Caution: DRAFT—NOT FOR FILING

This is an early release draft of an IRS tax form, instructions, or publication, which the IRS is providing for your information as a courtesy. **Do not file draft forms.** Also, do not rely on draft instructions and publications for filing. We generally do not release drafts of forms until we believe we have incorporated all changes. However, unexpected issues sometimes arise, or legislation is passed, necessitating a change to a draft form. In addition, forms generally are subject to OMB approval before they can be officially released. Drafts of instructions and publications usually have at least some changes before being officially released.

Early releases of draft forms and instructions are at <u>IRS.gov/draftforms</u>. Please note that drafts may remain on IRS.gov even after the final release is posted at <u>IRS.gov/downloadforms</u>, and thus may not be removed until there is a new draft for the subsequent revision. All information about all revisions of all forms, instructions, and publications is at <u>IRS.gov/formspubs</u>.

Almost every form and publication also has its own easily accessible information page on IRS.gov. For example, the Form 1040 page is at IRS.gov/form1040; the Form W-2 page is at IRS.gov/w2; the Publication 17 page is at IRS.gov/pub17; the Form W-4 page is at IRS.gov/w4; the Form 8863 page is at IRS.gov/form8863; and the Schedule A (Form 1040) page is at IRS.gov/schedulea. If typing in the links above instead of clicking on them: type the link into the address bar of your browser, not in a Search box; the text after the slash must be lowercase; and your browser may require the link to begin with "www.". Note that these are shortcut links that will automatically go to the actual link for the page.

If you wish, you can submit comments about draft or final forms, instructions, or publications on the <u>Comment on Tax Forms and Publications</u> page on IRS.gov. We cannot respond to all comments due to the high volume we receive, but we will carefully consider each one. Please note that we may not be able to consider many suggestions until the subsequent revision of the product.

)	:CIE		VOID		7878	
Distributions From ensions, Annuities Retirement or	MB No. 1545-0119	ОМ	tion	Gross distribut	1	PAYER'S name, street address, city or town, state or province, country, and ZIP or foreign postal code				
Profit-Sharing	2016	4			\$					
Plans, IRAs Insurance			ınt	axable amou	2 a					
Contracts, etc.	orm 1099-R	Fo			\$					
Copy A	Total distribution			axable amoui not determined	2b					
Internal Revenue Service Center	Federal income tax withheld	4	ncluded	Capital gain (in n box 2a)	3	ification	CIPIENT'S ident		eral identification	PAYER'S fede
File with Form 1096		\$			\$					
For Privacy Act and Paperwork Reduction Act Notice, see the	Net unrealized appreciation in employer's securities	6	oth or	mployee contr Designated Ro contributions of nsurance prem	5	2	ne		name	RECIPIENT'S
2016 Genera Instructions for Certair	Other %	8	IRA/ SEP/ SIMPLE	Distribution code(s)	7			10.)	s (including apt. no	Street address
Information Returns	Total employee contributions	9b	e of total	our percentage	9a	gn postal code	and ZIP or forei	ount	tate or province, co	City or town, st
14 State distribution \$	State/Payer's state no.	13	eld	State tax withhe	12 \$	FATCA filing requirement	1st year of g. Roth contrib.			10 Amount all within 5 ye
\$					\$					\$
17 Local distribution \$	Name of locality	16	ield	ocal tax withhe	15 \$			s)	er (see instructions	Account number
\$		+			\$					
Ť	Department of the Treasury -	D		99r	form1	www.irs.gov/f)	Cat. No. 14436Q	Form 1099-R

Do Not Cut or Separate Forms on This Page — Do Not Cut or Separate Forms on This Page

	□ VOID	☐ CORRE	CTI	ΞD						
PAYER'S name, street address, city or town, state or province, country, and ZIP or foreign postal code			1	Gross distribut	ion	ON	IB No. 1545-0119	-	Distributions From ensions, Annuities, Retirement or	
			\$				2016		Profit-Sharing	
			2a	Taxable amour	nt			Plans, IRAs		
									Insurance	
			\$			F	orm 1099-R		Contracts, etc.	
			2b	Taxable amour			Total distribution		Copy 1	
PAYER'S federal identification	RECIPIENT'S ident	tification	3	Capital gain (in		4	Federal income tax		For	
number	number	incation	"	in box 2a)	iciuucu	_	withheld		State, City, or Local	
									Tax Department	
			\$			\$				
RECIPIENT'S name			5			6	Net unrealized			
			/Designated Ro contributions or	r A		appreciation in employer's securi	ities			
.IIIne /			\$	insurance prem	iums	\$				
Street address (including apt. no			7	Distribution	IRA/		Other			
, , ,	•			code(s)	SEP/ SIMPLE					
						\$		%		
City or town, state or province, country, and ZIP or foreign postal code			9a	Your percentage	of total	9b	Total employee contribu	utions		
				distribution	%	\$				
10 Amount allocable to IRR	11 1st year of	FATCA filing requirement	12	State tax withhe	eld	13	State/Payer's state	e no.	14 State distribution	
within 5 years	desig. Roth contrib.	requirement	\$						\$	
\$			\$						\$	
Account number (see instructions)			15	Local tax withhe	eld	16	Name of locality		17 Local distribution	
			\$			ļ		+	\$	
			\$						\$	

www.irs.gov/form1099r

CORRECTED (if checked)										
PAYER'S name, street address, country, and ZIP or foreign posta	ame, street address, city or town, state or province, d ZIP or foreign postal code		1 \$ 2a \$	Gross distributi Taxable amoun		OMB No. 1545-0119 2016 Form 1099-R		_	Distributions Fror Pensions, Annuities Retirement o Profit-Sharin Plans, IRAs Insuranc Contracts, etc	
			2b	Taxable amoun not determined			Total distributio	n 🔲	Copy B Report this	
PAYER'S federal identification number	RECIPIENT'S ident number	ification	3	Capital gain (ind in box 2a)	cluded	\$	Federal income withheld	tax	income on your federal tax return. If this form shows federal income	
RECIPIENT'S name	ine	2	5	Employee contri /Designated Rot contributions or insurance premi	th	6	Net unrealized appreciation in employer's sec		tax withheld in box 4, attach this copy to your return.	
Street address (including apt. no			7		IRA/ SEP/ SIMPLE	8 \$	Other	%	This information is being furnished to the Internal	
City or town, state or province, cou	ıntry, and ZIP or foreiç	gn postal code	9a	Your percentage distribution		9b \$	Total employee conf	tributions	Revenue Service.	
10 Amount allocable to IRR within 5 years	11 1st year of desig. Roth contrib.	FATCA filing requirement	12 \$	State tax withhel	ld	13	State/Payer's st	ate no.	14 State distribution	
\$			\$						\$	
Account number (see instructions)			15 \$	Local tax withhe	ld	16	Name of localit	y 	17 Local distribution	
			1.\$						L\$	

www.irs.gov/form1099r

Instructions for Recipient

Generally, distributions from pensions, annuities, profit-sharing and retirement plans (including section 457 state and local government plans), IRAs, insurance contracts, etc., are reported to recipients on Form 1099-R

Qualified plans. If your annuity starting date is after 1997, you must use the simplified method to figure your taxable amount if your payer did not show the taxable amount in box 2a. See the instructions for Form 1040 or 1040A.

IRAs. For distributions from a traditional individual retirement arrangement (IRA), simplified employee pension (SEP), or savings incentive match plan for employees (SIMPLE), generally the payer is not required to compute the taxable amount. See the Form 1040 or 1040A instructions to determine the taxable amount. If you are at least age 70½, you must take minimum distributions from your IRA (other than a Roth IRA). If you do not, you may be subject to a 50% excise tax on the amount that should have been distributed. See Pub. 590-A and Pub. 590-B for more information on IRAs.

Roth IRAs. For distributions from a Roth IRA, generally the payer is not required to compute the taxable amount. You must compute any taxable amount on Form 8606. An amount shown in box 2a may be taxable earnings on an excess contribution.

Loans treated as distributions. If you borrow money from a qualified plan, section 403(b) plan, or governmental section 457(b) plan, you may have to treat the loan as a distribution and include all or part of the amount borrowed in your income. There are exceptions to this rule. If your loan is taxable, Code L will be shown in box 7. See Pub. 575.

Recipient's identification number. For your protection, this form may show only the last four digits of your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN). However, the issuer has reported your complete identification number to the IRS.

FATCA filing requirement. If the FATCA filing requirement box is checked, the payer is reporting on this Form 1099 to satisfy its

chapter 4 account reporting requirement. You also may have a filing requirement. See the Instructions for Form 8938.

Account number. May show an account or other unique number the payer assigned to distinguish your account.

Box 1. Shows the total amount you received this year. The amount may have been a direct rollover, a transfer or conversion to a Roth IRA, a recharacterized IRA contribution; or you may have received it as periodic payments, as nonperiodic payments, or as a total distribution. Report the amount on Form 1040 or 1040A on the line for "IRA distributions" or "Pensions and annuities" (or the line for "Taxable amount"), and on Form 8606, as applicable. However, if this is a lump-sum distribution, see Form 4972. If you have not reached minimum retirement age, report your disability payments on the line for "Wages, salaries, tips, etc." on your tax return. Also report on that line permissible withdrawals from eligible automatic contribution arrangements and corrective distributions of excess deferrals, excess contributions, or excess aggregate contributions except if you are self-employed.

If a life insurance, annuity, qualified long-term care, or endowment contract was transferred tax free to another trustee or contract issuer, an amount will be shown in this box and Code 6 will be shown in box 7. If a charge or payment was made against the cash value of an annuity contract or the cash surrender value of a life insurance contract for the purchase of qualified long-term care insurance, an amount will be shown in this box and Code W will be shown in box 7. You need not report these amounts on your tax return.

Box 2a. This part of the distribution is generally taxable. If there is no entry in this box, the payer may not have all the facts needed to figure the taxable amount. In that case, the first box in box 2b should be checked. You may want to get one of the free publications from the IRS to help you figure the taxable amount. See *Additional information* on the back of Copy 2. For an IRA distribution, see *IRAs* and *Roth IRAs* on this page. For a direct rollover, other than from a qualified plan to a Roth IRA, zero should be shown, and you must enter zero (-0-) on the "Taxable amount" line of your tax return. If you roll over a

(Continued on the back of Copy C.)

CORRECTED (if checked)								
PAYER'S name, street address, city or town, state or province, country, and ZIP or foreign postal code	1	Gross distribution	n	OMB No. 1545-0119	1	Distributions From ensions, Annuities,		
	\$			2016		Retirement or Profit-Sharing		
	2a	Taxable amount				Plans, IRAs,		
						Insurance		
	\$			Form 1099-R		Contracts, etc.		
	2b	Taxable amount		Total		Copy C		
		not determined		distributio		For Recipient's		
PAYER'S federal identification number RECIPIENT'S identification number	3	Capital gain (incluin box 2a)	uded	4 Federal income withheld	tax	Records		
	\$			\$				
RECIPIENT'S name	5	Employee contributions or insurance premium		6 Net unrealized appreciation in employer's se	1			
	\$			\$				
Street address (including apt. no.)	7	code(s)	IRA/ SEP/	8 Other		This information is		
		SI	IMPLE	Φ	%	boing furnished to		
City or town, state or province, country, and ZIP or foreign postal code	00	Your percentage of		9b Total employee cor		the Internal		
City or town, state or province, country, and 21F or loreign postar code	9a	distribution	%	, ,	ithibutions	Revenue Service.		
10 Amount allocable to IRR within 5 years 11 1st year of desig. Roth contrib.		State tax withheld		13 State/Payer's s	state no.	14 State distribution		
desig. Hour contrib.	\$					\$		
<u> </u>	\$					\$		
Account number (see instructions)	15	Local tax withheld	1	16 Name of locali	ty	17 Local distribution		
	\$					<u> \$</u>		
Form 1099-R (keep for your records) www.irs.	\$	f1000::		Department of the	T	Saturnal Barrana Carria		
rm 1099-R (keep for your records) www.irs.gov/form1099r Department of the Treasury - Internal Revenue Service								

Instructions for Recipient (Continued)

distribution (other than a designated Roth account contribution) from a qualified plan (including a governmental section 457(b) plan) or section 403(b) plan to a Roth IRA, you must include on the "Taxable amount" line of your tax return the amount shown in this box plus the amount in box 6. if any.

If this is a total distribution from a qualified plan and you were born before January 2, 1936 (or you are the beneficiary of someone born before January 2, 1936), you may be eligible for the 10-year tax option. See the Form 4972 instructions for more information.

If you are an eligible retired public safety officer who elected to exclude from income distributions from your eligible plan used to pay certain insurance premiums, the amount shown in box 2a has not been reduced by the exclusion amount. See the instructions for Form 1040 or 1040A for more information.

Box 2b. If the first box is checked, the payer was unable to determine the taxable amount, and box 2a should be blank, except for an IRA. It is your responsibility to determine the taxable amount. If the second box is checked, the distribution was a total distribution that closed out your account.

Box 3. If you received a lump-sum distribution from a qualified plan and were born before January 2, 1936 (or you are the beneficiary of someone born before January 2, 1936), you may be able to elect to treat this amount as a capital gain on Form 4972 (not on Schedule D (Form 1040)). See the Form 4972 instructions. For a charitable gift annuity, report as a long-term capital gain as explained in the Instructions for Form 8949.

Box 4. Shows federal income tax withheld. Include this amount on your income tax return as tax withheld, and if box 4 shows an amount (other than zero), attach Copy B to your return. Generally, if you will receive payments next year that are not eligible rollover distributions, you can change your withholding or elect not to have income tax withheld by giving the payer Form W-4P.

Box 5. Generally, this shows the employee's investment in the contract (after-tax contributions), if any, recovered tax free this year; the portion that is your basis in a designated Roth account; the part of

premiums paid on commercial annuities or insurance contracts recovered tax free; or the nontaxable part of a charitable gift annuity. This box does not show any IRA contributions. If the amount shown is your basis in a designated Roth account, the year you first made contributions to that account may be entered in box 11.

Box 6. If you received a lump-sum distribution from a qualified plan that includes securities of the employer's company, the net unrealized appreciation (NUA) (any increase in value of such securities while in the trust) is taxed only when you sell the securities unless you choose to include it in your gross income this year. However, if the distribution was a qualified rollover contribution to a Roth IRA, see the instructions for *Box 2a*. See Pub. 575 and the Form 4972 instructions. If you did not receive a lump-sum distribution, the amount shown is the NUA attributable to employee contributions, which is not taxed until you sell the securities.

Box 7. The following codes identify the distribution you received. For more information on these distributions, see the instructions for your tax return. Also, certain distributions may be subject to an additional 10% tax. See the Instructions for Form 5329.

- 1 Early distribution, no known exception (in most cases, under age 59½).
- 2-Early distribution, exception applies (under age 59½).
- 3-Disability.
- 4-Death.
- 5-Prohibited transaction.
- 6—Section 1035 exchange (a tax-free exchange of life insurance, annuity, qualified long-term care insurance, or endowment contracts).
- **7**—Normal distribution.
- 8—Excess contributions plus earnings/excess deferrals (and/or earnings) taxable in 2016.
- 9-Cost of current life insurance protection.
- **A**—May be eligible for 10-year tax option (see Form 4972).
- **B**-Designated Roth account distribution.

(Continued on the back of Copy 2.)

	CORRECTED (if checked)										
PAYER'S name, street address, city or town, state or province, country, and ZIP or foreign postal code				1	Gross distribut	ion	OM	B No. 1545-0119	_	istributions F nsions, Annuit Retiremen	ties,
l				\$				20 16		Profit-Sha	
l				2a	Taxable amour	nt	-			Plans, IF	RAs,
l				φ.			_	1000 B		Insura Contracts,	
l				ֆ 2b	Taxable amour	nt .	F	orm 1099-R Total			
l				20	not determined			distribution		Cop	-
	PAYER'S federal identification number	RECIPIENT'S ident	ification	3	Capital gain (in in box 2a)	cluded	4	Federal income to withheld	ax	File this c with your st city, or lo	ate,
				\$			\$			income return, w	tax hen
ł	RECIPIENT'S name			Ψ 5	Employee contr	ibutions	φ	Net unrealized		requi	red.
		1	/Designated Ro contributions or insurance prem	th	Ĭ	appreciation in employer's secu	urities				
l				\$			\$				
	Street address (including apt. no	.)		7	Distribution code(s)	IRA/ SEP/ SIMPLE	8	Other			
l							\$		%		
	City or town, state or province, cou	untry, and ZIP or foreig	gn postal code	9a	Your percentage distribution	of total %		Total employee contr	ributions		
	10 Amount allocable to IRR within 5 years	11 1st year of desig. Roth contrib.	FATCA filing requirement	12 \$	State tax withhe		7	State/Payer's sta		14 State distribu	tion
١	\$			\$					+	}	
t	Account number (see instructions)		<u> </u>	15	Local tax withhe	eld	16	Name of locality		17 Local distribu	tion
I				\$			<u> </u>			\$	
١				\$					9	\$	

www.irs.gov/form1099r

Instructions for Recipient (Continued)

Note: If Code B is in box 7 and an amount is reported in box 10, see the Instructions for Form 5329.

- **D**—Annuity payments from nonqualified annuities that may be subject to tax under section 1411.
- **E**—Distributions under Employee Plans Compliance Resolution System (EPCRS).
- F-Charitable gift annuity.
- G-Direct rollover of a distribution (other than a designated Roth account distribution) to a qualified plan, a section 403(b) plan, a governmental section 457(b) plan, or an IRA.
- H—Direct rollover of a designated Roth account distribution to a Roth IRA.
- J—Early distribution from a Roth IRA, no known exception (in most cases, under age 59½).
- **K**-Distribution of IRA assets not having a readily available FMV.
- **L**—Loans treated as distributions.
- N—Recharacterized IRA contribution made for 2016 and recharacterized in 2016.
- P—Excess contributions plus earnings/excess deferrals (and/or earnings) taxable in 2015.
- Q-Qualified distribution from a Roth IRA.
- R—Recharacterized IRA contribution made for 2015 and recharacterized in 2016.
- S-Early distribution from a SIMPLE IRA in first 2 years, no known exception (under age 59½).
- T-Roth IRA distribution, exception applies.
- $\textbf{U-} \mbox{Dividend distribution from ESOP under sec. 404(k)}.$

Note: This distribution is not eligible for rollover.

W—Charges or payments for purchasing qualified long-term care insurance contracts under combined arrangements.

If the IRA/SEP/SIMPLE box is checked, you have received a traditional IRA, SEP, or SIMPLE distribution.

Box 8. If you received an annuity contract as part of a distribution, the value of the contract is shown. It is not taxable when you receive it and should not be included in boxes 1 and 2a. When you receive periodic payments from the annuity contract, they are taxable at that time. If the distribution is made to more than one person, the percentage of the annuity contract distributed to you is also shown. You will need this information if you use the 10-year tax option (Form 4972). If charges were made for qualified long-term care insurance contracts under combined arrangements, the amount of the reduction in the investment (but not below zero) in the annuity or life insurance contract is reported here.

Box 9a. If a total distribution was made to more than one person, the percentage you received is shown.

Box 9b. For a life annuity from a qualified plan or from a section 403(b) plan (with after-tax contributions), an amount may be shown for the employee's total investment in the contract. It is used to compute the taxable part of the distribution. See Pub. 575.

Box 10. If an amount is reported in this box, see the Instructions for Form 5329 and Pub. 575.

Box 11. The 1st year you made a contribution to the designated Roth account reported on this form is shown in this box.

Boxes 12–17. If state or local income tax was withheld from the distribution, boxes 14 and 17 may show the part of the distribution subject to state and/or local tax.

Future developments. For the latest information about developments related to Form 1099-R and its instructions, such as legislation enacted after they were published, go to www.irs.gov/form1099r.

Additional information. You may want to see:

Form W-4P	Pub. 575
Form 4972	Pub. 590-A
Form 5329	Pub. 590-B
Form 8606	Pub. 721
Pub. 560	Pub. 939
Pub. 571	Pub. 969

	☐ VOID	CORRE	CTE	ΞD				_	
PAYER'S name, street address, city or town, state or province, country, and ZIP or foreign postal code		1 \$ 2a	Gross distribut Taxable amour			OMB No. 1545-0119 2016		Distributions Fron Pensions, Annuities Retirement o Profit-Sharing Plans, IRAs	
			\$			F	orm 1099-R		Contracts, etc.
			2b	Taxable amour not determined			Total distributio	n 🔲	Copy D For Payer
PAYER'S federal identification number	RECIPIENT'S ident number	ification		Capital gain (in in box 2a)	cluded	4	Federal income withheld	tax	- Torrayer
RECIPIENT'S name			\$ 5	Employee contr	ibutions	\$ 6	Net unrealized		
Ju	ine	2	\$	/Designated Ro contributions or insurance prem	th	\$	appreciation in employer's sec		For Privacy Act and Paperwork Reduction Act Notice, see the
Street address (including apt. no			7	Distribution code(s)	IRA/ SEP/ SIMPLE	8	Other	%	2016 General Instructions for Certain Information
City or town, state or province, cou	intry, and ZIP or forei	gn postal code	9a	Your percentage distribution	of total	9b \$	Total employee con	tributions	Returns.
10 Amount allocable to IRR within 5 years	11 1st year of desig. Roth contrib.	FATCA filing requirement	12 \$	State tax withhe	eld	13	State/Payer's s	tate no.	14 State distribution \$
\$			\$						\$
Account number (see instructions)		,	15 \$	Local tax withhe	eld	16	Name of localit	у	17 Local distribution \$
			\$			<u> </u>			\$

www.irs.gov/form1099r

Instructions for Payer

To complete Form 1099-R, use:

- the 2016 General Instructions for Certain Information Returns, and
- the 2016 Instructions for Forms 1099-R and 5498.

To order these instructions and additional forms, go to www.irs.gov/form1099r.

Caution: Because paper forms are scanned during processing, you cannot file Forms 1096, 1097, 1098, 1099, 3921, 3922, or 5498 that you print from the IRS website.

Due dates. Furnish Copies B, C, and 2 of this form to the recipient by January 31, 2017.

File Copy A of this form with the IRS by February 28, 2017. If you file electronically, the due date is March 31, 2017. To file electronically, you must have software that generates a file according to the specifications in Pub. 1220, Specifications for Electronic Filing of Forms 1097, 1098, 1099, 3921, 3922, 5498, and W-2G. The IRS does not provide a fill-in form option.

Need help? If you have questions about reporting on Form 1099-R, call the information reporting customer service site toll free at 1-866-455-7438 or 304-263-8700 (not toll free). Persons with a hearing or speech disability with access to TTY/TDD equipment can call 304-579-4827 (not toll free).