

CORRECTED (IF CHECKED)

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and phone no. STATE STREET RETIREE SERVICES FOR BTC F/B/O VARIOUS GUIDELINE PLANS 1-833-764-1055 P.O. BOX 12765 OVERLAND PARK, KS 66282-2765		1 Gross distribution \$ 1,247.93		OMB No. 1545-0119 2021 FORM 1099-R		Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.	
PAYER'S TIN 04-3581074		2a Taxable amount \$ 56.93		2b Taxable amount not determined <input type="checkbox"/>		Total distribution <input checked="" type="checkbox"/>	
RECIPIENT'S TIN ***-**-6398		3 Capital gain (included in box 2a) \$		4 Federal income tax withheld \$ 11.39		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 IRS.	
RECIPIENT'S name, street address (including apt. no.), city or town, state or province, country, and ZIP or foreign postal code CHANDRA BANGARU 264 W PULTENEY ST CORNING, NY 14830		5 Employee contributions/Designated Roth contributions or insurance premiums \$ 1,191.00		6 Net unrealized appreciation in employer's securities \$			
10 Amount allocable to IRR within 5 years \$		11 1st year of desig. Roth contrib. 2021		7 Distribution code(s) B1 <input type="checkbox"/> IRA/SEP/SIMPLE		8 Other \$ %	
Account number (see instructions) GUIDELINE-INV-000001		12 FATCA filing requirement <input type="checkbox"/>		9a Your percentage of total distribution %		9b Total employee contributions \$	
13 Date of payment		14 State tax withheld \$ 0.00		15 State/Payer's state no. NY/04-3581074		16 State distribution \$ 56.93	
		17 Local tax withheld \$		18 Name of locality		19 Local distribution \$	

Form 1099-R

www.irs.gov/Form1099R

Department of the Treasury-Internal Revenue Service

CORRECTED (IF CHECKED)

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and phone no. STATE STREET RETIREE SERVICES FOR BTC F/B/O VARIOUS GUIDELINE PLANS 1-833-764-1055 P.O. BOX 12765 OVERLAND PARK, KS 66282-2765		1 Gross distribution \$ 1,247.93		OMB No. 1545-0119 2021 FORM 1099-R		Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.	
PAYER'S TIN 04-3581074		2a Taxable amount \$ 56.93		2b Taxable amount not determined <input type="checkbox"/>		Total distribution <input checked="" type="checkbox"/>	
RECIPIENT'S TIN ***-**-6398		3 Capital gain (included in box 2a) \$		4 Federal income tax withheld \$ 11.39		Copy C For Recipient's Records This information is being furnished to the IRS.	
RECIPIENT'S name, street address (including apt. no.), city or town, state or province, country, and ZIP or foreign postal code CHANDRA BANGARU 264 W PULTENEY ST CORNING, NY 14830		5 Employee contributions/Designated Roth contributions or insurance premiums \$ 1,191.00		6 Net unrealized appreciation in employer's securities \$			
10 Amount allocable to IRR within 5 years \$		11 1st year of desig. Roth contrib. 2021		7 Distribution code(s) B1 <input type="checkbox"/> IRA/SEP/SIMPLE		8 Other \$ %	
Account number (see instructions) GUIDELINE-INV-000001		12 FATCA filing requirement <input type="checkbox"/>		9a Your percentage of total distribution %		9b Total employee contributions \$	
13 Date of payment		14 State tax withheld \$ 0.00		15 State/Payer's state no. NY/04-3581074		16 State distribution \$ 56.93	
		17 Local tax withheld \$		18 Name of locality		19 Local distribution \$	

Form 1099-R (keep for your records)

www.irs.gov/Form1099R

Department of the Treasury-Internal Revenue Service

CORRECTED (IF CHECKED)

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and phone no. STATE STREET RETIREE SERVICES FOR BTC F/B/O VARIOUS GUIDELINE PLANS 1-833-764-1055 P.O. BOX 12765 OVERLAND PARK, KS 66282-2765		1 Gross distribution \$ 1,247.93		OMB No. 1545-0119 2021 FORM 1099-R		Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.	
PAYER'S TIN 04-3581074		2a Taxable amount \$ 56.93		2b Taxable amount not determined <input type="checkbox"/>		Total distribution <input checked="" type="checkbox"/>	
RECIPIENT'S TIN ***-**-6398		3 Capital gain (included in box 2a) \$		4 Federal income tax withheld \$ 11.39		Copy 2 File this copy with your state, city, or local income tax return, when required.	
RECIPIENT'S name, street address (including apt. no.), city or town, state or province, country, and ZIP or foreign postal code CHANDRA BANGARU 264 W PULTENEY ST CORNING, NY 14830		5 Employee contributions/Designated Roth contributions or insurance premiums \$ 1,191.00		6 Net unrealized appreciation in employer's securities \$			
10 Amount allocable to IRR within 5 years \$		11 1st year of desig. Roth contrib. 2021		7 Distribution code(s) B1 <input type="checkbox"/> IRA/SEP/SIMPLE		8 Other \$ %	
Account number (see instructions) GUIDELINE-INV-000001		12 FATCA filing requirement <input type="checkbox"/>		9a Your percentage of total distribution %		9b Total employee contributions \$	
13 Date of payment		14 State tax withheld \$ 0.00		15 State/Payer's state no. NY/04-3581074		16 State distribution \$ 56.93	
		17 Local tax withheld \$		18 Name of locality		19 Local distribution \$	

Form 1099-R

www.irs.gov/Form1099R

Department of the Treasury-Internal Revenue Service