

MAX TAX 1342, LLC

2013-2014 Taxpayer in-take form

A COPY OF SOCIAL SECURITY CARDS AND IDENTIFICATION CARDS MUST BE PRESENTED PRIOR TO FILING RETURNS

New Client _____

Established Client _____

Primary and Secondary Taxpayer Information

Primary Name _____

Spouse Name _____

Have you ever used any other last name before? If so please provide:

SS# _____ - _____ - _____

SS# _____ - _____ - _____

DOB _____ / _____ / _____

DOB _____ / _____ / _____

Occupation _____

Occupation _____

Address _____ APT. _____

City _____ State _____ Zip Code _____

Home Phone (____) _____ - _____

Home Phone (____) _____ - _____

Cell Phone (____) _____ - _____

Cell Phone (____) _____ - _____

Work Phone (____) _____ - _____

Work Phone (____) _____ - _____

E-Mail Address: _____ @ _____ E-Mail Address: _____ @ _____

Filing Status Single Married Filing Jointly Married Filing Separately Head of Household* Widower***HOH- Must obtain additional docs to claim dependents****Dependent Information**(1) Name _____ SS# _____ - _____ - _____ DOB _____ / _____ / _____
Son Daughter Parent Fosterchild Grandchild Grandparent Sibling Relative Other _____(2) Name _____ SS# _____ - _____ - _____ DOB _____ / _____ / _____
Son Daughter Parent Fosterchild Grandchild Grandparent Sibling Relative Other _____(3) Name _____ SS# _____ - _____ - _____ DOB _____ / _____ / _____
Son Daughter Parent Fosterchild Grandchild Grandparent Sibling Relative Other _____(4) Name _____ SS# _____ - _____ - _____ DOB _____ / _____ / _____
Son Daughter Parent Fosterchild Grandchild Grandparent Sibling Relative Other _____(5) Name _____ SS# _____ - _____ - _____ DOB _____ / _____ / _____
Son Daughter Parent Fosterchild Grandchild Grandparent Sibling Relative Other _____

Please Check All That Apply

Primary:

- Blind
- Permanently Disabled
- Collected unemployment
- Received Social Security
- Paid/Received Child Support
- Paid/Received Alimony

Spouse:

- Blind
- Permanently Disabled
- Collected unemployment
- Received Social Security
- Paid/Received Child Support
- Paid/Received Alimony

General:

- Mortgage Interest (Documentation Mandatory)
- Real Estate Taxes (Documentation Mandatory)
- Rented Apartment
- Additional Properties
- Bought/Sold a House

- Childcare Provided (Provide EIN from facility)
- Paid Tuition (Documentation Mandatory)

Self Employed

Gambling Winnings/Loss (Please provide W-2G from facility)

If you would like your refund to be deposited into a bank account, please provide the following:

Bank Name: _____
Routing #: _____
Account #: _____

I _____, certify that the above information was given by me. I also certify that this information is correct and I shall not hold Max Tax 1342, LLC and/or the tax return preparer liable for any misrepresentation on my part.

Taxpayer Signature

Spouse Signature

Notes:
