Form 13614-C Rev. 10-2012) Department of the Treasury – Internal Revenue Service Intake/Interview & Quality Review Sheet							OMB # 1	545-1964		
Section A. Complete Pages You are responsible for the to the IRS certified voluntee	informatio	-			•		urate inform	ation		
You will need your: • Tax information such as Fo • Social security cards or ITI • Picture ID (such as a valid	N letters for	you a	nd all persons o			our spou	ise, if applica	able).		
Part I. Your Personal Info	rmation									
1. Your First Name M. I. Last Name Are you a U.S. Citizen?										
Joshi			Barufkin			X Ye	es 🗌 No			
2. Your Spouse's First Name		M. I.	Last Name			Is you	ir spouse a U.	S. Citizen?		
Anshu			Nagesh			X Ye	s 🗌 No			
3. Mailing Address		Apt				State 2	Zip Code			
876 Kealing Ave. 9A Wyckoff NJ 07481										
4. Contact Information Phone: 201-555-2345 Cell Phone: E-mail:										
5. Your Date of Birth 6. Your Job Title Are you: 7. Legally Blind Yes 🗴 No										
1/18/1978 Bus Driver 8. Totally and Permanently Disabled Yes X No										
9. Your Spouse's Date of Birth 10. Your Spouse's Job Title Is Your Spouse: 11. Legally Blind Yes 🗴 No										
08/07/1979	Custodia	an		12. Totally	and Permanent	ly Disable	ed 🗌 Ye	s 🗙 No		
13. Can anyone claim you or you			x return?	/es 🗴 No 🗌	Unsure					
Part II. Marital Status ar	nd House	hold	Information		_					
As of December 31, 2012, we Single Married: Did you live with Divorced or Legally Sepa Widowed: Year of spouse	h your spous arated: Date				_	Yes 🗌] No			
2. List names below of everyon your home that you supported								utside of		
Name (first, last) Do not enter your name or spouse's name below. (a)	(mm	of Birth /dd/yy) (b)	Relationship to yo (e.g. daughter, son, mother, siste none) (c)	of months	US Citizen or resident of US Canada or Mexico in 2012 (yes/no) (e)	as o	is time f Student /12 in 2012	Received less than \$3800 income in 2012 (yes/no) (h)		
Alice Negesh	04/1	4/03	Daughter	12	Yes	S	Yes	Yes		
Samual Barufkin	01/0	6/06	Son	12	Yes	S	Yes	Yes		
To chook the			DEELIND	+ "\A/bara'a						
Volunteers assisting		or cal	REFUND visi	54 for assi	istance.					

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.

Catalog Number 52121E

Form 13614-C (Rev. 10-2012) 1

Sect	Section A. Please complete – check Yes, No or Unsure to all questions below. Please ask if you need help.							
Par	t III.	Income – In 2012, did you (or your spouse) receive:						
Yes	No	Unsure						
×		1. Wages or Salary? (Form W-2) If yes, how many jobs did you have in 2012? 2						
	×	2. Tip Income?						
\square	×	3. Scholarships? (Forms W-2, 1098-T)						
\Box	×	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 Income? (Form 1099-MISC)						
	×	8. Cash/check payments for any work performed not reported on Forms W-2 or 1099?						
	×	 9. Income (or loss) from the sale of Stocks, Bonds or Real Estate (including your home)? (Forms 1099-S, 1099-B) 						
	x	10. Disability Income (such as payments from insurance, or workers compensation)? (Forms 1099-R, W-2)						
	x	11. Distributions from Pensions, Annuities, and/or IRA? (Form 1099-R)						
	x	12. Unemployment Compensation? (Form 1099-G)						
	×	13. Social Security or Railroad Retirement Benefits? (Forms SSA-1099, RRB-1099)						
	×	14. Income (or loss) from Rental Property?						
	×	15. Other Income: (gambling, lottery, prizes, awards, jury duty, etc.)? (Forms W-2 G, 1099-MISC) Specify:						
Par	t IV.	Expenses – In 2012 Did you (or your spouse) pay:						
	No							
	x	1. Alimony: If yes, do you have the recipient's SSN? Yes No						
H	x	2. Contributions to a retirement account?						
П	×	3. Educational expenses for yourself, spouse or dependents, such as tuitions, books, fees, etc.? (Form 1098-T)						
П	×	4. Unreimbursed employee business expenses (such as uniforms or mileage)?						
\Box	×	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 or dependent care expenses such as day-care?						
	×	10. For supplies used as an eligible educator such as a teacher, teacher's aide, counselor, etc.?						
Par	τV.	Life Events – In 2012 Did you (or your spouse):						
Yes	No	Unsure						
	×	1. Have a Health Savings Account? (Forms 5498-SA, 1099-SA, W-2 with code W in Box 12)						
	×	2. Have debt from a mortgage or credit card canceled/forgiven by a commercial lender? (Forms 1099-C, 1099A)						
	×	 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 2012 tax? If so how much?						
	×	10. Attend school as a full time student? (Form 1098-T)						
	×	11. Adopt a child?						
	×	12. File a 2011 federal tax return containing a "capital loss carryover" on Form 1040 Schedule D?						
	×	13. Become a victim of identity theft?						
		ial Election Campaign Fund: (If you check a box, your tax or refund will not change.)						
Cne	Check here if you, or your spouse if filing jointly, want \$3 to go to this fund X You Spouse							

Catalog Number 52121E

Form 13614-C (Rev. 10-2012) 2

Additional Information and Questions related to the preparation of your return

Many free tax preparation sites operate by receiving grant n may be used by this site to apply for these grants. Your ans	,
Other than English what language is spoken in the home?	Hindustani

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

 Ask your preparer about Direct Deposit. It is the fastest, safest way to receive your tax refund. When 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. are a safe and secure way to invest in the future. Purchase I Bonds for yourself or others in multiple earn interest for up to 30 years. If you are due a refund, would you like a direct deposit? 	. Savings bonds
are a safe and secure way to invest in the future. Purchase I Bonds for yourself or others in multiple earn interest for up to 30 years. If you are due a refund, would you like a direct deposit?	
If you are due a refund, would you like information on how to purchase U.S. Savings Bonds? [If you are due a refund, would you like information on how to split your refund between accounts? [If you have a balance due, would you like to make a payment directly from your bank account? [Yes X No Yes X No Yes X No Yes X 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 eeo.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

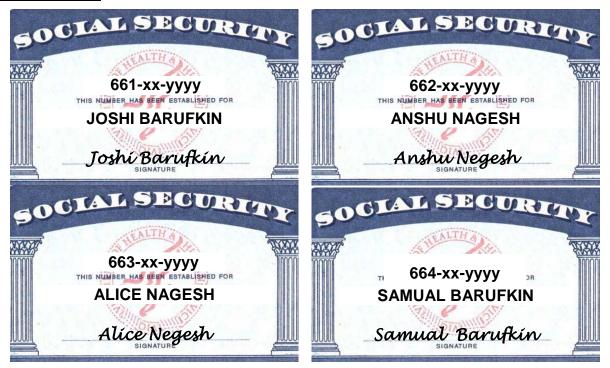
Catalog Number 52121E

Form 13614-C (Rev. 10-2012) 3

Interview Notes:

- 1. By consulting your preparer resources you determine that the correct filing status for the Barufkins is Married Filing Jointly.
- 2. After asking the questions in Part B of the Intake/Interview Sheet you determine that Joshi & Anshu provide full support for Alice & Samual.
- 3. After examining last year's return, you determine that the Barufkins did not itemize deductions last year.
- 4. The Barufkins paid \$15,200 in rent for the year.
- 5. Joshi & Anshu's decision to contribute to the gubernatorial election campaign fund is the same as the presidential election campaign fund.
- 6. The Barufkins are US citizens (i.e. they are not non-resident aliens).
- 7. Neither of the Barufkins can be a qualifying child of another person for EIC purposes. No other person can claim either child for EIC.
- 8. The SSN for both children is valid for EIC purposes.
- 9. The Barufkins have never had their EIC reduced or disallowed.
- 10. By consulting your preparer resources you determine that Wyckoff is located in Bergen County NJ Code 0270
- 11. The Barufkins had no out-of-state purchases on which they did not pay Use tax.
- 12. Both children are covered by health insurance.

Documents:



	ployee's social security number	OMB No. 1545	5-0008	Safe, accur FAST! Use	ate,	≁ file		e IRS website at s.gov/efile	
b Employer identification number (EIN)					r compensation			tax withheld	
66-9xxyyyy				22,810).49	2	2.281	.00	
c Employer's name, address, and ZIP cod	le		3 So	cial security	wages	4 Socia	l security t	ax withheld	
United Airlines		22,810	0.49		958.0)4			
PO Box 6610				dicare wage	s and tips	6 Medic	6 Medicare tax withheld		
Chicago, IL 60610				22,81	0.49	330.75			
	7 So	cial security f	ips	8 Alloca	ted tips				
d Control number			9			10 Depe	10 Dependent care benefits		
e Employee's first name and initial Last name Suff.				11 Nonqualified plans			12a See instructions for box 12		
Joshi Barufkin			13 Stat	tutory Retire plan	ment Third-party sick pay	12b			
876 Kealing Ave. Ap				C o d					
Wyckoff, NJ 07481				ier		12c			
	NJSDI 45.62			C d e	0 0 0				
			N,	JSUI	96.94	12d			
			N,	JFLI	18.25	od e			
f Employee's address and ZIP code				_					
15 State Employer's state ID number NJ 669xxyyyy	16 State wages, tips, etc. 22,810.4	17 State incom 684.		18 Local w	ages, tips, etc.	19 Local inco	ome tax	20 Locality name	
	-								
Form W-2 Wage and Tax Statement Copy B-To Be Filed With Employee	2	012			Department	of the Treasur	y—Interna	Revenue Service	

This information is being furnished to the Internal Revenue Service.

662	e's social security number -XX-YYYY	OMB No. 1545		Safe, accura FAST! Use	ite,		it the IRS website at ww.irs.gov/efile	
b Employer identification number (EIN) 66-9xxyyyy				ges, tips, other 13,180.		2 Federal inco 275.	ome tax withheld	
c Employer's name, address, and ZIP code			3 Soc	cial security w	ages	4 Social secu	rity tax withheld	
United Airlines				13,180		553.		
PO Box 6610				dicare wages		6 Medicare tax withheld		
Chicago, IL 60610		13,180		191.11				
011104g0, 12 00010	7 Soc	cial security ti	DS	8 Allocated tips				
d Control number			9			10 Dependent	care benefits	
e Employee's first name and initial Last name	ne	Suff.	11 Nor	nqualified pla	าร	12a See instruc	tions for box 12	
Anshu Nagesh	13 Statu emp	utory Retiren	ent Third-party sick pay	C				
876 Kealing Ave. Apt 9/								
Wyckoff, NJ 07481			14 Oth N	JSDI	26.36	12c		
				JSUI	56.02	d 12d		
					10.54	C d e		
f Employee's address and ZIP code			IN	JFLI	10.54	e		
15 State Employer's state ID number	16 State wages, tips, etc.	17 State incom		18 Local wa	ges, tips, etc.	19 Local income ta	x 20 Locality name	
NJ 669xxyyyy	13,180.00	260.0	00					
						<u> </u>		
Form W-2 Wage and Tax Statement		2012			Department of	of the Treasury-Inte	ernal Revenue Service	
Copy B-To Be Filed With Employee's FE This information is being furnished to the In	DERAL Tax Return.	2012						