

Pension, Annuity, and IRA Distributions #1

Please provide all Forms 1099-R.

2016 Information

Prior Year Information

| | | | |
|--|---|-------|------|
| Taxpayer/Spouse (T, S) | | __ | [1] |
| Name of payer | | _____ | [3] |
| State postal code | | ____ | [5] |
| Gross distributions received (Box 1) | + | _____ | [7] |
| Taxable amount received (Box 2a) | + | _____ | [9] |
| Federal withholding (Box 4) | + | _____ | [11] |
| Distribution code (Box 7) | | ____ | [14] |
| Mark if distribution is from an IRA, SEP, SIMPLE retirement plan | | ____ | [16] |
| State withholding (Box 12) | + | _____ | [17] |
| Local withholding (Box 15) | + | _____ | [19] |
| Amount of rollover | + | _____ | [21] |
| Mark if distribution was due to a pre-retirement age disability | | ____ | [23] |

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| | Control Totals + | |
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Pension, Annuity, and IRA Distributions #2

Please provide all Forms 1099-R.

2016 Information

Prior Year Information

| | | | |
|--|---|-------|------|
| Taxpayer/Spouse (T, S) | | __ | [1] |
| Name of payer | | _____ | [3] |
| State postal code | | ____ | [5] |
| Gross distributions received (Box 1) | + | _____ | [7] |
| Taxable amount received (Box 2a) | + | _____ | [9] |
| Federal withholding (Box 4) | + | _____ | [11] |
| Distribution code (Box 7) | | ____ | [14] |
| Mark if distribution is from an IRA, SEP, SIMPLE retirement plan | | ____ | [16] |
| State withholding (Box 12) | + | _____ | [17] |
| Local withholding (Box 15) | + | _____ | [19] |
| Amount of rollover | + | _____ | [21] |
| Mark if distribution was due to a pre-retirement age disability | | ____ | [23] |

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| | Control Totals + | |
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Pension, Annuity, and IRA Distributions #3

Please provide all Forms 1099-R.

2016 Information

Prior Year Information

| | | | |
|--|---|-------|------|
| Taxpayer/Spouse (T, S) | | __ | [1] |
| Name of payer | | _____ | [3] |
| State postal code | | ____ | [5] |
| Gross distributions received (Box 1) | + | _____ | [7] |
| Taxable amount received (Box 2a) | + | _____ | [9] |
| Federal withholding (Box 4) | + | _____ | [11] |
| Distribution code (Box 7) | | ____ | [14] |
| Mark if distribution is from an IRA, SEP, SIMPLE retirement plan | | ____ | [16] |
| State withholding (Box 12) | + | _____ | [17] |
| Local withholding (Box 15) | + | _____ | [19] |
| Amount of rollover | + | _____ | [21] |
| Mark if distribution was due to a pre-retirement age disability | | ____ | [23] |

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| | Control Totals + | |
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NOTES/QUESTIONS: