

OMB No. 1545-0091 Expires 10-31-96

(Rev	. Octob	ber 1993)		► See	separate ins	structio	ns.							
Thi	s retu	urn is for c	alendar year ► 19	, OR fisca	l year ende	d 🕨					, 19	•		
ype	Your first name and initial					Last name					Your social security number			
nt or type	lfaj	If a joint return, spouse's first name and initial Last name							Spouse's social security number					
se print	Hom	Home address (number and street). If you have a P.O. box, see instructions.					Apt.			Telephone number (optional)				
Please	City, town or post office, state, and ZIP code. If you have a foreign address, see instructions.								For Paperwork Reduction Notice, see page 1 of separ instructions.					
Ente	r name	and address as	s shown on original return. If san	ne as above, write "S	ame." If changir	ng from s	eparate to joint re	eturn,	enter names a	ind addres	ses from orig	inal returns.		
Α	Servi	ce center w	vhere original return wa	lf "	No," have y	ou bee	een changed en notified th IRS office ►							
С	to a t	tax shelter	ng your return to include required to be registere st attach <b>Form 8271,</b> I	d?								s 🗌 No		
D	Filing	status clai	med. Note: You cannot	change from j	oint to sepa	rate re	turns after th	ne du	le date ha	s passe	d.			
D       Filing status claimed. Note: You cannot change from joint to separate returns after the due date has passed.         On original return ▶       Single       Married filing joint return       Married filing separate return       Head of household       Qualifying wid         On this return ▶       Single       Married filing joint return       Married filing separate return       Head of household       Qualifying wid														
	Income and Deductions (see instructions) Caution: Be sure to complete Part II on page 2.						reported or as previously adjusted (De			change— ease or se)—explain <b>C.</b> Correct amount				
				e Fait ii oli pag	<i>je</i> 2.		(see instructi	ons)	on pa	age 2				
		Total incom				1								
		-	ments (such as IRA ded	-	•	2								
		Adjusted gr		3										
			eductions or standard d			4								
	5 Subtract line 4 from line 3					5								
	6   7 <sup>-</sup>	Exemptions	mptions. If changing, fill in Parts I and II on able income. Subtract line 6 from line 5 .			6								
						8								
iii			structions). Method used			9								
Liability			e instructions) 9 from line 8. Enter the re		10									
×					11									
Тах			ner taxes (such as self-employment tax, alternative minimum ta tal tax. Add lines 10 and 11											
	13	Federal income tax withheld and excess social secur Medicare, and RRTA taxes withheld. If changing, see instruction												
lts						14								
ner	15													
Payments	16 (	6 Credits for Federal tax paid on fuels, regulated investment company, etc.												
à		•			on for extension of time to			. 17						
			d with original return pl			rit was	s filed			. 18				
	19	iotal payme	ents. Add lines 13 throu	-						. 19				
		<u>^</u>		nd or Amount					•	20				
<b>20</b> Overpayment, if any, as shown on original return or as previously adjusted by the IRS								5	. 20					
<ul> <li>21 Subtract line 20 from line 19 (see instructions)</li> <li>22 AMOUNT YOU OWE. If line 12, column C, is more than line 21, enter the difference and s</li> </ul>							 	etructions						
			be received. If line 12,							23				
Si He		Under pe and state	nalties of perjury, I declare tha ments, and to the best of my is based on all information of	t I have filed an orig knowledge and be	inal return and lief, this amend	that I hav	ve examined this	amer	nded return, i					
Kee of t	p a co his ret													
	your ords.	Your	signature		Date		Spouse's signatu	ire. If a	a joint return, l	BOTH mus	it sign. D	ate		
Paie		Preparer's signature				Date		neck i elf-emp	f ployed	Prepa	arer's social	security no.		
Preparer's Use Only		FILLISTIA	Firm's name (or yours if self-employed)						E.I. No.					
USe	Only	and addre							ZIP code					

Form	1040X (Rev. 10-93)											Page <b>2</b>
Pa	rt I Exemption If you are not cha If claiming more If claiming fewer	anging your exe exemptions, co	mplete lines 24-3	A. Num		ally <b>B.</b> I		let change	C. Correct number			
24	Yourself and spouse <b>Caution:</b> If your parents (or someone else) can claim you as a dependent											
	(even if they chose not to), you cannot claim an exemption for yourself.											
25	Your dependent children who lived with you					25						
26	•	Your dependent children who did not live with you due to divorce or										
	separation					26						
27	Other dependents											
28	•	Total number of exemptions. Add lines 24 through 27										
29	Multiply the number of exemptions claimed on line 28 by the amount listed below for the tax year you are amending. Enter the result here and on line 6.											
	Tax Year	Exemption Amount	But see the instructions if the amount on line 3 is over:									
	1993 \$2,350 1992 2,300		\$81,350 78,950									
	1991	2,150	7	75,000								
	1990	2,050		ble for tax year 1990		29						
30	Dependents (chil	dren and other	) not claimed on	original return:				1		Nie of com		
			(c) If age 1 or older (age							No. of your on line 30		
	(a) Dependent's name (first, initial,		(b) Check if under	2 or older if a 1990 return), enter dependent's social				(e) No	. of	with you	🕨	
			age 1 (under age				endent's	months	lived	No. of you	r children	
	and last nar	ne)	2 if a 1990 return)	security numb	ber	relations	hip to you	in your l	nome	on line 30	who <b>didn't</b>	
										live with yo divorce or		
										(see instrue		
										No. of dep		
										on line 30 entered ab		
31	If your child listed	on line 20 didn'	t live with you but	t is alaimod as y	your dor	ondont	undor a	nro 109	5 agro			
Pa	Enter the li all support	ne number from	es to Income, m page 1 for ea I schedules for he and social se	ch item you are items change	e chan d. If yo	ging ar ou don	nd give ti 't, your	Form 1	on fo 040X	r each cha may be i	ange. Atta returned.	ch Be
lf th that	e change pertains shows the year in	to a net operat which the loss	ting loss carryba s or credit occur	ck or a general red. See instruc	l busine ctions.	ess cre Also, c	dit carryt heck her	oack, at e	tach t	he schedu	ule or form	· 🗆
	rt III President		• •						tax	or reduce	e your ref	und.
•	ou did not previous	•	•	, .					(¢0 +-	or 1993	□\$1 fo	r 1000
lf a	check here joint return and yo	ur spouse did i	not previously w	ant to have \$3		if a 199	 92 return)	. ┍╯ ∟ ) go	ιφοιΟ	1993	பரா	1992
	ne fund but now w								\$3 fc	or 1993	□\$1 fo	r 1992