

Caution: DRAFT FORM

This is an advance proof copy of an IRS tax form. It is subject to change and OMB approval before it is officially released.

If you have any comments on this draft form, you can submit them to us on our web site. Include the word DRAFT in your response. You may make comments anonymously, or you may include your name and e-mail address or phone number. We will be unable to respond to all comments due to the high volume we receive. However, we will carefully consider each suggestion. So that we can properly consider your comments, please send them to us within 30 days from the date the draft was posted.

Department of the Treasury
Internal Revenue Service

▶ See separate instructions.
▶ Attach to your tax return.

2010
Attachment
Sequence No. **63**

Name(s) shown on return

Identifying number

<p>1 Enter the number of individuals you employed during the tax year who are considered employees for purposes of this credit (see instructions)</p> <p>2 Enter the number of full-time equivalent employees you had for the tax year (see instructions). If you entered 25 or more, skip lines 3 through 11 and enter -0- on line 12</p> <p>3 Average annual wages you paid for the tax year (see instructions). If you entered \$50,000 or more, skip lines 4 through 11 and enter -0- on line 12</p> <p>4 Premiums you paid during the tax year for employees included on line 1 for health insurance coverage under a qualifying arrangement (see instructions)</p> <p>5 Premiums you would have entered on line 4 if the total premium for each employee equaled the average premium for the small group market in which you offered health insurance coverage (see instructions)</p> <p>6 Enter the smaller of line 4 or line 5</p> <p>7 Multiply line 6 by the applicable percentage: <ul style="list-style-type: none"> • Tax-exempt small employers, multiply line 6 by 25% (.25) • All other small employers, multiply line 6 by 35% (.35) </p> <p>8 If line 2 is 10 or less, enter the amount from line 7. Otherwise, see instructions</p> <p>9 If line 3 is \$25,000 or less, enter the amount from line 8. Otherwise, see instructions</p> <p>10 Enter the total amount of any state premium subsidies paid and any state tax credits available to you for premiums included on line 4 (see instructions)</p> <p>11 Subtract line 10 from line 4. If zero or less, enter -0-</p> <p>12 Enter the smaller of line 9 or line 11</p> <p>13 If line 12 is zero, skip lines 13 and 14 and go to line 15. Otherwise, enter the number of employees included on line 1 for whom you paid premiums during the tax year for health insurance coverage under a qualifying arrangement (see instructions)</p> <p>14 Enter the number of full-time equivalent employees you would have entered on line 2 if you only included employees included on line 13</p> <p>15 Credit for small employer health insurance premiums from partnerships, S corporations, cooperatives, estates, and trusts (see instructions)</p> <p>16 Add lines 12 and 15. Partnerships and S corporations, stop here and report this amount on Schedule K; all others, go to line 17</p> <p>17 Credit for small employer health insurance premiums included on line 16 from passive activities (see instructions)</p> <p>18 Subtract line 17 from line 16</p> <p>19 Credit for small employer health insurance premiums allowed for 2010 from a passive activity (see instructions)</p> <p>20 Carryback of the credit for small employer health insurance premiums from 2011</p> <p>21 Add lines 18 through 20. Cooperatives, estates, and trusts, go to line 22. Tax-exempt small employers, skip lines 22 and 23 and go to line 24. All others, stop here and report this amount on Form 3800, line 29h</p> <p>22 Amount allocated to patrons of the cooperative or beneficiaries of the estate or trust (see instructions)</p> <p>23 Cooperatives, estates, and trusts, subtract line 22 from line 21. Stop here and report this amount on Form 3800, line 29h</p> <p>24 Enter the amount you paid in 2010 for taxes considered payroll taxes for purposes of this credit (see instructions)</p> <p>25 Tax-exempt small employers, enter the smaller of line 21 or line 24 here and on Form 990-T, line 44f</p>	<p>1</p> <p>2</p> <p>3</p> <p>4</p> <p>5</p> <p>6</p> <p>7</p> <p>8</p> <p>9</p> <p>10</p> <p>11</p> <p>12</p> <p>13</p> <p>14</p> <p>15</p> <p>16</p> <p>17</p> <p>18</p> <p>19</p> <p>20</p> <p>21</p> <p>22</p> <p>23</p> <p>24</p> <p>25</p>	
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