

VOID CORRECTED

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and phone no. Football Inc. 130 Circle Drive Newark, DE 19971			1 Gross distribution \$ 15,000.00	OMB No. 1545-0119 2019 Form 1099-R		Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.
			2a Taxable amount \$ 15,000.00	2b Taxable amount not determined <input checked="" type="checkbox"/> Total distribution <input type="checkbox"/>		
PAYER'S TIN 51-0000897	RECIPIENT'S TIN		3 Capital gain (included in box 2a) \$	4 Federal income tax withheld \$		
RECIPIENT'S name Matthew Anderson Street address (including apt. no.) 30 Peyton Place City or town, state or province, country, and ZIP or foreign postal code Newark, DE 19971			5 Employee contributions/ Designated Roth contributions or insurance premiums \$	6 Net unrealized appreciation in employer's securities \$		
			7 Distribution code(s) 7	IRA/SEP/SIMPLE <input type="checkbox"/>	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.	FATCA filing requirement <input type="checkbox"/>	12 State tax withheld \$ 20	13 State/Payer's state no. DE	14 State distribution \$	
Account number (see instructions)		Date of payment	15 Local tax withheld \$	16 Name of locality	17 Local distribution \$	