

TAX YEAR \_\_\_\_\_

TAXPAYER NAME \_\_\_\_\_

**MEDICAL**

(Do not include amounts reimbursed by insurance.)

Medicare Premiums Paid..... \$ \_\_\_\_\_

Other Health, Dental &amp; Cancer Insurance..... \$ \_\_\_\_\_

Long Term Care Insurance Premiums Paid..... \$ \_\_\_\_\_

Medical Miles

(# of miles - do not calculate \$ amount) \_\_\_\_\_

Prescription Drugs..... \$ \_\_\_\_\_

Doctors, Dentists, Hospitals..... \$ \_\_\_\_\_

Glasses, Contacts, Hearing Aids &amp; Supplies \$ \_\_\_\_\_

Lodging..... \$ \_\_\_\_\_

Other (itemize)..... \$ \_\_\_\_\_

**TAXES**

Real Estate..... \$ \_\_\_\_\_

Tax on Vehicle Tags..... \$ \_\_\_\_\_

Sales Tax on Motor Vehicles, Boats, & Building  
Materials..... \$ \_\_\_\_\_**ESTIMATED TAXES PAID**

Date Paid	Federal \$	State \$

**INTEREST**Bring all Form 1098s OR Complete this section

Home Mortgages (1st &amp; 2nd Homes)

Home Equity Line..... \$ \_\_\_\_\_

Vendors Lien..... \$ \_\_\_\_\_

Paid To \_\_\_\_\_

Address \_\_\_\_\_

Student Loan Interest Paid..... \$ \_\_\_\_\_

**CONTRIBUTIONS**

Cash or Check Donations. . . . . \$ \_\_\_\_\_

Items or Property donated (less than \$500).. \$ \_\_\_\_\_

If over \$500 donated - you must bring  
supporting documents

Charitable Miles

(# of miles - do not calculate \$ amount)..... \_\_\_\_\_

**OTHER DEDUCTIONS**

Union &amp; Professional Dues..... \$ \_\_\_\_\_

Professional Publications..... \$ \_\_\_\_\_

Uniforms, Safety Shoes &amp; Equipment, Etc..... \$ \_\_\_\_\_

Teaching Supplies..... \$ \_\_\_\_\_

Job Hunting Expense..... \$ \_\_\_\_\_

Job Related Education..... \$ \_\_\_\_\_

Safe Deposit Box..... \$ \_\_\_\_\_

Investment Expenses..... \$ \_\_\_\_\_

Tax Preparation &amp; Consultation..... \$ \_\_\_\_\_

Alimony Paid..... \$ \_\_\_\_\_

IRA (Traditional) - Taxpayer..... \$ \_\_\_\_\_

IRA (Roth) - Taxpayer..... \$ \_\_\_\_\_

IRA (Traditional) - Spouse..... \$ \_\_\_\_\_

IRA (Roth) - Spouse..... \$ \_\_\_\_\_

**CHILD CARE EXPENSES**List provider names, addresses, federal identification  
numbers and amount paid on separate page.**YOU MUST HAVE PROVIDER'S ID # TO FILE!****OTHER ITEMS****ATTACH ALL SUPPORTING DOCUMENTS & DETAILS  
FOR THE FOLLOWING ITEMS:**

\_\_\_\_\_ Employee Business Expense

\_\_\_\_\_ Casualty or Theft Loss

\_\_\_\_\_ Moving Expenses - MILITARY ONLY

**Tax Credit or Deduction for College Tuition & Fees**If you plan to claim a college tuition tax credit or deduction for yourself, your spouse, or dependent(s),  
you must bring all Form 1098-Ts from all colleges and universities attended, AND any  
documents regarding PACT Plans or IRA withdrawals for education purposes.