

Client Printed Name: _____

Welcome

The final responsibility for the accuracy of information on your return is up to you. As volunteers we cannot take that responsibility.

REALITIES FOCUS INC (501(c)(3) 73-1707043) FORT COLLINS, COLORADO

The information in this client intake sheet is true and correct. I understand that Realities Focus Inc. (RFI) will retain this information for tax preparation purposes in the event I return next year. I realize that the above organization will use this information to improve tax assistance services to me, speed preparation of tax returns, and offer other services.

My personal information is kept confidential and is not shared with or sold to any other organization or company. Information will be properly stored and when no longer needed, information will be disposed of properly. I give permission for the certified tax preparer to input my personal pin on all disclosure forms as allowed by the client.

RFI and its volunteers are to be held harmless for any mistake in my tax return.

Upon signing the return, by law, I take full responsibility for all content.

RFI may decline to prepare your return if they are in any way uncomfortable with your return, or it is determined that the return is out of scope.

RFI will provide both physical and electronic protection for the information while in our care. Personally specific information collected on the intake and interview sheet will not be sold or shared with anyone else. Electronic records will be maintained for 7 years and as required by the IRS. E-file regulation and aggregate data is retained for the purpose of the program. Such information will not include specific information about the taxpayer. Contact us at Realities Focus INC (970)599-1765 to request we not use your information.

Client Signature: _____

Both if Joint: _____

Date: _____

By signing Form 8879, IRS e-file Signature Authorization, taxpayers are affirming they have reviewed and understand the information listed on their tax return. I have reviewed the banking information and confirm it is correct.

Taxpayer Declaration States:

“Under penalties of perjury, I declare that I have examined this return an accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct and complete”

Client(s) signature(s): _____

Date: _____

IPQO _____ Attachments: POA / 1099 / _____

Form **15080**
(October 2025)**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, 2027.

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, 2027). 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>).