

City of Hamtramck Income Tax

Amended Individual Return for Year 20_____

PLEASE
PRINT
OR
TYPE

First Name and Initial (If joint return of husband and wife, use first names and middle initials of both)	Last Name	Your Social Security Number	If you are an EMPLOYER, enter your Federal EMPLOYER Identification No. here:
Home Address (Number and Street or Rural Route)		Your Occupation	
City, Town or Post Office State Postal Zip Code		Spouse's Social Security Number	
		Spouse's Occupation	

Please answer all questions, fill in applicable items, and explain changes on page 2.

Enter name and address used on original return (if same as above, write "Same"). If changing from separate to joint return, enter names and addresses used on original returns. (Note: You cannot change from joint to separate returns after the due date has passed for filing separate returns.)

THIS RETURN AMENDS PREVIOUSLY FILED RETURN FOR CALENDAR YEAR, 20 _____ OR FISCAL YEAR ENDED _____, 20 _____

Filing Status Claimed	RESIDENT	NONRESIDENT	SINGLE	MARRIED FILING JOINTLY	MARRIED FILING SEPARATELY
On original return	<input type="checkbox"/>				
On this return	<input type="checkbox"/>				

	A. As originally reported	B. Net Change (Increase or Decrease, explain on page 2)	C. Correct Amount
INCOME			
1. Total Income Subject to Tax			\$

	A.	B.	C.
TAX LIABILITY			
2. City of Hamtramck Tax			•

	A.	B.	C.
PAYMENTS AND CREDITS			
3. Total Hamtramck Tax Withheld			
4. Estimated Hamtramck Income Tax Payments			
5. Other Credits			
6. Amount paid with original return, plus additional payments made after it was filed →			
7. Total payments and credits — add lines 3 through 6, Column C			

	A.	B.	C.
REFUND OR BALANCE DUE			
8. Amount of refund received or requested on original return			
9. Net payments and credits — subtract line 8 from line 7, and enter result			•
10. If line 2, Column C is more than line 9, enter Balance Due. Please Pay In Full With This Return			• \$
11. If line 2, Column C is less than line 9, enter Refund to be received			• \$

I declare that I have filed an original return and that I have examined this amended return, including accompanying schedules and statements, and to the best of my knowledge and belief this amended return is true, correct and complete. If prepared by a person other than the taxpayer, his declaration is based on all information of which he has any knowledge.

Sign Here ➔

..... Your Signature Date

..... Spouse's signature (if filing jointly, BOTH must sign even if only one had income)

➔ Signature of preparer other than taxpayer Date

..... Address

MAIL TO: City of Hamtramck, Income Tax, 3401 Evaline, Hamtramck, Michigan 48212

BE SURE PAGE 2 IS COMPLETED

