

Itemized Deductions Worksheet



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Itemized deductions (List amounts and provide receipts, checks, bank statements or other documentation)			
MEDICAL/DENTAL EXPENSES		INTEREST PAID	
Medical Insurance (<i>paid by you</i>)		Mortgage on Main Home	
Dental Insurance (<i>paid by you</i>)		Paid to Financial Institution (1098)	
Long Term Care Insurance		Paid to Individual	
Doctors (<i>co-pays</i>)		Name:	SSN:
Dentist/Orthodontist (<i>Braces, etc.</i>)		Address:	
Prescription Drugs (<i>Enclose Pharmacy Report</i>)		Points Paid on New Mortgage (<i>Enclose Settlement Statement-HUD-1</i>)	
Glasses and Contact Lenses		Home Equity Loan/Second Mortgage	
Hospitals & Emergency Visits		Mortgage on Second Home	
Surgical Procedure		Paid to Financial Institution (1098)	
Medical Equipment Rental		Paid to Individual	
Skilled Nursing Care		Name:	
Prescribed Physical Aids		Address:	
Medicare Part B		Investment Interest paid	
Other Medical Professionals			
Other Medical (Describe)			
Medical Transportation			
Medical Miles Driven in your Vehicle		CHARITABLE CONTRIBUTIONS	
		(Receipt required for single donations of \$250.00 or more.)	
		Church/Temple/Mosque	
		United Way	
		Scouts	
		Other (list)	
STATE & LOCAL TAXES		MISCELLANEOUS DEDUCTIONS	
Home Real Estate Taxes		Tax Return Preparation Fee (2021)	
Other Real Estate Taxes		Safe Deposit Box (store investments)	
Personal Property Tax (autos, boat)		Investment Expense (enclose list)	
Other State or Local Tax		Job Hunting Expenses (enclose list)	
CASUALTY OR THEFT LOSS (<i>For natural disasters only</i>)		(If \$500.00 or more, enclosed receipt with name and address of organization and describe how the fair market value was determined)	
Type of Property:		Gambling Losses	
Describe Loss:		Prof Association or Union Dues	
Cost or Basis of Property			
Insurance Reimbursement			
Fair Market Value Before Loss			
Fair Market Value After Loss			