

**Employee's Withholding Certificate**

**2021**

▶ Complete Form W-4 so that your employer can withhold the correct federal income tax from your pay.  
▶ Give Form W-4 to your employer.  
▶ Your withholding is subject to review by the IRS.

<b>Step 1:</b> <b>Enter Personal Information</b>	(a) First name and middle initial <b>Ryan P.</b>	Last name <b>Klinger</b>	(b) Social security number
	Address <b>315 Basin ST NW</b>		▶ Does your name match the name on your social security card? If not, to ensure you get credit for your earnings, contact SSA at 800-772-1213 or go to <a href="http://www.ssa.gov">www.ssa.gov</a> .
	City or town, state, and ZIP code <b>Ephrata WA 98823</b>		
	(c) <input checked="" type="checkbox"/> Single or Married filing separately <input type="checkbox"/> Married filing jointly or Qualifying widow(er) <input type="checkbox"/> Head of household (Check only if you're unmarried and pay more than half the costs of keeping up a home for yourself and a qualifying individual.)		

Complete Steps 2-4 ONLY if they apply to you; otherwise, skip to Step 5. See page 2 for more information on each step, who can claim exemption from withholding, when to use the estimator at [www.irs.gov/W4App](http://www.irs.gov/W4App), and privacy.

**Step 2:** Complete this step if you (1) hold more than one job at a time, or (2) are married filing jointly and your spouse also works. The correct amount of withholding depends on income earned from all of these jobs.

**Multiple Jobs or Spouse Works**

Do only one of the following:

- (a) Use the estimator at [www.irs.gov/W4App](http://www.irs.gov/W4App) for most accurate withholding for this step (and Steps 3-4); or
- (b) Use the Multiple Jobs Worksheet on page 3 and enter the result in Step 4(c) below for roughly accurate withholding; or
- (c) If there are only two jobs total, you may check this box. Do the same on Form W-4 for the other job. This option is accurate for jobs with similar pay; otherwise, more tax than necessary may be withheld.

**TIP:** To be accurate, submit a 2021 Form W-4 for all other jobs. If you (or your spouse) have self-employment income, including as an independent contractor, use the estimator.

Complete Steps 3-4(b) on Form W-4 for only ONE of these jobs. Leave those steps blank for the other jobs. (Your withholding will be most accurate if you complete Steps 3-4(b) on the Form W-4 for the highest paying job.)

<b>Step 3:</b> <b>Claim Dependents</b>	If your total income will be \$200,000 or less (\$400,000 or less if married filing jointly):		
	Multiply the number of qualifying children under age 17 by \$2,000 ▶ \$ <u>0</u>		
	Multiply the number of other dependents by \$500 . . . . ▶ \$ <u>0</u>		
Add the amounts above and enter the total here . . . . .		<b>3</b>	\$ <u>0</u>
<b>Step 4 (optional):</b> <b>Other Adjustments</b>	(a) <b>Other income (not from jobs).</b> If you want tax withheld for other income you expect this year that won't have withholding, enter the amount of other income here. This may include interest, dividends, and retirement income . . . . .	<b>4(a)</b>	\$
	(b) <b>Deductions.</b> If you expect to claim deductions other than the standard deduction and want to reduce your withholding, use the Deductions Worksheet on page 3 and enter the result here . . . . .	<b>4(b)</b>	\$
	(c) <b>Extra withholding.</b> Enter any additional tax you want withheld each pay period . . . . .	<b>4(c)</b>	\$

**Step 5:** Under penalties of perjury, I declare that this certificate, to the best of my knowledge and belief, is true, correct, and complete.

**Sign Here**

▶ Ryan Klinger ▶ 7/26/2021  
Employee's signature (This form is not valid unless you sign it.) Date

<b>Employers Only</b>	Employer's name and address <b>RIMROCK MEADOWS PO BOX 1195 EPHRATA, WA 98823</b>	First date of employment	Employer identification number (EIN) <b>91-1795045</b>



**Employment Eligibility Verification**  
 Department of Homeland Security  
 U.S. Citizenship and Immigration Services

**USCIS**  
**Form I-9**  
 OMB No. 1615-0047  
 Expires 10/31/2022

**▶ START HERE: Read instructions carefully before completing this form. The instructions must be available, either in paper or electronically, during completion of this form. Employers are liable for errors in the completion of this form.**

**ANTI-DISCRIMINATION NOTICE:** It is illegal to discriminate against work-authorized individuals. Employers **CANNOT** specify which document(s) an employee may present to establish employment authorization and identity. The refusal to hire or continue to employ an individual because the documentation presented has a future expiration date may also constitute illegal discrimination.

**Section 1. Employee Information and Attestation** (Employees must complete and sign Section 1 of Form I-9 no later than the first day of employment, but not before accepting a job offer.)

Last Name (Family Name) <b>Klinger</b>		First Name (Given Name) <b>Ryan</b>		Middle Initial <b>P</b>	Other Last Names Used (if any)	
Address (Street Number and Name) <b>315 basin ST NW</b>			Apt. Number	City or Town <b>Elkhart</b>	State <b>WA</b>	ZIP Code <b>48823</b>
Date of Birth (mm/dd/yyyy) <b>03/18/2002</b>	U.S. Social Security Number <b>535-49-6461</b>		Employee's E-mail Address		Employee's Telephone Number <b>(509) 348-3852</b>	

I am aware that federal law provides for imprisonment and/or fines for false statements or use of false documents in connection with the completion of this form.

I attest, under penalty of perjury, that I am (check one of the following boxes):

<input checked="" type="checkbox"/> 1. A citizen of the United States	
<input type="checkbox"/> 2. A noncitizen national of the United States (See instructions)	
<input checked="" type="checkbox"/> 3. A lawful permanent resident (Alien Registration Number/USCIS Number): _____	
<input type="checkbox"/> 4. An alien authorized to work until (expiration date, if applicable, mm/dd/yyyy): _____ Some aliens may write "N/A" in the expiration date field. (See instructions)	
<p>Aliens authorized to work must provide only one of the following document numbers to complete Form I-9:          An Alien Registration Number/USCIS Number OR Form I-94 Admission Number OR Foreign Passport Number.</p> <p>1. Alien Registration Number/USCIS Number: _____  <b>OR</b>          2. Form I-94 Admission Number: _____  <b>OR</b>          3. Foreign Passport Number: _____          Country of issuance: _____</p>	<p align="center">OR Code - Section 1          Do Not Write In This Space</p>

Signature of Employee <b>Ryan Klinger</b>	Today's Date (mm/dd/yyyy) <b>7/26/21</b>
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**Preparer and/or Translator Certification (check one):**  
 I did not use a preparer or translator.  A preparer(s) and/or translator(s) assisted the employee in completing Section 1.  
 (Fields below must be completed and signed when preparers and/or translators assist an employee in completing Section 1.)

I attest, under penalty of perjury, that I have assisted in the completion of Section 1 of this form and that to the best of my knowledge the information is true and correct.

Signature of Preparer or Translator		Today's Date (mm/dd/yyyy)	
Last Name (Family Name)		First Name (Given Name)	
Address (Street Number and Name)		City or Town	State ZIP Code

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**Employment Eligibility Verification**  
 Department of Homeland Security  
 U.S. Citizenship and Immigration Services

**USCIS**  
**Form I-9**  
 OMB No. 1615-0047  
 Expires 10/31/2022

**Section 2. Employer or Authorized Representative Review and Verification**

*(Employers or their authorized representative must complete and sign Section 2 within 3 business days of the employee's first day of employment. You must physically examine one document from List A OR a combination of one document from List B and one document from List C as listed on the "Lists of Acceptable Documents.")*

Employee Info from Section 1	Last Name (Family Name)	First Name (Given Name)	M.I.	Citizenship/Immigration Status
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List A OR List B AND List C  
 Identity and Employment Authorization Identity Employment Authorization

Document Title	Document Title	Document Title
Issuing Authority	Issuing Authority	Issuing Authority
Document Number	Document Number	Document Number
Expiration Date (if any) (mm/dd/yyyy)	Expiration Date (if any) (mm/dd/yyyy)	Expiration Date (if any) (mm/dd/yyyy)
Document Title	Additional Information	QR Code - Sections 2 & 3 Do Not Write In This Space
Issuing Authority		
Document Number		
Expiration Date (if any) (mm/dd/yyyy)		
Document Title		
Issuing Authority		
Document Number		
Expiration Date (if any) (mm/dd/yyyy)		

**Certification:** I attest, under penalty of perjury, that (1) I have examined the document(s) presented by the above-named employee, (2) the above-listed document(s) appear to be genuine and to relate to the employee named, and (3) to the best of my knowledge the employee is authorized to work in the United States.

The employee's first day of employment (mm/dd/yyyy): 07/26/21 (See instructions for exemptions)

Signature of Employer or Authorized Representative <i>Ryan Kinsler</i>	Today's Date (mm/dd/yyyy) <u>7/26/21</u>	Title of Employer or Authorized Representative MANAGER
Last Name of Employer or Authorized Representative ORTIZ	First Name of Employer or Authorized Representative JOSE	Employer's Business or Organization Name RIMROCK MEADOWS
Employer's Business or Organization Address (Street Number and Name) PO BOX 1195	City or Town EPHRATA	State ZIP Code WA 98823

**Section 3. Reverification and Rehires (To be completed and signed by employer or authorized representative.)**

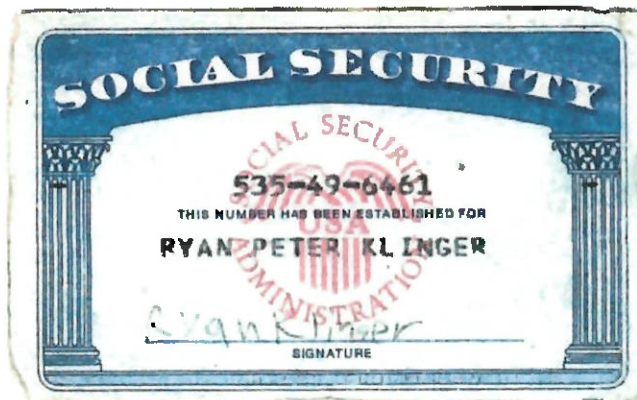
A. New Name (if applicable)			B. Date of Rehire (if applicable)	
Last Name (Family Name)	First Name (Given Name)	Middle Initial	Date (mm/dd/yyyy)	

**C.** If the employee's previous grant of employment authorization has expired, provide the information for the document or receipt that establishes continuing employment authorization in the space provided below.

Document Title	Document Number	Expiration Date (if any) (mm/dd/yyyy)
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I attest, under penalty of perjury, that to the best of my knowledge, this employee is authorized to work in the United States, and if the employee presented document(s), the document(s) I have examined appear to be genuine and to relate to the individual.

Signature of Employer or Authorized Representative	Today's Date (mm/dd/yyyy)	Name of Employer or Authorized Representative
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**SEASONAL LABORER EMPLOYMENT AGREEMENT  
BETWEEN RIMROCK MEADOWS ASSOCIATION  
AND RYAN PETER KLINGER**

**1. Preamble.** Seasonal Laborer Employment Agreement made between Rimrock Meadows Association, a Washington Nonprofit Corporation, herein "RRM", and Ryan Peter Klinger, herein Seasonal Laborer, effective the 11<sup>th</sup> day of May 2021.

**2. Employment and Appointment as Seasonal Laborer.** For the term and duration of this Seasonal Laborer Employment Agreement, herein this Agreement, RRM employs and appoints Ryan Peter Klinger as the Seasonal Laborer of the RRM and Ryan Peter Klinger accepts said employment and appointment, subject to and in accordance with the terms and conditions of this Agreement.

**3. Seasonal Laborer's Duties.** For the term and duration of this Agreement, Seasonal Laborer shall be authorized and required to perform the following duties as the Seasonal Laborer of RRM: 1) To perform general maintenance and environmental services of RRM as directed by and in coordination with the General Manager; 2) Help maintain pool and its surrounds in accordance with established health district practices; 3) Clean, repair, maintain, replace, etc. the buildings, grounds, and equipment owned by RRM; 4) To perform both routine and emergency road maintenance; 5) Maintain Horseshoe Park such that it remains clean and functional; 6) Assist the Camp Hosts as appropriate, including but not limited to recording and monitoring members and guests staying in campground; 7) Assist in the enforcement of rules; 8) Treat all members and guests courteously and with respect; 9) Communicate wants and needs to the General Manager; 10) To perform security and concierge services for RRM property and members; 11) To prepare and submit to the General Manager any such reports as may be required by the Manager, or Manager may deem it advisable to submit; 12) To keep the General Manager fully advised of the condition of all RRM systems and property and their future needs and to ensure that RRM stays adequately maintained; 13) To assist in the performance of heating and cooling system repair and maintenance; 8) To assist in the performance of automatic watering system repair and maintenance 9) To assist in ensuring compliance with all RRM policies and procedures related to all aspects of the Seasonal Laborer responsibilities outlined herein; 11) To work directly with the Campground Host to record, monitor and charge guests for stays within Horseshoe Park; 12) To work directly under the supervision and direction of the General Manager; 13) To work directly with the General Manager and Campground Host in resolving any service issues regarding the property or members which may arise; 14) To perform such other Seasonal Laborer duties as directed by the RRM General Manager that may, at any time, be increased or decreased at his discretion and direction. Seasonal laborer shall fully comply with all governing documents of RRM and all policies, procedures, rules, regulations and directives adopted by the board, including those now in effect and those

adopted by the board in the future. Notwithstanding the foregoing, Seasonal Laborer shall not supervise any employee of RRM who is a relative of Seasonal Laborer or his spouse, including, but not limited to, children, siblings, parents, grandparents, aunts, uncles, and first cousins.

**4. Seasonal Laborer to Devote Full Time to RRM Business - Work Weeks and Hours - Holidays.** Except as otherwise provided below, Seasonal Laborer shall devote Seasonal Laborer's full time, attention and energies to the business of RRM and, during the term of this

SEASONAL LABORER EMPLOYMENT AGREEMENT PAGE 2 OF 5

Agreement, shall not be employed by or perform any labor or any business services for any person or entity associated with Rimrock Meadows other than Rimrock Meadows Association. Seasonal Laborer shall not engage in any other personal business activity on Rimrock Association property or with Rimrock Meadows members, regardless of whether such activity is pursued for profit, gain, or other pecuniary advantage. Notwithstanding the foregoing, Seasonal Laborer shall not be prevented from making personal investments in any business, as long as those investments do not create a conflict of interest for Seasonal Laborer under state law or require Seasonal Laborer to participate in the operation of the companies in which Seasonal Laborer invests. Seasonal Laborer shall be physically present and perform his required duties at the RRM property according to the schedule set by the General Manager, from 20 to 40 hours per week. Except for any week in which the Seasonal Laborer takes authorized leave, Seasonal laborer will be expected to work all legal holidays falling within any work week and will be paid only for hours worked except when sick or civic duty leave is allowed to be taken or when comp time approved by the GM is authorized by the GM to be used.

**5. Office and Equipment.** RRM shall furnish Seasonal Laborer with all essential and necessary equipment and provide said equipment in the RRM budget as is reasonably required to assist Seasonal Laborer in the performance of the duties listed herein.

**6. Term of Agreement, Employment and Appointment - Cessation of Benefits.** Unless earlier terminated pursuant to the provisions of this Agreement, Seasonal Laborer's employment and appointment as the Seasonal Laborer of RRM and this Agreement shall begin on May 11, 2021, and shall end on November 15, 2021. The General Manager shall endeavor to give the Seasonal Laborer one performance evaluation during the term of this Agreement. All employment benefits of Seasonal Laborer under this Agreement and the personnel policies of RRM will automatically cease upon the termination of this Agreement and Seasonal Laborer's employment and appointment as the Seasonal Laborer of RRM.

**7. Compensation and Benefits.**

**7.1 Hourly Wage.** During the term of this Agreement, RRM shall pay Seasonal Laborer an hourly wage in the amount of Fourteen dollars and fifty cents (\$14.50) per hour, minus mandatory withholdings required by federal or state law, including, but not limited to, federal income taxes, Medicare, social security, unemployment premiums, and worker's compensation premiums, payable bi-weekly (every other week).

Seasonal Laborer's compensation may be reviewed by the General Manager and the RRM Board from time to time during the term of this Agreement and may be adjusted for performance during the term of this Agreement at the sole discretion of the RRM Board.

**7.2 Insurance.** Seasonal Laborer shall not be eligible for nor receive any insurance benefits.

**7.3 Reimbursement of Expenses.** Seasonal Laborer shall be reimbursed for expenses incurred on General Manager approved RRM business. That reimbursement shall be consistent with local, state and federal laws, rules and regulations, any rules or procedures imposed by the Board and all RRM travel and reimbursement policies and resolutions adopted by the Board.

**7.4 Personal Leave, Sick Leave and Civic Duty Leave.** SEASONAL LABORER EMPLOYMENT

The Seasonal Laborer shall have paid civic duty leave for jury duty and any court proceedings or depositions that Seasonal Laborer is obligated or required to attend by summons, subpoena, or applicable law except private court proceedings initiated or defended by Seasonal Laborer and unrelated to RRM or its business or operations.

In addition to the civic duty leave, the Seasonal Laborer shall accrue sick leave at the rate of 1 hour per 40 hours worked over the term of this contract. The Seasonal Laborer shall not accrue or be entitled to receive any type of leave except the, civic duty leave, and sick leave described in this section. If Seasonal Laborer qualifies to use sick leave when a sick leave request is made by him, the Seasonal Laborer must use sick leave before any unpaid leave. If the Seasonal Laborer separates from service with RRM before he utilizes all accrued sick leave, said accrued sick leave shall terminate on the separation of service date and shall not be cashed out by RRM.

The Seasonal Laborer acknowledges and agrees no personal leave has been acquired by him nor is due to him from RRM from any employment at RRM preceding his hiring as the Seasonal Laborer of RRM. Any unused sick leave earned during 2020 will roll over into the sick leave bank for the following year should the Seasonal Laborer be hired into this position repeatedly in successive years.

## **8. Termination of Agreement and Employment and Appointment.**

### **8.1 Termination by RRM.**

**8.1.1 Termination for Lost Confidence:** If, at any time the RRM Board of Directors passes a motion indicating the Board has lost confidence in Seasonal Laborer, this Agreement and Seasonal Laborer's employment and appointment as the Seasonal Laborer of RRM shall immediately terminate upon the passage of the lost confidence motion. Following said termination, Seasonal Laborer shall be entitled to receive from RRM: (1) any earned, but yet unpaid, hourly wages, minus withholdings required by law for the time the Seasonal Laborer works after the lost confidence motion was passed by the RRM Board Directors, per normal payroll protocols; Except as otherwise provided above in this section, Seasonal Laborer shall not be entitled to receive from RRM and RRM shall not be required to pay to Seasonal Laborer any wages or other compensation following the termination of this Agreement and Seasonal Laborer's employment and appointment as the Seasonal Laborer of RRM under this section.

**8.1.2 Termination for Convenience - Anytime:** Notwithstanding the foregoing, the General Manager and RRM Board of Directors may also terminate this Agreement and Seasonal Laborer's employment and appointment as the Seasonal Laborer of RRM at any time. If the Board or General Manager elects to terminate this Agreement and Seasonal Laborer's employment and appointment as the Seasonal Laborer of RRM shall terminate on the date specified when notice is given, as early as the same date such notice is given. Following said termination, Seasonal Laborer shall be entitled to receive from RRM: (1) any earned, but yet unpaid, hourly wages, minus withholdings required by law, for the month in which the termination was communicated; by the end of said month. Except as otherwise provided above in this section, Seasonal Laborer shall not be entitled to receive from RRM and RRM shall not be required to pay to Seasonal Laborer any wages or other compensation following the termination of this Agreement and Seasonal Laborer's employment and appointment as the Seasonal Laborer of RRM under this section.



**9. Miscellaneous Provisions.**

**9.1 Indemnity.** RRM shall indemnify Seasonal Laborer and hold Seasonal Laborer harmless for all acts and decisions made by Seasonal Laborer in good faith while performing services for RRM or his duties under this Agreement. Provided, this indemnification shall not extend to any act done in violation of the law or any policy, resolution, or bylaw of the RRM. Provided further, this indemnification shall not extend to any claim made by RRM against Seasonal Laborer as a result of Seasonal Laborer's actions or omissions during the term of this Agreement or to any claim made by Seasonal Laborer against RRM.

**9.2 Governing Law.** This Agreement shall be governed by and construed in accordance with the laws of the state of Washington.

**9.3 Entire Agreement.** This Agreement constitutes the entire understanding of RRM and Seasonal Laborer with respect to its subject matter, supersedes any prior agreement or arrangement relative to Seasonal Laborer's employment as the Seasonal Laborer of RRM, and no modification, supplement, or amendment of any provision hereof shall be valid unless made in writing and signed by the parties.

**9.4 Arbitration of Controversies.** Any claim or controversy that arises out of or relates to this Agreement, or the breach of it, will be settled by arbitration in Douglas County, Washington in accordance with the rules then obtaining of the American Arbitration Association. Judgment upon the award rendered may be entered in the Superior Court of Washington for Douglas County.

**9.5 Waiver of Breach of Agreement.** If either party waives a breach of this Agreement by the other party, that waiver will not operate or be construed as a waiver of later similar breaches.

**9.6 Captions.** The captions set forth in this Agreement are for convenience only and shall not be considered as part of this Agreement or as in any way limiting or amplifying the terms and conditions hereof.

**9.7 Notices.** Any notices given hereunder shall be in writing and either be delivered or mailed by registered or certified mail, return receipt requested, postage prepaid, in the U.S. Mail, as follows:

(a) if to RRM: Ava K Linger  
315 Basistown

Elmhurst WA  
(b) if to Seasonal Laborer: 48823

The notice shall be deemed effectively given on the date that the notice is delivered or the 3<sup>rd</sup> business day following the date that the properly addressed notice is placed in the U.S. Mail, postage prepaid, as provided above.

**9.8 Severability.** In the event that any court having jurisdiction shall determine that any covenant or other provision contained in this Agreement shall be unreasonable or unenforceable in any respect, then such covenant or other provisions shall be deemed limited to the extent that such other court deems it reasonable or enforceable, and as so limited shall remain in full force and effect. In the event that such court shall deem any such covenant or other provision wholly unenforceable, the remaining covenants and other provisions of this Agreement shall nevertheless remain in full force and effect.

**9.9 Counterparts.** More than one counterpart of this Agreement may be executed by the parties hereto, and each fully executed counterpart shall be deemed an original.

**9.10 Employee Benefits.** This Agreement shall not be construed to be in lieu of or to the exclusion of any other rights, benefits and privileges to which Seasonal Laborer may be entitled as an employee of RRM and under federal or state law, including, but not limited to, worker's compensation benefits, disability benefits, and unemployment benefits.

The parties hereto have executed this Agreement to be effective on July 26, 2021

Ryan Klinger Date: 7/26/21  
Ryan Peter Klinger

Rimrock Meadows Association  
By: [Signature] Date: 7/26/2021  
Jose A. Ortiz General Manager