

CORRECTED (if checked) Date Printed 01/19/2023

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. EMPOWER TRUST COMPANY LLC PO BOX 173764 D999 DENVER, CO 80217-3764 1-844-465-4455		1 Gross distribution <div style="text-align: right;">\$3,382.09</div>		OMB No. 1545-0119 <div style="font-size: 24pt; font-weight: bold;">2022</div> Form 1099-R	Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.
		2a Taxable amount <div style="text-align: right;">\$0.00</div>			
PAYER'S TIN 84-1455663		RECIPIENT'S TIN ***-**-4964		2b Taxable amount not determined <input type="checkbox"/> Total distribution <input checked="" type="checkbox"/>	
RECIPIENT'S name, street address (including apt. no.), city or town, state or province, country, and ZIP or foreign postal code NEHA KUMARI 10537 HOLLIWELL CT DULUTH, GA 30097		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		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.	
7 Distribution code(s) G IRA / SEP / SIMPLE <input type="checkbox"/>		8 Other %			
9a Your percentage of total distribution %		9b Total employee contributions		This information is being furnished to the IRS.	
14 State tax withheld		15 State/Payer's state no. GA/2069501CQ			
10 Amount allocable to IRR within 5 years		11 1st year of desig. Roth contrib.		12 FATCA filing requirement <input type="checkbox"/>	
17 Local tax withheld		18 Name of locality		19 Local distribution	
Account number (see instructions) 194554		13 Date of payment			

Form 1099-R www.irs.gov/Form1099R Department of the Treasury-Internal Revenue Service

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