

2010 Montana Medical Care Savings Account

Annual Reporting Information for Self-Administered Accounts 15-61-202, MCA

Name (a	as it appears on your tax return):	
Your so	cial security number:	
Name a	and address of the financial institution where your Montana medical care savings account is	established:
Your Mo	ontana medical care savings account number	
Part I	Allowable deduction calculation	
1.	Current year deposits (Column A if using MSA-Worksheet) 1.	
2.	Deposits from prior years not previously deducted	
3.	Add lines 1 and 2	
4.	Enter the lesser of the amount on line 3 or \$3,000	4.
5.	Interest and other income (Column B if using MSA-Worksheet)	5.
6.	Add lines 4 and 5. This is your Montana Medical Saving Account exclusion. Enter this amount on Form 2, Schedule II, line 18 or Form 2M, line 32.	6.
7.	If the amount on line 3 is greater than \$3,000, subtract line 4 from line 3.	
	These are your excess deposits which may be excluded next year	7.
Part II	Nonqualified withdrawals	
1.	Nonqualified withdrawals (Column D if using MSA-Worksheet)	1.
	Enter this amount on Form 2, Schedule I, line 7 or Form 2M, line 25	
2.	Enter the withdrawals on line 1 made on the last business day in December 2010	2.
3.	Subtract line 2 from line 1	3.
4.	Multiply the amount on line 3 by 10%(0.10). Enter this amount on Form 2, line 68 or Form 2M, line 59, and write "MSA" in the space provided. This is your penalty	4.

The Montana Medical Care Savings Account worksheet (MSA-Worksheet) is available to help you reconcile the activity on this form. It is not required to be completed or included with your tax return. (The MSA-Worksheet follows the instructions for this form.)



New! Form MSA has been simplified so that it is easier to calculate and report your allowable exclusion. A worksheet (MSA-Worksheet) is available for your convenience to help track deposits, earnings and withdrawals. This worksheet is not required to be filed but a copy should be retained for your records if you choose to use it. Also, please note that the penalty information previously reported on Form MSA-P, Medical Care Savings Account – Penalty Calculation, is now included on Form MSA, if applicable.

Form MSA General Instructions

Purpose of this form. A resident who establishes a medical savings account (or whose employer establishes an account for them) to pay for the medical expenses of themselves, their spouse, and their qualifying children is allowed to exclude contributions of up to \$3,000 annually in determining their Montana adjusted gross income, as well as interest and other income earned in the account. Account holders have to file this form each year with their individual income tax return.

Definitions

- "Account holder" is a Montana resident who establishes a Montana medical care savings account.
- **"Dependent"** means your spouse and your qualified children. Your child qualifies as a dependent when the child is:
- Under the age of 19; or
- Under the age of 23 and enrolled as a full-time student at an accredited college or university; or
- Legally entitled to the provision of proper or necessary subsistence, education, medical care or other care necessary for the child's health, guidance or well-being (for example under a child-support agreement) and is not otherwise married, self-supporting, emancipated or a member of the armed forces; or
- Mentally or physically incapacitated to the extent that the child is not self-sufficient.
- "Eligible medical expenses" are medical expenses, defined under Internal Revenue Code at 26 U.S.C. 213(d), that you, as the account holder, pay for yourself, your spouse and your qualified children.
- "Non-qualified withdrawals" are any withdrawals from your account that are not used for eligible medical expenses.

How can I establish a Montana medical care savings account?

Any Montana resident can establish a Montana medical care savings account. The account has to be held separately and cannot be a joint account with your spouse or child. If you are married, both spouses can establish their own Montana medical care savings account and take advantage of the Montana tax benefit. Your account can be established with any financial or investment institution.

Your Montana medical care savings account can be self-administered or administered by a financial institution or an accountant. Most self-administer their accounts and do not utilize a third party administrator. When you self-administer your account, use Form MSA to report your deposits and withdrawals.

How much can I contribute to my Montana medical care savings account this year, and how much of this amount can I subtract from my federal adjusted gross income for 2010?

There is no limit in any one year on the amount that you may deposit into your Montana medical care savings account, but there is a limit on the amount that you can exclude from your federal adjusted gross income to arrive at your Montana adjusted gross income.

If your filing status is single, head of household or married filing separately, the maximum amount that you can exclude from your federal adjusted gross income in any one year is \$3,000 plus the interest or other income earned on the account. If you are filing your return jointly with your spouse and both spouses have a Montana medical care savings account, the maximum amount that you can exclude from your federal adjusted gross income is \$6,000 plus the interest or other income earned on both accounts.

What happens if I don't use the entire amount I deposited in my Montana medical care savings account this year for medical expenses?

There is no limit on the amount of funds and interest or other income on those funds that can be retained tax-free within your account. Example: You deposited \$500 in the account this year and you withdraw \$100 for eligible medical expenses this year. You will have a balance of \$400 in your account that can be used in the future to pay for eligible medical expenses.

How do contributions to my account affect my Montana taxable income?

You reduce your Montana taxable income in the year you make a contribution by the lesser of the amount you contribute to the account or \$3,000. The reduction is based on the amount you contribute, not the amount you pay for medical expenses. If you contributed \$500, but paid only \$100 for expenses in the current tax year, you would reduce your Montana adjusted gross income by \$500 even though you have not used the entire amount. If you don't deposit any additional amounts in your account next year, but you use the remaining \$400 for eligible medical expenses next year, your Montana taxable income will not be affected next year. You cannot claim an itemized deduction for medical expenses you pay from your account in either year.

I have a federal health savings account established with my employer. Can I also have a Montana medical care savings account?

Yes, you can. The fact that you have a health savings account and are allowed a federal itemized deduction for contributions made to the account, does not prevent you from establishing a separate Montana medical care savings account and making qualifying contributions to it. These accounts have to be maintained separately and the funds cannot be commingled.

I paid several eligible medical bills from my regular checking account in 2010. Can I reimburse myself for these amounts from my Montana medical care savings account? If I can, how soon do I have to withdraw funds from my Montana medical care savings account and deposit them in my checking account?

You can reimburse yourself from the medical savings account for eligible medical expenses you paid, even if the expenses were incurred before you established the account. You have until January 15, 2011 to withdraw funds from your Montana medical care savings account to reimburse yourself for funds withdrawn from your checking account.

I have a Montana medical care savings account. I withdrew funds during 2010 that were not used for eligible medical expenses. Are there any penalties that I have to pay because of this withdrawal?

When you withdraw funds from your Montana medical care savings account for some purpose other than payment of "eligible medical expenses" you are subject to a 10% penalty on these withdrawals. You are not subject to this penalty, however, if the funds are withdrawn on the last business day of your tax year. You will need to complete Part II of this form to calculate your penalty.

In all cases, your non-qualified withdrawals are considered ordinary income in the year that you withdraw the funds and are included as an addition to federal adjusted gross income in calculating your Montana adjusted gross income.

What records do I have to maintain to verify that my withdrawals from my Montana medical care savings account were used for eligible medical expenses?

You are required to maintain, as part of your tax records, documentation that proves that your withdrawals in 2010 were made for eligible medical expenses for yourself, your spouse and your eligible dependents. You are not required to provide that the actual withdrawal is used to pay for the eligible medical expenses, but you are required to provide that the withdrawal was expended for your eligible medical expenses that were paid in 2010.

MSA-Worksheet Instructions

What is the MSA-Worksheet used for?

This worksheet can be used to track deposits, withdrawals, fees and other transactions affecting the balance of your medical care savings account.

Am I required to use this worksheet and attach a copy to my Montana Form MSA each year?

No, you are not required to use this worksheet nor include a copy when you file your income tax return. The worksheet is provided to help you track and record the information related to your medical savings account.

If your tax return is selected for review because you claimed the deduction for deposits into a medical savings account, this worksheet can be submitted as a summary. However, you may still be asked to provide other information such as copies of bank statements and cancelled checks.

Questions? Please call us toll free at (866) 859-2254 (in Helena, 444-6900), or access the Montana State University Extension MontGuide at msuextension.org/publications/FamilyFinancialManagement/MT199817HR.pdf.



Montana Medical Care Savings Account Worksheet

Account Holder	
Account Number	-
Financial Institution	
For year ended	

Expenses Paid or Reimbursed

Date	Description	Amount	Paid directly from MSA?	Reimbursed from MSA?	Date Reimbursed
			<u> </u>		
		<u> </u>			

Deposits, Withdrawals and Other Transactions

Date	Description	Column A Deposit amount	Column B Interest & other income	Column C Qualified withdrawals	Column D Nonqualified withdrawals	Column E Fees & other charges		
	Totals							
	Totals [<u> </u>					
Account Reconciliation								
1. Beginning								
2. Total deposits (Column A)								
3. Total inte	3. Total interest and other income (Column B)							

Total withdrawals (Add Columns C and D) 5.

Total fees and other charges (Column E) 6.