cho Your dependent Your dependent separation Other dependent Total number of Multiply the number	parents (or someouse not to), you can to children who live to children who discontinuous to children who discontinuous. And the continuous cont	annot claim an extend with you and not live with you and not live with you are also and lines 25 through claimed on line 2 anding. Enter the results and line 4	wemption for the control of the cont	or yourselfdivorce or nount listed do n line 4. ions for f the	25 26 27 28 29				
31	Dependents (ch	2,650 2,550 nildren and other, ears after 1997, olumn (d) below.						1998, d	O chi	o. of your ildren on line who:
	(a) First name rt II Explanat Enter the change. A	Last name Lion of Change line number fro Attach only the son, your Form 10 nts. to a net operati	om the front of supporting form 040X may be re	Deduction the form in the form in s and schedurned. Beeck or a ger	for each it edules for e sure to in	redits em you the ite clude	ou are change your name	ging and d. If you and soc	d give th do not a ial secur	did not live th you due to vorce or paration (see ge 5)
			or Great Geed	Ted. See p				, check	THORE .	
If yo	ou did not previou	usly want \$3 to d	o to the fund b	ut now wa	nt to, check	here				uce your refund.
If a	joint return and y	our spouse did	not previously w	ant \$3 to g	go to the fu	nd but	t now wants	to, chec	k here	▶ □