

Label (See instructions on page 14.) Use the IRS label. Otherwise, please print or type.

For the year Jan. 1-Dec. 31, 2009, or other tax year beginning 2009, ending 2009. Your first name and initial John W. Last name Sytsma. Home address (number and street). City, town or post office, state, and ZIP code.

OMB No. 1545-0074 Your social security number Spouse's social security number You must enter your SSN(s) above. Checking a box below will not change your tax or refund.

Presidential Election Campaign Check here if you, or your spouse if filing jointly, want \$3 to go to this fund (see page 14) You Spouse

Filing Status 1 Single 2 Married filing jointly 3 Married filing separately 4 Head of household 5 Qualifying widow(er) with dependent child

Exemptions 6a Yourself 6b Spouse 6c Dependents (table with columns for first name, last name, social security number, relationship, and child for credit) 6d Total number of exemptions claimed

Income 7 Wages, salaries, tips, etc. 8a Taxable interest 8b Tax-exempt interest 9a Ordinary dividends 9b Qualified dividends 10 Taxable refunds, credits, or offsets of state and local income taxes 11 Alimony received 12 Business income or (loss) 13 Capital gain or (loss) 14 Other gains or (losses) 15a IRA distributions 15b Taxable amount 16a Pensions and annuities 16b Taxable amount 17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. 18 Farm income or (loss) 19 Unemployment compensation in excess of \$2,400 per recipient 20a Social security benefits 20b Taxable amount 21 Other income 22 Add the amounts in the far right column for lines 7 through 21. This is your total income

Adjusted Gross Income 23 Educator expenses 24 Certain business expenses of reservists, performing artists, and fee-basis government officials 25 Health savings account deduction 26 Moving expenses 27 One-half of self-employment tax 28 Self-employed SEP, SIMPLE, and qualified plans 29 Self-employed health insurance deduction 30 Penalty on early withdrawal of savings 31a Alimony paid 31b Recipient's SSN 32 IRA deduction 33 Student loan interest deduction 34 Tuition and fees deduction 35 Domestic production activities deduction 36 Add lines 23 through 31a and 32 through 35 37 Subtract line 36 from line 22. This is your adjusted gross income

Tax and Credits	38	Amount from line 37 (adjusted gross income)		38	1,176	92
	39a	Check <input type="checkbox"/> You were born before January 2, 1945, <input type="checkbox"/> Blind. Total boxes if: <input type="checkbox"/> Spouse was born before January 2, 1945, <input type="checkbox"/> Blind. checked ▶ 39a				
	b	If your spouse itemizes on a separate return or you were a dual-status alien, see page 35 and check here ▶ 39b <input type="checkbox"/>				
Standard Deduction for— • People who check any box on line 39a, 39b, or 40b or who can be claimed as a dependent, see page 35. • All others: Single or Married filing separately, \$5,700 Married filing jointly or Qualifying widower), \$11,400 Head of household, \$8,350	40a	Itemized deductions (from Schedule A) or your standard deduction (see left margin)		40a	5,700	
	b	If you are increasing your standard deduction by certain real estate taxes, new motor vehicle taxes, or a net disaster loss, attach Schedule L and check here (see page 35) ▶ 40b <input type="checkbox"/>				
	41	Subtract line 40a from line 38		41	(-),4,523	08
	42	Exemptions. If line 38 is \$125,100 or less and you did not provide housing to a Midwestern displaced individual, multiply \$3,650 by the number on line 6d. Otherwise, see page 37		42	3,650	
	43	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-		43	-0-	
	44	Tax (see page 37). Check if any tax is from: a <input type="checkbox"/> Form(s) 9814 b <input type="checkbox"/> Form 4972		44		
	45	Alternative minimum tax (see page 40). Attach Form 6251		45		
	46	Add lines 44 and 45		46	-0-	
	47	Foreign tax credit. Attach Form 1116 if required	47			
	48	Credit for child and dependent care expenses. Attach Form 2441	48			
	49	Education credits from Form 8863, line 29	49			
	50	Retirement savings contributions credit. Attach Form 8880	50			
	51	Child tax credit (see page 42)	51			
	52	Credits from Form: a <input type="checkbox"/> 8396 b <input type="checkbox"/> 8839 c <input type="checkbox"/> 5695	52			
	53	Other credits from Form: a <input type="checkbox"/> 3800 b <input type="checkbox"/> 8801 c <input type="checkbox"/>	53			
	54	Add lines 47 through 53. These are your total credits		54	-0-	
	55	Subtract line 54 from line 46. If line 54 is more than line 46, enter -0-		55	-0-	
Other Taxes	56	Self-employment tax. Attach Schedule SE		56		
	57	Unreported social security and Medicare tax from Form: a <input type="checkbox"/> 4137 b <input type="checkbox"/> 8919		57		
	58	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required		58		
	59	Additional taxes: a <input type="checkbox"/> AEIC payments b <input type="checkbox"/> Household employment taxes. Attach Schedule H		59		
	60	Add lines 55 through 59. This is your total tax		60	-0-	
Payments	61	Federal income tax withheld from Forms W-2 and 1099	61	9,626	59	
	62	2009 estimated tax payments and amount applied from 2008 return	62			
	63	Making work pay and government retiree credits. Attach Schedule M	63			
	64a	Earned income credit (EIC)	64a			
	b	Nontaxable combat pay election <input type="checkbox"/> 64b	64b			
	65	Additional child tax credit. Attach Form 8812	65			
	66	Refundable education credit from Form 8863, line 16	66			
	67	First-time homebuyer credit. Attach Form 5405	67			
	68	Amount paid with request for extension to file (see page 72)	68			
	69	Excess social security and tier 1 RRTA tax withheld (see page 72)	69			
	70	Credits from Form: a <input type="checkbox"/> 2439 b <input type="checkbox"/> 4136 c <input type="checkbox"/> 8801 d <input type="checkbox"/> 8885	70			
	71	Add lines 61, 62, 63, 64a, and 65 through 70. These are your total payments		71	9,626	59
Refund	72	If line 71 is more than line 60, subtract line 60 from line 71. This is the amount you overpaid		72	9,626	59
Direct deposit? See page 73 and fill in 73b, 73c, and 73d, or Form 8888.	73a	Amount of line 72 you want refunded to you. If Form 8888 is attached, check here ▶ <input type="checkbox"/>		73a	9,626	59
	b	Routing number				
	d	Account number				
	c	Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings				
	74	Amount of line 72 you want applied to your 2010 estimated tax ▶	74	-0-		
Amount You Owe	75	Amount you owe. Subtract line 71 from line 60. For details on how to pay, see page 74 ▶		75	-0-	
	76	Estimated tax penalty (see page 74)	76			

Third Party Designee	Do you want to allow another person to discuss this return with the IRS (see page 75)? <input type="checkbox"/> Yes. Complete the following. <input checked="" type="checkbox"/> No		
Designee's name ▶	Phone no. ▶	Personal identification number (PIN) ▶	

Sign Here	Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.		
Joint return? See page 15. Keep a copy	Your signature	Date	Your occupation
		1-18-10	Technician
			Daytime phone number

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.

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

1 Type or print your first name and middle initial. **Last name**
John W. **Sytsma**

2 Social security number (SSN)
 [REDACTED]

3 Address
 [REDACTED]

4 Enter year in space provided and check one box. For the tax year ending December 31, 2009,
 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
Astleford Equipment Co. 12541 Dupont Ave Burnsville, MN 55337

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	-0-	g State income tax withheld	2,505.74
b Social security wages	-0-	(Name of state)	MN
c Medicare wages and tips	-0-	h Local income tax withheld	
d Advance EIC payment		(Name of locality)	
e Social security tips		i Social security tax withheld	2,908.44
f Federal income tax withheld	6,037.99	j Medicare tax withheld	680.16

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 8b)		j Distribution codes	

9 How did you determine the amounts on lines 7 and 8 above?
 Records provided by the payer listed on line 5.

10 Explain your efforts to obtain Form W-2, Form 1099-R, or Form W-2c, Corrected Wage and Tax Statement.
 None.

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.

Sign Here Signature [REDACTED] Date 1-18-10

January 18, 2010

Internal Revenue Service
Fresno, CA 93888-0422

To Whom It May Concern:

On line 61: I added the Social Security and Medicare tax withheld, to the Federal income tax withheld total. According to "Subtitle C- Employment Taxes" Section 3501, they are Federal income taxes, as acknowledged in my previous returns. Thank you.

Sincerely,
John Sytsma
