

Itemized Deduction (Sch A)

Calculate your total for the entire year for each expense.

Total deductions entered must be more than standard deduction.

Standard Deduction

Head of Household -\$21,900

Single - \$14,600

Married filing Jointly - \$29,200

Medical & Dental Expenses

Medical & Dental expense \$_____ (Total amount must be 7.5% of your adjusted gross income to be considered)

Total Miles driven to your medical and/or dental visits Jan- Dec _____

Home or Vehicle modification for disability \$_____

Taxes you Paid

State & Local Taxes \$_____ Real Estate Taxes \$_____ Other Taxes \$_____

Property Taxes \$_____ Sale Tax (Large Purchase) vehicle, boat, home including mobile, prefabricated or material \$_____

Interest you Paid

Mortgage Interest \$_____ or Points _____

Donations to Charity

Church or Nonprofit Contributions (Cash Contributions Only)

\$ _____

\$ _____

\$ _____

Non-Cash Nonprofit Contributions (Goodwill, United Way, Kidney Foundation, etc.)

Date of donation

(Actual Cash Value) \$ _____

\$ _____

\$ _____

Miles traveled to church _____

Miles traveled to volunteer work _____

Casualty or Theft

Did you experience a casualty or theft loss? \$_____

Miscellaneous Deductions

Gambling Loss (Can not be greater than total winnings filed on this return.) \$_____

Did you experience a personal/business loss? \$_____

Do you have a home office/room exclusively used for business purposes only? ____ *If yes complete back page*

Did you make improvements on home/ (only disability upgrades, solar or energy efficient can be claimed)? \$_____

I consent all information entered on this worksheet is true and to the best of my knowledge.

Signature

Date

Complete next page only if you have a home office used exclusively for business.

Business Use of Home

Complete only if you use a portion of your home exclusively for business.

Part of Your Home Used for Business

Area of home used for business _____ square foot square foot

Total area of home _____ square foot

Expenses

Casualty losses _____

Deductible mortgage interest _____

Real estate taxes _____

Excess mortgage interest _____

Insurance _____

Rent _____

Repairs and maintenance _____

Utilities _____

Other expenses _____

Depreciation of Your Home

Cost of Home _____

Year of purchase _____