

For the year Jan. 1-Dec. 31, 2005, or other tax year beginning 2005, ending 20

Label

(See instructions on page 16.)

Use the IRS label. Otherwise, please print or type.

Presidential Election Campaign

LABEL HERE

Your first name and initial: **Bernadette M** Last name: **Burcher**

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

Home address (number and street). If you have a P.O. box, see page 16. Apt. no.
[Redacted]

City, town or post office, state, and ZIP code. If you have a foreign address, see page 16.
St Louis MO 63110

Your social security number
[Redacted]

Spouse's social security number
[Redacted]

Filing Status

Check only one box.

Single

Married filing jointly (must file a joint return)

Married filing separately (must file a separate return)

Head of household (must file a separate return)

Qualifying widow(er) (must file a separate return)

Robert B Burcher

Exemptions

If more than four dependents, see page 19.

Be Yourself, if you are an individual taxpayer, do not claim an exemption for yourself.

Spouse

Dependents:

Dependent's name	Relationship to you	Age	Disability	Student	Other

Additional information: You are a dependent on someone else's return. You are a student. You are a disabled individual. You are a child of a divorced or separated parent.

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.

Line	Description	Amount	Other	Form
7	Wages, salaries, tips, etc.	00		00
8a	Dividends (not in box 1 of Form 1099-DIV)	00		00
8b	Dividends (in box 1 of Form 1099-DIV)	00		00
9	Interest on U.S. government bonds	00		00
10	Interest on state and local government bonds	00		00
11	Interest on other bonds	00		00
12	Business income or loss (attach Schedule C or C-EZ)	00		00
13	Capital gain or loss (attach Schedule D if required, if not, include reduced rate)	00		00
14	Other capital gain or loss (attach Schedule D)	00		00
15a	IRA distributions	00		00
15b	IRA distributions (taxable)	00		00
16	IRA distributions (nontaxable)	00		00
17	Other distributions (attach Form 1099-R)	00		00
18	Other distributions (taxable)	00		00
19	Other distributions (nontaxable)	00		00
20	Other income (attach Form 1099)	00		00
21	Other income (taxable)	00		00
22	Other income (nontaxable)	00		00

Adjusted Gross Income

Line	Description	Amount	Other	Form
23	Adjusted gross income (see page 22)	00		00
24	State and local income taxes paid (attach Form 1041 or 1042)	00		00
25	State and local general sales taxes paid (attach Form 1041 or 1042)	00		00
26	State and local property taxes paid (attach Form 1041 or 1042)	00		00
27	Other taxes paid (attach Form 1041 or 1042)	00		00
28	Charitable contributions (attach Form 1041 or 1042)	00		00
29	Gift tax paid (attach Form 1041 or 1042)	00		00
30	Employer's contributions to your health, dental, or vision plan (attach Form 1041 or 1042)	00		00
31	Employer's contributions to your pension or profit-sharing plan (attach Form 1041 or 1042)	00		00
32	Employer's contributions to your 401(k) plan (attach Form 1041 or 1042)	00		00
33	Employer's contributions to your 408(a) plan (attach Form 1041 or 1042)	00		00
34	Employer's contributions to your 408(b) plan (attach Form 1041 or 1042)	00		00
35	Employer's contributions to your 457 plan (attach Form 1041 or 1042)	00		00
36	Employer's contributions to your 529 plan (attach Form 1041 or 1042)	00		00
37	Employer's contributions to your 525 plan (attach Form 1041 or 1042)	00		00

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.

OMB No. 1545-0074

1 Type or print your first name and middle initial. Bernadette M Last name Burcher 2 Social security number (SSN) [REDACTED]

3 Address [REDACTED] St Louis MO 63110

4 Enter year in space provided and check one box. For the tax year ending December 31, 2006, 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 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 St Louis Community College
300 S. Broadway St Louis MO 63102-0000 6 Employer's or payer's identification number (if known) 43-0706590

7(A) 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>1139.00</u>
f Federal income tax withheld	<u>1052.00</u>	j Medicare tax withheld	<u>266.00</u>

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

1 Gross distribution	_____	4 Federal income tax withheld	_____
2a Taxable amount	_____	5 State income tax withheld	_____
2b Taxable amount not determined	<input type="checkbox"/>	6 Local income tax withheld	_____
Total distribution	<input type="checkbox"/>	7 Employee contributions	_____
3 Capital gain (included in 2a)	_____	8 Distribution codes	_____

8 How did you determine the amounts in lines 7(A) and 7(B) above?
Company provided records. Statutory language behind IRC Section 3401 and 3121 and others.

9 Explain your efforts to obtain Form W-2, Form 1099-R, or Form W-2c, Corrected Wage and Tax Statement.
Company refuses to issue forms correctly listing payments as not being connected with the performance of the functions of a public office or otherwise constituted gains, profit or income within the meaning of relevant law for fear of IRS 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 ▶ 9/25/06

7979

 VOID CORRECTED

Proceeds From
Broker and
Barter Exchange
Transactions

PAYER'S name, street address, city, state, ZIP code, and telephone no. Compostshare Trust Company 2 North LaSalle St Chicago, IL 60602-0000		1a Date of sale or exchange 9-27-05	OMB No. 1545-0715 2005 Form 1099-B
PAYER'S Federal identification number 84-0802197		1b CUSIP no. 71902E109	2 Stock, bonds, etc. \$ 0 Reported to IRS <input type="checkbox"/> Gross proceeds <input type="checkbox"/> Gross proceeds less commissions and other payments
RECIPIENT'S identification number [REDACTED]	3 Bartering \$ 0	4 Federal income tax withheld \$ 0	
RECIPIENT'S name Bernadette Buscher	5 No. of shares exchanged —	6 Classes of stock exchanged —	
Street address (including apt. no.) [REDACTED]	7 Description Plomin Company		
City, state, and ZIP code St Louis MO 63110	8 Profit or (loss) realized in 2005 \$ 0	9 Unrealized profit or (loss) on open contracts—12/31/2004 \$ 0	
CORPORATION'S name, street address, city, state, and ZIP code	10 Unrealized profit or (loss) on open contracts—12/31/2005 \$ 0	11 Aggregate profit or (loss) \$ 0	
Account number (see instructions) PNX-GOL C0002266224A	2nd TIN not. <input type="checkbox"/>	12 Check the box if recipient cannot take a loss on their tax return based on the amount in box 2 <input type="checkbox"/>	

Copy A
For
Internal Revenue
Service Center

File with Form 1099.

For Privacy Act
and Paperwork
Reduction Act
Notice, see the
2005 General
Instructions for
Forms 1099, 1098,
5498, and W-2G.

Form 1099-B Cat. No. 14411V Department of the Treasury - Internal Revenue Service
Do Not Cut or Separate Forms on This Page Do Not Cut or Separate Forms on This Page

This corrected Form 1099-B 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" made in connection with the performance of the functions of a public office, or otherwise constituted gains, profit or income within the meaning of relevant law. 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.

[REDACTED]

9-25-06

Bernadette M. Buscher