## SANDBERG TAX SERVICE, LLC 1330 W FLINT MEADOW DR KAYSVILLE, UT 84037

Telephone: (801)928-9642 E-mail: dave@sandbergtax.com

## 2023 TAX ORGANIZER

| Taxpayer Information                                   |                 |                                     | Spouse Information |                            |                       |  |
|--|-----------------|-------------------------------------|--------------------|----------------------------|-----------------------|--|
| Last name  |                 | Last name                           | Last name          |                            |                       |  |
| First name   |                 | First name                          | <u> </u>           |                            |                       |  |
| Middle Initial   |                 |                                     | Middle Initial     |                            |                       |  |
| Social security number                                 |                 | Social security                     | number             | <u> </u>                   |                       |  |
| Occupation   |                 | Occupation                          | Occupation         |                            |                       |  |
| Work phone   |                 |                                     |                    | Ext                        |                       |  |
| Cell phone   |                 | Cell phone                          | <u> </u>           |                            |                       |  |
| E-mail address   |                 |                                     |                    |                            |                       |  |
| Date of birth  |                 |                                     |                    |                            |                       |  |
| Address  |                 |                                     |                    |                            | mber                  |  |
| City   |                 |                                     |                    |                            |                       |  |
| Home phone   |                 | number                              |                    |                            |                       |  |
|  |                 |                                     |                    |                            |                       |  |
| Dependent Information                                  | 1               | 1                                   |                    | 1 1                        |                       |  |
| First name  Last name                                  | MI              | Social Security Number Relationship | Date<br>of Birth   | Months Lived with Taxpayer | Child Care<br>Expense |  |
| Last name  | Sullix          | Relationship                        | OI BII (II         | with raxpayer              | Ехрепзе               |  |
|  |                 |                                     |                    |                            |                       |  |
|  |                 |                                     |                    |                            |                       |  |
|  |                 |                                     |                    |                            |                       |  |
|  |                 |                                     |                    |                            |                       |  |
|  |                 |                                     |                    |                            |                       |  |
|  |                 |                                     |                    |                            |                       |  |
| Child and Dependent Care Provider Exp                  | penses          |                                     | 1                  |                            |                       |  |
| Name   | Address         |                                     | ID Number          | Amount Paid                |                       |  |
|  |                 |                                     |                    |                            |                       |  |
|  |                 |                                     |                    |                            |                       |  |
|  |                 |                                     |                    |                            |                       |  |
|  |                 |                                     |                    |                            |                       |  |
|  |                 |                                     |                    |                            |                       |  |
|  |                 |                                     |                    |                            |                       |  |
| Education Tuition and Fees                             |                 |                                     |                    |                            |                       |  |
| Attach all Form 1098-Ts and a list of your qualified e | ducation expens | ses.                                |                    |                            |                       |  |
| Student Loan Interest Paid                             |                 |                                     |                    |                            |                       |  |
| Enter total 2023 qualified student loan interest.      |                 |                                     |                    | ·····                      |                       |  |

| Attach Form(s) W-2 — Wages, Salaries, Tips and Other Compensation Employer Name  |  | 2022 Amount            |
|--|--|------------------------|
|  |  |                        |
| Attach Form(s) 1099-R — Distributions from Pensions, Annuities, Retire   | ement Profit-Sharing                   | IRAs etc               |
| 1099-R Payer Name  | ment, i ront-snami                     | 2022 Amount            |
|  |  |                        |
|  |  |                        |
| Attach Form(s) SSA-1099 – Social Security/Railroad Benefits  | Taxpayer                               | Spouse                 |
| Social Security Benefits from Form SSA-1099  | _                                      |                        |
| Railroad Retirement Benefits from Form RRB-1099  |  |                        |
| Medicare B premiums withheld   |  |                        |
| Medicare D premiums withheld   |  |                        |
| Attach Form(s) 1099-MISC — Miscellaneous Income and 1099-NEC   |  |                        |
| 1099-MISC Payer Name and 1099-NEC Payer Name   |  |                        |
|  |  | _                      |
|  |  |                        |
| ttach Form(s) 1099-INT — Interest Income   |  |                        |
| 1099-INT Payer Name  |  | 2022 Amount            |
|  |  |                        |
|  |  |                        |
|  |  |                        |
|  |  |                        |
| Attach Form(s) 1099-DIV — Dividend Income  |  |                        |
| 1099-DIV Payer Name  |  | 2022 Amount            |
|  |  |                        |
|  |  |                        |
|  |  |                        |
| Attach Form(s) 1099-B, 1099-S — Sales of Stocks, Bonds, Real Estate, etc  Attach all stock sale transaction information, including initial cost information.   |  |                        |
| Other Government Forms to attach:  |  |                        |
| Form(s) 1099-G — Certain Government Payments, Schedule K-1s — Partnership, S-Corp<br>Gambling or Lottery Winnings, Form(s) 1099-Q — Payments from Qualified Education Pro                            | oration, Trust or Estate Ind<br>ograms | come, Form(s) W-2G     |
| Other Income:  |  |                        |
| Alimony, jury duty, unreported tips, disability income, etc. Business, rentals, farms: Attach income ar Include a list of all new equipment acquired this year, including date of purchase and cost. | d expenses for any business,           | rental or farm you own |
|  | Taxpayer                               | Spouse                 |
| Retirement Plan Contributions  |  |                        |
| Traditional IRA contributions made for 2023  |  |                        |
| Roth IRA contributions made for 2023   | -                                      |                        |
| SEP, Keogh, Individual 401(k) or SIMPLE Contributions  |  |                        |

## 2023 Deductions

| Medical and Dental Expenses   | 2023 Amount               | 2022 Amount       |
|---|---------------------------|-------------------|
| Prescription medications  |                           |                   |
| Health insurance premiums   |                           |                   |
| Doctors, dentists, etc  |                           |                   |
| Hospitals, clinics, etc.  |                           |                   |
| Eyeglasses and contact lenses   |                           |                   |
| Miles driven for medical purposes.  |                           |                   |
| Other medical and dental expenses:  |                           |                   |
|   |                           |                   |
| Taxes   | 2023 Amount               | 2022 Amount       |
| Real estate taxes paid on principal residence   |                           |                   |
| Real estate taxes paid on additional homes or land  |                           |                   |
| Auto license registration fees based on the value of the vehicle  |                           |                   |
| Other personal property taxes   |                           |                   |
| Interest Expenses Home mortgage interest paid — Attach Form(s) 1098. Lender's Name  | 2023 Amount               | 2022 Amount       |
| Points paid on loan to buy, build or improve main home  Lender's Name   | 2023 Amount               |                   |
| Cash/Check/Credit Contributions   | 2023 Amount               | 2022 Amount       |
| Noncash Charitable Contributions  Attach all receipts with details listing the following information: Donee, donee address, description of dor your cost, value at time of donation, and how you acquired the property. | nation, date acquired and | date contributed, |
| Miscellaneous Deductions  | 2023 Amount               | 2022 Amount       |
| Union and professional dues   |                           |                   |
| Professional subscriptions, books, supplies.  |                           |                   |
| Uniforms and protective clothing (including cleaning)   |                           |                   |
| Job search costs  |                           |                   |
| Taxpayer educator expenses  |                           |                   |
| Spouse educator expenses  |                           |                   |
| Tax return preparation fees   |                           |                   |
| Safe deposit box rental   |                           |                   |
| Gambling losses (to the extent of gambling income)  Other expenses (list):  |                           |                   |
|   |                           |                   |

2023

Questions

|        |   | Yes               | No            |  |  |  |
|--------|---|-------------------|---------------|--|--|--|
| 1      | Did a lender cancel any of your debt in2023? (Attach any Forms 1099-A or 1099-C)  |                   |               |  |  |  |
| 2      | Did you make energy efficient improvements to your home or purchase any energy-saving property during 2023? If yes, please  |                   |               |  |  |  |
| 3      | ottach details  |                   |               |  |  |  |
|        | If <b>yes</b> , attach documentation showing sales tax paid.  |                   |               |  |  |  |
| 4      | Did you purchase a hybrid or electric vehicle in 2023? If <b>yes</b> , enter year, make, model, and date purchased:   |                   |               |  |  |  |
|        |   | Н                 | H             |  |  |  |
| 5      | Did you donate a vehicle in 2023? If <b>yes</b> , attach Form 1098C.  | . Ш               |               |  |  |  |
| 6<br>7 | What was the sales tax rate in your locality in 2023?  % State ID   |                   |               |  |  |  |
| •      | If <b>yes</b> , explain:  | ' Ш               |               |  |  |  |
| 8      | Were you or your spouse permanently and totally disabled in 2023?   | . 🔲               |               |  |  |  |
| 9      | Do you have dependents who must file?   | . 🔲               |               |  |  |  |
| 10     | Do you have children who are under age 19 or a full time student under age 24 with investment income greater than \$2,500?  | . 🔲               |               |  |  |  |
| 11     | Did you provide over half the support for any other person during 2023?   |                   |               |  |  |  |
| 12     | Did you incur adoption expenses during 2023?  |                   |               |  |  |  |
|        | 3 Did you receive a total distribution from an IRA or other qualified plan that was partially or totally rolled over into another IRA or qualified plan within 60 days of the distribution? |                   |               |  |  |  |
|        | Did you receive any disability payments in 2023?  |                   | H             |  |  |  |
|        | Did you receive tip income <b>not</b> reported to your employer?  |                   |               |  |  |  |
|        | If you sold a home, did you claim the First-Time Homebuyer Credit when you purchased it?  |                   |               |  |  |  |
| 17     | Did you incur any casualty or theft losses during 2023?   | =                 |               |  |  |  |
| 18     | Did you incur any non-business bad debts?   |                   | Ш             |  |  |  |
| 19     | Did you pay any individual for domestic services in 2023 ?  |                   | Ц             |  |  |  |
| 20     | Did you buy or sell any stocks or bonds in 2023?  | =                 | Ш             |  |  |  |
| 21     | Did you use the proceeds from Series EE or I U.S. savings bonds purchased after 1989 to pay for higher education expenses?  | =                 | Н             |  |  |  |
| 22     | Did you incur any moving expenses? If <b>yes</b> , attach details.  | =                 | Н             |  |  |  |
| 23     | Did you receive any income not included in this Tax Organizer?  | . Ш               | Ш             |  |  |  |
| 24     | Do you expect your income and deductions in 2024 to be the same as 2023 ?   |                   |               |  |  |  |
| ~=     | If <b>no</b> , attach explanation of changes expected.  |                   |               |  |  |  |
|        | Did you receive Form 1095-A (Health Insurance Marketplace Statement)? If so, please attach  |                   | H             |  |  |  |
|        | a Did you obtain a Paycheck Protection Program (PPP) loan?  |                   | H             |  |  |  |
| _,     | <b>b</b> If yes, has any portion of that loan been forgiven?  | H                 | H             |  |  |  |
| 28     |   |                   |               |  |  |  |
|        | If you paid any alimony, enter recipient's SSN:  Enter your state of residence  |                   |               |  |  |  |
|        | Do you want to change the language with which the IRS communicates with you?  | $\overline{}$     | $\overline{}$ |  |  |  |
|        | of yes, which language?   |                   |               |  |  |  |
| ilec   | tronic Filing and Direct Deposit of Refund ur tax return is eligible for Electronic Filing, would you like to file electronically?  | Yes               | No            |  |  |  |
| -      | Internal Revenue Service is able to deposit many refunds directly into taxpayers' accounts.   | ' Ш               |               |  |  |  |
| f yo   | u receive a refund, would you like direct deposit?  | . 🔲               |               |  |  |  |
|        | s, please provide a voided check (not a deposit slip) if your bank account information has changed.  t type of account is this?   | avings            |               |  |  |  |
| vna    | t type of account is triis?   |                   |               |  |  |  |
| sti    | mated Tax Paid<br>Federal State Local   |                   |               |  |  |  |
|        | Date         Amount         Date         Amount         ID         Date         Amount  | $\Box$            | ID            |  |  |  |
|        |   | $\longrightarrow$ |               |  |  |  |
|        |   | $\rightarrow$     |               |  |  |  |
|        |   | $\dashv$          |               |  |  |  |
| _      | P   |                   |               |  |  |  |
| 4d(    | litional Information (Enter any additional information here and attach any documents.)  |                   |               |  |  |  |
|        |   |                   |               |  |  |  |
|        |   |                   |               |  |  |  |
| _      |   |                   |               |  |  |  |