

2024 Individual Tax Return Checklist

CLIENT INFORMATION: New clients, fill out completely. Returning clients, fill out for changes.	
Client Name:	Spouse Name:
Client SSN:	Spouse SSN:
Client Date of Birth:	Spouse Date of Birth:
Address:	Cell #: May we text you at this #? Y N
Email:	Other Phone Number(s):
	.,
DEPENDENT INFORMATION:	
Dependent #1 Name:	Relationship:
Dependent SSN & DOB:	Months in Home:
Dependent #2 Name:	Relationship:
Dependent SSN & DOB:	Months in Home:
Dependent # 3 Name:	
Dependent SSN & DOB:	·
BANKING INFORMATION FOR DIRECT DEPOSIT & DIRECT DEBIT:	
Bank Name: ————— Account Number:	
routing the banking the banking thou as last year.	
NCOME: W-2s	
EXPENSES & DEDUCTIONS:	
5498 IRA Contributions Energy-efficient Home	Improvements Medical Expenses (7.5% of AGI)
Mortgage Interest (1098) Electric Vehicle Purchase Do	ocuments Health Insurance Premiums (Medical, Dental, Vision)
Property Tax Statements License & Registration Fees	Charitable Contributions
2024 Taxable Value of Home Educator Expenses Childcan	re Expenses & Provider Information
Estimated Taxes Paid for 2024 Expenses Related to F	Rental Property Sales Tax on Major Purchases
1098-T & College Expenses Retirement Plan Documents	s MI DHHS Stillbirth Certificate
MISCELLANEOUS INFORMATION:	
Identity Protection PIN	
# of Days Worked from Home if you LIVE or WORK in a taxable city (Grand Rapids, Walker, East Lansing, Detroit, etc.)	
Required 1095-A if you had Marketplace Health Insurance in 2024	
Closing Statement from Home Sale if sold in 2024	
Copy of Valid Driver's License or State ID	
Copy of previous year's tax return if VDTA did not prepare it	

If you have questions, please visit our website, send us an email, or give us a call! www.vdtapro.com info@vdtapro.com (616) 840-6352