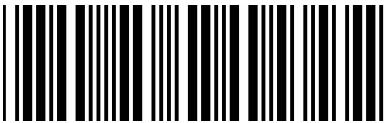


FORM HW-14 **WEB FILL**

(Rev. 2006)



WF061

STATE OF HAWAII  
DEPARTMENT OF TAXATION  
**WITHHOLDING TAX RETURN**

DO NOT WRITE IN THIS AREA

**30**

Month      Quarter      Ending

HAWAII TAX I.D. NO. **W**

Last 4 digits of your FEIN or SSN

NAME: \_\_\_\_\_

(NOTE: Enter "0" if no wages were paid or no tax withheld. Otherwise, complete this return and enclose applicable payment.)

**TOTAL WAGES PAID**  
(include COLA)

**TOTAL TAXES WITHHELD**

FOR	PENALTY
LATE	
FILING	
ONLY	INTEREST

**AMOUNT OF PAYMENT**

**PLEASE ENTER THE AMOUNT OF YOUR PAYMENT.** Attach your check or money order payable to "HAWAII STATE TAX COLLECTOR" in U.S. dollars drawn on any U.S. bank to Form HW-14. Write "HW", the filing period, and your Hawaii Tax I.D. No. on your check or money order. **If you are NOT submitting a check with this return, please enter "0.00" here . . . .**

I declare under the penalties set forth in section 231-36, HRS, that this is a true and correct return, prepared in accordance with the withholding provisions of the Hawaii Income Tax Law and the rules issued thereunder.

**Electronic Filing**  
[www.ehawaii.gov/efile](http://www.ehawaii.gov/efile)  
Safe. Easy.

SIGNATURE ➤	DATE ➤
TITLE ➤	

— MAILING ADDRESS —  
HAWAII DEPARTMENT OF TAXATION  
P.O. BOX 3827  
HONOLULU, HI 96812-3827