

ITEMIZED DEDUCTIONS WORKSHEET

NAME _____

YEAR _____

You can itemize if your expenses exceed the standard deduction:

Single - \$5800, Married filing joint - \$11600, Head of Household - \$8500

MEDICAL & DENTAL (Expenses must exceed 7.5% of adjusted gross income)

Prescription medicines, drugs & insulin _____

Doctors, dentists, nurses, hospitals _____

Insurance premiums _____

Transportation for medical care - From 1/1/11 - 6/30/11: miles X .19 _____

From 7/1/11 - 12/31/11: miles X .235 _____

Lodging for medical care _____

Other: (hearing aids, dentures, eyeglasses, air conditioners, & air purifiers purchased for
Medical reasons) _____

TAXES

Sales Tax Paid on large purchases (vehicle, boat etc....) _____

Estimated state & local income taxes paid in 2011 for 2011. _____

Balance of state & local income tax paid in 2012 for 2011. _____

School, county, & local real estate tax _____

Personal property tax _____

Other taxes: Description _____

INTEREST PAID

Home mortgages - bank _____

Home mortgage - individual (SS # _____ - _____ - _____) _____

Name _____ Address _____

Points not reported to you on Form 1098 & paid in 2011 _____

Home equity loan _____

Interest paid to maintain investments _____

CONTRIBUTIONS

Cash or check contributions (church, United Fund, etc.) _____
(For a single gift of \$250 or more you must have signed receipt)

Other than cash (used clothing, Red Cross, Little League, food donations to tax exempt
organizations: fire co. boy scouts, etc.) _____

(If "Other than Cash" exceeds \$500, list items and dollar value).

(OVER PLEASE)

Travel for charitable work (boy scouts, Little League, church, etc.)
of miles for above _____ X .14 _____

CASUALTY & THEFT

Losses NOT covered by insurance coverage _____

MOVING EXPENSES

miles from old home to old job _____, # miles from old home to new job _____

(If the difference is more than 50 mi. you can deduct moving expenses)

Actual moving expenses (transporting, etc.) _____

MISCELLANEOUS DEDUCTIONS (Subject to a 2% limitation)

Union Dues _____

Professional Dues & Licenses _____

Professional Books or Subscriptions _____

Continuing Education _____

Books & Supplies to keep tax records _____

Tax return preparation fee _____

Mileage to tax preparer _____

Safe Deposit Box _____

Work Uniforms _____

Launder Uniforms _____

Work Tools (scissors, flashlights, etc.) _____

Safety Equipment (shoes, gloves, glasses, etc.) _____

EMPLOYEE BUSINESS EXPENSES

Miles traveled in your auto for your company not reimbursed _____

Miles traveled from your Job #1 to Job #2 _____

Miles traveled to temporary jobs over 35 miles one way _____

Lodging expenses NOT reimbursed for temporary job _____

Meals NOT reimbursed for temporary job. Actual cost \$ _____ No. of days _____

SALESMAN - OTHER EXPENSES

WHAT

AMOUNT

WHAT

AMOUNT
