



St Philip Benizi Catholic Church
VITA Participant Survey – 2022



Valued VITA tax preparation participant, please complete this survey. Your answers will help determine the needs and desires of community residents, which will assist our agencies with developing and offering you valuable resources and services.

Today's Date:		Email:	
First Name:		Last Name:	
Mobile #:		Primary Language Spoken:	
Age: <input type="checkbox"/> 18 – 25 <input type="checkbox"/> 26 – 35 <input type="checkbox"/> 36 – 45 <input type="checkbox"/> 46 – 55 <input type="checkbox"/> 56 – 65 <input type="checkbox"/> Over 66	Ethnicity: <input type="checkbox"/> Black or African American <input type="checkbox"/> Caucasian <input type="checkbox"/> Asian <input type="checkbox"/> Hispanic <input type="checkbox"/> Latin <input type="checkbox"/> Native American <input type="checkbox"/> Other _____	Now do you identify: <input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> Other <input type="checkbox"/> Choose not to answer	
Marital Status: <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widow/Widower			
Do you have any children/dependents under the age of 18 residing with you? No Yes		If yes how many? 1-3 4 or more	
Are you a registered voter? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Sure			
County: <input type="checkbox"/> Butts <input type="checkbox"/> Fulton <input type="checkbox"/> Cherokee <input type="checkbox"/> Gwinnett <input type="checkbox"/> Clayton <input type="checkbox"/> Henry <input type="checkbox"/> Cobb <input type="checkbox"/> Newnan <input type="checkbox"/> Coweta <input type="checkbox"/> Newton <input type="checkbox"/> DeKalb <input type="checkbox"/> Paulding <input type="checkbox"/> Douglas <input type="checkbox"/> Rockdale <input type="checkbox"/> Forsyth <input type="checkbox"/> Other			
May someone from one of our partner agencies contact you regarding valuable community services? <input type="checkbox"/> Yes <input type="checkbox"/> No			
1. How did you have your taxes prepared last year? (Select Only One)			
<input type="checkbox"/> This Free VITA Site <input type="checkbox"/> Another Free Vita Site <input type="checkbox"/> Another Free Program <input type="checkbox"/> I prepared them free online with <input type="checkbox"/> IRS Partner Agency <input type="checkbox"/> Paid Preparer with Instant Refund <input type="checkbox"/> Paid Preparer No Instant Refund <input type="checkbox"/> I prepared with paid software <input type="checkbox"/> Family/Friend Prepared them <input type="checkbox"/> I did not file last year			
2. How did you hear about the VITA/Free Tax Preparation Program? (Check all that apply)			
<input type="checkbox"/> Saw Signs At This Location <input type="checkbox"/> Friend/Family Member <input type="checkbox"/> Flyer/Sign In Local Business <input type="checkbox"/> Radio/TV <input type="checkbox"/> Newspaper <input type="checkbox"/> I called the IRS <input type="checkbox"/> Website <input type="checkbox"/> Church Newsletter/Bulletin <input type="checkbox"/> I called 211 (United Way Helpline) <input type="checkbox"/> Calling Post Message <input type="checkbox"/> NACA Email Notification <input type="checkbox"/> Marta Ad <input type="checkbox"/> Text Message <input type="checkbox"/> PTA/Child's School <input type="checkbox"/> Other:			
What is your current employment status? Full-time Part-time Unemployed/Laid Off Not able to work Retired Self-Employed Other			
3. How do you receive pay from your primary employer? (Check only one) <input type="checkbox"/> Direct Bank Deposit <input type="checkbox"/> Cash <input type="checkbox"/> Check <input type="checkbox"/> Payroll Debit Card <input type="checkbox"/> Currently Not working <input type="checkbox"/> Other:			

4. What are your plans for your tax refund this year? (Check all that apply)

- | | | |
|--|---|---|
| <input type="checkbox"/> I Don't Expect A Refund | <input type="checkbox"/> Pay Car/Truck/Purchase/Lease Automobile | <input type="checkbox"/> Pay for Education/Student Loan/Tuition |
| <input type="checkbox"/> Something Nice/Vacation/Gifts | <input type="checkbox"/> Save It -Bank/Credit Union Savings Account | <input type="checkbox"/> Purchase a Home |
| <input type="checkbox"/> Move To Another City/State | <input type="checkbox"/> Pay Mortgage/Rent | <input type="checkbox"/> Basic Needs (Food/Clothing) |
| <input type="checkbox"/> I Don't Know (undecided) | <input type="checkbox"/> Pay Credit Card/Loans | <input type="checkbox"/> Other: _____ |

5. Do you have any of the following accounts? (Check all that apply)

- | | |
|---|--|
| <input type="checkbox"/> Checking Account | <input type="checkbox"/> Certificate of Deposit (CD) |
| <input type="checkbox"/> Health Savings Account | <input type="checkbox"/> Individual Retirement Account (IRA) |
| <input type="checkbox"/> Basic Savings Account | <input type="checkbox"/> Investment Account |
| <input type="checkbox"/> Savings Bonds/Stock Certificates | <input type="checkbox"/> 401K or 403B |
| <input type="checkbox"/> Individual Development Account (IDA) | |

6. Did you or anyone in your tax household receive/participate in any of the following in 2020? (Check all that apply)

- | | | |
|--|---|--|
| <input type="checkbox"/> Food Stamps | <input type="checkbox"/> Childcare Assistance Program | <input type="checkbox"/> Peach Care |
| <input type="checkbox"/> Head Start/Early Head Start | <input type="checkbox"/> Section 8/Housing Choice Voucher | <input type="checkbox"/> WIC |
| <input type="checkbox"/> TANF | <input type="checkbox"/> Medicaid/Medicare | <input type="checkbox"/> WIOA Training |
| <input type="checkbox"/> SSI/SSDI | <input type="checkbox"/> Re-Entry Training | <input type="checkbox"/> LIHEAP |

7. What is your current living arrangement? (Check only one)

- | | |
|--|--|
| <input type="checkbox"/> Homeless or At-Risk of Homelessness | <input type="checkbox"/> Group Home/Shelter |
| <input type="checkbox"/> Rent/Lease (Home/Apartment/Room) | <input type="checkbox"/> Half-Way House/Transitional Housing |
| <input type="checkbox"/> Own My Home (No Mortgage Payment) | <input type="checkbox"/> Hotel/Motel |
| <input type="checkbox"/> Live with Family/Friend (Free) | <input type="checkbox"/> Camper/Trailer |
| <input type="checkbox"/> Dorm Room/College Campus | <input type="checkbox"/> Live with Family/Friend |

8. Do you or anyone in your tax household have a diagnosed disability? (Check all that apply)

- No Physical Disability Mental Disability

9. Which of the following would you be the most interested in learning about?

- | | | |
|---|--|--|
| <input type="checkbox"/> Affordable rental housing | <input type="checkbox"/> Car Loans | <input type="checkbox"/> Affordable Homeownership |
| <input checked="" type="checkbox"/> Job or career counseling | <input type="checkbox"/> Banking services | <input type="checkbox"/> Foreclosure prevention assistance |
| <input type="checkbox"/> Public Benefits assistance (food stamps) | <input type="checkbox"/> Credit counseling | <input type="checkbox"/> Not answered |

10. What is your highest level of education completed? (Check only one)

- | | |
|--|---|
| <input type="checkbox"/> Less than High School or GED | <input type="checkbox"/> Two-Year Degree (Associates) |
| <input type="checkbox"/> High School | <input type="checkbox"/> Four-Year Degree (Bachelors) |
| <input type="checkbox"/> GED | <input type="checkbox"/> Six-Year Degree (Masters) |
| <input type="checkbox"/> Certificate Program | <input type="checkbox"/> Eight-Year Degree (Doctorate) |
| <input type="checkbox"/> Currently Enrolled in GED Program | <input type="checkbox"/> Currently Enrolled in Two-Year Degree Program |
| <input type="checkbox"/> Currently Enrolled in Certificate Program | <input type="checkbox"/> Currently Enrolled in Four-Year Degree Program |

11. In what area(s) if any, has the Covid-19 pandemic affected your household?

- | | | |
|---|---|---------------------------------------|
| <input type="checkbox"/> Employment | <input type="checkbox"/> Housing | <input type="checkbox"/> School |
| <input type="checkbox"/> Transportation | <input type="checkbox"/> Food/Basic Needs | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Not answered | | |

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:

Site name

St. Philip Benezi Catholic Church

Site address (*street, city, state, zip code*)

591 Flint River Road
Jonesboro, Georgia 30238

Site identification number (SIDN)

S34012510

Site coordinator name

Kathy Randall

Site contact name

Kathy Randall

Site contact telephone number

678-632-3352

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

- A. Drop Off Site:** This site uses a drop off process which includes the site maintaining personal identifiable information (*social security numbers, Form W-2, etc.*) to prepare the tax return at the same site but at a later time. In this process, you will come back to the same site for the quality review and/or signing the completed tax return. The site must explain the method it uses to contact you if additional information is needed.
- B. 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. The taxpayer may come back to the intake site for the quality review or to review and sign the completed tax return.
- C. Return Preparation and/or Quality Review Only Site:** This site may receive returns from one or more intake sites to prepare and/or quality review returns. This site generally does not take walk-in or appointments from other taxpayers in their location.
- D. Combination Site:** This site prepares returns for other permanent or temporary intake sites and assist walk in and appointment only taxpayers within their location.
- E. 100% Virtual VITA/TCE Process:** 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:

Explain how each process will be followed to assist taxpayers remotely. How will the site manage:

1. Scheduling the appointment

No Appointment is required. The taxpayer will drive up and sign in with their name and time. Someone will go to their car and give the intake packet along with our email address, (secured) to return to our site.

2. Securing Taxpayer Consent Agreement

This information and forms are attached to the intake packet that is given to the taxpayer during the intake process.

3. Performing the Intake Process (*secure all documents*)

The taxpayer is given a intake packet that has all of the intake forms to start the input process, which clearly indicate what forms needs to be completed along with with the proper identification documents. No return will be processed without the necessary forms such as the intake and interview, virtual consent if applicable, proper id and all of the necessary income to statements.

4. Validating taxpayer's authentication (*Reviewing photo identification & Social Security Cards/ITINS*)

Proper government id is required of all taxpayers and spouses listed on the tax return along with social security cards for all individuals listed on the tax returns. No returns will be processed without these proper documents.

5. Performing the interview with the taxpayer(s)

This process will be done by the taxpayer as part of the intake process.

6. Preparing the tax return

The return packet will be taken home by a to certified tax preparer and upon completion, the taxpayer will be contacted to schedule a quality review, face to face is preferable but because of COVID, virtual maybe is an option. A face to face conversation via skype or google duo to insure proper input.

7. Performing the quality review

A face to face quality review will be done at the Site and if not possible, it will be done through a secure electronic process.

8. Sharing the completed return

Face to face in person or via a secure electronic process. No return will be processed without a face to face session with the taxpayer.

9. Signing the return

Form 8879 will be signed at the physical site (St. Philip Benizi Catholic Church, 591 Flint River Road, Jonesboro, GA 30238),, or by electronic means if necessary which is 100% secured.

10. E-filing the tax return

Once Quality Review and the signing of the return is complete, the return will be transmitted immediately, but no later than a 24 hour period. All rejects are completed immediately if possible. If the rejects cannot be fixed, the taxpayer is advised to mail in a paper return with all required documents.

Page three 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

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 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. 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 use this site's Virtual VITA/TCE Process Yes No

Printed name		Printed name <i>(spouse if married filing joint)</i>	
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 <i>(electronic)</i>		Signature <i>(electronic)</i>	
OR		OR	
Signature <i>(type/print)</i>		Signature <i>(type/print)</i>	

Check appropriate box for each question in each section

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

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, 2023.

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.

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, 2023). 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, or by e-mail at complaints@tigta.treas.gov.