



Itemized Deductions Worksheet

1. Medical & Dental Expenses

Did you have medical bills that total to more than 10% of your income?

NOTE: If you are 65+ years old, your medical bills must total to more than 7.5% of your income.

Yes

No ---> Go to section 2.

Category	Amount
Prescriptions, Medicine & Drugs	
Doctors, Dentists & Nurses	
Hospitals & Nursing Homes	
Insurance Premiums	
Long Term Care	
Long Term Care (Spouse)	
Lodging & Transportation	
Medical Miles Driven	
Other Medical & Dental Expenses	

2. Property Taxes

Do you have a car or own a home?

Yes

No ---> Go to section 3.

Question	Amount
Homes: How much did you pay in property taxes ?	
Cars: How much did you pay in DMV fees ?	
Cars: Did you buy a new car ? If so, how much was it?	



3. Mortgage Interest

Do you have a home mortgage(s)?

Yes **No ---> Go to section 4.**

Are you missing a [1098](#) statements for any of your mortgages?

NOTE: If you refinanced or your loan servicer changed this year, you will have additional statements that you did not have last year. Keep an eye out for those.

Yes **No ---> Go to section 4.**

Bank Name	Amount

4. Donations by Cash, Check or Credit Card

Did you donate money cash, check or credit card?

Note: Do not include non-cash donations such as clothes to Goodwill.

Yes **No ---> Go to section 5.**

Organization Name	Amount



5. Non-Cash Donations

Did you donate in clothing, furniture, households, etc?

Note: If your non-cash donations equal more than \$500, please send us the receipt you received from each organization.

Yes

No ---> **Go to section 6.**

Organization Name	Amount

6. Misc Deductions

Question	Amount
How much did you pay to prepare your taxes last year?	
How much did you pay in investment fees/interest ?	
How much did you pay for a safety deposit box ?	

7. Unreimbursed Employee Expenses

As an employee, do you spend money on business related things that your employer **did not reimburse** you for?

Yes

No ---> **Go to section 8.**

Category	Amount
Meals with clients or customers.	
Entertainment with clients or customers.	
Transportation - taxi, train, bus, etc.	
Travel expenses while out-of-town	
Union Dues	

8. Other Unreimbursed Employee Expenses

Are there any other business related things you spend money on that your employer **did not reimburse** you for?

Yes

No ---> **Go to section 9.**

Category	Amount

9. Unreimbursed Business Mileage

Did you put business miles on your car that your employer **did not reimburse** you for?

Yes

No ---> **Go to section 10.**

Vehicle 1	Answer
What make is your car?	
What model is your car?	
What year is your car?	
When did you get the car? (<i>month and year</i>)	
How many total miles did you drive? <i>Commuting + Business + Personal</i>	
How many commuting miles did you drive?	
How many business miles did you drive?	

If you have another car you use for business, please use the table below.

Vehicle 2	Answer
What make is your car?	
What model is your car?	
What year is your car?	
When did you get the car? (<i>month and year</i>)	
How many total miles did you drive? <i>Commuting + Business + Personal</i>	
How many commuting miles did you drive?	
How many business miles did you drive?	

10. Spouse - Unreimbursed Employee Expenses

As an employee, do you spend money on business related things that your employer **did not reimburse** you for?

Yes

No ---> Go to section 11.

Category	Amount
Meals with clients or customers.	
Entertainment with clients or customers.	
Transportation - taxi, train, bus, etc.	
Travel expenses while out-of-town	
Union Dues	

11. Spouse - Other Unreimbursed Employee Expenses

Are there any other business related things you spend money on that your employer **did not reimburse** you for?

Yes

No ---> Go to section 12.

Category	Amount

12. Spouse - Unreimbursed Business Mileage

Are there any other business related things you spend money on that your employer **did not reimburse** you for?

Yes

No ---> **Go to next page.**

Vehicle 1	Answer
What make is your car?	
What model is your car?	
What year is your car?	
When did you get the car? (<i>month and year</i>)	
How many total miles did you drive? <i>Commuting + Business + Personal</i>	
How many commuting miles did you drive?	
How many business miles did you drive?	

If you have an additional car you use for business, please use the tables below.

Vehicle 2	Answer
What make is your car?	
What model is your car?	
What year is your car?	
When did you get the car? (<i>month and year</i>)	
How many total miles did you drive? <i>Commuting + Business + Personal</i>	
How many commuting miles did you drive?	
How many business miles did you drive?	