

Annual Social Security Benefits Worksheet

Personal Information

Full Name: _____

Date of Birth: _____

Filing Status: Single Married Head of Household

Retirement Start Date: _____

Social Security Benefit Details

Monthly Benefit Amount: _____

Spouse's Monthly Benefit (if applicable): _____

Dependent Benefits (if any): _____

Annual Benefits Calculation

Monthly Benefit x 12 Months: _____

Spouse's Benefit x 12 Months: _____

- Total Annual Social Security Benefits: _____

Other Retirement Income (Optional)

Pension or Annuity Income: _____

IRA / 401(k) Withdrawals: _____

- Other Taxable Income: _____