

## Pension, Annuities, Retirement, Etc. Distributions

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

<b>Name:</b>				<b>SSN:</b>							
TS				Payer's name:				Payer's FEIN:			
Address:											
City, State, Zip								<b>2009</b>		<b>2008</b>	
		<b>2009</b>		<b>2008</b>		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						Local income tax withheld					
Taxable amount						Name of locality					
Total distribution						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)						Local income tax withheld					
IRA/SEP/SIMPLE Roth: Y/N		<input type="checkbox"/>		<input type="checkbox"/>		Name of locality					
Your percentage of total distribution						Local distribution					

TS				Payer's name:				Payer's FEIN:			
Address:											
City, State, Zip								<b>2009</b>		<b>2008</b>	
		<b>2009</b>		<b>2008</b>		State		State I.D.			
Disability indicator		<input type="checkbox"/>		<input type="checkbox"/>		State income tax withheld					
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Total distribution						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)						Local income tax withheld					
IRA/SEP/SIMPLE Roth: Y/N		<input type="checkbox"/>		<input type="checkbox"/>		Name of locality					
Your percentage of total distribution						Local distribution					

## Social Security Benefit Statement

		<b>2009</b>	<b>2008</b>		<b>2009</b>	<b>2008</b>		<b>2009</b>	<b>2008</b>
TS	Net benefits			Medicare premiums			Income tax withheld		
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