

Form 1099-R

CORRECTED (if checked)

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.

1 Gross distribution
2a Taxable amount
2b Taxable amount not determined

OMB No. 1545-0119
2023
Form 1099-R

Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.

PAYER'S TIN

RECIPIENT'S TIN

3 Capital gain (included in box 2a)

4 Federal income tax withheld

5 Employee contributions / Designated Roth contributions or insurance premiums

RECIPIENT'S name, street address (incl. apt. no.), city or town, state or province, country, and ZIP or foreign postal code

6 Net unrealized appreciation in employer's securities

7 Distribution code(s) IRA/ SEP/ SIMPLE

8 Other

Account number (see instructions)

11 1st year of desig. Roth contrib.

14 State tax withheld

15 State/Payer's state no.

16 State distribution

Copy B Report this income on your federal tax return...

13 Date of payment

12 FATCA filing requirement

10 Amount allocable to IRR within 5 years

17 Local tax withheld

18 Name of locality

19 Local distribution

www.irs.gov/Form1099R

Department of the Treasury - Internal Revenue Service

PRINTED IN USA

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Copy 2 File this copy with your state, city, or local income tax returns, when required.

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This information is being furnished to the IRS.

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(keep for your records)

Department of the Treasury - Internal Revenue Service

FROM:

SEE REVERSE SIDE FOR OPENING INSTRUCTIONS

Important Tax Document Enclosed

First-Class Mail