

FORM SSA-1099 – SOCIAL SECURITY BENEFIT STATEMENT

2018

• PART OF YOUR SOCIAL SECURITY BENEFITS SHOWN IN BOX 5 MAY BE TAXABLE INCOME.
 • SEE THE REVERSE FOR MORE INFORMATION.

Box 1. Name EVELYN N SAYANI		Box 2. Beneficiary's Social Security Number 139-11-6879
Box 3. Benefits Paid in 2018 \$10,392.00	Box 4. Benefits Repaid to SSA in 2018 NONE	Box 5. Net Benefits for 2018 (Box 3 minus Box 4) \$10,392.00
DESCRIPTION OF AMOUNT IN BOX 3 Paid by check or direct deposit \$8,784.00 Medicare Part B premiums deducted from your benefits \$1,608.00 Total Additions \$10,392.00 Benefits for 2018 \$10,392.00		DESCRIPTION OF AMOUNT IN BOX 4 NONE
		Box 6. Voluntary Federal Income Tax Withheld NONE
		Box 7. Address EVELYN N SAYANI 53 COLLEGE DRIVE EDISON NJ 08817-5982
		Box 8. Claim Number (Use this number if you need to contact SSA.) 139-11-6879A

CU2332504-112716598-2

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