

## Itemized Deductions

<b>Name:</b>		<b>SSN:</b>			
<b>MEDICAL and DENTAL</b>					
	<b>2014</b>	<b>2013</b>	<b>GIFTS TO CHARITY</b> (attach receipts)	<b>2014</b>	<b>2013</b>
Health insurance premiums			Total gifts by cash or check		
Long term care premiums    Age:			30% limitation		
Long term care premiums    Age:			Charitable miles		
Number of medical miles			Other than by cash or check		
Other medical and dental expenses (list):			Carryover from prior year subject to:		
			QCC - qualified farmer or rancher		
			QCC - non-qualified farmer or rancher		
			50% limitation		
			30% limitation		
			30% limitation capital gain property		
			20% limitation		
<b>TAXES YOU PAID</b>					
State and local income taxes			<b>JOB EXPENSES</b> (list):		
Sales tax			Unreimbursed employee expenses		
Real estate taxes					
Taxes that qualify for State Property Tax Credit					
Personal property taxes					
Other taxes (list):					
<b>INTEREST YOU PAID</b>					
Home mortgage interest and points on Form 1098					
Home mortgage interest not on Form 1098			Tax preparation fees		
SSN/EIN:			Other Expense (list):		
Name:					
Street:					
City:					
<b>U.S. Only</b> State, ZIP					
<b>Foreign Only</b> Province/State, Country, Postal Code			<b>MISCELLANEOUS DEDUCTIONS</b>		
			Other deductions not subject to 2% limit		
Portion of mortgage interest above that is home equity interest					
Points not reported on Form 1098					
Qualified mortgage insurance premiums					
Investment interest					