

Appendix A: State Questionnaire:

2022 Indiana State Income Tax Return

Electronic Filing Questionnaire

Residency Information

1. What Indiana County did you live in on Jan. 1, 2022? _____
2. What Indiana County did you work in on Jan. 1, 2022? _____
3. What Indiana County did your spouse live in on Jan. 1, 2022? _____
4. What Indiana County did your spouse work in on Jan. 1, 2022? _____

Indiana Deduction Information

5. Did you rent your home in 2022? Yes____ * No____
*If yes, answer the following questions:
 - How much rent did you pay per month? \$_____
 - How many months during 2022 did you pay rent? _____
 - Landlord's Name/Address (if different from tax return): _____

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6. Did you own/are buying your Indiana home in 2022? Yes____ * No____
*If yes, answer the following question:
 - What was the amount of Indiana property tax paid in 2022? \$_____
 7. Did you make a repayment in 2022 of any income that was reported taxable in a previous year?
*If yes, answer the following question:
 - What was the amount of the 2022 repayment? \$_____

Miscellaneous Income Information

8. Did you receive military pay? Yes____ * No____
*If yes, answer the following question:
 - Were you receiving Active Duty (AD), Retirement (R) and/or Survivor's Benefits (SB) pay?
AD____ R____ SB____
9. Were you a member of a military reserve component or the Indiana National Guard? Yes____ * No____
*If yes, answer the following questions:
 - Were you deployed or mobilized for full service during 2022? Yes____ No____
If yes, date mobilized _____
 - Was your Indiana National Guard unit federalized during 2022? Yes____ No____
If yes, date federalized _____

Refund Information

10. If you are getting a refund, would you like to have it Direct Deposited? Yes____ * No____
*If yes, will any of your refund go to an account outside the United States? Yes____ No____

VITA Tax Preparation: ADDITIONAL INTAKE QUESTIONS

1. Direct Deposit (Fed/State) or Direct Debit (Fed Only):

Bank Name: _____ **Checking or Savings**

Routing Number (9 digits): _____ **Account Number:** _____

2. Self-Employment and/or 1099-NEC, K-1, 1099-Misc:

Type/Description of business: _____

Total Business Income: \$ _____; **Total Business Expenses:** \$ _____

List expense category and amount:

List year, make and model of vehicle if used for business: _____

Date put in service for business: _____; **Written mileage record:** circle yes / no

Total Miles: _____ **Commuter Miles:** _____ **Work Miles:** _____

Vehicle used after business hours: circle yes / no ; **Another vehicle available:** circle yes / no

3. Health Savings Account, W2, Box 12, Code W or other:

Distribution or Debit Card withdrawal from HSA account: circle yes / no

Form 1099-SA present: yes / no; **Form 5498-SA present:** yes / no

Circle: Self-Only or Family HSA Plan

Number of Months Enrolled in High Deductible Health Plan in current tax year: _____

List category/description and amount for each withdrawal from HSA account that was not for medical purposes:

Any withdrawals used for non-medical purposes? circle yes / no

4. Education Credits:

1098-T Present: yes / no

Already had 4 yrs of American Opportunity Credit or 4 yrs of post-secondary education: yes/no

Purpose of educational classes (pursuing degree, grad studies, job skills, etc.):

Convicted of a felony: yes / no; **At least halftime student in degree program:** yes / no

Education expenses (type & amount) not included on 1098-T: _____