

<input type="checkbox"/> CORRECTED (if checked)			Date Printed 01/19/2024			
PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. EMPOWER TRUST COMPANY LLC PO BOX 173764 D999 DENVER, CO 80217-3764 1-800-338-4015			1 Gross distribution	\$12,919.30	OMB No. 1545-0119 2023 Form 1099-R	Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.
			2a Taxable amount	\$0.00		
PAYER'S TIN 84-1455663			RECIPIENT'S TIN ***-**-0223			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.
RECIPIENT'S name, street address (including apt. no.), city or town, state or province, country, and ZIP or foreign postal code SAYANTAN MUKHERJEE 1000 HILLGATE PL APT 1D PITTSBURGH, PA 15220-1926			3 Capital gain (included in box 2a)	4 Federal income tax withheld		
10 Amount allocable to IRR within 5 years 762338			11 1st year of desig Roth contrib.		12 FATCA filing requirement <input type="checkbox"/>	This information is being furnished to the IRS.
13 Date of payment			14 State tax withheld		15 State/Payer's state no. PA/90369734	
17 Local tax withheld			18 Name of locality		19 Local distribution	

Form 1099-R www.irs.gov/Form1099R Department of the Treasury-Internal Revenue Service

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PAYER'S TIN 84-1455663			RECIPIENT'S TIN ***-**-0223			Copy 2 File this copy with your state, city, or local income tax return, when required.
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