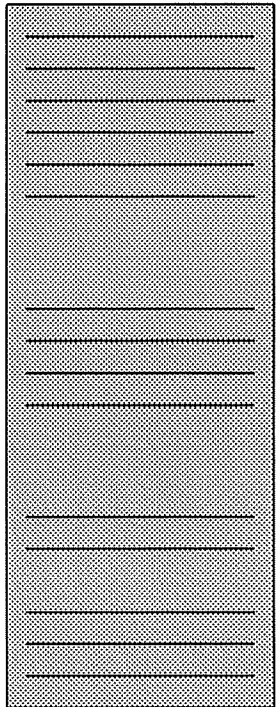


T/S/J

2022 Information

Prior Year Information

Medical and dental expenses, such as: Doctors, Dentists, Hospital/nursing home fees, Lab/x-ray fees, Medical supplies, Hearing aids, Eyeglasses/contact lenses, and Insurance reimbursements received

__ [1]	_____	+ _____ [2]	
__	_____	+ _____	
__	_____	+ _____	
__	_____	+ _____	
__	_____	+ _____	
__	_____	+ _____	

Medical insurance premiums you paid:

Do not include pre-tax amounts paid by an employer-sponsored plan or amounts entered elsewhere, such as amounts paid for your self-employed business (Sch C, Sch F, Sch K-1, etc.) or Medicare premiums entered on Form SSA-1099.

__ [4]	_____	+ _____ [5]
__	_____	+ _____
__	_____	+ _____
__	_____	+ _____

Long-term care premiums you paid:

Do not include pre-tax amounts paid by an employer-sponsored plan or amounts entered elsewhere, such as amounts paid for your self-employed business (Sch C, Sch F, Sch K-1, etc.)

__ [7]	_____	+ _____ [8]
__	_____	+ _____

Prescription medicines and drugs:

__ [10]	_____	+ _____ [11]
__	_____	+ _____
__	_____	+ _____

__ [13]	Miles driven for medical items (1/1/22 - 6/30/22, 18 cents)	_____ [14]
---------	---	------------

__ [16]	Miles driven for medical items (7/1/22 - 12/31/22, 22 cents)	_____ [17]
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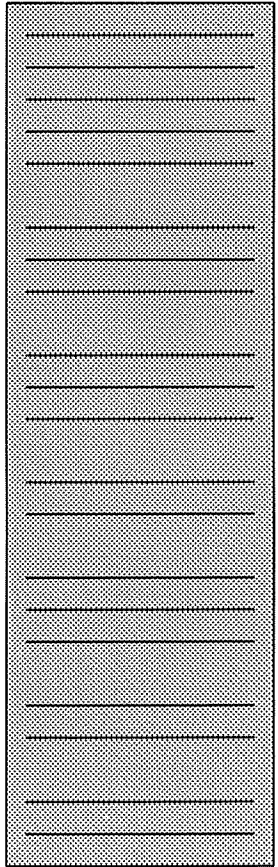
### Schedule A - Tax Expenses

T/S/J

2022 Information

Prior Year Information

State/local income taxes paid:

__ [18]	_____	+ _____ [19]	
__	_____	+ _____	
__	_____	+ _____	
__	_____	+ _____	
__	_____	+ _____	
__	_____	+ _____	

2021 state and local income taxes paid in 2022:

__ [21]	_____	+ _____ [22]
__	_____	+ _____
__	_____	+ _____

Real estate taxes paid:

__ [24]	_____	+ _____ [25]
__	_____	+ _____
__	_____	+ _____

Personal property taxes:

__ [27]	_____	+ _____ [28]
__	_____	+ _____

Other taxes, such as: foreign taxes and State disability taxes

__ [30]	_____	+ _____ [31]
__	_____	+ _____
__	_____	+ _____

Sales tax paid on major purchases:

__ [36]	_____	+ _____ [37]
__	_____	+ _____

Sales tax paid on actual expenses:

__ [39]	_____	+ _____ [40]
__	_____	+ _____
__	_____	+ _____

Control Totals +

T/S/J	2022 Interest Paid <sup>2)</sup>	2022 Points Paid	Type*	Prior Year Information
[1]				

**\*Mortgage Types**

Blank = Used to buy, build or improve main/qualified second home    1 = Not used to buy, build, improve home or investment

T/S/J	Payee's Name	SSN or EIN	2022 Information	Prior Year Information
[4]	Other, such as: Home mortgage interest paid to individuals		[5]	
	Address			
	City, state and zip code			
	Address			
	City, state and zip code			

**T/S/J Name and address of other person who received Form 1098 for jointly liable mortgage interest you paid -**

— Payer's/Borrower's name \_\_\_\_\_ [7]  
 — Street Address \_\_\_\_\_  
 — City/State/Zip code \_\_\_\_\_

**Refinancing Points paid in 2022 -**

Taxpayer/Spouse/Joint (T, S, J) \_\_\_\_\_ [11]  
 Recipient/Lender name \_\_\_\_\_  
 Total points paid at time of refinance \_\_\_\_\_  
 Points deemed as paid in 2022 (Preparer use only) + \_\_\_\_\_ [12]  
 Date of refinance \_\_\_\_\_  
 Term of new loan (in months) \_\_\_\_\_  
 Reported on Form 1098 in 2022 \_\_\_\_\_

Taxpayer/Spouse/Joint (T, S, J) \_\_\_\_\_  
 Recipient/Lender name \_\_\_\_\_  
 Total points paid at time of refinance \_\_\_\_\_  
 Points deemed as paid in 2022 (Preparer use only) + \_\_\_\_\_  
 Date of refinance \_\_\_\_\_  
 Term of new loan (in months) \_\_\_\_\_  
 Reported on Form 1098 in 2022 \_\_\_\_\_

T/S/J	2022 Information	Prior Year Information
[15]		[16]

## Charitable Contributions

**T/S/J**

**2022 Information**

**Prior Year Information**

Contributions made by cash or check (including out-of-pocket expenses)

*Any contribution of cash, a check or other monetary gift requires a written record of the contribution in order to claim the contribution on your return.*

*Individual contributions of \$250 or more must be accompanied by a written acknowledgment from the charity to claim the contribution on your return.*

\_\_ [2] \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

+ \_\_\_\_\_ [3]

+

+

+

+

+

+

+

+

+

+

+

+

+

\_\_ [5] Volunteer miles driven \_\_\_\_\_ [6]

Noncash items, such as: Goodwill/Salvation Army/clothing/household goods

\_\_ [8] \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

+ \_\_\_\_\_ [9]

+

+

+

+

+

+

+

+

+

+

+

## Miscellaneous Deductions

**T/S/J**

**2022 Information**

**Prior Year Information**

Other expenses

\_\_ [12] \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

+ \_\_\_\_\_ [13]

+

+

+

+

+

Gambling losses: (Enter only if you have gambling income)

\_\_ [15] \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

+ \_\_\_\_\_ [16]

+

+

**NOTES/QUESTIONS:**