

H - 941 City of Hamtramck - Income Tax Divison
Employer's Return of Income Tax Withheld

1 M 2018

If this is your first return, enter date this business was started _____

If this is final return, or employer status has changed, see back of form for required information to be submitted.
I certify the tax withheld as shown on this return is correct.

Signature _____ Date _____
Phone # _____

Make remittance payable to:
Treasurer, City of Hamtramck

Mail to:
City of Hamtramck Withholding Payments
P.O. Box 209
Eaton Rapids, MI 48827-0530

Tax withheld _____
Adjustments _____
Net tax withheld _____
Late payment penalty - 1 %
per month (\$2.00 minimum) _____
Interest due
(contact city for daily rates) _____

TOTAL DUE
PAY THIS AMOUNT

FEDERAL EMPLOYER ID # _____

TAX YEAR 2018
PAYROLL PERIOD JANUARY 1M
DUE DATE February 28, 2018

DO NOT WRITE BELOW THIS LINE

H - 941 City of Hamtramck - Income Tax Divison
Employer's Return of Income Tax Withheld

2 M 2018

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P.O. Box 209
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Tax withheld _____
Adjustments _____
Net tax withheld _____
Late payment penalty - 1 %
per month (\$2.00 minimum) _____
Interest due
(contact city for daily rates) _____

TOTAL DUE
PAY THIS AMOUNT

FEDERAL EMPLOYER ID # _____

TAX YEAR 2018
PAYROLL PERIOD FEBRUARY 2M
DUE DATE March 31, 2018

DO NOT WRITE BELOW THIS LINE

H - 941 City of Hamtramck - Income Tax Divison
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3 M 2018

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Adjustments _____
Net tax withheld _____
Late payment penalty - 1 %
per month (\$2.00 minimum) _____
Interest due
(contact city for daily rates) _____

TOTAL DUE
PAY THIS AMOUNT

FEDERAL EMPLOYER ID # _____

TAX YEAR 2018
PAYROLL PERIOD MARCH 3M
DUE DATE April 30, 2018

DO NOT WRITE BELOW THIS LINE

H - 941 City of Hamtramck - Income Tax Division
Employer's Return of Income Tax Withheld

4 M 2018

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Adjustments _____
Net tax withheld _____
Late payment penalty - 1 %
per month (\$2.00 minimum) _____
Interest due
(contact city for daily rates) _____

TOTAL DUE
PAY THIS AMOUNT

FEDERAL EMPLOYER ID # _____

TAX YEAR 2018
PAYROLL PERIOD APRIL 4M
DUE DATE May 31, 2018

DO NOT WRITE BELOW THIS LINE

H - 941 City of Hamtramck - Income Tax Division
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5 M 2018

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Adjustments _____
Net tax withheld _____
Late payment penalty - 1 %
per month (\$2.00 minimum) _____
Interest due
(contact city for daily rates) _____

TOTAL DUE
PAY THIS AMOUNT

FEDERAL EMPLOYER ID # _____

TAX YEAR 2018
PAYROLL PERIOD MAY 5M
DUE DATE June 30, 2018

DO NOT WRITE BELOW THIS LINE

H - 941 City of Hamtramck - Income Tax Division
Employer's Return of Income Tax Withheld

6 M 2018

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Phone # _____

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P.O. Box 209
Eaton Rapids, MI 48827-0530

Tax withheld _____
Adjustments _____
Net tax withheld _____
Late payment penalty - 1 %
per month (\$2.00 minimum) _____
Interest due
(contact city for daily rates) _____

TOTAL DUE
PAY THIS AMOUNT

FEDERAL EMPLOYER ID # _____

TAX YEAR 2018
PAYROLL PERIOD JUNE 6M
DUE DATE July 31, 2018

DO NOT WRITE BELOW THIS LINE

H - 941 City of Hamtramck - Income Tax Divison
Employer's Return of Income Tax Withheld

7 M 2018

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business was started _____

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Signature _____ Date _____
Phone # _____

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P.O. Box 209
Eaton Rapids, MI 48827-0530

Tax withheld _____
Adjustments _____
Net tax withheld _____
Late payment penalty - 1 %
per month (\$2.00 minimum) _____
Interest due
(contact city for daily rates) _____

TOTAL DUE
PAY THIS AMOUNT

FEDERAL EMPLOYER ID # _____

TAX YEAR 2018
PAYROLL PERIOD JULY 7M
DUE DATE August 31, 2018

DO NOT WRITE BELOW THIS LINE

H - 941 City of Hamtramck - Income Tax Divison
Employer's Return of Income Tax Withheld

8 M 2018

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business was started _____

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Phone # _____

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P.O. Box 209
Eaton Rapids, MI 48827-0530

Tax withheld _____
Adjustments _____
Net tax withheld _____
Late payment penalty - 1 %
per month (\$2.00 minimum) _____
Interest due
(contact city for daily rates) _____

TOTAL DUE
PAY THIS AMOUNT

FEDERAL EMPLOYER ID # _____

TAX YEAR 2018
PAYROLL PERIOD AUGUST 8M
DUE DATE September 30, 2018

DO NOT WRITE BELOW THIS LINE

H - 941 City of Hamtramck - Income Tax Divison
Employer's Return of Income Tax Withheld

9 M 2018

If this is your first return, enter date this
business was started _____

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I certify the tax withheld as shown on this return is correct.

Signature _____ Date _____
Phone # _____

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Mail to:
City of Hamtramck Withholding Payments
P.O. Box 209
Eaton Rapids, MI 48827-0530

Tax withheld _____
Adjustments _____
Net tax withheld _____
Late payment penalty - 1 %
per month (\$2.00 minimum) _____
Interest due
(contact city for daily rates) _____

TOTAL DUE
PAY THIS AMOUNT

FEDERAL EMPLOYER ID # _____

TAX YEAR 2018
PAYROLL PERIOD SEPTEMBER 9M
DUE DATE October 31, 2018

DO NOT WRITE BELOW THIS LINE

1. Last pay period on which Hamtramck Taxes were withheld _____

2. Check reason for "Final Return" and answer applicable questions

☐ Business permanently discontinued

☐ Business temporarily discontinued

Operations will be resumed on (Date) _____

☐ Still operating – Ceased paying wages

Wages will be paid starting (Date) _____

☐ Business sold to _____

Name _____

Street _____

City _____

State _____

Zip Code _____

☐ Moved out of Hamtramck

3. Your current address

Street _____

City _____

State _____

Zip Code _____

4. ☐ Other: _____

1. Last pay period on which Hamtramck Taxes were withheld _____

2. Check reason for "Final Return" and answer applicable questions

☐ Business permanently discontinued

☐ Business temporarily discontinued

Operations will be resumed on (Date) _____

☐ Still operating – Ceased paying wages

Wages will be paid starting (Date) _____

☐ Business sold to _____

Name _____

Street _____

City _____

State _____

Zip Code _____

☐ Moved out of Hamtramck

3. Your current address

Street _____

City _____

State _____

Zip Code _____

4. ☐ Other: _____

1. Last pay period on which Hamtramck Taxes were withheld _____

2. Check reason for "Final Return" and answer applicable questions

☐ Business permanently discontinued

☐ Business temporarily discontinued

Operations will be resumed on (Date) _____

☐ Still operating – Ceased paying wages

Wages will be paid starting (Date) _____

☐ Business sold to _____

Name _____

Street _____

City _____

State _____

Zip Code _____

☐ Moved out of Hamtramck

3. Your current address

Street _____

City _____

State _____

Zip Code _____

4. ☐ Other: _____

10 M 2018

Adjustments _____

Interest due
(contact city for daily rates) _____

Phone # _____

TOTAL DUE	
PAY THIS AMOUNT	

FEDERAL EMPLOYER ID # _____

DO NOT WRITE BELOW THIS LINE

11 M 2018

Adjustments _____

Interest due
(contact city for daily rates) _____

Phone # _____

TOTAL DUE	
PAY THIS AMOUNT	

FEDERAL EMPLOYER ID # _____

DO NOT WRITE BELOW THIS LINE

12 M 2018

Adjustments _____

Interest due
(contact city for daily rates)

Phone # _____

TOTAL DUE	
PAY THIS AMOUNT	

FEDERAL EMPLOYER ID # _____

DO NOT WRITE BELOW THIS LINE

Copies of HW-2s must accompany this document.

\$

1. TOTAL HAMTRAMCK TAX WITHHELD DURING YEAR AS SHOWN ON FORMS H		W-2 OR W-2 ENCLOSED	\$			
2. TOTAL NUMBER OF WITHHOLDING TAX STATEMENTS (FORMS HW-2 OR W-2) TRANSMITTED HEREWITH			➔			
3. TOTAL HAMTRAMCK TAX WITHHELD AS SHOWN ON FORMS H-941 (use otherside if forms H-941 were filed monthly)		➔	QUARTER ENDED MARCH 31	\$		
			QUARTER ENDED JUNE 40			
THE NAME ADDRESS AND INDENTIFICATION NUMBER ON THIS FORM MUST BE THE SAME AS USED ON FORMS H-941 AND HW-2 OR W-2. IF NOT CORRECT, PLEASE CORRECT			QUARTER ENDED SEPETMBER 30			
		NAME AND ADDRESS		QUARTER ENDED DECEMBER 31		
				TOTAL PAYMENT TO HAMTRAMCK	\$	
				DIFFERENCE	\$	
				EMPLOYER IDENTIFICATION NO.		

(A)

2018
HW-3

DUE ON
OR
BEFORE
2/28/2019

(B)

(A-B)

SIGNATURE

TITLE

DATE _____

PHONE #

SUMMARY

LIST PAYMENTS MADE WITH P941

EMPLOYER'S RETURNS

JANUARY	
FEBRUARY	
MARCH	
1ST QUARTER TOTAL \$	
APRIL	
MAY	
JUNE	
2ND QUARTER TOTAL \$	
JULY	
AUGUST	
SEPTEMBER	
3RD QUARTER TOTAL \$	
OCTOBER	
NOVEMBER	
DECEMBER	
4TH QUARTER TOTAL \$	
YEARLY TOTAL \$	

1. Last pay period on which Hamtramck Taxes were withheld _____

2. Check reason for "Final Return" and answer applicable questions

☐ Business permanently discontinued

☐ Business temporarily discontinued

Operations will be resumed on
(Date) _____

☐ Still operating – Ceased paying wages
Wages will be paid starting
(Date) _____

☐ Business sold to
Name _____
Street _____
City _____
State _____
Zip Code _____

☐ Moved out of Hamtramck

3. Your current address
Street _____
City _____
State _____
Zip Code _____

4. ☐ Other: _____

1. Last pay period on which Hamtramck Taxes were withheld _____

2. Check reason for "Final Return" and answer applicable questions

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Operations will be resumed on
(Date) _____

☐ Still operating – Ceased paying wages
Wages will be paid starting
(Date) _____

☐ Business sold to
Name _____
Street _____
City _____
State _____
Zip Code _____

☐ Moved out of Hamtramck

3. Your current address
Street _____
City _____
State _____
Zip Code _____

4. ☐ Other: _____

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☐ Moved out of Hamtramck

3. Your current address
Street _____
City _____
State _____
Zip Code _____

4. ☐ Other: _____

