

CORRECTED (if checked)

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and phone no. VOYA RETIREMENT INSURANCE & ANNUITY CO PO BOX 990067 HARTFORD, CT 06199-0067 (800) 584-6001		1 Gross distribution \$ 2142.78	OMB No. 1545-0119 2022 Form 1099-R		Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.	
		2a Taxable amount \$				
PAYER'S TIN 71-0294708		RECIPIENT'S TIN ***-**-4910		2b Taxable amount not determined <input type="checkbox"/> Total distribution <input checked="" type="checkbox"/> \$	3 Capital gain (included in box 2a) \$	4 Federal income tax withheld \$
				5 Employee contributions/ Designated Roth contributions or insurance premiums \$		6 Net unrealized appreciation in employer's securities \$
RECIPIENT'S name SATISH CHA SHINDE 11596 ARCANE STREET FRISCO TX 75035		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.	
		9a Your percentage of total distribution %	9b Total employee contributions \$			
Account number (see instructions) 551583		11 1st year of desig. Roth contrib.		14 State tax withheld \$	15 State/Payer's state no. TX/0	16 State distribution \$
10 Amount allocable to IRR within 5 years \$		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

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