



This Product Contains Sensitive Taxpayer Data

Wage and Income Transcript

Request Date: 02-14-2024
Response Date: 02-14-2024
Tracking Number: 105547414791

SSN Provided: 537-88-8994
Tax Period Requested: December, 2019

Form W-2 Wage and Tax Statement

Employer:

Employer Identification Number (EIN): 930798201
FRED MEYER STORES, INC.
1014 VINE STREET
CINCINNATI, OH 45202-1100

Employee:

Employee's Social Security Number: 537-88-8994
JENNIFER RHODES
5817 65TH AVE NE
MARYSVILLE, WA 98270-0000

Submission Type:	Original document
Wages, Tips and Other Compensation:	\$58,130.00
Federal Income Tax Withheld:	\$752.00
Social Security Wages:	\$58,130.00
Social Security Tax Withheld:	\$3,604.00
Medicare Wages and Tips:	\$58,130.00
Medicare Tax Withheld:	\$842.00
Social Security Tips:	\$0.00
Allocated Tips:	\$0.00
Dependent Care Benefits:	\$0.00
Deferred Compensation:	\$0.00
Code "Q" Nontaxable Combat Pay:	\$0.00
Code "W" Employer Contributions to a Health Savings Account:	\$1,000.00
Code "Y" Deferrals under a section 409A nonqualified Deferred Compensation plan:	\$0.00
Code "Z" Income under section 409A on a nonqualified Deferred Compensation plan:	\$0.00
Code "R" Employer's Contribution to MSA:	\$0.00

Code "S" Employer's Contribution to Simple Account:	\$0.00
Code "T" Expenses Incurred for Qualified Adoptions:	\$0.00
Code "V" Income from exercise of non-statutory stock options:	\$0.00
Code "AA" Designated Roth Contributions under a Section 401(k) Plan:	\$0.00
Code "BB" Designated Roth Contributions under a Section 403(b) Plan:	\$0.00
Code "DD" Cost of Employer-Sponsored Health Coverage:	\$3,633.00
Code "EE" Designated ROTH Contributions Under a Governmental Section 457(b) Plan:	\$0.00
Code "FF" Permitted benefits under a qualified small employer health reimbursement arrangement:	\$0.00
Code "GG" Income from Qualified Equity Grants Under Section 83(i):	\$0.00
Code "HH" Aggregate Deferrals Under Section 83(i) Elections as of the Close of the Calendar Year:	\$0.00
Third Party Sick Pay Indicator:	Unanswered
Retirement Plan Indicator:	Yes - retirement plan
Statutory Employee:	Not Statutory Employee
W2 Submission Type:	Original
W2 WHC SSN Validation Code:	Correct SSN

Form 5498 SA

Trustee:

Trustee's Federal Identification Number (FIN):941687665
 BANK OF AMERICA, N.A.
 C/O HEALTH ACCOUNT SERVICES
 PO BOX 2203
 FARGO, ND 58108-0000

Participant:

Participant's Identification Number: 537-88-8994
 JENNIFER RHODES
 5817 65TH AVE NE
 MARYSVILLE, WA 98270-0000

Submission Type:	Original document
Account Number (Optional):	K6301000010000245123
MSA Contributions:	\$0.00
Current Contributions:	\$1,000.00
Future Contributions:	\$0.00
Rollover MSA Contributions:	\$0.00
MSA Fair Market Value:	\$125.00
HSA Indicator:	HSA Box Checked
Archer MSA Indicator:	Archer MSA Box Not Checked
MA MSA Indicator:	Not Checked

Form W-2G

Payer:

Payer's Federal Identification Number (FIN):911554468
 TULALIP GAMING ORGANIZATION
 10200 QUIL CEDA BLVD
 TULALIP, WA 98271-0000

Winner:

Winner's Taxpayer Identification Number (TIN): 537-88-8994
 RHODES JENNIFER LYNN
 5817 65TH AVE NE
 MARYSVILLE, WA 98270-0000

Submission Type:	Original document
Gross Winnings:	\$1,500.00
Federal Income Tax Withheld:	\$0.00
Type of Wager:	Slot Machines
Date Won:	10-19-2019
Winnings from Identical Wagers:	\$0.00

Form W-2G**Payer:**

Payer's Federal Identification Number (FIN):911554468
 TULALIP GAMING ORGANIZATION
 10200 QUIL CEDA BLVD
 TULALIP, WA 98271-0000

Winner:

Winner's Taxpayer Identification Number (TIN): 537-88-8994
 RHODES JENNIFER LYNN
 5817 65TH AVE NE
 MARYSVILLE, WA 98270-0000

Submission Type:	Original document
Gross Winnings:	\$1,743.00
Federal Income Tax Withheld:	\$0.00
Type of Wager:	Slot Machines
Date Won:	08-10-2019
Winnings from Identical Wagers:	\$0.00

Form W-2G**Payer:**

Payer's Federal Identification Number (FIN):911554468
 TULALIP GAMING ORGANIZATION
 10200 QUIL CEDA BLVD
 TULALIP, WA 98271-0000

Winner:

Winner's Taxpayer Identification Number (TIN): 537-88-8994

RHODES JENNIFER LYNN

5817 65TH AVE NE

MARYSVILLE, WA 98270-0000

Submission Type:	Original document
Gross Winnings:	\$2,028.00
Federal Income Tax Withheld:	\$0.00
Type of Wager:	Slot Machines
Date Won:	03-10-2019
Winnings from Identical Wagers:	\$0.00

Form 1098-E Student Loan Interest Statement

Recipient/Lender:

Recipient's Federal Identification Number (FIN):521198289

U.S. DEPARTMENT OF EDUCATION

PO BOX 9635

WILKES-BARRE, PA 18773-9635

Borrower:

Borrower's Social Security Number: 537-88-8994

RHODES JENNIFER L

5817 65TH AVE NE

MARYSVILLE, WA 98270-9517

Submission Type:	Original document
Account Number (Optional):	5378889941
Loan Origination Fees:	Not checked - does include loan origination fees and/or capitalized interest, and the loan was made before September 1, 2004
Student Loan Interest Received by Lender:	\$2,130.00

Form 1099-SA or 5498-SA

Payer:

Payer's Federal Identification Number (FIN):941687665

BANK OF AMERICA, N.A.

C/O HEALTH ACCOUNT SERVICES

PO BOX 2203

FARGO, ND 58108-0000

Recipient:

Recipient's Identification Number: 537-88-8994

JENNIFER RHODES

5817 65TH AVE NE

MARYSVILLE, WA 98270-0000

Submission Type:	Original document
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Account Number (Optional):	M3301000010000245123
MSA Distribution Code:	Normal Distribution
Earnings on Distributive Excess Contributions:	\$0.00
MSA Gross Distributions:	\$875.00
FMV On Date of Death:	\$0.00
HSA Indicator:	HSA Box Checked
Archer MSA Indicator:	Archer MSA Box Not Checked
MA MSA Indicator:	Not Checked

Form 1099-R Distributions from Pensions, Annuities, Retire or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.

Payer:

Payer's Federal Identification Number (FIN):232967229
 DELAWARE FUNDS BY MACQUARIE
 DELAWARE VALUE FUND CLASS A
 P.O. BOX 9876
 PROVIDENCE, RI 02940-8076

Recipient:

Recipient's Identification Number: 537-88-8994
 MATTHEW J STRINGER DECD
 JENNIFER RHODES BENE
 5817 65TH AVE NE
 MARYSVILLE, WA 98270-9517

Submission Type:	Original document
Account Number (Optional):	DWI41006804750456001
Distribution Code Value:	Death
Distribution Code:	4
Distribution Code Value:	Not significant
Distribution Code:	Blank
Tax Amount Undetermined Code:	Tax amount not determined
Total Distribution Code:	Total Distribution
First Year Roth Contribution:	0000
SEP Indicator:	IRA/SEP/SIMP box checked
FATCA Indicator:	not FATCA
Date of Payment for Reportable Death Benefits under Section 6050Y:	00-00-0000
Tax Withheld:	\$0.00
Total Employee Contributions:	\$0.00
Unrealized Appreciation:	\$0.00
Other Income:	\$0.00
Gross Distribution:	\$21.00
Taxable Amount:	\$21.00
Eligible Capital Gains:	\$0.00
Amount to IRR:	\$0.00

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