

Please enter all pertinent 2011 amounts and attach all 1098 forms.  
Last year's amounts are provided for your reference.

**MEDICAL AND DENTAL EXPENSES**

NOTE: Enter self-employed health insurance premiums on Sheet 24 and Medicare insurance premiums on Sheet 14.

	2011 Amount	TS	2010 Amount
Prescription medicines and drugs.....			
Doctors, dentists and nurses.....			
Hospitals and nursing homes.....			
Insurance premiums not entered elsewhere (excl. LT care & amts. paid w/pre-tax dollars) .			
Long-term care premiums - taxpayer.....			
Long-term care premiums - spouse.....			
Insurance reimbursement (enter as a positive number).....			
Lodging and transportation:			
Out-of-pocket expenses.....			
Medical miles driven (1/1/11 - 6/30/11).....			
Medical miles driven (7/1/11 - 12/31/11).....			
Other medical and dental expenses:			
_____			
_____			
_____			

**TAXES PAID** (State and local withholding and 2011 estimates are automatic.)

State income taxes - 1/11 payment on 2010 state estimate.....			
State income taxes - paid with 2010 state extension.....			
State income taxes - paid with 2010 state return.....			
State income taxes - paid for prior years and/or to other state.....			
City/local income taxes - 1/11 payment on 2010 city/local estimate.....			
City/local income taxes - paid with 2010 city/local extension.....			
City/local income taxes - paid with 2010 city/local return.....			

**SALES AND USE TAXES PAID**

State and local sales taxes (except autos and special items).....			
Use taxes paid on 2011 purchases.....			
Use taxes paid with 2010 state return.....			
Sales tax on autos not included above.....			
Sales tax on boats, aircraft, other special items.....			

**OTHER TAXES PAID**

Real estate taxes - principal residence:			
_____			
_____			
_____			
Real estate taxes - property held for investment.....			
Personal property taxes (including auto fees in some states. Provide a copy of tax notice) . .			
Foreign income taxes.....			
Other taxes:			
_____			
_____			
_____			

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**INTEREST PAID**

Home mortgage int. (Box 1) and points (Box 2) reported on Form 1098:

2011 Amount

TS

2010 Amount

_____		
_____		
_____		

Home mortgage interest not reported on Form 1098:

Payee's name . . . . .

Payee's SSN or FEIN . . . . .

Payee's street address . . . . .

Payee's city, state, ZIP . . . . .

Amount paid . . . . .

_____		
_____		
_____		
_____		

Points not reported on Form 1098:

_____		
_____		
_____		

Mortgage insurance premiums on post 12/31/06 contracts (Box 4) . . . . .

Investment interest (interest on margin accounts):

_____		
_____		
_____		

Passive interest . . . . .

Certain home mortgage interest included above (6251) . . . . .


NOTE: Points paid on loans other than to buy, build, or improve your main home are deductible over the life of the mortgage. For these types of loans also provide the dates and lives of the loans.

**CASH CONTRIBUTIONS**

NOTE: No deduction is allowed for cash or check contributions unless the donor maintains a bank record, or a written communication from the donee, showing the name of the organization, contribution date(s), and contribution amount(s).

Churches, schools, hospitals, and other charitable organizations (50% limitation):

Contributions by cash or check:

_____		
_____		
_____		
_____		

Volunteer expenses (out-of-pocket) . . . . .

Number of charitable miles . . . . .


Veterans' organizations, fraternal societies, nonprofit cemeteries, and certain private nonoperating foundations (30% limitation):

Contributions by cash or check:

_____		
_____		
_____		
_____		

Volunteer expenses (out-of-pocket) . . . . .

Number of charitable miles . . . . .


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**NONCASH CONTRIBUTIONS**

NOTE: Use Sheet 26 if total noncash contributions are over \$500. No deduction is allowed for contributions of clothing and household items that are not in *good* used condition or better. In addition, a deduction for any item with minimal monetary value may be denied.

50% limitation (see above):

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

2011 Amount	TS	2010 Amount

30% limitation (see above):

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


30% capital gain property (gifts of capital gain property to 50% limit orgs.):

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


20% capital gain property (gifts of capital gain property to non-50% limit orgs.):

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


**MISCELLANEOUS DEDUCTIONS** (subject to 2% AGI limit)

Union and professional dues .....

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Other unreimbursed employee expenses (uniforms and protective clothing, professional subscriptions, employment agency fees, and certain edu. expenses):

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


Investment expense:

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


Tax return preparation fee .....

Safe deposit box rental .....

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Miscellaneous deductions (2% AGI) (certain legal and accounting fees, and custodial fees):

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


