

CAA Intake Instructions Tax Year 2021

1/24/2022 - 4/15/2022

- 1. Carefully complete all the intake sheets included in this packet.
- 2. We cannot process your tax return, if the intake forms are not complete or if there are missing COPIES of IDs or tax documents.
- 3. THIS IS A NEW TAX YEAR. WE NEED <u>COPIES</u> OF ID's, TAX DOCUMENTS, AND THE FULLY COMPLETED TAX INTAKE FORMS.
- 4. Place completed INTAKE and COPIES of: tax documents and ID in the tax envelope. Drop the envelope in the black drop box in the CAA Lobby or the drop box in the parking lot. YOU WILL NOT GET THESE COPIES BACK. THEY WILL BE SHREDED AT THE END OF THE TAX SEASON!

Pre-Screening – **optional but recommended** - is available at CAA in the GLR room, beginning **2/4/2022**. Signs will be posted.

Tuesdays:	Thursdays:			
9:30am – 2pm	9:30am – 4pm			

Pre-screening by a volunteer helps to ensure that you have the necessary tax documents.

- 1. Pick-up a TAX packet and tax envelope from the table in the CAA Lobby and complete the packet.
- 2. Place in the envelope your tax packet and COPIES of your: tax documents and ID.
- 3. Sign-in at the Pre-Screening table in the GLR room (follow the signs) and leave your packet in the box of whose sign-in sheet you signed. Wait in your car or the Lobby for the screener to call you on your phone.
- 4. Your packet will be reviewed and you will be texted/called if the screener has questions, needs to give the packet back to you with a list of missing forms, or your packet looks complete. Do not leave without knowing the status of your packet.

GET COPIES OF TAX DOCUMENTS FREE

Cincinnati Library Branches will let you make black and white copies of your documents & ID first 20 pages **FREE**, pages 21 and after cost \$0.15 a page.

You need to get COPIES of:

- Photo ID has your picture and name
- Social security cards or ITIN's for everyone on your tax return OR SSA-1099's OR letter or document from Social Security with your name and last four of your social security numbers
- Letter 6419 from the IRS, if you received Advanced Child Tax Credits (The IRS started sending this out in December, 2021.)
- Letter 6475 from the IRS, if you received the third round of Economic Impact payments. (The IRS is sending this out in late January, 2022.)
- Tax Documents W2's, 1099's, income statements, bank statements, charitable giving, gambling winnings, etc.
- Bank Account Info routing number & account # & type of account (checking or savings), for direct deposit There is a place to complete this information in the packet.

CAA TAXES – CLIENT INFORMATION – TAX YEAR 2021

First Name:				Last Name:			
School District:			County:				
What are the	two best methods to c	ontact you	during th	nis tax season?			
Priority 1 – Best 2 – Good	Contact Information						
	Cell #:	Best time(s call:	s) to	Can you send text messages?	Can you receive text messages?		
	Phone Number#	Best time(s) to call				
	Email Address:						
	Mailing Address:						
For Direct De	eposit of your refund, p	lease provi	de:				
Bank Routing Is this a chec	Number: king or savings account?		Bank Acc	ount Number:			
If you owned	I a Health Savings Acco	ount (HSA) i	n 2021, j	please complete the	e below questions:		
Was the HSA	for single or family cove	rage?					
Did you take an HSA distribution in 2020? If so, how was it used? (E.g., medical expenses)							
If you took a distribution from an IRA before you were 59 $\frac{1}{2}$, how was the distribution used?							
Did you make any charitable contributions? For taxpayers who do not itemize: married couples filing a joint return can deduct up to \$600 and all other filers can deduct up to \$300.							
If you are una	You can download or we can email a final copy of your tax return to you. If you are unable to download or receive email, we can mail a copy to you near the end of the tax season. Will you need your return mailed?						

Place in envelope.

You will need: • Please complete pages 14 of this form. • Tax holoration such as Forms W-2, 1099, 1098, 1095. • You arr exponsible for the information on your return. Please provide cign development of the standards. • Pleater BL Such as valid driver's licensol for you and your spouse. • You arr exponsible for the information. • Pleater BL Such as valid driver's licensol for you and your spouse. • You arr exponsible for the information. • Pleater BL Such as valid driver's licensol for you and your spouse. • You arr exponsible for the information. • You arr exponsible for the information. • You arr exponsible for the information. • You arr exponsible for the information. • You arr exponsible for the information. • Your spouse's first name M.I. Last name Best contact number Arr you a U.S. citizen? • Your spouse's first name M.I. Last year, was your spouse. • Legally blind Yes No • Your spouse's Date of Birth 6. Your yob title 9. Last year, was your spouse. • Lugally blind Yes No 1. Touch array ou claim you or your spouse as a dependent? Yes No • Legally blind Yes No 1. Touch array meal address globraid (fits emain address with one address with one address with one addres with one address with one address with one addreswith one addre	Form 13614-C (October 2021) Department of the Treasury - Internal Revenue Service Intake/Interview & Quality Review \$							heet			OMB N 1545-			
PLACE IN ENVELOPE To report unethical behavior to the IRS, email is at wit/ottax@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. citzen? 1. Your first name M.I. Last name Best contact number Are you a U.S. citzen? No 2. Your spouse's first name M.I. Last name Best contact number Are you a U.S. citzen? No 3. Mailing address Apt # City State ZIP code 4. Your spouse's Date of Birth 5. Your spouse's job title 6. Last year, were you: a. Full-time student Yes No 1. Can anyone claim you or your spouse as a dependent? Yes No Unsure 1. Have you, your spouse, or dependents been a vicitim of tax related identity thef or been issued an infermal Revenue Service) Part II - Marital Status and Household Information 1. As of December 31, 2021, what Never Married (This includes registered domestic partnerships, civil unions, or other formal relationships under state law) No 1. As of December 31, 2021, what Never Married (This includes registered domestic partnerships, civil unions, or other formal relationships under state la	 Tax Information such as Forms W-2, 1099, 1098, 1095. Social security cards or ITIN letters for all persons on your tax return. You are responsible for the information on your return. Please provide complete and accurate information. 													
1. Your first name M.I. Last name Best contact number Are you a U.S. citizen? 2. Your spouse's first name M.I. Last name Best contact number Is your spouse a U.S. citizen? 3. Mailing address Apt # City State ZP code 4. Your Date of Birth 5. Your job title 6. Last year, were you: a. Full-time student Yes No 7. Your spouse's Date of Birth 8. Your spouse's job title 9. Last year, ware you: a. Full-time student Yes No 10. Can anyone claim you or your spouse as a dependent? Yes No Unsure No Last year, ware your spouse? a. Full-time student Yes No 11. Have you, your spouse, or dependents been a victim of tax related identity theft or been issued an Identity Protection PIN? Yes No 12. Provide an email address (pional) finite student Yes No 12. Provide an email address Never Married (This includes registered domestic partnerships, civil unions, or other formal relationships under state law) was your marital status? Never Married Date of final decress Yes No 2. List the names below of: - exeryone who lived with you last year <t< th=""><th>PLACE IN ENVELOPE</th><th>Volunteer</th><th></th><th></th><th>-</th><th></th><th></th><th>•</th><th>-</th><th></th><th>l standard</th><th>S.</th><th></th><th></th></t<>	PLACE IN ENVELOPE	Volunteer			-			•	-		l standard	S.		
2. Your spouse's first name M.I. Last name Best contact number Is your spouse a U.S. clitzen? 3. Mailing address Apt # City State ZIP code 4. Your Date of Birth 5. Your job title 6. Last year, were you: a. Full-time student Yes No 7. Your spouse's Date of Birth 8. Your spouse's job title 9. Last year, was your spouse: a. Full-time student Yes No 10. Can anyone claim you or your spouse as a dependent? Yes No Luster No c. Legally blind Yes No 11. Have you, your spouse, or dependents been a victim of tax related identity thefor oben issued an Identity Protection PIN? Yes 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 This includes registered domestic partnerships, civil unions, or other formal relationships under state law) was your marital status? Married This includes registered domestic partnerships, civil unions, or other formal relationships under state law) a. Hill-time student in the part in the part in the part in the part of final decree Divorced Date of final decree Wear of spouse's death To be completed by a Certified Volunteer Prepare	Part I – Your Personal Inform	nation (If you a	are filing a j	oint return,	, enter	your nam	es in the a	same orde	er as last y	ear's return)				
3. Mailing address Apt # City State ZIP code 3. Mailing address Apt # City State ZIP code 4. Your Job title 6. Last year, were you: a. Full-time student Yes No 7. Your spouse's Date of Birth 8. Your spouse's job title 9. Last year, was your spouse: a. Full-time student Yes No 10. Can anyone claim you or your spouse as a dependent? Yes No C. Last year, was your spouse: a. Full-time student Yes No 11. Have you, your spouse, or dependents been a victim of tax related identity their or been issued an Identity Protection PIN? Yes 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, 2021, what Never Married (This includes registered domestic partnerships, civil unions, or other formal relationships under state law) was your marital status? Married If Yes, Old you get married in 2021? Yes No 2. List the names below of: Elegally Separated Date of separate maintenance decree Yes of spouse's death Part in Married with you last year (other than your spouse) If additional space is needed check here in a	1. Your first name		M.I.	Last na	ame				Be					
4. Your Date of Birth 5. Your job title 6. Last year, were you: a. Full-time student Yes No 7. Your spouse's Date of Birth 8. Your spouse's job title 9. Last year, was your spouse: a. Full-time student Yes No 7. Your spouse's Date of Birth 8. Your spouse's job title 9. Last year, was your spouse: a. Full-time student Yes No 10. Can anyone claim you or your spouse as a dependent? Yes No Unsure Yes No 11. Have you, your spouse, or dependents been a victim of tax related identity theft or been issued an Identity Protection PIN? Yes 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, 2021, what Never Married (This includes registered domestic partnerships, civil unions, or other formal relationships under state law) was your marital status? Married a. If Yes, Did you get married in 2021? Yes No b. Did you live with your spouse's death Elegally Separated Date of final decree Single or final decree Single or fortigen and get and the state six months of 2021? Yes No 2. List the names below of: Full-time Totally	2. Your spouse's first name		M.I.	Last na	ame				Be	est contact n	umber			
b. Totally and permanently disabled Yes No c. Legally blind Yes No 7. Your spouse's Date of Birth 8. Your spouse's job title 9. Last year, was your spouse: a. Full-time student Yes No 10. Can anyone claim you or your spouse as a dependent? Yes No Unsure . . Last year, was your spouse: a. Full-time student Yes No 11. Have you, your spouse, or dependents been a victim of tax related identity theft or been issued an Identity Protection PIN? Yes 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, 2021, what No No 1. As of December 31, 2021, what Never Married . If Yes, Did you get married in 2021? Yes No b. Did you live with your spouse's death . . Divorced Date of final decree Yes No • weryone who lived with you last year . . Married as divertify on the morther of mark for the name below of: . If additional space is needed check here and list on page 3 Name (first, last) Do not enter your name or spouse's name below . . . F	3. Mailing address			·			Apt #	City	·			State	Z	IP code
7. Your spouse's Date of Birth 8. Your spouse's job title 9. Last year, was your spouse: a. Full-time student yes No 10. Can anyone claim you or your spouse as a dependent? Yes No Lonsure 10. Student Yes No 11. Have you, your spouse, or dependents been a victim of tax related identity theft or been issued an Identity Protection PIN? Yes 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 (This includes registered domestic partnerships, civil unions, or other formal relationships under state law) 1. As of December 31, 2021, what Never Married (This includes registered domestic partnerships, civil unions, or other formal relationships under state law) a. If Yes, Did you get married in 2021? b. Did you live with your spouse during any part of the last six months of 2021? Yes No 2. List the names below of: • everyone who lived with you last year To be completed by a Certified Volunteer Preparer * anyone you supported but did not live with you last year If additional space is needed check here and list on page 3 * mare (inst. last year, nore, etc); (a) (b) (c) (d) (e) (f) (g) (h) (i) (i) (i) <td>4. Your Date of Birth</td> <td>5. Your job t</td> <td>itle</td> <td></td> <td></td> <td>-</td> <td>-</td> <td></td> <td>abled 🗌</td> <td>Yes 🗌 N</td> <td></td> <td></td> <td></td> <td></td>	4. Your Date of Birth	5. Your job t	itle			-	-		abled 🗌	Yes 🗌 N				
10. Can anyone claim you or your spouse as a dependent? Yes No Unsure 11. Have you, your spouse, or dependents been a victim of tax related identity theft or been issued an Identity Protection PIN? Yes 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 Yes No 1. As of December 31, 2021, what Never Married (This includes registered domestic partnerships, civil unions, or other formal relationships under state law) was your marital status? Never Married If Yes, Did you get married in 2021? Yes No b. Did you live with you spouse during any part of the last six months of 2021? Yes No 2. List the names below of: Legally Separated Date of final decree	7. Your spouse's Date of Birth	8. Your spou	use's job titl	e	9. Last year, was your spouse: a. Full-time studen					lent 🗌 Y	es 🗌 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, 2021, what	10. Can anyone claim you or y	our spouse as	a depende	nt?		-								
Part II – Marital Status and Household Information 1. As of December 31, 2021, what was your marital status? Never Married a. If Yes, Did you get married in 2021? Yes No was your marital status? Married a. If Yes, Did you get married in 2021? Yes No b. Did you live with your spouse during any part of the last six months of 2021? Yes No Obid you live with your spouse during any part of the last six months of 2021? Yes No Divorced Date of final decree Image: Spouse's death 2. List the names below of: • everyone who lived with you last year (other than your spouse) If additional space is needed check here and list on page 3 • anyone you supported but did not live with you last year Married as or files in months daughter, parent, none, etc) Citizen or files in the qualifying or Mexico (GM) Did this person a qualifying yearson a qualifying yearson a qualifying yearson a qualifying yearson a qualifying (yes/no) Did the for than yearson a qualifying yearson a	11. Have you, your spouse, or	dependents be	een a victim	of tax rela	ated ide	entity thef	t or been	issued an	Identity Pr	otection PIN	1?			es 🗌 No
1. As of December 31, 2021, what was your marital status? Never Married a. If Yes, Did you get married in 2021? Yes No Married a. If Yes, Did you get married in 2021? Yes No Divorced Date of final decree Year of spouse's death Widowed Year of spouse's death Year of spouse's death • everyone who lived with you last year (other than your spouse) If additional space is needed check here and list on page 3 Name (first, last) Do not enter your name or spouse's name below Relationship (a) (b) (c) (d) (e) (f) (g) (h) (i) Is this person a qualitying of any other your of any other your of any other your home, etc? (ges/no) (ges/no) </td <td>12. Provide an email address (</td> <td>optional) (this</td> <td>email addre</td> <td>ess will not</td> <td>t be use</td> <td>ed for con</td> <td>tacts fron</td> <td>n the Inter</td> <td>rnal Reven</td> <td>ue Service)</td> <td></td> <td></td> <td></td> <td></td>	12. Provide an email address (optional) (this	email addre	ess will not	t be use	ed for con	tacts fron	n the Inter	rnal Reven	ue Service)				
was your marital status? Married a. If Yes, Did you get married in 2021? Yes No b. Did you live with your spouse during any part of the last six months of 2021? Yes No Divorced Date of final decree Year of spouse's death No Widowed Year of spouse's death If additional space is needed check here [] and list on page 3 • averyone who lived with you last year (other than your spouse) If additional space is needed check here [] and list on page 3 • anyone you supported but diont live with you last year Date of Birth norme (first, last) Do no tenter your name or spouse's name below Number of live with you last year US Resident of US, (gs/no) Single or dirive visat year Did this person a qualifying or income or spouse's name below Date of Birth nore, etc) Number of US, (gs/no) Number of (gs/no) Single or dirive visat year Single or dirive visat year<	Part II – Marital Status and	l Household	Informati	on										
 everyone who lived with you last year (other than your spouse) anyone you supported but did not live with you last year Name (first, last) Do not enter your name or spouse's name below (mm/dd/yy) (mm/dd/yy) (b) (c) (c) (d) (c) (d) (e) (f) (g) (h) (g) (g) (h) (g) (g) (h) (g) (g) (h) (g) (g)		was your marital status? Married a. If Yes, Did you get married in 2021? Yes No b. Did you live with your spouse during any part of the last six months of 2021? Yes No Divorced Date of final decree No Legally Separated Date of separate maintenance decree Ves						0						
Name (first, last) Do not enter your name or spouse's name belowDate of Birth (mm/dd/yy)Relationship to you (for example: son, daughter, parent, none, etc)Number of to you (for 	• everyone who lived with yo)				If add					
name or spouse's name below(mm/dd/yy)to you (for example: son, daughter, parent, none, etc)months lived in your home last yearCitizen (yes/no)of US, Canada, or Mexico (S/M)Married as of 12/31/21 (S/M)Student last year (yes/no)Permanently Disabled (yes/no)person a qualifying child/relative of any other person? (yes/no)person a person have less than \$4,300 of income? (yes/no/n/a)taxpayer(s) taxpayer(s) taxpayer(s) pay more than half the cost of maintaining a (yes/no)(a)(b)(c)(d)(e)(f)(g)(h)NNPermanently Disabled (yes/no)person a qualifying (i)person a person? (yes/no)person a person? (yes/no)person a person? (yes/no)person a person? (yes/no)person a						Decident	Cingle or	Full time	Totally and			-		
Image: Second	name or spouse's name below	(mm/dd/yy)	to you (for example: son, daughter, parent, none, etc)	months lived in your home last year	Citizen (yes/no)	of US, Canada, or Mexico last year (yes/no)	Married as of 12/31/2 (<i>S/M</i>)	5 Student 1 last year (yes/no)	Permanently Disabled (yes/no)	person a qualifying child/relative of any other person?	person provide more than 50% of his/ her own support?	person have less than \$4,300 of income?	taxpayer(s) provide more than 50% of support for this person?	taxpayer(s) pay more than half the cost of maintaining a home for this person?
													400444	

Check appropriate box for each question in each section

Yes	No	Unsure	Part III – Income – Last Year, Did You <i>(or Your Spouse)</i> Receive						
			1. (B) Wages or Salary? (Form W-2) If yes, how many jobs did you have last year? 2. (A) Tip Income? PLACE PAGE IN						
			3. (B) Scholarships? (Forms W-2, 1098-T) ENVELOPE						
			4. (B) Interest/Dividends from: checking/savings accounts, bonds, CDs, brokerage? (Forms 1099-INT, 1099-DIV)						
			5. (B) Refund of state/local income taxes? (Form 1099-G)						
			6. (B) Alimony income or separate maintenance payments?						
			7. (A) Self-Employment income? (Form 1099-MISC, 1099-NEC, cash, virtual currency, or other property or services)						
			8. (A) Cash/check/virtual currency payments, or other property or services for any work performed not reported on Forms W-2 or 1099?						
			9. (A) Income (or loss) from the sale or exchange of Stocks, Bonds, Virtual Currency or Real Estate? (including your home) (Forms 1099-S,1099-B)						
			10. (B) Disability income? (such as payments from insurance, or workers compensation) (Forms 1099-R, W-2)						
			11. (A) Retirement income or payments from Pensions. Annuities, and or IRA? (Form 1099-R)						
			12. (B) Unemployment Compensation? (Form 1099G)						
			13. (B) Social Security or Railroad Retirement Benefits? (Forms SSA-1099, RRB-1099)						
			14. (M) Income (or loss) from Rental Property?						
			15. (B) Other income? (gambling, lottery, prizes, awards, jury duty, virtual currency, Sch K-1, royalties, foreign income, etc.)						
Yes	No	Unsure	Part IV – Expenses – Last Year, Did You (or Your Spouse) Pay						
			1. (B) Alimony or separate maintenance payments? If yes, do you have the recipient's SSN? 🗌 Yes 🛛 No						
			2. Contributions or repayments to a retirement account? 🗌 IRA (A) 🗌 401K (B) 🗌 Roth IRA (B) 🗌 Other						
			3. (B) College or post secondary educational expenses for yourself, spouse or dependents? (Form 1098-T)						
			4. Any of the following? (A) Medical & Dental (including insurance premiums) (A) Mortgage Interest (Form 1098)						
			(A) Taxes (State, Real Estate, Personal Property, Sales) (B) Charitable Contributions						
			5. (B) Child or dependent care expenses such as daycare?						
			6. (B) For supplies used as an eligible educator such as a teacher, teacher's aide, counselor, etc.?						
			7. (A) Expenses related to self-employment income or any other income you received?						
			8. (B) Student loan interest? (Form 1098-E)						
Yes	No	Unsure	Part V – Life Events – Last Year, Did You <i>(or Your Spouse)</i>						
			1. (A) Have a Health Savings Account? (Forms 5498-SA, 1099-SA, W-2 with code W in box 12)						
			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)						
			3. (A) Adopt a child?						
			4. (B) Have Earned Income Credit, Child Tax Credit or American Opportunity Credit disallowed in a prior year? If yes, for which tax year?						
			5. (A) Purchase and install energy-efficient home items? (such as windows, furnace, insulation, etc.)						
			6. (A) Receive the First Time Homebuyers Credit in 2008?						
			7. (B) Make estimated tax payments or apply last year's refund to this year's tax? If so how much?						
			8. (A) File a federal return last year containing a "capital loss carryover" on Form 1040 Schedule D?						
			9. (A) Have health coverage through the Marketplace (Exchange)? [Provide Form 1095-A]						
			10. (B) Receive an Economic Impact Payment (stimulus) in 2021?						
			11. (B) Receive Advanced Child Tax Credit payments?						

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 b. To purchase U.S. Savings Bonds c. To split your refund between different accounts Yes No Yes No 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?
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.
7. 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
8. Would you say you can read a newspaper or book in English? 🛛 Very well 🗌 Well 🗌 Not well 🗌 Not at all 🗌 Prefer not to answer
9. Do you or any member of your household have a disability?
10. Are you or your spouse a Veteran from the U.S. Armed Forces? 🛛 Yes 🗌 No 📄 Prefer not to answer
11. Your race?
American Indian or Alaska Native 🗋 Asian 🗋 Black or African American 📄 Native Hawaiian or other Pacific Islander 📄 White 📄 Prefer not to answer
12. 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
13. Your ethnicity?
14. Your spouse's ethnicity? 🛛 Hispanic or Latino 🗌 Not Hispanic or Latino 🗌 Prefer not to answer 🗌 No spouse ENVELOPE
Additional Comments If you are requesting taxes be done for prior years, please make sure you note it below.
11. Your race? American Indian or Alaska Native Asian Black or African American Native Hawaiian or other Pacific Islander White Prefer not to answer 12. 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 12. Your spouse's race? No spouse Image: Not Hispanic or Latino Image: Not Hispanic or Latino Image: Prefer not to answer PLACE IN 13. Your spouse's ethnicity? Image: Hispanic or Latino Image: Not Hispanic or Latino Image: Prefer not to answer ENVELOPE 14. Your spouse's ethnicity? Image: Hispanic or Latino Image: Not Hispanic or Latino Image: Prefer not to answer Image: No spouse

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

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CONSENTS - COMMUNITY ACTION AGENCY CINCINNATI | HAMILTON COUNTY

Your permission is required for the tax site to prepare and e-file your taxes. You will be asked 4 times to provide	a 5-digit number (PIN) to show yo	ur
consent on each line. You can use your zip code. You do not need to remember this number.		
A copy of each of the following consents will be included with your prepared return(s):	Place in envelope.	

CONSENT TO DISCLOSE & USE PERSONAL INFORMATION FOR AGGREGATE DATA (GENERAL STATISTICS)

To support and promote this program to future taxpayers and volunteers,	For example: In 2020, volunteers throughout the region filed more than			
we use aggregate information about total number of tax returns, total	8,000 federal income tax returns in our Tri-State Region. This generated			
amounts of refunds and credits, and average income, age and family	\$12 million dollars in refunds to the community. BY CONSENTING, YOU			
status of tax returns prepared throughout the region. We never	are part of that number!			
include/print anyone's individual information in any of these statistics.				
Do you, and if applicable, your spouse, give us permission to include your information in this total? You: Spouse:				

Do you, and if applicable, your spouse, give us permission to include your information in this total?

PERMISSION TO E-FILE

Allows us to e-file your tax return versus you having to mail it. E-filing allows the Free Tax Prep site to monitor your return for errors or delays.

Do you, and if applicable, your spouse, give us permission to e-file your tax return?

You: Spouse:

CONSENT TO DISCLOSE AND USE TAX RETURN INFORMATION TO TAX PREP SITES & REGIONAL SITE. (3 Years)

Disclosure to Tax Prep Sites: Allows your permission for the tax site to use your information to prepare your return and allows the tax return preparer to enter a PIN in the tax software on your behalf. Disclosure/Use to Regional Office: Your permission allows the tax site to share your personal information in the tax software with the VITA program Regional Office (United Way of Greater Cincinnati) to provide you with direct support, ONLY. This means that after your tax site closes, you can call Free Tax Prep at the United Way to ask questions, get a copy of your tax return, etc.

Do you, and if applicable, your spouse, agree to disclose your information to the tax site & regional office? You: Spouse:

GLOBAL CARRY FORWARD (CONSENT TO DISCLOSE TAX RETURN INFO TO TAX PREP SITES)

This consent allows information from your 2021 tax return to carry forward to next year. This means, you can, in 2023, go to **any** VITA or AARP tax preparation site in the country. Your tax return will automatically be filled with information from 2021 - instead of it being retyped into the system.

Do you, and if applicable, your spouse, agree to carry forward your information in the VITA tax software? You: Spouse:

Form **14446**

(November 2021)

Department of the Treasury - Internal Revenue Service

Virtual VITA/TCE Taxpayer Consent

This form is required whenever the taxpayer's tax return is completed and/or quality reviewed in a non-face-to-face environment. The site must explain to the taxpayer the process used to prepare the taxpayer's return. If applicable, volunteers must advise taxpayers of the associated risk of transferring their data from one site location to another site.

Part I - To be completed by the VITA/TCE site:	KEEP THIS PAGE
Site name: Community Action Agency Cincinnati Hamilton Count	у
Site address (street, city, state, zip code): 1740 Langdon Farm R	d, Cincinnati, OH 45237
Site identification number (SIDN): S43011222	Site coordinator name: EITC Site Coordinator
Site contact name: Operations Director	Site contact telephone number: 513-309-7800

This site is using the following Virtual VITA/TCE method(s) to prepare your tax return:

- A. Intake Site: This method includes the taxpayer leaving their personal identifiable information (social security numbers, Form W-2 and other documents) at the site in order to prepare and/or quality review the tax return at another location. In this process, the taxpayer's tax return information may be sent to another location for one or more of the following reasons; interviewing the taxpayer, preparing the tax return, or performing a quality review.
- B. <u>100% Virtual VITA/TCE Process</u>: This method includes non face-to-face interactions with the taxpayer and any of the VITA/ TCE volunteers during the intake, interview, return preparation, quality review, and signing the tax return. The site must explain the process and consent. This includes the virtual procedures to send required documents (social security numbers, Form W-2 and other documents) through a secured file sharing system to a designated volunteer for review.

Part II: The Sites Process:

- 1. Scheduling the appointment: NA Taxpayers pickup intake forms and drop off copies of their tax documents and completed intake in the CAA Lobby. If taxpayers opt for pre-screening in the GLR room in the CAA Lobby follow the signs copies of their tax documents and intake are dropped off there. The pre-screener calls/texts the taxpayer that their tax packet is complete or calls the taxpayer in and gives the taxpayer a list of what is missing and returns their entire tax packet to them or drops off the envelope.
- 2. Securing Taxpayer Consent Agreement: Taxpayer consents are part of the intake documents. If the taxpayer has not signed the consents, an interviewer will call the taxpayer and request an email or text message stating they agree to the consents, which are included in the taxpayer's return packet. We will not be able to e-file your tax return, if you do not give us permission to do so.
- 3. Performing the Intake Process (secure all documents): CAA personnel, who have completed the VSOC, take the returns from locked drop off boxes and scan them to the Site Coordinator, via secure email. The tax envelopes are then secured and locked in an office. The envelopes are placed in locked shred bins at the end of the tax season for shredding.
- 4. Validating taxpayer's authentication (Reviewing photo identification & Social Security Cards/ITINS): The Interviewer calls the taxpayer. The interviewer, where possible, uses Zoom or Microsoft Teams, to have a video call with the taxpayer to ensure the photo ids match the person. Also, last year's return is checked for changed basic information, e.g., address.
- 5. Performing the interview with the taxpayer(s):

The site uses GetYourRefund (GYR) for return management. When all information is entered or uploaded to GYR, the status is changed to Ready for Tax Prep. The screener or site coordinator determines the return's level, which is entered into GYR. The tax preparers, select the return to be processed, which meets their level of certification.

- 6. Preparing the tax return: The Tax Preparers prepare the return. They contact the taxpayer with questions as needed. When done, the returns are set to Ready for Quality Review in TaxSlayer and GetYourRefund.
- 7. Performing the quality review: The Quality Reviewer, reviews the return for obvious errors, then sends a copy of the return to the taxpayer, asking if they can call or setup a phone meeting to discuss the return and obtain signatures.
- 8. Sharing the completed return: The taxpayer downloads a copy of the return to their device via GYR. (If the taxpayers are unable to use GYR, we can mail or email encrypted, password protected copies of returns to the taxpayers.) If the return changes as a result of the review, the Quality Reviewer updates the return and resends the return to the taxpayer for review.
- **9. Signing the return:** The taxpayer approves the return through the GYR app. Taxpayers, with various life circumstances, infirm, etc., a verbal approval is accepted, or the taxpayer prints their name on the 8879 and sends it back to us, via fax, secure links from the Site Coordinator, or through GYR. The Quality Reviewer updates the return status to Complete in TaxSlayer and Ready to E-file in GYR.

10. E-filing the tax return

The Site Coordinator e-files the returns several times a day, Monday - Fridays.

Page two 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
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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 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	o use this site's Virtual VITA/TCE Process		🗌 Yes 📃 No					
Printed name		Printed name (s	Printed name (spouse if married filing joint)					
Date of birth	Last four digits Social Security/ITIN number	Date of birth	Last four digits Social Security/ITIN number					
Date	Telephone number	Date	Telephone number					
Email address		Email address						
Signature (elect		Signature (electronic)						
	OR		OR					
Signature (type/	(print)	Signature (type/)	print)					

Place this signed sheet in the envelope.