Form **1040** Department of the Treasury—Internal Revenue Service
U.S. Individual Income Tax Return 2005
(L) IRS Use Only—Do not write or staple in this space.

For the year Jan. 1–Dec. 31, 2005, or other tax year beginning , 2005, ending , 20 OMB No. 1545-0074

Label

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

LABEL HERE

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
Home address (number and street). If you have a P.O. box, see page 16.	Apt. no.	▲ You must enter your SSN(s) above. ▲
City, town or post office, state, and ZIP code. 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

6a ☑ **Yourself.** If someone can claim you as a dependent, **do not** check box 6a
b ☐ **Spouse**

Boxes checked on 6a and 6b: 1
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

c **Dependents:**

(1) First name Last name	(2) Dependent's social security number	(3) Dependent's relationship to you	(4) ✓ if qualifying child for child tax credit (see page 19)
			☐
			☐
			☐
			☐

If more than four dependents, see page 19.

d Total number of exemptions claimed

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 ▶ ☐		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 b Recipient's SSN ▶	31a		
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 8903	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

38	Amount from line 37 (adjusted gross income)		38	208 38
39a	Check if: ☐ You were born before January 2, 1941, ☐ Blind. ☐ Spouse was born before January 2, 1941, ☐ Blind. Total boxes 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 ☐			
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 $109,475, 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

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

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

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	-0-

If you have a qualifying child, attach Schedule EIC.

Refund

72	If line 71 is more than line 63, subtract line 63 from line 71. This is the amount you **overpaid**	72	-0-
73a	Amount of line 72 you want **refunded to you** ▶	73a	-0-
b	Routing number ▶ c Type: ☐ Checking ☐ Savings		
d	Account number		
74	Amount of line 72 you want **applied to your 2006 estimated tax** ▶ 74		

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

Amount You Owe

75	**Amount you owe.** Subtract line 71 from line 63. For details on how to pay, see page 60 ▶	75	-0-
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

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 17. Keep a copy for your records.

Your signature | Date: 10/15/06 | Your occupation: AMERICAN CITIZEN | Daytime phone number ( )

Spouse's signature. If a joint return, **both** must sign. | Date | Spouse's occupation

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**
		2 Royalties $		
		3 Other income $	4 Federal income tax withheld $	**Copy B** **For Recipient**
PAYER'S Federal identification number 48-1212	RECIPIENT'S identification number	5 Fishing boat proceeds $	6 Medical and health care payments $	
RECIPIENT'S name, address city, state, and ZIP code Richard Hart		7 Nonemployee compensation $ -0-	8 Substitute payments in lieu of dividends or interest $	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.
		9 Payer made direct sales of $5,000 or more of consumer products to a buyer (recipient) for resale ► ☐	10 Crop insurance proceeds $	
		11	12	
Account number (see instructions)		13 Excess golden parachute payments $	14 Gross proceeds paid to an attorney $	
15a Section 409A deferrals $	15b Section 409A income $	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.

[signature] 10/14/2006

Richard Hart Date