



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, 2021

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:	\$63,210.00
Federal Income Tax Withheld:	\$1,236.00
Social Security Wages:	\$63,210.00
Social Security Tax Withheld:	\$3,919.00
Medicare Wages and Tips:	\$63,210.00
Medicare Tax Withheld:	\$916.00
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:	\$7,266.00
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:	\$112.00
HSA Indicator:	HSA Box Not Checked
Archer MSA Indicator:	Archer MSA Box Not Checked
MA MSA Indicator:	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:	\$1,243.00
Federal Income Tax Withheld:	\$0.00
Type of Wager:	Slot Machines
Date Won:	01-17-2021
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:	\$1,469.00
Federal Income Tax Withheld:	\$0.00
Type of Wager:	Slot Machines
Date Won:	11-29-2021
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:	\$1,488.00
Federal Income Tax Withheld:	\$0.00
Type of Wager:	Slot Machines
Date Won:	10-15-2021
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:	\$1,802.00
Federal Income Tax Withheld:	\$0.00
Type of Wager:	Slot Machines
Date Won:	06-21-2021
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
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Gross Winnings:	\$2,247.00
Federal Income Tax Withheld:	\$0.00
Type of Wager:	Slot Machines
Date Won:	02-02-2021
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:	\$2,284.00
Federal Income Tax Withheld:	\$0.00
Type of Wager:	Slot Machines
Date Won:	01-14-2021
Winnings from Identical Wagers:	\$0.00

Form 1098 Mortgage Interest Statement

Recipient/Lender:

Recipient's Federal Identification Number (FIN):383931971
NEWREZ LLC DBA SHELLPOINT MORTGAGE
SERVICING
PO BOX 10826
GREENVILLE, SC 29603-0826

Payer/Borrower:

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

Submission Type:	Original document
Account Number (Optional):	0675240329
Mortgage Interest Received from Payer(s)/Borrower(s):	\$909.00
Points Paid on Purchase of Principal Residence:	\$0.00
Refund of Overpaid Interest:	\$0.00
Mortgage Insurance Premiums:	\$257.00

Outstanding Mortgage Principle:	\$396,825.00
Mortgage Origination Date:	10-25-2021
Property Address Verification:	
Address of property securing Mortgage:	5817 65TH AVE NE MARYSVILLE WA 98270
Other information from recipient:	
The number of mortgaged properties:	000000000000
Mortgage Acquisition Date:	11-11-2021

Form 1098 Mortgage Interest Statement

Recipient/Lender:

Recipient's Federal Identification Number (FIN):954866828
 AMERICAN FINANCIAL NETWORK INC
 10 POINTE DRIVE
 BREA, CA 92821-0000

Payer/Borrower:

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

Submission Type:	Original document
Account Number (Optional):	6004746487
Mortgage Interest Received from Payer(s)/Borrower(s):	\$89.00
Points Paid on Purchase of Principal Residence:	\$0.00
Refund of Overpaid Interest:	\$0.00
Mortgage Insurance Premiums:	\$6,825.00
Outstanding Mortgage Principle:	\$396,825.00
Mortgage Origination Date:	10-29-2021
Property Address Verification:	
Address of property securing Mortgage:	5817 65TH AVE NE, MARYSVILLE, WA 98270
Other information from recipient:	
The number of mortgaged properties:	000000000000
Mortgage Acquisition Date:	00-00-0000

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
Account Number (Optional):	M3301000010000245123
MSA Distribution Code:	Normal Distribution
Earnings on Distributive Excess Contributions:	\$0.00
MSA Gross Distributions:	\$1,012.00
FMV On Date of Death:	\$0.00
HSA Indicator:	HSA Box Not Checked
Archer MSA Indicator:	Archer MSA Box Not Checked
MA MSA Indicator:	Checked

This Product Contains Sensitive Taxpayer Data