

# Grant to Provide Volunteer Taxpayer Assistance Services — Fiscal Year 2019 Progress Report

Due February 15, 2019

Name of Organization	Report Period (MM/DD/YY - MM/DD/YY)
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**Number of volunteers your organization trained:**

New Volunteers \_\_\_\_\_

Returning Volunteers \_\_\_\_\_

Total Number of Volunteers \_\_\_\_\_

**Levels of certification passed:**

Intake/Interview and Quality Review \_\_\_\_\_

Volunteer Standards of Conduct \_\_\_\_\_

Basic \_\_\_\_\_

Advanced \_\_\_\_\_

Military \_\_\_\_\_

International \_\_\_\_\_

Foreign Student \_\_\_\_\_

Health Savings Account \_\_\_\_\_

Puerto Rico \_\_\_\_\_

Describe how your organization recruited new volunteers and retained past volunteers to provide volunteer taxpayer assistance services this filing season.

## Fiscal Year 2019 Progress Report, Continued

Describe how your organization trained volunteers to provide volunteer taxpayer assistance services this filing season. Include how your organization utilized the Minnesota Department of Revenue required tax training to ensure volunteers are preparing accurate Minnesota returns.

Describe how your organization encouraged taxpayers to have their taxes prepared at your sites for the filing season.

## Fiscal Year 2019 Progress Report, Continued

Describe the diversity and inclusiveness of your organization's taxpayer assistance service volunteers. Include the languages spoken.

Share any other important information to better demonstrate how this grant has helped your organization's volunteer taxpayer assistance services so far this filing season.

If you need more space for responses, attach a separate sheet of paper.

Signature of Authorized Representative

Date