

# Intake/Interview & Quality Review Sheet

## Section A. Page 1 and Page 2 to be completed by Taxpayer

Thank you for allowing us to prepare your tax return. It is very important for you to provide the information on this form to help our certified volunteer preparer in completing your return. **If you have any questions, please ask.**

### You will need your:

- Tax information such as Forms W-2, 1099, 1098.
- Social security cards or ITIN letters for you and all persons on your tax return.
- Proof of Identity (such as drivers license or other picture ID).

## Part I. Your Personal Information

1. Your First Name	M. I.	Last Name	Are you a U.S. Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No
2. Spouse's First Name	M. I.	Last Name	Is spouse a U.S. Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No
3. Mailing Address	Apt#	City	State      Zip Code
4. Phone Primary:                      Other:		E-mail	
5. Your Date of Birth	6. Your Occupation	7. Are you Legally Blind	<input type="checkbox"/> Yes <input type="checkbox"/> No
		8. Totally and Permanently Disabled	<input type="checkbox"/> Yes <input type="checkbox"/> No
9. Spouse's Date of Birth	10. Spouse's Occupation	11. Is Spouse Legally Blind	<input type="checkbox"/> Yes <input type="checkbox"/> No
		12. Totally and Permanently Disabled	<input type="checkbox"/> Yes <input type="checkbox"/> No
13. Can your parents or someone else claim you or your spouse on their tax return? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure			
14. Other than English what language is spoken in your home? _____			
15. Are you or a member of your household considered disabled? <input type="checkbox"/> Yes <input type="checkbox"/> No			

## Part II. Family and Dependent Information

1. As of December 31, 2010, your marital status was:

- Single
- Married: Did you live with your spouse during any part of the last six months of 2010?  Yes  No
- Divorced or Legally Separated: Date of final decree or separate maintenance agreement: \_\_\_\_\_
- Widowed: Year of spouse's death: \_\_\_\_\_

2. List the name of everyone below who lived in your home and outside your home that you supported during 2010.

If additional space is needed please check here and use page 4 for additional information.

Name (first, last) Do not enter your name or Spouse's name below.	Date of Birth (mm/dd/yy)	Relationship to you (e.g. son, mother, sister)	Number of months lived in your home	US Citizen or resident of the US, Canada or Mexico (yes/no)	Single as of 12/31/10 (yes/no)	Full- time student (yes/no)	Received more than \$3650 in income (yes/no)
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)

- Volunteers assisting with preparing your return are trained to provide high quality service and uphold the highest ethical standards.
- To report any concerns to IRS on site operating issues please call **Toll Free 1-877-330-1205** or email us at **WI.Voltax@irs.gov**.

**Section A. To be completed by Taxpayer (continued)**

**Part III. Income – In 2010, did you (or your spouse) receive: (Check Yes, No or Unsure to all questions below)**

**Yes No Unsure**

- 1. Wages or Salary? (Form(s) W-2)
- 2. Tip Income?
- 3. Scholarships? (Forms W-2, 1098-T)
- 4. Interest/Dividends from: checking/savings accounts, bonds, CDs, brokerage? (Forms 1099-INT, 1099-DIV, 1099-OID)
- 5. Refund of state/local income taxes previously used as a deduction on 1040 Sch A? (Form(s) 1099-G)
- 6. Alimony Income?
- 7. Self-Employment Income/Loss (such as earnings from contract labor, small business)? (Form(s) 1099-MISC)
- 8. Income (gain or loss) from the sale of Stocks, Bonds or Real Estate (including your home)? (Form(s) 1099-B)
- 9. Disability Income (such as payments from SSA, VA, insurance, etc)? (Forms 1099-R, W-2)
- 10. Distributions from Pensions, Annuities, and/or IRA? (Form(s) 1099-R)
- 11. Unemployment Compensation? (Form(s) 1099-G)
- 12. Social Security or Railroad Retirement Benefits? (Form(s) SSA-1099)
- 13. Income (profit or loss) from Rental Property?
- 14. Other Income: (gambling, lottery, prizes, awards, jury duty, etc.) Specify: \_\_\_\_\_  
(Forms W-2 G, 1099-MISC)

**Part IV. Expenses – In 2010 Did you (or your spouse) pay: (Check Yes, No or Unsure to all questions below)**

**Yes No Unsure**

- 1. Alimony: If yes, do you have the recipient's SSN?  Yes  No
- 2. Contributions to a retirement account?  IRA  Roth IRA  401K  Other
- 3. Educational expenses paid for yourself, spouse or dependents? (such as tuition, books, fees, etc.)
- 4. Unreimbursed employee business expenses (such as mileage)?
- 5. Medical expenses?
- 6. Home mortgage interest?
- 7. Real estate taxes for your home or personal property taxes?
- 8. Charitable contributions?
- 9. Child/dependent care expenses that allowed you and your spouse, to work or to look for work?

**Part V. Life Events – In 2010 Did you (or your spouse): (Check Yes, No or Unsure to all questions below)**

**Yes No Unsure**

- 1. Have a Health Savings Account? (Forms 5498-SA, 1099-SA)
- 2. Have debt from a mortgage or credit card canceled/forgiven by a commercial lender? (Form(s) 1099-C)
- 3. Buy a home? If yes, closing date \_\_\_\_\_
- 4. Have Earned Income Credit (EIC) disallowed in a prior year? If yes, for which tax year? \_\_\_\_\_
- 5. Purchase and install energy efficient home items? (such as windows, furnace, insulation, etc.)
- 6. Live in an area that was affected by a natural disaster? If yes, where? \_\_\_\_\_
- 7. Receive the First Time Homebuyers Credit in previous years?
- 8. Pay any student loan interest?
- 9. Make estimated tax payments or apply last year's refund to your 2010 tax?  
If so how much? \_\_\_\_\_
- 10. If you are due a refund, would you like a direct deposit or split your refund?
- 11. If you are due a refund, would you like information on how to purchase U.S. Savings Bonds?
- 12. If you have a balance due, would you like information about all of your payment options? (such as payment directly from your bank account, check, money order, credit/debit card or payment plan)

# TAXPAYER STOP HERE!

Thank you for completing this form.

## Section B. To be Completed by Certified Volunteer Only

**Remember:** You are the link between the taxpayer's information and a correct tax return. Verify the taxpayer's information on pages 1 & 2 is complete. Any question marked "Unsure" must be discussed with the taxpayer and changed to "Yes" or "No".

**Must be completed ONLY if persons are listed in Part II, Question 2.**

- Yes  No 1. Can anyone else claim any of the persons listed in Part II, Question 2, as a dependent on their return? If yes, which ones:  
 \_\_\_\_\_  
 \_\_\_\_\_
- Yes  No 2. Were any of the persons listed in Part II, Question 2, totally and permanently disabled? If yes, which ones:  
 \_\_\_\_\_  
 \_\_\_\_\_
- Yes  No 3. Did any of the persons listed in Part II, Question 2 provide more than half of their own support? If yes, which ones:  
 \_\_\_\_\_  
 \_\_\_\_\_
- Yes  No  
 N/A 4. Did the taxpayer provide more than half the support for each of the persons in Part II, Question 2? If no, which ones:  
 \_\_\_\_\_  
 \_\_\_\_\_
- Yes  No 5. Did the taxpayer pay over half the cost of maintaining a home for any of the persons in Part II, Question 2? If yes, which ones:  
 \_\_\_\_\_  
 \_\_\_\_\_

**Reminder**

Use Publication 17, *Your Federal Income Tax For Individuals* and Publication 4012, *Volunteer Resource Guide* in making tax law determinations.

## Section C. To be completed by a Certified Quality Reviewer

After reviewing the tax return and verifying that it reflects correct tax law application to the information provided by the taxpayer, check the final item.

1. **Sections A & B** of this form are complete.
  2. **Taxpayer's Identity, Address and Phone Number** were verified.
  3. **Names, SSN or ITINs, and dates of birth of taxpayer, spouse and dependents** match the supporting documents.
  4. **Filing Status** is correctly determined.
  5. **Personal and Dependency Exemptions** are entered correctly on the return.
  6. All **Income** shown on source documents and noted in Section A, Part III is included on the tax return.
  7. Any **Adjustments to Income** are correctly reported.
  8. **Standard, Additional or Itemized Deductions** are correct.
  9. All **Credits** are correctly reported.
  10. Withholding shown on **Forms W-2, 1099 and Estimated Tax Payments** are correctly reported.
  11. If **Direct Deposit or Debit** was elected, checking/saving account and routing information match the supporting documents.
  12. Correct SIDN is shown on the return.
- Check if the items above have been verified to validate accuracy based on your interview with the taxpayer and a second review of their source documents.**

