A Print or type your current Social Security number(s), name(s), and address.

| Mailing address | Apt. number | City | State | ZIP or Postal Code | Foreign Nation, if not U.S.A. |
| :--- | :--- | :--- | :--- | :--- | :--- | :--- |

B $\square$ Check if your Social Security number(s), name(s), or address listed above are different from your previously filed return.
C Filing Status: $\square$ Single or head of household $\quad \square$ Married filing jointly $\quad \square$ Married filing separately $\square$ Widowed
D Check the box that identifies why you are making this change. ** Attach a copy of your federal finalization. (see instructions)
$\square{ }^{* *}$ Federal change accepted on $\overline{\text { Month }}$ 'Day ${ }^{\text {Year }}$
$\square{ }^{* *} \mathrm{NOL}$ accepted on
$\overline{\text { Month }}$ ' $\overline{\text { Day }}$ ' $\overline{\text { Year }}$
$\square$ State change

E On what date did you file your original Form IL-1040 or your latest Form IL-1040-X?
F Did you file a U.S. Form 1040X or Form 1045? If "yes," you must attach a copy to this form (see instructions).


G Explain, in detail, the reason(s) for filing this amended return. Attach a separate sheet if necessary.



$$
D R \_\quad I D \_\quad X 3
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