

Taxpayer:

2016 Personal Itemized Deductions Worksheet

Medical and Dental Expenses

_____ Miles Traveled for Medical
 \$ _____ Doctors and Dentists
 \$ _____ Hospitals and Labs
 \$ _____ Medical Supplies and Eyeglasses
 \$ _____ Prescription
 \$ _____ Insurance Premiums (out of pocket)
 \$ _____ Long term Care
 \$ _____ Expenses to Stop Smoking

Taxes Paid

\$ _____ Real Estate Taxes
 \$ _____ DMV Registration
 \$ _____ Property Taxes
 \$ _____ Other Taxes
 \$ _____ Sales Taxes on New Motor Vehicle

Interest Paid

\$ _____ Home Mortgage
 \$ _____ Home Equity Line
 \$ _____ Mortgage Insurance
 \$ _____ Student Loan Interest

Homeowner Information **Provide copy of HUD Settlement Statement*

Original Purchase Date: _____ Purchase Price: _____

 Do you have Equity in your home? Yes No

 Did you refinance your home? Yes No

 Did you make any improvements to the home? Yes No

If yes, describe: _____

Payoff Balance on Mortgage: _____

Loan Number: _____ Lender: _____

Miscellaneous Deductions

\$ _____ Educator Expenses
 \$ _____ Investment Expenses
 \$ _____ Tax Preparation Fees
 \$ _____ Union Dues
 \$ _____ Job Search Costs
 \$ _____ Safe Deposit Box Rental

Gambling

\$ _____ Total Winnings (including W2G's received)
 \$ _____ Total Losses for Year
 _____ Gambling Wksht Attached

Child and Dependent Care

Amount Spent: _____

Child Care Provider Name & Address: _____

Social Security Number / EIN: _____

 Do you pay a housekeeper? Yes No

Moving - Personal Expenses to Move more than 50 miles

Total miles from your previous home to your new workplace: _____

Transportation and Storage of Goods \$ _____

Travel and Lodging to move \$ _____

Does your employer have a reimbursement policy? Yes No

Did you receive reimbursement for any expenses? Yes No

Unreimbursed Employee Business Expenses

(For W-2 Employment)

\$ _____ Business Gifts
 \$ _____ Meals and Entertainment
 \$ _____ Commissions and Fees
 \$ _____ Computer and Internet Expenses
 \$ _____ Insurance (other than Health)
 \$ _____ Interest Expense
 \$ _____ Legal and Professional Services
 \$ _____ Office Supplies and Expenses
 \$ _____ Postage and Printing
 \$ _____ Repairs and Maintenance
 \$ _____ Sales and Promotion (include Website)
 \$ _____ Subscriptions
 \$ _____ Supplies
 \$ _____ Taxes, Licenses and Permits
 \$ _____ Telephone Expense
 \$ _____ Transportation (Parking, Fees and Tolls)
 \$ _____ Travel and Lodging (include Car Rental)
 \$ _____ Uniform and Protective Clothing
 \$ _____ Other: _____

Business Auto Expense

Make and Model of Vehicle _____

Date Auto Began Business Use _____

_____ Number of Business Miles (addl biz driving)

_____ Total Commuting Miles (to job from home)

_____ Total Miles Driven For the Year

_____ Odometer Reading Beginning as of _____

_____ Odometer Reading Ending as of _____

\$ _____ Total Fuel Expenses

\$ _____ Total Auto Insurance Paid

\$ _____ Total Auto Lease Paid

\$ _____ Total Auto Repairs Paid

\$ _____ Total Auto Purchase Price

\$ _____ Total Auto Loan Interest

Business Use of Home

_____ Square Footage of Home

_____ Square Footage of Area used for Business

\$ _____ Rent Expense

\$ _____ Utilities

\$ _____ Repairs and Maintenance

\$ _____ Home Insurance