DEDUCTIONS AND ADJUSTMENTS CHECKLIST

Itemized Deductions

Med	dical:
	Chiropractic care
	Eyeglasses and contacts purchased
	Fertility treatments
	Hearing aids
	Lodging related to medical appointments
	Long-term care insurance premiums
	Medical insurance paid (post tax, not employer-sponsored)
	Mileage to medical appointments
	Nursing home payments
	Payments for eye exams
	Payments for in-home health care
	Payments for prescribed medical equipment
	Payments to the dental office
	Payments to the doctor's office
	Payments to the hospital
	Prescriptions purchased
	Psychological care
	Service animal and related costs
Cha	rity:
	Cash contributions
	Charitable travel expenses
	Mileage to charitable events or actual expenses
	Non-cash contributions
	Uniforms that can only be worn for volunteer work
	Unreimbursed expenses related to volunteer work
Inte	erest:
	Home equity debt interest (certain stipulations apply)
	Home mortgage interest
	Mortgage insurance premiums (PMI)
	Mortgage interest for a second home
	Refinanced debt interest
Tax	es:
	Personal property taxes paid
	Real estate taxes paid
	State sales tax paid (can only be taken if not taking state taxes paid in prior year
	State taxes paid with last year's tax return
ner	Deductions and Adjustments to Income
	Alimoney paid (certain stipulations apply)
	HSA contributions (post tax, not employer matching)
	IRA contributions (Traditional)
	Student loan interest paid