

CORRECTED (if checked)

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and phone no. John Hancock Trust Company LLC 200 Berkeley St. Boston, MA 02116 800-294-3575		1 Gross distribution \$ 28441.16	OMB No. 1545-0119 2022 Form 1099-R		Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.	
PAYER'S TIN 80-0709115		2a Taxable amount \$	3 Capital gain (included in box 2a) \$		4 Federal income tax withheld \$	
RECIPIENT'S TIN XXX-XX-2529		2b Taxable amount not determined <input type="checkbox"/> Total distribution <input checked="" type="checkbox"/>	5 Employee contributions/ Designated Roth contributions or insurance premiums \$		6 Net unrealized appreciation in employer's securities \$	
RECIPIENT'S name Rakesh Chowdari Maddineni 103 Campus Ave Ames, IA 50014		7 Distribution code(s) G	IRA/ SEP/ SIMPLE <input type="checkbox"/>	8 Other \$ %		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.
Account number (see instructions) CA59P2-8667015		9a Your percentage of total distribution %	9b Total employee contributions \$		12 FATCA Filing requirement <input type="checkbox"/>	
10 Amount allocable to IRR within 5 years \$		14 State tax withheld \$	15 State/Payer's state no. IA 800709115001		13 Date of payment	
11 1st year of desig. Roth contrib.		17 Local tax withheld \$	18 Name of locality		16 State distribution \$	
19 Local distribution \$						

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