For Individuals – Deceased – MFJ – Spouse not Executor Please let us know if any of the changes apply to you!

Client Name	e/s Tax Year <u>2024</u>
1.	Were either claimed as a dependent on another's return? Yes or No
2.	In tax year, did surviving spouse get married again? Yes or No
3.	In tax year & prior to death, did they get divorced? Yes or No
	If yes above give date of final divorce
4.	Did either change their name at social security? Yes or No
	If yes, we need their new social security card
5.	Did they buy or sell your home (Prior to Death)? Yes or No
6.	Is there a new mailing address? Yes or No
7.	Did they purchase anything outside of their home state, including online? (Exception 1 – If they live in Alaska, Delaware, Montana, New Hampshire, or
Organ	a this is N/A)
events	((Exception 2 – Eating out at restaurants out of town, motel, hotel, and tickets for s and/or places including cruises)
	Yes or No
	If yes, how much did they spend out of state?

(This is the amount they did not pay VA Tax on)

8. During the tax year, did they have a foreign bank account, signature authority on a foreign account, or foreign assets?

Yes or No _____

9. Are they claiming any new dependents or no longer claiming any dependents?

Yes or No _____

10. Is there tax information included for anyone besides this client including if it is for a business, trust, or estate?

Yes or No _____

11. At any point in the year, did they or their spouse receive, sell, send, exchange, or acquire any interest in any Virtual Currency? (Example: Bitcoin)

Yes or No _____

<u>This Next Section</u>: For Single Member LLCs & Sole Proprietors Only

- 2. Did the business pay anyone to help them that they paid more than \$600 over the course

of the year (Do not include employees that a W-2 was issued on)?

Yes or No _____

Note: Businesses, please go fill out a Profit & Loss form if you do not have a profit and loss from a bookkeeping or one you prepared yourself already, which you can get on our website

Printed Name Above of Executor or Representative:

Signature Above of Executor or Representative:

Date Signed:

Printed Name Above of Spouse or their Executor or Representative:

Signature Above of Spouse or their Executor or Representative:

Date Signed:

Rev. 01/02/2025