

# Itemized Deductions- Schedule A

## Medical

Medical and Dental: \$
Insurance Premiums (excluding Social Security Medicare): \$
Prescriptions and Medications:
Long Term Care Premiums:
Medical Miles Driven:

State and Local Taxes: Other than what is on W2 or 1099s: \$

Qualified vehicle taxes: \$

Home and Mortgage (please provide a 1098 from your lender)

1098 from lender
Interest paid

Did you pay any points?

Charitable Contributions: If over \$500, please be prepared to provide details for the organization.

Organization	How much	Date

Non Cash Contributions:

Organization	What was Donated	Date

1. Please be advised that the standard deduction changes each year, and depending on circumstance. The standard deduction may be more advantageous in your situation, but this will be communicated with you before the tax return is filed.

Is there any additional information or questions pertaining to itemized deductions that you would like your preparer to discuss with you?

I verify that this form is accurate and complete to the best of my knowledge

X

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

QUANTEE TAXES

