			TOURKECTED (II	checked)				
PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and phone no. TRANSAMERICA RETIREMENT SOLUTIONS 6400 C STREET SW CEDAR RAPIDS, IA 52499			1 Gross distribution \$11,429.03 2a Taxable amount \$11,429.03		OMB No. 1545-0119	Distributions From Pensions,		
					Profit-Sh		s, Retirement or aring Plans, IRAs, e Contracts, etc.	
	2b Taxable amount no determined		Total distributio	n - C	Copy B Report this income			
FOR QUESTIONS CALL 800-755-5801			3 Capital gain (included in box 2a)		4 Federal income tax withheld		on your federal tax return. If this form	
PAYER'S TIN 13-3689044	RECIPIENT'S TIN ***-5233		5 Employee contributions/Designated Roth contributions or insurance		\$1,142.90 \$1,142.90 6 Net unrealized appreciation in employer's		shows federal income tax withheld in	
RECIPIENT'S name, street address (including apt. no.), city or town, state or province, country, and ZIP or foreign postal code 450DTB PANDIAN JANAKIRAMAN 1381 BRANCHWOOD CIRCLE APT 102 NAPERVILLE, IL 60563			premiums	12 24 45 6	securities		box 4, attach this copy to your return.	
			7 Distribution code(s)	IRA / SEP / X	8 Other % 9b Total employee contributions		This information is being furnished to the IRS.	
			9a Your percentage of	total distribution %				
			14 State tax withheld		15 State/Payer's state no.		16 State distribution	
					IL/1336890440005			
10 Amount allocable to IRR within 5 years	11 1st year of desig. Roth contrib.				18 Name of locality		19 Local distribution	
Account number (see instructions)		13 Date of payment	_	Inalign Record and			nggan Mellul	
TN06915600001 Form 1099-R		0.000	www.irs.gov/Form1	099R	Department of the Treas	ury-Internal F	Revenue Service	
			CORRECTED (if	checked)				
PAYER'S name, street address, city or town, state or province,			1 Gross distribution	1 Gross distribution OMB No. 1545-0119		F D		
country, ZIP or foreign postal code, and phone no. TRANSAMERICA RETIREMENT SOLUTI		S	2a Taxable amount	\$11,429.03	2020	Annuities.	ons From Pensions, Retirement or	
6400 C STREET SW CEDAR RAPIDS, IA 52499			za razasio amount	\$11,429.03	Form 1099-R	Insurance	ring Plans, IRAs, Contracts, etc.	
Amening the later of the second process of subsequences and the entering second			2b Taxable amount no determined	ot 📗	Total distributio	n	Copy C	
State of Proceedings of the Common	DR QUESTIONS CALL 800-755-5801			d in box 2a)	4 Federal income tax withheld	¢4 442 00	Records	
PAYER'S TIN 13-3689044				ons/Designated	\$1,142.90 6 Net unrealized appreciation in employer's		STEEL	
RECIPIENT'S name, street address	Roth contributions or insurance premiums		securities		All the property of the state o			
country, and ZIP or foreign postal code PANDIAN JANAKIRAMAN 1381 BRANCHWOOD CIRCLE APT 102 NAPERVILLE, IL 60563			7 Distribution code(s)	IRA / SEP / X	8 Other	%	This information is being furnished to the IRS.	
			9a Your percentage of		9b Total employee contributions			
			14 State tax withheld	<u>%</u>	15 State/Payer's state no.		16 State distribution	
					IL/1336890440005			
10 Amount allocable to IRR within	Amount allocable to IRR within 11 1st year of desig. 12 FATCA filling		17 Local tax withheld		18 Name of locality		19 Local distribution	
5 years Account number (see instructions)	Roth contrib.	requirement 13 Date of payment					radika kupangan penagan Kanangan	
TN06915600001					Department of the Treasury-Internal F		Davenus Candas	
Form 1099-R	(keep for your reco	rds)	www.irs.gov/Form1	099R	Department of the Treas	ury-internal i	Revenue Service	
		and the second of the second o	CORRECTED (if	f checked)				
PAYER'S name, street address, city	1 Gross distribution	1 Gross distribution OMB No. 1545-0119						
country, ZIP or foreign postal code, and phone no. TRANSAMERICA RETIREMENT SOLUTIONS 6400 C STREET SW CEDAR RAPIDS, IA 52499			\$11,429.03 2a Taxable amount		2020 Annuiti		tions From Pensions, es, Retirement or	
				\$11,429.03	Form 1099-R		aring Plans, IRAs, e Contracts, etc.	
			2b Taxable amount no determined	ot 📗	Total distributio	n _{named} _{name}	Copy 2 File this copy	
FOR QUESTIONS CALL 800-755-5801			3 Capital gain (include	ed in box 2a)	4 Federal income tax withheld	£4.442.00	with your state,	
PAYER'S TIN 13-3689044		RECIPIENT'S TIN ***-**-5233		ons/Designated	\$1,142.90 6 Net unrealized appreciation in employer's		income tax return, when	
RECIPIENT'S name, street address (including apt. no.), city or town, state or province, country, and ZIP or foreign postal code 450DTB			5 Employee contributions/Designated Roth contributions or insurance premiums		securities		required.	
PANDIAN JANAKIRAMAN	7 Distribution code(s)	IRA/SEP/X	8 Other	%				
1381 BRANCHWOOD CIRCLE APT 102 NAPERVILLE, IL 60563			9a Your percentage of	total distribution			9b Total employee contributions	
A V			14 State tax withheld	%	15 State/Payer's state no.		16 State distribution	
Acts on 12 to 40 constitut	04876 86.27		II /4226800440005		The positioner and are as			
10 Amount allocable to IRR within 5 years Roth contrib. 12 FATCA filing requirement 14 Date of payment.			17 Local tax withheld		IL/1336890440005 18 Name of locality		19 Local distribution	
Account number (see instructions) TN06915600001	Soled of the Baseline St.	13 Date of payment			out on the district energic sets describe			
Form 1099-R	ww.irs.gov/Form1099R		Department of the Treasury-Internal Revenue Service					