

Pension, Annuities, Retirement, Etc. Distributions

Please attach all 1099-R(s), SSA statements, etc.

Name:		SSN:					
TS	Payer's name:					Payer's Federal ID Number:	
Address:		City:					
U.S. Only		State, Zip					
Foreign Only		Province/State, Country, Postal Code				2014	2013
		2014	2013	State	State I.D.		
Disability indicator	<input type="checkbox"/>	<input type="checkbox"/>		State income tax withheld			
Report as wages on 1040	<input type="checkbox"/>	<input type="checkbox"/>		State distribution			
Gross distribution				Name of locality			
Taxable amount				Local income tax withheld			
Total distribution	<input type="checkbox"/>	<input type="checkbox"/>		Local distribution			
Capital gain				State	State I.D.		
Federal income tax withheld				State income tax withheld			
Employee contributions or insurance premiums				State distribution			
Distribution code(s)				Name of locality			
IRA/SEP/SIMPLE Roth: Y/N	<input type="checkbox"/>	<input type="checkbox"/>		Local income tax withheld			
Your percentage of total distribution				Local distribution			

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Address:		City:					
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Employee contributions or insurance premiums				State distribution			
Distribution code(s)				Name of locality			
IRA/SEP/SIMPLE Roth: Y/N	<input type="checkbox"/>	<input type="checkbox"/>		Local income tax withheld			
Your percentage of total distribution				Local distribution			