



2024 St. Philip Benizi Taxpayer Packet and Instructions

All Services are Virtual

WELCOME AND THANK YOU FOR REACHING OUT FOR YOUR TAX NEEDS.
THE MARTIN LUTHER KING SR. COMMUNITY RESOURCES COLLABORATIVE IS A PROUD PARTICIPANT
OF THE IRS VOLUNTEER INCOME TAX ASSISTANCE (VITA) PROGRAM.

STEP 1:

COMPLETE THE INTAKE SURVEY BY CLICKING THIS LINK: [REQUIRED VITA INTAKE SURVEY](#)

STEP 2: Use a PC or Samsung Device

1. TAXPAYER SURVEY
2. FORM 13614-C: INTAKE/INTERVIEW AND QUALITY REVIEW SHEET
3. FORM 14446: VIRTUAL VITA/TCE TAXPAYER CONSENT
4. FORM 15080: CONSENT TO DISCLOSE TAX RETURN INFORMATION TO VITA/TCE TAX PREPARATION SITES

STEP 3:

EMAIL THE PACKET TO stphilipbenizivitatax@gmail.com

STEP 4:

A TAX PREPARER WILL CONTACT YOU BY PHONE OR EMAIL IN 5-7 BUSINESS DAYS
TO SCHEDULE AN APPOINTMENT FOR VIRTUAL TAX PREP SERVICES

STEP 5:

TAX RETURN WILL BE PREPARED FOR THE TAXPAYER

STEP 6:

ALL TAXPAYERS HAVE TO PARTICIPATE IN A QUALITY REVIEW
BEFORE TAX RETURN MAY BE SUBMITTED TO THE IRS

RESOURCES:

FOR MORE INFORMATION OR TO PARTICIPATE IN OUR FREE VIRTUAL FINANCIAL CLASSES AND
TRAINING, PLEASE VISIT OUR WEBSITE AT <https://mlksrcollaborative.everfi-next.net/>

EBENEZER VITA TAX PREP INFORMATION PAGE:
[ST. PHILIP BENIZI CATHOLIC CHURCH VITA SITE](#)

ALL SERVICES ARE FREE!!!!

WHAT TO HAVE READY

To ensure your tax preparation moves as fast as possible, please be prepared for your session. Here is the list of items you need to have ready. You will be given instructions on how to submit necessary documents to the tax preparer:

REQUIRED DOCUMENTS/ITEMS

1. A valid, official photo identification (you and your spouse, if filing jointly)
2. One of the following for you, your spouse and any other person listed on your return:
 - Social Security Number (SSN) Card
 - Adoption Taxpayer Identification Number (ATIN) card or letter*
 - Individual Taxpayer Identification Number (ITIN) card or letter**(IRS assignment letters are acceptable)
3. Previous year's tax return
4. All W-2s for current year
5. Joint returns require both filers to be present to sign the return
6. Voided check or account number card to direct deposit your refund (This is optional, but allows for a quicker refund.)

IF APPLICABLE:

1. Form 1095-A if you purchased health insurance through the marketplace
2. Form 1098-Mortgage Interest, property taxes, closing statement
3. Form 1099-Div, G, INT, Q, R, RRB, SSA, MISC, NEC for current tax year
4. If you had childcare or dependent care expenses, please bring the name, address and Tax ID or SSN/ITIN of the care provider
5. Form 1098-T or 1098-E for educational expense

*******Have any additional items or documents you believe will be important for your tax preparer to have when completing your tax return.*******

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 2023? (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 | | |

Your Civil Rights are PROTECTED

Sus Derechos Civiles están PROTEGIDOS



In accordance with federal law and the Department of the Treasury – Internal Revenue Service policy, discrimination against taxpayers on the basis of race, color, national origin (including limited English proficiency), disability, sex (in education programs or activities), age or reprisal is prohibited in programs and activities receiving federal financial assistance.

Taxpayers with a disability may request a reasonable accommodation and taxpayers with limited English proficiency may request language assistance to access service.

De acuerdo con la ley federal y la política del Departamento del Tesoro - Servicio de Impuestos Internos, la discriminación contra los contribuyentes basada en raza, color, origen nacional (incluso el dominio limitado del inglés), discapacidad, género (en los programas educativos o actividades), edad o represalia, está prohibida en los programas o actividades que reciben asistencia financiera federal.

Los contribuyentes con una discapacidad pueden solicitar acomodo razonable y contribuyentes con un dominio limitado del inglés podrán solicitar asistencia con el idioma para tener acceso al servicio.

**Operations Director,
Civil Rights Division
Internal Revenue Service
Room 2413
1111 Constitution Avenue, NW
Washington, DC 20224**

If a taxpayer believes he or she has been discriminated against, a written complaint should be sent to the address referenced within. For all other inquiries concerning taxpayer civil rights, contact us at the mailing address or e-mail us at edi.civil.rights.division@irs.gov

Do not send tax returns or other tax-related information to the Civil Rights Division office or e-mail address.

Si un contribuyente cree que él o ella ha sido discriminado, debe enviar una queja por escrito al *IRS*, a la dirección de referencia. Para todas las demás consultas relacionadas a los derechos civiles del contribuyente, comuníquese a la dirección que aparece a la izquierda o envíenos un correo electrónico a edi.civil.rights.division@irs.gov

No envíe declaraciones de impuestos u otra información que no esté relacionada con los derechos civiles, a la oficina de la División de Derechos Civiles o al correo electrónico.



VITA/TCE Free Tax Programs

The mission of these programs is to provide free basic tax return preparation for low-to-moderate income and elderly taxpayers. This also includes taxpayers with disabilities, limited English proficiency and the Military.

Volunteers participating in these programs must sign a Form 13615, Volunteer Standards of Conduct Agreement - VITA/ TCE Programs. These agreements require them to provide high quality service and uphold the highest ethical standards.

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-required site operations and volunteer ethical standards. In addition, the locations of these sites may not be in or on federal property.

To report unethical behavior to IRS, e-mail us at wi.voltax@irs.gov



Programas de Impuestos Gratuitos Ofrecidos por VITA/TCE

El Servicio de Impuestos Internos (IRS, por sus siglas en inglés), patrocina los programas de Asistencia Voluntaria al Contribuyente para la preparación de los Impuestos sobre el ingreso (VITA, por sus siglas en inglés), y el de Asesoramiento Tributario para las Personas de Edad Avanzada (TCE, por sus siglas en inglés).

La misión de estos programas es proporcionar la preparación gratuita de las declaraciones de impuestos sencillas a los contribuyentes de ingresos bajos a moderados y contribuyentes de edad avanzada. Esto incluye también a los contribuyentes con discapacidades, aquéllos con dominio limitado del inglés y la milicia.

Aunque el IRS es responsable de proporcionar los requisitos de supervisión para los programas de Asistencia Voluntaria al Contribuyente (VITA) y de Asesoramiento Tributario para las Personas de Edad Avanzada (TCE), estos sitios son operados por socios patrocinados por el IRS que administran las operaciones requeridas por el sitio y los estándares de ética de los voluntarios. Además, es posible que las ubicaciones de estos sitios no estén en la propiedad federal.

Los voluntarios que participan en estos programas, tienen que firmar el Formulario 13615, Volunteer Standards of Conduct Agreement - VITA/ TCE Programs (Acuerdo de los estándares de conducta de los voluntarios de los programas de VITA/TCE), en inglés. Estos acuerdos exigen que ellos proporcionen un servicio de alta calidad y mantengan los más altos estándares éticos.

Para denunciar un comportamiento no ético al IRS, envíenos un correo electrónico a wi.voltax@irs.gov