Schedule A - Itemized Deductions

| Name: | | SSN: |
|---|---------|--|
| Medical and Dental Expenses | | Charitable Contributions |
| Long-term care premiums (you) Long-term care premiums (your spouse) Long-term care premiums (dependents) Mileage driven for medical purposes Medical and dental expenses (list) | | Donations to charity (cash) |
| Taxes Paid State and local income taxes | | Job Expenses & Certain Misc. Deductions Necessary job expenses you paid that were not reimbursed by your employer (list) Tax preparation fees Other nonpersonal expenses related to taxable income (list) |
| Personal property taxes | | Investment expenses not entered elsewhere |
| Mortgage interest paid (attach Form 1098) Mortgage interest paid to an individual Paid to: Name | | Other Misc. Deductions Amortizable bond premiums |
| Address City, State, ZIP SSN or EIN Qualified mortgage insurance premiums Investment interest | | Impairment-related work expenses . Claim repayments Unrecovered pension investments . Schedule K-1 Ordinary loss debt instrument . |
| | <u></u> | Ordinary 1000 dept monument . |