



HW30_F 2022A 01 VID01

STATE OF HAWAII—DEPARTMENT OF TAXATION
**EMPLOYER'S ANNUAL
TRANSMITTAL OF HAWAII
INCOME TAX WITHHELD FROM WAGES**

FOR CALENDAR YEAR

NOTE: Beginning January 1, 2020 (Calendar Year 2020), Form HW-30 will be used to transmit Forms HW-2 and W-2. Annual reconciliation (Form HW-3) is not required. If you need to make any changes to the amount of withholding payments made and reported on this transmittal, amend Form HW-14 for the affected period.

AMENDED (For an AMENDED Form HW-30, attach ONLY the CORRECTED Forms HW-2 or federal forms W-2C)

NAME: _____

HAWAII TAX I.D. NO. WH

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- 1. Number of HW-2 forms, COPY A, or federal Form W-2, COPY 11
- 2. TOTAL WAGES shown on these forms (include COLA, 3rd party sick leave, and other benefits)2
- 3. TOTAL HAWAII INCOME TAX WITHHELD from wages shown on these forms3

Please file this form together with the Statements of Hawaii Income Tax Withheld and Wages Paid (copy A of Form HW-2 or copy 1 of federal Form W-2).

I declare under the penalties set forth in section 231-36, HRS, that all information contained on this transmittal are true and correct prepared in accordance with the withholding provisions of the Hawaii Income Tax Law and the rules issued thereunder.

SIGNATURE	DATE
TITLE	DAYTIME PHONE NUMBER

SIGN THIS FORM AND MAIL TO:

Hawaii Department of Taxation
P.O. Box 1425
Honolulu, HI 96806-1425