

Personal Deductions

Unreimbursed Medical Costs

Totals

Doctor Fees		
Prescriptions and Medicines		
Dental Expenses		
Eye Glasses & Hearing Aids		
Health Insurance		
Medicare Premiums		
Long-Term Care Insurance		
Nursing Home Care		
Medical Mileage		

State and Local Taxes

RE Taxes on Primary Res.		
RE Taxes on 2nd Residence		
Personal Property Taxes		
Per Capita Tax		
Occupational or EMS Tax		

Interest Expense

1st Home Mortgage Interest		
2nd Home Mortgage Interest		
3rd Home Mortgage Interest		
Home Equity Loan / Line		
Investment Interest		

Charitable Contributions

Cash Contributions Given		
Charitable Mileage		
Non-Cash Contributions		

** If greater than \$500, please provide name and address of charitable org., as well as a description and value (thrift shop value) of donated items.

Other Itemized Deductions

Unreimbursed Employee Exps.		
Safety Deposit Box Fees		
Tax Preparation Fees		

Other Personal Deductions

College Tuition Paid		
Interest Paid on Student Loans		
Alimony Paid		
Teacher Educator Expenses		
College Savings Contributions		

Child Care Expenses Paid

Provider 1

Provider 2

Care Provider's Name		
Care Provider's Address		
Care Provider's Tax ID #		
Qualifying Child's Name		
Qualifying Exps Paid This Year		

Business Income (Please use a separate worksheet for each business activity.)

Name of business _____
Type of business _____
Business address _____

Incomes

	Totals
Gross Receipts	

Expenses

Advertising	
Automobile Expenses	
Mileage for Auto Expenses	
Bank Charges	
Commissions	
Delivery and Freight	
Dues and Subscriptions	
Employee Benefits	
Gas/Oil for Equipment	
Insurance-not Health	
Interest to Banks	
Interest to Other	
Internet Service Fees	
Job Materials & Supplies	
Labor	
Laundry and Cleaning	
Legal & Professional Fees	
License/Permits Fees	
Meals and Entertainment	
Office Expense	
Outside Services	
Pension/Retirement Plans	
Postage Expense	
Rent of Property	
Rent or Lease of Equipment	
Repairs/Maint. Expense	
Salaries/Wages Expense	
Security Expense	
Supplies Expense	
Payroll Tax Paid	
Real Estate Tax Paid	
Telephone - Landline	
Telephone - Cell Phone	
Tools Expense	
Travel / Lodging Expenses	
Uniforms Expense	
Utilities Expense	
Other (Identify) -	
Other (Identify) -	
Other (Identify) -	

Home Office Information

Square Footage of Home Office	
Total Square Footage of Home	
Home Owners Insurance	
Home Repairs and Maint.	
Home Utilities	

Rental Income

Please use a separate worksheet for each rental property

Property Address _____
of Days Rented _____
of Days of Personal Use _____

Income

Totals

Rents

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Expenses

Advertising		
Association Dues		
Auto Expense		
Mileage for Auto Expense		
Cleaning Expense		
Commissions		
Insurance		
Legal & Professional Fees		
License & Permits		
Management Fees		
Mortgage Interest to Banks		
Mortgage Interest to Other		
Pest Control		
Remodeling Expense		
Repairs & Maintenance		
Supplies		
Real Estate Taxes		
Other Taxes		
Telephone Expense		
Travel Expenses		
Utilities Expense		
Other-		
Other-		
Other-		