| - | Page | | MONTANA | | |
|-----------------------------------|-----------------------|---|--|---|------|
| _ | Last Name and Initial | | Social Security Number | | _ |
| | | Schedule I — Itemized Deductions | Column A (For single, joint, separate or head of household) | Column B (For spouse only when filing separate, and box 3 is checked) | |
| Medical & Dental Expenses | 71. | Medical insurance premiums not deducted on lines 19, 35 or 75 71. | | | 71. |
| | | Do not include pre-tax payroll deductions or employer paid premiums. | | | |
| | | Column A Column B | Round to nearest dollar | | |
| | 72. 73. | Medical expenses. See instructions72. Enter 7.5% (.075) of line 38, Form 273 | Round to nearest donar | | |
| | 73. 74. | Subtract line 73 from line 72. If less than zero, enter zero. | | | |
| | | Deductible medical and dental expenses | | | 74. |
| | 75. | Long term care insurance | | | 75. |
| Taxes You Paid | | | | | |
| | | Federal Income Tax (Amounts attributable | | | |
| | 762 | to self employment tax are not deductible). 2003 federal tax withheld from wages, pensions | | | |
| | roa. | and annuities. Attach W-2's and 1099's76a. | | | |
| | b. | Federal estimated tax payments made in 2003. | | | |
| | | Attach copies of pages 1 and 2 of federal | | | |
| | | tax return (Form 1040 or 1040A) | | | ŀ |
| | 77. | Balance of 2002 tax paid in 200377. | | | |
| | 78. | Additional federal tax for year(s) paid in 2003 78. Less 2003 federal advance child credit79. | | | |
| Interest You Paid | 80. | Total 2003 federal tax deduction - add lines 76a, 76b, 77, and 78, | | | |
| | 00. | then subtract line 79. Cannot be less than zero | | | 80. |
| | 81. | Real estate personal property taxes 81. | | | 81. |
| | 82. | Motor vehicle(s) taxes, other deductible taxes | | | 82. |
| | 83. | Home mortgage interest Deductible points If paid to the person from whom you bought the home, please provide | | | |
| | | person's name, address and social security # | | | |
| | | | | | 83. |
| Miscellaneous Deductions Other | 84. | Deductible investment interestAttach Federal Form 4952 84. | | | 84. |
| | 85. | Contributions | | | 85. |
| | 86. | Child and dependent care expenseAttach Montana Form 2441M 86. Casualty and theft losses | | | 86. |
| | 87. 88. | Casualty and theft lossesAttach Federal Form 4684 87. Unreimbursed employee business expense Column A Column B | | | 87. |
| | 00. | Attach Federal Form 210688. | | | |
| | 89. | Other expenses (list type and amount) | | | |
| | | 89. | | | |
| | 90. | Add lines 88 and 89 | | | |
| | 91. 92. | Enter 2% (.02) of line 38 Form 2 | | | |
| | 92. | enter zero | | | 92. |
| | 93. | Misc. deduction not subject to 2% A.G.I. (list type and amount) | | | 702. |
| Total Deductions | | 93. | | | 93. |
| | 94. | Gambling losses (as allowed by federal law) | | | 94. |
| | 95a. | Add lines 71, 74, 75, 80-87, 92-94. Enter result here Total 95a. | | | 95a |
| | | If the amount on Form 2, line 38 is more than \$139,500 (more than \$69,750 if you are married filing separately) | | | |
| | | continue to line 95b, otherwise transfer the amount on | | | |
| | | line 95a to line 39 of Form 2. | | | |
| | 95b. | Enter the amount from line 9 of the Itemized Deduction | | | |
| | | Worksheet VI on page 14. This is the amount of your unallowable | | | |
| | 96. | itemized deductions | | | 95b |
| | . MD | COURTED THE MODERNIE | i . | İ | 1 |

allowable itemized deductions. Enter here and on