

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

1 M 2024

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) _____

TOTAL DUE
PAY THIS AMOUNT

FEDERAL EMPLOYER ID # _____

TAX YEAR 2024
PAYROLL PERIOD JANUARY 1M
DUE DATE February 28, 2024

DO NOT WRITE BELOW THIS LINE

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

2 M 2024

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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) _____

TOTAL DUE
PAY THIS AMOUNT

FEDERAL EMPLOYER ID # _____

TAX YEAR 2024
PAYROLL PERIOD FEBRUARY 2M
DUE DATE March 31, 2024

DO NOT WRITE BELOW THIS LINE

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

3 M 2024

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Mail to:
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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) _____

TOTAL DUE
PAY THIS AMOUNT

FEDERAL EMPLOYER ID # _____

TAX YEAR 2024
PAYROLL PERIOD MARCH 3M
DUE DATE April 30, 2024

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

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☐ 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: _____

H - 941 City of Hamtramck - Income Tax Division
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4 M

2024

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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) _____

TOTAL DUE
PAY THIS AMOUNT

FEDERAL EMPLOYER ID # _____

TAX YEAR 2024
PAYROLL PERIOD APRIL 4M
DUE DATE May 31, 2024

DO NOT WRITE BELOW THIS LINE

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

2024

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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) _____

TOTAL DUE
PAY THIS AMOUNT

FEDERAL EMPLOYER ID # _____

TAX YEAR 2024
PAYROLL PERIOD MAY 5M
DUE DATE June 30, 2024

DO NOT WRITE BELOW THIS LINE

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

6 M

2024

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Eaton Rapids, MI 48827-0530

Tax withheld _____

Adjustments _____

Net tax withheld _____

Late payment penalty - 1 %
per month (\$2.00 minimum) _____

TOTAL DUE
PAY THIS AMOUNT

FEDERAL EMPLOYER ID # _____

TAX YEAR 2024
PAYROLL PERIOD JUNE 6M
DUE DATE July 31, 2024

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

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☐ 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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☐ 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: _____

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7 M 2024

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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) _____

TOTAL DUE
PAY THIS AMOUNT

FEDERAL EMPLOYER ID # _____

TAX YEAR 2024
PAYROLL PERIOD JULY 7M
DUE DATE August 31, 2024

DO NOT WRITE BELOW THIS LINE

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

8 M 2024

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Tax withheld _____
Adjustments _____
Net tax withheld _____

Late payment penalty - 1%
per month (\$2.00 minimum) _____

TOTAL DUE
PAY THIS AMOUNT

FEDERAL EMPLOYER ID # _____

TAX YEAR 2024
PAYROLL PERIOD AUGUST 8M
DUE DATE September 30, 2024

DO NOT WRITE BELOW THIS LINE

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

9 M 2024

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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) _____

TOTAL DUE
PAY THIS AMOUNT

FEDERAL EMPLOYER ID # _____

TAX YEAR 2024
PAYROLL PERIOD SEPTEMBER 9M
DUE DATE October 31, 2024

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: _____

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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: _____

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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: _____

H - 941 City of Hamtramck - Income Tax Division
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10 M 2024

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Tax withheld _____
Adjustments _____
Net tax withheld _____
Late payment penalty - 1% per month (\$2.00 minimum) _____
TOTAL DUE PAY THIS AMOUNT

FEDERAL EMPLOYER ID # _____
TAX YEAR 2024
PAYROLL PERIOD OCTOBER 10M
DUE DATE November 30, 2024

DO NOT WRITE BELOW THIS LINE

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

11 M 2024

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Tax withheld _____
Adjustments _____
Net tax withheld _____
Late payment penalty - 1% per month (\$2.00 minimum) _____
TOTAL DUE PAY THIS AMOUNT

FEDERAL EMPLOYER ID # _____
TAX YEAR 2024
PAYROLL PERIOD NOVEMBER 11M
DUE DATE December 31, 2024

DO NOT WRITE BELOW THIS LINE

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

12 M 2024

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Tax withheld _____
Adjustments _____
Net tax withheld _____
Late payment penalty - 1% per month (\$2.00 minimum) _____
TOTAL DUE PAY THIS AMOUNT

FEDERAL EMPLOYER ID # _____
TAX YEAR 2024
PAYROLL PERIOD DECEMBER 12M
DUE DATE January 31, 2025

DO NOT WRITE BELOW THIS LINE

CITY OF HAMTRAMCK-INCOME TAX DIVISION
RECONCILIATION OF HAMTRAMCK INCOME TAX WITHHELD

Copies of W-2s must accompany this document.

2024
HW-3

IMPORTANT
INFORMATION

GROSS PAYROLL
USED TO CALCULATE
PAYROLL TAX

\$ _____

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)	➔	
THE NAME ADDRESS AND IDENTIFICATION 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 NAME AND ADDRESS	QUARTER ENDED MARCH 31	\$
	QUARTER ENDED JUNE 30	
	QUARTER ENDED SEPTEMBER 30	
	QUARTER ENDED DECEMBER 31	
	TOTAL PAYMENT TO HAMTRAMCK	\$
	DIFFERENCE	\$
EMPLOYER IDENTIFICATION NO.		

(A)

2024
HW-3

DUE ON
OR
BEFORE
2/28/2025

(B)

(A-B)

SIGNATURE _____ TITLE _____ DATE _____ PHONE # _____

