		CORRE	СТЕ	ED (if checke	d)					
PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and phone no. John Hancock Trust Company LLC 200 Berkeley St.			Gross distribution 6291.84 Za Taxable amount \$			OMB No. 1545-0119 2023 Form 1099-R		Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.		
Boston, MA 02116 800-294-3575		21	b Taxable amoun not determined	t Total distribution	3 \$	Capital gain (include	d in box 2a)	Federal income tax withheld	
PAYER'S TIN 80-0709115 RECIPIENT'S name	RECIPIENT'S TIN XXX-XX-37	01	5 Employee contributions/ Designated Roth contributions or insurance premiums \$			• \$	Net unrealized appreciation in employer's securities			Copy B Report this income on your federal tax return. If this form shows federal
Saurabh Shandilya 3691 Hudson Hills Ln Mason, OH 45040			7	Distribution code(s) G	IRA/ SEP/ SIMPLE	8 \$	Other		%	income tax withheld in boy 4, attach this copy to your return
			9a	Your percentag total distribution		9b \$	Total employee cont	ributions	- H	12 FATCA Filing requirement 13 Date of payment
			14 State tax withheld\$		15	 15 State/Payer's state no. OH 52792205 			16 State distribution \$	
Account number (see instructions) AR27P2-9292444 11 1st year of desig. Roth contrib.			17 Local tax withheld \$			18 Name of locality				19 Local distribution\$
Form 1099-R	www.irs.gov/form1099r						D	epartment o	f the	Treasury - Internal Revenue Service

	ECTED (if checked)			
PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and phone no. John Hancock Trust Company LLC 200 Berkeley St.	1 Gross distribution 6291.84 2a Taxable amount \$	2023 Pro	tributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.	
Boston, MA 02116 800-294-3575	2b Taxable amount Total not determined distribution X	3 Capital gain (included in box 2a \$	a) 4 Federal income tax withheld \$	
PAYER'S TIN RECIPIENT'S TIN 80-0709115 XXX-XX-3701	5 Employee contributions/ Designated Roth contributions or insurance premiums	6 Net unrealized appreciation in employer's securities	Сору С	
Saurabh Shandilya	S T Distribution IRA/ code(s) SEP/ G SIMPLE	\$ 8 Other \$	For Recipient's Records	
3691 Hudson Hills Ln Mason, OH 45040	9a Your percentage of total distribution %	<pre>9b Total employee contributions , , , , , , , , , , , , , , , , , , ,</pre>	12 FATCA Filing requirement 13 Date of payment	
	14 State tax withheld \$	15 State/Payer's state no. OH 52792205	16 State distribution \$	
Account number (see instructions) AR27P2-9292444 11 1st year 10 Amount allocable to IRR within 5 years \$ Form 1099-R (keep for your records) www.irs.gov/form1	\$	18 Name of locality	19 Local distribution \$ of the Treasury - Internal Revenue Service	

			СТІ	ED (if checke	d)					
PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and phone no. John Hancock Trust Company LLC 200 Berkeley St. Boston, MA 02116 800-294-3575			Gross distribution G291.84 Za Taxable amount \$			OMB No. 1545-0119 2023 Form 1099-R		Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.		
			2	b Taxable amour not determined		3 \$	Capital gain (include	d in bo	x 2a)	4 Federal income tax withheld\$
PAYER'S TIN 80-0709115 RECIPIENT'S name	RECIPIENT'S TIN	701	5 Employee contributions/ Designated Roth contributions or insurance premiums			6	6 Net unrealized appreciation in employer's securities			Copy 2 File this copy with your state, city, or
Saurabh Shandilya 3691 Hudson Hills Ln Mason, OH 45040			\$ 7	Distribution code(s) G	IRA/ SEP/ SIMPLE	\$ 8 \$	Other		%	local income tax return, wher required
			9a	Your percentag total distribution		9b \$	Total employee cont	ributior	าร	12 FATCA Filing requirement 13 Date of payment
				State tax withhe	əld	15	State/Payer's state n OH 52792205	0.		16 State distribution \$
Account number (see instructions) AR27P2-9292444 11 1st year of desig. Roth contrib.			17 \$	Local tax withh	eld	18	Name of locality			19 Local distribution \$
							-			

Form 1099-R