

1040-X	AMENDED INDIVIDUAL INCOME TAX RETURN Filing Status: Head of Household	TAX YEAR
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YOUR FIRST NAME AND MIDDLE INITIAL	LAST NAME
YOUR SOCIAL SECURITY NUMBER	PHONE NUMBER
HOME ADDRESS (NUMBER AND STREET, OR P.O. BOX)	
CITY, TOWN, OR POST OFFICE	STATE AND ZIP CODE

FILING STATUS INFORMATION
☒ Head of Household (with qualifying person) ENTER NAME OF QUALIFYING CHILD / DEPENDENT IF NOT CLAIMED BELOW: _____

FINANCIAL FIGURES (AMENDED LINES)			
Income and Deductions	A. Original Amount	B. Net Change	C. Corrected Amount
1. Adjusted Gross Income			
2. Itemized Deductions or Standard Deduction			
3. Taxable Income (Subtract Line 2 from Line 1)			
4. Total Tax			
5. Total Payments / Credits			
6. Refund Due (If Line 5 is more than Line 4)			
7. Amount Owed (If Line 4 is more than Line 5)			

EXPLANATION OF CHANGES
EXPLAIN THE SPECIFIC REASONS FOR MAKING THE AMENDMENT(S) BELOW:

SIGNATURES AND CONSENT

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.	
YOUR SIGNATURE	DATE
PAID PREPARER'S SIGNATURE	PTIN

