

AT ALL VITA SITES:

Please be respectful and courteous to VITA VOLUNTEERS!

WE RESERVE THE RIGHT TO REFUSE SERVICE and to stop taking clients BEFORE the site close time!

Open for Walk-In, First Come First Serve basis and MUST bring your own pens

Children/additional people (not required for tax preparation service) are NOT ALLOWED at the sites

S.No	Site	Site Address	Days & Hours *	Dates *
1	Arizona Complete Health Avondale Resource Center	995 E. Riley Drive Avondale, AZ 85323	Tuesdays: 2:00 pm - 5:00 pm Saturdays: 8:30 am - 12:30 pm	Tuesdays: Jan. 30 - Apr. 9, 2024 Saturdays: Feb. 3 - Apr. 13, 2024
2	ASU West Campus Closed on Saturday, March 9, 2024	4701 W Thunderbird Rd, Glendale, AZ 85306 Room: SANDS 103	Saturdays: 10:00 am - 2:00 pm	Saturdays: Feb. 3 - Apr. 13, 2024
3	Buckeye Family Resource Center	210 S 6th St Building 700 Buckeye, AZ 85326	Wednesdays: 2:00 pm - 6:00 pm	Wednesdays: Jan. 31 - Apr. 10, 2024
4	Esther Angulo Community Center	9055 W Van Buren St Tolleson, AZ 85353	Fridays: 1:00 pm - 4:00 pm	Fridays: Feb. 2 - Apr. 12, 2024
5	Estrella Mountain Comm. College Closed on Friday, March 15, 2024	3000 N. Dysart Rd, Avondale, AZ 85392 Estrella Hall, Learning Studio S138	Fridays: 9:00 am - 1:00 pm	Fridays: Feb. 2 - Apr. 12, 2024
6	Glendale Community College Closed on Tuesday, March 12, 2024	6000 W Olive Ave, Glendale, AZ 85302 Building B, Room 105	Tuesdays: 10:00 am - 1 pm	Tuesdays: Jan. 30 - Apr. 9, 2024
7	GESD System of Care Center	7677 W. Bethany Home Rd Glendale, AZ 85303	Wednesday: 3:00 pm - 6:00 pm	Wednesdays: Jan. 31 - Apr. 10, 2024
8	Glendale High School	6216 W Glendale Ave, Glendale, AZ 85301 Media Center	Saturdays: 10:00 am - 1:00 pm	Saturdays: Feb. 3 - Apr. 13, 2024
9	Littleton Elementary School District Office	1642 S. 107th Avenue, Avondale, AZ 85323 Family Welcome Center	Thursdays: 4:00 pm - 7:30 pm	Thursdays: Feb. 1 - Apr. 11, 2024
10	Luke Air Force Base MUST HAVE BASE ACCESS Closed on Monday, Feb. 19, 2024	7424 N Homer Dr, Luke AFB, 85309 Base Library	Mondays: 9:00 am - 12:00 pm	Mondays: Jan. 29 - Apr. 8, 2024
11	Riverboat Bingo	18300 W. Bell Road Surprise, AZ 85374	Wednesdays: 11:00 am - 3:00 pm	Wednesdays: Jan. 31 - Apr. 10, 2024
12	Surprise Resource Center Closed on Monday, Feb. 19, 2024	12425 W. Bell Road Surprise, AZ 85378 Bldg. A, Suite # 124	Mondays: 4:0 pm - 8:00 pm Tuesdays: 4:00 pm - 8:00 pm Thursdays: 9:00 am - 1:00 pm	Mondays: Jan. 29 - Apr. 15, 2024 Tuesdays: Jan. 30 - Apr. 9, 2024 Thursdays: Feb. 1 - Apr. 11, 2024

* **Subject to Day/Time change and additional/early closures due to unforeseen circumstances and without any prior notice.**

FREE Tax Preparation Options:



Traditional Return Preparation Method

Bring all the required documents to the VITA site location
Fill out the required paperwork and sign the consent forms
Stay at the site and have the taxes prepared the same day, while you wait



Bring all the required documents to the VITA site location
Fill out the required paperwork and sign the consent forms
Drop-Off the documents after a brief interview with a volunteer
Return the following week to sign and pick-up your completed taxes



Go to a specific URL available ONLY at / from VITA sites or Email to: vitaanl20@gmail.com
Set up a free Online account and E-File your Federal & State returns yourself for FREE

To find Information on VITA Site Locations in other areas (Phoenix, Mesa, Tempe etc), please visit <https://irs.treasury.gov/freetaxprep/>

Interested in learning basic Tax Law & Becoming a VITA Volunteer? Visit & Sign-up at: turnanewleaf.org/vita-program

What to Bring to Your Local VITA Site?

- ➔ Social Security Cards or ITIN and Birth dates for **EVERYONE** on the tax return
- ➔ **Proof of photo identification** for both Taxpayer and Spouse (if applicable)
- ➔ **Copy of prior year tax return**
- ➔ Proof of **Bank Account and Routing number** for Direct Deposit/Debit
- ➔ **Identity Protection PIN** number (IP PIN), if issued for **ANYONE** and/or EVERYONE on the tax return.
- ➔ Proof of foreign status, if applying for an ITIN
- ➔ Wage and earning statements (Form W-2, W-2G, 1099-R, SSA-1099, 1099-Misc, 1099-NEC) from all employers
- ➔ Interest and dividend statements (Forms 1099-INT, 1099-DIV)
- ➔ Information for all other income (Pensions Form 1099-R, Social Security Statement Form 1099-SSA, Sale of stocks & bonds Form 1099-B)
- ➔ Documents for medical deductions, property taxes paid, mortgage interest, auto registration, charity contributions – **all added up** for each category.
- ➔ Form 1098-T from educational institution to claim education credits. Detailed list of additional educational expenses (e.g. books or supplies **REQUIRED** for ATTENDANCE)
- ➔ Amount paid to day care provider, their tax ID number, name, and address
- ➔ **Form 1095-A, Health Insurance Marketplace Statement** (Obama care health insurance)
- ➔ **Unmasked copies** of income transcripts from IRS and state, in absence of tax forms
- ➔ For married filing joint returns, both Taxpayer and Spouse **must be present to sign the tax returns** before it is electronically filed.

Will NOT prepare*

Married Filing Separate Returns

Small business with losses and other Out of Scope items (contact a site for more details)

1099-R, Box 7 with codes: 5, 8, 9, A, E, J, K, N, P, R, T & U

1099 C: If filed for bankruptcy or Non-Personal credit cards

Complicated and advanced Capital Gains/Losses; without Basis reported

Schedule E (rental Property) or Sale of Rental Property

Non-Cash donations of over \$500

*** This is NOT an all-inclusive list. Please consult a VITA volunteer for a complete list of Out-Of-Scope items**



OUT OF SCOPE (will NOT prepare) CHECKLIST

This is NOT a comprehensive list, consult a VITA volunteer for a complete list of Out-Of-Scope items

MARRIED FILING SEPARATE RETURNS

FORM 1099-R, Box 7 with codes: 5, 8, 9, A, E, J, K, N, P, R, T & U

**FORM W-2, Box 12 with codes: R, T, & Z
(Code Q requires Military certification)**

BUSINESS —SCHEDULE C: Claiming Loss on business, Cost of Goods Sold, Depreciation, Business use of home, Expenses > \$35,000, Actual vehicle expenses, Inventory, Hobby Income

RENTAL PROPERTY —SCHEDULE E:
Non-Active-Duty Military Taxpayers, property rented at less than fair market value, casualty loss, actual expense method for vehicles.

CAPITAL GAINS/LOSSES —SCHEDULE D:
FORM 1099-B with adjustment codes: C, D, N, Q, R, S, X, Y & Z. Determination of Basis, more than 10 transactions.

PROFIT/LOSS FROM FARMING

HOUSEHOLD EMPLOYMENT TAXES

ADOPTION CREDIT

DC FIRST – TIME HOME BUYER CREDIT

FORM 1098 –MA: Mortgage Assistance Payments

FORM 8889: HSA for certain conditions (use 4012)

FORM 1099 C: CANCELLATION OF DEBT:
Business Credit Card or if it includes interest.

FORM 4684: Casualty & Theft Losses

FORM 1099 Q: If funds were not used for qualified education expenses OR Distribution was more than the qualified education expenses.

FORM 8853: Medical Savings Account

FORM 8283: Noncash donations of more than \$500

FORM 1116: Foreign Tax Credit

FORM 1099 MISC: Box 5 (fishing boat proceeds), Boxes 7, 9 -15, FATCA filing reqd. box checked.

FORM 2210: Underpayment of Estimated Tax

FORM 4797: Sale of Business / Rental Property

FORM 8834: Plug—In Electric Vehicle Credit

FORM 4835: Farm Rental Income & Expense

FORM 8606: Non-deductible IRAs

FORM 8829: Expenses for business use of home

FORM 8839: Qualified Adoption Expenses

FORM 8908: Credit for Purchase of Solar panels

FORM 8936: Qualified Plug in Electric Drive Motor Vehicle Credit

Intake/Interview and Quality Review Sheet

You will need:

- Tax Information such as Forms W-2, 1099, 1098, 1095.
- Social Security cards or ITIN letters for all persons on your tax return.
- Picture ID (such as valid driver's license) for you and your spouse.

• Please complete pages 1-4 of this form.

- You are responsible for the information on your return. Please provide complete and accurate information.
- If you have questions, please ask the IRS-certified volunteer preparer.

Volunteers are trained to provide high quality service and uphold the highest ethical standards.

To report unethical behavior to the IRS, email us at wi.voltax@irs.gov

Part I – Your Personal Information (If you are filing a joint return, enter your names in the same order as last year's return)

1. Your first name	M.I.	Last name	Best contact number	Are you a U.S. citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No
2. Your spouse's first name	M.I.	Last name	Best contact number	Is your spouse a U.S. citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No
3. Mailing address		Apt #	City	State
4. Your Date of Birth	5. Your job title	6. Last year, were you:		a. Full-time student <input type="checkbox"/> Yes <input type="checkbox"/> No
		b. Totally and permanently disabled <input type="checkbox"/> Yes <input type="checkbox"/> No		c. Legally blind <input type="checkbox"/> Yes <input type="checkbox"/> No
7. Your spouse's Date of Birth	8. Your spouse's job title	9. Last year, was your spouse:		a. Full-time student <input type="checkbox"/> Yes <input type="checkbox"/> No
		b. Totally and permanently disabled <input type="checkbox"/> Yes <input type="checkbox"/> No		c. Legally blind <input type="checkbox"/> Yes <input type="checkbox"/> No
10. Can anyone claim you or your spouse as a dependent?				<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure
11. Have you, your spouse, or dependents been a victim of tax related identity theft or been issued an Identity Protection PIN?				<input type="checkbox"/> Yes <input type="checkbox"/> No
12. Provide an email address (optional) (this email address will not be used for contacts from the Internal Revenue Service)				

Part II – Marital Status and Household Information

1. As of December 31, 2023, what was your marital status?

Never Married (This includes registered domestic partnerships, civil unions, or other formal relationships under state law)

Married a. If Yes, Did you get married in 2023? Yes No

Divorced b. Did you live with your spouse during any part of the last six months of 2023? Yes No

Legally Separated Date of final decree _____

Widowed Date of separate maintenance decree _____

Year of spouse's death _____

2. List the names below of:

- **everyone** who lived with you last year (other than your spouse)
- **anyone** you supported but did not live with you last year

If additional space is needed check here and list on page 3

To be completed by a Certified Volunteer Preparer

Name (first, last) Do not enter your name or spouse's name below	Date of Birth (mm/dd/yy)	Relationship to you (for example: son, daughter, parent, none, etc)	Number of months lived in your home last year	US Citizen (yes/no)	Resident of US, Canada, or Mexico last year (yes/no)	Single or Married as of 12/31/23 (S/M)	Full-time Student last year (yes/no)	Totally and Permanently Disabled (yes/no)	Is this person a qualifying child/relative of any other person? (yes/no)	Did this person provide more than 50% of his/her own support? (yes,no,n/a)	Did this person have less than \$4,700 of income? (yes,no,n/a)	Did the taxpayer(s) provide more than 50% of support for this person? (yes/no/n/a)	Did the taxpayer(s) pay more than half the cost of maintaining a home for this person? (yes/no)
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)					

Check appropriate box for each question in each section

Yes	No	Unsure	Part III – Income – Last Year, Did You (or Your Spouse) Receive
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1. (B) Wages or Salary? (Form W-2) If yes, how many jobs did you have last year? _____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2. (A) Tip Income?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3. (B) Scholarships? (Forms W-2, 1098-T)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	4. (B) Interest/Dividends from: checking/savings accounts, bonds, CDs, brokerage? (Forms 1099-INT, 1099-DIV)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5. (B) Refund of state/local income taxes? (Form 1099-G)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	6. (B) Alimony income or separate maintenance payments?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	7. (A) Self-Employment income? (Forms 1099-MISC, 1099-NEC, 1099-K, cash, digital assets, or other property or services)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	8. (A) Cash/check/digital assets, or other property or services for any work performed not reported on Forms W-2 or 1099?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	9. (A) Income (or loss) from the sale or exchange of stocks, bonds, digital assets or real estate? (including your home) (Forms 1099-S, 1099-B)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	10. (B) Disability income? (such as payments from insurance, or workers compensation) (Forms 1099-R, W-2)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	11. (A) Retirement income or payments from pensions, annuities, and or IRA? (Form 1099-R)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	12. (B) Unemployment Compensation? (Form 1099-G)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	13. (B) Social Security or Railroad Retirement Benefits? (Forms SSA-1099, RRB-1099)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	14. (M) Income (or loss) from rental property?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	15. (B) Other income? (gambling, lottery, prizes, awards, jury duty, digital assets, Sch K-1, royalties, foreign income, etc.)
Yes	No	Unsure	Part IV – Expenses – Last Year, Did You (or Your Spouse) Pay
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1. (B) Alimony or separate maintenance payments? If yes, do you have the recipient's SSN? <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2. Contributions or repayments to a retirement account? <input type="checkbox"/> IRA (A) <input type="checkbox"/> Roth IRA (B) <input type="checkbox"/> 401K (B) <input type="checkbox"/> Other
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3. (B) College or post secondary educational expenses for yourself, spouse or dependents? (Form 1098-T)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	4. Any of the following? <input type="checkbox"/> (A) Medical & Dental (including insurance premiums) <input type="checkbox"/> (A) Mortgage Interest (Form 1098) <input type="checkbox"/> (A) Taxes (State, Real Estate, Personal Property, Sales) <input type="checkbox"/> (B) Charitable Contributions
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5. (B) Child or dependent care expenses such as daycare?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	6. (B) For supplies used as an eligible educator such as a teacher, teacher's aide, counselor, etc.?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	7. (A) Expenses related to self-employment income or any other income you received?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	8. (B) Student loan interest? (Form 1098-E)
Yes	No	Unsure	Part V – Life Events – Last Year, Did You (or Your Spouse)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1. (A) Have a Health Savings Account? (Forms 5498-SA, 1099-SA, W-2 with code W in box 12)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2. (A) Have credit card, student loan or mortgage debt cancelled/forgiven by a lender or have a home foreclosure? (Forms 1099-C, 1099-A)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3. (A) Adopt a child?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	4. (B) Have Earned Income Credit, Child Tax Credit or American Opportunity Credit disallowed in a prior year? If yes, for which tax year? _____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5. (A) Purchase and install energy-efficient home items? (such as windows, furnace, insulation, etc.)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	6. (A) Receive the First Time Homebuyers Credit in 2008?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	7. (B) Make estimated tax payments or apply last year's refund to this year's tax? If so how much? _____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	8. (A) File a federal return last year containing a "capital loss carryover" on Form 1040 Schedule D?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	9. (A) Have health coverage through the Marketplace (Exchange)? [Provide Form 1095-A]

Additional Information and Questions Related to the Preparation of Your Return

- 1. Would you like to receive written communications from the IRS in a language other than English? Yes No If yes, which language? _____
- 2. 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
- 3. If you are due a refund, would you like: a. Direct deposit Yes No b. To purchase U.S. Savings Bonds Yes No c. To split your refund between different accounts Yes No
- 4. If you have a balance due, would you like to make a payment directly from your bank account? Yes No
- 5. Did you live in an area that was declared a Federal disaster area? Yes No If yes, where? _____
- 6. Did you, or your spouse if filing jointly, receive a letter from the IRS? Yes No
- 7. Would you like information on how to vote and/or how to register to vote? Yes No

Many free tax preparation sites operate by receiving grant money or other federal financial assistance. The data from the following questions may be used by this site to apply for these grants or to support continued receipt of financial funding. Your answer will be used only for statistical purposes. These questions are optional.

- 8. Would you say you can carry on a conversation in English, both understanding & speaking? Very well Well Not well Not at all Prefer not to answer
- 9. Would you say you can read a newspaper or book in English? Very well Well Not well Not at all Prefer not to answer
- 10. Do you or any member of your household have a disability? Yes No Prefer not to answer
- 11. Are you or your spouse a Veteran from the U.S. Armed Forces? Yes No Prefer not to answer
- 12. Your race?
 American Indian or Alaska Native Asian Black or African American Native Hawaiian or other Pacific Islander White Prefer not to answer
- 13. Your spouse's race?
 American Indian or Alaska Native Asian Black or African American Native Hawaiian or other Pacific Islander White Prefer not to answer
 No spouse
- 14. Your ethnicity? Hispanic or Latino Not Hispanic or Latino Prefer not to answer
- 15. Your spouse's ethnicity? Hispanic or Latino Not Hispanic or Latino Prefer not to answer No spouse

Additional comments

Privacy Act and Paperwork Reduction Act Notice

The Privacy Act of 1974 requires that when we ask for information we tell you our legal right to ask for the information, why we are asking for it, and how it will be used. We must also tell you what could happen if we do not receive it, and whether your response is voluntary, required to obtain a benefit, or mandatory. Our legal right to ask for information is 5 U.S.C. 301. We are asking for this information to assist us in contacting you relative to your interest and/or participation in the IRS volunteer income tax preparation and outreach programs. The information you provide may be furnished to others who coordinate activities and staffing at volunteer return preparation sites or outreach activities. The information may also be used to establish effective controls, send correspondence and recognize volunteers. Your response is voluntary. However, if you do not provide the requested information, the IRS may not be able to use your assistance in these programs. 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

Consent to Disclose Tax Return Information to VITA/TCE Tax Preparation Sites

Federal Disclosure:

Federal law requires this consent form be provided to you. Unless authorized by law, we cannot disclose your tax return information to third parties for purposes other than the preparation and filing of your tax return without your consent. If you consent to the disclosure of your tax return information, Federal law may not protect your tax return information from further use or distribution.

You are not required to complete this form to engage our tax return preparation services. If we obtain your signature on this form by conditioning our tax return preparation services on your consent, your consent will not be valid. If you agree to the disclosure of your tax return information, your consent is valid for the amount of time that you specify. If you do not specify the duration of your consent, your consent is valid for one year from the date of signature.

Terms:

Global Carry Forward of data allows TaxSlayer LLC, the provider of the VITA/TCE tax software, to make your tax return information available to ANY volunteer site participating in the IRS's VITA/TCE program that you select to prepare a tax return in the next filing season. This means you will be able to visit any volunteer site using TaxSlayer next year and have your tax return populate with your current year data, regardless of where you filed your tax return this year. This consent is valid through November 30, 2025.

The tax return information that will be disclosed includes, but is not limited to, demographic, financial and other personally identifiable information, about you, your tax return and your sources of income, which was input into the tax preparation software for the purpose of preparing your tax return. This information includes your name, address, date of birth, phone number, SSN, filing status, occupation, employer's name and address, and the amounts and sources of income, deductions and credits that were claimed on, or contained within, your tax return. The tax return information that will be disclosed also includes the name, SSN, date of birth, and relationship of any dependents that were claimed on your tax return.

You do not need to provide consent for the VITA/TCE partner preparing your tax return this year. Global Carry Forward will assist you only if you visit a different VITA or TCE partner next year that uses TaxSlayer. You have the right to receive a signed copy of this form.

Limitation on the Duration of Consent: I/we, the taxpayer, do not wish to limit the duration of the consent of the disclosure of tax return information to a date earlier than presented above (November 30, 2025). If I/we wish to limit the duration of the consent of the disclosure to an earlier date, I/we will deny consent.

Limitation on the Scope of Disclosure: I/we, the taxpayer, do not wish to limit the scope of the disclosure of tax return information further than presented above. If I/we wish to limit the scope of the disclosure of tax return information further than presented above, I/we will deny consent.

Consent:

I/we, the taxpayer, have read the above information.

I/we hereby consent to the disclosure of tax return information described in the Global Carry Forward terms above and allow the tax return preparer to enter a PIN in the tax preparation software on my behalf to verify that I/we consent to the terms of this disclosure.

Primary taxpayer printed name and signature	Date
Secondary taxpayer printed name and signature	Date

If you believe your tax return information has been disclosed or used improperly in a manner unauthorized by law or without your permission, you may contact the Treasury Inspector General for Tax Administration (TIGTA) by telephone at 1-800-366-4484. Report a Crime or IRS Employee Misconduct - U.S. Treasury Inspector General for Tax Administration (TIGTA) (<https://www.tigta.gov/reportcrime-misconduct>).

**Consent to Use Tax Return Information - Information used by A New Leaf
Federal Disclosure**

Federal law requires this consent form be provided to you. Unless authorized by law, we cannot use your tax return information for purposes other than the preparation and filing of your tax return without your consent.

You do not have to complete this form to engage our tax return preparation services. If we obtain your signature on this form by conditioning our tax return preparation services on your consent, your consent will not be valid. Your consent is valid for time that you specify. If you do not specify the duration of your consent, your consent is valid for one year from the date of signature.

Consent Terms

I authorize A New Leaf VITA Program

Purpose - To provide marketing and outreach to the community in support of this free VITA tax preparation service we request your consent to report the results of our program.

Information to be used - The TOTAL number of clients served, the TOTAL number of tax returns we prepare, and the TOTAL amount of refunds and tax credits that are returned to our clients.

Individual Personal information will never be used - Information such as name, address, phone number, date of birth, or Social Security Numbers will not be used for any purpose.

I, _____
(Print) Taxpayer Name

Signature: _____ Date: _____

I, _____
(Print) Spouse Name

Signature: _____ Date: _____

If you believe your tax return information has been disclosed or used improperly in a manner unauthorized by law without your permission, you may contact the Treasury Inspector General for Tax Administration (TIGTA) by telephone at 1-800-366-4484, or by email to: complaints@tigta.treas.gov

**Consent to Disclose Tax Return Information - Information disclosed by A New Leaf
Federal Disclosure**

Federal law requires this consent form be provided to you. Unless authorized by law, we cannot disclose your tax return information to third parties for purposes other than the preparation and filing of your tax return without your consent. If you consent to the disclosure of your tax return information, federal law may not protect your tax return information from further use or distribution.

You do not have to complete this form to engage our tax return preparation services. If we obtain your signature on this form by conditioning our tax return preparation services on your consent, your consent will not be valid. If you agree to the disclosure of your tax return information, your consent is valid for time that you specify. If you do not specify the duration of your consent, your consent is valid for one year from the date of signature.

Consent Terms

I authorize A New Leaf VITA Program

Purpose - To provide marketing and outreach to the community in support of this free VITA tax preparation service we request your consent to report the results of our program.

Information to be disclosed - The TOTAL number of clients served, the TOTAL number of tax returns we prepare, and the TOTAL amount of refunds and tax credits that are returned to our clients.

Individual personal information will never be disclosed - Information such as name, address, phone number, date of birth, or social security numbers will not be disclosed for any purpose.

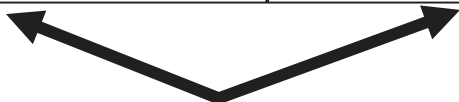
I, _____
(Print) Taxpayer Name

Signature: _____ Date: _____

I, _____
(Print) Spouse Name

Signature: _____ Date: _____

If you believe your tax return information has been disclosed or used improperly in a manner unauthorized by law without your permission, you may contact the Treasury Inspector General for Tax Administration (TIGTA) by telephone at 1-800-366-4484, or by email to: complaints@tigta.treas.gov



BOTH consents MUST be signed by taxpayer & spouse (if applicable)

Consent to disclose Information to the VITA program **Relational Office**

Federal Disclosure

Federal law requires this consent form be provided to you. Unless authorized by law, we cannot disclose your tax return information to third parties for purposes other than the preparation and filing of your tax return without your consent. If you consent to the disclosure of your tax return information, federal law may not protect your tax return information from further use or distribution.

You do not have to complete this form to engage our tax return preparation services. If we obtain your signature on this form by conditioning our tax return preparation services on your consent, your consent will not be valid. Your consent is valid for time that you specify. If you do not specify the duration of your consent, your consent is valid for three years from the date of signature.

Consent Terms

I authorize A New Leaf VITA Program. If you deny this consent, your return can not be e-filed.

3 Years - Purpose – To provide support and administrative assistance to the tax preparer, the Software Developer will make available the taxpayer’s personal information to the VITA/TCE program Relational Office.

3 Years - Disclosure – Tax Preparer will disclose the personal information to the software developer through the tax preparation software. The software developer will disclose that information to the VITA program Relational office.

Individual personal information will never be disclosed - Information such as name, address, phone number, date of birth, or social security numbers will not be disclosed for any purpose.

I, _____
(Print) Taxpayer Name

Signature: _____ **Date:** _____

I, _____
(Print) Spouse Name

Signature: _____ **Date:** _____

If you believe your tax return information has been disclosed or used improperly in a manner unauthorized by law without your permission, you may contact the Treasury Inspector General for Tax Administration (TIGTA) by telephone at 1-800-366-4484, or by email to: complaints@tigta.treas.gov

**Taxpayer & spouse (if applicable)
MUST sign this consent**

Page three of this form will be maintained at the site with all other required documents.

Part III: Taxpayer Consents:

Request to Review your Tax Return for Accuracy:

To ensure you are receiving quality services and an accurately prepared tax return at the volunteer site, IRS employees randomly select free tax preparation sites for review. If errors are identified, the site will make the necessary corrections. IRS does not keep any personal information from your reviewed tax return and this allows them to rate our VITA/TCE return preparation programs for accurately prepared tax returns. If you do not wish to have your return included as part of the review process, it will not affect the services provided to you at this site. If the site preparing this return is selected, do you consent to having your return reviewed for accuracy, by an IRS employee? Yes No

Virtual Consent Disclosure:

If you agree to have your tax return prepared and your tax documents handled in the above manner, your signature and/or agreement is required on this document. Signing this document means that you are agreeing to the procedures stated above for preparing a tax return for you. (If this is a Married Filing Joint return both spouses must sign and date this document.) If you chose not to sign this form, we may not be able to prepare your tax return using this process. Since we are preparing your tax return virtually, we have to secure your consent agreeing to this process. If you consent to use these non-IRS virtual systems to disclose or use your tax return information, Federal law may not protect your tax return information from further use or distribution in the event these systems are hacked or breached without our knowledge. If you agree to the disclosure of your tax return information, your consent is valid for the amount of time that you specify. If you do not specify the duration of your consent, your consent is valid for one year from the date of signature. If you believe your tax return information has been disclosed or used improperly in a manner unauthorized by law or without your permission, you may contact the Treasury Inspector General for Tax Administration (TIGTA) by telephone at 1-800-366-4484, or by e-mail at complaints@tigta.treas.gov. While the IRS is responsible for providing oversight requirements to Volunteer Income Tax Assistance (VITA) and Tax Counseling for the Elderly (TCE) programs, these sites are operated by IRS sponsored partners who manage IRS site operations requirements and volunteer ethical standards. In addition, the locations of these sites may not be in or on federal property.

I am agreeing to use this site's Virtual VITA/TCE Process Yes No

Print Taxpayer Name		Print Spouse Name (if married filing jointly)	
Date of Birth	Last four digits of SSN/ITIN	Date of Birth	Last four digits of SSN/ITIN
Date	Telephone Number	Date	Telephone Number
Email Address		Email Address	
Taxpayer Signature		Spouse Signature	

ONLY if using Drop-Off method, BOTH taxpayer & spouse (if applicable) MUST sign this consent.

