



Save over \$5,500 a year
on your medical expenses.



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Each year, AgriPlan, BizPlan and No Limit Plan Clients average \$5,600 a year in savings! Key to these savings is the ability to declare medical expenses as a business expense, rather than a personal deduction.

AgriPlan and BizPlan are medical reimbursement programs that enable qualified small business owners to deduct federal, state, and self-employment taxes for family medical expenses. This benefit Plan is an ideal way for a farmer, an independent sales agent, a trucker, or a retail shop owner to save thousands each year!

How much will I save?

STEP 1: ADD THE FOLLOWING TOGETHER.

Medical Insurance Premiums _____
 Non-Insured Medical Expenses + _____
 Total Deductible Expenses (A) = _____

STEP 2: DETERMINE YOUR MULTIPLIER.

If your taxable income is:	Your Federal Tax is:	Multiply by:
\$0–18,650	10%	.30
\$18,651–75,900	15%	.35
\$75,901–153,100	25%	.45
\$153,101–233,350	28%	.48
\$233,351–416,700	33%	.53
\$416,701–\$470,700	35%	.55

STEP 3: DETERMINE TOTAL TAX SAVINGS.

_____ x _____ = _____
 Enter Number From (A) Your Multiplier Total Tax Savings

This illustration assumes an average state tax rate of 5% and a FICA rate of 15.3% when calculating your multiplier. Actual savings may vary.

AgriPlan and BizPlan:

Save you money

- Enables you to deduct family medical expenses including: health insurance premiums; out-of-pocket medical, dental, and vision costs; and qualified long-term care insurance premiums.
- Gives you eligible expense deduction guidance and an exclusive TASC Card that enables you to better manage and reduce your over-the-counter expenses.

Reduce your workload

- Provides multi-employee Clients with the required *Summary of Benefits Coverage* to distribute to your employee(s).
- Furnishes ERISA and PPACA notices to multi-employee Clients.
- Provides pre-filled IRS Tax Form 720 and PCORI guidance to multi-employee Clients.

Provide peace of mind

- Industry-exclusive Audit and Money Back guarantees.
- Complete compliance with ever-changing regulations.
- Ability to Carry Over any available unused medical reimbursements to the next Plan year.
- Adult Child Tracker service to help you maximize your deductions.
- Guidance on legislative changes that may affect your Plan.



Medical expense deductions with and without AgriPlan or BizPlan:

Without

PREMIUM DEDUCTION*	100%
(Health & long-term care)	
\$10,159* x 100% =	\$10,159
Federal tax rate	
\$10,159* x 15% =	\$1,524
Tax savings =	\$1,524
NON-INSURED EXPENSES	0%
(Out-of-pocket medical)	
\$5,935* x 0% =	\$0
Federal and state tax savings, 0%	\$0
TOTAL EXPENSES =	\$16,094
TOTAL DEDUCTION =	\$10,159
Total Tax Savings	\$1,524

With AgriPlan or BizPlan

PREMIUM DEDUCTION*	100%
(Health & long-term care)	
\$10,159* x 100% =	\$10,159
Federal, state and SE tax rate	
\$10,159* x 35% =	\$3,556
Tax savings =	\$3,556
NON-INSURED EXPENSES	100%
(Out-of-pocket medical)	
\$5,935* x 100% =	\$5,935
Federal and state and self-employment tax savings, 35%	\$2,077
TOTAL EXPENSES =	\$16,094
TOTAL DEDUCTION =	\$16,094
Total Tax Savings	\$5,633

*These figures are based on actual average AgriPlan and BizPlan Client premiums, out-of-pocket medical expenses, and tax savings!



TASC has additional products available for the small business owner. Talk to your TASC Representative to learn which products might be the best fit for your business.



Receive a FREE tax savings analysis



Employer Name _____ Contact Name _____

Company Name _____

E-mail _____

Company Mailing Address _____

City _____ State _____ Zip _____

Phone Number _____ Best Time To Call _____

Tax Filing Status: C-Corporation S-Corporation Partnership Sole Proprietor
 Non-Profit LLC Other _____

Insurance Policy: Group Individual None Carrier _____

Are you currently married? Yes No

If you answered Yes, does your spouse assist you in your business? (answering phones, website design, bookkeeping, delivery, etc.)? Yes No

Do you currently have any unrelated employees in your business? Yes No
If you answered Yes ...

How many work more than 25 hours per week? _____

How many complete more than 7 months of employment annually? _____

How many are over age 25? _____

Approximately how much do you spend annually on the following medical expenses?

Health Insurance Premiums \$ _____
(include any accident, hospital indemnity, cancer, vision and dental insurance etc.)

Long-Term Care Premiums \$ _____

Out-of-Pocket Medical Expenses \$ _____
(include prescription drugs, co-pays, deductibles etc.)

Vision (include contact lenses, glasses, eye exams, etc.) \$ _____

Dental (include routine cleanings, exams, etc.) \$ _____

TOTAL \$ _____

Provider Name/Phone _____ Provider # _____

Retail/Wholesale/Coupon Code _____

Employer (sign here) _____

Title _____

Date _____

Mail, e-mail or fax this completed form to your TASC Provider or Regional Representative for a FREE savings analysis!

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