

Taxpayer Interview and Intake Sheet

Your first name	M.I.	Last Name	Are you in the US on a Visa? Yes No		Your Date of Birth	Your Job					
Your spouse's first name	M.I.	Last Name	Is your spouse in US on Visa? Yes No		Spouse's Date of Birth	Spouse's Job					
Mailing Address		Apt #	City		State	Zip Code					
					Did you live or work in two or more states in 2020: Yes No						
Phone #	Email:		Circle if last year you or your spouse were: Full-time student You Spouse Dependents Legally Blind You Spouse Dependents Totally and Permanently Disabled You Spouse Dependents Issued an Identity Protection PIN You Spouse Dependents								
Would you like \$3 to go to the Presidential Election Campaign Fund? <i>If you check a box, your tax or refund will not change:</i> You Spouse											
If due a refund, would you like your refund to be: Directly Deposited (estimated 2-3 weeks) Mailed to you by check (estimated 4-6 weeks)											
If due a refund, are you interested in using these savings options: Split your refund between accounts Purchase US Savings Bond Other											
If you have a balance due, would you like to make a payment directly from your bank account? Yes No											
To be completed by certified volunteer: Can anyone else claim the taxpayer or spouse on their tax return? Yes No											
As of December 31, 2019, what was your marital status? Never Married Married If Married: Were you married for all of 2019? Yes No Did you live with your spouse during any part of the last six months of 2019? Yes No Divorced Date of final decree _____ Legally Separated Date of separate maintenance decree _____ Widowed Year of spouse's death _____						To be completed by certified volunteer: Taxpayer's filing status: Single Head of Household Married Filing Jointly Married Filing Separately Qualifying Widower w/dependent child					
List the names below of: (1) Everyone who lived with you last year and (2) anyone you supported but did not live with you last year											
Name (first, last)	Date of Birth (mm/dd/yy)	Relationship to you (son, daughter, parent, none, etc.)	Number of months lived in your home	Single or Married as of 12/31 (S/M)	Answer Yes or No (Y/N):				To be completed by certified volunteer (Refer to Pub 4012 Tab C)		
					In the US on a Visa	Resident of US, Canada or Mexico	Full-time Student	Totally and Permanently Disabled	Qualifying Child Dependent?	Qualifying Relative Dependent?	Qualifies taxpayer for other benefits (HOH, EITC, etc.)
To be completed by the Taxpayer (check ALL that apply)				To Be Completed by Certified Volunteer/Preparer						Notes/Comments	

<p>Did you receive money from any of the following in 2019?</p> <p>Wages as a part-time or full-time employee How many jobs? _____</p> <p>Tips Retirement account, pension or annuity proceeds Social Security or Railroad Retirement Benefits Unemployment benefits Disability benefits Interest or dividends (bank account, bonds, etc.) From sale of stocks, bonds or real estate Did you report a loss on last year's return?</p> <p>Alimony Rental properties Farm activity Gambling winnings, including lottery Refund of state or local income tax? From contract or self-employment work Did you report a business loss on last year's tax return?</p> <p>Any other money received during the year (cash payments, jury duty, awards, virtual currency, royalties, union strike benefits): _____</p> <p>_____</p>	<p>Income to be reported on the tax return:</p> <p>(B) W2s; Number: _____</p> <p>(B/A) 1099-R (taxable amount shown is considered basic); Number: _____</p> <p>(B) SSA-1099, RRB-1099</p> <p>(B) 1099-G: Number _____</p> <p>(B) 1099-INT/DIV: Number _____</p> <p>(A) 1099-B: Number _____ Capital Loss carryover</p> <p>(A) Brokerage statement</p> <p>(B) Alimony, amount: \$ _____</p> <p>(excluded from income? Yes No)</p> <p>(M) Rental income</p> <p>(B) W2G or other gambling winnings (list losses below if taxpayer can itemize deductions)</p> <p>(A) Schedule C</p> <p>1099-Misc; Number: _____</p> <p>1099-K: Number _____</p> <p>Other income reported elsewhere</p> <p>Schedule C expenses:</p> <p> </p> <p>Other income:</p>	<p>Notes or comments Related to Return Preparation:</p>
<p>Did you pay any of the following expenses in 2019?</p> <p>Mortgage Interest Taxes: state, local, real estate, sales, etc. Medical, Dental, Prescription Expenses Charitable contributions</p>	<p>Will the taxpayer use:</p> <p>(B) Standard deduction (A) Itemized deduction</p> <p> </p> <p>(B) Taxable state/local income taxes Did taxpayer itemize their deductions in prior year? Yes No</p>	<p>Notes/Comments:</p>
<p>Did you pay any of these expenses in 2019?</p> <p>Student loan interest Child and dependent care Contributions to a retirement account School supplies by a teacher, teacher's aide or other educator Alimony payments (do not include child support)</p>	<p>To be reported on the tax return:</p> <p>(B) 1098-E (B) Child and Dependent care credit (A) IRA, 401(k), etc. deduction (B) Saver's credit (B) Educator expenses deduction (B) Alimony payments with spouse's SSN \$ _____</p> <p>(adjustment to income? Yes No)</p>	<p>Notes/Comments:</p>
<p>To be completed by the Taxpayer (check ALL that apply)</p>	<p>To Be Completed by Certified Volunteer</p>	<p>Notes/Comments</p>

<p>Did any of the following happen during the year:</p> <p>Someone in your family was a college or other post-high school student (technical school, etc.)</p> <p>Sell a home</p> <p>Have a Health Savings Account</p> <p>Purchase health insurance through the Marketplace (Exchange)</p> <p>Receive the First Time Homebuyer Credit in 2008</p> <p>Have credit card, mortgage or other debt cancelled/forgiven by a lender</p> <p>Have a loss related to a declared Federal disaster area?</p> <p>Adopt a child</p> <p>Have Earned Income Credit, Child Tax Credit, American Opportunity Credit or Head of Household filing status disallowed in a prior year</p> <p>Receive any letter or bill from the IRS</p> <p>Make estimated tax payments or apply last year's refund to 2019 taxes</p> <p>Additional information you think we should know (put information in box below):</p>	<p>Information to be reported on tax return:</p> <p>(B) Taxable Scholarship income</p> <p>(B) 1098-T</p> <p>(B) Education Credit</p> <p>(B) Energy Efficient Purchases</p> <p>(A) Sale of Home (1099-S)</p> <p>(HSA) HSA Contributions HSA</p> <p>Distributions</p> <p>(A) First Time Homebuyer Credit Repayment</p> <p>(A) 1095-A</p> <p>(A) 1099-C</p> <p>(A) 1099-A</p> <p>(B) EITC, CTC, AOTC or HOH disallowed in a previous year</p> <p>• Year disallowed: _____</p> <p>• Reason: _____</p> <p>Estimated tax payments: _____</p> <p>Last year's refund applied to this year: _____</p> <p>Last year's return available</p> <p>Additional information for accurate tax preparation:</p>	<p>Notes/comments from return preparation:</p>																																																												
<p>The following information is for statistical purposes. These questions are optional. (circle answer)</p> <table border="0"> <tr> <td>1. Would you say you can carry on a conversation in English?</td> <td>Very Well</td> <td>Well</td> <td>Not Well</td> <td>Not at all</td> <td>Prefer not to answer</td> </tr> <tr> <td>2. Would you say you read a newspaper in English?</td> <td>Very Well</td> <td>Well</td> <td>Not Well</td> <td>Not at all</td> <td>Prefer not to answer</td> </tr> <tr> <td>3. Do you or any member of your household have a disability?</td> <td>Yes</td> <td>No</td> <td colspan="3">Prefer not to answer</td> </tr> <tr> <td>4. Are you or your spouse a Veteran from the U.S. Armed Forces?</td> <td>Yes</td> <td>No</td> <td colspan="3">Prefer not to answer</td> </tr> <tr> <td>5. Your race?</td> <td colspan="5"></td> </tr> <tr> <td>American Indian or Alaska Native</td> <td>Asian</td> <td>Black or African American</td> <td>Native Hawaiian or other Pacific Islander</td> <td>White</td> <td>Prefer not to answer</td> </tr> <tr> <td>6. Your spouse's race?</td> <td colspan="5"></td> </tr> <tr> <td>American Indian or Alaska Native</td> <td>Asian</td> <td>Black or African American</td> <td>Native Hawaiian or other Pacific Islander</td> <td>White</td> <td>Prefer not to answer</td> </tr> <tr> <td>7. Your ethnicity?</td> <td>Hispanic or Latino</td> <td>Not Hispanic or Latino</td> <td colspan="3">Prefer Not to Answer</td> </tr> <tr> <td>8. Your spouse's ethnicity?</td> <td>Hispanic or Latino</td> <td>Not Hispanic or Latino</td> <td colspan="3">Prefer Not to Answer</td> </tr> </table>			1. Would you say you can carry on a conversation in English?	Very Well	Well	Not Well	Not at all	Prefer not to answer	2. Would you say you read a newspaper in English?	Very Well	Well	Not Well	Not at all	Prefer not to answer	3. Do you or any member of your household have a disability?	Yes	No	Prefer not to answer			4. Are you or your spouse a Veteran from the U.S. Armed Forces?	Yes	No	Prefer not to answer			5. Your race?						American Indian or Alaska Native	Asian	Black or African American	Native Hawaiian or other Pacific Islander	White	Prefer not to answer	6. Your spouse's race?						American Indian or Alaska Native	Asian	Black or African American	Native Hawaiian or other Pacific Islander	White	Prefer not to answer	7. Your ethnicity?	Hispanic or Latino	Not Hispanic or Latino	Prefer Not to Answer			8. Your spouse's ethnicity?	Hispanic or Latino	Not Hispanic or Latino	Prefer Not to Answer		
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<p>Volunteers are trained to provide high quality service and uphold the highest ethical standards. To report unethical behavior to the IRS, email us at wi.voltax@irs.gov</p>																																																														