

**Intake and Interview Sheet**

**You (and Spouse) will need:**

- *Proof of Identity*
- *Copies of ALL W-2, 1098, 1099 forms*
- *Social Security (SSN) or Individual Tax Identification Number (ITIN) for all Individuals to be listed on the return*
- *Child care provider's identification number*
- *Banking information (checking and/or savings account) for direct deposit/debit*
- *Amounts/dates of estimated or other tax payments made, etc.*
- *Amounts of other income*

**Part I: Taxpayer Information**

1. Your First Name		M.I.	Last Name		2. SSN or ITIN	
3. Date of Birth (mm/dd/yyyy)	4. US Citizen or Resident Alien <input type="checkbox"/> Yes <input type="checkbox"/> No		5. Legally Blind <input type="checkbox"/> Yes <input type="checkbox"/> No		6. Totally and Permanently Disabled <input type="checkbox"/> Yes <input type="checkbox"/> No	
7. Spouse's First Name		M.I.	Last Name		8. SSN or ITIN	
9. Date of Birth (mm/dd/yyyy)	10. US Citizen or Resident Alien <input type="checkbox"/> Yes <input type="checkbox"/> No		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. Address			Apt #	City		State   Zip Code
14. Phone Number and e-mail address Phone: ( ) e-mail:				15. Can you or your spouse be claimed as a dependent on the income tax return of any other person for 2007? <input type="checkbox"/> Yes <input type="checkbox"/> No		
16. <b>On December 31, 2007:</b>						
a. Were you: <input type="checkbox"/> Single <input type="checkbox"/> Legally Married <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed						
b. If married, were you living together (with your husband/wife) <b>on/after June 30, 2007?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No						
c. Was your spouse deceased? If yes, provide the date of death. _____ (mm/dd/yyyy)						
17. Did you pay more than half the cost of keeping up the home for the year? <input type="checkbox"/> Yes <input type="checkbox"/> No						

**Part II. Family and Dependent Information – Do not include you or your spouse.**

*Print the name of everyone who lived in your home and outside your home that you supported during the year.*

Name (first, last)	Date of Birth mm/dd/yyyy	Social Security Number or ITIN	Relationship to you (son, daughter, etc.)	Number of months person lived with you in 2007	US Citizen, Resident of US, Canada or Mexico (yes or no)	Is the dependent a full time student born before 1989? (yes or no)
(a)	(b)	(c)	(d)	(e)	(f)	(g)

**Paperwork Reduction Act Notice**

The Paperwork Reduction Act requires that the IRS display an OMB control number on all public information requests. The OMB Control Number for this study is 1545-1964. Also, if you have any comments regarding the time estimates associated with this study or suggestion on making this process simpler, please write to the Internal Revenue Service, Tax Products Coordinating Committee, SE:W:CAR:MP:T:T:SP, 1111 Constitution Ave. NW, Washington, DC 20224.

**Volunteer Preparer Instructions:** In order to complete an accurate return you must conduct a thorough interview. This intake sheet does not constitute a complete interview. **Remember to ask the taxpayer for all their documentation.** Based on your interview with the taxpayer be sure to note changes to information on the intake sheet. Confirm information on page 1 with taxpayer.

Use the decision trees in **Publication 4012,**  
**Volunteer Resource Guide** while discussing the questions below with the taxpayer.

### Part III. Filing Status & Dependency Determination

Based on the interview, the filing status of the taxpayer is:  Single  MFJ  MFS\*  HOH  QW

\*Spouse Name \_\_\_\_\_ Social Security Number \_\_\_\_\_

- Yes  No 1. Did you provide more than 50% of the support for the dependents claimed?  
 Yes  No 2. Can anyone else claim any of these dependents on their income tax return?  
 Yes  No 3. Were any of these dependents permanently and totally disabled in 2007?  
 Yes  No 4. Did any of these dependents file a joint return for 2007?  
\_\_\_\_\_ 5. Based on the interview, how many individuals qualify as dependents for this return?

## COMMONLY USED INCOME AND EXPENSES

### Part IV. Income – In 2007, did you (or your spouse) receive:

- Yes  No 1. Wages or Salary (include W-2s for all jobs worked during the year)  
 Yes  No 2. Disability income  
 Yes  No 3. Interest/Dividends from: checking or savings account, bonds, CDs, or brokerage account  
 Yes  No 4. State tax refund (may be taxable if you itemized last year)  
 Yes  No 5. Alimony income  
 Yes  No 6. Tip income  
 Yes  No 7. Pension and/or IRA distribution  
 Yes  No 8. Unemployment (1099-G)  
 Yes  No 9. Social Security or Railroad Retirement Benefits (1099-SSA or RRB)  
 Yes  No 10. Self Employment Income - business, farm, hobby (**1099-Misc or any earned income not reported on W-2**)  
 Yes  No 11. Other Income such as gambling winnings, awards, prizes and Jury Duty pay, etc.

### Part V. Adjustments – In 2007 did you (or your spouse) make:

- Yes  No 1. Contributions to IRA, 401k or other retirement account  
 Yes  No 2. Alimony payments (if yes, you must provide the name and SSN of the recipient)  
 Yes  No 3. Education related expenses

### Part VI. Itemized Deductions – Did you (or your spouse) have 2007 expenses for:

- Yes  No 1. Un-reimbursed medical expenses  
 Yes  No 2. Home mortgage payments (interest and taxes – see Form 1098)  
 Yes  No 3. Charitable contributions

### Part VII. Credits – In 2007 did you (or your spouse) have:

- Yes  No 1. Child/dependent care expenses that allow you (and your spouse-if MFJ) to work  
 Yes  No 2. Educational expenses for you (or your spouse) and/or your dependents  
 Yes  No 3. Retirement Contribution to a traditional IRA, Roth IRA or 401k as shown on Form W-2

### Part VIII. Earned Income Tax Credit Determination – EITC Eligibility

- Yes  No 1. Was EITC previously disallowed? (if yes, taxpayer may not be eligible for EITC)  
 Yes  No 2. Based on the interview, is the taxpayer qualified for EITC?