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Saline County Employees

W-2 Wage Earner Tax Tips Seminar

January 16, 2014

For the year Jan. 1–Dec. 31, 2013, or other tax year beginning , 2013, ending , 20
Your first name and initial Last name Your social security number
If a joint return, spouse's first name and initial Last name Spouse's social security number
Home address (number and street). If you have a P.O. box, see instructions. Apt. no.
City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below (see instructions).
Foreign country name Foreign province/state/county Foreign postal code
Presidential Election Campaign
Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund. You Spouse

Filing Status
1 Single
2 Married filing jointly (even if only one had income)
3 Married filing separately. Enter spouse's SSN above and full name here.
4 Head of household (with qualifying person). (See instructions.) If the qualifying person is a child but not your dependent, enter this child's name here.
5 Qualifying widow(er) with dependent child

Exemptions
6a Yourself. If someone can claim you as a dependent, do not check box 6a.
b Spouse
c Dependents:
(1) First name Last name (2) Dependent's social security number (3) Dependent's relationship to you (4) if child under age 17 qualifying for child tax credit (see instructions)
If more than four dependents, see instructions and check here
d Total number of exemptions claimed

Income
7 Wages, salaries, tips, etc. Attach Form(s) W-2
8a Taxable interest. Attach Schedule B if required
8b Tax-exempt interest. Do not include on line 8a
9a Ordinary dividends. Attach Schedule B if required
9b Qualified dividends
10 Taxable refunds, credits, or offsets of state and local income taxes
11 Alimony received
12 Business income or (loss). Attach Schedule C or C-EZ
13 Capital gain or (loss). Attach Schedule D if required. If not required, check here
14 Other gains or (losses). Attach Form 4797
15a IRA distributions
15b Taxable amount
16a Pensions and annuities
16b Taxable amount
17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E
18 Farm income or (loss). Attach Schedule F
19 Unemployment compensation
20a Social security benefits
20b Taxable amount
21 Other income. List type and amount
22 Combine the amounts in the far right column for lines 7 through 21. This is your total income

Adjusted Gross Income
23 Educator expenses
24 Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ
25 Health savings account deduction. Attach Form 8889
26 Moving expenses. Attach Form 3903
27 Deductible part of self-employment tax. Attach Schedule SE
28 Self-employed SEP, SIMPLE, and qualified plans
29 Self-employed health insurance deduction
30 Penalty on early withdrawal of savings
31a Alimony paid b Recipient's SSN
32 IRA deduction
33 Student loan interest deduction
34 Tuition and fees. Attach Form 8917
35 Domestic production activities deduction. Attach Form 8903
36 Add lines 23 through 35
37 Subtract line 36 from line 22. This is your adjusted gross income

Tax and Credits

38 Amount from line 37 (adjusted gross income) 38

39a Check You were born before January 2, 1949, Blind. Spouse was born before January 2, 1949, Blind. Total boxes checked ▶ 39a

b If your spouse itemizes on a separate return or you were a dual-status alien, check here ▶ 39b

40 Itemized deductions (from Schedule A) or your standard deduction (see left margin) 40

41 Subtract line 40 from line 38 41

42 Exemptions. If line 38 is \$150,000 or less, multiply \$3,900 by the number on line 6d. Otherwise, see instructions 42

43 Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0- 43

44 Tax (see instructions). Check if any from: a Form(s) 8814 b Form 4972 c 44

45 Alternative minimum tax (see instructions). Attach Form 6251 45

46 Add lines 44 and 45 46

47 Foreign tax credit. Attach Form 1116 if required 47

48 Credit for child and dependent care expenses. Attach Form 2441 48

49 Education credits from Form 8863, line 19 49

50 Retirement savings contributions credit. Attach Form 8880 50

51 Child tax credit. Attach Schedule 8812, if required. 51

52 Residential energy credits. Attach Form 5695 52

53 Other credits from Form: a 3800 b 8801 c 53

54 Add lines 47 through 53. These are your total credits 54

55 Subtract line 54 from line 46. If line 54 is more than line 46, enter -0- ▶ 55

Other Taxes

56 Self-employment tax. Attach Schedule SE 56

57 Unreported social security and Medicare tax from Form: a 4137 b 8919 57

58 Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required 58

59a Household employment taxes from Schedule H 59a

b First-time homebuyer credit repayment. Attach Form 5405 if required 59b

60 Taxes from: a Form 8959 b Form 8960 c Instructions; enter code(s) 60

61 Add lines 55 through 60. This is your total tax 61

Payments

62 Federal income tax withheld from Forms W-2 and 1099 62

63 2013 estimated tax payments and amount applied from 2012 return 63

64a Earned Income credit (EIC) 64a

b Nontaxable combat pay election 64b

65 Additional child tax credit. Attach Schedule 8812 65

66 American opportunity credit from Form 8863, line 8 66

67 Reserved 67

68 Amount paid with request for extension to file 68

69 Excess social security and tier 1 RRTA tax withheld 69

70 Credit for federal tax on fuels. Attach Form 4136 70

71 Credits from Form: a 2439 b Reserved c 8885 d 71

72 Add lines 62, 63, 64a, and 65 through 71. These are your total payments 72

Refund

73 If line 72 is more than line 61, subtract line 61 from line 72. This is the amount you overpaid 73

74a Amount of line 73 you want refunded to you. If Form 8888 is attached, check here ▶ 74a

b Routing number ▶ c Type: Checking Savings

d Account number

75 Amount of line 73 you want applied to your 2014 estimated tax ▶ 75

Amount You Owe

76 Amount you owe. Subtract line 72 from line 61. For details on how to pay, see instructions ▶ 76

77 Estimated tax penalty (see instructions) 77

Third Party Designee

Do you want to allow another person to discuss this return with the IRS (see instructions)? Yes. Complete below. No

Designee's name ▶ Phone no. ▶ Personal identification number (PIN) ▶

Sign Here

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Joint return? See instructions. Keep a copy for your records.

Your signature Date Your occupation Daytime phone number

Spouse's signature. If a joint return, both must sign. Date Spouse's occupation

If the IRS sent you an Identity Protection PIN, enter it here (see inst.)

Paid Preparer Use Only

Print/Type preparer's name Preparer's signature Date Check if self-employed PTIN

Firm's name ▶ Firm's EIN ▶

Firm's address ▶ Phone no. ▶

Comparison of 2012 and 2013 Tax Rates

2013 vs. 2012 tax rates

Federal tax rates that took effect on January 1, 2013.

		2012 rates	2013 rates
Ordinary income and short-term capital gains*			
\$17,850 or less (\$0-\$8,925)	Joint (Single)	10%	10%
\$17,851-\$72,500 (\$8,926-\$36,250)		15%	15%
\$72,501-\$146,400 (\$36,251-\$87,850)		25%	25%
\$146,401-\$223,050 (\$87,851-\$183,250)		28%	28%
\$223,051-\$398,350 (\$183,251-\$398,350)		33%	33%
\$398,351-\$450,000 (\$398,351-\$400,000)		35%	35%
\$450,001 and over (\$400,001 and over)		36%	39.6%
Long-term capital gains			
Income \$72,500 or less (\$36,250 or less)		0%	0%
Income \$72,501-\$450,000 (\$36,251-\$400,000)		15%	15%
Income \$450,001 and over (\$400,001 and over)		15%	20%
Dividends			
Ordinary dividends		Ordinary income tax rates	Ordinary income tax rates
Qualified dividends		Long-term capital gains rates	Long-term capital gains rates
Estates and gifts			
		\$5,120,000 per person, \$10,240,000 per couple, with a 40% top tax rate	\$5,250,000 per person, \$10,500,000 per couple, with a 40% top tax rate
Unearned income (Medicare contribution)			
		0%	3.8% surtax on lesser of net investment income or modified adjusted gross income above \$200,000 (individuals) and \$250,000 (couples)
Medicare payroll tax			
		2.9% individual payee, 1.45% employer/employee	Additional 0.9% on earned income above \$200,000 (individuals) and \$250,000 (couples)

* Income ranges are inflation adjusted for 2013.

**SCHEDULE A
(Form 1040)**

Department of the Treasury
Internal Revenue Service (99)

Itemized Deductions

► Information about Schedule A and its separate instructions is at www.irs.gov/schedulea.
► Attach to Form 1040.

OMB No. 1545-0074

2013

Attachment
Sequence No. 07

Name(s) shown on Form 1040

Your social security number

Medical and Dental Expenses	Caution. Do not include expenses reimbursed or paid by others.				
	1	Medical and dental expenses (see instructions)	1		
	2	Enter amount from Form 1040, line 38 <input type="text" value="2"/>	2		
	3	Multiply line 2 by 10% (.10). But if either you or your spouse was born before January 2, 1949, multiply line 2 by 7.5% (.075) instead	3		
	4	Subtract line 3 from line 1. If line 3 is more than line 1, enter -0-		4	
Taxes You Paid	5 State and local (check only one box):		5		
	a <input type="checkbox"/> Income taxes, or				
	b <input type="checkbox"/> General sales taxes				
	6	Real estate taxes (see instructions)	6		
	7	Personal property taxes	7		
	8	Other taxes. List type and amount ►	8		
	9	Add lines 5 through 8		9	
Interest You Paid	10	Home mortgage interest and points reported to you on Form 1098	10		
	11	Home mortgage interest not reported to you on Form 1098. If paid to the person from whom you bought the home, see instructions and show that person's name, identifying no., and address ►	11		
	Note. Your mortgage interest deduction may be limited (see instructions).				
	12	Points not reported to you on Form 1098. See instructions for special rules	12		
	13	Mortgage insurance premiums (see instructions)	13		
	14	Investment interest. Attach Form 4952 if required. (See instructions.)	14		
	15	Add lines 10 through 14		15	
Gifts to Charity	16	Gifts by cash or check. If you made any gift of \$250 or more, see instructions.	16		
	17	Other than by cash or check. If any gift of \$250 or more, see Instructions. You must attach Form 8283 if over \$500	17		
	18	Carryover from prior year	18		
	19	Add lines 16 through 18		19	
Casualty and Theft Losses	20	Casualty or theft loss(es). Attach Form 4684. (See instructions.)		20	
Job Expenses and Certain Miscellaneous Deductions	21	Unreimbursed employee expenses—job travel, union dues, job education, etc. Attach Form 2106 or 2106-EZ if required. (See instructions.) ►	21		
	22	Tax preparation fees	22		
	23	Other expenses—investment, safe deposit box, etc. List type and amount ►	23		
	24	Add lines 21 through 23	24		
	25	Enter amount from Form 1040, line 38 <input type="text" value="25"/>	25		
	26	Multiply line 25 by 2% (.02)	26		
	27	Subtract line 26 from line 24. If line 26 is more than line 24, enter -0-		27	
Other Miscellaneous Deductions	28	Other—from list in instructions. List type and amount ►		28	
Total Itemized Deductions	29	Is Form 1040, line 38, over \$150,000? <input type="checkbox"/> No. Your deduction is not limited. Add the amounts in the far right column for lines 4 through 28. Also, enter this amount on Form 1040, line 40. <input type="checkbox"/> Yes. Your deduction may be limited. See the Itemized Deductions Worksheet in the instructions to figure the amount to enter.		29	
	30	If you elect to itemize deductions even though they are less than your standard deduction, check here <input type="checkbox"/>			

Schedule A
Line 1

Medical Expenses Worksheet

2013

► Keep for your records

Name(s) Shown on Return
Bradley T & Kelly J Kalkwarf

Social Security Number

1	Prescription medications		1	
2	Health insurance premiums:			
a	From Form(s) 1099-R		2 a	
b	For medical care, other than self-employed health insurance		b	
c	Medicare premiums		c	
	NOTE: If LTC premiums are associated with a specific business activity, enter them directly on the applicable Self-Employed Health and Long-Term Care Insurance Deduction Worksheet, not on lines 2d - 2i below.			
d	Taxpayer's gross long-term care premiums	2 d		
e	Taxpayer's allowable long-term care premiums	e		
f	Spouse's gross long-term care premiums	f		
g	Spouse's allowable long-term care premiums	g		
h	Dep or child under 27 gross long-term care premiums	h		
i	Dep or child under 27 allowable long-term care prem.	i		
j	Total allowable long-term care premiums, sum of lines 2e, 2g, and 2i		j	
k	Taxpayer's long-term care premiums not deducted as an adjustment to income.		k	
l	Spouse's long-term care premiums not deducted as an adjustment to income.		l	
m	Dependent's long-term care premiums not deducted as an adj to income		m	
n	Self-employed health insurance not deducted as an adjustment to income		n	
3	Fees for doctors, dentists, etc		3	
4	Fees for hospitals, clinics, etc.		4	
5	Lab and x-ray fees		5	
6	Expenses for qualified long-term care		6	
7	Eyeglasses and contact lenses		7	
8	Medical equipment and supplies		8	
9	Medical transportation expenses:			
a	Medical miles driven	9 a		
b	Multiply the number of miles on line 9a by 24 cents per mile	b		
c	Other medical transportation costs not included above for example: ambulance fees	c		
d	Total medical transportation expenses (add lines 9b and 9c)		9 d	
10	Lodging for medical purposes (up to \$50 per night per person)		10	
11	Other medical and dental expenses:			
a	_____		11 a	
b	_____		b	
c	_____		c	
d	_____		d	
e	_____		e	
f	_____		f	
g	_____		g	
h	_____		h	
i	_____		i	
j	_____		j	
12	Total of medical and dental expenses (add lines 1 through 11j)		12	
13 a	Less: insurance reimbursement for any expenses listed		13 a	
b	Less: medical savings account (MSA) or health savings account (HSA) distributions		b	
14	Total deductible medical and dental expenses. Subtract lines 13a plus 13b from line 12 (to Schedule A, line 1).		14	

► Keep for your records

Name(s) Shown on Return Bradley T & Kelly J Kalkwarf	Social Security Number ---
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Employee Business Expenses – Subject to 2% Limitation

1	Unreimbursed employee expenses from Form 2106	1	
2	Excluded expenses from Form 2555	2	
3 a	Qualified Educator Expenses (from Educator Expenses Worksheet)	3a	
b	Above the line Educator Expenses: (from Form 1040, line 23)	3b	
c	Excess Educator Expenses (line 3a less line 3b)	3c	
4	Union and professional dues	4	
5	Professional subscriptions	5	
6	Uniforms and protective clothing	6	
7	Job search costs	7	
8	Other: _____ _____ _____	8	
9	Total unreimbursed employee business expenses (combine lines 1 - 8) . . .	9	

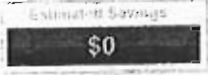
Miscellaneous Expenses – Subject to 2% Limitation

Investment Expense ↓

10	Depreciation and amortization deductions	<input type="checkbox"/>	10	
11	Casualty/theft losses of property used in services as an employee	<input type="checkbox"/>	11	
12	REMIC expenses, from Schedule E	<input type="checkbox"/>	12	
13	Investment expenses related to interest and dividend income	<input type="checkbox"/>	13	
14	Deductions related to portfolio income, miscellaneous deductions, and excess deductions on termination, from Schedule(s) K-1	<input type="checkbox"/>	14	
15	Miscellaneous deductions excluded on Form 2555	<input type="checkbox"/>	15	
16	Investment counsel and advisory fees	<input type="checkbox"/>	16	
17	Certain attorney and accounting fees	<input type="checkbox"/>	17	
18	Safe deposit box rental fees	<input type="checkbox"/>	18	
19	IRA custodial fees	<input type="checkbox"/>	19	
20	Loss incurred from total distribution of all traditional IRAs	<input type="checkbox"/>	20	
21	Loss incurred from total distribution of all Roth IRAs	<input type="checkbox"/>	21	
22	Other: _____ _____ _____	<input type="checkbox"/>	22	
23	Total miscellaneous expenses (combine lines 10 through 22)		23	

Other Miscellaneous Deductions – Not Subject to 2% Limitation

Description of deduction	Other deduction	Excluded on Form 2555	Total
24 Deductions from Schedule(s) K-1		<input type="checkbox"/>	24
25 Federal estate tax paid			25
26 Impairment-related work expenses			26
27 Amortizable bond premiums			27
28 Gambling losses			28
29 Claim repayments			29
30 Casualty and theft losses			30
31 Unrecovered investment in annuity			31
32 Total other miscellaneous deductions (combine lines 24 through 31)			32



Find Estimated Values For Your Items

You can either [search](#) or [browse](#) to find the Estimated resale values of your donated items.



Have A Question?

Type your question here...

[View All Questions](#)

filters %5Bstate%5D=Answered)

[View All Questions](#)

filters %5Bstate%5D=Unanswered)

Entered and saved several lists of donations for 2013 - all but

one...

(<https://tlic.intuit.com/questions/14>)

powered by: LiveCommunity

(<https://tlic.intuit.com/>)

Current Donation
Catholic Social
Services
01/01/2013

You haven't entered any items for this charity.

Search by name:

(e.g., Television)

[Home](#) > [Clothing, Footwear & Accessories](#) > [Women's Clothing](#)

Item Value Worksheet:

Assess the value of each item (High, Medium or Low), then enter the quantity in the appropriate column.

[Why can't I enter Low value items?](#)

	HIGH VALUE	QTY OF ITEMS	MEDIUM VALUE	QTY OF ITEMS	LOW VALUE	QTY OF ITEMS
Dresses						
All Occasion						
Jumper	\$13.00	<input type="text"/>	\$8.00	<input type="text"/>	\$1.50	<input type="text"/>
Sundress	\$12.00	<input type="text"/>	\$9.00	<input type="text"/>	\$1.50	<input type="text"/>
Formal						
Bridesmaid	\$21.00	<input type="text"/>	\$12.00	<input type="text"/>	\$3.00	<input type="text"/>
Evening	\$18.00	<input type="text"/>	\$13.00	<input type="text"/>	\$4.00	<input type="text"/>
Prom	\$35.00	<input type="text"/>	\$21.00	<input type="text"/>	\$5.00	<input type="text"/>
Wedding Gown	\$36.00	<input type="text"/>	\$24.00	<input type="text"/>	\$0.00	<input type="text"/>
Jogging Suit	\$10.00	<input type="text"/>	\$7.00	<input type="text"/>	\$3.00	<input type="text"/>
Medical Scrubs						
	HIGH	QTY	MEDIUM	QTY	LOW	QTY
Pants	\$5.00	<input type="text"/>	\$4.00	<input type="text"/>	\$0.75	<input type="text"/>
Shirt	\$5.00	<input type="text"/>	\$3.00	<input type="text"/>	\$0.75	<input type="text"/>
Pants						
	HIGH	QTY	MEDIUM	QTY	LOW	QTY
Capris	\$6.00	<input type="text"/>	\$4.00	<input type="text"/>	\$1.50	<input type="text"/>
Cargo	\$28.00	<input type="text"/>	\$11.00	<input type="text"/>	\$2.00	<input type="text"/>
Carpenter	\$9.00	<input type="text"/>	\$6.00	<input type="text"/>	\$1.00	<input type="text"/>
Chinos/Khakis	\$7.00	<input type="text"/>	\$4.00	<input type="text"/>	\$1.00	<input type="text"/>
Corduroy	\$9.00	<input type="text"/>	\$5.00	<input type="text"/>	\$1.50	<input type="text"/>
Dress Slacks	\$7.00	<input type="text"/>	\$4.00	<input type="text"/>	\$1.50	<input type="text"/>
Jeans/Denim	\$13.00	<input type="text"/>	\$7.00	<input type="text"/>	\$2.00	<input type="text"/>
Leggings	\$5.00	<input type="text"/>	\$3.00	<input type="text"/>	\$1.50	<input type="text"/>
Nylon/Athletic	\$10.00	<input type="text"/>	\$6.00	<input type="text"/>	\$1.50	<input type="text"/>
Overalls/Coveralls	\$12.00	<input type="text"/>	\$7.00	<input type="text"/>	\$1.50	<input type="text"/>
Sweatpants/Fleece	\$9.00	<input type="text"/>	\$6.00	<input type="text"/>	\$1.50	<input type="text"/>
Shirts						
	HIGH	QTY	MEDIUM	QTY	LOW	QTY
Camisole	\$13.00	<input type="text"/>	\$6.00	<input type="text"/>	\$1.00	<input type="text"/>
Dress Shirt	\$7.00	<input type="text"/>	\$5.00	<input type="text"/>	\$1.50	<input type="text"/>
Flannel	\$16.00	<input type="text"/>	\$9.00	<input type="text"/>	\$1.50	<input type="text"/>
Halter	\$13.00	<input type="text"/>	\$8.00	<input type="text"/>	\$2.00	<input type="text"/>

Jersey	\$20.00	<input type="checkbox"/>	\$13.00	<input type="checkbox"/>	\$2.50	<input type="checkbox"/>
Mock Turtleneck	\$8.00	<input type="checkbox"/>	\$5.00	<input type="checkbox"/>	\$1.50	<input type="checkbox"/>
Polo	\$7.00	<input type="checkbox"/>	\$4.00	<input type="checkbox"/>	\$2.00	<input type="checkbox"/>
Strapless	\$8.00	<input type="checkbox"/>	\$5.00	<input type="checkbox"/>	\$1.00	<input type="checkbox"/>
Sweatshirt/Fleece	\$12.00	<input type="checkbox"/>	\$5.00	<input type="checkbox"/>	\$1.50	<input type="checkbox"/>
T-Shirt	\$10.00	<input type="checkbox"/>	\$6.00	<input type="checkbox"/>	\$1.50	<input type="checkbox"/>
Tank	\$10.00	<input type="checkbox"/>	\$5.00	<input type="checkbox"/>	\$1.50	<input type="checkbox"/>
Turtleneck	\$10.00	<input type="checkbox"/>	\$7.00	<input type="checkbox"/>	\$1.50	<input type="checkbox"/>
Work/Uniform	\$21.00	<input type="checkbox"/>	\$11.00	<input type="checkbox"/>	\$1.00	<input type="checkbox"/>
Shorts		HIGH QTY	MEDIUM QTY		LOW QTY	
Cargo	\$7.00	<input type="checkbox"/>	\$5.00	<input type="checkbox"/>	\$1.00	<input type="checkbox"/>
Carpenter	\$4.00	<input type="checkbox"/>	\$1.00	<input type="checkbox"/>	\$1.50	<input type="checkbox"/>
Chinos/Khakis	\$6.00	<input type="checkbox"/>	\$3.00	<input type="checkbox"/>	\$1.50	<input type="checkbox"/>
Jeans/Denim	\$8.00	<input type="checkbox"/>	\$4.00	<input type="checkbox"/>	\$1.00	<input type="checkbox"/>
Nylon/Athletic	\$7.00	<input type="checkbox"/>	\$5.00	<input type="checkbox"/>	\$1.50	<input type="checkbox"/>
Skirts		HIGH QTY	MEDIUM QTY		LOW QTY	
Full-Length	\$10.00	<input type="checkbox"/>	\$7.00	<input type="checkbox"/>	\$1.00	<input type="checkbox"/>
Knee-Length	\$9.00	<input type="checkbox"/>	\$6.00	<input type="checkbox"/>	\$1.50	<input type="checkbox"/>
Mini	\$9.00	<input type="checkbox"/>	\$5.00	<input type="checkbox"/>	\$1.00	<input type="checkbox"/>
Skorts	\$10.00	<input type="checkbox"/>	\$7.00	<input type="checkbox"/>	\$1.50	<input type="checkbox"/>
Sleepwear		HIGH QTY	MEDIUM QTY		LOW QTY	
Lounge Pants	\$7.00	<input type="checkbox"/>	\$5.00	<input type="checkbox"/>	\$1.00	<input type="checkbox"/>
Nightgown	\$6.00	<input type="checkbox"/>	\$4.00	<input type="checkbox"/>	\$1.50	<input type="checkbox"/>
Nightshirt	\$5.00	<input type="checkbox"/>	\$4.00	<input type="checkbox"/>	\$1.00	<input type="checkbox"/>
Pajama Set	\$6.00	<input type="checkbox"/>	\$5.00	<input type="checkbox"/>	\$1.50	<input type="checkbox"/>
Robe	\$6.00	<input type="checkbox"/>	\$4.00	<input type="checkbox"/>	\$2.00	<input type="checkbox"/>
Suits		HIGH QTY	MEDIUM QTY		LOW QTY	
Individual Pieces						
Blazer	\$16.00	<input type="checkbox"/>	\$8.00	<input type="checkbox"/>	\$3.00	<input type="checkbox"/>
Suit Jacket	\$24.00	<input type="checkbox"/>	\$9.00	<input type="checkbox"/>	\$3.00	<input type="checkbox"/>
Sets						
Pant Suit	\$24.00	<input type="checkbox"/>	\$13.00	<input type="checkbox"/>	\$5.00	<input type="checkbox"/>
Skirt Suit	\$26.00	<input type="checkbox"/>	\$13.00	<input type="checkbox"/>	\$5.00	<input type="checkbox"/>
Sweaters		HIGH QTY	MEDIUM QTY		LOW QTY	
Cardigan	\$7.00	<input type="checkbox"/>	\$4.00	<input type="checkbox"/>	\$2.00	<input type="checkbox"/>
Pullover	\$6.00	<input type="checkbox"/>	\$3.00	<input type="checkbox"/>	\$1.50	<input type="checkbox"/>
Vest	\$6.00	<input type="checkbox"/>	\$2.50	<input type="checkbox"/>	\$1.50	<input type="checkbox"/>
Swimwear		HIGH QTY	MEDIUM QTY		LOW QTY	
Cover Up	\$7.00	<input type="checkbox"/>	\$3.00	<input type="checkbox"/>	\$1.00	<input type="checkbox"/>
One-Piece	\$9.00	<input type="checkbox"/>	\$6.00	<input type="checkbox"/>	\$1.50	<input type="checkbox"/>
Two-Piece	\$10.00	<input type="checkbox"/>	\$5.00	<input type="checkbox"/>	\$2.00	<input type="checkbox"/>
Undergarments		HIGH QTY	MEDIUM QTY		LOW QTY	
Girdle	\$12.00	<input type="checkbox"/>	\$6.00	<input type="checkbox"/>	\$0.80	<input type="checkbox"/>
Bra	\$3.00	<input type="checkbox"/>	\$2.00	<input type="checkbox"/>	\$1.50	<input type="checkbox"/>
Insulated/Thermal						

Pants	\$3.00 <input type="checkbox"/>	\$1.00 <input type="checkbox"/>	\$0.50 <input type="checkbox"/>
Shirt	\$3.00 <input type="checkbox"/>	\$1.00 <input type="checkbox"/>	\$0.75 <input type="checkbox"/>
Slips			
Full	\$7.00 <input type="checkbox"/>	\$4.00 <input type="checkbox"/>	\$1.00 <input type="checkbox"/>
Half	\$6.00 <input type="checkbox"/>	\$3.00 <input type="checkbox"/>	\$0.75 <input type="checkbox"/>
Socks	\$1.25 <input type="checkbox"/>	\$0.50 <input type="checkbox"/>	\$0.25 <input type="checkbox"/>
Underwear	\$1.50 <input type="checkbox"/>	\$0.75 <input type="checkbox"/>	\$0.75 <input type="checkbox"/>
Girdle	\$10.00 <input type="checkbox"/>	\$5.00 <input type="checkbox"/>	\$0.00 <input type="checkbox"/>
	HIGH QTY	MEDIUM QTY	LOW QTY

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What Are Medical Expenses?

Medical expenses are the costs of diagnosis, cure, mitigation, treatment, or prevention of disease, and the costs for treatments affecting any part or function of the body. These expenses include payments for legal medical services rendered by physicians, surgeons, dentists, and other medical practitioners. They include the costs of equipment, supplies, and diagnostic devices needed for these purposes.

Medical care expenses must be primarily to alleviate or prevent a physical or mental defect or illness. They do not include expenses that are merely beneficial to general health, such as vitamins or a vacation.

Medical expenses include the premiums you pay for insurance that covers the expenses of medical care, and the amounts you pay for transportation to get medical care. Medical expenses also include amounts paid for qualified long-term care services and limited amounts paid for any qualified long-term care insurance contract.

What Expenses Can You Include This Year?

You can include only the medical and dental expenses you paid this year, regardless of when the services were provided. (But see [Decedent](#) under *Whose Medical Expenses Can You Include*, for an exception.) If you pay medical expenses by check, the day you mail or deliver the check generally is the date of payment. If you use a "pay-by-phone" or "online" account to pay your medical expenses, the date reported on the statement of the financial institution showing when payment was made is the date of payment. If you use a credit card, include medical expenses you charge to your credit card in the year the charge is made, not when you actually pay the amount charged.