

PAYER'S name, street address, city, state, and ZIP code  
City of Philadelphia  
Board of Pensions & Retirement  
16th Floor, Two Penn Center  
Philadelphia, PA 19102  
(215) 496-7400

PAYER'S Federal identification No.  
23-1735315

RECIPIENT'S identification No.  
XXX-XX-9447

RECIPIENT'S Name and Address

KRISHNASAKET DOSAPATI  
451 E MARKET ST APT 514  
INDIANAPOLIS, IN 46204-2777

1 Gross distribution  
\$ 12406.11  
2a Taxable amount  
\$ 12406.11  
2b Taxable amount  
not determined   
3 Capital gain (incl. in 2a)

5 Employee contributions  
or insurance premiums  
\$ 0.00

7 Distribution  
code 1  IRA/  
SEP/  
SIMPLE

9a Your percentage of total  
distribution

10 Amt to IRR in 5 Years

14 State tax withheld

17 Local tax withheld

OMB No. 1545-0119

2022

Total  
distribution

4 Federal tax withheld  
\$ 2481.22

6 Net unrealized appreciation  
in employer's securities

8 Other

9b Total employee contributions  
\$ 0.00

11 1st YEAR desig Roth cont

15 State/Payer's state no.

18 Name of locality

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

Form 1099-R Copy B

Report this income  
on your Federal tax  
return. If box 4  
shows Federal tax  
withheld, attach  
this copy to your  
tax return

12 FATCA filing Req.

16 State distribution

19 Local distribution

Account number (see inst.)

13 Date of payment

S-296267-0 WITH00271

Form 1099-R

This information is being furnished  
to the Internal Revenue Service.

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Form 1099-R Copy C

For Recipient's  
Records

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Form 1099-R Copy 2

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

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