			CORRECTED (if ch	ecked)	Date Printed 01/18/202			
S name, street address, city or town, state or		-	1 Gross distribution		OMB No. 1545-0119			
ce, country, ZIP or foreign postal code, and telephone no. POWER TRUST COMPANY LLC BOX 173764 D999 NVER, CO 80217-3764 00-338-4015			\$11,724.31 2a Taxable amount		2023	Distributions From Pensions Annuities, Retirement or		
				\$11,724.31	Form 1099-R	Profit-Sha Insurance	ering Plans, IRAs, Contracts, etc.	
			2b Taxable amount not determined		Total distribution	X	Сору В	
ER'S TIN	DECIDIENTE T		3 Capital gain (included	in box 2a)	4 Federal Income tax withheld		Report this Income on your federal tax return. If this form	
ER'S TIN RECIPIENT'S TIN 1455663 ***-**-3609			5 Employee contributions/Designated		6 Net unrealized appreciation in employer's		shows federal income	
CIPIENT'S name, street address (including apt. ntry, and ZIP or foreign postal code	no.), city or town,	state or province,	Roth contributions or insurance premiums		securities		tax withheld in box 4, attach this	
AMANA GORLÍ 24 BARNWOOD TRACE			7 Distribution code(s)	IRA/SEP/ SIMPLE	8 Other	%	copy to your return.	
ESTON, TX 75009			9a Your percentage of		9b Total employee contribution		This information is being furnished to the	
			14 State tax withheld	%	15 State/Payer's state no.		16 State distribution	
					TX		644 704 04	
O Amount allocable to IRR within Roth contrib. 11 1st year of desig. Roth contrib.		17 Local tax withheld		10.11		\$11,724.31 19 Local distribution		
Account number (nee instructions)		13 Date of payment						
Form 1099-R			www.irs.gov/Form	1099R	Department of the Trees	nun/ Interne	Dovonus Carries	
					Department of the Treas	sury-interna	Revenue Service	
			CORRECTED (i		Date Printed 01/18/20:	24		
PAYER'S name, street address, city or town, province, country, ZIP or foreign postal code,	and telephone no	A second	1 Gross distribution		OMB No. 1545-0119			
PO BOX 173764 D999	YLLC		2a Taxable amount	\$11,724.31	2023	Distribution Annuities.	istributions From Pensions, Innuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.	
DENVER, CO 80217-3764 1-800-338-4015			TT TUNGOTO GITTOGITE	\$11,724.31		Profit-Sha		
			2b Taxable amount determined	not	Total distributio	n X	Copy C	
PAYER'S TIN	RECIPIEN	TS TIN	3 Capital gain (inclu	ded in box 2a)	4 Federal income tax withheld		For Recipient's Records	
84-1455663 RECIPIENTS name, street address (in studie	***-**-36	809	5 Employee contributions	utions/Designated	6 Net unrealized appreciation	\$2,344.86 Net unrealized appreciation in employer's		
RECIPIENT'S name, street address (including apt. no.), city or town, state or province, country, and ZIP or foreign postal code RAMANA GORLI 1724 BARNWOOD TRACE WESTON, TX 75009			promisino		securities			
			7 Distribution code(SIMPLE	8 Other	%	This information is being furnished to	
			9a Your percentage	%	9b Total employee contributio	ns	the IRS.	
			14 State tax withhe	ld	15 State/Payer's state no.		16 State distribution	
10 Amount allocable to IRR within 11 1st year of desig. 12 FATCA filing			-		TX		\$11,724.31	
	Roth contrib. requirement		17 Local tax withheld		18 Name of locality		19 Local distribution	
5 years Rott	n contrib.				THE REPORT OF THE PARTY OF THE			
Account number (see instructions) 762338		13 Date of payme	ent					
Account number (see instructions) 762338	ep for your r	13 Date of payme	www.irs.gov/Fori	m1099R	Department of the Trea	asury-Intern	al Revenue Service	
Account number (see instructions) 762338		13 Date of payme		m1099R	Department of the Trea	asury-Intern	al Revenue Service	
Account number (see instructions) 762338		13 Date of payme	www.irs.gov/For				al Revenue Service	
Account number (see instructions) 762338 Form 1099-R (ke	n, state or	13 Date of payme		(if checked)	Date Printed 01/18/2	024	al Revenue Service	
PAYER'S name, street address, city or town province, country, ZIP or foreign postal code EMPOWER TRUST COMPAN PO BOX 173764 D999	n, state or	13 Date of payme	WWW.irs.gov/Ford	(if checked) on \$11,724.3	Date Printed 01/18/2 OMB No. 1545-0119	024 Distribut	lons From Pension	
PAYER'S name, street address, city or town province, country, ZIP or foreign postal code EMPOWER TRUST COMPAN	n, state or	13 Date of payme	www.irs.gov/For	(if checked) on \$11,724.3	Date Printed 01/18/2 OMB No. 1545-0119 2023	Distribut Annuitie Profit-Si	ions From Pensions s, Retirement or naring Plans IPAs	
PAYER'S name, street address, city or town province, country, ZIP or foreign postal code EMPOWER TRUST COMPAN PO BOX 173764 D999 DENVER, CO 80217-3764	n, state or	13 Date of payme	WWW.irs.gov/Ford	(if checked) on \$11,724.3	Date Printed 01/18/2 OMB No. 1545-0119 2023	Distribut Annuitie Profit-Si Insuran	lons From Pensions s, Retirement or naring Plans, IRAs, ce Contracts, etc.	
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