## Caution: DRAFT FORM

This is an advance proof copy of an IRS tax form. It is subject to change and OMB approval before it is officially released. You can check the scheduled release date on our web site (www.irs.gov).

If you have any comments on this draft form, you can submit them to us on our web site. Include the word DRAFT in your response. You may make comments anonymously, or you may include your name and e-mail address or phone number. We will be unable to respond to all comments due to the high volume we receive. However, we will carefully consider each suggestion. So that we can properly consider your comments, please send them to us within 30 days from the date the draft was posted.

Department of the Treasury—Internal Revenue Service Amended U.S. Individual Income Tax Return								OME	8 No. 1545-0074			
		um										
<u>`</u>		n is for calendar year ►, or fiscal year			110.							
		v 8-12 weeks to process Form 1040X.										
be	Your first name and initial			ie	C		Your social security number		ial security number			
it or type	lf a joir	it return, spouse's first name and initial	Last nam	ne	25		Spouse'		social security number			
Please print	Home a	Home address (no. and street) or P.O. box if mail is not delivered to your home			0	Apt.	Apt. no. Phone		imber			
Plea	City, town or post office, state, and ZIP code. If you have a foreign address, see page 3 of the instructions.								/			
		the address shown above is different from that shown on your last return filed with the IRS, would you like us to change our records?										
		tatus. Be sure to complete this line. Note. You cann				eparat	e returns a	fter the	due date.			
	-		Aarried fili	-		_	d of househo	_	Qualifying widow(er)			
On this return ►												
		Use Part II on the back to explain any changes		A. Original as previous		adjusted amount of I		ncrease	C. Correct amount			
		Income and Deductions (see instructions)			(see page 3)		explain in Part II					
		djusted gross income (see page 3)		1								
		emized deductions or standard deduction (see page	4) .	2								
		ubtract line 2 from line 1		3								
		(emptions. If changing, fill in Parts I and II on the ba		4								
		ee page 4)		5								
≥		ax (see page 5). Method used in col. C		6								
Pilia		redits (see page 5)		7								
Tax Liability		but a but but not less than		8								
- X		ther taxes (see page 5)		9								
Ĕ	<b>10</b> To	otal tax. Add lines 8 and 9		10								
		ederal income tax withheld and excess social security or 1 RRTA tax withheld. If changing, see page 5	y and	11								
	<b>12</b> Es	stimated tax payments, including amount applied from	prior									
nts		ar's return		12								
Paymen		arned income credit (EIC)		13								
ay		dditional child tax credit from Form 8812		14								
		redits: Recovery rebate; federal telephone excise tax; or prms 2439, 4136, 8885, or 8801 (refundable credit only)		15								
		nount paid with request for extension of time to file (se						16				
		mount of tax paid with original return plus additional										
								17 18				
		Refund or Amount Yo										
19 Overpayment, if any, as shown on original return or as previously adjusted by the IRS								19				
	<ul> <li>20 Subtract line 19 from line 18 (see page 6)</li> <li>21 Amount you owe. If line 10, column C, is more than line 20, enter the difference and see page 6</li> <li>22 If line 10, column C, is less than line 20, enter the difference</li></ul>							20				
								21				
								22				
		mount of line 22 you want <b>refunded to you</b>				· ·		23				
<u>c:</u>		nount of line 22 you want <b>applied to your</b> Under penalties of perjury, I declare that I have filed an original ret			tax 24	s ameno	ded return, inc	luding ac	companying schedules			
Sign Here Joint return?												
	page 2. a copy fo	r 🔪										
	records.	Your signature Date			Spouse's signat	ure. If a	joint return, <b>bo</b>		<u> </u>			
Paid Preparer's Use Only		Preparer's signature		Date		Check i self-em		Prepare	er's SSN or PTIN			
		Firm's name (or yours if self-employed), address, and ZIP code					EIN Phone no. ( )					

For Paperwork Reduction Act Notice, see page 7 of instructions.

Form	1040X (Rev. 11-2008)								Pag	ge <b>2</b>
Pa	<ul> <li>Exemptions. See Form 1040 or 1040A instructions.</li> <li>Complete this part only if you are:</li> <li>Increasing or decreasing the number of exemptions claimed on line of the return you are amending, or</li> <li>Increasing or decreasing the exemption amount for housing individual displaced by Hurricane Katrina.</li> </ul>					previously			C. Correct number of exemptions	
25	Yourself and spouse					2		8		
26	Your dependent children who lived with you									
27	Your dependent children who did not live with you due to divorce or separation					5				
28	Other dependent	ts			28					
29	Total number of	exemptions. Add li	nes 25 tl	nrough 28	29					
30		er of exemptions clai		ne 29 by the amount listed ne result here.						
	Tax year	Exemption amount	line 4	ee the instructions for on page 4 if the int on line 1 is over:						
	2008 2007 2006 2005	\$3,500 3,400 3,300 3,200		\$119,975 117,300 112,875 109,475						
31	If you are claiming an exemption amount for housing individuals displaced by Hurricane Katrina, enter the amount from Form 8914, line 2 for 2005 or line 6 for 2006 (see instructions for line 4). Otherwise enter -0-				30 31					
32	Add lines 30 and 3	31. Enter the result he	re and on	line 4	32			1		
33	Dependents (children and other) not claimed on original (or adjusted) return:								children who:	
	<b>(a)</b> First name	Last nam	e	<b>(b)</b> Dependent's social security number		Dependent's onship to you	(d) ✓ if qualifying child for child tax credit (see page 6)	<ul> <li>lived you</li> </ul>	with	
									id not live you due to	
								divorce	e or	
								separa page 6	tion (see ) . ►	
								Dene	donto 🖵	
								Dependents on 33 not		
								entered	d above ► ∟	
Pa	rt II Explanation	on of Changes								

Enter the line number from the front of the form for each item you are changing and give the reason for each change. Attach only the supporting forms and schedules for the items changed. If you do not attach the required information, your Form 1040X may be returned. Be sure to include your name and social security number on any attachments.

If the change relates to a net operating loss carryback or a general business credit carryback, attach the schedule or form that shows the year in which the loss or credit occurred. See page 2 of the instructions. Also, check here

Part III Presidential Election Campaign Fund. Checking below will not increase your tax or reduce your refund.