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POSSIBLE LEGAL DEDUCTIONS

List amounts for items you have – Keep receipts for your deductions

**Medical/Dental/Vision Insurance:**

Medical/Dental insurance………….. $\_\_\_\_\_

Vision Insurance……………….……….. $\_\_\_\_\_

Long Term care insurance…………. $\_\_\_\_\_

**Out of pocket health expenses:**

Dr. Visits/Co-Pay…......……………….. $\_\_\_\_\_

Dental/Vision/Medical………………. $\_\_\_\_\_

Hospital & Emergency……………….. $\_\_\_\_\_

Operations………………………………… $\_\_\_\_\_

Prescription Drugs…………………….. $\_\_\_\_\_

Labs & X-ray……………………………... $\_\_\_\_\_

Visiting Nurses………………………….. $\_\_\_\_\_

In-home care…………………………….. $\_\_\_\_\_

Dentures/Braces……………………….. $\_\_\_\_\_

Glasses, Contacts & supplies…….. $\_\_\_\_\_

Hearing Aids & Batteries…………… $\_\_\_\_\_

Orthopedic shoes……………………… $\_\_\_\_\_

Therapy treatment……………………. $\_\_\_\_\_

Canes/Crutches/Braces……………... $\_\_\_\_\_

Wheelchairs……………………………… $\_\_\_\_\_

**On Doctors Advise:**

Air conditioning…………………………. $\_\_\_\_\_

Vaporizers…………………………………. $\_\_\_\_\_

Thermometers/Bandages………….. $\_\_\_\_\_

Other………………………………………… $\_\_\_\_\_

Medical miles driven………………… $\_\_\_\_\_

Medical Transportation…………….. $\_\_\_\_\_

**Real Estate/Taxes you paid:**

Home real estate……………………… $\_\_\_\_\_

Rental property………………………… $\_\_\_\_\_

Personal property……………………… $\_\_\_\_\_

State income Tax………………………. $\_\_\_\_\_

**Interest Paid:**

Home Mortgage Interest……………. $\_\_\_\_\_

2nd Mortgage/Home Equity……….. $\_\_\_\_\_

2nd Home/Rental………………………... $\_\_\_\_\_

Home Mortgage to Individual…….. $\_\_\_\_\_

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SSN:\_\_\_\_\_\_\_\_\_\_

Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Points Paid at Closing…………………. $\_\_\_\_\_

Investment Interest……………………. $\_\_\_\_\_

Tax preparation fee (prior year)…. $\_\_\_\_\_

**Contributions/Gifts to Charity:**

Church (if you give a certain % then put that %/amount)…. …………………………….. $\_\_\_\_\_

College………………………………………. $\_\_\_\_\_

United Way March of Dimes……… $\_\_\_\_\_

CFC……………………………………………. $\_\_\_\_\_

Other contributions…………………… $\_\_\_\_\_

Value of clothing or furniture…….. $\_\_\_\_\_

Given to….\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Volunteer work expense……………. $\_\_\_\_\_

Auto miles driven….\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Child care Information:**

Daycare/Person’s name

Daycare/Person Address

Daycare/Person EIN/SSN

Amount Paid to Daycare/Person… $\_\_\_\_\_

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**\*\*\*\*Must meet these qualifications to fill out the section below\*\*\*\***

***-Qualifications to claim expenses-***

-Qualified performing artist

-Fee based state or local government official

-Impairment related work expenses

-Armed forces reservist (travel related expenses only)

**Miscellaneous and Employee Business Expenses:**

Uniform cleaning………………………. $\_\_\_\_\_

Work Tools……………………….......... $\_\_\_\_\_

Union Dues………………………………. $\_\_\_\_\_

Safety Shoes & Gloves……………… $\_\_\_\_\_

Safe Deposit Box………………………. $\_\_\_\_\_

Investment Expenses……………..… $\_\_\_\_\_

Business Travel………………… ……… $\_\_\_\_\_

Job seeking fees………………..…….. $\_\_\_\_\_

Sales/Entertainment………............ $\_\_\_\_\_

Office-in-home Expenses………….. $\_\_\_\_\_

Out of Town/Temporary…………... $\_\_\_\_\_

Vehicle use (miles) for work not

Commute….\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Other Expenses:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Self Employed Business Expenses:**

Advertising………………………………… $\_\_\_\_\_

Use of car/truck mile\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Make/Year of vehicle\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Total amount of oil

Changes/Cost\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_

Tolls/EZ Tag expenses………………… $\_\_\_\_\_

Cell phone expenses…………………. $\_\_\_\_\_

Other vehicle expenses……………… $\_\_\_\_\_

Commission and fees………………… $\_\_\_\_\_

Contract Labor…………………………. $\_\_\_\_\_

Depletion…………………………………… $\_\_\_\_\_

Depreciation……………………………… $\_\_\_\_\_

Insurance………………………………… $\_\_\_\_\_

Interest/Mortgage…………………… $\_\_\_\_\_

Interest/other.................................$\_\_\_\_\_

Legal and professional services……$\_\_\_\_\_

Office Expenses……………………………$\_\_\_\_\_

Rent-Vehicle-Machinery……………. $\_\_\_\_\_

Rent-Other………………………………… $\_\_\_\_\_

Repairs/Maintenance………………… $\_\_\_\_\_

Supplies…………………………………….. $\_\_\_\_\_

Taxes & License…………………………. $\_\_\_\_\_

Travel……………………………………….. $\_\_\_\_\_

Meals……………………………………….. $\_\_\_\_\_

Utilities…………………………………….. $\_\_\_\_\_

Wages………………………………………. $\_\_\_\_\_

**Other Expenses:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_