

ITEMIZED DEDUCTIONS

Taxpayers that do not itemize should still submit real estate tax and vehicle tax amounts

Unreimbursed Medical Expenses	PAID IN 2015	Amount
Doctors, Hospitals & Lab Fees		
Eyeglasses and Contact Lenses		
Hearing Aids		
Prescriptions	Do not include Rx purchased outside of the US	
Convalescent or Nursing Home		
Other Expenses - Explain		
Medical Insurance	Exclude Premiums paid thru Payroll Deductions	
Long-Term Care Insurance - Husband or Self		
Long-Term Care Insurance - Spouse		
Medical Related Mileage	_____ miles	
Notes Provide totals by category, net of insurance reimbursements Do not submit medical bills or receipts Exclude amounts paid thru a Health Savings Account or Medical Savings Account		

Mortgage Interest	Indicate [M] for Mortgage or [E] for Home Equity Loan or Line of Credit or [P] for Points	
Name of Lender	M, E or P	Amount
Notes Attach copy of Form 1098 from lender Report interest paid on mortgages for rental properties on the Rental Worksheet. If points were paid in 2015 on a mortgage refinance, indicate # of years for the new mortgage. _____ Years The interest deduction on Home Equity Loans and Lines of Credit may be limited. Therefore, please indicate below the amount borrowed on such loans and purpose or use of the funds. Amount \$ _____ Purpose _____ Amount \$ _____ Purpose _____		

Real Estate Taxes	Complete info below ONLY if taxes are NOT paid from mortgage escrow account			
NOTE!!! Itemize ALL payments MADE in 2015 ONLY!!!!	Attach copy of EACH tax bill			
Report taxes paid on rental properties on the Rental Worksheet	Do NOT include interest on late payment			
Property Address	City/Town	Check #	Date(s) Paid	Amount

Motor Vehicle Taxes	PAID IN 2015	Do NOT include interest on late payment		
Attach copy of tax bills for all payments made in 2015		Exclude vehicles reported on business use sheet		
Vehicle Year / Make / Model	City/Town	Check #	Date(s) Paid	Amount