



This Product Contains Sensitive Taxpayer Data

Wage and Income Transcript

Request Date: 02-14-2024
Response Date: 02-14-2024
Tracking Number: 105547258360

SSN Provided: 249-82-6362
Tax Period Requested: December, 2017

Form W-2 Wage and Tax Statement

Employer:

Employer Identification Number (EIN): 680128848
FAIRFIELD SUISUN UNIFIED SCHOOL DIS
2490 HILBORN ROAD
FAIRFIELD, CA 94534-4534

Employee:

Employee's Social Security Number: 249-82-6362
LEANN J LYTTLE
3700 LYON ROAD #23
FAIRFIELD, CA 94534-0000

Submission Type:	Original document
Wages, Tips and Other Compensation:	\$47,372.00
Federal Income Tax Withheld:	\$5,079.00
Social Security Wages:	\$50,893.00
Social Security Tax Withheld:	\$3,155.00
Medicare Wages and Tips:	\$50,893.00
Medicare Tax Withheld:	\$737.00
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:	\$0.00
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:	\$10,161.00
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
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 Individual Retirement Arrangement Contribution Information

Trustee:

Trustee/Issuer's Federal Identification Number (FIN):132967453
 APEX CLEARING
 ONE DALLAS CENTER
 DALLAS, TX 75201-0000

Participant:

Participant's Identification Number: 249-82-6362
 LEANN LYTLE
 3700 LYON RD APT 23
 FAIRFIELD, CA 94534-0000

Submission Type:	Original document
Account Number (Optional):	7SZ10145763906962
IRA Contributions:	\$0.00
Rollover Contributions:	\$0.00
Roth Conversion Amount:	\$0.00
Recharacterized Contributions:	\$0.00
Fair Market Value of Account:	\$15.00
Life Insurance Cost Included in Box 1:	\$0.00
SEP Code:	Not Checked
IRA Code:	Not Checked
Simple Code:	Not Checked
Roth IRA Code:	Checked
RMD For Subsequent Year:	RMD box not checked
RMD Date:	00-00-0000
Year:	
Postponed Contribution Code:	
Repayments Code:	
Fair Market Value of certain specified assets:	N/A

SEP Contributions:	\$0.00
SIMPLE Contributions:	\$0.00
Roth IRA Contributions:	\$15.00
Required Minimum Distribution Amount:	\$0.00
Postponed Contributions:	\$0.00
Repayment of a qualified reservist distribution or federally designated disaster withdrawal repayment:	\$0.00
Fair Market Value of Certain Specified Assets:	\$0.00

Form 1099-G

Payer:

Payer's Federal Identification Number (FIN):680204061
 STATE OF CALIFORNIA
 FRANCHISE TAX BOARD P O BOX 942840
 SACRAMENTO, CA 94240-0040

Recipient:

Recipient's Identification Number: 249-82-6362
 LYTTLE LEANN J
 3700 LYON RD
 FAIRFIELD, CA 94534-7978

Submission Type:	Original document
Account Number (Optional):	249826362A
RTAA Payments:	\$0.00
Tax Withheld:	\$0.00
Taxable Grants:	\$0.00
Unemployment Compensation:	\$0.00
Agricultural Subsidies:	\$0.00
Prior Year Refund:	\$61.00
Market gain on Commodity Credit Corporation loans repaid:	\$0.00
Year of Refund:	2016
1099G Offset:	Not Refund, Credit, or Offset for Trade or Business

This Product Contains Sensitive Taxpayer Data