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This form is provided for informational purposes and should not be reproduced on personal computer printers by individual taxpayers for filing. The printed version of this form is a "machine readable" form. As such, it must be printed using special paper, special inks, and within precise specifications.

Additional information about the printing of these specialized tax forms can be found in: Publication 1167, *Substitute Printed, Computer-Prepared, and Computer-Generated Tax Forms and Schedules*; and, Publication 1179, *Specifications for Paper Document Reporting and Paper Substitutes for Forms 1096, 1098, 1099 Series, 5498, and W-2G*.

The publications listed above may be obtained by calling 1-800-TAX-FORM (1-800-829-3676). Be sure to order using the IRS publication number.

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 VOID CORRECTED

TRUSTEE'S or ISSUER'S name, street address, city, state, and ZIP code		1 Regular IRA contributions made in 1994 and 1995 for 1994 \$	OMB No. 1545-0747 1994	Individual Retirement Arrangement Information Copy A For Internal Revenue Service Center File with Form 1096. For Paperwork Reduction Act Notice and instructions for completing this form, see Instructions for Forms 1099, 1098, 5498, and W-2G.
		2 Rollover IRA contributions \$		
TRUSTEE'S or ISSUER'S Federal identification no.	PARTICIPANT'S social security number	3 Life insurance cost included in box 1 \$		
PARTICIPANT'S name		4 Fair market value of account \$		
Street address (including apt. no.)				
City, state, and ZIP code				
Account number (optional)				

Form **5498**

Cat. No. 50010C

Department of the Treasury - Internal Revenue Service

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CORRECTED (if checked)

TRUSTEE'S or ISSUER'S name, street address, city, state, and ZIP code		1 Regular IRA contributions made in 1994 and 1995 for 1994 \$	OMB No. 1545-0747 1994	Individual Retirement Arrangement Information
		2 Rollover IRA contributions \$		
TRUSTEE'S or ISSUER'S Federal identification no.	PARTICIPANT'S social security number	3 Life insurance cost included in box 1 \$		Copy B For Participant The information in boxes 1, 2, 3, and 4 is being furnished to the Internal Revenue Service.
PARTICIPANT'S name		4 Fair market value of account \$		
Street address (including apt. no.)				
City, state, and ZIP code				
Account number (optional)				

Form **5498**

(Keep for your records.)

Department of the Treasury - Internal Revenue Service

Instructions to Participant

The information in boxes 1, 2, 3, and 4 is submitted to the Internal Revenue Service by the trustee or issuer of your individual retirement arrangement (IRA) to report regular or rollover contributions made to your IRA and the value of your IRA or simplified employee pension (SEP) account.

If you or your spouse was an active participant in an employer's pension plan, your IRA contributions may not be deductible. See your Form 1040 or 1040A instructions for details.

Box 1.—The amount shown is the contributions for 1994 made in 1994 and through April 17, 1995, to an IRA.

Box 2.—This is the amount of any rollover, including a direct rollover, you made in 1994. You must report the total distribution you received from your IRA on the appropriate line of your income tax return. Subtract the part of the distribution that was rolled over and enter the taxable remainder on the appropriate line of your income tax return. But if you have ever made any nondeductible contributions to your IRA, use **Form 8606**, Nondeductible IRAs (Contributions, Distributions, and Basis) to figure the taxable

amount. If property was rolled over, see **Pub. 590**, Individual Retirement Arrangements (IRAs).

Box 3.—For endowment contracts only, this is the amount allocable to the cost of life insurance. Subtract this amount from your allowable IRA contribution included in box 1 to compute the amount allowable for your IRA deduction.

Box 4.—This is the fair market value (FMV) of your account at the end of the year. However, if a decedent is shown as the participant on this form, it may be the FMV at the date of death. If a decedent's name is shown as the participant and the FMV shown is zero, the executor or administrator of the decedent's estate may request a date-of-death valuation from the financial institution.

The trustee or issuer of the plan may use the other boxes on this form to give you more information about your IRA. For example, if you were a Desert Shield/Storm participant and you made an IRA contribution for a prior year, "DS," the year for which the contribution was made, and the amount of the contribution may be shown.

You are not required to attach a copy of Form 5498 to your income tax return. Keep this form for your records. For more information about IRAs, see Pub. 590.

VOID CORRECTED

TRUSTEE'S or ISSUER'S name, street address, city, state, and ZIP code		1 Regular IRA contributions made in 1994 and 1995 for 1994 \$	OMB No. 1545-0747 1994	Individual Retirement Arrangement Information Copy C For Trustee or Issuer For Paperwork Reduction Act Notice and instructions for completing this form, see Instructions for Forms 1099, 1098, 5498, and W-2G.
		2 Rollover IRA contributions \$		
TRUSTEE'S or ISSUER'S Federal identification no.	PARTICIPANT'S social security number	3 Life insurance cost included in box 1 \$		
PARTICIPANT'S name		4 Fair market value of account \$		
Street address (including apt. no.)				
City, state, and ZIP code				
Account number (optional)				

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Department of the Treasury - Internal Revenue Service

Trustees and Issuers, Please Note—

Specific information needed to complete this form and forms in the 1099 series is given in the **Instructions for Forms 1099, 1098, 5498, and W-2G**. You can order those instructions and additional forms by calling 1-800-TAX-FORM (1-800-829-3676).

Furnish Copy B of this form to the participant by May 31, 1995. But furnish fair market value information by January 31, 1995.

File Copy A of this form with the IRS by May 31, 1995.



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