



ACA Health Insurance Requirement

As part of the Affordable Care Act, all Americans are now required to have qualified health insurance or face a “Shared Responsibility Payment” more commonly known as the Health Care Penalty. In order to protect both you as the taxpayer and Dakotaland Financial Services LLC as the preparer from future IRS liability in the event of an audit, we require all individual taxpayers to affirm the following items related to Health Care:

We had insurance all year

We had insurance all year

One Policy

Multiple Policies

We had insurance only part of the tax year

We had NO insurance during tax year

Please complete the following section for all the members of your family. If not completed and if you have not provided us with information to show your exemption from providing health insurance, we will calculate the penalty and include it on your tax return.

| Family Members | Period Covered | Name of Insurance |
|----------------|----------------|-------------------|
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We have provided you with all copies of Forms 1095-A, 1095-B, and 1095-C we received

We had alternate government provided qualified health care insurance from Medicare, Medicaid, or Tri-care that covers all members of our household

We had qualified employer-provided health insurance for the entire year that covers all the members of our household

We had other qualified health insurance we purchased directly from an agent or insurance company for the entire year which covers our entire household

We bought insurance through the Marketplace or Shop program and have received a premium credit

By signing this form, you are certifying that you have given us valid information regarding your health insurance coverage for 2017. If you have given incorrect information, as your tax preparer, Dakotaland Financial Services LLC, will not be held liable for any fees or fines associated with your tax return.

Taxpayer Signature

Spouse Signature

Date

Date

Printed

Printed