PRINCIPAL LIFE INSURANCE COMPANY ATTENTION: RIS 711 HIGH ST DES MOINES, IA 50392

01/23/2023

03010-TAX RECORD IS DUE TO A DISTRIBUTION FROM A RETIREMENT PLAN GOT QUESTIONS? GO TO: WWW.PRINCIPAL.COM/1099R DO YOU STILL HAVE QUESTIONS? THEN PLEASE CALL: 1-800-547-7754. RETIREMENT SPECIALISTS ARE AVAILABLE 7 AM - 9 PM (CST), MON-FRI.

SUJAN GALIVEETI 2880 N WICKHAM RD APT 702 MELBOURNE, FL 32935

## Instructions for Recipient

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 Generally, distributions from retirement plans (IRAs, qualified plans, section 403(b) plans, and governmental section 457(b) plans), insurance contracts, etc., are reported to recipients on Form 1099-R.
 Qualified plans and section 403(b) plans. If your annuity starting date is after 1997, you must use the simplified method to figure your taxable amount if your payer didn't show the taxable amount in box 2a. See the instructions for your tax return.
 IRAs. For distributions from a traditional individual retirement arrangement (IRA), simplified employee pension (SEP), or savings incentive match plan for employees (SIMPLE), generally the payer isn't required to compute the taxable amount. See the instructions for your tax return to determine the taxable amount. If your eat least age 72, you must take minimum distributions from your IRA (other than a Roth IRA). If you don't, you're subject to a 50% excise tax on the amount that should've been distributed. See Pub. 590-A and Pub. 590-B for more information on IRAs.

Roth IRAs. Roth IRAs. For distributions from a Roth IRA, generally the payer isn't required to compute the taxable amount. You must compute any taxable amount on Form 8606. An amount shown in box 2a may be taxable earnings on an excess

contribution. Loans treated as distributions. If you borrow money from a qualified plan, section 403(b) plan, or governmental section 457(b) plan, you may have to treat the loan as a distribution and include all or part of the amount borrowed in your income. There are exceptions to this rule. If your loan is taxable, code L will be shown in box 7. See Pub. 575. Bacinger's taxable

Income. There are exceptions to this rule. If your loan is taxable, code L will be shown in box 7. See Pub. 575. Recipient's taxaper identification number (TIN). For your protection, this form may show only the last four digits of your TIN (SSN, ITIN, ATIN, or EIN). However, the payer has reported your complete TIN to the IRS. Account number. May show an account, policy, or other unique number the payer assigned to distinguish your account. Box 1. Shows the total amount distributed this year. The amount may have been a direct rollover, a transfer or conversion to a Roth IRA, a recharacterized IRA contribution; or you may have received it as periodic payments, on a total distribution. Report the amount on Form 1040, 1040-SR, or 1040-NR on the line for "IRA distributions" or "Pensions and annuities" (or the line for "Taxable amount") and on Form 8006, as applicable. However, if this is a lump-sum distribution, see form 4972. If you haven't reached minimum retirement age, report your disability payments on the line for "Wages, salaries, tips, etc." on your tax return. Also report on that line permissible withdrawals from eligible automatic contributions, or vecess aggregate contributions except if the distributions or your after-tax contributions or if you re self-employed. If a charge or payment will be shown in this box and code 6 will be shown in box 7. If a charge or payment was made against the cash value of an annuity contract or the cash surrender value of a life insurance, an amount will be shown in this box and code 6 will be shown in box 7. The anamount will be shown in box 7. The amount shown in box 7. The amount shown in box 1 is a receipt of reportable death benefits that is taxable in part. Box 2a. This part of the distribution is generally taxable. If there is no entry in this

Indifigurit the set allocations of a your text return in order death benefits that is taxable in part.
Box 2a. This part of the distribution is generally taxable. If there is no entry in this box, the payer may not have all the facts needed to figure the taxable amount. In that case, the first box in box 2b should be checked. You may want to get one of the free publications from the IRS to help you figure the taxable amount. See Additional information on the back of Copy 2. For an IRA distribution, see IRAs and Roth IRAs, earlier. For a direct rollover, other than rom a qualified plan, section 403(b) plan, or governmental section 457(b) plan to a designated Roth account in the same plan or to a Roth IRA, zero should be shown and you must enter zero (-0-) on the "Taxable amount" line of your tax return. If you roll over a distribution (other than a distribution from a designated Roth account in the same plan or to a Roth IRA, zero should be shown and you must enter zero (-0-) on the "Taxable amount" line of your tax return. If you roll over a distribution (other than a distribution from a designated Roth account in the same plan or to a Roth IRA, you roll over a distribution (other than a distribution from a dualified plan, section 403(b) plan, or governmental section 457(b) plan to a designated Roth account in the same plan or to a Roth IRA, you roll over a distribution from a dualified plan and you were born before January 2, 1936 (or you're the beneficiary of someone born before January 2, 1936 (or you're the beneficiary of someone born before January 2, 1936 (or you're the beneficiary of someone born before January 2, 1936), you may be eligible for the 10-year tax option. See the Form 4972 instructions for more information.
Box 2b. If the first box is checked, the payer was unable to determine the taxable amount. If wou rees and you your account. Box 2b. If the first box is checked, the payer was unable to determine the taxable amount. If the second box is checked, the distribution

determine the taxable amount. If the second box is checked, the distribution was a total distribution that closed out your account. **Box 3.** If you received a lump-sum distribution from a qualified plan and were born before January 2, 1936 (or you're the beneficiary of someone born before January 2, 1938), you may be able to elect to treat this amount as a capital gain on Form 49.72 (not on Schedule D (Form 1040)). See the Form 4972 instructions. For a charitable gift annuity, report as a long-term capital gain as explained in the Instructions for Form 8949. **Box 4.** Shows federal income tax withheld. Include this amount on your income tax return as tax withheld, and if box 4 shows an amount (other than zero), attach Copy B to your return. Generally, if you receive payments that aren't eligible rollover distributions, you can change your withholding or elect not to have income tax withheld by giving the payer Form W-4P. 4 3.000

**Box 5.** Generally, this shows the employee's investment in the contract (after-tax contributions), if any, recovered tax free this year; the portion that's your basis in a designated Roth account; the part of premiums paid on commercial annuities or insurance contracts recovered tax free; the nontaxable part of a charitable gift annuity; or the investment in a life insurance contract reportable under section 6050Y. This box doesn't show any IRA contributions. If the amount shown is your basis in a designated Roth account, the year you first made contributions to that account may be entered in box 11.

doesn't show any IRA contributions. If the amount shown is your basis in a designated Roth account, the year you first made contributions to that account may be entered in box 11.
 Box 6. If you received a lump-sum distribution from a qualified plan that includes securities of the employer's company, the net unrealized appreciation (NUA) (any increase in value of such securities while in the trust) is taxed only when you sell the securities unless you choose to include it in your gross income this year. See Pub. 575 and Form 4972. If you roll over the distributiont a designated Roth account in the same plan or to a Roth IRA, see the instructions for box 2a. For a direct rollover to a designated Roth account in the same plan or to a Roth IRA, the NUA is included in box 2a. If you didn't receive a lump-sum distribution, the amount shown is the NUA attributable to employee contributions, which isn't taxed until you sell the securities.
 Box 7. The following codes identify the distribution you received. For more information on these distributions, see the instructions for your tax return. Also, certain distribution, see the instructions for your tax return. Also, certain distribution, exception applies (under age 591/2). 3-Disability. 4-Death. 5-Prohibitor. 8-Excess contributions by 10. Section 1035 exchange (a tax/free exchange of life insurance, on secess contributions by 10. Section 1035 excess deferrals (and/or earnings) taxable in 2022. 9-Cost of current life insurance portection. A-May be eligible for 10-year tax point (see Form 4972). B-Designated Roth account distribution, Note: If Code B is in box 7 and an amount is reported in bx 11. See the lnstructions for Form 5329. C-Reportable death benefits under section 0505. Charitable gital annuity. GDirect rollover of a distribution of radius and an amount is reported in bx 11. Section 1411. E-Distributions under Employee Plans Compliance Resolution System (EPCRS). F-Charitable gital annuity. GDirect rolloverof a distribution

SIMPLE distribution. Box 8. If you received an annuity contract as part of a distribution, the value of the contract is shown. It isn't taxable when you receive it and shouldn't be included in boxes 1 and 2a. When you receive periodic payments from the annuity contract, they're taxable at that time. If the distribution is made to more than one person, the percentage of the annuity contract distributed to you is also shown. You'll need this information if you use that other 10-year tax option (Form 4972). If charges were made for qualified long-term care insurance contracts under combined arrangements, the amount of the reduction in the investment (but not below zero) in the annuity or life insurance contract is reported here. Box 9a. If a total distribution was made to more than one person, the percentage you received is shown.

received is shown. **Box 9b.** For a life annuity from a qualified plan or from a section 403(b) plan (with after-tax contributions), an amount may be shown for the employee stotal investment in the contract. It is used to compute the taxable part of the distribution. See Pub. 575.

**Box 10.** If an amount is reported in this box, see the Instructions for Form 5329 and Pub. 575. **Box 11.** The first year you made a contribution to the designated Roth account reported on this form is shown in this box.

Box 12. If checked, the payer is reporting on this Form 1099 to satisfy its Internal Revenue Code chapter 4 account reporting requirement under FATCA. You may also have a filing requirement. See the Instructions for Form 8938.

Box 13. Shows the date of payment for reportable death benefits under section 6050Y. **Boxes 14-19.** If state or local income tax was withheld from the distribution, boxes 16 and 19 may show the part of the distribution subject to state and/or local tax.

Additional information. You may want to see: Form W-4P, Form 4972, Form 5329, Form 8606 Pub. 525, Taxable and Nontaxable Income Pub. 560, Retirement Plans for Small Business Pub. 571, Tax-Sheltered Annuity Plans Pub. 590-A, Contributionsto I RAs Pub. 590-A, Contributionsto I RAs Pub. 590-B, Distributions from IRAs Pub. 721, U.S. Civil Service Retirement Benefits Pub. 939, General Rule for Pensions and Annuities Pub. 969, HSAs and Other Tax-Favored Health Plans

|   |  | CORRE                 | ECTED (if checked)   | REISSUED STATEMENT   |   |  |  |
|---|--|-----------------------|--|--|---|--|--|
| PAYER'S name, street address, city or   | town, state or province                          | ce, country,          | 1 Gross distribution   | OMB No. 1545-0119  | Distributions From<br>Pensions, Annuities,  |  |  |
| ZIP or foreign postal code, and teleph<br>PRINCIPAL LIFE INSURANCE C  |  |                       | \$ 5,194.87  |  | Retirement or   |  |  |
| 711 HIGH STREET   | 0  |                       | <b>2a</b> Taxable amount   | 1 20 <b>22</b>   | Profit-Sharing<br>Plans, IRAs,<br>Insurance   |  |  |
| DES MOINES, IA 50392-0001   |  |                       |  | Form <b>1099-R</b>   |   |  |  |
| ,   |  |                       | \$ 5,194.87  | Form 1099-R  | Contracts, etc.   |  |  |
|   |  |                       | 2b Taxable amount<br>not determined  | Total  | Copy B<br>Report this   |  |  |
|   |  |                       |  | distribution X   | income on your<br>federal tax   |  |  |
| YER'S TIN RECIPIENT'S TIN   |  |                       | 3 Capital gain (included in box 2a)  | 4 Federal income tax withheld  | return. If this form shows  |  |  |
| 42-0127290  | XXX-XX-6040                                      |                       | \$   | <b>\$</b> 1,038.97   | federal income<br>tax withheld in   |  |  |
| RECIPIENT'S name, street address (in<br>state or province, country, and ZIP or  | cluding apt. no.), city o<br>foreign postal code | r town,               | 5 Employee contributions/Designated Roth<br>contributions or insurance premiums                    | <ol> <li>Net unrealized appreciation in<br/>employer's securities</li> </ol> | box 4, attach<br>this copy to<br>your return.   |  |  |
| SUJAN GALIVEETI   |  |                       | \$   | \$   |   |  |  |
| 2880 N WICKHAM RD APT 702   |  |                       | 7 Distribution code(s) IRA/<br>SEP/  | 8 Other  | 1   |  |  |
| MELBOURNE, FL 32935   |  |                       |  | s %  | This information is<br>being furnished to   |  |  |
|   |  |                       | 9a Your percentage of total  | 9b Total employee contributions  | the IRS.  |  |  |
|   |  |                       | distribution %   |  |   |  |  |
| 10 Amount allocable to IRR  | <b>11</b> 1st year of                            | <b>12</b> FATCA       | 14 State tax withheld  | <b>15</b> State/Payer's state no.  | <b>16</b> State distribution  |  |  |
| within 5 years  | desig. Roth contrib.                             | filing requirement    |  | -  |   |  |  |
| <b>5</b>  |  | 12 5                  | \$   | FL /   | \$ 0.00   |  |  |
| Account number (see instructions)<br>725152   |  | 13 Date of<br>Payment | 17 Local tax withheld  | 18 Name of locality  | <b>19</b> Local distribution  |  |  |
| FRACKING #: 30195416T4  |  |                       | \$   |  | \$  |  |  |
| orm <b>1099-R</b>   |  | www.irs.g             | ov/Form1099R   | Department of the Trea   | asury - Internal Revenue Service  |  |  |
| PAYER'S name, street address, city or town, state or province, country,<br>ZIP or foreign postal code, and telephone no.<br>PRINCIPAL LIFE INSURANCE CO<br>711 HIGH STREET<br>DES MOINES, IA 50392-0001 |  |                       | 1       Gross distribution         \$ 5,194.87         2a       Taxable amount         \$ 5,194.87 | OMB No. 1545-0119<br>20 <b>22</b><br>Form <b>1099-R</b>                      | Pensions, Annuities,<br>Retirement or<br>Profit-Sharing<br>Plans, IRAs,<br>Insurance<br>Contracts, etc. |  |  |
|   |  |                       | <b>2b</b> Taxable amount   | F - F  |   |  |  |
|   |  |                       | not determined   | Total distribution X   | Conv C  |  |  |
| PAYER'S TIN   | RECIPIENT'S TIN                                  |                       | 3 Capital gain (included in box 2a)  | 4 Federal income tax withheld  | For Recipient's<br>Records  |  |  |
| 42-0127290  | XXX-XX-6040                                      |                       | \$   | \$ 1,038.97  |   |  |  |
| FECIPIENT'S name, street address (inc   |  | r town,               | 5 Employee contributions/Designated Roth   | <b>6</b> Net unrealized appreciation in                                      |   |  |  |
| state or province, country, and ZIP or  | foreign postal code                              |                       | contributions or insurance premiums  | employer's securities  |   |  |  |
| SUJAN GALIVEETI   |  |                       | S     Distribution code(s) IRA/  | \$ 8 Other   |   |  |  |
| 2880 N WICKHAM RD APT 702<br>MELBOURNE, FL 32935  |  |                       | Distribution code(s) IRA/<br>SEP/<br>SIMPLE  |  | This information is   |  |  |
| MEEDOORNE, I E 52/55  |  |                       |  | \$ %   |   |  |  |
|   |  |                       | 9a Your percentage of total distribution   | 9b Total employee contributions  | the IRS.  |  |  |
|   |  |                       | //////////////////////////////////////   | 6 <b>\$</b>  |   |  |  |
| 10 Amount allocable to IRR<br>within 5 years  |  |                       | 14 State tax withheld  | 15 State/Payer's state no.   | 16 State distribution   |  |  |
| \$  |  |                       | \$   | FL /   | \$ 0.00   |  |  |
| Account number (see instructions) <b>13</b> Date of Payment   |  |                       | <b>17</b> Local tax withheld   | <b>18</b> Name of locality   | <b>19</b> Local distribution  |  |  |
|   |  |                       |  | ,  | 1.  |  |  |
|   | for your records.)                               | 1                     | \$   | \$<br>easury - Internal Revenue Service                                      |   |  |  |
| (Keep   | ior your records.)                               | www.irs.g             | ov/Form1099R   | Department of the free   | addry mitemar nevenue del vice  |  |  |
|   | ·  |                       |  |  |   |  |  |
| AYER'S name, street address, city or  |  |                       | ECTED (if checked)   | REISSUED STATEMENT   | Distributions From  |  |  |
|   |  | a aquintri            | 1 Gross distribution   | OMB No. 1545-0119  |   |  |  |

| PAYER'S name, street address, city or town, state or province, country,<br>ZIP or foreign postal code, and telephone no.<br>PRINCIPAL LIFE INSURANCE CO<br>711 HIGH STREET<br>DES MOINES, IA 50392-0001 |   |                                    | 1 Gross distribution<br>\$ 5,194.87<br>2a Taxable amount<br>\$ 5,194.87         |                                 |              |    | OMB No. 1545-0119<br>20 <b>22</b><br>Form <b>1099-R</b>   |                       | Pensions, Annuities,<br>Retirement or<br>Profit-Sharing<br>Plans, IRAs,<br>Insurance<br>Contracts, etc. |    |                                    |
|---|---|------------------------------------|---|---------------------------------|--------------|----|---|-----------------------|---|----|------------------------------------|
|   | -   |                                    | 2b  | Taxable amount not determined   |              |    |   | Total<br>distribution | X   |    | Copy 2                             |
| PAYER'S TIN   | RECIPIENT'S TIN                           |                                    | 3   | Capital gain (includ            | ed in box 2a | a) | 4   | Federal income tax    | withheld  | I  | File this copy<br>with your state, |
| 42-0127290  | XXX-XX-6040                               |                                    |   |                                 |              |    | \$  | 1,038.97              |   |    | city, or local                     |
| RECIPIENT'S name, street address (including apt. no.), city or town, state or province, country, and ZIP or foreign postal code   |   |                                    | 5 Employee contributions/Designated Roth<br>contributions or insurance premiums |                                 |              |    | 6 Net unrealized appreciation in<br>employer's securities |                       |   | 1  | income tax<br>return, when         |
| SUJAN GALIVEETI   |   |                                    | \$  |                                 |              |    | \$  |                       |   |    | required.                          |
| 2880 N WICKHAM RD APT 702   |   |                                    | 7   | Distribution code(s)            | IRA/<br>SEP/ |    | 8   | Other                 |   | 1  |                                    |
| MELBOURNE, FL 32935   |   |                                    |   | 1                               | SIMPLE       |    | \$  |                       | %   |    |                                    |
|   |   |                                    | 9a  | Your percentage of distribution | total        | %  | 91<br>\$  | Total employee cont   | ributions   |    |                                    |
| 10 Amount allocable to IRR<br>within 5 years  | <b>1</b> 1st year of lesig. Roth contrib. | <b>12</b> FATCA filing requirement | 14  | State tax withhe                | ld           |    | 15  | State/Payer's stat    | te no.  | 16 | State distribution                 |
| \$  |   | -                                  | \$  |                                 |              |    | F   | L /                   |   | \$ | 0.00                               |
| Account number (see instructions)<br>725152   |   | 13 Date of<br>Payment              | 17  | Local tax withhe                | ld           |    | 18  | Name of locality      |   | 19 | Local distribution                 |
| TRACKING #: 30195416T4  |   |                                    | \$  |                                 |              |    |   |                       |   | \$ |                                    |