Form	n 1040X (Rev. 1-2020)									Page 2	
	rt I Exemptions and Dependent	S								. age <u>=</u>	
from	plete this part only if any information relating to what you reported on the return you are amend nding your 2018 or later return).	exemptions (to depende									
CAU	TION: For 2018 or later amended returns only, Fill in all other applicable lines. Note: See the Forms 1040 and 1040-SF	or Form 1040A, instructions			of ex amou	as previously		B. Net change		C. Correct number or amount	
24	for the tax year being amended. See also		ons.			adjusted					
24	Yourself and spouse. Caution: If someone ca	•									
	dependent, you can't claim an exemption for yo			24							
25	2018 or later return, leave line blank Your dependent children who lived with you			24 25							
26	Your dependent children who didn't live with you due			26							
27	Other dependents			27							
28	Total number of exemptions. Add lines 24 thro										
				28							
29	Multiply the number of exemptions claimed on										
	amount shown in the instructions for line 29 for	, ,									
	amending. Enter the result here and on line 4a	• •									
	amending your 2018 or later return, leave line			29							
30	List ALL dependents (children and others) cla	aimed on this amended re	turn. If mo	re thar	4 de	pendents, se	e inst. a	nd check he	·e	•	
Dep	endents (see instructions)					(d) (Check if	qualifies for (see in	structions):	
	(a) First name Last name	(b) Social security	(c) Relationsh			nip Child tax credit		Credit for other dependents			
	(a) Flistriame Lastriame	number	t	o you	Crilla tax		(amended 20		18 or later returns only)		
_											
	rt II Presidential Election Campa										
Che	cking below won't increase your tax or reduce yo										
\dashv	Check here if you didn't previously want \$3 to g										
Da	Check here if this is a joint return and your spou	· · · · · · · · · · · · · · · · · · ·					40	10.1/			
Pa	rt III Explanation of changes. In		-		you	are filing Fo	orm 104	WX.			
	 Attach any supporting documents and 	new or changed forms an	id schedule	es.							
Rem	nember to keep a copy of this form for your re	cords.									
Unde	er penalties of perjury, I declare that I have filed an orig	inal return and that I have exa	amined this a	amende	d retur	rn, including ac	company	ing schedules	and s	atements,	
	o the best of my knowledge and belief, this amended r	eturn is true, correct, and con	nplete. Decla	ration o	of prep	arer (other tha	n taxpaye	r) is based on	all info	ormation	
	t which the preparer has any knowledge.										
Jig.	n Here										
>											
Your	signature	Date	Your occupation			<u>_</u>					
>											
•	se's signature. If a joint return, both must sign.	Date	Spouse's occ	upation							
Pai	d Preparer Use Only										
>											
Prepa	arer's signature	Date	Firm's name	(or yours	if self-e	employed)					

Firm's address and ZIP code

Phone number

Check if self-employed

Print/type preparer's name

PTIN

EIN