



# Non-Business Deductions

△ Joint Filers: Except where noted, please combine your expenses on this worksheet.

**Please round all amounts to the NEAREST \$1.00.**

(For example, enter \$42 for a deduction of \$42.49. Enter \$43 for a deduction of \$42.50)

Name:

Tax Year:

## Adjustments & Credits

<b>IRA Contributions</b> <i>(not 401K / 403B, etc.)</i>	Taxpayer: \$	<input type="checkbox"/> Traditional	Spouse: \$	<input type="checkbox"/> Traditional
		<input type="checkbox"/> Roth		<input type="checkbox"/> Roth
<b>Education Expenses</b>	<b>Tuition:</b> Please provide Form(s) 1098-T		<b>529 Plan Contributions:</b>	
	<b>Student Loan Interest:</b> Provide Form(s) 1098-E		\$	
<b>Child &amp; Dependent Care Expenses</b> <i>(Both spouses must have worked and/or attended school.)</i>	Third Party Provider:		Provider EIN/SSN:	
	Provider Address:			
	Child Name:		Expense: \$	

## Non-Business Itemized Deductions

<b>Medical Expenses</b> <i>(see also Health Insurance Worksheet)</i>	\$ <i>Total <b>unreimbursed</b> cost of doctors, dentists, perscriptions, eyeglasses, medical equipment, etc.</i>			
	Medical Insurance Premiums: \$			
<b>Taxes &amp; Interest Paid</b> <i>Provide 1098(s) for mortgage interest.</i>	Real Estate Tax <i>(If not on 1098):</i> \$			
	State Taxes: \$ <i>Balances due paid with any state tax returns filed last year - <u>not</u> from W2s</i>			
<b>Charitable Donations</b>	Cash/Check: \$		*Non-Cash: \$	
	<i>*Non-Cash means clothing, furniture, etc. @ <b>resale</b> value, not original value. \$500 limit on non-cash donations: if higher, please provide receipts with donee name &amp; address.</i>			
<b>Prior Year Tax Preparation Fees</b>	\$			

## Quarterly Estimated Taxes Paid *(Not from W2 withholding)*

Federal			State:		
	Date Paid	Amount		Date Paid	Amount
1st Quarter		\$	1st Quarter		\$
2nd Quarter		\$	2nd Quarter		\$
3rd Quarter		\$	3rd Quarter		\$
4th Quarter		\$	4th Quarter		\$