

CORRECTED (If checked)

PAYER'S INFORMATION			1 Gross distribution \$		OMB No. 1545-0119		Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc. 2013 Form 1099-R		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. This information is being furnished to the Internal Revenue Service.
Payer's Name			2a Taxable amount \$						
Street address (including apt. no.)									
City	State	ZIP code	2b Taxable amount not determined		Total distribution				
Payer's country			3 Capital gain (included in box 2a) \$		4 Federal income tax withheld \$				
PAYER'S federal identification number		RECIPIENT'S identification number	5 Employee contributions / Designated Roth contributions or insurance premiums \$		6 Net unrealized appreciation in employer's securities \$				
RECIPIENT'S name									
Street address (including apt. no.)			7 Distribution code(s)		8 Other				
City	State	ZIP code							
Recipient's country			9a Your percentage of total distribution %		9b Total employee contributions \$				
10 Amount allocable to IRR within 5 years \$	11 1st year of desig. Roth contrib.		12 State tax withheld \$		13 State/ Payer's state no. /		14 State distribution \$		
Account number (see instructions)			15 Local tax withheld \$		16 Name of locality		17 Local distribution \$		

Form **1099-R**

Department of the Treasury - Internal Revenue Service