

EZ Refund Interview Sheet

◆ How would you like to receive your money?

- ☐ A Cashier's Check
☐ Direct Deposit **(Please provide a voided check)**

◆ How would you like to receive your State Refund?

- ☐ In 7-10 Days (State PERC) ☐ Check mailed to your home

◆ What is your marital status?

- ☐ Single - A taxpayer whose marital status is unmarried
☐ Head of Household - An unmarried taxpayer who pays half of the cost of maintaining a home for the tax year and is the principal residence of a qualifying dependent for over half of the year.
☐ Married - You and Your spouse want to file together
☐ Married Filing Separate - You and Your spouse want to file separate ****Please provide Spouse information below****
☐ Widow(er) - With Qualifying Dependent
☐ I don't know - Help Me

Can you or your spouse be claimed on another person's return? ☐ YES ☐ NO If yes, who? ☐ You ☐ Spouse

Do you plan to Itemize Deductions this year? ☐ YES ☐ NO

Do you have deductions for any of the following items for this year? (You must have documentation for each deduction)

___ Alimony ___ Traditional IRA Contributions ___ Real Estate and/or Personal Property Taxes
___ Student Loan Interest ___ Educational Expenses ___ Home Mortgage Interest
___ Moving Expenses ___ Medical Expenses ___ Charitable Contributions ___ Un-reimbursed Job Expenses

Are you filing a State return this year? ☐ YES ☐ NO If yes, please complete the following information: **State** _____

County: _____ City: _____ School District: _____

Did you work in another State? ☐ YES ☐ NO If yes, how many months? _____ What state(s)? _____

(Processing Note: Enter Additional State Information in Note section)

Do you want Audit Shield? ☐ YES ☐ NO

(Audit Shield is a Warranty program for tax returns. The program protects against software miscalculations and certain preparer errors, by providing reimbursement of up to a total of \$2,500 for any penalties, interest or additional taxes assessed by the IRS on your qualifying federal tax return. Please note that Audit Shield reimburses the taxpayer and does not pay the IRS directly. The **one-time Audit Shield fee of \$29.95** protects a qualifying federal return for up to three years.)

Taxpayer Name: _____ SSN # _____ Date of Birth: _____

Occupation: _____

Spouse Name: _____ SSN # _____ Date of Birth: _____

Occupation: _____

Home Address: _____ City: _____ State: _____ Zip: _____

Taxpayer Phone (daytime) _____ Spouse Phone (daytime) _____

Taxpayer Phone (evening) _____ Spouse Phone (evening) _____

Are you or your spouse legally blind? ☐ YES ☐ NO If yes, who? ☐ You ☐ Spouse ☐ Both

Was your home in the US for more than half the year? ☐ YES ☐ NO If yes, who? ☐ You ☐ Spouse ☐ Both

(Military personnel on active duty outside of the U.S. are considered living in the U.S. during duty period)

◆ Dependent Information - If you have dependents, complete the information below.

Dependent (Full Names)	Date of Birth	SSN	Relationship	Disabled (D) Student (S) None (N)	**Status (1,2,3,0)	Months In Home

**** 1 - Child Lives w/ you 2 - Child lives apart from you (Divorce / Separation) 3 - All other Dependents 0 - Non-dependent child lives w/ you**

◆ **Child Care - If you paid child care for your dependents, complete the section below.**

Providers Name: _____ EIN or SSN of Provider: _____
 Address: _____ # of Children in Day Care: _____ Total Amount Paid: _____
 City, State, Zip: _____ Phone: _____
 Amount Paid per child – Child 1 \$ _____ Child 2 \$ _____ Child 3 \$ _____ Child 4 \$ _____

◆ **General Tax Questions**

Did you purchase a home in 2008 and receive a first-time homebuyer credit on your 2008 tax return? ☐ YES ☐ NO
 Are you a member of the military/intelligence service who may qualify for a homebuyer credit? ☐ YES ☐ NO
 Did you sell, convert to business use, or no longer primarily reside in a home for which you previously received a homebuyer credit? ☐ YES ☐ NO
 Processing Note: If any questions are marked YES, please call Refunds Today for assistance

◆ **EIC Qualification Checklist**

Can any other person(s) claim EIC for your qualifying children? ☐ YES ☐ NO
 If you took EIC last year, was the EIC reduced or disallowed for any reason other than math or clerical error? ☐ YES ☐ NO
 1. Do you have any unresolved EIC denials for which Form 8862 has not been filed?..... ☐ Yes ☐ NO
 2. Do you and/or your spouse have social security numbers that allow you to work?..... ☐ YES ☐ No
 3. Can anyone else claim you or your spouse as a dependent on their tax return?..... ☐ Yes ☐ NO
 4. Were you either: a U.S. Citizen or Resident Alien for the entire year, or if you are married, were both you and your spouse a U.S. Citizen or Resident Alien for the entire year?..... ☐ YES ☐ No

Complete this section if you have children		Child 1	Child 2	Child 3
5. Is your qualifying child a: son, daughter, adopted child, grandchild, stepchild, brother, sister, niece, nephew, or eligible foster child, who you cared for as your own child?.....	<input type="checkbox"/> YES <input type="checkbox"/> No	<input type="checkbox"/> YES <input type="checkbox"/> No	<input type="checkbox"/> YES <input type="checkbox"/> No	<input type="checkbox"/> YES <input type="checkbox"/> No
If your child is a foster child, was the child placed in the home by an authorized agency?.....	<input type="checkbox"/> YES / N/A <input type="checkbox"/> No	<input type="checkbox"/> YES / N/A <input type="checkbox"/> No	<input type="checkbox"/> YES / N/A <input type="checkbox"/> No	<input type="checkbox"/> YES / N/A <input type="checkbox"/> No
6. If your child is married and not filing their own return, are you claiming the child as a dependent?.....	<input type="checkbox"/> YES / N/A <input type="checkbox"/> No	<input type="checkbox"/> YES / N/A <input type="checkbox"/> No	<input type="checkbox"/> YES / N/A <input type="checkbox"/> No	<input type="checkbox"/> YES / N/A <input type="checkbox"/> No
7. Can another person (other than your spouse who you are filing jointly with) claim your child as a qualifying child?.....	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

Processing Note: If question 7 is marked YES, please call Refunds Today for assistance

◆ **PIN Information (Personal Identification Number) - Choose any 5-digit number that you will use as identification for this return**

This PIN gives authorization to E-file your tax return electronically. It also fulfills the CONSENT to DISCLOSE and USE your tax return information for your bank product and Audit Shield application/determination forms for 2011. You will receive copies of these disclosures for your records.

Your 5-digit PIN: _____ Your Spouse's 5-digit PIN: _____

◆ **ID Verification (please present to interviewer)**

Taxpayer ID Type: _____ Spouse ID Type: _____
 ID Number: _____ ID Number: _____
 Did you or your spouse request a Bank Product last year? ☐ YES ☐ NO
 Are you or your spouse regular or reserve member of the Armed Forces serving on active duty or are you a dependent of a member of the Armed Forces on active duty? ☐ YES ☐ NO

◆ **Customer Information Disclosure**

We will prepare your 2011 Form 1040-US Individual Income Tax Return & applicable State Tax Returns if any are required.
 We understand that you will provide us with the basic information required for us to perform the services as described and that you are responsible for the accuracy and completeness of that information. As such, in connection with the preparation of your return, you represent to us the following in your complete return/interview: all information is complete and accurate, all social security numbers and dates of birth for the taxpayer, spouse and dependents are correct according to those on file with the Social Security Administration and the IRS, you have reported all income earned by you and/or spouse including income not reported to you by third parties, and you have not presented to us any fraudulent statements or misrepresented any information.
 We suggest you retain all records and documents related to this return for a period of five (5) years should it ever be necessary for you to substantiate any information reported on your return. We do not assume any responsibility for the information you or your spouse provided. A \$10 correction fee may be assessed for any IRS rejection corrections. If you agree with the statement outlined above, please sign below.

Your Signature _____ Date _____

Your Spouse's Signature _____ Date _____

DEDUCTIONS

Income Deductions

Are you an educator? ☐ YES ☐ NO If yes, did you have any expenses that were not reimbursed? \$ _____

Did you make a contribution to an IRA Account during 2011? ☐ YES ☐ NO If yes, how much? \$ _____

Did your spouse make an IRA contribution during 2011? ☐ YES ☐ NO If yes, how much? \$ _____

Did you pay any interest on student loans? ☐ YES ☐ NO If yes, how much? \$ _____

Did you attend school? If yes, specify tuition and fees paid. ☐ YES ☐ NO If yes, how much? \$ _____

What level of college: _____

Did your spouse attend school? Specify tuition and fees paid. ☐ YES ☐ NO If yes, how much? \$ _____

What level of college: _____

Did you pay alimony? ☐ YES ☐ NO If yes, how much? \$ _____

Alimony Recipient SSN: _____

Did you move in 2010 because of your work? ☐ YES ☐ NO If yes, complete the fields below.

What city did you move to? _____

Miles from old home to new workplace: _____

What was your cost to move your household goods? _____

Miles from old home to old workplace: _____

Travel and lodging expenses paid: \$ _____

Complete this section if you have additional deductions:

Medical Expenses \$ _____

Home Loan Interest \$ _____

State taxes due in 2012 but paid in 2011 \$ _____

Cash Donations/Contributions \$ _____

Real Estate Taxes \$ _____

Non-Cash Donations/Contributions \$ _____

Personal Property Taxes \$ _____

Tax Preparation Fees Paid \$ _____

Gambling Losses \$ _____

Job Related Unreimbursed Expenses & Other Deductible Expenses

Unreimbursed expenses are expenses that are not paid by your employer. Examples of unreimbursed job related expenses are: union dues, professional dues, uniforms, protective clothing, job search expenses. Other deductible expenses are: IRA maintenance fees, legal/accounting fees related to your income taxes, safe deposit box rental fees, and unemployment from prior year repaid in current year.

Description	Amount

Description	Amount

BUSINESS INCOME

What type of business do you own? (Principal Business) _____

What is the EIN (Employer ID Number), if any? _____

Business Name: _____

Business Address: _____ City, State, Zip: _____

Figure your Net Profit

Total Money received before expenses: \$ _____

Total Expenses (Enter details in **NOTE** section on back page): \$ _____

Vehicle Expenses

Complete this section **ONLY** for your vehicle that was used for business purposes.

This does not include miles driven to and from work.

When did you start using your vehicle for business purposes? (mm/dd/yyyy) _____

Vehicle Year: _____

Of the total number of miles driven during 2011, enter the number of miles you used your vehicle for: _____

Vehicle Make: _____

Vehicle Model: _____

Total Miles all year Business Miles 1/1-6/30 _____
Business Miles 7/1-12/31 _____

Commuting Miles Other Miles

Do you (or your spouse) have another vehicle available for personal use?..... ☐ YES ☐ NO

Was your vehicle available for personal use during off-duty hours?..... ☐ YES ☐ NO

Do you have evidence to support your deductions?..... ☐ YES ☐ NO

If YES, is it written?..... ☐ YES ☐ NO

If you have any additional information that needs to be addressed, please use the **NOTES** section on the next page.

NOTES

If you have information that you haven't included elsewhere, please write it on the lines below.
Please be as specific as you can.

[illegible]