

MAXWELL LAW FIRM, PLLC
ATTORNEY AT LAW

Charlotte Office

1200 East Morehead St, Ste. 140
Charlotte, NC 28204
T: 704-461-1883

Concord Office

3 Union Street S. St, Ste 210
Concord, NC 28025
T: 704-780-1100

attorney@maxwelllegal.com
Victorianne C. Maxwell

February 12, 2012

Dear Client,

Our firm looks forward to helping you with your 2011 and prior income taxes! Please sure to fill out all the forms enclosed and attach relevant forms (W2, 1099 forms ect). Please make sure you confirm your bank routing and account numbers under section entitled Electronic Filing and Banking Information.

We are offering free e-file services. We will provide you with an opportunity to review the returns before they are filed and will confirm refund or payment before tax returns are e-filed. Payment options for our services include: Credit/Debit Card, paypal (if you schedule online), cash, or money order. ***Personal checks will not be accepted.***

You have **four (4) options** to deliver your tax documents to our office:

1. Mail all **copies** of your documents to our office (retain originals for your file) OR
2. Schedule an appointment to have your taxes prepared by calling or office or [online](#) OR
3. Drop off your documents at our office without a personal meeting OR
 - Documents maybe placed in office drop box after hours.
4. Fax all of your documents, tax questionnaire (which includes a waiver and checklist) fax to **704-233-3715; OR scan and email them:**
 - To assistant@maxwelllegal.com / Subject line of email should be **Tax Return** (*a courtesy discount will be applied to clients who **email or fax their** information versus using the other methods listed above.*)

Our office will return a copy of your tax returns and documents. Mailing/shipping charges apply for those documents sent first class mail.

Charlotte Office

1200 E. Morehead St. #140
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(T) 704-461-1883

Hours: By Appointment only/ Drop in Mail Slot.

Concord Office

3 Union Street, #210
Concord, NC 28025
(T) 704-780-1100

Hours: By Appointment only/ Drop/Mailbox located downstairs.

Thank you for your business!



Victorianne C. Maxwell, Attorney At Law

MAXWELL LAW FIRM: TAX FORM

DIRECT DEPOSIT AUTHORIZATION

YES! I wish to have my refund deposit my net pay amount each payday directly to my account at the financial institution shown below.

YES! I wish to have my preparer's fee deducted using **Fee Collect®** program. I have been handed a pamphlet with all the terms and conditions of this program.

Name of Financial Intuition _____

Check which account applies Checking (C): Savings (S):

Routing #																			
Account #																			

Signed: _____

Date: _____

Please staple a **Voided** check (Checking Account) or a

CREDIT CARD AUTHORIZATION

CREDIT CARD TYPE: VISA MASTERCARD *Visa or MasterCard Only*

CREDIT CARD NUMBER: EXP:

COMPANY NAME:

CARD HOLDER NAME:

BILLING ADDRESS:

CITY/STATE/ZIP:

PHONE:

FAX:

AMOUNT CHARGED: \$

I, _____, authorize my credit card to be charged for the above amount. I am aware that I will receive a copy of the charge slip and that this slip will act as my record of this transaction.

Sign: _____ Date: _____

Do you wish \$3 to go to the Presidential Election Campaign? (Tax amount not affected)
 Yes No

Part I: Individual Income

Tax Year: _____

First Name		Last Name	
Social Sec/ITN#		Telephone	
Address		Email address	
City, Zip		Date of Birth mm/dd/yy	

Family and Dependent Information

Single

Head of Household

Married

Married Filing Separate

Widowed: Year of Spouse's Death _____

Spouse's Name		Last Name	
Social Sec/ITN#		Date of Birth mm/dd/yy	

Dependent Information

Names	Relationship to you	Date of Birth mm/dd/yy	Social Sec #	Full time Student	Gross more than \$3,650.00 income
1.					
2.					
3.					
4.					

Income for you and your spouse

Form/Type (please attach forms)	Yes	No	Unsure
W2 /Tips			
Interest / Dividends (1099-DIV) (1099-OID)			
Alimony Income			
Self-Employment Income/Loss (1099-MISC)			
Income from Sale of Stocks, Bonds,			
Disability Income			
Distribution from Pensions, Annuities, and or IRA			
Unemployment Compensation			
Social Security Benefits			
Income (profit/loss) from Rental Property			
Other Income: (gambling, lottery, prizes, awards, jury duty)			
K1 Income from trusts/estates			
K1 Income from partnerships			

Expenses			
Form/Type (please attach statements)	Yes	No	Unsure
Contributions to retirement account			
Medical Expenses			
Health Savings Account			
Alimony			
Home Mortgage Interest			
Real Estate Taxes			
Charitable contributions			
Child/Dependent care expenses			
Unreimbursed employee business expense			
Educational Expenses paid for yourself, spouse, dependents			
Moving expenses (related to work/employment)			
Vehicle Expenses Mileage			
Make			
Model			
Year			
If the vehicle being used by the owner , please provide the following information:			
Date of purchase			
Purchase price			
Business Mileage			
Energy Credits: Purchase Install energy inefficient home items			
Student Loan Interest			

Part II. : Business Expenses & Income

Rental & Royalty Income and Expense

Property Type: <input type="checkbox"/> Residential <input type="checkbox"/> Commercial
Location:

If vacation home:

Number of days rented	
Number of days used personally	

Property is owed by: Taxpayer Spouse Joint

Percentage of ownership if not 100% _____%

(Please indicate if income and expenses below are listed at 100% or your percentage)

Do you live in part of the rental property? **Yes** **No**

If yes, what percentage did you occupy as a tenant? _____%

Check if rented to a related party. Explain relation:

Income	Amount
Rental income	
Royalties received	

Expenses	Amount
1. Advertising	
2. Association dues	
3. Auto miles driven	
4. Travel	
5. Cleaning and maintenance	
6. Commissions	

7. Insurance	
8. Legal and professional fees	
9. Allocated tax preparation fees	
10. Licenses and permits	
11. Management fees	
12. Mortgage interest (Form 1098)	
13. Other interest	
14. Repairs	
15. Supplies	
16. Property taxes	
17. Utilities	
18. Other (description)	

Depreciation				
Property	Date acquired	Cost or other basis	Depreciation method	Prior depreciation

(Sole Proprietorship)/LLC/Corporation

Principle business or profession: _____

Business name: _____

Employer ID number: _____

Business address: _____

City _____ State _____ Zip _____

Business is owned by: Taxpayer Spouse

Accounting method: Cash Accrual

Inventory method: Cost Lower cost or market Other N/A

Did you materially participate in the business? Yes No

Check if this is the first year of the business:

Income	Amount	Cost of Good Sold	Amount
1. Gross receipts or sales		1. Beginning of year inventory	
2. Returns and allowances		2. Purchases	
3. Other income		3. Cost of items used personally	
		4. Cost of labor	
		5. Materials and supplies	
		6. Other costs	
		7. End of year inventory	

Expenses	Amount	Expenses	Amount
1. Advertising		21. Other taxes	
2. Bad debts (N/A cash benefits)		22. Licenses	
3. Commissions and fees		23. Travel	
4. Employee benefits		24. Meal and entertainment	
5. Health insurance		25. Utilities	
6. Other insurance		26. Wages	
7. Mortgage interest		27. Management fees	
8. Other interest		28. Consulting expenses	

9. Legal and accounting fees		29. Payroll service	
10. Allocation of tax preparation fees		30. Employee vehicle expense	
11. Office expense		31. Employee mileage reimbursement	
12. Pension and profit sharing		32. Client gifts (limited to \$25 each)	
13. Rent- vehicles		33. Education and seminars	
14. Rent- equipment		34. Other (description)	
15. Rent- building		35.	
16. Repairs & maintenance, building		36.	
17. Repairs & maintenance, equipment		37.	
18. Repairs & maintenance, vehicles		38.	
19. Supplies		39.	
20. Payroll taxes		40.	

Depreciation				
Property	Date acquired	Cost or other basis	Depreciation method	Prior depreciation

MAXWELL LAW FIRM, TAX PREPARATION DISCLAIMER

Name of Individual Client and/or Business: _____

Tax Form(s) _____ Year Ending: _____

To protect you, the Client, this professional tax preparation firm follows accepted ethical procedures as specified by the Internal Revenue Code and/or applicable guidelines governing the conduct of professional tax preparers. After reading each statement below carefully, please acknowledge your acceptance by signing the bottom of this form. Thank you for your cooperation and understanding of the responsibilities we must accept as professional tax preparers.

The specified income tax returns have been prepared for me the client by Attorney of Maxwell Law Firm, PLLC.

I have reviewed the completed returns and understand their contents and have received a copy of the returns. I realize it is my responsibility to include in my files all documentation necessary to substantiate all income, deductions, and credits reflected on the returns for at least ____ years.

All information on these returns is true and accurate according to the information furnished by me to Tax Firm. Nothing has been added or deleted by the preparer that would understate my tax liability.

All taxable income has been reported, including any bartering, any partnership interests, any sales of business or personal assets, and all interest and dividend income from all sources.

I have informed my tax preparer of any adjustments or correspondence between any taxing authority and me and/or my business during the past ____ years.

I have been informed that I must have adequate written records for all deductions/exemptions.

I understand my professional tax preparer has based entries on these returns according to **information I have provided**, present laws, regulations, and other applicable authority. I understand that tax law and its interpretation is subject to continual change and therefore the rules and principles followed in the preparation of these returns may not be applicable for any other tax year.

My tax preparer has indicated any aggressive applications to me and I understand such a position may be questioned or overturned in the audit process. I agree to hold my preparer harmless from any examination and possible reversal on this (these) issues.

____/s/ Victorianne C. Maxwell, Preparer, Attorney at Law
BY NAME OF TAX PROFESSIONAL, TITLE, PREPARER

Accepted By Client: _____

Print _____

Date: _____