



Sign-in Number: \_\_\_\_\_

Welcome, please answer all questions so the volunteers can better help you

**PLEASE PRINT CLEARLY**

- Name: \_\_\_\_\_
- How much was your income in 2011? \$ \_\_\_\_\_ *Advisor Note: Add total W2, 1099, etc.*
- How many jobs did you (and your spouse) have in 2011? \_\_\_\_\_ *Advisor Note: Count the number W2s.*

Q1. Please check the **one** that best describes you:

- C: Couple filing joint     M: Male
- F: Female     T: Transgendered

Q2. Please check the **one** that best describes you:

- A: Asian or Pacific Islander
- B: African American or Black
- C: Caucasian or White
- L: Latino(a) or Hispanic
- O: Other
- N: Native American / Hawaiian

Q3. Please check the **one** that describes the highest level of education you have completed?

- A. Less than High School
- B. High School or GED
- C. Some college or technical school
- D. Two-year degree (Associates)
- E. Four-year degree (Bachelors)
- F. Some graduate school
- G. Graduate degree

Q4. Please check the **one** that applies to you:

- A. I own my home and have a mortgage
- B. I own my home without a mortgage
- C. I rent a home or apartment (Monthly amount \$ \_\_\_\_\_)
- D. I live with my family
- E. I live with someone else
- F. I live in a dorm or other group setting
- G. I am currently homeless

Q5. Which bill is giving you the most trouble now? (Please check **one**)

- A. Past-due utility bills
- B. Credit cards
- C. Payday loan
- D. Back child support
- E. Medical bills
- F. Car loan
- G. Student loans
- H. Mortgage or back rent
- I. No trouble with bills

Q6. How did you get here today? (Please check **one**)

- A. I drove my car
- B. I drove someone else's car
- C. Someone gave me a ride
- D. I used a taxi
- E. I took the bus
- F. I used Lift Line
- G. I walked here
- H. Other

Q7. How did you have your taxes done LAST YEAR? (Please check **one**)

- A. At C.A.S.H.
- B. Another free place like this
- C. Did my own
- D. Family or friend did them for free
- E. Paid someone and got an instant refund
- F. Paid someone without getting an instant refund
- G. Did not file last year
- H. Have never filed before

Q8. If you couldn't come to a free place like C.A.S.H., how would you file your tax return? (Please check **one**)

- A. Do my own
- B. Have family or friend do it for free
- C. Pay someone
- D. I wouldn't file

Q9. May we contact you about next year's tax sites and C.A.S.H. programs during the year?

- Yes     No

Q10. People who work at C.A.S.H. are volunteers. Would you like to be a C.A.S.H. volunteer next year?

- Yes     No

Q11. Other than English, what language is spoken in your home? (Please check **one**)

- None     French     Polish
- Spanish     Italian     Russian
- ASL     Japanese     Ukrainian
- Chinese     Korean     Vietnamese
- Other \_\_\_\_\_

Q12. Are you or a member of your household considered disabled?

- Yes       No

Q13. Which of the following would you like to know more about? (Please check **ALL** that apply)

- A. Making and sticking to a household budget
- B. Fixing bad credit / getting out of debt
- C. Mortgage default / foreclosure counseling
- D. Buying a home
- E. Getting a low cost computer
- F. Assistance with paying for heating bills
- G. Assistance with fixing up your home
- H. Training to improve job skills
- I. Getting a GED
- J. Assistance with Child Care expenses

Q14. Do you often have a hard time paying for groceries?

- Yes       No

Q15. Who has health insurance in your family? (Please check **one**)

- A. Me only
- B. My spouse only
- C. My children only
- D. Me and my spouse only
- E. Me and my children only
- F. My spouse and my children only
- G. All of us
- H. No one

Q16. Have you received a letter from the IRS or NY State about problems with tax returns?

- Yes       No

Q17. Have you reviewed a copy of your credit report in the past year?

- Yes       No

Q18. Which of these best describe you? (Please check **one**)

- A. I have a checking account, only
- B. I have a savings account, only
- C. I have a savings account & a checking account
- D. I have no account, but I would like one
- E. I have no account, and I do not want one

Q19. How do you plan to get your tax refund? (Please check **ALL** that apply)

- A. No refund, I think I will owe taxes
- B. Direct Deposit
- C. Check in the mail
- D. The IRS or NYS will keep some or all of it

Q20. Which of the following did you do during the last year? (Please check **ALL** that apply)

- A. Used direct deposit for paycheck
- B. Used a credit card for purchases
- C. Used checking account for bills
- D. Used money orders for bills
- E. Used a check cashing store
- F. Wired money to a friend
- G. Used a payday loan
- H. Used a rent to own store
- I. Put money in savings account
- J. Put money in retirement account
- K. None of the above

Q21. How do you plan to use your tax refund? (Please check **ALL** that apply)

- A. Food or clothing
- B. Pay bills
- C. Rent, home repair, mortgage
- D. Doctor or other medical bills
- E. Tuition or education expenses
- F. Child care
- G. Savings
- H. Spend it on something else
- I. Buy or repair a car
- J. Don't know
- K. Not getting a refund

Q22. Did your employer treat you unfairly? (Please check **ALL** that apply)

- A. I was **paid less than minimum wage** (\$7.25 per hour.)
- B. I worked more than 40 hours a week, but was **not paid time and a half for overtime**.
- C. I worked a split shift and earned minimum wage, but **didn't get an extra hour of pay** for work days that spanned more than 10 hours.
- D. I was not paid for time worked "off the clock".
- E. I was **not given a meal break** when I worked more than 6 hours a day.
- F. My employer **made me pay for** tools, uniforms, uniform cleaning, or travel expenses.
- G. My employer **charged me penalties** for being late, breaking equipment, customer theft, or cash drawers coming up short.
- H. None of the above

Q23. Volunteer use: C.A.S.H. Advisor Initials \_\_\_\_\_

Q24. Volunteer use: Tax Preparer Initials \_\_\_\_\_

Q25. Volunteer use: Quality Reviewer Initials \_\_\_\_\_

PLEASE PRINT CLEARLY

- Name: \_\_\_\_\_
- What county do you live in? \_\_\_\_\_ What school district do you live in? \_\_\_\_\_
- Did you pay child support through the support collection unit for at least one-half of the year?  Yes  No
- Did you (or your spouse) volunteer as an active fire fighter or ambulance worker for the entire year?  Yes  No
- **Please provide your names and social security numbers for your tax return:**  
 Name: \_\_\_\_\_ Soc Sec Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
 Spouse: \_\_\_\_\_ Soc Sec Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_
- **Please provide the names and social security numbers of your dependents:**  
 Dependent: \_\_\_\_\_ Soc Sec Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
 Dependent: \_\_\_\_\_ Soc Sec Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
 Dependent: \_\_\_\_\_ Soc Sec Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
 Dependent: \_\_\_\_\_ Soc Sec Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
 Dependent: \_\_\_\_\_ Soc Sec Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_
- **Please provide account information for refund direct deposit:** *Volunteer: Verify Routing & Account Numbers*  
 Bank Routing Number: \_\_\_\_\_ Account Number: \_\_\_\_\_  Savings  Checking  
 \_\_\_\_\_  
 Bank Routing Number : \_\_\_\_\_ Account Number: \_\_\_\_\_  Savings  Checking  
 \_\_\_\_\_

**C.A.S.H. Advisor Quality Review**

**Verify that you completed all the steps:**

- Checked client's identity, eligibility & documentation
- Completed "Consent for Use and Disclosure" – both sides are signed
- Shared information about relevant community resources
- Client has the Community Services Brochure and is aware of 2-1-1
- Encouraged direct deposit (saving account, checking account, prepaid card)
- Encouraged saving part of tax refund (saving account, US Saving Bonds)
- All paperwork is complete (IRS Intake Sheet pages 1 -3; C.A.S.H. Questionnaire: Q1 - Q25)

**Alert the Site Manager if :**

- Client has military pay
- Yes or Unsure is checked on page 2 of the IRS Intake Form for:
  - Part III, #8: Sale of Stocks, Bonds or Real Estate (1099-B)
  - Part V, #1: Health Savings Account (1099-SA, 5498-SA)
  - Part V, #2: Debt Forgiveness (1099-C)

# Intake/Interview & Quality Review Sheet

**Section A. You should complete Pages 1-3**

Thank you for allowing us to prepare your tax return. **You are responsible for the information on your return so please provide complete and accurate information to the certified tax preparer.** If you have any questions please ask your preparer.

**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 a valid drivers license or other government issued 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. Contact Information Phone: _____ Cell Phone: _____ E-mail: _____			
5. Your Date of Birth	6. Your Job Title	Are you:	7. 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 Job Title	Is Spouse:	11. 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 anyone claim you or your spouse on their tax return? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure			

**Part II. Marital Status and Household Information**

1. As of December 31, 2011, were you?
- Single
- Married: Did you live with your spouse during any part of the last six months of 2011?  Yes  No
- Divorced or Legally Separated: Date of final decree or separate maintenance agreement: \_\_\_\_\_
- Widowed: Year of spouse's death: \_\_\_\_\_

2. List names below of everyone who lived in your home in 2011 (other than you or spouse). Also list anyone who lived outside of your home that you supported during 2011. If additional space is needed please check here  and list on page 3.

Name (first, last) Do not enter your name or spouse's name below.	Date of Birth (mm/dd/yy)	Relationship to you (e.g. daughter, son, mother, sister, none)	Number of months lived in your home in 2011	US Citizen or resident of the US, Canada or Mexico in 2011 (yes/no)	Marital Status as of 12/31/11 (S/M)	Full-time student in 2011 (yes/no)	Received less than \$3700 income in 2011 (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 unethical behavior to IRS, email us at [wi.voltax@irs.gov](mailto:wi.voltax@irs.gov) or call toll free 1-877-330-1205.

**To check the status of your REFUND visit "Where's My Refund?" on [www.irs.gov](http://www.irs.gov) or call 1-800-829-1954 for assistance.**

**Section A. Please complete – check Yes, No or Unsure to all questions below. Please ask if you need help.**

**Part III. Income – In 2011, did you (or your spouse) receive:**

**Yes No Unsure**

- 1. Wages or Salary? (Form 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)
- 5. Refund of state/local income taxes? (Form 1099-G)
- 6. Alimony Income?
- 7. Self-Employment payments (such as cash received for services, small business)? (Form 1099-MISC)
- 8. Income (or loss) from the sale of Stocks, Bonds or Real Estate (including your home)? (Forms 1099-S, 1099-B)
- 9. Disability Income (such as payments from insurance or workers compensation)? (Forms 1099-R, W-2)
- 10. Distributions from Pensions, Annuities, and/or IRA? (Form 1099-R)
- 11. Unemployment Compensation? (Form 1099-G)
- 12. Social Security or Railroad Retirement Benefits? (Forms SSA-1099, RRB-1099)
- 13. Income (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 2011 Did you (or your spouse) pay:**

**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 tuitions, books, fees, etc.? (Form 1098-T)
- 4. Unreimbursed employee business expenses (such as teacher supplies, uniforms or mileage)?
- 5. Medical expenses (including health insurance premiums)?
- 6. Home mortgage interest? (Form 1098)
- 7. Real estate taxes for your home or personal property taxes for your vehicle? (Form 1098)
- 8. Charitable contributions?
- 9. Child/dependent care expenses, such as day-care?

**Part V. Life Events – In 2011 Did you (or your spouse):**

**Yes No Unsure**

- 1. Have a Health Savings Account? (Forms 5498-SA, 1099-A, W-2 with code W in Box 12)
- 2. Have debt from a mortgage or credit card canceled/forgiven by a commercial lender? (Form 1099-C)
- 3. Buy, sell or have a foreclosure of your home? (Form 1099-A)
- 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 2008?
- 8. Pay any student loan interest? (Form 1098-E)
- 9. Make estimated tax payments or apply last year's refund to your 2011 tax? If so how much? \_\_\_\_\_
- 10. Attend school as a full time student? (Form 1098-T)
- 11. Adopt a child?
- 12. File a 2010 federal tax return containing a "capital loss carryover" on Form 1040 Schedule D?

**Presidential Election Campaign Fund:** (If you check a box, your tax or refund will not change.)

Check here if you, or your spouse if filing jointly, want \$3 to go to this fund  You  Spouse



**Section B. For Certified Volunteer Preparer Completion**

**Remember:** You are the link between the taxpayer's information and a correct tax return. Verify the taxpayer's information on pages 1, 2 & 3 is complete. All questions must be discussed with the taxpayer and all "Unsure" responses should be changed to "Yes" or "No".

**Must be completed by Certified Volunteer only if persons are listed in Part II Question 2**

**Check 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 50% of their own support? **If yes, which ones:**

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Yes  No 4. Did the taxpayer provide more than half the support for any of the persons in Part II, Question 2? **If yes, which ones:**

N/A

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

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:**

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Reminders**

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

**Section C. For Certified Quality Reviewer Completion**

**Confirm each item after reviewing the tax return and verifying that it reflects correct tax law application to the information provided by the taxpayer.**

1. **Sections A & B** of this form are complete.

2. **Taxpayer's identity, address and phone numbers** were verified.

3. **Names, SSNs, ITINs or EINs, 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 **information** 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.

**All tax law issues above have been addressed and necessary changes have been made.**

**If direct deposit or debit was elected, checking/saving account and routing information match the supporting documents.**

**Correct SIDN and EFIN are shown on the return.**

**Additional Tax Preparer Notes:**

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_