

Social Security Benefits Worksheet (Form SSA-1099)

Personal Information

Full Name: _____

Social Security Number (Last 4 digits): _____

Tax Year: _____

Filing Status: Single Married Filing Jointly Head of Household
Qualifying Widow(er)

Section 1: From Form SSA-1099

Box 3 – Total Social Security Benefits Received: _____

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

Box 5 – Net Social Security Benefits (Box 3 - Box 4): _____

Section 2: Provisional Income Calculation

Adjusted Gross Income (excluding Social Security): _____

Tax-Exempt Interest (e.g., municipal bonds): _____

½ of Net Social Security Benefits (½ of Box 5): _____

Total Provisional Income: _____

(AGI + Tax-Exempt Interest + ½ of SS Benefits)

IRS Base Amounts (for Taxable Benefits)

- Single / Head of Household / Widow(er): \$25,000
- Married Filing Jointly: \$32,000
- Married Filing Separately (lived with spouse): \$0

Section 3: Estimated Taxable Benefits

Refer to IRS Publication 915 or use tax software/tax advisor to determine the taxable portion.

Enter on Form 1040, Line 6b

Estimated Taxable Social Security Benefits: _____