

FORM SSA-1099 – SOCIAL SECURITY BENEFIT STATEMENT**2019** • 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 2019	Box 4. Benefits Repaid to SSA in 2018	Box 5. Net Benefits for 2018 (Box 3 minus Box 4)
DESCRIPTION OF AMOUNT IN BOX 3		DESCRIPTION OF AMOUNT IN BOX 4
Box 6. Voluntary Federal Income Tax Withholding		
Box 7. Address		
Box 8. Claim Number (<i>Use this number if you need to contact SSA.</i>)		

Form SSA-1099-SM (6-2019)

DO NOT RETURN THIS FORM TO SSA OR IRS