OMB No. 1545-0074

_			er 2005) See Separ			115.						
Thi			is for calendar year ▶ , or fiscal year e	nded 🕨	<u> </u>					, -		
/be	You	ur firs	ot name and initial	Last name						Your social security number		
t or type	If 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.								Phone number			
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.		
A	If the	If the address shown above is different from that shown on your last return filed with the IRS and y								ıld like us to		
D	change it, check here Filing status. Be sure to complete this line. Note . You cannot change from joint to congrete returns after the due date.											
Ь		Filing status. Be sure to complete this line. Note. You cannot change from joint to separate returns after the due date. On original return ▶ ☐ Single ☐ Married filing jointly ☐ Married filing separately ☐ Head of household ☐ Qualifying widow(er)										
	On original return ► Single Married filing jointly Married filing separately Head of househout Don this return ► Single Married filing jointly Married filing separately Head of househout Head of househout Don't Head of ho									Qualifying widow(er) Qualifying widow(er)		
	* If the qualifying person is a child but not your dependent, see page 2 of the instructions.									Gualifying widow(er)		
	Use Part II on the back to explain any changes					A. Original am	adjusted amount of		increase	C. Correct		
			Income and Deductions (see instructions)			(see page	3)	or (decre explain in		amount		
	1	-	usted gross income (see page 3)		1_							
	2		nized deductions or standard deduction (see page 3		2							
	3		otract line 2 from line 1		3							
	4		emptions. If changing, fill in Parts I and II on the bac									
	_	(see	e page 3)		<u>4</u> 5							
	5		able income. Subtract line 4 from line 3		<u> </u>							
Tax Liability	6		(see page 4). Method used in col. C									
abi	7		dits (see page 4)		7							
Ξ	8		tract line 7 from line 6. Enter the result but not less than z		8	+						
Тах	9 10	Oth	er taxes (see page 4)		9							
-			al tax. Add lines 8 and 9		10							
		tier	leral income tax withheld and excess social security 1 RRTA tax withheld. If changing, see page 4		11							
ıts	12		imated tax payments, including amount applied from r's return		12							
Payments	13	3 Earned income credit (EIC)										
ayr	14	14 Additional child tax credit from Form 8812										
۵	15	5 Credits from Form 2439, Form 4136, or Form 8885 15										
		6 Amount paid with request for extension of time to file (see page 4)							16			
		7 Amount of tax paid with original return plus additional tax paid after it was filed										
	18	lota	al payments. Add lines 11 through 17 in column C						18			
			Refund or Amount You					19				
		Overpayment, if any, as shown on original return or as previously adjusted by the IRSSubtract line 19 from line 18 (see page 5)										
	20											
	21		ount you owe. If line 10, column C, is more than line 2						22			
	22		ne 10, column C, is less than line 20, enter the dif						23			
	23 Amount of line 22 you want refunded to you 24 Amount of line 22 you want applied to your estimated tax 24								23			
Sign Here Joint return? See page 2.		7	Under penalties of perjury, I declare that I have filed an original retuand statements, and to the best of my knowledge and belief, this	ded return, ir complete. D	cluding ac eclaration	ccompanying schedules of preparer (other than						
		. 0	taxpayer) is based on all information of which the preparer has an									
					I							
Keep a copy for		y for	Your signature Date			Spouse's signat	uro If o	ioint return b	oth must s	sign. Date		
your records.		us.	,		Date	opouse's signat	ure. II d	jonic recurri, D	1	rer's SSN or PTIN		
Paid Preparer's Use Only		·'e	Preparer's signature		Date		Check i		Prepar	EIS SOIN OF PIIN		
			Firm's name (or yours if self-employed),	EII	N							
			address, and ZIP code				Ph	one no. ()			

Form	1040X (Rev. 11-2005))									Page 2
Part I Exemptions. See Form 1040 or 1040A instructions. Complete this part only if you are:						A. Original number of				C. Cor	rect
	 Increasing or of the return you 	decreasing the numb u are amending, or decreasing the exem	kemptions claimed on line mount for housing individu	exemptions reported or as previously adjusted		B. Net change		number of exemptions			
25	Yourself and sp	ouse			25						
	Caution. If someone can claim you as a dependent, you cannot claim an exemption for yourself.										
26	Your dependent	our dependent children who lived with you			26						
27		Your dependent children who did not live with you due to divorce or separation			27						
28		Other dependents			28 29						
29		Total number of exemptions. Add lines 25 through 28									
30	Multiply the number of exemptions claimed on line 29 by the amount listed below for the tax year you are amending. Enter the result here and on line 4.										
	Tax year	Exemption amount	But see the instructions for line 4 on page 3 if the amount on line 1 is over:								
	2005	\$3,200		\$109,475							
	2004 2003	3,100 3,050		107,025 104,625							
0.4	2002	3,000		103,000	30						
31	31 If you are claiming an exemption amount for housin Hurricane Katrina, enter the amount from Form 89			1914, line 2 (see instructions							
20	for line 4)				31						
32		31. Enter the result here							NIf	_ l= !! =! =	
33	Dependents (children and other) not claimed on original (or adjusted) r								No. of children on 33 who:		
		(b) Dependent's social			(0) [Dependent's	(d) 🗸	if qualifying	lived with		
	(a) First name	Last name	<u> </u>	security number		onship to you		or child tax see page 5)	you		
	(a) The hame	Last Harre	i i				,	\Box	• did not live		
				1 1					with you	ou due to e or	
				1 1					separa page 5	tion (see	
									Depen		
				1 1				<u> </u>	on 33 i	not	
Do	rt II Explanat	ion of Changes		; ;				enter		d above ►	
	change. A informatio attachmen	on, your Form 1040X nts. to a net operating lo	orting f may b ss carr	t of the form for each ite orms and schedules for t e returned. Be sure to ind byback or a general busines occurred. See page 2 of the	he ite	ms chang your name dit carryba	ed. If ye and s	you do no social se	ot atta ecurity schedu	ch the re number	equired on any
	,			, 0							
Pa	rt III Presiden	tial Election Camp	aign F	rund. Checking below v	vill no	t increase	your	tax or	reduce	your ref	fund.
If yo	ou did not previou	usly want \$3 to go to	the fun	d but now want to, check	here					1	► <u></u>
If a	joint return and y	our spouse did not p	revious	ly want \$3 to go to the fur	nd but	now want	s to, c	heck her	e .	<u></u> .)	□