



**Health Care Questions continued**

Yes	No	5) For line 3, was code (4) entered for any month for you or any member of your tax household?	If <b>Yes</b> , go to line 6. If <b>No</b> , STOP here and do not answer any more questions.
Yes	No	6) Did you or any member of your tax household receive an advance payment of the Premium Tax Credit (APTC) through the Marketplace?	If <b>Yes</b> , go to line 7. If <b>No</b> , STOP here and do not answer any more questions. File Form 8962, <i>Premium Tax Credit (PTC)</i> , to see if you qualify for the Premium Tax Credit (PTC). <b>Note:</b> If there was no APTC and your household income is above 400% of the Federal Poverty Level, you do not qualify for the PTC. Form 8962 is not needed, unless you or a tax family member received a Form 1095-A from the Marketplace.
Yes	No	7) For any month that code (4) was entered in line 3, did you or any tax household member qualify for health insurance through an employer plan or government sponsored plan such as Medicaid, TRICARE, or the Children's Health Insurance Program (CHIP)?	If <b>Yes</b> , for such tax household member, the PTC is not allowed for that month, even if the health insurance was purchased through the Marketplace for that month, and/or APTC was received for that month. See the Form 8962 instructions for Part II, line 10.
Yes	No	8) Do you have a Form 1095-A for each member of your tax household for the months in which code (4) was entered on line 3?	If <b>Yes</b> , go to line 9. If <b>No</b> , you need to contact the Marketplace to obtain a copy of Form 1095-A for each applicable tax household member, or, if another taxpayer (such as a former spouse) has the applicable Form 1095-A for such tax household member, you need to obtain a copy of Form 1095-A from that other taxpayer.
Yes	No	9) Did you or a member of your tax household share a policy with another taxpayer? For example, you purchased insurance for yourself and your two children, but a former spouse can claim one or both children on his/her tax return as a dependent.	If <b>Yes</b> , complete Part IV of Form 8962.
Yes	No	10) Did you get married during the tax year?	If <b>Yes</b> , see the Form 8962 instructions for Part V. This part of Form 8962 is not required, but this election may help to reduce the amount of excess APTC that must be repaid, if applicable.
Yes	No	11) Was there a change of address, or a new member added or subtracted from your tax household (such as the birth of a newborn or an adult child moving away), or a change in the number of personal exemptions claimed from what you had originally informed the Marketplace, or a change in the number of tax household members enrolled through the Marketplace, <i>and</i> you did not inform the Marketplace of these changes at the time of the change?	If <b>Yes</b> , see the Form 8962 instructions for Part II, line 10. If <b>No</b> , complete Form 8962 to determine the allowable PTC and whether any APTC must be repaid. <b>Note:</b> Informing your insurance company of a change in address or number of household members, or other change in circumstance is not the same as informing the Marketplace. In addition to notifying the insurance company, you must also notify the Marketplace whenever there is a change in circumstances. If the Marketplace was not informed, see the Form 8962 instructions for Part II, line 10.