

## Explanation of your 1099-R Tax Statement for our Benefit Recipients

In accordance with IRS rules, PERS must mail your 2019 1099-R form on or before January 31, 2020. The 1099-R form is a federal income tax form used to provide year-end income and tax information. The 1099-R must be filed with your income tax return each year. Please promptly report any change of mailing address to PERS in writing so that you will receive your 1099-R in a timely manner. After January 17th, you may also view your 1099-R form through the PERS website ([www.nvpers.org](http://www.nvpers.org)) by logging into the secure site with your user name and password.

Below is a sample 1099-R form with explanations for each box.

<input type="checkbox"/> CORRECTED (if checked)			OMB No. 1545-0119		<b>2019</b>	Form <b>1099-R</b>	<b>Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.</b>	
PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and phone no.			<b>1</b> Gross distribution \$ _____					<b>2a</b> Taxable amount \$ _____
PAYER'S TIN			<b>3</b> Capital gain (included in box 2a) \$ _____		<b>4</b> Federal income tax withheld \$ _____		This information is being furnished to the IRS.	
RECIPIENT'S TIN			<b>5</b> Employee contributions/ Designated Roth contributions or insurance premiums \$ _____		<b>6</b> Net unrealized appreciation in employer's securities \$ _____			
RECIPIENT'S name			<b>7</b> Distribution code(s)		<b>8</b> Other \$ _____ %			
Street address (including apt. no.)			<b>9a</b> Your percentage of total distribution % _____		<b>9b</b> Total employee contributions \$ _____			
City or town, state or province, country, and ZIP or foreign postal code			<b>10</b> Amount allocable to IRR within 5 years \$ _____		<b>11</b> 1st year of desig. Roth contrib. <input type="checkbox"/>		<b>12</b> State tax withheld \$ _____	
FATCA filing requirement <input type="checkbox"/>			<b>13</b> State/Payer's state no.		<b>14</b> State distribution \$ _____		<b>15</b> Local tax withheld \$ _____	
Account number (see instructions)			<b>16</b> Name of locality		<b>17</b> Local distribution \$ _____		<b>18</b> Local distribution \$ _____	
Date of payment			<b>19</b> Local tax withheld \$ _____		<b>20</b> Local distribution \$ _____		<b>21</b> Local distribution \$ _____	

Form **1099-R**

[www.irs.gov/Form1099R](http://www.irs.gov/Form1099R)

Department of the Treasury - Internal Revenue Service

- **Box 1** – Gross Distribution – The total amount PERS paid you in 2019 before income tax or other deductions.
- **Box 2a** – Taxable Amount – If you paid contributions to PERS while you were working, a portion of your benefit may be non-taxable. Box 2a shows the amount of your gross distribution that is taxable.
- **PAYER'S name, address** – The payer is PERS, LRS, or JRS.

- **Federal identification number** – PERS, LRS, or JRS Federal Tax ID number.
- **Recipient's identification number** – Your Social Security number or other taxpayer identification number.
- **Box 4** – The amount of federal income tax withheld from your PERS benefit in 2019.
- **Box 5** – PERS uses this box to report employee contributions paid to you in 2019 that are non-taxable. Employee contributions are taxed before they are paid to PERS. When you retire, a percentage of these contributions are paid based on your anticipated lifetime benefit and are non-taxable. The amount in Box 5 is the difference between your Gross Distribution (Box 1) and the Taxable Amount (Box 2a). **PERS does not use Box 5 to indicate insurance premiums paid in 2019; that information is not included on the 1099-R form.**
- **Box 7** – Distribution Code – The IRS code used to determine what type of benefit you received.
- **Boxes 8 and 9a** – These boxes are blank.
- **Box 9b** – Total Employee Contributions – If this is your first year of retirement, Box 9b will show the total employee contributions paid to the system prior to your retirement. If you have been retired for more than one year, this box will be blank.
- **Account Number (optional)** – Identifies which PERS account the benefit was paid from.
- **Boxes 10-15** – These boxes are blank.

**If you do not receive your 1099R in the mail, contact our office at 1-866-473-7768 for a duplicate after February 14<sup>th</sup>.**