

Sample 1099-R for Calendar Year 2024

1 Gross Distribution Amount paid to you by MOSERS

Taxable Amount
Portion of your total benefit that
should be considered taxable income

4 Federal Income Tax Withheld Amount of federal income tax withheld

5 Service Purchase

with After-Tax Funds

Portion of service purchase excluded from taxable amount during year – only applies to after-tax funds. (Difference in Box 1 and Box 2a)

7 Distribution Code(s)

Identifies the type of benefit being paid. See chart on pg. 2 of your 1099-R

9b Remaining Service Purchase Paid Remaining balance of what was paid in for any purchase of service to be applied in future years – decreases yearly by amount in box 5

14 State Income Tax Withheld

Amount of MO income tax withheld

Health Insurance Deductions - Amount of medical premiums withheld from your MOSERS benefit

Dental Insurance Deductions - Amount of dental premiums withheld from your MOSERS benefit

Vision Insurance Deductions - Amount of vision premiums withheld from your MOSERS benefit

If you received pension benefit payments from MOSERS in 2024, we have mailed your 1099-R tax form to you. This form lists your 2024 retirement benefit income from MOSERS. You will need this form to file your income tax return. If you receive more than one benefit from MOSERS, you may receive more than one 1099-R from us. The 1099-R form provides the following information for the 2024 calendar year:

Form 1099-R CORRECTED (if checked) RE-ISSUE PAYER'S name, street address, city, state and ZIP code MO STATE EMPLOYEES RETIREMENT SYSTEM 907 WILDWOOD DRIVE JEFFERSON CITY, MO 65109 800-827-1063 800-827-1063			1 Gross distribution \$ 11,908.88 2a Taxable amount \$ 11,908.88	OMB No. 1545-0119 20 24 Form 1099-R	Distributions From Pensions, Annuities Retirement o Profit-Sharing Plans, IRAs Insuranc
			2b Taxable amount not determined	Total distribution	Contracts, etc
PAYER'S federal identification	RECIPIENT'S identification number		3 Capital gain (included in box 2a)	4 Federal income tax withhe	eld 5 Service Purchase with After-tax Funds (excluded from taxable
XXX-XX-1234		\$	\$ 1,800.00	amount) \$.00	
RECIPIENT'S name, street address (including apt. no.), city, state and ZIP code			6 Net unrealized appreciation in employer's securities	7 Distribution code(s) IRA/S SIMF	
PENNY SAVER 114 RETIREMENT ST. JEFFERSON CITY, MO 65109			\$		\$%
			9a Your percentage of total distribution	on 9b Remaining S	ervice Purchase Paid
			% \$.00		
			14 State tax withheld	15 State/Payer's state no.	16 State distribution
			\$ 900.00		\$
10 Amt allocable to IRR within 5 yrs	11 1st year of desig. Roth Contrib.	12 FATCA filing requirement	17 Local tax withheld	18 Name of locality 19 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.			Health Ins Deductions	Dental Ins Deductions	Vision Ins Deductions
			\$	\$	\$
				Department of the Treasu	ry - Internal Revenue Service

For More Information

- Consult with your tax advisor with any questions.
- Contact your medical, dental, and vision insurance provider for more detailed information on the deductions from your MOSERS benefits.
- Access your 1099-R form if you need a replacement copy or change your withholdings by logging in to *my*MOSERS (from www.mosers.org).
- Questions about the 1099-R form or the Missouri Public Pension Exemption? Contact:

Internal Revenue Service (IRS) Phone: (800) 829-1040 Jefferson City office (for some services): (844) 545-5640 Website: www.irs.gov

Missouri Department of Revenue Phone: (573) 751-3505 Automated Inquiry: (573) 526-8299 Website: www.dor.mo.gov/personal

