

**HAMTRAMCK INCOME TAX WITHHELD**  
 IF FINAL RETURN, CHECK HERE AND COMPLETE QUESTIONS ON THE REVERSE SIDE  
 H941-501

**1**

SIGNATURE \_\_\_\_\_ PHONE # \_\_\_\_\_

TITLE \_\_\_\_\_ DATE \_\_\_\_\_

PERIOD 1-1-22 to 3-31-22	DUE ON 4-30-22	IDENTIFICATION NO.
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MAKE CHECK & MAIL TO

**CITY OF HAMTRAMCK**  
 Withholding Payment  
 P.O. BOX 209  
 EATON RAPIDS, MI 48827-0209  
 VALIDATION AREA BELOW

AMOUNT WITHHELD 1 1ST MONTH THIS QTR	
AMOUNT WITHHELD 2 2ND MONTH THIS QTR	
AMOUNT WITHHELD 3 3RD MONTH THIS QTR	
TOTAL TAX WITHHELD 4 THIS QUARTER ★	
ADJUSTMENT 5	
ADJUSTED TAX WITHHELD 6	
AMOUNT DUE 7 ★	

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 IF FINAL RETURN, CHECK HERE AND COMPLETE QUESTIONS ON THE REVERSE SIDE  
 H941-501

**2**

SIGNATURE \_\_\_\_\_ PHONE # \_\_\_\_\_

TITLE \_\_\_\_\_ DATE \_\_\_\_\_

PERIOD 4-1-22 to 6-30-22	DUE ON 7-31-22	IDENTIFICATION NO.
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MAKE CHECK & MAIL TO

**CITY OF HAMTRAMCK**  
 Withholding Payment  
 P.O. BOX 209  
 EATON RAPIDS, MI 48827-0209  
 VALIDATION AREA BELOW

AMOUNT WITHHELD 1 1ST MONTH THIS QTR	
AMOUNT WITHHELD 2 2ND MONTH THIS QTR	
AMOUNT WITHHELD 3 3RD MONTH THIS QTR	
TOTAL TAX WITHHELD 4 THIS QUARTER ★	
ADJUSTMENT 5	
ADJUSTED TAX WITHHELD 6	
AMOUNT DUE 7 ★	

**HAMTRAMCK INCOME TAX WITHHELD**  
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 H941-501

**3**

SIGNATURE \_\_\_\_\_ PHONE # \_\_\_\_\_

TITLE \_\_\_\_\_ DATE \_\_\_\_\_

PERIOD 7-1-22 to 9-30-22	DUE ON 10-31-22	IDENTIFICATION NO.
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MAKE CHECK & MAIL TO

**CITY OF HAMTRAMCK**  
 Withholding Payment  
 P.O. BOX 209  
 EATON RAPIDS, MI 48827-0209  
 VALIDATION AREA BELOW

AMOUNT WITHHELD 1 1ST MONTH THIS QTR	
AMOUNT WITHHELD 2 2ND MONTH THIS QTR	
AMOUNT WITHHELD 3 3RD MONTH THIS QTR	
TOTAL TAX WITHHELD 4 THIS QUARTER ★	
ADJUSTMENT 5	
ADJUSTED TAX WITHHELD 6	
AMOUNT DUE 7 ★	

**HAMTRAMCK INCOME TAX WITHHELD**  
 IF FINAL RETURN, CHECK HERE AND COMPLETE QUESTIONS ON THE REVERSE SIDE  
 H941-501

**4**

SIGNATURE \_\_\_\_\_ PHONE # \_\_\_\_\_

TITLE \_\_\_\_\_ DATE \_\_\_\_\_

PERIOD 10-1-22 to 12-31-22	DUE ON 1-31-23	IDENTIFICATION NO.
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MAKE CHECK & MAIL TO

**CITY OF HAMTRAMCK**  
 Withholding Payment  
 P.O. BOX 209  
 EATON RAPIDS, MI 48827-0209  
 VALIDATION AREA BELOW

AMOUNT WITHHELD 1 1ST MONTH THIS QTR	
AMOUNT WITHHELD 2 2ND MONTH THIS QTR	
AMOUNT WITHHELD 3 3RD MONTH THIS QTR	
TOTAL TAX WITHHELD 4 THIS QUARTER ★	
ADJUSTMENT 5	
ADJUSTED TAX WITHHELD 6	
AMOUNT DUE 7 ★	

**CITY OF HAMTRAMCK-ANNUAL RECONCILIATION • INCOME TAX WITHHELD**

DUE ON OR BEFORE 2-28-23	IDENTIFICATION NO.
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SIGNATURE \_\_\_\_\_ PHONE # \_\_\_\_\_

TITLE \_\_\_\_\_ DATE \_\_\_\_\_

RETURN WITH FORMS  
 W-2 TO  
**CITY OF HAMTRAMCK**  
 WITHHOLDING PAYMENT  
 P.O BOX 209  
 EATON RAPIDS, MI 48827-0209

NUMBER OF  
 W-2'S SUBMITTED

**HW-3**

TAX WITHHELD AS SHOWN ON ATTACHED W2'S 1	
TAX PAID TOTALS FROM REVERSE SIDE 2	
BALANCE DUE PAY IN FULL THIS RETURN 3	
OVERPAYMENT ATTACH EXPLANATION 4	

2022

## SUMMARY

LIST PAYMENTS MADE WITH H941/501  
EMPLOYERS RETURNS.

<p>1. Last pay period on which Hamtramck taxes were withheld _____</p> <p>2. Check reason for "Final Return" and answer applicable questions:</p> <p><input type="checkbox"/> Business permanently discontinued</p> <p><input type="checkbox"/> Business temporarily discontinued</p> <p>Operations will be resumed on (Date) _____</p> <p><input type="checkbox"/> Still operating - Ceased paying wages.</p> <p>Wages will be paid starting (Date) _____</p> <p><input type="checkbox"/> Business sold to: _____</p> <p>Name _____</p> <p>Street _____</p> <p>City _____</p> <p><input type="checkbox"/> Moved out of Hamtramck</p> <p>3. Your current address:</p> <p>Street _____</p> <p>City _____</p> <p>4. Other: _____</p>	<p>1. Last pay period on which Hamtramck taxes were withheld _____</p> <p>2. Check reason for "Final Return" and answer applicable questions:</p> <p><input type="checkbox"/> Business permanently discontinued</p> <p><input type="checkbox"/> Business temporarily discontinued</p> <p>Operations will be resumed on (Date) _____</p> <p><input type="checkbox"/> Still operating - Ceased paying wages.</p> <p>Wages will be paid starting (Date) _____</p> <p><input type="checkbox"/> Business sold to: _____</p> <p>Name _____</p> <p>Street _____</p> <p>City _____</p> <p><input type="checkbox"/> Moved out of Hamtramck</p> <p>3. Your current address:</p> <p>Street _____</p> <p>City _____</p> <p>4. Other: _____</p>	<p>1. Last pay period on which Hamtramck taxes were withheld _____</p> <p>2. Check reason for "Final Return" and answer applicable questions:</p> <p><input type="checkbox"/> Business permanently discontinued</p> <p><input type="checkbox"/> Business temporarily discontinued</p> <p>Operations will be resumed on (Date) _____</p> <p><input type="checkbox"/> Still operating - Ceased paying wages.</p> <p>Wages will be paid starting (Date) _____</p> <p><input type="checkbox"/> Business sold to: _____</p> <p>Name _____</p> <p>Street _____</p> <p>City _____</p> <p><input type="checkbox"/> Moved out of Hamtramck</p> <p>3. Your current address:</p> <p>Street _____</p> <p>City _____</p> <p>4. Other: _____</p>	<p>1. Last pay period on which Hamtramck taxes were withheld _____</p> <p>2. Check reason for "Final Return" and answer applicable questions:</p> <p><input type="checkbox"/> Business permanently discontinued</p> <p><input type="checkbox"/> Business temporarily discontinued</p> <p>Operations will be resumed on (Date) _____</p> <p><input type="checkbox"/> Still operating - Ceased paying wages.</p> <p>Wages will be paid starting (Date) _____</p> <p><input type="checkbox"/> Business sold to: _____</p> <p>Name _____</p> <p>Street _____</p> <p>City _____</p> <p><input type="checkbox"/> Moved out of Hamtramck</p> <p>3. Your current address:</p> <p>Street _____</p> <p>City _____</p> <p>4. Other: _____</p>
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JANUARY	
FEBRUARY	
MARCH	
QUARTER ENDED MARCH 31	\$ _____
APRIL	
MAY	
JUNE	
QUARTER ENDED JUNE 30	\$ _____
JULY	
AUGUST	
SEPTEMBER	
QUARTER ENDED SEPT. 30	\$ _____
OCTOBER	
NOVEMBER	
DECEMBER	
QUARTER ENDED DEC. 31	\$ _____

**TOTAL PAID \$** \_\_\_\_\_