

FORM SSA-1099 – SOCIAL SECURITY BENEFIT STATEMENT

2022

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

Box 1. Name RODNEY L LARSON		Box 2. Beneficiary's Social Security Number 478-52-1117
Box 3. Benefits Paid in 2022 \$37,657.20	Box 4. Benefits Repaid to SSA in 2022 NONE	Box 5. Net Benefits for 2022 (Box 3 minus Box 4) \$37,657.20
DESCRIPTION OF AMOUNT IN BOX 3 Paid by check or Direct deposit \$35,616.00 Medicare Part B premiums deducted from your benefits \$2,041.20 Total Additions \$37,657.20 Benefits for 2022 \$37,657.20		DESCRIPTION OF AMOUNT IN BOX 4 NONE
		Box 6. Voluntary Federal Income Tax Withheld NONE
		Box 7. Address RODNEY L LARSON PO BOX 44847 EDEN PRAIRIE MN 55344-2547
		Box 8. Claim Number (Use this number if you need to contact SSA.) 478-52-1117A

Your New Benefit Amount

BENEFICIARY'S NAME: RODNEY L LARSON

Your Social Security benefit will increase by **8.7%** in 2023 because of a rise in the cost of living. You can use this letter as proof of your benefit amount if you need to apply for food, rent, or energy assistance. You can also use it to apply for bank loans or for other business. Keep this letter with your important financial records.

How Much You Will Get

Your monthly benefit before deductions	\$3,410.90
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Deductions:

Medicare Medical Insurance (If you did not have Medicare as of November 17, 2022 or if someone else pays your premium, we show \$0.00)	-\$164.90
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Medicare Prescription Drug Plan (We will notify you if the amount changes in 2023. If you did not elect withholding as of November 1, 2022, we show \$0.00)	-\$0.00
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U.S. Federal tax withholding	-\$0.00
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Voluntary Federal tax withholding (If you did not elect voluntary tax withholding as of November 17, 2022, we show \$0.00)	-\$0.00
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After we take any other deductions, you will receive the payment you are due for December 2022 on or about January 25, 2023.	\$3,246.00
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The information above shows your monthly benefit amount before and after deductions. Please remember, we will pay you in the month following the month for which it is due.

If you still get a paper check, you must visit the Department of the Treasury's website at www.godirect.gov to request electronic payments.

If you disagree with any of these amounts, you must file an appeal with us in writing within 60 days from the date you get this letter. We will assume you got this letter 5 days after the date of the letter, unless you show us that you did not get it within the 5-day period. You must have good reason for waiting more than 60 days to file an appeal. You can go to www.ssa.gov/non-medical/appeal to complete and submit the "Request for Reconsideration" form, SSA-561-U2 online. You may also contact us by phone to request the form or go to our website at www.ssa.gov/forms to locate the form. If you need help with the form, please call us.

Need more help?

1. Visit www.ssa.gov for fast, simple, and secure online service.
2. Call us at **1-800-772-1213**, weekdays from 8:00 am to 7:00 pm. If you are deaf or hard of hearing, call TTY **1-800-325-0778**. Please mention this letter when you call.
3. You may also call your local office at **1-866-964-7341**.

SOCIAL SECURITY
SUITE 100
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BLOOMINGTON MN 55438