FORM SSA-1099 – SOCIAL SECURITY BENEFIT STATEMENT

2023 • 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
DOROTHEA WELCH	149-44-0775

Box 3. Benefits Paid in 2023	Box 4. Benefits Repaid to SSA in 2023	Box 5. Net Benefits for 2023 *(Box 3 minus Box 4)*
$21,238.80	NONE	$21,238.80

DESCRIPTION OF AMOUNT IN BOX 3

Paid by check or Direct deposit	$17,334.00
Medicare Part B premiums deducted from your benefits	$1,978.80
Voluntary Federal Income Tax Withheld	$1,926.00
Total Additions	$21,238.80
Benefits for 2023	$21,238.80

DESCRIPTION OF AMOUNT IN BOX 4

NONE

Box 6. Voluntary Federal Income Tax Withheld

$1,926.00

Box 7. Address

DOROTHEA WELCH
122 ORLANDO BLVD
TOMS RIVER NJ 08757-6137

Box 8. Claim Number (*Use this number if you need to contact SSA.*)

149-44-0775A

Form **SSA-1099-SM** (1-2024) **DO NOT RETURN THIS FORM TO SSA OR IRS**