

**2017 Form 1099-R**

<b>TS</b>	<b>1</b>	<b>F</b>	<b>2</b>	Pension type <b>3</b>	<b>Corrected</b>	<b>4</b>	<b>2016</b>		<b>2017</b>	
Payer's EIN <b>5</b>						<b>1</b>	Gross distribution		24	
Payer's name, address, city, and <b>U.S.</b> state, ZIP code OR <b>Foreign</b> Province/State, Country, Postal Code						<b>2a</b>	Taxable amount		25	
<b>6</b>						<b>2b</b>	Taxable amount not determined	<b>26</b>	Total distribution <b>27</b>	
<b>7</b>						<b>3</b>	Capital gain included in box 2a		28	
<b>8</b>						<b>4</b>	Federal tax withheld		29	
<b>9</b>						<b>5</b>	Employee contribution or Insurance Premium		30	
<b>12</b>						<b>6</b>	Unrealized appreciation		31	
Recipient's name and address (if different from screen 1)						<b>7</b>	Distribution code <b>32</b> <b>33</b>		IRA/SEP/Simple <b>34</b>	
<b>15</b>						<b>8</b>	Other	<b>35</b>	<b>36</b>	<b>%</b>
<b>17</b>						<b>9a</b>	Taxpayer percent of total distribution		37	
<b>18</b>						<b>9b</b>	Total employee contributions		38	
<b>21</b>						<b>10</b>	Amount allocable to IRR within 5 years		39	
<b>2-7</b>						<b>11</b>	First year of Roth Contribution		40	
<b>12</b>						FATCA			41	
<b>13</b>						State				
<b>14</b>						State distribution				
<b>15</b>						Local tax withheld				
<b>16</b>						Locality name				
<b>17</b>						Local distribution				
<b>18</b>						Payer ST number				
<b>19</b>						State				
<b>20</b>						Locality name				
<b>21</b>						Payer ST number				
<b>22</b>						State				
<b>23</b>						Locality name				
<b>24</b>						Payer ST number				
<b>25</b>						State				
<b>26</b>						Locality name				
<b>27</b>						Payer ST number				
<b>28</b>						State				
<b>29</b>						Locality name				
<b>30</b>						Payer ST number				
<b>31</b>						State				
<b>32</b>						Locality name				
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<b>35</b>						Locality name				
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<b>37</b>						State				
<b>38</b>						Locality name				
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<b>40</b>						State				
<b>41</b>						Locality name				
<b>42</b>						Payer ST number				
<b>43</b>						State				
<b>44</b>						Locality name				
<b>45</b>						Payer ST number				
<b>46</b>						State				
<b>47</b>						Locality name				
<b>48</b>						Payer ST number				
<b>49</b>						State				
<b>50</b>						Locality name				
<b>51</b>						Payer ST number				
<b>52</b>						State				
<b>53</b>						Locality name				
<b>54</b>						Payer ST number				
<b>55</b>						State				
<b>56</b>						Locality name				

<b>Additional Information for this Distribution</b>			<b>Rollover Information</b>		
<b>57</b>	1099-R for disability?	<b>63</b>	Exclude from income - rolled over into another qualified plan		
<b>58</b>	If so, reported as wages on the 1040?	<b>64</b>	Partial rollover amount	<b>65</b>	
<b>59</b>	Carry this entry to Form 5329 and compute 10% penalty	<b>Many states require date of retirement</b>			
<b>60</b>	Exclude from income - reported on Form 4972	<b>AL, HI, KS, KY, LA, MD, MI, NY, OR, PA &amp; UT may require this information.</b>			
<b>61</b>	Exclude from income - reported on Form 8606			Percent	Amount
<b>62</b>	Was this 1099-R altered or handwritten?	Portion of 1099-R to exclude on state		<b>66</b>	or <b>67</b>
		Portion of 1099-R NOT qualifying for state exclusion		<b>68</b>	or <b>69</b>

**Form 1099-R - Special Tax Treatment**

<b>Simplified General Rule Worksheet (Worksheet overrides box 2a)</b>					
<b>2</b>	Cost in plan at starting date plus any death benefit excl:	<b>1</b>	<b>5</b>	Number of monthly payments during 2017 (12 is assumed)	<b>5</b>
<b>3</b>	Age (or combined ages) at annuity starting date	<b>2</b>	<b>6</b>	If starting date after 1986, enter amount recovered tax free:	<b>6</b>
<b>3</b>	Payments are for taxpayer's life and that of beneficiary (Mark only if payments began after Nov 18, 1996)	<b>4</b>	<b>7</b>	Annuity starting date:	<b>7</b>
<b>4</b>	Special rule computation:	<b>4</b>	<b>8</b>	Before 1987 <b>9</b>	After Nov. 18, 1996
				Before Nov. 19, 1996	
<b>Qualified Charitable Distributions</b>		<b>HSA Funding Distribution</b>		<b>Public Safety Officers</b>	
<b>10</b>	Box 2 100% QCD up to \$100,000	<b>12</b>	Box 2 100% HFD	Insurance Premiums	
	Box 2 partial QCD up to \$100,000		Box 2 partial HFD		
	<b>11</b>		<b>13</b>	<b>14</b>	