

OMB# 1545-0008

COPY 2 - To Be Filed With Employee's State, City, or Local Income Tax Return

1 Wages, tips, other compensation 24000.00		2 Federal income tax withheld 240.00	
3 Social security wages 24000.00		4 Social security tax withheld 1488.00	
a Employee's social security number 594-94-8342	5 Medicare wages and tips 24000.00	6 Medicare tax withheld 348.00	
c Employer's name, address, and ZIP code DOM LAW, PA 1814 N 15TH ST TAMPA FL 33605			
e Employee's name DOMENICK G LAZZARA 5805 S. HUBERT AVE. TAMPA FL 33616			
f Employee's address and ZIP code		9	12a \$
b Employer identification number (EIN) 81-3489484	10 Dependent care benefits	12b \$	
7 Social security tips	11 Nonqualified plans	12c \$	
8 Allocated tips	14 Other	12d \$	
13 Statutory employee Retirement plan Third-party sick pay		12e \$	
15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax

18 Local wages, tips, etc.		19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2020 Department of the Treasury-Internal Revenue Service 594948342000983110

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1 Wages, tips, other compensation 24000.00		2 Federal income tax withheld 240.00	
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e Employee's name DOMENICK G LAZZARA 5805 S. HUBERT AVE. TAMPA FL 33616			
f Employee's address and ZIP code		9	12a \$
b Employer identification number (EIN) 81-3489484	10 Dependent care benefits	12b \$	
7 Social security tips	11 Nonqualified plans	12c \$	
8 Allocated tips	14 Other	12d \$	
13 Statutory employee Retirement plan Third-party sick pay		12e \$	
15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax

18 Local wages, tips, etc.		19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2020 Department of the Treasury-Internal Revenue Service

OMB# 1545-0008

COPY B - To Be Filed With Employee's FEDERAL Tax Return.
This information is being furnished to the Internal Revenue Service.

1 Wages, tips, other compensation 24000.00		2 Federal income tax withheld 240.00	
3 Social security wages 24000.00		4 Social security tax withheld 1488.00	
a Employee's social security number 594-94-8342	5 Medicare wages and tips 24000.00	6 Medicare tax withheld 348.00	
c Employer's name, address, and ZIP code DOM LAW, PA 1814 N 15TH ST TAMPA FL 33605			
e Employee's name DOMENICK G LAZZARA 5805 S. HUBERT AVE. TAMPA FL 33616			
f Employee's address and ZIP code		9	12a See instructions for box 12 \$
b Employer identification number (EIN) 81-3489484	10 Dependent care benefits	12b \$	
7 Social security tips	11 Nonqualified plans	12c \$	
8 Allocated tips	14 Other	12d \$	
13 Statutory employee Retirement plan Third-party sick pay		12e \$	
15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax

18 Local wages, tips, etc.		19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2020 Department of the Treasury-Internal Revenue Service

OMB# 1545-0008

COPY C - For EMPLOYEE'S RECORDS (See Notice to Employee on the back of Copy B.)

1 Wages, tips, other compensation 24000.00		2 Federal income tax withheld 240.00	
3 Social security wages 24000.00		4 Social security tax withheld 1488.00	
a Employee's social security number 594-94-8342	5 Medicare wages and tips 24000.00	6 Medicare tax withheld 348.00	
c Employer's name, address, and ZIP code DOM LAW, PA 1814 N 15TH ST TAMPA FL 33605			
e Employee's name DOMENICK G LAZZARA 5805 S. HUBERT AVE. TAMPA FL 33616			
f Employee's address and ZIP code		9	12a See instructions for box 12 \$
b Employer identification number (EIN) 81-3489484	10 Dependent care benefits	12b \$	
7 Social security tips	11 Nonqualified plans	12c \$	
8 Allocated tips	14 Other	12d \$	
13 Statutory employee Retirement plan Third-party sick pay		12e \$	
15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax

18 Local wages, tips, etc.		19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2020 Department of the Treasury-Internal Revenue Service

Box 11. This amount is (a) reported in box 1 if it is a distribution made to you from a plan. Any amount over \$5,000 is also included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts. Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock options (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 cafeteria plan) to your health savings account. Report on Form 8880, Health Savings Accounts (HSAs).

Z—Deductions under a section 409A nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the instructions for Forms 1040 and 1040-SR.

AA—Designated Roth contributions under a section 401(k) plan.

BB—Designated Roth contributions under a section 403(b) plan.

DD—Cost of employer-sponsored health coverage. The amount reported with code **DD** is not taxable.

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement.

GG—Income from qualified equity grants under section 83(i) arrangement.

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year.

Box 12. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in Note. Keep Copy C of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help protect your social security benefits, keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 3. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.

Box 4. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in box 5, as well as the 0.9% Additional Medicare Tax on any of those wages and tips shown in box 5, or 7. For information on how to report tips on your tax return, see the instructions for Forms 1040 and 1040-SR.

Box 5. This amount is not included in box 1, 3, 5, or 7. For information on how to report tips on your tax return, see the instructions for Forms 1040 and 1040-SR.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in box 5, as well as the 0.9% Additional Medicare Tax on any of those wages and tips shown in box 5, or 7. For information on how to report tips on your tax return, see the instructions for Forms 1040 and 1040-SR.

Box 7. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in box 5, as well as the 0.9% Additional Medicare Tax on any of those wages and tips shown in box 5, or 7. For information on how to report tips on your tax return, see the instructions for Forms 1040 and 1040-SR.

Box 8. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in box 5, as well as the 0.9% Additional Medicare Tax on any of those wages and tips shown in box 5, or 7. For information on how to report tips on your tax return, see the instructions for Forms 1040 and 1040-SR.

Box 9. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in box 5, as well as the 0.9% Additional Medicare Tax on any of those wages and tips shown in box 5, or 7. For information on how to report tips on your tax return, see the instructions for Forms 1040 and 1040-SR.

Box 10. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in box 5, as well as the 0.9% Additional Medicare Tax on any of those wages and tips shown in box 5, or 7. For information on how to report tips on your tax return, see the instructions for Forms 1040 and 1040-SR.

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Notice to Employee

Do you have to file? You are required to file a tax return if you are eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of the credit is based on income and family size. Workers without children could qualify for a smaller credit. You can't take the EIC if your investment income is more than the specified amount for 2020 or if any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/eflc. See also Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Cherry and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your social security card; you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in box 12, using code DD, of the cost of employer-sponsored health coverage is for your information only. The amount reported with code DD is not taxable.

Credit for excess taxes. If you had more than one employer in 2020 and more than \$8,537 40 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than \$8,017 70 in Tier 2 RRTA tax was withheld, you may also be able to claim a credit. See the instructions for Forms 1040 and 1040-SR and Pub. 506, Tax Withholding and Estimated Tax.

DOMENICK G LAZZARA
5805 S. HUBBERT AVE.
TAMPA FL 33616-1106

0544129 01 AV 0.386 **AVALIC T4 1 2511 33616-110605 -C01-P4423A

IMPORTANT TAX DOCUMENT ENCLOSED



DOM LAW, PA
1814 N 15TH ST
TAMPA FL 33605

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