Department of the Treasury Internal Revenue Service Name shown on your return

Premium Tax Credit (PTC)

► Attach to Form 1040, 1040A, or 1040NR.

2016 Attachment

Your social security number

▶ Information about Form 8962 and its separate instructions is at www.irs.gov/form8962.

Sequence No. **73**

OMB No. 1545-0074

You cannot claim the PTC if your filing status is married filing separately unless you qualify for an exception (see instructions), If you qualify, check the box.											
Part I Annual and Monthly Contribution Amount 1 Tax family size. Enter the number of exemptions from Form 1040 or Form 1040A, line 6d, or Form 1040NR, line 7d . 1											
1	-		f exemptions from Form 1040 or Form 1040A, line 6d, or Form 1040NR, line 7d.								
2a		I. Enter your modified				b Enter the total of your dependents'			.		
_	AGI (see ins	,	2a	0 101 (modified AGI (see instructions)			2b 3		
3			s on lines 2a and 2b (see instructions)								
4		-	rederal poverty line amount from Table 1-1, 1-2, or 1-3 (see instructions). Check the								
_		box for the federal pove							5		
5		, ,	percentage of federal poverty line (see instructions)							%	
6		•	nstruct	ons if you ente							
	No. Continue to line 7.										
	Yes. You are not eligible to receive PTC. If advance payment of the PTC was made, see the instructions for how to report your excess advance PTC repayment amount.										
_											
7			sing your line 5 percentage, locate your "applicable figure" on the table in the instructions								
8a		ion amount. Multiply line 3 by		b Monthly contribution amount. Divide line 8a					8b		
Dai		nearest whole dollar amount	8a	by 12. Round to nearest whole dollar amount							
Pa	,										
9	Are you allocating policy amounts with another taxpayer or do you want to use the alternative calculation for year of marriage (see instructions)?										
40	Yes. Skip to Part IV, Allocation of Policy Amounts, or Part V, Alternative Calculation for Year of Marriage. No. Continue to line 10.										
10	_	See the instructions to determine if you can use line 11 or must complete lines 12 through 23.									
	Yes. Continue to line 11. Compute your annual PTC. Then skip lines 12-23 and continue to line 24. No. Continue to lines 12-23. Continue to line 24.										
	(A) Assurational continues										
Annual		(a) Annual enrollment premiums (Form(s) SLCSP premium		(c) Annual contribution amount		(d) Annual maximum premium assistance	(e) Annual premium tax credit allowed		(f) Annual advance payment of PTC (Form		
Calculation		1095-A, line 33A)	(Form(s) 1095-A,		(line 8a)		(subtract (c) from (b), if	(smaller of (a) or		(s) 1095-A, line 33C)	
44	A		l I	ine 33B)			zero or less, enter -0-)				
11	(a) Moothly										
Monthly		(a) Monthly enrollment premiums (Form(s)	(b) Monthly applicable SLCSP premium (Form		(c) Monthly contribution amount		(d) Monthly maximum premium assistance	(e) Monthly premium		(f) Monthly advance payment of PTC (Form(s)	
Monthly Calculation		1095-A, lines 21-32,	(s) 1095-A, lines 21-32,		,	rom line 8b	(subtract (c) from (b), if	credit allowe (smaller of (a) o	a j	1095-A, lines 21-32	
Calculation		column A)	column B)		or alternative marriage monthly contribution)		zero or less, enter -0-)	column C)		column C)	
12	January				,						
13	February										
14	March										
15	April										
16	May										
17	June										
18	July										
19	August										
20	September										
21	October										
22	November										
23	December										
24	Total premium tax credit. Enter the amount from line 11(e) or add lines 12(e) through 23(e) and enter the total here								24		
25	Advance paym	Advance payment of PTC. Enter the amount from line 11(f) or add lines 12(f) through 23(f) and enter the total here									
26								n Form			
	Net premium tax credit. If line 24 is greater than line 25, subtract line 25 from line 24. Enter the difference here and on Form 1040, line 69; Form 1040A, line 45; or Form 1040NR, line 65. If line 24 equals line 25, enter zero. Stop here. If line 25 is greater										
	than line 24, leave this line blank and continue to line 27										
Pai	Part III Repayment of Excess Advance Payment of the Premium Tax Credit										
27											
28											
29		Excess advance premium tax credit repayment. Enter the smaller of line 27 or line 28 here and on Form 1040, line									
	46: Form 1040A. line 29: or Form 1040NR. line 44										