

FORM SSA-1099 – SOCIAL SECURITY BENEFIT STATEMENT

2021 • PART OF YOUR SOCIAL SECURITY BENEFITS SHOWN IN BOX 5 MAY BE TAXABLE INCOME.
 • SEE THE REVERSE FOR MORE INFORMATION.

Box 1. Name		Box 2. Beneficiary's Social Security Number
Box 3. Benefits Paid in 2021	Box 4. Benefits Repaid to SSA in 2021	Box 5. Net Benefits for 2020 (Box 3 minus Box 4)

DESCRIPTION OF AMOUNT IN BOX 3	DESCRIPTION OF AMOUNT IN BOX 4
Paid by check or Direct deposit Medicare Part B premiums deducted from your benefits \$1,782.00 Medicare Prescription Drug premiums (Part D) deducted from you benefits Voluntary Federal Income Tax Withheld Total Additions Benefits for 2021	Box 6. Voluntary Federal Income Tax Withheld Box 7. Address Box 8. Claim Number (Use this number if you need to contact SSA.)

SAMPLE