

Determining your DCA Reimbursable Expenses



Febco Benefits Administration

Form: DCAEXPENSESLIST10302015

Below is a chart to help you determine how much to set aside in your DCA.

This is not an enrollment form.

Single: \$2500.00 MAX Family: \$5000.00 MAX

Dependent Care Expenses

\$ _____ *Daycare centers*

\$ _____ *Private Sitter*

\$ _____ *Elder care*

\$ _____ *Day camps*

\$ _____ *Preschool*

\$ _____ *After-school care*

\$ _____ *Nanny*

\$ _____ *Family child care*

\$ _____ **Daycare Year Total**

Estimating Annual Expenses and Tax Savings

Total DCA Expenses \$ _____

Tax Bracket Percentage (see right) % _____

Annual Tax Savings \$ _____

(Multiply total expenses by tax bracket percentage)

Savings amount per paycheck \$ _____

(Divide total Annual Tax Savings by number of paychecks you receive each year – 52, 26, 24, 12)

Tax Estimate Table

Based on a combination of social security, federal, and state income taxes.

If your annual household earnings are: **Estimated tax rate is:**

Less than \$30,000	25%
\$30,000 to \$40,000	29%
\$40,000 to \$70,000	31%
Greater than \$70,000	33%

These tax rates are estimates based on national averages and may not reflect your actual tax rate.

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