

**Form 1099-R**  CORRECTED (if checked) OMB No. 1545-0119 **2022**

1 Gross distribution \$ 13828.27	2a Taxable amount \$ 0.00	Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.	
2b Taxable amount not determined	Total distribution \$ X	12 FATCA filing requirement	13 Date of payment

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and phone no.  
**ADP RETIREMENT SERVICES 1-866-713-6152**  
**249012 FLEXTON, INC. 401K PLAN**  
**11 NORTHEASTERN BLVD**  
**SALEM NH 03079-2380**

PAYER'S TIN <b>57-1198022</b>		RECIPIENT'S TIN <b>XXX-XX-6722</b>	
3 Capital gain (included in box 2a) \$ 0.00	4 Federal income tax withheld \$ 0.00	5 Employee contributions/Designated Roth contributions or insurance premiums \$ 0.00	
6 Net unrealized appreciation in employer's securities \$ 0.00	7 Distribution code(s) <b>G</b>	8 Other \$ 0.00	%
9a Your percentage of total distribution		9b Total employee contributions \$ 0.00	

Recipient's name, street address (including apt. no.), city or town, state or province, country, and Zip or foreign postal code

**PARITALA SURYA NAR**  
**436 BOYNTON AVENUE APT 239**  
**SAN JOSE CA 95117**

Account number (see instr.) <b>20230120033600135448</b>		11 1st year of desig. Roth contrib.	10 Amount allocable to IRR within 5 years \$
14 State tax withheld \$ 0.00	15 State/Payer's state no. <b>CA81511792</b>	16 State distribution \$ 0.00	
17 Local tax withheld \$	18 Name of locality	19 Local distribution \$	

Copy 2 File this copy with your state, city, or local income tax return, when required. Department of the Treasury Internal Revenue Service www.irs.gov/Form1099R

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**005437 SADA99C1**  
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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. Department of the Treasury Internal Revenue Service

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