FORM **HW-2** (REV. 2011)

Hawaii Tax I.D. No. **W** _____ - ____ - ____

STATE OF HAWAII — DEPARTMENT OF TAXATION STATEMENT OF HAWAII INCOME TAX WITHHELD AND WAGES PAID

CALENDAR YEAR

2011

(REV. 2011)		COPY A	A — For Hawaii S	tate Tax Collector
EMPLOYEE'S Name	Social Security Number:			
A				
Address and Postal/ZIP Code				
			Correcte	ed
Total Wages (Before Payroll Deductions)	Hawaii Income Tax Withheld		ents Not Included	in Total Wages
2011	Φ.	\$		
\$ EMPLOYER'S Name	\$	Na	ture of Payment _	
EMPLOTER 3 Name			EMPLOYER:	See Instructions
Address and Postal/ZIP Code				on reverse side.
Hawaii Tax I.D. No. W	-			FORM HW-2
	STATE OF HAWAII — DEPARTMENT OF TAXAT	ION		
	STATEMENT OF HAWAII INCOME TAX WITH	HELD	CALENDAR	20 11
HW-2	AND WAGES PAID	000/4	YEAR	
(REV. 2011)			— For Hawaii S	tate Tax Collector
EMPLOYEE'S Name	Social Security Number:			
Address and Postal/ZIP Code				
			☐ Correcte	
Total Wages (Before Payroll Deductions)	Hawaii Income Tax Withheld		ents Not Included	in Total Wages
2011 \$	\$	\$ Nature of Payment		
EMPLOYER'S Name		Iva	tare or r ayment	<u> </u>
			EMPLOYER:	See Instructions
Address and Postal/ZIP Code				on reverse side.
Hawaii Tax I.D. No. W				FORM HW-2
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FORM	STATE OF HAWAII — DEPARTMENT OF TAXAT		CALENDAD	
FORM HW-2	STATEMENT OF HAWAII INCOME TAX WITH AND WAGES PAID	ПЕГЛ	CALENDAR YEAR	20 11
(REV. 2011)	AND WAGES I AID	COPY A		tate Tax Collector
EMPLOYEE'S Name	Social Secur			
		,		
Address and Postal/ZIP Code				
			Correcte	, d
Total Wages (Before Payroll Deductions)	Hawaii Income Tax Withheld	Payme	ents Not Included	=
2011	Tanan noono tax vitanou	\$	o . tot moluuou	
\$	\$		ture of Payment .	
EMPLOYER'S Name				_
			EMPLOYER:	See Instructions on reverse side.
Address and Postal/ZIP Code				3.22 2.20
		1		

TO EMPLOYER:

- Prepare this form for each employee to whom wages have been paid.
- 2. Fill in
 - (a) The employee's name, address, postal/ZIP code and social security number.
 - (b) Total wages subject to withholding, or paid to blind, deaf, or totally disabled persons.
 - (c) Amount of income tax deducted and withheld. If no amount was deducted and withheld, enter "none" or "n"
 - (d) Amount of payment not included in "Total Wages" as to which information is required. (See Booklet A — Employer's Tax Guide, Section 11.)
 - (e) Your name, address, postal/ZIP Code and Hawaii Tax Identification Number.

- Give copies B and C to the employee on or before January 31 following the calendar year, or on the day the last payment of wages is made if his or her employment is terminated before the close of such calendar year.
- Forward Copy A to the Hawaii State Tax Collector in accordance with the instruction printed on Form HW-3, Employer's Return and Reconciliation of Hawaii Income Tax Withheld From Wages.
- 5. For further information, see Booklet A Employer's Tax

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 - (c) Amount of income tax deducted and withheld. If no amount was deducted and withheld, enter "none" or "0".
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FORM **HW-2** (REV. 2011)

Hawaii Tax I.D. No. **W** __ _ _ _ - _ _ _ - _ _ _

STATE OF HAWAII — DEPARTMENT OF TAXATION STATEMENT OF HAWAII INCOME TAX WITHHELD AND WAGES PAID

CALENDAR YEAR

2011

(REV. 2011)	COPY B — To Be Filed With Employee's Tax Return			
EMPLOYEE'S Name	Social Security Number:			
Address and Postal/ZIP Code				
		Corrected		
Total Wages (Before Payroll Deductions)	Hawaii Income Tax Withheld	Payments Not Included in Total Wages		
2011		\$		
\$	\$	Nature of Payment		
EMPLOYER'S Name Address and Postal/ZIP Code		EMPLOYEE: This is not a tax return, but must be filed with your Hawaii Income Tax Return for 2011. See reverse side of this copy & Copy C for Instructions.		
Hawaii Tax I.D. No. W		FORM HW-2		
		1		
		·		
FORM	STATE OF HAWAII — DEPARTMENT OF TAX STATEMENT OF HAWAII INCOME TAX WI			
HW-2	AND WAGES PAID	YEAR 20 11		
(REV. 2011)	Co	OPY B — To Be Filed With Employee's Tax Return		
EMPLOYEE'S Name	Social Se	ecurity Number:		
Address and Postal/ZIP Code				
		Corrected		
Total Wages (Before Payroll Deductions)	Hawaii Income Tax Withheld	Payments Not Included in Total Wages		
2011	riawaii income iax witimeid	\$		
\$	\$	Nature of Payment		
EMPLOYER'S Name	· ·	EMPLOYEE: This is not a tax return,		
Address and Postal/ZIP Code		but must be filed with your Hawaii Income Tax Return for 2011. See reverse side of this copy & Copy C for Instructions.		
Hawaii Tax I.D. No. W	-	FORM HW-2		
	STATE OF HAWAII — DEPARTMENT OF TAX	XATION		
FORM	STATEMENT OF HAWAII INCOME TAX WI	0011		
HW-2	AND WAGES PAID	year 20 11		
(REV. 2011)		COPY B — To Be Filed With Employee's Tax Return		
EMPLOYEE'S Name	Social Security Number:			
Address and Postal/ZIP Code				
Address and Fostal/ZIF Code				
		Corrected		
Total Wages (Before Payroll Deductions)	Hawaii Income Tax Withheld	Payments Not Included in Total Wages		
2011		\$		
\$	\$	Nature of Payment		
EMPLOYER'S Name		EMPLOYEE: This is not a tax return,		
Address and Postal/ZIP Code		but must be filed with your Hawaii Income Tax Return for 2011. See reverse side of this copy & Copy C for Instructions.		

NOTICE TO EMPLOYEE:

This statement is important. It must be filed with your Hawaii Income Tax Return for tax year 2011. If your social security number, name, or address is stated incorrectly, correct the information on this copy and notify your employer.

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FORM

Hawaii Tax I.D. No. **W** __ _ _ _ - _ _ _ - _ _ _

STATE OF HAWAII — DEPARTMENT OF TAXATION STATEMENT OF HAWAII INCOME TAX WITHHELD **AND WAGES PAID**

CALENDAR YEAR

Solve For Emplo

2011

(REV. 2011)		COPY C — For Employee's Records		
EMPLOYEE'S Name	Social Security Number:			
Address and Postal/ZIP Code				
		Corrected		
Total Wages (Before Payroll Deductions)	Hawaii Income Tax Withheld	Payments Not Included in Total Wages		
2011		\$		
\$ EMPLOYER'S Name	\$	Nature of Payment		
EMPLOYER'S Name		EMPLOYEE: This is your receipt for your Hawaii Income Tax withheld.		
Address and Postal/ZIP Code		DO NOT LOSE THIS STATEMENT.		
Hawaii Tax I.D. No. W	-	FORM HW-2		
	STATE OF HAWAII — DEPARTMENT OF TAXAT	TION		
FORM	STATEMENT OF HAWAII INCOME TAX WITH	HELD CALENDAR		
HW-2	AND WAGES PAID	year 20 11		
(REV. 2011)		COPY C — For Employee's Records		
EMPLOYEE'S Name	Social Secu	Social Security Number:		
Address and Postal/ZIP Code				
T. 1114 (D. C. D. H.D. L. E.)		Corrected		
Total Wages (Before Payroll Deductions) 2011	Hawaii Income Tax Withheld	Payments Not Included in Total Wages		
\$	\$	Nature of Payment		
EMPLOYER'S Name		EMPLOYEE: This is your receipt for your Hawaii Income Tax withheld.		
Address and Destal/7/D Osda		Hawaii Income Tax withheld.		
Address and Postal/ZIP Code		DO NOT LOSE THIS STATEMENT.		
Hawaii Tax I.D. No. W	-	FORM HW-2		
		·		
FORM	STATE OF HAWAII — DEPARTMENT OF TAXAT STATEMENT OF HAWAII INCOME TAX WITH			
HW-2	AND WAGES PAID	YEAR 20 11		
(REV. 2011)	AND WAGES LAID	COPY C — For Employee's Records		
EMPLOYEE'S Name	Social Secu	rity Number:		
		•		
Address and Postal/ZIP Code				
Total Magazi (Defens Desiral Dedications)	Housi Income Tou Withhold	Corrected		
Total Wages (Before Payroll Deductions) 2011	Hawaii Income Tax Withheld	Payments Not Included in Total Wages		
\$	\$	Nature of Payment		
EMPLOYER'S Name		· ·		
Address and Destal/71D C		EMPLOYEE: This is your receipt for your Hawaii Income Tax withheld.		
Address and Postal/ZIP Code		DO NOT LOSE THIS STATEMENT.		

INSTRUCTIONS TO EMPLOYEE:

This is your receipt for your Hawaii income tax withheld. You should keep it for use in preparing your Hawaii Income Tax Return for tax year 2011 required to be filed on or before April 20, 2012, and as evidence of tax withheld.

DO NOT LOSE THIS STATEMENT

INSTRUCTIONS TO EMPLOYEE:

This is your receipt for your Hawaii income tax withheld. You should keep it for use in preparing your Hawaii Income Tax Return for tax year 2011 required to be filed on or before April 20, 2012, and as evidence of tax withheld.

DO NOT LOSE THIS STATEMENT

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This is your receipt for your Hawaii income tax withheld. You should keep it for use in preparing your Hawaii Income Tax Return for tax year 2011 required to be filed on or before April 20, 2012, and as evidence of tax withheld.

DO NOT LOSE THIS STATEMENT

FORM HW-2

Hawaii Tax I.D. No. **W** __ _ _ _ - _ _ _ - _ _ _

STATE OF HAWAII — DEPARTMENT OF TAXATION STATEMENT OF HAWAII INCOME TAX WITHHELD **AND WAGES PAID**

CALENDAR YEAR

2011

(REV. 2011)		COPY D — For Employer		
EMPLOYEE'S Name	Social Security Number:			
Address and Destal/ZID Code				
Address and Postal/ZIP Code				
		Corrected		
Total Wages (Before Payroll Deductions)	Hawaii Income Tax Withheld	Payments Not Included in Total Wages		
2011 \$	\$	Φ Nature of Payment		
EMPLOYER'S Name	¥	-		
		EMPLOYER: This copy is for your		
Address and Postal/ZIP Code		records.		
Hawaii Tax I.D. No. W		FORM HW-2		
	STATE OF HAWAII — DEPARTMENT OF TAXATION			
FORM	STATEMENT OF HAWAII INCOME TAX WITHHE AND WAGES PAID	LD CALENDAR YEAR 20 11		
HW-2 (REV. 2011)	AND WAGES FAID	COPY D — For Employer		
EMPLOYEE'S Name	Social Security I			
	·			
Address and Postal/ZIP Code				
		Corrected		
Total Wages (Before Payroll Deductions)	Hawaii Income Tax Withheld	Payments Not Included in Total Wages		
2011 \$	\$	\$		
EMPLOYER'S Name	φ	Nature of Payment		
2 2012110110		EMPLOYER: This copy		
Address and Postal/ZIP Code		is for your records.		
Hawaii Tax I.D. No. W		FORM HW-2		
		1		
	STATE OF HAWAII — DEPARTMENT OF TAXATION	I		
FORM	STATEMENT OF HAWAII INCOME TAX WITHHE	LD CALENDAR		
HW-2	AND WAGES PAID	YEAR 20 11		
(REV. 2011) EMPLOYEE'S Name	Casial Caswith	COPY D — For Employer		
EMPLOYEE 5 Name	Social Security I	Number:		
Address and Postal/ZIP Code				
		Corrected		
Total Wages (Before Payroll Deductions)	Hawaii Income Tax Withheld	Payments Not Included in Total Wages		
2011		\$		
\$	\$	Nature of Payment		
EMPLOYER'S Name		EMPLOYER: This copy		
Address and Postal/ZIP Code		is for your records.		
		recolus.		