

FAM-05 McCook Scenario

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|---------------------------------------|---|-----------------|
| Form 13614-C (Rev. 10-2012) | Department of the Treasury – Internal Revenue Service Intake/Interview & Quality Review Sheet | OMB # 1545-1964 |
|---------------------------------------|---|-----------------|

Section A. Complete Pages 1-3

You are responsible for the information on your return so please provide complete and accurate information to the IRS certified volunteer 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.
- Picture ID (such as a valid driver's license or other government issued ID for you and your spouse, if applicable).

Part I. Your Personal Information

| | | | |
|--|---|--|---|
| 1. Your First Name Troy | M. I. H | Last Name McCook | Are you a U.S. Citizen? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| 2. Your Spouse's First Name Yvonne | M. I. | Last Name McCook | Is your spouse a U.S. Citizen? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| 3. Mailing Address 30911 Charles Busby Road | Apt# | City Paterson | State NJ Zip Code 07524 |
| 4. Contact Information Phone: 973-444-5555 Cell Phone: E-mail: | | | |
| 5. Your Date of Birth 09/11/1938 | 6. Your Job Title Retired | Are you: 7. Legally Blind <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 8. Totally and Permanently Disabled <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| 9. Your Spouse's Date of Birth 12/07/1941 | 10. Your Spouse's Job Title Retired | Is Your Spouse: 11. Legally Blind <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 12. Totally and Permanently Disabled <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| 13. Can anyone claim you or your spouse on their tax return? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unsure | | | |

Part II. Marital Status and Household Information

1. As of December 31, 2012, were you?
- Single
- Married: Did you live with your spouse during any part of the last six months of 2012? 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 2012 (other than you or spouse). Also list anyone who lived outside of your home that you supported during 2012. 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. (a) | Date of Birth (mm/dd/yy) (b) | Relationship to you (e.g. daughter, son, mother, sister, none) (c) | Number of months lived in your home in 2012 (d) | US Citizen or resident of US, Canada or Mexico in 2012 (yes/no) (e) | Marital Status as of 12/31/12 (S/M) (f) | Full-time Student in 2012 (yes/no) (g) | Received less than \$3800 income in 2012 (yes/no) (h) |
|---|------------------------------------|--|--|---|---|--|---|
| | | | | | | | |
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To check the status of your REFUND visit "Where's My Refund?" on www.irs.gov or call 1-800-829-1954 for assistance.

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 or call toll free 1-877-330-1205.

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

Part III. Income – In 2012, did you (or your spouse) receive:

- | Yes | No | Unsure | |
|-------------------------------------|-------------------------------------|--------------------------|--|
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 1. Wages or Salary? (Form W-2) If yes, how many jobs did you have in 2012? _____ |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 2. Tip Income? |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 3. Scholarships? (Forms W-2, 1098-T) |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 4. Interest/Dividends from: checking/savings accounts, bonds, CDs, brokerage? (Forms 1099-INT, 1099-DIV) |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 5. Refund of state/local income taxes? (Form 1099-G) |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 6. Alimony Income? |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 7. Self-Employment Income? (Form 1099-MISC) |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 8. Cash/check payments for any work performed not reported on Forms W-2 or 1099? |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 9. Income (or loss) from the sale of Stocks, Bonds or Real Estate (including your home)? (Forms 1099-S, 1099-B) |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 10. Disability Income (such as payments from insurance, or workers compensation)? (Forms 1099-R, W-2) |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 11. Distributions from Pensions, Annuities, and/or IRA? (Form 1099-R) |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 12. Unemployment Compensation? (Form 1099-G) |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 13. Social Security or Railroad Retirement Benefits? (Forms SSA-1099, RRB-1099) |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 14. Income (or loss) from Rental Property? |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 15. Other Income: (gambling, lottery, prizes, awards, jury duty, etc.)? (Forms W-2 G, 1099-MISC) Specify: _____ |

Part IV. Expenses – In 2012 Did you (or your spouse) pay:

- | Yes | No | Unsure | |
|--------------------------|-------------------------------------|--------------------------|---|
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 1. Alimony: If yes, do you have the recipient's SSN? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 2. Contributions to a retirement account? <input type="checkbox"/> IRA <input type="checkbox"/> Roth IRA <input type="checkbox"/> 401K <input type="checkbox"/> Other |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 3. Educational expenses for yourself, spouse or dependents, such as tuitions, books, fees, etc.? (Form 1098-T) |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 4. Unreimbursed employee business expenses (such as uniforms or mileage)? |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 5. Medical expenses (including health insurance premiums)? |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 6. Home mortgage interest? (Form 1098) |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 7. Real estate taxes for your home or personal property taxes for your vehicle? (Form 1098) |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 8. Charitable contributions? |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 9. Child or dependent care expenses such as day-care? |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 10. For supplies used as an eligible educator such as a teacher, teacher's aide, counselor, etc.? |

Part V. Life Events – In 2012 Did you (or your spouse):

- | Yes | No | Unsure | |
|--------------------------|-------------------------------------|--------------------------|---|
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 1. Have a Health Savings Account? (Forms 5498-SA, 1099-SA, W-2 with code W in Box 12) |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 2. Have debt from a mortgage or credit card canceled/forgiven by a commercial lender? (Forms 1099-C, 1099A) |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 3. Buy, sell or have a foreclosure of your home? (Form 1099-A) |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 4. Have Earned Income Credit (EIC) disallowed in a prior year? If yes, for which tax year? _____ |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 5. Purchase and install energy-efficient home items? (such as windows, furnace, insulation, etc.) |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 6. Live in an area that was affected by a natural disaster? If yes, where? _____ |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 7. Receive the First Time Homebuyers Credit in 2008? |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 8. Pay any student loan interest? (Form 1098-E) |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 9. Make estimated tax payments or apply last year's refund to your 2012 tax? If so how much? _____ |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 10. Attend school as a full time student? (Form 1098-T) |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 11. Adopt a child? |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 12. File a 2011 federal tax return containing a "capital loss carryover" on Form 1040 Schedule D? |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 13. Become a victim of identity theft? |

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

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Additional Information and Questions related to the preparation of your return

Many free tax preparation sites operate by receiving grant money. The data from the following questions may be used by this site to apply for these grants. Your answers will be used only for statistical purposes.

Other than English what language is spoken in the home? Spanish

Are you or a member of your household considered disabled? Yes No

If you are due a refund or have a balance due:

- Ask your preparer about Direct Deposit. It is the fastest, safest way to receive your tax refund. When you combine e-file and direct deposit, the IRS will likely issue your refund in as few as 10 days.
- Ask your preparer about purchasing Series I U.S. Savings Bonds with part or all of your tax refund. Savings bonds are a safe and secure way to invest in the future. Purchase I Bonds for yourself or others in multiples of \$50 and earn interest for up to 30 years.

If you are due a refund, would you like a direct deposit?

Yes No

If you are due a refund, would you like information on how to purchase U.S. Savings Bonds?

Yes No

If you are due a refund, would you like information on how to split your refund between accounts?

Yes No

If you have a balance due, would you like to make a payment directly from your bank account?

Yes No

Additional comments:

Under no circumstances will the Internal Revenue Service tolerate discriminatory treatment of taxpayers by its employees, or individuals who volunteer or work at Volunteer Income Tax Assistance (VITA) and Tax Counseling for the Elderly (TCE) sites. No taxpayer shall be subject to discrimination on the basis of sex, race, color, national origin, reprisal, disability or age in educational programs or activities supported by the Department of the Treasury – Internal Revenue Service.

Taxpayers with a disability may require a reasonable accommodation in order to participate or receive the benefits of a program or activity supported by the Department of the Treasury – Internal Revenue Service. Site Coordinators and Managers are responsible for ensuring that requests for reasonable accommodation are granted when the request is made by a qualified individual with a disability.

If a qualified taxpayer believes that he or she has been discriminated against based on sex, race, color, national origin, disability, reprisal or age, they can file a complaint with the Department of the Treasury – Internal Revenue Service. All written complaints should be sent to:

Director, Civil Rights Division
Internal Revenue Service
1111 Constitution Avenue, NW, Rm. 2413
Washington, DC 20224

For all inquiries concerning taxpayer civil rights, contact us at the address referenced above, or e-mail us at eo.external.civil.rights@irs.gov.

STOP HERE!

Thank you for completing this form.

Paperwork Reduction Act Notice

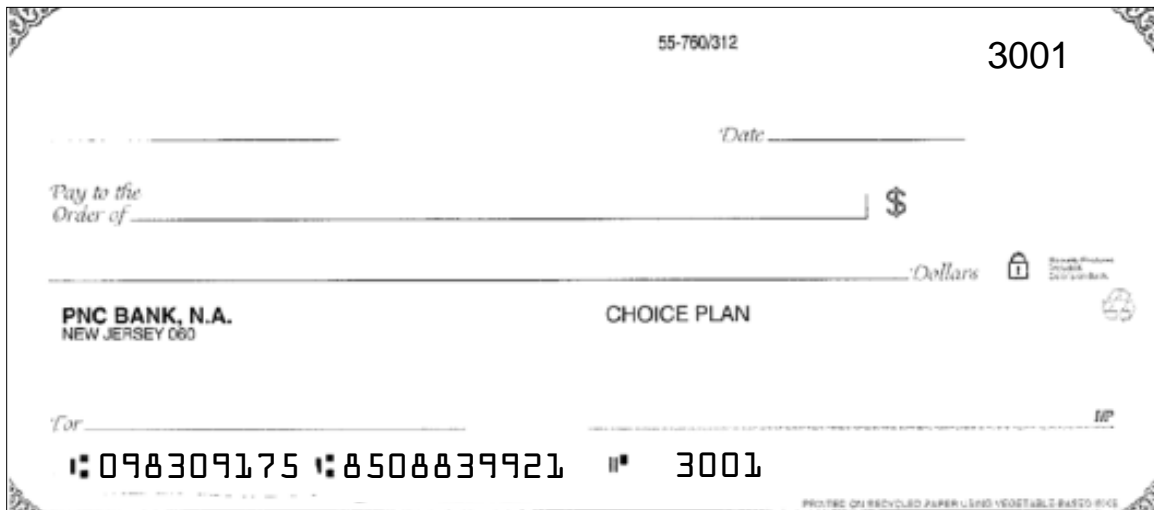
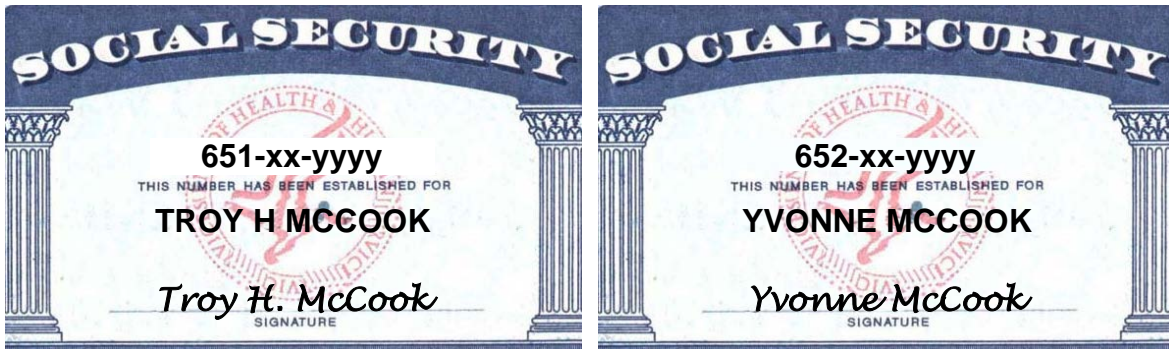
The Paperwork Reduction Act requires that the IRS display an OMB control number on all public information requests. The OMB Control Number for this study is 1545-1964. Also, if you have any comments regarding the time estimates associated with this study or suggestion on making this process simpler, 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

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Interview Notes:

1. By consulting your preparer resources you determine that the correct filing status for the McCooks is Married Filing Jointly.
2. The McCooks lost last year's federal and NJ return, but assure you that they did not itemize deductions last year.
3. The McCooks decision to contribute to the gubernatorial election campaign fund is the same as the presidential election campaign fund.
4. The McCooks do not own a home. They paid rent of \$12,500.00 for the year.
5. By consulting your preparer resources you determine that Paterson is located in Passaic County – NJ Code 1608
6. The McCooks had no out-of-state purchases on which they did not pay Use tax.
7. The value of Troy's Ameritech IRA on Dec 31, 2012 was \$137,255. Unfortunately, the McCooks do not have any way to get any information on Troy's contributions to or prior year distributions from his Ameritech IRA.

Documents:



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FORM SSA-1099 – SOCIAL SECURITY BENEFIT STATEMENT

2012 • PART OF YOUR SOCIAL SECURITY BENEFITS SHOWN IN BOX 5 MAY BE TAXABLE INCOME.
 • SEE THE REVERSE FOR MORE INFORMATION.

| | | |
|--|---|--|
| Box 1. Name Troy H. McCook | | Box 2. Beneficiary's Social Security Number 651-xx-yyyy |
| Box 3. Benefits Paid in 2010 12,765.00 | Box 4. Benefits Repaid to SSA in 2010 NONE | Box 5. Net Benefits for 2010 (Box 3 minus Box 4) 12,765.00 |
| DESCRIPTION OF AMOUNT IN BOX 3 | | DESCRIPTION OF AMOUNT IN BOX 4 |
| Paid by check or direct deposit \$10,331.70 Medicare Part B premiums deducted from your benefit \$1,156.80 Medicare Prescription Drug premiums (part D) deducted from your Benefits 0.00 Voluntary federal income tax withheld \$1,276.50 Total Additions \$12,765.00 Benefits for 2012 \$12,765.00 | | NONE |
| | | Box 6. Voluntary Federal Income Tax Withheld 1,276.50 |
| | | Box 7. Address Troy H. McCook 30911 Charles Busby Road Paterson, NJ 07524 |
| | | Box 8. Claim Number (Use this number if you need to contact SSA.) |

Form SSA-1099-SM (1-2011)

DO NOT RETURN THIS FORM TO SSA OR IRS

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FORM SSA-1099 – SOCIAL SECURITY BENEFIT STATEMENT

2012 • PART OF YOUR SOCIAL SECURITY BENEFITS SHOWN IN BOX 5 MAY BE TAXABLE INCOME.
 • SEE THE REVERSE FOR MORE INFORMATION.

| | | |
|--|--|--|
| Box 1. Name Yvonne McCook | | Box 2. Beneficiary's Social Security Number 652-xx-yyyy |
| Box 3. Benefits Paid in 2010 10,200.00 | Box 4. Benefits Repaid to SSA in 2010 NONE | Box 5. Net Benefits for 2010 (Box 3 minus Box 4) 10,200.00 |

| DESCRIPTION OF AMOUNT IN BOX 3 | | DESCRIPTION OF AMOUNT IN BOX 4 | |
|--|-------------|--|--|
| Paid by check or direct deposit | \$8,023.20 | NONE | |
| Medicare Part B premiums deducted from your benefit | \$1,156.80 | | |
| Medicare Prescription Drug premiums (part D) deducted from your Benefits | 0.00 | | |
| Voluntary federal income tax withheld | \$1,020.00 | | |
| Total Additions | \$10,200.00 | | |
| Benefits for 2012 | \$10,200.00 | Box 6. Voluntary Federal Income Tax Withheld 1,020.00 | |
| | | Box 7. Address Yvonne McCook 30911 Charles Busby Road Paterson, NJ 07524 | |
| | | Box 8. Claim Number (Use this number if you need to contact SSA.) | |

Form SSA-1099-SM (1-2011)

DO NOT RETURN THIS FORM TO SSA OR IRS

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| <input type="checkbox"/> CORRECTED (if checked) | | OMB No. 1545-0110 | | Dividends and Distributions | | |
|---|-----------------------------------|---|-----------------------------------|--|---|---------------------------------|
| PAYER'S name, street address, city, state, ZIP code, and telephone no. Oppenheimer Fund PO Box 5270 Denver, CO 80217 | | 1a Total ordinary dividends | \$ 500.00 | | 2012 <small>Form 1099-DIV</small> | |
| | | 1b Qualified dividends | \$ 500.00 | | | |
| | | 2a Total capital gain distr. | \$ 100.00 | 2b Unrecap. Sec. 1250 gain | \$ | Copy B For Recipient |
| PAYER'S federal identification number | RECIPIENT'S identification number | 2c Section 1202 gain | 2d Collectibles (28%) gain | | | |
| 65-9xxyyyy | 651-xx-yyyy | \$ | \$ | This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported. | | |
| RECIPIENT'S name Troy H. McCook Street address (including apt. no.) 90911 Charles Busby Road City, state, and ZIP code Paterson, NJ 07524 | | 3 Nondividend distributions | \$ | | 4 Federal income tax withheld | \$ 50.00 |
| | | | | | 5 Investment expenses | \$ |
| | | 6 Foreign tax paid | \$ | | 7 Foreign country or U.S. possession | |
| | | 8 Cash liquidation distributions | \$ | | 9 Noncash liquidation distributions | \$ |
| Account number (see instructions) | | | | | | |
| | | | | | | |

Form 1099-DIV

(keep for your records)

Department of the Treasury - Internal Revenue Service

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| <input type="checkbox"/> VOID <input type="checkbox"/> CORRECTED | | | | OMB No. 1545-0119 | | Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc. | |
|--|--|--|---|--|---|--|--|
| PAYER'S name, street address, city, state, and ZIP code Ameritech Pension Trust PO Box 1389 Boston, MA 02104 | | 1 Gross distribution \$ 13,223.00 | <div style="font-size: 2em; font-weight: bold; color: #0070C0;">2012</div> Form 1099-R | | Copy 1 For State, City, or Local Tax Department | | |
| PAYER'S federal identification number 65-7xyyyy | | 2a Taxable amount \$ 13,223.00 | | | | | |
| RECIPIENT'S identification number 651-xx-yyyy | | 2b Taxable amount not determined <input type="checkbox"/> | Total distribution <input type="checkbox"/> | | 3 Capital gain (included in box 2a) \$ | | |
| RECIPIENT'S name Troy McCook | | 4 Federal income tax withheld \$ 1,323.00 | | | | | |
| Street address (including apt. no.) 30911 Charles Busby Road | | 5 Employee contributions / Designated Roth contributions or insurance premiums \$ | | 6 Net unrealized appreciation in employer's securities \$ | | 7 Distribution code(s) <div style="font-size: 1.5em; font-weight: bold;">7</div> | |
| City, state, and ZIP code Paterson, NJ 07524 | | 7 Distribution code(s) IRA/SEP/SIMPLE <input checked="" type="checkbox"/> | | 8 Other \$ % | | | |
| 10 Amount allocable to IRR within 5 years \$ | | 11 1st year of desig. Roth contrib. \$ | | 9a Your percentage of total distribution % \$ | | 9b Total employee contributions \$ | |
| Account number (see instructions) | | 12 State tax withheld \$ | | 13 State/Payer's state no. \$ | | 14 State distribution \$ | |
| Account number (see instructions) | | 15 Local tax withheld \$ | | 16 Name of locality \$ | | 17 Local distribution \$ | |

Form **1099-R** Department of the Treasury - Internal Revenue Service

| <input type="checkbox"/> VOID <input type="checkbox"/> CORRECTED | | | | OMB No. 1545-0119 | | Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc. | |
|--|--|--|---|--|---|--|--|
| PAYER'S name, street address, city, state, and ZIP code Phoenix Investment Partners 101 Munson Street Greenfield, MA 01301 | | 1 Gross distribution \$ 12,250 | <div style="font-size: 2em; font-weight: bold; color: #0070C0;">2012</div> Form 1099-R | | Copy 1 For State, City, or Local Tax Department | | |
| PAYER'S federal identification number 65-8xyyyy | | 2a Taxable amount \$ 12,250 | | | | | |
| RECIPIENT'S identification number 652-xx-yyyy | | 2b Taxable amount not determined <input type="checkbox"/> | Total distribution <input type="checkbox"/> | | 3 Capital gain (included in box 2a) \$ | | |
| RECIPIENT'S name Yvonne McCook | | 4 Federal income tax withheld \$ 1,225.00 | | | | | |
| Street address (including apt. no.) 30911 Charles Busby Road | | 5 Employee contributions / Designated Roth contributions or insurance premiums \$ | | 6 Net unrealized appreciation in employer's securities \$ | | 7 Distribution code(s) <div style="font-size: 1.5em; font-weight: bold;">7</div> | |
| City, state, and ZIP code Paterson, NJ 07524 | | 7 Distribution code(s) IRA/SEP/SIMPLE <input type="checkbox"/> | | 8 Other \$ % | | | |
| 10 Amount allocable to IRR within 5 years \$ | | 11 1st year of desig. Roth contrib. \$ | | 9a Your percentage of total distribution % \$ | | 9b Total employee contributions \$ | |
| Account number (see instructions) | | 12 State tax withheld \$ | | 13 State/Payer's state no. \$ | | 14 State distribution \$ | |
| Account number (see instructions) | | 15 Local tax withheld \$ | | 16 Name of locality \$ | | 17 Local distribution \$ | |

Form **1099-R** Department of the Treasury - Internal Revenue Service