

Label

(See instructions on page 16.)
Use the IRS label.
Otherwise, please print or type.

LABEL HERE

For the year Jan. 1-Dec. 31, 2005, or other tax year beginning

2005, ending

20

OMB No. 1545-0047

Your first name and initial

RICHARD

Last name

HART

Your social security number

If a joint return, spouse's first name and initial

Last name

Spouse's social security number

see page 16.

Apt. no.

You must enter your SSN(s) above.

Check here if you have a foreign address, see page 16.

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 16) You Spouse

Filing Status

Check only one box.

- 1 Single
- 2 Married filing jointly (even if only one had income)
- 3 Married filing separately. Enter spouse's SSN above and full name here. ▶
- 4 Head of household (with qualifying person). (See page 17.) If the qualifying person is a child but not your dependent, enter this child's name here. ▶
- 5 Qualifying widow(er) with dependent child (see page 17)

Exemptions

If more than four dependents, see page 19.

- 6a Yourself. If someone can claim you as a dependent, do not check box 6a
- b Spouse
- | c Dependents: | | (2) Dependent's social security number | (3) Dependent's relationship to you | (4) <input checked="" type="checkbox"/> Qualifying child for child tax credit (see page 13) |
|----------------|-----------|--|-------------------------------------|---|
| (1) First name | Last name | | | |
| | | | | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |
- d Total number of exemptions claimed

Boxes checked on 6a and 6b

No. of children on 6c who:

- lived with you
- did not live with you due to divorce or separation (see page 20)

Dependents on 6c not entered above

Add numbers on lines above ▶ 1

Income

Attach Form(s) W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld.

If you did not get a W-2, see page 22.

Enclose, but do not attach, any payment. Also, please use Form 1040-V.

- | | | | |
|-----|---|-----|--------|
| 7 | Wages, salaries, tips, etc. Attach Form(s) W-2 | 7 | -0- |
| 8a | Taxable interest. Attach Schedule B if required | 8a | 208 38 |
| b | Tax-exempt interest. Do not include on line 8a | 8b | |
| 9a | Ordinary dividends. Attach Schedule B if required | 9a | -0- |
| b | Qualified dividends (see page 23) | 9b | |
| 10 | Taxable refunds, credits, or offsets of state and local income taxes (see page 23) | 10 | -0- |
| 11 | Alimony received | 11 | -0- |
| 12 | Business income or (loss). Attach Schedule C or C-EZ | 12 | |
| 13 | Capital gain or (loss). Attach Schedule D if required. If not required, check here ▶ <input type="checkbox"/> | 13 | |
| 14 | Other gains or (losses). Attach Form 4797 | 14 | |
| 15a | IRA distributions | 15a | |
| b | Taxable amount (see page 25) | 15b | |
| 16a | Pensions and annuities | 16a | |
| b | Taxable amount (see page 25) | 16b | |
| 17 | Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E | 17 | |
| 18 | Farm income or (loss). Attach Schedule F | 18 | |
| 19 | Unemployment compensation | 19 | |
| 20a | Social security benefits | 20a | |
| b | Taxable amount (see page 27) | 20b | |
| 21 | Other income. List type and amount (see page 29) | 21 | |
| 22 | Add the amounts in the far right column for lines 7 through 21. This is your total income ▶ | 22 | 208 38 |

Adjusted Gross Income

- | | | | |
|-----|--|-----|--------|
| 23 | Educator expenses (see page 29) | 23 | |
| 24 | Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ | 24 | |
| 25 | Health savings account deduction. Attach Form 8889 | 25 | |
| 26 | Moving expenses. Attach Form 3903 | 26 | |
| 27 | One-half of self-employment tax. Attach Schedule SE | 27 | |
| 28 | Self-employed SEP, SIMPLE, and qualified plans | 28 | |
| 29 | Self-employed health insurance deduction (see page 30) | 29 | |
| 30 | Penalty on early withdrawal of savings | 30 | |
| 31a | Alimony paid | 31a | |
| b | Recipient's SSN ▶ | 31b | |
| 32 | IRA deduction (see page 31) | 32 | |
| 33 | Student loan interest deduction (see page 33) | 33 | |
| 34 | Tuition and fees deduction (see page 34) | 34 | |
| 35 | Domestic production activities deduction. Attach Form 8803 | 35 | |
| 36 | Add lines 23 through 31a and 32 through 35 | 36 | 0 |
| 37 | Subtract line 36 from line 22. This is your adjusted gross income ▶ | 37 | 208 38 |

Tax and Credits

Standard Deduction for—

• People who checked any box on line 39a or 39b or who can be claimed as a dependent, see page 36.

• All others: Single or Married filing separately, \$5,000

Married filing jointly or Qualifying widow(er), \$10,000

Head of household, \$7,300

38 Amount from line 37 (adjusted gross income) 38 208 38

39a Check You were born before January 2, 1941, Blind. Total boxes checked **▶** 39a

Spouse was born before January 2, 1941, Blind.

b If your spouse itemizes on a separate return or you were a dual-status alien, see page 35 and check here **▶** 39b

40 Itemized deductions (from Schedule A) or your standard deduction (see left margin) 40 5000 00

41 Subtract line 40 from line 38 41 4791 62

42 If line 38 is over \$108,475, or you provided housing to a person displaced by Hurricane Katrina, see page 37. Otherwise, multiply \$3,200 by the total number of exemptions claimed on line 6d 42 3200 00

43 Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0- 43 7991 62

44 Tax (see page 37). Check if any tax is from: a Form(s) 8814 b Form 4972 44 0

45 Alternative minimum tax (see page 39). Attach Form 6251 45 0

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 Credit for the elderly or the disabled. Attach Schedule R 49

50 Education credits. Attach Form 8863 50

51 Retirement savings contributions credit. Attach Form 8880 51

52 Child tax credit (see page 41). Attach Form 8901 if required 52

53 Adoption credit. Attach Form 8839 53

54 Credits from: a Form 8396 b Form 8859 54

55 Other credits. Check applicable box(es): a Form 3800 b Form 8801 c Form 55

56 Add lines 47 through 55. These are your total credits 56 0

57 Subtract line 56 from line 46. If line 56 is more than line 46, enter -0- 57 0

Other Taxes

58 Self-employment tax. Attach Schedule SE 58 0

59 Social security and Medicare tax on tip income not reported to employer. Attach Form 4137 59 0

60 Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required 60 0

61 Advance earned income credit payments from Form(s) W-2 61 0

62 Household employment taxes. Attach Schedule H 62 0

63 Add lines 57 through 62. This is your total tax 63 0

Payments

If you have a qualifying child, attach Schedule EIC.

64 Federal income tax withheld from Forms W-2 and 1099 64

65 2005 estimated tax payments and amount applied from 2004 return 65

66a Earned income credit (EIC) 66a

b Nontaxable combat pay election **▶** 66b

67 Excess social security and tier 1 RRTA tax withheld (see page 59) 67

68 Additional child tax credit. Attach Form 8812 68

69 Amount paid with request for extension to file (see page 59) 69

70 Payments from: a Form 2439 b Form 4136 c Form 8885 70

71 Add lines 64, 65, 66a, and 67 through 70. These are your total payments 71 10 1

Refund

Direct deposit? See page 59 and fill in 73b, 73c, and 73d.

72 If line 71 is more than line 63, subtract line 63 from line 71. This is the amount you overpaid 72 10 1

73a Amount of line 72 you want refunded to you 73a 10 1

b Routing number **▶** c Type: Checking Savings

d Account number

74 Amount of line 72 you want applied to your 2006 estimated tax **▶** 74

Amount You Owe

75 Amount you owe. Subtract line 71 from line 63. For details on how to pay, see page 60 **▶** 75 10 1

76 Estimated tax penalty (see page 60) 76

Third Party Designee

Do you want to allow another person to discuss this return with the IRS (see page 61)? Yes. Complete the following. No

Designee's name Phone no. Personal identification number (PIN)

Sign Here

Joint return? See page 17. Keep a copy for your records.

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.

Date Your occupation Daytime phone number

Date Spouse's occupation

Spouse's signature, if a joint return, both must sign.

Paid Preparer's Use Only

Preparer's signature Date Check if self-employed Preparer's SSN or PTIN

Firm's name (or yours if self-employed), address, and ZIP code EIN Phone no.

CORRECTED (if checked)

PAYER'S name, street address, city, state, ZIP code, and telephone no. PO BOX 482 WICHITA, KS 67201-8294		1 Rents \$	OMB No. 1545-0115 2005 Form 1099-MISC		Miscellaneous Income		
PAYER'S Federal identification number 48-1212		2 Royalties \$	3 Other income \$	4 Federal income tax withheld \$		Copy B For Recipient	
RECIPIENT'S name, address city, state, and ZIP code Richard Hart	RECIPIENT'S identification number	5 Filing boat proceeds \$	6 Net and health care payments \$	This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.			
Account number (see instructions)	7 Nonemployee compensation \$ -0-	8 Substitute payments in lieu of dividends or interest \$	9 Payment of direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/> \$			10 Crop insurance proceeds \$	
15a Section 409A deferrals \$	15b Section 409A income \$	11	12			13 Excess golden parachute payments \$	14 Gross proceeds paid to an attorney \$
16 State tax withheld \$	17 State/Payer's state no.	18 State income \$					

Form 1099-MISC MGA (keep for your records) Department of the Treasury - Internal Revenue Service

This corrected Form 1099-MISC is submitted to rebut a document known to have been submitted by the party identified above as "PAYER" which erroneously alleges a payment to the party identified above as the "RECIPIENT" of "gains, profit or income" made in the course of a "trade or business". 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.

Richard Hart Date 10/14/2006