

▶ See separate instructions.

This return is for calendar year 2010 2009 2008 2007

Other year. Enter one: calendar year or fiscal year (month and year ended):

Your first name and middle initial Nathan N	Your last name Codley	Your social security number
If a joint return, your spouse's first name and middle initial Lynda M	Your spouse's last name Codley	Your spouse's social security number
Your current home address (number and street). If you have a P.O. box, see page 5 of instructions.	Apt. no.	Your phone number

Your city, town or post office, state, and ZIP code. If you have a foreign address, see page 5 of instructions.

Amended return filing status. You must check one box even if you are not changing your filing status.

Caution. You cannot change your filing status from joint to separate returns after the due date.

- Single
 Married filing jointly
 Married filing separately
 Qualifying widow(er)
 Head of household (if the qualifying person is a child but not your dependent, see page 5 of instructions.)

Use Part III on the back to explain any changes

	A. Original amount or as previously adjusted (see page 6)	B. Net change—amount of increase or (decrease)—explain in Part III	C. Correct amount
Income and Deductions			
1 Adjusted gross income (see page 6 of instructions). If net operating loss (NOL) carryback is included, check here ▶ <input type="checkbox"/>	1 0		0
2 Itemized deductions or standard deduction (see page 7 of instructions)	2 10,900		10,900
3 Subtract line 2 from line 1	3 <10,900>		<10,900>
4 Exemptions. If changing, complete Part I on the back and enter the amount from line 30 (see page 7 of instructions)	4		
5 Taxable income. Subtract line 4 from line 3	5 <10,900>		<10,900>
Tax Liability			
6 Tax (see page 8 of instructions). Enter method used to figure tax:	6		
7 Credits (see page 8 of instructions). If general business credit carryback is included, check here ▶ <input type="checkbox"/>	7		
8 Subtract line 7 from line 6. If the result is zero or less, enter -0-	8		
9 Other taxes (see page 8 of instructions)	9		
10 Total tax. Add lines 8 and 9	10		
Payments			
11 Federal income tax withheld and excess social security and tier 1 RRTA tax withheld (if changing, see page 8 of instructions)	11 7710	7577	15227
12 Estimated tax payments, including amount applied from prior year's return (see page 9 of instructions)	12		
13 Earned income credit (EIC) (see page 9 of instructions)	13		
14 Refundable credits from <input type="checkbox"/> Schedule M or Form(s) <input type="checkbox"/> 2439 <input type="checkbox"/> 4136 <input type="checkbox"/> 5405 <input type="checkbox"/> 8801 <input type="checkbox"/> 8812 <input type="checkbox"/> 8839 <input type="checkbox"/> 8863 <input type="checkbox"/> 8885 or <input type="checkbox"/> other (specify):	14		
15 Total amount paid with request for extension of time to file, tax paid with original return, and additional tax paid after return was filed (see page 10 of instructions)	15		
16 Total payments. Add lines 11 through 15	16		15227
Refund or Amount You Owe (Note. Allow 8-12 weeks to process Form 1040X.)			
17 Overpayment, if any, as shown on original return or as previously adjusted by the IRS (see page 10 of instructions)	17		
18 Subtract line 17 from line 16 (if less than zero, see page 10 of instructions)	18		
19 Amount you owe. If line 10, column C, is more than line 18, enter the difference (see page 10 of instructions)	19		
20 If line 10, column C, is less than line 18, enter the difference. This is the amount overpaid on this return	20		
21 Amount of line 20 you want refunded to you	21		15227
22 Amount of line 20 you want applied to your (enter year): estimated tax	22		

Complete and sign this form on Page 2.

*Mailed
9/23/11*

Part I Exemptions

Complete this part only if you are:

- Increasing or decreasing the number of exemptions (personal and dependents) claimed on line 6d of the return you are amending, or
- Increasing or decreasing the exemption amount for housing individuals displaced by a Midwestern disaster in 2008 or 2009.

See Form 1040 or Form 1040A instructions and page 11 of Form 1040X instructions.

	A. Original number of exemptions or amount reported or as previously adjusted	B. Net change	C. Correct number or amount
23 Yourself and spouse. <i>Caution. If someone can claim you as a dependent, you cannot claim an exemption for yourself.</i>	23		
24 Your dependent children who lived with you	24		
25 Your dependent children who did not live with you due to divorce or separation	25		
26 Other dependents	26		
27 Total number of exemptions. Add lines 23 through 26	27		
28 Multiply the number of exemptions claimed on line 27 by the exemption amount shown in the instructions for line 28 for the year you are amending (see page 11 of instructions)	28		
29 If you are claiming an exemption amount for housing individuals displaced by a Midwestern disaster, enter the amount from Form 8914, line 2 for 2008, or line 6 for 2009	29		
30 Add lines 28 and 29. Enter the result here and on line 4 on page 1 of this form	30		
31 List ALL dependents (children and others) claimed on this amended return. If more than 4 dependents, see page 11 of instructions.			

(a) First name	Last name	(b) Dependent's social security number	(c) Dependent's relationship to you	(d) Check box if qualifying child for child tax credit (see page 11 of instructions)
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

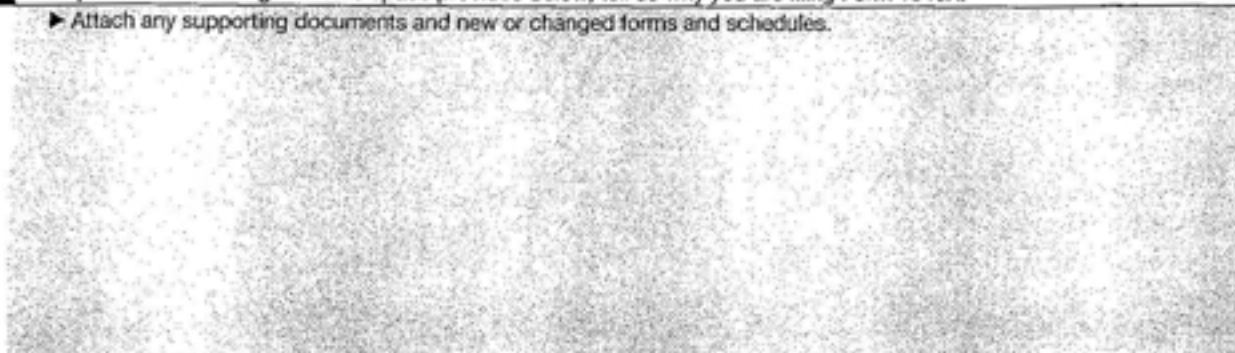
Part II Presidential Election Campaign Fund

Checking below will not increase your tax or reduce your refund.

- Check here if you did not previously want \$3 to go to the fund, but now do.
- Check here if this is a joint return and your spouse did not previously want \$3 to go to the fund, but now does.

Part III Explanation of changes. In the space provided below, tell us why you are filing Form 1040X.

▶ Attach any supporting documents and new or changed forms and schedules.



Sign Here

Remember to keep a copy of this form for your records.

Under penalties of perjury, I declare that I have filed an original return and that I have examined this amended return, including accompanying schedules, and statements, and to the best of my knowledge and belief, this amended return is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information about which the preparer has any knowledge.

Your signature: [Signature] Date: 9/21/11 Spouse's signature, if a joint return, both must sign: [Signature] Date: 9/21/11

Substitute for Form W-2, Wage and Tax Statement, or Form
1099-R, Distributions From Pensions, Annuities, Retirement or
Profit-Sharing Plans, IRAs, Insurance Contracts, etc.

OMB No. 1545-0074

▶ Attach to Form 1040, 1040A, 1040-EZ, or 1040X.

1 Name(s) shown on return Nathan Coley 2 Your social security number [REDACTED]

3 Address [REDACTED]

4 Enter year in space provided and check one box. For the tax year ending December 31, 2008.
I have been unable to obtain (or have received an incorrect) Form W-2 OR Form 1099-R.
I have notified the IRS of this fact. The amounts shown on line 7 or line 8 are my best estimates for all wages or payments made to me and tax withheld by my employer or payer named on line 5.

5 Employer's or payer's name, address, and ZIP code [REDACTED] 6 Employer's or payer's identification number (if known) [REDACTED]

7 Form W-2. Enter wages, tips, other compensation, and taxes withheld.

a Wages, tips, and other compensation	_____	g State income tax withheld	_____
b Social security wages	_____	(Name of state)	_____
c Medicare wages and tips	_____	h Local income tax withheld	_____
d Advance EIC payment	_____	(Name of locality)	_____
e Social security tips	_____	i Social security tax withheld	<u>5580</u>
f Federal income tax withheld	<u>7578</u>	j Medicare tax withheld	<u>1305</u>

8 Form 1099-R. Enter distributions from pensions, annuities, retirement/profit-sharing plans, IRAs, insurance contracts, etc.

a Gross distribution	_____	f Federal income tax withheld	_____
b Taxable amount	_____	g State income tax withheld	_____
c Taxable amount not determined	<input type="checkbox"/>	h Local income tax withheld	_____
d Total distribution	<input type="checkbox"/>	i Employee contributions	_____
e Capital gain (included in line 8b)	_____	j Distribution codes	_____

9 How did you determine the amounts on lines 7 and 8 above?

10 Explain your efforts to obtain Form W-2, Form 1099-R, or Form W-2c, Corrected Wage and Tax Statement.

Sign Here

Under penalty of perjury, I declare that I have examined this statement, and to the best of my knowledge and belief, it is true, correct, and complete.

Signature ▶ Nathan Coley

Date ▶ 9/21/2011

Substitute for Form W-2, Wage and Tax Statement, or Form 1099-R, Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.

OMB No. 1545-0074

▶ Attach to Form 1040, 1040A, 1040-EZ, or 1040X.

1 Name(s) shown on return

Lynda May Coley

2 Your social security number

3 Address

4 Enter year in space provided and check one box. For the tax year ending December 31, 2011

I have been unable to obtain (or have received an incorrect) Form W-2 OR Form 1099-R.

I have notified the IRS of this fact. The amounts shown on line 7 or line 8 are my best estimates for all wages or payments made to me and tax withheld by my employer or payer named on line 5.

5 Employer's or payer's name, address, and ZIP code

6 Employer's or payer's identification number (if known)

7 Form W-2. Enter wages, tips, other compensation, and taxes withheld.

a Wages, tips, and other compensation	_____	g State income tax withheld	_____
b Social security wages	_____	(Name of state)	_____
c Medicare wages and tips	_____	h Local income tax withheld	_____
d Advance EIC payment	_____	(Name of locality)	_____
e Social security tips	_____	i Social security tax withheld	<u>572.21</u>
f Federal income tax withheld	<u>192</u>	j Medicare tax withheld	<u>119.79</u>

8 Form 1099-R. Enter distributions from pensions, annuities, retirement/profit-sharing plans, IRAs, insurance contracts, etc.

a Gross distribution	_____	f Federal income tax withheld	_____
b Taxable amount	_____	g State income tax withheld	_____
c Taxable amount not determined	<input type="checkbox"/>	h Local income tax withheld	_____
d Total distribution	<input type="checkbox"/>	i Employee contributions	_____
e Capital gain (included in line 8b)	_____	j Distribution codes	_____

9 How did you determine the amounts on lines 7 and 8 above?

10 Explain your efforts to obtain Form W-2, Form 1099-R, or Form W-2c, Corrected Wage and Tax Statement.

Sign Here

Under penalties of perjury, I declare that I have examined this statement, and to the best of my knowledge and belief, it is true, correct, and complete.

Signature *Lynda Coley*

Date 9/21/11