

Social Security Benefit Statement (Form SSA-1099)

Personal Information

Full Name: _____

Social Security Number (Last 4 digits): _____

Tax Year: _____

Step 1: Social Security Benefits Received

Box 3 – Total Social Security Benefits Received: _____

Box 4 – Benefits Repaid to SSA (if any): _____

Net Social Security Benefits (Box 3 - Box 4): _____

Step 2: Benefits That May Be Taxable

$\frac{1}{2}$ of Net Social Security Benefits (Line Above \div 2): _____

Step 3: Other Income (for Provisional Income Calculation)

Adjusted Gross Income (excluding Social Security): _____

Nontaxable Interest (e.g., municipal bonds): _____

Provisional Income Total:

(AGI + Nontaxable Interest + $\frac{1}{2}$ of Social Security Benefits)

= _____

Step 4: Compare Provisional Income to IRS Base Amount

- Single / Head of Household: \$25,000
- Married Filing Jointly: \$32,000

If your Provisional Income exceeds the base, a portion of your benefits may be taxable. Refer to IRS Publication 915 for full calculation steps.

Notes

