Benetech

Distribution Confirmation Form – IRS Form 1099-R Information

Each distribution from a retirement plan, or any conversion of funds to Roth within a retirement plan, must be reported on Form 1099-R. The payee copy must be provided by January 31st following the calendar year in which the distribution occurred. Benetech will prepare Form 1099-R for distributions from your plan each year, if you complete and return this confirmation form, completed in full for all distributions paid from the plan. If any of the items listed below are left blank, we may be unable to prepare Form 1099-R.

Please complete each section of this form and return to Benetech at the time each distribution occurs. Failure to provide this form may result in delays or omissions in the preparation of Form 1099-R. <u>Email completed form to your Benetech Retirement Plan Specialist or fax to 714-550-3401.</u>

PLAN INFORMATION

Plan Name		**Plan Number**	
Employer Tax ID #		**Trust ID #** (most plans will not have a separate trust ID – leave blank if N/A)	

PLAN PARTICIPANT INFORMATION

Participant Name or Beneficiary Name					
Social Security Number		**Date of Birth**			
Participant or Beneficiary Home Address					
City		**State**		**Zip**	

DISTRIBUTION PAYMENT DETAILS

Enter Date Distribution Paid from Plan		**Gross Payment Amount <u>BEFORE</u> Tax Withholding** (if any) (1099-R – Box 1)	$	☐ **Check this box if distribution payment was from a Roth account ***

*If distribution payment is from Roth account, a separate confirmation form must be completed for the Roth portion.

Type of Payment	☐ Paid to Participant/Payee ☐ Paid to IRA ☐ Paid to Qualified Employer Plan ☐ Paid to Roth IRA (distribution paid from Roth Account) ☐ In-Plan Roth Conversion ☐ Paid to Roth IRA (distribution paid from Pre-Tax Account)

TAX WITHHOLDING INFORMATION FOR CASH DISTRIBUTIONS ☐ NO TAXES WITHHELD

Amount of Federal Tax Withheld (1099-R Box 4)		$			
Amount of State Tax Withheld* (1099-R Box 14)	$	**State**		**Payer's State Number** (1099-R Box 15)	
Local Tax Withheld* (1099-R Box 17)	$	**Name of Locality**			

*If state or local tax taxes were withheld and paid you must provide the state, employer's/payer's state number and name of the locality. The Payer's State Number is the Employer's ID # assigned by the individual state. Form 1099-R cannot be prepared without this information if state or local taxes were withheld and paid on a cash distribution payment.

Completed By Plan Admin/ Employer (or authorized party)		Date	