

Additional questions to help us prepare your tax return:

Basic Information			
For Client:		For Preparer:	
What years are you filing? (Check all that apply) <input type="checkbox"/> 2021 <input type="checkbox"/> 2020 <input type="checkbox"/> 2019 <input type="checkbox"/> 2018 <input type="checkbox"/> 2017		• Please process the oldest year first	
Marital Status as of December 31 st of each year (Enter S=Single/M-Married) _____ 2021 _____ 2020; _____ 2019; _____ 2018; _____ 2017		• Adjust each year's return accordingly. MFS is out of Scope , if married during any year, spouse must be included (MFJ) or directed to a paid preparer for assistance for those years	
How many dependents are you claiming for each tax year? _____ 2021 _____ 2020; _____ 2019; _____ 2018; _____ 2017		• Adjust each year's return accordingly. Taxpayers sometimes alternate tax years for dependents.	
Did you receive any stimulus payments? <input type="checkbox"/> Yes <input type="checkbox"/> No – Round 1 Amt (1,200/500): _____ <input type="checkbox"/> Yes <input type="checkbox"/> No – Round 2 Amt (600/pp): _____ <input type="checkbox"/> Yes <input type="checkbox"/> No – Round 3 Amt (1,400/pp): _____ <i>Note: Failure to provide accurate amounts results in the return going into Error Resolution System (ERS) which will delay refunds more than 120 days or longer to process</i>		If taxpayer did not bring in Notice 1444 and 1444B or 1444C, use the following guide to calculate what they should have received based on filing status & dependents in the return. Ex: Round 1 - \$1,200 for taxpayer &/or spouse, \$500 for each dependent under 17; RD 2: \$600 for taxpayer & spouse and \$600 for each dependent under 17; RD3: \$1,400 per person	
Did you receive any advance child tax credit: <input type="checkbox"/> Yes <input type="checkbox"/> No – Total Amount Received: _____ <i>Note: Failure to provide accurate amounts results in the return going into Error Resolution System (ERS) which will delay refunds more than 120 days or longer to process</i>		For the amount to calculate as fully refundable, you must access the Federal Section of the left navigation-COVID-19: 1) Relief select advance child tax credit; 2) select appropriate response to "Did you have a principal place of abode in the US for more than half of 2021". If any amount were received enter accordingly. Enter the number of qualifying child used to calculate the ACTC received.	
Federal Section			
For Client:		For Preparer:	
Yes	No	Unsure	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Was everyone in your family covered by health insurance? TY2017 and TY2018- Shared Responsibility may apply
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Is your spouse's unpaid debt keeping you from filing a joint return? TY2017 and TY2018- Shared Responsibility may apply
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Are you or your spouse in the U.S. on a Visa? If yes, list visa type: _____ TY2017 and TY2018- Shared Responsibility may apply
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Did you receive an IP PIN from IRS? Failure to provide an issued IP PIN will result in IRS delays of processing of 20 weeks or more.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Are you the custodial parent of the dependents you are claiming? If not, the custodial parent must complete form 8332- Release/Revocation of Release of Claim to Exemption for Child by Custodial Parent

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Did you have any children placed with you by an agency or legal action? (Please bring printout of child's name, DOB and SSN provided by agency.)	If yes, the individual may be a "foster child" for tax purposes.[ex: if your grandchild has been placed with you by court order, you would list them as foster child on the tax return to ensure all tax benefits.]No SS cards available. Use printout provided by placement agency.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Did you take money out of a retirement plan (IRA, 401K, 403B, Etc.)? If yes, you must also complete the COVID Retirement Distribution (Form 1099-R) Worksheet .	Review worksheet to make sure all questions have been answered. If annuity, to determine the taxable amount, the taxpayer must provide the start date of the annuity and if they selected the "Joint and Survivor Annuity": option.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Did you drive for a rideshare company (Uber, Lyft, Door Dash, etc.)? If so, you must provide your <u>account statement</u> that reflects income, mileage and expenses.	Enter in appropriate categories within Schedule C. If no tax form received, please enter income under other income in Schedule C. Taxpayer must complete the Self-Employment Tax Organizer (SETO) detailing all expenses relative to the business operations.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Do you owe the IRS for PAST tax debts, have back child support or defaulted student loans?	If yes, federal and state refunds may be intercepted to pay the debt. (1) If the client has a financial hardship (needs refund to pay rent, utilities, etc.), Consider Hardship Refund Request see footnote ¹ . (2) for help with the federal issue, offer taxpayer information about the Low-Income Taxpayer Clinics (LITCs) and Taxpayer Advocate Service. See footnote. ²
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Was your 2019 refund processing delayed? If so, did you receive a 1099INT form for the interest included in your refund?	Refund delay interest is taxable income in 2020.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Did you live alone?	Have a conversation about who the client lived with. You need this information to determine <u>filing status</u> , <u>dependents</u> and possibly <u>Medicaid waiver</u> . Update Intake/Interview & Quality Review Sheet if needed.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Were you paid to provide care for someone in your own home? Must be listed on form 13614 (even if not claiming as dependent)	If yes, see "Medicaid Waiver Payments" Pub. 4012 D-6, D-59 and N-8 and on www.irs.gov . Also see cheat sheet list of providers.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Did you donate cash to a charitable organization? (Church, United Way, Charitable Foundation, etc.) If so, what was the total amount? \$ _____	Enter the amount donated (Cash Only) – Schedule A. Taxpayer must provide proof for all amounts exceeding \$200.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Were any education grants/scholarships included in 1098T unrestricted?	If scholarship is unrestricted, determine best filing method that would yield best results. Parents may be able to carry a portion of the tuition for the AOTC while a portion of the scholarship will be treated as taxable income. See Pub 4491 22-10, Pub 4012 J-1, J-6.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Will you opt to use 2019 income to calculate 2020 or 2021 EIC if it yields a larger benefit? <u>If so, you must bring your 2019 tax packet.</u>	If the earned income for 2019 is higher for 2020 and /or 2021, the change in tax law allows taxpayers to use their 2019 earned income to calculate a possible higher earned income tax credit for 2020 and/or 2021. 2019 AGI: _____

¹ **Do NOT efile** if taxpayer has IRS debt and has an immediate financial hardship such as an eviction or utility shut off notice. The Taxpayer Advocate Service (TAS) may be able to help the taxpayer receive part of the refund for that immediate need if the taxpayers **contacts TAS BEFORE filing** their tax return. Have the taxpayer contact the Local Taxpayer Advocate (LTA) office. See: <https://taxpayeradvocate.irs.gov/contact-us>
If a taxpayer does not want to contact TAS, they can efile their return.

Requests for hardship relief from non-IRS debt must be made to the agency to which the debt is owed. See 2019 Pub. 4012, page P-4.

² Taxpayers with an IRS garnishment, lien or levy may be able to be placed into Currently Not Collectible status and to have the garnishment, lien, or levy stopped. A Low Income Taxpayer Clinic may be able to help. For more information see: <https://taxpayeradvocate.irs.gov> and IRS Pub. 4134.

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Did you purchase or refinance your home during 2021?	<i>If yes, may affect itemized deductions. Review closing documents for deductible amounts paid by client at closing. If client paid tax-deductible points, may need to amortize.</i>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Did you have Capital Gain – Loss Carryover from a previous year’s return? <i>If so, please provide a copy of your tax return processed.</i>	<i>Wisconsin treatment: Capital losses are allowed in full against capital gains. If the losses are more than the gains, up to \$500 of the excess loss is allowed as a deduction against other income. Capital losses in excess of the amount of the allowable loss may be carried over and used in later years.</i>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	At any time during 2020 or 2021, did you or your spouse receive, sell, send, exchange, or otherwise acquire any financial interest in any virtual currency (ex: Crypto Currency & Bitcoin)?	<i>If Yes, Return is Out of scope</i>

State Section

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Did you live outside of Wisconsin anytime during 2021? If so, where? _____	<ul style="list-style-type: none"> • Needed for WI returns to determine full-year or part-year resident. • <u>If client moved</u>, may need to file <u>multiple state returns</u>. • <u>If moved to US</u>, see 4012, page L-1, note 1. • The following states do not have a filing requirement. (Alaska, Florida, Nevada, New Hampshire, South Dakota, Tennessee, Texas, Washington and Wyoming) All other state filing requirements are OUT OF SCOPE
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Did you pay rent or own a home? If rent, how much did you pay each month for the years you are filing? _____ 2021 _____ 2020; _____ 2019; _____ 2018; _____ 2017	<i>If yes, may qualify for Homestead (\$24,680 Income Limit Eligibility applies) and WI School Property Tax Credit (WI Schedule H). If taxpayer provides information, you must enter it into TaxSlayer to show eligibility. Make sure to enter the property taxes <u>paid</u> in Schedule A.</i>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Was Heat Included? _____ 2021 _____ 2020; _____ 2019; _____ 2018; _____ 2017	<i>Check the appropriate box when entering homestead credit & School Property Tax Credit..</i>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Were you a WI resident receiving disability benefits?	<i>If yes, filer(s) may be eligible for WI income exclusion up to \$5,200. See instructions for WI Sch SB TY2021 line 22).</i>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Did you receive court ordered child support and claiming WI Homestead Credit? <i>(If so, please provide printout amount received for full tax year.</i>	<i>If yes, Income must be entered as such for calculating WI Homestead Credit. Also if applicable, add the following nontaxable income sources: Veterans pension, spousal support, and W2 benefits.</i>

Direct Deposit Information

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	If due a refund, did you want to Direct Deposit? If yes, please provide the following information: <input type="checkbox"/> Checking <input type="checkbox"/> Savings Institution Name: _____ Routing Number: _____ Account Number: _____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	If there is an amount owed to IRS, did you want to Direct Debit? If yes, please provide the following information: <input type="checkbox"/> Checking <input type="checkbox"/> Savings Debit Date: _____ <i>(Please note that if paid after April 15th, penalties may apply)</i> Bank Name: _____ Routing Number: _____ Account Number: _____

I understand that this is a free service provided by volunteers. I will be patient and treat volunteers with courtesy and respect. I agree to provide all information necessary to complete an accurate tax return. I have

reviewed the information contained in this document and agree that all the information is complete and correct.

Reminders:

- **If you are married and filing jointly, both spouses must be present for quality review and close-out.**
- **We cannot prepare a return for married taxpayers' filing separate returns.**
- **If you do not provide the IRS issued IP PIN, your return will reject and require paper submission to IRS. This will substantially delay receipt of your refund.**
- **Once your return is submitted electronically, it can only be changed using the amendment option. All Amendments are processed through our main office: 1730 W North Ave. Please contact Diane Robinson at drobinson@cr-sdc.org or 414-906-2804 to schedule.**
- **If your return is "Rejected", if necessary, you will be contacted within five (5) business days.**

Thank you for allowing us to serve you...See you next year!