

PAYER'S Name, Street Address, City, State, and ZIP code

MILLENNIUM TRUST COMPANY, LLC
PO BOX 940287
PLANO TX 75094

RECIPIENT'S Name and Address

0083038 01 AB 0.491 **AUTO T3 0 0446 40245-330423 -C01-P83121-I

CHENNA BAVANASI
2023 POLOVIEW PLACE
LOUISVILLE KY 40245-3304



Table with 4 columns: Customer service phone number, 10 Amount allocable to IRR within 5 years, 11 1st year of desig. Roth contrib., 12 FATCA filing requirement. Includes PAYER'S TIN, RECIPIENT'S TIN, Account Number, and Date of payment.

FORM 1099-R (keep for your records)

www.irs.gov/Form1099R

Department of the Treasury - Internal Revenue Service

PAYER'S Name, Street Address, City, State, and ZIP code

MILLENNIUM TRUST COMPANY, LLC
PO BOX 940287
PLANO TX 75094

RECIPIENT'S Name and Address

CHENNA BAVANASI
2023 POLOVIEW PLACE
LOUISVILLE KY 40245-3304

Table with 4 columns: Customer service phone number, 10 Amount allocable to IRR within 5 years, 11 1st year of desig. Roth contrib., 12 FATCA filing requirement. Includes PAYER'S TIN, RECIPIENT'S TIN, Account Number, and Date of payment.

FORM 1099-R

www.irs.gov/Form1099R

Department of the Treasury - Internal Revenue Service

PAYER'S Name, Street Address, City, State, and ZIP code

MILLENNIUM TRUST COMPANY, LLC
PO BOX 940287
PLANO TX 75094

RECIPIENT'S Name and Address

CHENNA BAVANASI
2023 POLOVIEW PLACE
LOUISVILLE KY 40245-3304



Table with 4 columns: Customer service phone number, 10 Amount allocable to IRR within 5 years, 11 1st year of desig. Roth contrib., 12 FATCA filing requirement. Includes PAYER'S TIN, RECIPIENT'S TIN, Account Number, and Date of payment.

FORM 1099-R

0446-01-00-0083038-0001-0083304

www.irs.gov/Form1099R

Department of the Treasury - Internal Revenue Service

Form 1099-R (top): 1 Gross distribution \$ 15732.02, 2a Taxable amount \$ 0.00, 4 Federal income tax withheld \$, 7 Distribution code(s) G, IRA/SEP/SIMPLE X, 8 Other \$, 9a Your percentage of total distribution %, 9b Total employee contributions \$, 14 State tax withheld \$, 15 State/Payer's state no., 16 State distribution \$, 17 Local tax withheld \$, 18 Name of locality, 19 Local distribution \$.

OMB No. 1545-0119

2022

Form 1099-R: Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.

This information is being furnished to the IRS

COPY C For Recipient's Records

Form 1099-R (middle): 1 Gross distribution \$ 15732.02, 2a Taxable amount \$ 0.00, 4 Federal income tax withheld \$, 7 Distribution code(s) G, IRA/SEP/SIMPLE X, 8 Other \$, 9a Your percentage of total distribution %, 9b Total employee contributions \$, 14 State tax withheld \$, 15 State/Payer's state no., 16 State distribution \$, 17 Local tax withheld \$, 18 Name of locality, 19 Local distribution \$.

OMB No. 1545-0119

2022

Form 1099-R: Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.

This information is being furnished to the IRS

COPY 2 File this copy with your state, city, or local income tax return, when required.

Form 1099-R (bottom): 1 Gross distribution \$ 15732.02, 2a Taxable amount \$ 0.00, 4 Federal income tax withheld \$, 7 Distribution code(s) G, IRA/SEP/SIMPLE X, 8 Other \$, 9a Your percentage of total distribution %, 9b Total employee contributions \$, 14 State tax withheld \$, 15 State/Payer's state no., 16 State distribution \$, 17 Local tax withheld \$, 18 Name of locality, 19 Local distribution \$.

OMB No. 1545-0119

2022

Form 1099-R: Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.

This information is being furnished to the IRS

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.