

**CITY OF PICKERINGTON, OHIO
CHECK YOUR STATUS AS A TAXPAYER**

**2018 INDIVIDUAL
PICKERINGTON CITY
INCOME TAX**

- Individual or married
- Married filing separate
- Retired with no taxable income
- Other (explain) _____

Email: _____
 SSN (Taxpayer): _____
 SSN (Spouse): _____
 Did you move during the tax year? _____
 Into Pickerington Date: _____
 Out of Pickerington Date: _____
 Should account be inactivated?: _____
 Reason: _____

Account Number: _____
 Name: _____
 Spouse: _____
 Address: _____
 City/State/Zip: _____
 Phone Number: _____

If you are requesting that your account be inactivated due to your moving from the jurisdiction with no intent to return, although retaining a mailing address within the jurisdiction as your address of record, please enter the date of your move and the reason, and attach supporting documentation with regard to your relocation.

Name and address: Indicate above changes by checking Name Address

INCOME	ATTACH FORMS W-2, 1099 AND FEDERAL SCHEDULES C, E AND F	Taxpayer Use	Office Use
	1. Total W-2 wages. (SEE INSTRUCTIONS ON PAGE 2)	1 _____	
	2. Profit from income other than wages (attach schedule(s) C, E and/or F).....	2 _____	
	3. TOTAL INCOME: (1 + 2)	3 _____	
	4. LESS: EMPLOYEE BUSINESS EXPENSES (ATTACH FORMS 2106 AND SCH A) (SEE SECTION 2, PAGE 2)	4 _____	
	5. LESS: INCOME EARNED WHILE NON-RESIDENT (SEE SECTION 2, PAGE 2)	5 _____	
	6. TOTAL DEDUCTIONS (LINE 4 + 5)	6 _____	
	7. TOTAL TAXABLE INCOME (LINE 3 - LINE 6)	7 _____	
TAX	8. TAX (MULTIPLY TAXABLE INCOME (LINE 7) BY 1% (0.01))	8 _____	
TAX WITHHELD,	9. Pickerington tax withheld by employer (Do not include school tax SD 2307)	9 _____	
PAYMENTS,	10. Credit allowed for earnings taxed by another city (limited to ½%)	10 _____	
& CREDITS	W-2 must show tax paid to other city (or attach another city return)		
	11. Estimated tax payments	11 _____	
	12. Prior year overpayment that was not refunded	12 _____	
	13. Credit allowed for schedule income taxed by another city (limited to ½%; attach return)	13 _____	
	14. Total payments and credits (add lines 9 through 13)	14 _____	
BALANCE DUE,	15. Balance Due or (Overpayment) (line 8 minus line 14)	15 _____	
REFUND	16. Penalty: 15% of amount owed (Enter \$0 if total tax liability is less than \$200)	16 _____	
OR CREDIT	17. Late filing Fee (\$25.00 x _____ months late – maximum 6 months)	17 _____	
	18. Interest 0.0058 x _____ months late)	18 _____	
Note: No tax due if less than \$10.01. No refund will be paid for amounts less than \$10.01.	19. Total penalties and interest (16 + 17 + 18)	19 _____	
	20. Total due or (overpayment) (15 + 19)	20 _____	
	21(A) Carry forward/apply to prior \$ _____ 21(B) Refund \$ _____	21 _____	
DECLARATION OF ESTIMATED TAX FOR YEAR 2019 REQUIRED BY LAW ON ALL INCOME FROM WHICH CITY OF PICKERINGTON TAX IS NOT WITHHELD. THERE IS A 15% PENALTY FOR NON-COMPLIANCE.			
ESTIMATE FOR NEXT YEAR	22. Estimated income subject to tax \$ _____ . Multiply by tax rate of 1%	22 _____	
	23. Pickerington Tax to be withheld	23 _____	
	24. Wages taxed by another city \$ _____ . Multiply by ½% (0.005)	24 _____	
	25. Credit from line 21(A)	25 _____	
	26. Total credits (23 + 24 + 25)	26 _____	
	27. Net estimated tax due (22 - 26)	27 _____	
	28. First quarter estimate (enter ¼ of line 27) vouchers for remaining quarters are on city website	28 _____	
TAX DUE	29. ENTER BALANCE DUE FROM LINE 20 ABOVE	29 _____	
	30. TOTAL TAX DUE (ADD LINES 28 AND 29)	30 _____	

Under penalty of perjury, the undersigned declares that this return (and accompanying schedules) is a true, correct and complete return for the taxable period stated and that the figures used herein are the same as used for Federal Income Tax purposes. Check box if we may discuss this return with your preparer.

SIGNATURE OF PREPARER, IF OTHER THAN TAXPAYER _____ DATE _____ SIGNATURE OF TAXPAYER _____ DATE _____
 ADDRESS OF PREPARER _____ SIGNATURE OF SPOUSE _____ DATE _____

SEND TO PICKERINGTON INCOME TAX DEPARTMENT, 100 LOCKVILLE ROAD, PICKERINGTON, OHIO 43147
 OFFICE HOURS ARE 8:00 AM-5:00 PM MONDAY THROUGH FRIDAY - PHONE (614) 837-4116

MAKE CHECKS PAYABLE TO "CITY OF PICKERINGTON"

WORKSHEET A SALARIES, WAGES, TIPS AND OTHER EMPLOYEE COMPENSATION PER W-2(S)

COLUMN 1	COLUMN 2	COLUMN 3	COLUMN 4	COLUMN 5
EMPLOYER'S NAME	CITY WHERE EMPLOYED	GROSS INCOME FROM W-2'S (BOX 5 OR BOX 18, WHICHEVER IS HIGHER)	WAGES TAXED AND NOT REFUNDED BY OTHER CITY (W-2 BOX 18) (DO NOT INCLUDE PICKERINGTON)	PICKERINGTON TAX WITHHELD (DO NOT INCLUDE SCHOOL TAX SD 2307)
A.				
B.				
C.				
D.				
E. TOTALS				

ENTER ON:

PAGE 1, LINE 1

**YOU MUST INPUT WAGES* AFTER
DEDUCTIONS IN SECTION 3 BELOW
TO CALCULATE CREDIT**
* TAXED BY ANOTHER CITY

PAGE 1, LINE 9

If necessary, attach sheet for additional W-2 information.

SECTION 1 - OTHER INCOME

- 1. Profit/Loss from any Business Owned (Attach Federal Schedule C) \$ _____
- 2. Rental and/or Farm Income/Loss (Attach Federal Schedule E or F) \$ _____
- 3. Partnership Income/Loss (Federal Schedule E) \$ _____
- a. Net Loss Per Previous Pickerington Tax Returns (see note below) - \$ (_____)
- 4. Other Income (from Pass-through-Entities, Estates, Trusts, Fees, Tips etc.) \$ _____
Attach 1099s, K-1 or appropriate Federal Schedules
- 5. TOTAL (Add lines 1, 2, 3, 3a and 4) \$ _____
(Carry to page 1, line 2)
But not less than -0-

NOTE: The net loss from any business activity may not be used to offset salaries, wages, commissions, or other compensation, or non-business income. Net Operating Losses may be carried forward for five (5) years beginning tax year 2017. The 2016 loss still follows the old law of a one (1) year carry forward only.

SECTION 2 - DEDUCTIONS

- A. Partial year residents – income earned while NOT a resident of Pickerington \$ _____
Wages earned IN Pickerington CANNOT be pro-rated. Exact figures must be used whenever possible. Income averaging may be used only when exact figures are not available. (see instructions)
- B. 2106 Employee Business Expenses are limited to actual unreimbursed expenses incurred in the production or earning of the income. **The 2106 Form, as filed with the IRS, with an itemization of all expenses reported and a copy of Federal Schedule A MUST BE ATTACHED OR THE DEDUCTION WILL BE DISALLOWED FORM(S) 2106, LINE 10 MINUS SCHEDULE A, LINE 26]** \$ _____
- C. Moving Expenses included in income on W-2 and reimbursed by employer. Employer documentation must be provided (Applies only to residents moving into City) \$ _____
- D. TOTAL DEDUCTIONS \$ _____
(Carry to section 3 below)

SECTION 3 - CREDIT (ALLOWABLE ONLY FOR PICKERINGTON CITY RESIDENTS)**

**Credits must be substantiated with W-2s or other city returns showing taxes paid to another municipality.
DO NOT INCLUDE ANY SCHOOL DISTRICT TAX. (SD2307)

If your salary and/or income has been taxed and not refunded by a city other than Pickerington, use this calculation:
(Use only that portion of wage/income actually taxed; partial year residents must use partial year figures for tax liability and for credit. If you have or will receive a refund from the employment city on any portion of your income, you must exclude that portion from the credit calculation.)

DEDUCTIONS IN SECTION 2 ABOVE MUST BE DEDUCTED FROM WAGES BEFORE TAX CREDIT IS FIGURED.

TOTAL APPLICABLE WAGES TAXED BY ANOTHER CITY \$ _____ X 1/2% (.005) = _____ \$ _____
(after deductions) (Carry to page 1, line 10)