## 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 providers' identification number
- Taxpayers' banking information (voided check and/or savings deposit slip) for refund deposits
- Estimated tax payments made, etc.
- Amounts of other income


## Part I: Taxpayer Information


18. Was your spouse deceased? If yes, provide the date of death. $\qquad$

## 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 | Date of Birth <br> $\mathrm{mm} / \mathrm{dd} / \mathrm{yyyy}$ | Social Security <br> Number or ITIN | Relationship <br> (son, daughter, etc.) | Months person <br> lived with you in <br> 2006 <br> (a) | US Citizen, <br> Resident of US, <br> Canada or <br> Mexico? <br> (f) | Is the dependent <br> a full time student? <br> (yes or no) <br> (g) |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | (b) |  | (c) |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

[^0]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 suggestions 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.
Catalog Number 38836A
Form 13614 (Rev. 8-2006)

## Part III. Filing Status \& Dependency Determination

Volunteers: In order to conduct a thorough interview, please use the decision trees, interview tips and informational charts in Publications 4012 and/or 17 in addition to this intake sheet. This intake sheet does not constitute a complete interview.

Filing Status Determination - Use Publications 4012 and/or 17 to determine filing status.

1. Based on the interview, the filing status of the taxpayer is: $\square$ Single $\square$ MFJ $\square$ MFS* $\square \mathrm{HH} \square$ Qualifying Widow(er)
*Spouse Name $\qquad$ Social Security Number
Dependency Determination - Use Publications 4012 and/or 17 to determine dependency exemptions.
$\square$ Yes $\square$ No $\quad$ 2. Did the taxpayer provide more than $50 \%$ of the support for the dependents claimed?
$\square$ Yes $\square$ No $\quad$ 3. Is there a signed Form 8332 or a divorce decree that allows someone else to claim

the dependent(s)? | $\square$ Yes $\square$ No | 4. Is the dependent permanently and totally disabled? |
| :--- | :--- | :--- |
|  | 5. Based on the interview, how many individuals qualify as dependents for this return? |

## COMMONLY USED INCOME AND EXPENSES

Volunteers: Please use Publication 17, Your Federal Income Tax for Individuals and Publication 4012, Volunteer Resource Guide while discussing the questions below with the taxpayer.

## Part IV. Income - In 2006, did you receive:

| $\square$ Yes $\quad \square$ No | 1. Wages or Salary (Include W-2s for all jobs worked during the year) |  |
| :--- | :--- | :--- |
| $\square$ Yes | $\square$ No | 2. Disability income |
| $\square$ Yes | $\square$ No | 3. Interest from: checking or savings account, bonds, dividends, CD, or brokerage account |
| $\square$ Yes | $\square$ No | 4. State tax refund (may be taxable if you itemized last year) |
| $\square$ Yes | $\square$ No | 5. Alimony income |
| $\square$ Yes | $\square$ No | 6. Tip income |
| $\square$ Yes | $\square$ No | 7. Pension and/or IRA distribution |
| $\square$ Yes | $\square$ No | 8. Unemployment |
| $\square$ Yes | $\square$ No | 9. Social Security or Railroad Retirement |
| $\square$ Yes |  |  |
| $\square$ No | 10. Self Employment |  |
| $\square$ Yes |  |  |
| No | 11. Other Income such as gambling winnings, awards, prizes and J ury duty |  |

Part V. Adjustment - Did you have 2006 expenses for:

| $\square$ Yes | $\square$ No | 1. IRA or other retirement account |
| :--- | :--- | :--- |
| $\square$ Yes | $\square$ No | 2. Alimony payments paid (If yes, you must provide the name and SSN of the recipient) |
| $\square$ Yes | $\square$ No | 3. Education related expenses |

Part VI. Itemized Deductions - Did you have 2006 expenses for:

1. Un-reimbursed medical expenses
2. Home mortgage payments (interest and taxes - see Form 1098)
3. Charitable contributions

Part VII. Credits - In 2006, did you have:

| $\square$ Yes $\quad \square$ No | 1. Child/dependent care expenses that allow you (and your spouse-if MFJ) to wor |
| :--- | :--- | :--- |
| $\square$ Yes $\quad \square$ No | 2. Educational expenses for you or your dependents |
| $\square$ Yes $\quad \square$ No | 3. Retirement Savings Contribution | | Part VIII. Earned Income Tax Credit Determination - EITC Eligibility |
| :--- |
| $\square$ Yes $\square$ No |
| $\square$ Yes $\quad \square$ No | 2. Was EITC previously disallowed (if yes taxpayer may not be eligible for EITC)


[^0]:    Paperwork Reduction Act Notice

