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	Montana Department of									CC	05 19			Н
	REVENUE								•	ve v	JJ 18			
	201	9 FIC	derly Care	Credit										Ш
1	441		5-30-2366, MC											
)			50 2000, IV.O											
							Soc	ial S	ecur	ity N	lumb	ers		Н
3	First Name and Initial	Las	st Name					1_г	Ħ	7_				
) -						$+$ \square		╀		┵	Ш	+		Н
5	Spouse's First Name and Initial	Las	st Name					1 6		+		+		Н
;								J⊤Ĺ		╛╴	Ш			П
,	Name of Elderly Family Member													П
3								Н		1-				П
)										_				
)	You cannot use this form for calculating the elde	rly care	e credit if anot	her individual p	oaid qu	ualifie	ed ele	derly	/ ca	re e	ехре	nse	s for	
	the same family member and that individual is a													Ш
2	Please contact the Department of Revenue at (4	106) 444	4-6900 for as:	sistance if this	situati	on ap	oplies	s to	you					Н
}	Part I. Eligibility	++++						#			+		#	
				:				$oxed{\bot}$	E 41					
5 }	If you answer yes to all four of these questions,		eligible for th	is credit. If you	answ	er no	το σ	ne d	ot th	es	e qu	estic	ns,	
7	stop here because you are not eligible for this cr							+		+	+		+	Н
3	Is the elderly person related to you by blood or k	oy marri	iage?						ш	Yes	•	ш	Vo	Н
)	Is the elderly person either at least 65 years old	or beer	n determined	to be disabled	for									Н
)	Social Security purposes?								П	Yes	3	m	No	П
Ť									_			H		П
2	Is the family income (gross income, including all						42		Ш	V		Н,	Na.	П
3	\$15,000 or less, if single, or is the combined inc	one of	Don's spouses	ψ30,000 OF 169	oo, II II	iallie	;u ?		Ш	Yes	`		10	
	If your filing status is single or married filing joint					Ш						Ш		П
5	income on Form 2, line 11, less than \$55,000? I	f your fil	iling status is i	married filing						_	$\perp \! \! \perp$		\perp	Ш
3	separately, is your Montana adjusted gross inco	me on F	Form 2, line 1	1, less than \$2	7,500	?	+		Щ	Yes	S	Щ	No	Н
' }	Part II. Credit Computation												#	
)		++++	++++++			++		+		+	+			1
)	Amount of the qualified elderly care expen													Н
<u>'</u>	instructions on the second page of this for	m for th	ne definition of	qualified elder	ly car	exp	ense	es.1	. L					H
2	2. Your Montana adjusted gross income from	າ Form 2	2, line 11					2						
	3. Adjusted gross income multiplier amount f	rom the	e table located	on the second	l page	of								П
)	this form							3	.					
_	4. Multiply the amount on line 1 by the multip	lier repo	orted on line	B above				4						
ļ. 5					etativ	ie n	arric	٦						
} - 		a lailidi				1 1 1	ailit	∌u 5		_	\perp	Ш		Ш
; ;	5. If your filing status is single or married filing	-1-1 1 1-				1	1.1.1.	6	ΙН	+	+			Ш
)) ,	If your filing status is single or married filing filing separately, enter \$25,000		ut not loss that			+++		- h	a 11 l	100				
;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;	5. If your filing status is single or married filing filing separately, enter \$25,000 6. Subtract line 5 from line 2 and enter the re	sult, bu	ut not less thar	n zero					·	_		+++	-	Ш
} ; ;	 5. If your filing status is single or married filing filing separately, enter \$25,000 6. Subtract line 5 from line 2 and enter the re 7. Subtract line 6 from line 4 and enter the re 	sult, bu	ut not less thar	n zero										
3	 5. If your filing status is single or married filing filing separately, enter \$25,000 6. Subtract line 5 from line 2 and enter the re 7. Subtract line 6 from line 4 and enter the re you are not eligible for this credit 	esult, bu	ut not less than the result is ze	n zero ero or less, sto	o here	beca	ause	7						
	 5. If your filing status is single or married filing filing separately, enter \$25,000 6. Subtract line 5 from line 2 and enter the re 7. Subtract line 6 from line 4 and enter the re you are not eligible for this credit 8. If your filing status is single or married filing 	esult, butesult. If t	ut not less than the result is ze	r zero ero or less, sto maller of line 7 o	o here or \$5,0	beca 	ause f you	7						
3	 5. If your filing status is single or married filing separately, enter \$25,000 6. Subtract line 5 from line 2 and enter the re 7. Subtract line 6 from line 4 and enter the re you are not eligible for this credit 8. If your filing status is single or married filing status is married filing separately, entering the status is married filing separately. 	esult, butesult. If t	ut not less than the result is ze	r zero ero or less, sto maller of line 7 o	o here or \$5,0	beca 	ause f you	7 ır	-					
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1 5 7 8 9 9 9 9 1 5 7 8	5. If your filing status is single or married filing separately, enter \$25,000	g jointly ter the s	ut not less than the result is ze y, enter the sm smaller of line onrefundable	ero or less, sto ero or less, sto aller of line 7 or 7 or \$2,500. T	o here	00. I you e 9.	ause f you r	7 Ir 8		ou fil	e ele	ctron	jcallv	
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Form ECC Instructions 4 5 5 Am I eligible to claim the elderly care credit? I paid elderly care expenses for my parent. Can I 6 6 also claim these expenses as a medical itemized You may be eligible to claim this credit if you pay qualified 7 7 deduction? elderly care expenses for a qualified family member. Please 8 8 No. You cannot take a deduction or credit for any amount see the eligibility requirements in Part I of the form to 9 9 determine if you qualify. of elderly care expenses you paid during the year that are 10 10 used to calculate this credit. 11 11 Who is a qualified family member? 12 12 My elderly care credit exceeds my income tax liability. A qualified family member: 13 13 Can my unused elderly care credit be carried back or 14 is related to you by blood or marriage and. 14 carried forward to another tax year, or can I request a 15 15 at least 65 years of age, or refund of my unused credit? 16 determined to be disabled by the social security 16 No. This credit cannot be claimed as a carryback or 17 17 administration, and carryforward to another tax year and cannot be refunded to 18 has family income during the year of \$15,000 or less if 18 you if it exceeds your income tax liability. 19 unmarried and \$30,000 or less if married. 19 20 20 Adjusted Gross Income Multiplier Table How can I determine what qualifies as elderly care 21 21 expenses? If your Montana adjusted Your multiplier to be 22 22 Your qualified elderly care expenses include amounts you gross income on Form entered on Form ECC, line 23 23 ECC, line 2 is: pay for: 3 when your filing status is: 24 24 25 25 But not more Married filing home health agency services At least Single or 26 26 than Married filing personal-care attendant services separately 27 27 jointly care in a long-term care facility that is licensed by the 28 28 Department of Public Health and Human Services \$0 \$ 25,000 0.30 0.150 29 29 homemaker services \$ 25,001 \$ 27,000 0.29 0.145 30 30 adult day care \$ 27,001 0.140 \$ 29,000 0.28 31 31 respite care 32 32 0.27 purchases of health care equipment and supplies \$ 29,001 \$31,000 0.135 33 33 \$ 31,001 \$ 33,000 0.26 0.130 What is family income? 34 34 0.25 \$ 33,001 \$ 35,000 0.125 35 35 Family income is all of the gross income, including all nontaxable income, of the family member and their spouse. \$ 35,001 0.24 0.120 36 36 \$ 37,000 37 37 0.23 0.115 \$ 37,001 \$ 39,000 I have qualified elderly care expenses for both my 38 38 \$41,000 0.22 0.110 mother and father. Can I claim the elderly care credit \$ 39,001 39 39 for the expenses of both my parents? \$41,001 \$ 43,000 0.21 0.105 40 40 Yes you can, but you are limited to a \$5,000 credit for one 41 41 \$ 43,001 \$ 55,000 0.20 0.100 qualifying family member during the year and a total of 42 42 If your filing status is single or married filing jointly with your 43 \$10,000 credit for two or more qualifying family members. 43 spouse and your Montana adjusted gross income is \$55,000 44 44 If you are married filing separately, these limits are \$2,500 or more, you are not eligible for this credit. If your filing status 45 45 for one qualifying family member and \$5,000 for two or is married filing separately with your spouse and your Montana 46 46 adjusted gross income is \$27,500 or more, you are not more qualifying family members. eligible for this credit. If you are caring for two or more eligible 47 47 If you paid qualified elderly care expenses and are claiming family members the limits increase to \$60,000 and \$30,000, 48 48 the elderly care credit for more than one qualifying family respectively. 49 49 member, you will need to complete a separate Form ECC 50 50 Questions? Please call us at (406) 444-6900, or for each family member. 51 51 Montana Relay at 711 for hearing impaired. 52 52 My brothers and sisters help me pay the qualified 53 53 elderly care expenses for our parents. Are we all 54 54 entitled to claim the elderly care credit? 55 55 Yes you are, but the amount of the credit allowed must 56 56 be prorated proportionally to each family member's 57 57 contribution to the total qualified elderly care expenses 58 58 Please contact the Department for assistance in calculating 59 59 this credit if multiple people contributed to the qualified 60 60 elderly care expenses of the same qualified family member. 61 61 62 62 63 63 64 64