



SCHEDULE A WORKSHEET
ITEMIZED DEDUCTIONS

MEDICAL EXPENSES PAID	AMOUNT
Insurance Premiums (Health, Dental, & Cancer)	
Long Term Care Insurance Premiums	
Medical Expenses	
Prescriptions	
Dental Expenses	
Vision & Eye Care Expenses	
Chiropractor	
Medical Miles: Taxpayer	
Medical Miles: Spouse	

TAXES PAID	AMOUNT
State & Local Taxes	
Real Estate Taxes (Home)	
Real Estate Taxes (Other)	
Vehicle Registration	
Other:	

INTEREST PAID	AMOUNT
Mortgage Interest & Points (Form 1098)	
Mortgage Interest Paid to an Individual <ul style="list-style-type: none"> • Individual's Name: • Individual's Address: • Individual's I.D. Number: 	
Mortgage Insurance Premiums	
Points Not Reported on Form 1098	
Investment Interest	

GIFTS TO CHARITY	AMOUNT
Cash Contributions (Examples: Church, United Way, Red Cross, ASPCA, St. Judes)	
Other than Cash Contributions (Examples: Goodwill, St. Vincent DePaul, EasterSeals)	
Charitable Miles: Taxpayer	
Charitable Miles: Spouse	

CASUALTY & THEFT LOSSES	AMOUNT
Must be in a Federally Declared Disaster Area to Qualify	

OTHER MISC. DEDUCTIONS	AMOUNT
Gambling Losses Up to the Amount of Winnings	