# ST15-18 – Long Term Care Payments 1099-LTC

Long term care payments are reported on a 1099-LTC. A sample form is shown below.

CORRECTED (if checked)								
PAYER'S name, street address, city or town, province or state, country, ZIP or foreign postal code, and telephone no.			1 Gross long-term care benefits paid  \$ 2 Accelerated death benefits paid  \$	-	201 201	5	Long-Term Care and Accelerated Death Benefits	
PAYER'S federal identification number	POLICYHOLD	ER'S identification number	3 ☐ Per ☐ Reimburs diem ☐ amount		I SURED'S social security no.		Copy B For Policyholder	
POLICYHOLDER'S name	INSUBED'S name					This is important tax information and is being furnished to the Interna Revenue Service. If you		
Street address (including apt. no.)			Street address (including apt. no.)				are required to file a return, a negligence penalty or other	
City or town, province or state, country, and ZIP or foreign postal code			City or town, province or state, country, and ZIP or foreign postal code				imposed on you if this item is required to be	
Account number (see instructions)		4 Qualified contract (optional)	5 (optional)	=	ronically ill rminally ill	Date ce	rtified	reported and the IRS determines that it has not been reported.
Form 1099-LTC (keep for your records) www.irs.gov/form1099ltc Department of the Treasury - Internal Revenue Service								

Long term care payments are made on a per-diem basis or as an actual reimbursement of expenses incurred.

- Per-diem plan payments are not taxable up to \$330 per day. If per-diem payments received are less than \$330 per day, the payments are excludible from gross income.
- Reimbursed amounts that are less than the actual cost of qualified care are excludible from gross income.

Accelerated Death Benefits under a life insurance contract are also reported on a 1099-LTC.

- Insured has been certified by a physician as terminally ill
  - Fully excludible from gross income

### Certified as chronically ill

Treated the same as paid under a qualified long-term care insurance contract

If there are multiple payees under the insurance contract, refer the taxpayer to a paid preparer. OUT OF SCOPE

**Qualified LTC Insurance Contract** - A qualified LTC insurance contract is a contract issued:

- After December 31, 1996, that meets the requirements of section 7702B, including the requirement that the insured must be a chronically ill individual (defined later), or
- Before January 1, 1997, that met state law requirements for LTC insurance contracts at the time the contract was issued and has not been changed materially.
- In general, amounts paid under a qualified LTC insurance contract are excluded from your income. However, if you receive per diem payments (defined next), the amount you can exclude is limited to \$330 per day.

# ST15-18 – Long Term Care Payments 1099-LTC

#### References:

- IRS Pub 502
- Instruction for Form 8853
- Pub 17 Chapter 5

#### How to report 1099-LTC Payments.

ADD Form 8853 Page 2 Long Term Care Contracts or link to this form from Wkt7 Line 11.

Check at the top of the form indicating who holds the contract (taxpayer or spouse).

Line 14 – Enter the name and SSN of the insured

Line 15 – In 2015, did anyone other than you receive payments on a per diem or other periodic basis under a qualified LTC insurance contract covering the insured or receive accelerated death benefits under a life insurance policy covering the insured.

• If the answer to this question is "Yes", the return is OUT OF SCOPE.

Line 16 - Was the insured a terminally ill individual?

If Yes, follow the instructions on the form. The amount on line 26 will be 0 and none of the payment is taxable

Line 17 – Enter the amount in box 1 of all the 1099-LTC if per-diem is checked in box 3 of the 1099-LTC.

Line 18 - Enter the part of the amount on line 17 that is from qualified LTC insurance contracts.

Line 19 – Enter the amount in box 2 of the 1099-LTC if per-diem is checked in box 3.

Line 20 - Calculated - The sum of Lines 18 and Lines 19

Line 21 – Enter the number of days in the LTC period

Line 22 – Enter actual costs incurred for qualified LTC services provided for the insured during the LTC period.

Line 23 – Calculated – The larger of 21 or 22

Line 24 – Enter reimbursements received or expect to receive through insurance or otherwise for qualified LTC services.

Line 25 – Calculated – Per-diem limitation

Line 26 – Taxable amount if any. In most cases this will be zero.

TaxWise will carry any taxable amount to 1040 Wkt 7, Line 11 and then to 1040 Line 21.

Any unreimbursed medical expenses can be deducted on A Detail, if itemizing.

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US 8853 (2015) Page 2 Long Term Care Insurance Contracts are held by the: Taxpayer Spouse LTC CONTRACT Policy holder SSN: Name: Section C: Long-Term Care (LTC) Insurance Contracts Note: If more than one Section C is attached, check here 14 Information about the insured CONTRACT First name: LTC Last name: SSN: 040-03-0752 15 In 2015, did anyone other than you receive payments on a per diem or other periodic basis under a qualified LTC insurance contract covering the insured or receive accelerated death benefits under a life insurance policy covering the insured? No O Yes 16 Was the insured a terminally ill individual? O Yes No If "Yes", and the only payments received in 2015 were accelerated death benefits that were paid because the insured was terminally ill, skip lines 17 through 25, enter -0- on line 26 and check here 17 Gross LTC payments received on a per diem or other periodic basis. Enter the total of the amounts from box 1 of all Forms 1099-LTC you received with respect to the 120000 insured on which the "Per diem" box in box 3 is checked Caution. Do not use lines 18 through 26 to figure the taxable amount of benefits paid under an LTC insurance contract that is not a qualified LTC insurance contract. Instead, if the benefits are not excludable from your income (for example, if the benefits are not paid for personal injuries or sickness through accident or health insurance), report the amount not excludable as income on Form 1040, line 21. 120000 18 Enter the part of the amount on line 17 that is from qualified LTC insurance contracts 19 Accelerated death benefits received on a per diem or other periodic basis. Do not include any amounts you received because the insured was terminally ill 0 20 Add lines 18 and 19 120000 Note: If you checked "Yes" on line 15, see the instructions for line 15 before completing lines 21 through 25. 365 in the LTC period 21 Multiply \$330 by the number of days 120450 22 Costs incurred for qualified LTC services provided for the insured during the LTC period 120450 23 Larger of line 21 or line 22 24 Reimbursements for qualified LTC services provided for the insured during the LTC period 0 25 Per diem limitation 120450 26 Taxable payments. Subtract line 25 from line 20. This amount is included in the total of Form 1040. line 21

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