

Publication 4491

VITA/TCE Training Guide

Volunteer Income Tax Assistance (VITA) / Tax Counseling
for the Elderly (TCE)

Volume 16 of 16

2023 RETURNS



Take your VITA/TCE training online at: apps.irs.gov/app/vita/ (keyword: Link & Learn Taxes). Link to the Practice Lab to gain experience using tax software and take the certification test online, with immediate scoring and feedback.



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Visit the Accessibility
Page on [IRS.gov](https://www.irs.gov)

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Robert's 2022 tax return was due April 18, 2023. He filed it on March 20, 2023. He amends the 2022 return, expecting the correction to result in a refund. If he gets it postmarked on or before April 18, 2026, it will be within the three-year limit, and the return will be accepted. But if the amended 2022 return is postmarked after April 18, 2026, it will fall outside the three-year period and he will not receive the refund.

There are a few exceptions to the three-year limit. For example, a taxpayer has a longer period of time to claim a loss on a bad debt or worthless security, or for a foreign tax credit or deduction. The exceptions are explained in more detail in Publication 17 and the Form 1040-X Instructions. If you think the taxpayer may qualify for an exception to the three-year time limit, refer them to a professional tax preparer.

What if taxpayers are due a refund on their amended return?

If the amended return indicates the taxpayer is due a refund, be sure to advise that:

- Before filing the amended return, the taxpayer should allow time for the original return to be processed.
- The taxpayer can cash the original refund check, if any, while waiting for any additional refund.
- Interest may be paid on claims not processed within 45 days of the due date of the return.
- Generally, it takes 8-16 weeks to process an amended tax return. However, in some cases, processing could take longer.



Direct deposit is available on tax year 2021 and subsequent electronically filed amended returns.

What if the taxpayer owes money on the amended return?

If the amended current year return indicates the taxpayer owes money, file Form 1040-X and instruct the taxpayer to pay the amount by the April due date to avoid interest and penalties. Direct debit is not available on electronically filed amended returns.

Taxpayers who cannot pay the balance in full by the April due date should file the return on time anyway. Encourage taxpayers to pay as much as they can on time, because the IRS will calculate and bill for interest on the amount of tax owed. Refer to the Volunteer Resource Guide, Tab K, Finishing the Return, for more information on payment options.



*Refer taxpayers to **IRS.gov/Payments** for payment options.*



Exercises

Answers are after the lesson summary.

Question 1: John e-filed his 2020 Form 1040 on March 29, 2021. John found an error on the 2020 return and mailed an amended 2020 return on April 15, 2023. Is this too late to qualify for the refund?

- a. Yes
- b. No

Question 2: Brenda discovers an error on her timely-filed 2020 tax return. Correction of this error would result in a refund. She mails an amended return on May 6, 2024. Is this too late for Brenda to claim a refund?

- a. Yes
- b. No

How do I complete the amended return using tax software?

Volunteer tax preparers can amend returns regardless of where the original return was prepared, using tax software. Remember to follow the interview process and use the research tools to prepare an accurate return.



For software entries, go to Volunteer Resource Guide, Tab M, Other Returns, to review the step-by-step procedures for preparing Form 1040-

X.

How do I assemble and submit Form 1040-X?

What should be attached when the return cannot be e-filed?

Remember, Form 1040-X should be prepared using tax software. However, only the current tax year and the immediately preceding two years' can be e-filed. Other years will need to

be paper filed. Refer to the Volunteer Resource Guide for the forms and schedules that need to be submitted.

Explain to taxpayers that the IRS will automatically add interest to their refund and, if they owe money and are not paying the balance due by the original due date of the return, the IRS will send a bill that will include any interest or penalty amounts.

Who can prepare prior year returns?

A volunteer may prepare a prior year return if it is within scope and if the tax topics are within the volunteer's **current** year's certification level. Taxpayers seeking assistance outside the scope of the VITA/TCE programs should be referred to a professional tax preparer.



SPEC may be able to support sites that have the resources, motivation and ability to go back as many years

as needed, while maintaining quality standards.



VITA/TCE sites are encouraged, but not required to prepare prior year returns.



If a taxpayer requests return preparation assistance for returns older than three years or if the site is unable to prepare prior year returns, refer the taxpayer to a professional tax preparer to complete the prior year returns.

What technical resources are required?

If your site chooses to prepare prior year returns, the Site Coordinator should be aware of the requirements. The SPEC Relationship Managers and **Prior Year Forms and Instructions** on IRS.gov are critical resources for administrative and technical resources.



*The Partner and Volunteer Resource
Page at*

www.irs.gov/individuals/partner-and-volunteer-resource-center *includes hot topics for partners and volunteers.*

At a minimum, the following tools are required:

- Prior year tax preparation software
- Reference material, including Publications 17 and the Volunteer Resource Guide (available in the tax software) and volunteer quality alerts/volunteer tax alerts at **www.irs.gov/individuals/quality-and-tax-alerts-for-irs-volunteer-programs**.
- A current year Form 13614-C must be completed for each prior year return and will be used to determine the scope and certification level of each return.

If your site does not have the necessary tools to prepare prior year returns, seek guidance from your Site Coordinator.



The **Interactive Tax Assistant (ITA)** is an online tool that provides consistent answers to many current and prior year tax law questions using a probe and response process. ITA is available on *IRS.gov*.

How do I file a prior year return?

Tax returns for the two most current prior years can be filed electronically. Older prior year returns must be mailed by taxpayers to the appropriate IRS address listed in the Volunteer Resource Guide, Tab P, Partner Resources. Also, see the information about balance due returns in Tab K, Finishing the Return, of the same guide.

Summary

In the VITA/TCE programs, you can help taxpayers prepare amended or prior year tax returns provided the site offers this service. Use the interview process and research tools to prepare accurate amended returns.

Amended returns should be filed to correct any error or omission that is within scope.

Additional notes:

- When a taxpayer does not or cannot opt for direct deposit for a refund on an amended or prior year return, a check is mailed to the taxpayer.
- If you are amending the federal return, you usually have to amend the state return.
- Volunteers may only prepare returns within the scope of the VITA/TCE programs and only if the tax issues come

within the volunteer's current level of training and certification.

- If a taxpayer requests return preparation assistance for returns older than three years or if the site is unable to prepare prior year returns, refer the taxpayer to a professional tax preparer to complete the prior year returns.

What situations are out of scope for the VITA/TCE programs?

The following is out of scope for this lesson. While this list may not be all inclusive, it is provided for your awareness only.

- Taxpayers who may qualify for an exception to the three-year time limit for filing an amended return for a refund



To gain a better understanding of the tax law, complete the practice return(s) for your course of study using the Practice Lab on L<.



EXERCISE Answers

Answer 1: b. No, it is not too late. Returns filed before the due date are considered filed on the due date of the return. Therefore, John's amended return was filed within the three-year period allowed for refunds.

Answer 2: a. Yes, it is too late. The postmark must be three years from the due date of the return. The IRS will disallow Brenda's amended return requesting a refund because it was filed more than three years after the due date of the original return.

Education Credits

Introduction

This lesson covers tax credits available to help the taxpayer offset the costs of higher education by reducing the amount of income tax. This lesson suggests probing questions you can ask based on the intake and interview sheet, the Volunteer Resource Guide, Tab J, Education Benefits, and on the rules for claiming education credits.

During the interview, ask taxpayers if they are aware of the education credits, and give a brief description. Next, gather information to determine if any credits can be claimed.

Objectives

At the end of this lesson, using your resource materials, you will be able to:

- Determine who qualifies for an education credit

- Determine which credit the taxpayer can claim

What do I need?

- Form 13614-C
- Publication 4012
- Publication 970
- Form 1098-T
- Form 8863 and Instructions

Optional:

- Form 1040 Instructions

What are education credits?

Education credits are amounts that will reduce the amount of tax due. The amount is based on qualified education expenses that the taxpayer paid during the tax year.

There are two different education credits: the American opportunity credit and the lifetime

learning credit. The American opportunity credit allows 40% of the credit

to be refundable. There are general rules that apply to these credits, as well as specific rules for each credit.

For an overview of the various education tax benefits, review the Volunteer Resource Guide, Tab J, Education Benefits, Highlights of Education Tax Benefits.

Who can take an education credit?

Taxpayers can take education credits for themselves, their spouse, and/or dependents (claimed on the tax return) who were enrolled at or attended an eligible postsecondary educational institution during the tax year.

The law requires that the student must generally receive a Form 1098-T, Tuition Statement, in order for the taxpayers to claim the education credit. However, if the student's educational institution is not required to furnish a Form 1098-T, the taxpayer may

claim a credit if the student does not receive a Form 1098-T. The student is required to provide the information that would otherwise be included on the Form 1098-T.



Review the dependent section of the intake and interview sheet for children who are shown as full-time students. Ask the taxpayer if there are education expenses.

What basic requirements must the taxpayer meet?

To claim an education credit, verify that the following are true for the taxpayers:

- They cannot be claimed as a dependent on someone else's tax return
- They are not filing as Married Filing Separately

- Their adjusted gross income (AGI) is below the limitations for their filing status (\$180,000 if married filing jointly; \$90,000 if single, head of household, or qualifying surviving spouse)

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Appendix: Premium Tax Credit Exercises



Introduction

The purpose of the following examples is to give volunteers an opportunity to practice completing forms and worksheets associated with the Premium Tax Credit (PTC). Adequate information is provided to prepare simple tax returns with various health insurance coverage scenarios that you may encounter. Following each scenario are screen shots from the tax preparation software that will allow you to check your work. Note: This publication is posted before software and most tax forms are finalized.

Reminders

- All taxpayer names, addresses and Social Security numbers provided in the scenarios are fictitious.
- When entering Social Security numbers (SSNs), replace the Xs as directed, or with any four digits of your choice.
- Use employer identification number (EIN) 622-00-XXXX for all W-2s.
- Complete tax return and intake sheet information is not provided. For the purposes of these exercises, you can ignore incomplete or missing information, or enter sample information of your choice.
- Use your city, state, and ZIP code when completing any forms, unless the notes state otherwise.
- For the purposes of the premium tax credit calculations on Form 8962, use "Other 48

states” so your calculations will match the provided answers.

- For all scenarios, assume that the identity and Social Security cards were checked for all individuals on the intake sheet.

Scenario 1 – Premium Tax Credit with APTC

Interview Notes

- Sheryl Graves has two children she claims as dependents, Trina and Travis, who live with her all year.
- She divorced in 2010. Sheryl pays all the costs of keeping up the home. Their SSNs are:
 - Sheryl: 605-00-XXXX
 - Trina: 606-00-XXXX
 - Travis: 607-00-XXXX

- Sheryl's mother, Monique Floyd, also lives with her. Sheryl provides over half of Monique's support and claims her as a dependent. Monique's SSN is 608-00-XXXX. Her only income for the tax year is \$4,500 received from Social Security and she was covered by Medicare all year.
 - Sheryl's Form W-2 shows:
 - Box 1 = \$56,429
 - Box 2 = \$1,026
- Sheryl had no other income or deductions.
- Sheryl's employer does not offer health insurance coverage. She purchased qualified health care coverage for herself and her children through the Marketplace. They were covered for the entire year. Sheryl received the benefit of advance payments of the premium tax credit to help with the cost of her insurance premiums.

Directions

Review the interview notes, complete the volunteer sections of the intake sheet, and start a new return using the Practice Lab. Enter the SSN, filing status, personal information, dependents, and income. Then complete the following steps:

1. Select the Health Insurance section and answer all the questions pertaining to Sheryl and her family.
2. Compare your result to the screen shots on the following pages.

This page is intentionally left blank

Sheryl’s intake sheet, page 1, with the volunteer section completed:

Form **13614-C**
(October 2022)

Department of the Treasury - Internal Revenue Service
Intake/Interview & Quality Review Sheet

OMB Number
1545-1964

You will need:

- Tax Information such as Forms W-2, 1099, 1098, 1095.
- Social security cards or ITIN letters for all persons on your tax return.
- Picture ID (such as valid driver's license) for you and your spouse.

- Please complete pages 1-4 of this form.
- You are responsible for the information on your return. Please provide complete and accurate information.
- If you have questions, please ask the IRS-certified volunteer preparer.

Volunteers are trained to provide high quality service and uphold the highest ethical standards.
To report unethical behavior to the IRS, email us at wi.voltax@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 SHERYL	M.I.	Last name GRAVES	Best contact number YOUR PH #	Are you a U.S. citizen? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
2. Your spouse's first name	M.I.	Last name	Best contact number	Is your spouse a U.S. citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No		
3. Mailing address 321 MARTIN ROAD			Apt #	City YOUR CITY	State YS	ZIP code YOUR ZIP
4. Your Date of Birth 06/17/1979	5. Your job title CLERK		6. Last year, were you: b. Totally and permanently disabled <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		a. Full-time student <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
7. Your spouse's Date of Birth	8. Your spouse's job title		9. Last year, was your spouse: b. Totally and permanently disabled <input type="checkbox"/> Yes <input type="checkbox"/> No		a. Full-time student <input type="checkbox"/> Yes <input type="checkbox"/> No	
10. Can anyone claim you or your spouse as a dependent?			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Unsure	
11. Have you, your spouse, or dependents been a victim of tax related identity theft or been issued an Identity Protection PIN?			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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, 2022, what was your marital status?

☐ Never Married
☐ Married
☒ Divorced
☐ Legally Separated
☐ Widowed

(This includes registered domestic partnerships, civil unions, or other formal relationships under state law)

a. If Yes, Did you get married in 2022?

☐ Yes ☐ No

b. Did you live with your spouse during any part of the last six months of 2022?

☐ Yes ☐ No

Date of final decree
4/27/2010Date of separate maintenance decree
Year of spouse's death

2. List the names below of:

- everyone who lived with you last year (other than your spouse)
- anyone you supported but did not live with you last year

If additional space is needed check here ☐ and list on page 3

To be completed by a Certified Volunteer Preparer														
Name (first, last) Do not enter your name or spouse's name below	Date of Birth (mm/dd/yy)	Relationship to you (for example: son, daughter, parent, none, etc)	Number of months lived in your home last year	US Citizen (yes/no)	Resident of US, Canada, or Mexico last year (yes/no)	Single or Married as of 12/31/22 (S/M)	Full-time Student last year (yes/no)	Totally and Permanently Disabled (yes/no)	Is this person a qualifying child/relative of any other person? (yes/no)	Did this person provide more than 50% of his/her own support? (yes,no,n/a)	Did this person have less than \$4,400 of income? (yes,no,n/a)	Did the taxpayer(s) provide more than 50% of support for this person? (yes/no/n/a)	Did the taxpayer(s) pay more than half the cost of maintaining a home for this person? (yes/no)	
TRINA GRAVES	3/1/2001	Daughter	12	YES	YES	S	YES	NO	NO	NO	YES	YES	YES	
TRAVIS GRAVES	12/25/2002	Son	12	YES	YES	S	YES	NO	NO	NO	YES	YES	YES	
MONIQUE FLOYD	5/5/1944	Mother	12	YES	YES	S	NO	NO	NO	NO	YES	YES	YES	

Catalog Number 52121Ewww.irs.govForm **13614-C** (Rev. 10-2022)

Monique Floyd’s Form 1095-B:

Part IV Covered Individuals (Enter the information for each covered individual(s).)

(a) Name of covered individual(s)	(b) SSN	(c) DOB (If SSN is not available)	(d) Covered all 12 months	(e) Months of coverage											
				Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
23 Monique Floyd	608-00-XXXX	05/05/1944	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

1477

Form 1095-A Health Insurance Marketplace Statement

Form **1095-A**

Department of the Treasury
Internal Revenue Service

Health Insurance Marketplace Statement

☐ VOID
☐ CORRECTED

OMB No. 1545-2232
20XX

Do not attach to your tax return. Keep for your records.
Go to www.irs.gov/Form1095A for instructions and the latest information.

Part I Recipient Information**Part II** Covered Individuals**Part III** Coverage Information

For Privacy Act and Paperwork Reduction Act Notice, see separate instructions.

Cat. No. 60703Q

Form **1095-A** (2022)

Scenario 1 - TaxSlayer ACA Responses

Sheryl’s completed Health Insurance section is shown below.


Health Insurance Questionnaire

Did you purchase health insurance via HealthCare.gov or a State Marketplace? *

☒ Yes


☐ No

Verify Your Household Members




If you have additional family members that are neither a spouse nor a dependent, click "[Add a New Household Member](#)."

If you need to add or remove dependents, [click here to go to Personal Information](#).

 Household Member

Name	SSN	Date of Birth
SHERYL GRAVES	605-00-XXXX	6/17/1979
TRINA GRAVES	606-00-XXXX	3/1/2001
TRAVIS GRAVES	607-00-XXXX	12/25/2002
MONIQUE FLOYD	608-00-XXXX	5/5/1944

 Household Member

Directions: Enter the information from Sheryl’s Form 1095-A:

Advanced Premium Tax Credit (1095-A)

Are you required to repay all of the APTC received? In most cases, the answer is NO. ONLY answer YES if you were not considered lawfully present in the U.S. or you meet the Health Coverage Tax Credit criteria. Note: We will automatically calculate a full repayment of APTC when MAGI is greater than 400 percent of Federal Poverty Line.

- ☐ Yes
- ☒ No

Is your household income below 100% of the Federal poverty line, and do you meet all of the requirements under either "Estimated household income at least 100% of the Federal poverty line" or "Alien lawfully present in the United States"?

- ☒ Yes
- ☐ No

Do all Forms 1095-A include coverage for January through December, with no changes in monthly amounts?

- ☒ Yes
- ☐ No

Please enter your annual Advance Premium Tax Credit information

Premium Amount (Form 1095-A, line 33A)

\$ 7044

Annual Premium Amount of SLCSP (Form 1095-A, line 33B)

\$ 9288

Annual Advance Payment of PTC (Form 1095-A, line 33C)

\$ 5904

Directions: You do not need to enter an amount for the dependents' modified AGI because none of Sheryl's dependents were required to file a return.

Household Income

Dependents' Modified AGI (if filing requirement)

Enter the AGI for your dependents from Form 1040, line 7; and Form 1040NR, line 36

\$

Enter any tax-exempt interest for your dependents from Form 1040, line 2a; and Form 1040NR, line 9b

\$

Enter any amounts for your dependents from Form 2555, lines 45 and 50, and Form 2555-EZ, line 18

\$

Enter for each of your dependents the difference, if any, between Form 1040, lines 5a and 5b

\$

Scenario 1: Results –

Form 8962, Premium Tax Credit (PTC)

Form **8962**

Department of the Treasury
Internal Revenue Service

Premium Tax Credit (PTC)

Attach to Form 1040, 1040-SR, or 1040-NR.
Go to www.irs.gov/Form8962 for instructions and the latest information.

OMB No. 1545-0074

2023
Attachment
Sequence No. **73**

Name shown on your return
SHERYL GRAVES

Your social security number
605-00-XXXX

A. You cannot take the PTC if your filing status is married filing separately unless you qualify for an exception. See instructions. If you qualify, check the box ☐

Part I

Annual and Monthly Contribution Amount

1

Tax family size. Enter your tax family size. See instructions

1

4

2a

Modified AGI. Enter your modified AGI. See instructions

2a

56,429

b

Enter the total of your dependents' modified AGI. See instructions

2b

3

Household income. Add the amounts on lines 2a and 2b. See instructions

3

56,429

4

Federal poverty line. Enter the federal poverty line amount from Table 1-1, 1-2, or 1-3. See instructions. Check the appropriate box for the federal poverty table used. a ☐ Alaska b ☐ Hawaii c ☐ Other 48 states and DC

4

27,750

5

Household income as a percentage of federal poverty line (see instructions)

5

203 %

6

Reserved for future use

6

7

Applicable figure. Using your line 5 percentage, locate your "applicable figure" on the table in the instructions

7

.0212

8a

Annual contribution amount. Multiply line 3 by line 7. Round to nearest whole dollar amount

8a

1196

b

Monthly contribution amount. Divide line 8a by 12. Round to nearest whole dollar amount

8b

100

Part II

Premium Tax Credit Claim and Reconciliation of Advance Payment of Premium Tax Credit

9

Are you allocating policy amounts with another taxpayer or do you want to use the alternative calculation for year of marriage? See instructions.
☐ Yes. Skip to Part IV, Allocation of Policy Amounts, or Part V, Alternative Calculation for Year of Marriage. ☐ No. Continue to line 10.

10

See the instructions to determine if you can use line 11 or must complete lines 12 through 23.
☐ Yes. Continue to line 11. Compute your annual PTC. Then skip lines 12–23 and continue to line 24. ☐ No. Continue to lines 12–23. Compute your monthly PTC and continue to line 24.

Annual Calculation	(a) Annual enrollment premiums (Form(s) 1095-A, line 33A)	(b) Annual applicable SLCSP premium (Form(s) 1095-A, line 33B)	(c) Annual contribution amount (line 8a)	(d) Annual maximum premium assistance (subtract (c) from (b); if zero or less, enter -0-)	(e) Annual premium tax credit allowed (smaller of (a) or (d))	(f) Annual advance payment of PTC (Form(s) 1095-A, line 33C)
11 Annual Totals	7,044	9,288	1,196	8,092	7,044	5,904
Monthly Calculation	(a) Monthly enrollment premiums (Form(s) 1095-A, lines 21–32, column A)	(b) Monthly applicable SLCSP premium (Form(s) 1095-A, lines 21–32, column B)	(c) Monthly contribution amount (amount from line 8b or alternative marriage monthly calculation)	(d) Monthly maximum premium assistance (subtract (c) from (b); if zero or less, enter -0-)	(e) Monthly premium tax credit allowed (smaller of (a) or (d))	(f) Monthly advance payment of PTC (Form(s) 1095-A, lines 21–32, column C)
12 January						
13 February						
14 March						
15 April						
16 May						
17 June						
18 July						
19 August						
20 September						
21 October						
22 November						
23 December						
24	Total premium tax credit. Enter the amount from line 11(e) or add lines 12(e) through 23(e) and enter the total here					7,044
25	Advance payment of PTC. Enter the amount from line 11(f) or add lines 12(f) through 23(f) and enter the total here					5,904
26	Net premium tax credit. If line 24 is greater than line 25, subtract line 25 from line 24. Enter the difference here and on Schedule 3 (Form 1040), line 9. If line 24 equals line 25, enter -0-. Stop here. If line 25 is greater than line 24, leave this line blank and continue to line 27					1,140

Part III

Repayment of Excess Advance Payment of the Premium Tax Credit

27

Excess advance payment of PTC. If line 25 is greater than line 24, subtract line 24 from line 25. Enter the difference here

27

28

Repayment limitation (see instructions)

28

29

Excess advance premium tax credit repayment. Enter the smaller of line 27 or line 28 here and on Schedule 2 (Form 1040), line 2

29

For Paperwork Reduction Act Notice, see your tax return instructions.

Cat. No. 37784Z

Form **8962** (2023)



Column C of Form 1095-A is entered on Form 8962, Column F.

Scenario 1 - Form 1040, Schedule 3, Additional Credits and Payments :

Schedule 3 (Form 1040) 2023

Page **2**

Part II

Other Payments and Refundable Credits

9

Net premium tax credit. Attach Form 8962

9

1,140

Scenario 2 – Premium Tax Credit with APTC for Part-Year Coverage

Interview Notes

- Charles and Shay Baldwin are married filing a joint return. Their SSNs are:
 - Charles: 609-00-XXXX
 - Shay: 610-00-XXXX
- Charles' Form W-2 shows:
 - Box 1 = \$33,500
 - Box 2 = \$1,820
- Shay's W-2 shows:
 - Box 1 = \$17,750
 - Box 2 = \$1,153
- Charles' and Shay's employers do not offer health insurance coverage. Charles enrolled in a plan through the Marketplace

that covered both of them with an effective date of March 1. He selected the second lowest cost silver plan. They received the benefit of advance payments of the premium tax credit for their coverage. During the year, Charles received an unexpected raise in pay. They did not notify the Marketplace. They have no other income or deductions.

Directions

Review the interview notes, complete the volunteer sections of the intake sheet, and start a new return using the Practice Lab. Enter the SSNs, filing status, personal information, dependents, and income. Then complete the following steps:

1. Select the Health Insurance section and answer all the questions pertaining to Charles, Shay, and their family.
2. Compare your result to the screen shots on the following pages.

Page 1 of the intake sheet with volunteer entries:

Form 13614-C (October 2023)		Department of the Treasury - Internal Revenue Service Intake/Interview and Quality Review Sheet					OMB Number 1545-1964						
You will need: <ul style="list-style-type: none">• Tax Information such as Forms W-2, 1099, 1098, 1095.• Social Security cards or ITIN letters for all persons on your tax return.• Picture ID (such as valid driver's license) for you and your spouse.							<ul style="list-style-type: none">• Please complete pages 1-4 of this form.• You are responsible for the information on your return. Please provide complete and accurate information.• If you have questions, please ask the IRS-certified volunteer preparer.						
Volunteers are trained to provide high quality service and uphold the highest ethical standards. To report unethical behavior to the IRS, email us at wi.voltax@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 CHARLES		M.I.	Last name BALDWIN		Best contact number YOUR PHONE		Are you a U.S. citizen? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No						
2. Your spouse's first name SHAY		M.I.	Last name BALDWIN		Best contact number		Is your spouse a U.S. citizen? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No						
3. Mailing address 775 BANKS ST				Apt #	City YOUR CITY		State YS	ZIP code YOUR ZIP					
4. Your Date of Birth 12/3/1981		5. Your job title CUSTOMER SERVICE MANAGER		6. Last year, were you: b. Totally and permanently disabled <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		a. Full-time student <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		c. Legally blind <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
7. Your spouse's Date of Birth 6/10/1985		8. Your spouse's job title CASHIER		9. Last year, was your spouse: b. Totally and permanently disabled <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		a. Full-time student <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		c. Legally blind <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
10. Can anyone claim you or your spouse as a dependent? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unsure													
11. Have you, your spouse, or dependents been a victim of tax related identity theft or been issued an Identity Protection PIN? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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, 2023, what was your marital status?		<input type="checkbox"/> Never Married <input checked="" type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Legally Separated <input type="checkbox"/> Widowed		(This includes registered domestic partnerships, civil unions, or other formal relationships under state law) a. If Yes, Did you get married in 2023? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No b. Did you live with your spouse during any part of the last six months of 2023? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Date of final decree _____ Date of separate maintenance decree _____ Year of spouse's death _____									
2. List the names below of: • everyone who lived with you last year (other than your spouse) • anyone you supported but did not live with you last year													
If additional space is needed check here <input type="checkbox"/> and list on page 3													
To be completed by a Certified Volunteer Preparer													
Name (first, last) Do not enter your name or spouse's name below	Date of Birth (mm/dd/yy)	Relationship to you (for example: son, daughter, parent, none, etc)	Number of months lived in your home last year	US Citizen (yes/no)	Resident of US, Canada, or Mexico last year (yes/no)	Single or Married as of 12/31/23 (S/M)	Full-time Student last year (yes/no)	Totally and Permanently Disabled (yes/no)	Is this person a qualifying child/relative of any other person? (yes/no)	Did this person provide more than 50% of his/her own support? (yes,no,n/a)	Did this person have less than \$4,700 of income? (yes,no,n/a)	Did the taxpayer(s) provide more than 50% of support for this person? (yes/no/n/a)	Did the taxpayer(s) pay more than half the cost of maintaining a home for this person? (yes/no)
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)					

Catalog Number 52121E

www.irs.gov

Form **13614-C** (Rev. 10-2023)

Form 1095-A Health Insurance Marketplace Statement

The amount shown for APTC is for illustration purposes only.

Form **1095-A**
Department of the Treasury
Internal Revenue Service

Health Insurance Marketplace Statement

Do not attach to your tax return. Keep for your records.
Go to www.irs.gov/Form1095A for instructions and the latest information.

☐ VOID
☐ CORRECTED

OMB No. 1545-2232
20XX

Part I Recipient Information

1 Marketplace identifier XXXXX	2 Marketplace-assigned policy number XXXXXXXXXX	3 Policy issuer's name XXXXXXXXXXXXXXXXXXXXX
4 Recipient's name CHARLES BALDWIN	5 Recipient's SSN 609-00-XXXX	6 Recipient's date of birth 12/03/1981
7 Recipient's spouse's name SHAY BALDWIN	8 Recipient's spouse's SSN 610-00-XXXX	9 Recipient's spouse's date of birth 06/10/1985
10 Policy start date 03/01/2023	11 Policy termination date 12/31/2023	12 Street address (including apartment no.) 775 BANKS ST
13 City or town YOUR CITY	14 State or province YS	15 Country and ZIP or foreign postal code YOUR ZIP

Part II Covered Individuals

	A. Covered individual name	B. Covered individual SSN	C. Covered individual date of birth	D. Coverage start date	E. Coverage termination date
16	CHARLES BALDWIN	609-00-XXXX	12/03/1981	03/01/2023	12/31/2023
17	SHAY BALDWIN	610-00-XXXX	06/10/1985	03/01/2023	12/31/2023
18					
19					
20					

Part III Coverage Information

Month	A. Monthly enrollment premiums	B. Monthly second lowest cost silver plan (SLCSP) premium	C. Monthly advance payment of premium tax credit
21 January			
22 February			
23 March	\$789.00	\$789.00	\$750.00
24 April	\$789.00	\$789.00	\$750.00
25 May	\$789.00	\$789.00	\$750.00
26 June	\$789.00	\$789.00	\$750.00
27 July	\$789.00	\$789.00	\$750.00
28 August	\$789.00	\$789.00	\$750.00
29 September	\$789.00	\$789.00	\$750.00
30 October	\$789.00	\$789.00	\$750.00
31 November	\$789.00	\$789.00	\$750.00
32 December	\$789.00	\$789.00	\$750.00
33 Annual Totals	\$7,890.00	\$7,890.00	\$7,500.00

Scenario 2 - TaxSlayer ACA Responses

Charles and Shay's completed Health Insurance section is shown below. Indicate that Charles and Shay had qualified health care coverage purchased through the Marketplace from March through December:


Health Insurance Questionnaire

Did you purchase health insurance via HealthCare.gov or a State Marketplace? *


☒ Yes

☐ No

Verify Your Household Members

 If you have additional family members that are neither a spouse nor a dependent, click "[Add a New Household Member](#)."

If you need to add or remove dependents, [click here to go to Personal Information](#).

 Household Member

Name	SSN	Date of Birth
CHARLES BALDWIN	609-00-XXXX	12/3/1981
SHAY BALDWIN	610-00-XXXX	6/10/1985

Directions: Enter the information from the Form 1095-A:

Advanced Premium Tax Credit (1095-A)

Are you required to repay all of the APTC received? In most cases, the answer is NO. ONLY answer YES if you were not considered lawfully present in the U.S. or you meet the Health Coverage Tax Credit criteria. Note: We will automatically calculate a full repayment of APTC when MAGI is greater than 400 percent of Federal Poverty Line.

☐ Yes

☐ No

☐ Check here if you are filing a separate return ONLY because you are a victim of domestic abuse or spousal abandonment.

Do all Forms 1095-A include coverage for January through December, with no changes in monthly amounts?

☐ Yes

☐ No

Please enter your monthly Advance Premium Tax Credit information

Monthly Premium Amount	Monthly Premium Amount of SLCSP	Monthly Advance Payment of PTC
January		
<div>\$</div>	<div>\$</div>	<div>\$</div>
February		

Scenario 2 - Results

Scenario 2 - Form 8962, Premium Tax Credit

See Parts 1, 2, and 3 of Charles and Shay's completed Form 8962 below. Part 3 of Form 8962 reconciles advance payments of the premium tax credit.

In this case, Charles failed to report an increase in pay to the Marketplace. This resulted in an excess advance premium tax credit repayment. This excess will decrease their refund or increase their balance due. Charles should have reported his change in income to the Marketplace so they could have adjusted his advance credit payments for the remainder of the coverage year. Note that his repayment is capped because their income is under 300% of the Federal Poverty Line.

See illustration of Form 8962, Premium Tax Credit, on the following page.

Scenario 2 - Form 8962 Premium Tax Credit (PTC)

Form

8962

Department of the Treasury
Internal Revenue Service

Premium Tax Credit (PTC)
Attach to Form 1040, 1040-SR, or 1040-NR.
Go to www.irs.gov/Form8962 for instructions and the latest information.

OMB No. 1545-0074
2023
Attachment
Sequence No. 73

Name shown on your return
CHARLES BALDWIN

Your social security number
609-00-XXXX

A. You cannot take the PTC if your filing status is married filing separately unless you qualify for an exception. See instructions. If you qualify, check the box ☐

Part I

Annual and Monthly Contribution Amount

1

Tax family size. Enter your tax family size. See instructions

1

4

2a

Modified AGI. Enter your modified AGI. See instructions

2a

51,250

b

Enter the total of your dependents' modified AGI. See instructions

2b

3

Household income. Add the amounts on lines 2a and 2b. See instructions

3

51,250

4

Federal poverty line. Enter the federal poverty line amount from Table 1-1, 1-2, or 1-3. See instructions. Check the appropriate box for the federal poverty table used. a ☐ Alaska b ☐ Hawaii c ☐ Other 48 states and DC

4

18,310

5

Household income as a percentage of federal poverty line (see instructions)

5

279 %

6

Reserved for future use

6

7

Applicable figure. Using your line 5 percentage, locate your "applicable figure" on the table in the instructions

7

.0516

8a

Annual contribution amount. Multiply line 3 by line 7. Round to nearest whole dollar amount

8a

2,645

b

Monthly contribution amount. Divide line 8a by 12. Round to nearest whole dollar amount

8b

220

Part II

Premium Tax Credit Claim and Reconciliation of Advance Payment of Premium Tax Credit

9

Are you allocating policy amounts with another taxpayer or do you want to use the alternative calculation for year of marriage? See instructions.
☐ Yes. Skip to Part IV, Allocation of Policy Amounts, or Part V, Alternative Calculation for Year of Marriage. ☐ No. Continue to line 10.

10

See the instructions to determine if you can use line 11 or must complete lines 12 through 23.
☐ Yes. Continue to line 11. Compute your annual PTC. Then skip lines 12–23 and continue to line 24. ☐ No. Continue to lines 12–23. Compute your monthly PTC and continue to line 24.

Annual Calculation	(a) Annual enrollment premiums (Form(s) 1095-A, line 33A)	(b) Annual applicable SLCSP premium (Form(s) 1095-A, line 33B)	(c) Annual contribution amount (line 8a)	(d) Annual maximum premium assistance (subtract (c) from (b); if zero or less, enter -0-)	(e) Annual premium tax credit allowed (smaller of (a) or (d))	(f) Annual advance payment of PTC (Form(s) 1095-A, line 33C)
11 Annual Totals						
Monthly Calculation	(a) Monthly enrollment premiums (Form(s) 1095-A, lines 21–32, column A)	(b) Monthly applicable SLCSP premium (Form(s) 1095-A, lines 21–32, column B)	(c) Monthly contribution amount (amount from line 8b or alternative marriage monthly calculation)	(d) Monthly maximum premium assistance (subtract (c) from (b); if zero or less, enter -0-)	(e) Monthly premium tax credit allowed (smaller of (a) or (d))	(f) Monthly advance payment of PTC (Form(s) 1095-A, lines 21–32, column C)
12 January						
13 February						
14 March	789	789	220	569	569	750
15 April	789	789	220	569	569	750
16 May	789	789	220	569	569	750
17 June	789	789	220	569	569	750
18 July	789	789	220	569	569	750
19 August	789	789	220	569	569	750
20 September	789	789	220	569	569	750
21 October	789	789	220	569	569	750
22 November	789	789	220	569	569	750
23 December	789	789	220	569	569	750
24 Total premium tax credit. Enter the amount from line 11(e) or add lines 12(e) through 23(e) and enter the total here					24	5,690
25 Advance payment of PTC. Enter the amount from line 11(f) or add lines 12(f) through 23(f) and enter the total here					25	7,500
26 Net premium tax credit. If line 24 is greater than line 25, subtract line 25 from line 24. Enter the difference here and on Schedule 3 (Form 1040), line 9. If line 24 equals line 25, enter -0-. Stop here. If line 25 is greater than line 24, leave this line blank and continue to line 27					26	

Part III

Repayment of Excess Advance Payment of the Premium Tax Credit

27

Excess advance payment of PTC. If line 25 is greater than line 24, subtract line 24 from line 25. Enter the difference here

27

1,810

28

Repayment limitation (see instructions)

28

1,800

29

Excess advance premium tax credit repayment. Enter the smaller of line 27 or line 28 here and on Schedule 2 (Form 1040), line 2

29

1,800

For Paperwork Reduction Act Notice, see your tax return instructions.

Cat. No. 37784Z

Form 8962 (2023)

1491

Scenario 2 - Form 1040, Schedule 2, Additional Taxes

<div>SCHEDULE 2 (Form 1040) Department of the Treasury Internal Revenue Service</div>	<div>Additional Taxes Attach to Form 1040, 1040-SR, or 1040-NR. Go to www.irs.gov/Form1040 for instructions and the latest information.</div>	<div>OMB No. 1545-0074 2023 Attachment Sequence No. 02</div>
Name(s) shown on Form 1040, 1040-SR, or 1040-NR CHARLES AND SHAY BALDWIN		Your social security number 609-00-XXXX
Part I Tax		
1	Alternative minimum tax. Attach Form 6251	1
2	Excess advance premium tax credit repayment. Attach Form 8962	21,800
3	Add lines 1 and 2. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 17 . . .	31,800
Part II Other Taxes		
4	Self-employment tax. Attach Schedule SE	4
5	Social security and Medicare tax on unreported tip income. Attach Form 4137	5
6	Uncollected social security and Medicare tax on wages. Attach Form 8919	6
7	Total additional social security and Medicare tax. Add lines 5 and 6	7
8	Additional tax on IRAs or other tax-favored accounts. Attach Form 5329 if required. If not required, check here	8
9	Household employment taxes. Attach Schedule H	9
10	Repayment of first-time homebuyer credit. Attach Form 5405 if required	10
11	Additional Medicare Tax. Attach Form 8959	11
12	Net investment income tax. Attach Form 8960	12
13	Uncollected social security and Medicare or RRTA tax on tips or group-term life insurance from Form W-2, box 12	13
14	Interest on tax due on installment income from the sale of certain residential lots and timeshares	14
15	Interest on the deferred tax on gain from certain installment sales with a sales price over \$150,000	15
16	Recapture of low-income housing credit. Attach Form 8611	16

(continued on page 2)

For Paperwork Reduction Act Notice, see your tax return instructions.

Cat. No. 71478U

Schedule 2 (Form 1040) 2023

Index

A

Accrued interest 8-10

Additional child tax credit 24-1, 24-4, 28-1

Additional taxes 27-1, 27-4, 27-7

Address changes 32-2

Adjusted basis 10-1, 10-2, 10-3, 10-6, 10-15

Adjusted gross income 17-1, 17-18

Adjustments to income 17-1 Adopted child 6-3, 6-12, 7-8 Affordable Care Act 26-1

Alimony 8-14, 15-14, 17-1, 17-7

Allocated tips 8-5, 27-3

Allocation of refund 30-3, 30-6

Amended return 33-1

Amount owed 30-7, 30-13

Amount realized 10-16, 10-18

Annuity 11-1, 11-8

Applicable taxpayer 26-2, 26-13

ATIN 3-5, 3-6, 7-8

B

Basic Allowance for Housing (BAH) 16-1 Basis
10-2, 10-15, 11-3, 12-7

Bona fide 15-10, 15-13

Bond 8-8, 17-16, 30-2

Business expenses 9-4, 9-7

Business income 9-1

C

Capital gain distributions 8-12, 10-6, 10-8

Capital gain or loss 10-1

Carryover losses 10-9, 10-10

Cash for keys program 15-2 Cash method of
accounting **18-5**

Casualty losses 10-2, 10-15, 10-19, 20-11

Certificate of Deposit (CD) 8-7

Charitable contributions 19-1, 19-4, 20-8

Children of divorced/separated parents 6-10,
24-2 Child tax credit (CTC) 24-1

Combat pay 16-4, 17-9

Combat zone 16-1, 16-4, 16-5, 32-5, 32-6

Combat zone participants 32-6 Community
property 4-4, 16-7 Completing the return
31-1 Concluding the interview 31-4

Corporate distributions (dividends) 8-12 Cost
basis 10-3, 11-3, 11-9

Course introduction 1-1

Coverage Family 26-13

Coverdell ESA 15-3, 17-16

Credit for child and dependent care 21-1

Credit for retirement savings contributions
25-1 Credit for the elderly or disabled 25-6

Credit for the elderly or the disabled 25-1

CTC – Qualifying child 24-1

Custodial parent 6-10

D

Death of a spouse 3-2, 4-2, 4-8

Decedents 3-5, 32-7

Deductible business expenses 9-7 Deductible

IRA contributions 17-9 Dependency

Exemptions 6-1

Dependency tests 6-1 Dependent care

expenses 21-1

Dependent of another taxpayer 26-16

Depreciation 9-4, 9-15, 12-7

Direct deposit 3-7, 30-2, 30-3

Disability pension income 11-10

Disabled permanently and totally (defined) 6-

3 Distributions 10-8, 11-3, 11-5, 11-11, 27-4

Dividends 8-11, 23-3, 23-7

Divorced/separated parents – qualifying child
6-10, 21-3

Domestic abuse 26-13

Dual-status aliens 7-3, 20-1

Duty station 10-18, 15-11, 16-4

E

Early distribution in case of birth or adoption
of child 27-5

Early withdrawal of savings 17-5

Earned income 8-2, 29-2, 29-3 Earned
income credit (EIC) 29-1 Educational
Institution 17-16

Education credits 22-1

Education expenses 17-16

E-file 3-7, 31-3

EIC – Disallowance 29-6

EIC – Eligibility requirements 29-1

EIC – Qualifying child rules 29-3, 29-4, 29-5

EIC – Tables 29-6

EIC – Worksheet 29-6

Election to expense business assets 9-4

Electronic federal tax payment system (EFTPS)

30-7 Eligibility requirements 15-10, 17-7

Emancipated child 6-11 Employee safe harbor

26-13 Employer retirement plans 11-3

Equivalent railroad retirement benefit 14-1

Estimated tax payments 28-3

Estimated tax penalty 30-10 Exchange rates
15-8, 15-9

Exempt income 8-2

Exempt individual (substantial presence test)

7-4 Exemption – Dependency 6-1

Exemption – Personal 5-1 Extensions 28-4,
32-2, 32-4

F

Family coverage 26-13

Family size 26-13

Federal income 7-3

Federal Poverty Line (FPL) 26-2 Filing Basics
3-1

Filing Status 4-1, 7-5, 17-9

First-time homebuyer credit 27-6 Foreign
earned income 15-7, 15-14

Foreign earned income exclusion 15-10, 15-
14

Foreign exchange rate 15-9 Foreign tax credit
23-1 Form 1040 3-7, 7-1

Form 1040-ES 30-10

Form 1040 (Schedule A) 20-1

Form 1040 (Schedule C) 9-1

Form 1040 (Schedule D) 10-1

Form 1040 (Schedule E) 12-1

Form 1040 (Schedule R) 25-1

Form 1040 (Schedule SE) 9-14, 27-2 Form
1040 (Schedule LEP) iii

Form 1040-V 30-7

Form 1041 (Schedule K-1) 12-1

Form 1065 (Schedule K-1) 12-1

Form 1098-T 22-2

Form 1099-B 10-2, 10-4, 10-6

Form 1099-DIV 8-12, 10-6, 10-8, 23-2

Form 1099-G 8-14, 13-1

Form 1099-INT 8-8, 23-1

Form 1099-K 9-1

Form 1099-MISC 9-1

Form 1099-OID 8-8, 17-5

Form 1099-R 8-10, 11-2, 17-10

Form 1099-S 10-2, 10-12, 10-14, 10-16

Form 1116 23-1

Form 1120S (Schedule K-1) 12-1

Form 1127 30-8

Form 2120 6-9

Form 2210 30-10

Form 2441 21-1, 21-8

Form 3903 18-1

Form 4137 27-3

Form 4852 8-3

Form 5329 11-11, 27-5

Form 7202 28-6

Form 8332 6-10, 6-11

Form 8582 12-12, 12-13

Form 8606 11-4, 17-9

Form 8822 32-2

Form 8840 7-3

Form 8863 22-7

Form 8880 25-1, 25-3

Form 8888 30-4, 30-5

Form 8949 10-8, 10-9, 10-10, 10-11, 10-17

Form 8962 26-2

Form 9000 iv

Form 9465 30-8

Form 13614-C 1-1, 1-2

Form 13615 1-3

Form RRB-1099 14-1, 14-2, 14-3 Forms
1095-A, B, and C 26-1, 26-14 Form SSA-
1099 3-6, 14-1, 14-2, 14-3

Form W-2 3-2, 3-6, 8-3

Form W-2G 28-2

Form W-4P 11-14, 30-12

Form W-4S 30-12

Form W-4V 11-14, 30-12

Form W-7 3-6, 3-7

Foster child 4-7, 4-8, 6-3, 6-7, 28-5

Fraudulent activity 3-8

G

Gambling winnings 15-1, 15-2, 28-2 Green card test 7-2

Gross income test 3-1, 3-2, 6-6, 6-8, 8-2, 16-1

Gifts to charity 19-4, 20-2, 20-8

H

Head of Household filing status 4-5, 7-6, 26-15 Head of Household rules 4-5

Health coverage tax credit 3-3 Health Savings Account (HSA) 15-2 Help from the IRS 1-11

Higher education emergency financial aid grants, vii, 8-7

Holding period 10-1

Home mortgage interest 10-15, 12-8, 20-6

Household employees/employment 8-4, 21-5

Household income 26-14

I

Identity protection PIN 1-4, 30-2

Identity theft 1-4, 3-5

Income 8-1

Independent contractor 9-1, 27-2

Individual Market 26-14

Individual Retirement Arrangements (IRAs)
8-10, 11-1, 17-6

Individual TIN (ITIN) 3-5, 7-4

Inherited property 10-2, 10-3, 10-19

Injured spouse 4-5, 33-2

Inmate's Income 15-2

Innocent spouse relief 4-3, 4-5

Installment agreement 30-8

Insurance premiums 12-6

Intake/Interview and Quality Review Sheet
(Form 13614-C) 1-1, 1-2

Interest deduction 12-4, 17-14, 17-17

Interest income - nontaxable 8-2, 8-9

Interest income - taxable 8-7

Interview Tips – Itemized Deductions 20-1

Inventory 9-11

Investment interest 20-5

Investment property 10-5, 23-7

IRA contributions 11-5, 11-13, 17-6, 17-8,
17-9

Itemized deductions 20-1

ITIN 3-5

J

Jury duty 15-1, 17-18

L

Lifetime learning credit 22-1, 22-6, 22-7, 22-8

Link & Learn Taxes 1-3, 1-11

Loan Repayment Assistance Programs (LRAP) 8-7

Lump-sum benefit payments 14-3

M

MACRS 12-7

MAGI 26-14

Mailing the return 31-4

Main home 10-11, 10-12, 10-14, 10-16

Marketplace 26-14

Married Filing Jointly filing status 4-2, 7-5

Married Filing Separately filing status 4-3, 4-4, 7-5

Married taxpayers 26-15

Medicaid Expansion 26-16

Medicaid waiver payments 9-3, 15-2 Medical separation pay 16-1

Military filing status – exemptions 7-1 Military finishing and filing the return 32-1 Military income 16-1

Military moving expenses 18-1

Minimum essential coverage (MEC) 26-16

Miscellaneous credits 25-1

Modified Adjusted Gross Income (MAGI) 26-

15 Mortgage interest 12-4, 19-1, 20-6, 25-6

Mortgage interest credit 25-6

Moving expenses 18-1

Multiple support agreement 6-9 Mutual funds 8-12, 10-5

N

Nonbusiness credit card debt cancellation 15-

4 Noncustodial parent 6-10

Nonqualified distributions 11-5

Nonrefundable credits (defined) 21-1, 25-1

Nonresident aliens 20-1, 22-2

Nontaxable income 8-2

O

Original issue discount (OID) 8-10, 17-5, 20-6

Other income 15-1

Other taxes 27-1

Overpayment 30-2

P

Partnerships 12-3

Passive income 12-11

Paycheck Protection Plan Loans forgiveness, v
Payment options 30-1, 30-7, 32-2, 33-4

Payments 28-1

Payment voucher 30-7

Pell grants 22-3

Penalty for early withdrawal 17-5 Penalty-free
withdrawals 27-5

Pension income 11-8, 11-10

Permanently and totally disabled (defined) 6-
3 Personal exemptions 5-1

Personally Procured Move 18-3

Points, mortgage 20-6

Practice Lab 1-3

Prior year returns 33-5, 33-6 Provider
identification, child care 21-7

Publication 4012, Volunteer Resource Guide
1-2

Q

Qualified dividends 8-11, 8-12

Qualified education expenses 22-1, 17-16

Qualified health plan 26-15

Qualified Medicaid waiver payments 9-3

Qualifying child (child and dependent care credit) 21-2 Qualifying child (child tax credit) 24-1

Qualifying child (dependency exemption) 6-3, 6-10

Qualifying child (EIC) 29-3, 29-4

Qualifying relative 4-6, 6-6

Qualifying Surviving Spouse filing status 4-8

R

Railroad retirement 14-1, 14-2 Real estate taxes 20-4 Reconstructing records 9-12

Refund/amount of tax owed 30-1 Refund information 30-1

Regular place of abode 15-11

Release of claim to exemption 6-11, 24-2, 31-2 Rental income and expenses 12-1

Required contribution 26-15

Residency status 7-2, 7-3, 7-7, 7-8

Resident alien 7-1

Retirement income 11-1

Retirement plan distributions 11-7, 27-5

Retirement savings contributions credit 25-1

Rollover 11-6

Roth IRA 11-4, 11-6

Royalty income 12-2, 12-13

S

Sale of a home 10-11, 10-12, 10-14, 10-16, 10-18

Sale of investment property 10-1, 10-5

Sale of stock 10-1, 10-6

Savings accounts 8-7

Savings bond 8-8, 17-16, 30-2

Schedule C 9-1

Schedule E 12-1

Schedule K-1 12-1

Scholarships 8-6, 17-16

Second Lowest Cost Silver Plan (SLCSP) 26-16

Self-employment income 9-1, 29-2

Self-employment income, foreign earned 15-10

Self-employment tax iv, 9-4, 9-11, 9-14, 17-4,
19-5, 27-1, 29-2

Signatures 32-7, 32-8 Single filing status 4-2

Site identification number (SIDN) 1-4 Social Security benefits 14-1

Social Security number (SSN) 3-5, 3-6 Social Security taxes 14-1

Software practice lab 1-3 Split refunds 30-13

Spousal abandonment 26-15

Standard deduction and tax computation 19-1 Standard deduction chart 19-3

Standard mileage rate viii, 9-7, 12-6, 18-2, 20-2 Standard mileage rate (business) 9-7

State and local income taxes 20-4 State and local real estate taxes 20-4 Student loan interest deduction 17-14 Substantial presence test 7-2, 7-4

Supplemental security income (SSI) 14-1 Support test 6-4, 6-8

T

Taxable income 8-2, 19-5

Taxable interest 8-7

Taxable pensions 11-8

Taxable retirement income 11-1

Taxation of distribution 11-1

Tax-exempt interest 8-9

Tax family 26-15

Tax forgiveness 32-7

Tax home 15-11

Temporary absences 4-5, 10-13 Temporary Provisions

Testing and certification 1-3

Theft losses 20-2, 20-11, 20-13

Tie-breaker rule 6-5

TINs (taxpayer identification numbers) 3-5

Tip income 8-1, 8-5, 27-3, 27-7

Travel expenses 9-9, 12-6

Treasury Department's Financial Management Service (FMS) 30-4

Trust 12-2

Tuition statement (Form 1098-T) 2-2, 8-7, 22-1

U

Undue hardship 30-8

Unearned income 8-2

Unemployment compensation 13-1

V

Valid taxpayer identification 3-5 Vehicle expenses 9-7, 9-11, 9-15, 12-6

Volunteer hotline 1-11

Volunteer ID Insert 1-4

Volunteer Income Tax Assistance (VITA) 1-1

Volunteer Protection Act 1-4

Volunteer Resource Guide (Publication 4012)

1-2 Volunteer standards of conduct 1-3

Volunteer Standards of Conduct Agreement

1-7

W

Wages and salaries 8-3, 15-10, 23-7

Wash sales 10-4

Where's My Refund? 30-6 Which form to file

3-7 Who must file 3-1

Who should file 3-3 Withholding 28-1, 30-11

Worldwide income 7-1, 7-5, 7-6, 15-7, 15-

16, 23-1

Link & Learn Taxes

Link & Learn Taxes is web-based training designed specifically for VITA/TCE volunteers. Each volunteer's ability to prepare complete and accurate returns is vital to the credibility and integrity of the program. Link & Learn Taxes, as part of the complete volunteer training kit, provides the path to achieving this high level of quality service.

Link & Learn Taxes and Publication 4012, VITA/TCE Volunteer Resource Guide, work together to help volunteers learn and practice.

Link & Learn Taxes for 2023 includes:

- Access to all VITA/TCE courses
- Easy identification of the VITA/TCE courses with the course icons
 - As you progress through a lesson, the content for Basic, Advanced, Military,

or International will display,
depending on the level of certification
you selected

- PowerPoint presentations that can be customized to fit your classroom needs
- VITA/TCE Central to provide centralized access for certification, training materials and reference links
- The Practice Lab
 - Gives volunteers practice with an early version of the IRS-provided tax preparation software
 - Lets volunteers complete sample practice problems
 - Lets volunteers prepare test scenario returns for the test/retest



Go to **www.irs.gov**, type “Link & Learn” in the Keyword field and click Search. You’ll find a detailed overview and links to the courses.

FSA (Facilitated Self Assistance)

empowers taxpayers to prepare their own returns with the assistance of a certified volunteer. Taxpayers complete their own returns using interview-based software supplied by leaders in the tax preparation industry. Volunteers assist taxpayers with tax law questions.

Virtual VITA/TCE model includes any site where face-to-face activities are not used during the tax preparation process. That is, the intake specialist, IRS-tax law certified preparer (who prepares the return) and/or the quality reviewer are not face-to-face with the taxpayer. By incorporating this flexibility

partners can provide taxpayers with more convenient locations to file their taxes.

For more information contact your SPEC Relationship Manager to see if you should start a FSA or Virtual VITA site in your community.



Your online resource for volunteer and taxpayer assistance

Partner and Volunteer Resource Center

www.irs.gov/Individuals/Partner-and-Volunteer-Resource-Center

- What's Hot!
- Site Coordinator's Corner

Quality and Tax Alerts for IRS Volunteer Programs

www.irs.gov/individuals/quality-and-tax-alerts-for-irs-volunteer-programs

- Volunteer Tax Alerts

Volunteer Training Resources

www.irs.gov/Individuals/Volunteer-Training-Resources

Outreach Connection

www.irs.gov/Individuals/Outreach-Corner

Interactive Tax Assistant (ITA)

www.irs.gov/help/ita

Online Services and Tax Information for Individuals

www.irs.gov/Individuals

Tools

- Sign in to Your Tax Account
- Get Your Transcript
- Where's My Refund?

File your taxes

- Special deadlines for taxpayers living overseas and some disaster victims
- What to do if you haven't filed your tax return
- Filing past due returns
- What you need to know before you file
- Learn about electronic filing options, including IRS Free File
- Get free tax help from volunteers
- Find tips for choosing a tax professional
- Avoid these common errors

- Avoid penalty for underpayment of estimated tax

After you file your taxes

- Pay taxes you owe, including estimated taxes
- Not getting a refund? Learn how to pay taxes if you owe
- Unexpectedly owe taxes? You may need to adjust your withholding
- Refund you received different than expected?
- Understanding your IRS notice or letter
- Need to correct your taxes? Amend a tax return
- Check the status of your amended return

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www.irs.gov/individuals/site-coordinator-corner

Mobile App

Another device to use for additional information is IRS2Go. Click here to download IRS2Go mobile app:

www.irs.gov/newsroom/irs2goapp

and much more!

Your direct link to tax information 24/7:

www.irs.gov

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