

☐ CORRECTED (if checked)

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and phone no.
GREAT-WEST TRUST COMPANY LLC
GREAT-WEST RETIREMENT SERVICES
PO BOX 173764 D999
DENVER, CO 80217-3764
1-800-338-4015

PAYER'S TIN
84-1455663

RECIPIENT'S TIN
***-**-8993

RECIPIENT'S name, street address, city or town, state or province, country, and ZIP or foreign postal code
SREEVISHNU SURAGOWNI
12201 MANOR CROSSING DR
GLEN ALLEN, VA 23059

10 Amount allocable to IRR within 5 years

11 1st year of desig. Roth contrib.

FATCA filing requirement ☐

Account number (see instructions)
1260028

Date of payment

1 Gross distribution

\$2,521.03

2a Taxable amount

\$0.00

OMB No. 1545-0119

2019

Form 1099-R

Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.

2b Taxable amount not determined ☐

Total distribution

☒

3 Capital gain (included in box 2a)

4 Federal income tax withheld

5 Employee contributions/Designated Roth contributions or insurance premiums

6 Net unrealized appreciation in employer's securities

7 Distribution code(s) ☒

IRA / SEP / SIMPLE ☐

8 Other

%

9a Your percentage of total distribution

9b Total employee contributions

%

12 State tax withheld

13 State/Payer's state no.

VA/841455663

15 Local tax withheld

16 Name of locality

17 Local distribution

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 IRS.

Form 1099-R

www.irs.gov/Form1099R

Department of the Treasury-Internal Revenue Service

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For Recipient's Records

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Copy 2
File this copy with your state, city, or local income tax return, when required.

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Department of the Treasury-Internal Revenue Service

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