

Other Information

Name: _____

SSN: _____

Mortgage Interest

Attach all copies of Form 1098

Lender's name	2016 Mortgage Interest Received	2015 Mortgage Interest Received	2016 Mortgage Insurance Premiums	2015 Mortgage Insurance Premiums	2016 Real Estate Taxes Paid	2015 Real Estate Taxes Paid
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

Employee Business Expenses

	NOT reimbursed by your employer		Reimbursed by your employer not included on your W-2	
	2016	2015	2016	2015
Rural mail carrier expenses	_____	_____	_____	_____
Parking fees, tolls, local transportation	_____	_____	_____	_____
Meals & entertainment	_____	_____	_____	_____
Overnight business travel expenses (Do not include meals & entertainment)	_____	_____	_____	_____
Other business expenses	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

- You used your personal vehicle for your job during 2016
- You are a reservist
- You are a qualified performing artist
- You are a member of the clergy
- You are a fee-based state or local government official
- You are a disabled employee with impairment-related work expenses

Casualties and Thefts

Property description _____	Property description _____
Property location _____	Property location _____
Date property was damaged or stolen _____	Date property was damaged or stolen _____
Cost of property damaged or stolen _____	Cost of property damaged or stolen _____
Amount of damage _____	Amount of damage _____
Insurance reimbursement _____	Insurance reimbursement _____

Other Information

Name: _____

SSN: _____

Child and Other Dependent Care Expenses

Name of care provider	Address	SSN or EIN	Amount Paid

Education Expenses

Attach all copies of Form 1098-T

Student Name _____ Student Name _____

Type of Expense	Amount	Type of Expense	Amount

Student Name _____ Student Name _____

Type of Expense	Amount	Type of Expense	Amount