

## Attention:

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To order official IRS forms, call 1-800-TAX-FORM (1-800-829-3676) or [Order Information Returns and Employer Returns Online](#), and we'll mail you the scannable forms and other products.

See IRS Publications 1141, 1167, 1179 and other IRS resources for information about printing these tax forms.

9898

 VOID  CORRECTED

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

PAYER'S name, street address, city, state, and ZIP code		1 Gross distribution		OMB No. 1545-0119	
		\$		<b>2007</b>	
		2a Taxable amount			
PAYER'S federal identification number		2b Taxable amount not determined <input type="checkbox"/>		Total distribution <input type="checkbox"/>	
		3 Capital gain (included in box 2a)		4 Federal income tax withheld	
PAYER'S federal identification number		RECIPIENT'S identification number			
RECIPIENT'S name		5 Employee contributions /Designated Roth contributions or insurance premiums		6 Net unrealized appreciation in employer's securities	
Street address (including apt. no.)		7 Distribution code(s)		8 Other	
City, state, and ZIP code		9a Your percentage of total distribution %		9b Total employee contributions	
Account number (see instructions)		10 State tax withheld		11 State/Payer's state no.	
1st year of desig. Roth contrib.		13 Local tax withheld		14 Name of locality	
		15 Local distribution			

**Copy A  
For  
Internal Revenue  
Service Center**

**File with Form 1096.**

For Privacy Act and Paperwork Reduction Act Notice, see the **2007 General Instructions for Forms 1099, 1098, 5498, and W-2G.**

Form 1099-R

Cat. No. 14436Q

Department of the Treasury — Internal Revenue Service

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

VOID  CORRECTED

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

OMB No. 1545-0119  
**2007**  
Form **1099-R**

**Copy 1  
For  
State, City,  
or Local  
Tax Department**

PAYER'S name, street address, city, state, and ZIP code		1 Gross distribution		OMB No. 1545-0119 <b>2007</b> Form <b>1099-R</b>			
		\$					
		2a Taxable amount					
PAYER'S federal identification number		RECIPIENT'S identification number		2b Taxable amount not determined <input type="checkbox"/>		Total distribution <input type="checkbox"/>	
				3 Capital gain (included in box 2a)		4 Federal income tax withheld	
				\$		\$	
RECIPIENT'S name		5 Employee contributions /Designated Roth contributions or insurance premiums		6 Net unrealized appreciation in employer's securities			
		\$		\$			
		Street address (including apt. no.)		7 Distribution code(s)		8 Other	
City, state, and ZIP code		1st year of desig. Roth contrib.		IRA/SEP/SIMPLE <input type="checkbox"/>		\$ %	
				9a Your percentage of total distribution %		9b Total employee contributions	
				\$		\$	
Account number (see instructions)		10 State tax withheld		11 State/Payer's state no.		12 State distribution	
		\$		\$		\$	
		\$		\$		\$	
Account number (see instructions)		13 Local tax withheld		14 Name of locality		15 Local distribution	
		\$		\$		\$	
		\$		\$		\$	

CORRECTED (if checked)

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

PAYER'S name, street address, city, state, and ZIP code		1 Gross distribution		OMB No. 1545-0119	
		\$		2007	
		2a Taxable amount			
		\$			
		2b Taxable amount not determined <input type="checkbox"/>		Total distribution <input type="checkbox"/>	
PAYER'S federal identification number	RECIPIENT'S identification number	3 Capital gain (included in box 2a)		4 Federal income tax withheld	
		\$		\$	
RECIPIENT'S name		5 Employee contributions /Designated Roth contributions or insurance premiums		6 Net unrealized appreciation in employer's securities	
		\$		\$	
Street address (including apt. no.)		7 Distribution code(s)		8 Other	
		IRA/SEP/SIMPLE <input type="checkbox"/>		\$ %	
City, state, and ZIP code		9a Your percentage of total distribution %		9b Total employee contributions	
		\$		\$	
	1st year of desig. Roth contrib.	10 State tax withheld		11 State/Payer's state no.	
		\$		\$	
		\$		\$	
Account number (see instructions)		13 Local tax withheld		14 Name of locality	
		\$		\$	
		\$		15 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 Internal Revenue Service.

## 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. Therefore, the amounts in boxes 1 and 2a will be the same most of the time. 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 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, 403(b) plan, or government 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.

**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 corrective distributions of excess deferrals, excess contributions, or excess aggregate contributions except if you are self-employed.

If a life insurance, annuity, 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. You need not report this 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* above. For a direct rollover, zero should be shown, and you must enter zero (-0-) on the "Taxable amount" line of your tax return.

(Continued on the back of Copy C.)

CORRECTED (if checked)

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

OMB No. 1545-0119  
**2007**  
Form **1099-R**

**Copy C  
For Recipient's  
Records**

PAYER'S name, street address, city, state, and ZIP code		<b>1</b> Gross distribution		Total distribution <input type="checkbox"/>	
		\$			
		<b>2a</b> Taxable amount			
PAYER'S federal identification number		RECIPIENT'S identification number		<b>2b</b> Taxable amount not determined <input type="checkbox"/>	
				\$	
				<b>3</b> Capital gain (included in box 2a)	
RECIPIENT'S name		<b>4</b> Federal income tax withheld		This information is being furnished to the Internal Revenue Service.	
		\$			
		<b>5</b> Employee contributions /Designated Roth contributions or insurance premiums			
Street address (including apt. no.)		<b>6</b> Net unrealized appreciation in employer's securities		This information is being furnished to the Internal Revenue Service.	
		\$			
		<b>7</b> Distribution code(s)			
City, state, and ZIP code		IRA/SEP/SIMPLE <input type="checkbox"/>		<b>8</b> Other	
		\$		%	
		<b>9a</b> Your percentage of total distribution		<b>9b</b> Total employee contributions	
Account number (see instructions)		1st year of desig. Roth contrib.		<b>10</b> State tax withheld	
		\$		<b>11</b> State/Payer's state no.	
		\$		\$	
Account number (see instructions)		<b>13</b> Local tax withheld		<b>14</b> Name of locality	
		\$		\$	
		\$		\$	
Account number (see instructions)		<b>12</b> State distribution		<b>15</b> Local distribution	
		\$		\$	
		\$		\$	

Form **1099-R**

(keep for your records)

Department of the Treasury — Internal Revenue Service

## Instructions for Recipient (*Continued*)

If this is a total distribution from a qualified plan (other than an IRA or section 403(b) 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.

**Box 2b.** If the first box is checked, the payer was unable to determine the taxable amount, and box 2a should be blank. However, if this is a traditional IRA, SEP, or SIMPLE distribution, then see IRAs earlier. 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 on Schedule D.

**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 the box next to box 10.

**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. 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, see Instructions for Forms 5329 and 8606.

- 1—Early distribution, no known exception (in most cases, under age 59 ½).
- 2—Early distribution, exception applies (under age 59 ½).
- 3—Disability.
- 4—Death.
- 5—Prohibited transaction.
- 6—Section 1035 exchange (a tax-free exchange of life insurance, annuity, or endowment contracts).
- 7—Normal distribution.
- 8—Excess contributions plus earnings/excess deferrals (and/or earnings) taxable in 2007.
- 9—Cost of current life insurance protection.
- A—May be eligible for 10-year tax option (see Form 4972).
- B—Designated Roth account distribution.
- D—Excess contributions plus earnings/excess deferrals taxable in 2005.

(Continued on the back of Copy 2.)

CORRECTED (if checked)

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

PAYER'S name, street address, city, state, and ZIP code		1 Gross distribution		OMB No. 1545-0119			
		\$		<b>2007</b>			
		2a Taxable amount					
PAYER'S federal identification number		2b Taxable amount not determined <input type="checkbox"/>		Total distribution <input type="checkbox"/>			
		3 Capital gain (included in box 2a)		4 Federal income tax withheld			
		\$		\$			
PAYER'S federal identification number		RECIPIENT'S identification number		<b>Copy 2 File this copy with your state, city, or local income tax return, when required.</b>			
RECIPIENT'S name		5 Employee contributions /Designated Roth contributions or insurance premiums				6 Net unrealized appreciation in employer's securities	
Street address (including apt. no.)		7 Distribution code(s)				8 Other	
City, state, and ZIP code		IRA/SEP/SIMPLE <input type="checkbox"/> 9a Your percentage of total distribution %				\$ % 9b Total employee contributions \$	
1st year of desig. Roth contrib.		10 State tax withheld		11 State/Payer's state no.			
		\$		\$			
Account number (see instructions)		13 Local tax withheld		14 Name of locality			
		\$		\$			
				12 State distribution \$			
				\$			
				15 Local distribution \$			
				\$			

Form **1099-R**

Department of the Treasury — Internal Revenue Service



## Instructions for Recipient (Continued)

- E**—Excess annual additions under section 415 and certain excess amounts under section 403(b) plans.
- F**—Charitable gift annuity.
- G**—Direct rollover to a qualified plan, a 403(b) plan, a governmental 457(b) plan, or an IRA.
- J**—Early distribution from a Roth IRA, no known exception (in most cases, under age 59 ½).
- L**—Loans treated as distributions.
- N**—Recharacterized IRA contribution made for 2007 and recharacterized in 2007.
- P**—Excess contributions plus earnings/excess deferrals taxable in 2006.
- Q**—Qualified distribution from a Roth IRA.
- R**—Recharacterized IRA contribution made in 2006 and recharacterized in 2007.
- S**—Early distribution from a SIMPLE IRA in first 2 years, no known exception (under age 59 ½).
- T**—Roth IRA distribution, exception applies.

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).

**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 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.

**Boxes 10–15.** If state or local income tax was withheld from the distribution, boxes 12 and 15 may show the part of the distribution subject to state and/or local tax.

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**Additional information.** You may want to see:

- W-4P**, Withholding Certificate for Pension or Annuity Payments
- Form 4972**, Tax on Lump-Sum Distributions
- Form 5329**, Additional Taxes on Qualified Plans (Including IRAs) and Other Tax-Favored Accounts.
- Form 8606**, Nondeductible IRAs
- Pub. 560**, Retirement Plans for Small Business (SEP, SIMPLE, and Qualified Plans)
- Pub. 571**, Tax-Sheltered Annuity Plans (403(b) Plans)
- Pub. 575**, Pension and Annuity Income
- Pub. 590**, Individual Retirement Arrangements (IRAs)
- Pub. 721**, Tax Guide to U.S. Civil Service Retirement Benefits
- Pub. 939**, General Rule for Pensions and Annuities
- Pub. 969**, Health Savings Accounts and Other Tax-Favored Health Plans

VOID  CORRECTED

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

**2007**

Form **1099-R**

**Copy D  
For Payer**

For Privacy Act and Paperwork Reduction Act Notice, see the **2007 General Instructions for Forms 1099, 1098, 5498, and W-2G.**

PAYER'S name, street address, city, state, and ZIP code		1 Gross distribution		OMB No. 1545-0119	
		\$		2007	
		2a Taxable amount			
PAYER'S federal identification number		2b Taxable amount not determined <input type="checkbox"/>		Total distribution <input type="checkbox"/>	
		3 Capital gain (included in box 2a)		4 Federal income tax withheld	
		\$		\$	
PAYER'S federal identification number		RECIPIENT'S identification number			
RECIPIENT'S name		5 Employee contributions /Designated Roth contributions or insurance premiums		6 Net unrealized appreciation in employer's securities	
		\$		\$	
		7 Distribution code(s)		8 Other	
Street address (including apt. no.)		IRA/SEP/SIMPLE <input type="checkbox"/>		\$ %	
City, state, and ZIP code		9a Your percentage of total distribution %		9b Total employee contributions \$	
		10 State tax withheld		11 State/Payer's state no.	
1st year of desig. Roth contrib.		\$		\$	
		\$		\$	
Account number (see instructions)		13 Local tax withheld		14 Name of locality	
		\$		\$	
		\$		\$	
				15 Local distribution	
				\$	
				\$	

## Instructions for Payers

We provide general and specific form instructions as separate products. The products you should use to complete Form 1099-R are the 2007 General Instructions for Forms 1099, 1098, 5498, and W-2G and the 2007 Instructions for Forms 1099-R and 5498. A chart in the general instructions gives a quick guide to which form must be filed to report a particular payment. To order these instructions and additional forms, visit the IRS website at [www.irs.gov](http://www.irs.gov) or call 1-800-TAX-FORM (1-800-829-3676).

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

**Due dates.** Furnish Copies B and C of this form to the recipient by January 31, 2008.

File Copy A of this form with the IRS by February 28, 2008. If you file electronically, the due date is March 31, 2008. To file electronically, you must have software that generates a file according to the specifications in Pub. 1220, Specifications for Filing Forms 1098, 1099, 5498, and W-2G Electronically or Magnetically. 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). For TTY/TDD equipment, call 304-267-3367 (not toll free). The hours of operation are Monday through Friday from 8:30 a.m. to 4:30 p.m., Eastern time. The service site can also be reached by email at [mccirp@irs.gov](mailto:mccirp@irs.gov).