**INTAKE SUPPLEMENTAL TY2020** (1/26/2021) **Client name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Additional questions to help us prepare your tax return:**

|  |  |  |  |  |  |
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| **Basic Information** | | | | | |
| ***For Client:*** | | | | ***For Preparer:*** | |
| **What years are you filing?** *(Check all that apply)*  **2020**  **2019**  **2018**  **2017** | | | | * *Please process the oldest year first* | |
| **Marital Status as of December 31st of each year** *(Enter S=Single/M-Married)*  \_\_\_\_**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?**  \_\_\_\_**2020**; \_\_\_\_**2019**; \_\_\_\_**2018**; \_\_\_\_**2017** | | | | * *Adjust each year’s return accordingly. Taxpayers sometimes alternate tax years for dependents.* | |
| **Did you receive any stimulus payments?**  **Yes**  **No – Round 1 Amt: $\_\_\_\_\_\_\_\_\_\_\_\_**  **Yes**  **No – Round 2 Amt: $\_\_\_\_\_\_\_\_\_\_\_\_** | | | | *If taxpayer did not bring in Notice 1444 and 1444B, 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; $600 for taxpayer & spouse and $600 for each dependent under 17.* | |
| **Federal Section** | | | | | |
| ***For Client:*** | | | | ***For Preparer:*** | |
| **Yes** | **No** | **Unsure** |  | | |
|  |  |  | **Was everyone in your family covered by health insurance?**  ***TY2017 and TY2018- Shared Responsibility may apply*** | | ***TY2017 and TY2018- Shared Responsibility may apply*** *Refer to Types of Coverage Exemptions cheat sheet. If need affordability exemption click on the “For Tax Preparers” tab at:* healthreformbeyondthebasics.org |
|  |  |  | **Is your spouse’s unpaid debt keeping you from filing a joint return?** | | ***IMPORTANT****:* ***Injured Spouse****Claim – Taxslayer under Miscellaneous Forms. Attach a copy of your federal****Form****8379 (****Injured Spouse****Claim and Allocation) to your****Wisconsin****tax return and enter the "05" code in the Special Conditions Box on page 1. Mail a copy of your****Form****8379 if you are filing electronically. ... to the State of Wisconsin* |
|  |  |  | **Are you or your spouse in the U.S. on a Visa?** If yes, list visa type: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | *If yes & had green card, file 1040. If yes, & no green card, determine if need* ***1040NR (out of scope)*** *before continuing. (4012, L-1).* ***Visas out of scope*** *even if meet residency test: A,H,J,L,M,Q* |
|  |  |  | **Would you prefer IRS to communicate with you in a language other than English?** | | *Make sure that the TP language communication preference is checked in the personal information under basic information in TaxSlayer.* |
|  |  |  | **Did you receive an IP PIN from IRS?** | | *IP PIN if issued is required to efile. Paper return delays refund processing. If TP receives the annual IP PIN via mail but lose or fail to receive their CP01A Notice, they may use the*[*Get an IP PIN tool*](https://sa1.www4.irs.gov/icce-core/loac/ippin/pages/ippin.xhtml)*. To retrieve your number. Visit* [*https://www.irs.gov/identity-theft-fraud-scams/retrieve-your-ip-pin*](https://www.irs.gov/identity-theft-fraud-scams/retrieve-your-ip-pin) |
|  |  |  | **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* | | *Used to release claiming a child on tax return by Custodial Parent when no court placement agreement is in place. This from grants and releases the non-custodial parent the ability to claim child as dependent.* |
|  |  |  | **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.* |
|  |  |  | **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.* |
|  |  |  | **Did you drive for a rideshare company** *(Uber, Lyft, etc.)****?*** *If so, you must provide your account statement 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.* |
|  |  |  | **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]](#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]](#footnote-2)* |
|  |  |  | **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.* |
|  |  |  | **Did you live alone?** | | *Have a conversation about who the client lived with. You need this information to determine filing status, dependents and possibly Medicaid waiver. Update* ***Intake/Interview & Quality Review Sheet*** *if needed.* |
|  |  |  | **Were you paid to provide care for someone in your own home?** | | *If yes, see “Medicaid Waiver Payments” Pub. 4012 D-6, D-59 and N-8 and on* [*www.irs.gov*](http://www.irs.gov)*. Also see cheat sheet list of providers.* |
|  |  |  | **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* |
|  |  |  | **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 the full amount of the tuition for the AOTC while the scholarship will be treated as taxable income. See Pub 4491 22-10, Pub 4012 J-1, J-6.* |
|  |  |  | **Will you opt to use 2019 income to calculate 2020 EIC if it yields a larger benefit?** *If so, you must bring your 2019 tax packet.* | |  |
|  |  |  | **Did you purchase or refinance your home during 2020?** | | *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.* |
|  |  |  | **Did you have Capital Gain – Loss Carryover from a previous year’s return?** *If so, please provide a copy of your tax return processed.* | | ***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.* |
|  |  |  | **At any time during 2020, did you or your spouse receive, sell, send, exchange, or otherwise acquire any financial interest in any virtual currency (ex: Bitcoin)?** | | ***If Yes, Return is Out of scope*** |
| **State Section** | | | | | |
|  |  |  | **As of December 31, 2020, were you a resident of Wisconsin?**  **If you moved during 2020, where else did you live? *\_\_\_\_\_\_\_\_\_\_\_\_\_\_****\_\_\_\_\_\_\_\_\_\_\_\_\_* | | * *Needed for WI returns to determine full-year or part-year resident.* * *If client moved, may need to file multiple state returns.* * *If moved to US, see 4012, page L-1, note 1.* |
|  |  |  | **Did you**  **pay rent or**  **own a home?** *If rent, how much did you pay each month for the years you are filing?*  \_\_\_\_\_\_**2020**; \_\_\_\_\_\_**2019**; \_\_\_\_\_\_**2018**; \_\_\_\_\_\_**2017** | | *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 paid in Schedule A.* |
|  |  |  | **Was Heat Included in rent? *For Homestead Credit Only***  \_\_\_\_**2020**; \_\_\_\_**2019**;  \_\_\_\_**2018**; \_\_\_\_**2017** | | *Check the appropriate box when entering homestead credit.* |
|  |  |  | **Were you a WI resident receiving disability benefits?** | | *If yes, filer(s) may be eligible for WI income exclusion up to $5,200. See instructions for WI Sch SB TY2020 line 22).* |
|  |  |  | **Did you receive court ordered child support and claiming WI Homestead Credit?** *(If so, please provide printout amount received for full tax year.* | | *If yes, Income must be entered as such for calculating WI Homestead Credit.* |
| **Direct Deposit Information** | | | | | |
|  |  |  | **If due a refund, did you want to Direct Deposit? If yes, please provide the following information:**  **Checking**  **Savings**  **Institution Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  ***Routing Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***  ***Account Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*** | | |
|  |  |  | **If there is an amount owed to IRS, did you want to Direct Debit? If yes, please provide the following information:**  **Checking  Savings**  **Debit Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *(Please note that if paid after April 15th, penalties may apply)***  **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.

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| **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**](mailto: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!***

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. [↑](#footnote-ref-1)
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. [↑](#footnote-ref-2)