


CORRECTED (if checked)

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and phone no.
 RETIREMENT SERVICES
 POPULUS GROUP LLC 401K PS PLAN
 550 S. 4TH STREET, N9310-08J
 MINNEAPOLIS, MN 55415-1529

PAYER'S TIN: 41-6257133 RECIPIENT'S TIN: XXX-XX-9463

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

 DIPTI NAGARE
 2820 STRAND CIR
 OVIEDO, FL 32765-7970

10 Amount allocable to IRR within 5 years: \$
 11 1st year of desig. Roth contrib.:
 12 FATCA filing requirement:
 Account number (see instructions): WFEM0POP Tracking #: 65000016093954T1 13 Date of Payment:

FORM 1099-R www.irs.gov/form1099r

1 Gross distribution \$ 1268.79	2b Taxable amount not determined <input type="checkbox"/>
2a Taxable amount \$ 1268.79	Total distribution <input checked="" type="checkbox"/>
3 Capital gain (included in box 2a) \$	4 Federal income tax withheld \$ 380.63
5 Employee contributions /Designated Roth contributions or insurance premiums \$	6 Net unrealized appreciation in employer's securities \$
7 Distribution code(s) 1	8 Other \$ %
9a Your percentage of total distribution %	9b Total employee contributions \$
14 State tax withheld \$	15 State/Payer's state no. FL
17 Local tax withheld \$	18 Name of locality

Department of the Treasury - Internal Revenue Service

OMB No. 1545-0119
2020
Form 1099-R
Distributions
From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.

COPY B
 Report this income on your federal tax return. If this form shows federal income tax withheld in box 4, attach this copy to your return.
 This information is being furnished to the Internal Revenue Service

16 State distribution
\$
 19 Local distribution
\$

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COPY C
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2020
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COPY 2
 File this copy with your state, city, or local income tax return when required.

16 State distribution
\$
 19 Local distribution
\$

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