

☐ CORRECTED (IF CHECKED)

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and phone no.

STATE STREET RETIREE SERVICES FOR
PIONEER WORKS 401(K) PLAN
BENEFIT TRUST COMPANY
P.O. BOX 12765
OVERLAND PARK, KS 66282-2765

1 Gross distribution
\$ 24,508.52

2a Taxable amount
\$ 0.00

2b Taxable amount not determined ☐

OMB No. 1545-0119

2019

FORM 1099-R

Total distribution ☒

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

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.

PAYER'S TIN

04-3581074

RECIPIENT'S TIN

***-**-2207

RECIPIENT'S name, street address (including apt. no.), city or town, state or province, country, and ZIP or foreign postal code

KONSTANTIN GREDESKOUL
1113 CAROLINA ST
SAN FRANCISCO, CA 94107

3 Capital gain (included in box 2a)
\$

4 Federal income tax withheld
\$ 0.00

5 Employee contributions/Designated Roth contributions or insurance premiums
\$

6 Net unrealized appreciation in employer's securities
\$

7 Distribution code(s) G ☐ IRA/SEP/SIMPLE

8 Other
\$ %

9a Your percentage of total distribution %

9b Total employee contributions
\$

10 Amount allocable to IRR within 5 years
\$

11 1st year of desig. Roth contrib.
\$

12 State tax withheld
\$ 0.00

13 State/Payer's state no.
CA/81416620

14 State distribution
\$

15 Local tax withheld
\$

16 Name of locality

17 Local distribution
\$

Account number (see instructions)
GUIDELINEZ-INV-002329

www.irs.gov/form1099r

Department of the Treasury-Internal Revenue Service

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