CAUTION:

Only file Form HT-209 to report certain items of income as provided in sec. 72.34, Wis. Stats., for deaths after December 31, 1991, and before January 1, 2008.

Employee Death Benefit Report

For deaths after December 31, 1991, and before January 1, 2008

WISCONSIN DEPARTMENT OF REVENUE

PO Box 8906 Madison, WI 53708-8906 Telephone (608) 266-2772

Name of payor reporting	2. Name of plan	
3. Name of deceased employe or former employe		4. Date of death
5. Address of decedent		
Pension Bonus Deferred	ntinuation compensation	below)
7. Amount of payment if paid in one sum	Date of payment	
If payment will be made by installments, state number and amount of determining the value of the installments as of date of death. Indicate value as of date of death.	or installments, age of beneficiary, mortalit	y table and rate of interest used in
9. Names and addresses of beneficiaries	Relationship to decedent	Share of benefits payable
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 10. THE BENEFITS REPORTED ABOVE ARE PAYABLE UNDER A FEDERALLY QUALIFIED NON-QUALIFIED PLAN 11. If the decedent contributed to the plan or toward the benefits reported on this form, please provide the following: 		
contributions by decedent \$ contributions by employer to decedent's account \$		
CERTIFICATION As representative of the payor named above, I certify that the information contained in this report is correct to the best of my knowledge and belief.		
	on contained in this report is correct to the Title	Date
IRA or HR 10 Plan — This form does not have to be completed to report payments from an IRA or HR 10 Plan.		

Section 72.34, Wisconsin Statutes provides that every person liable for paying benefits to the estate or a beneficiary of a deceased employe or former employe in the form of an annuity, bonus, pension or other benefit under a retirement, deferred compensation or profit-sharing plan taxable under this chapter, directly or through a trust or fund created by the employer for such purpose, shall give notice of such obligation to the department within 30 days following the date of payment, or the date of the initial payment if more than one payment is forthcoming, to the estate or any beneficiary of such employe or former employe.

HT-209 (R. 8-23) Wisconsin Department of Revenue