



**CITY OF PICKERINGTON, OHIO**  
**INCOME TAX DIVISION**  
 Telephone: (614) 837-4116  
 Fax: (614) 833-2201  
 Email: tax@pickerington.net

**2023 INDIVIDUAL**  
**PICKERINGTON CITY**  
**INCOME TAX RETURN**  
**DUE APRIL 15, 2024**

FILING REQUIRED EVEN IF NO TAX IS DUE

ACCOUNT #
TAXPAYER SOCIAL SECURITY #
SPOUSE SOCIAL SECURITY #

Name and Address:

Resident  
 Partial-Year Resident  
 Move-In Date \_\_\_\_\_ Move-Out Date \_\_\_\_\_  
 Non Resident  Sole Proprietor  
 Should account be inactivated \_\_\_\_\_  
 Reason \_\_\_\_\_

Federal Form 1040, Schedule 1, and W-2s must be attached.

**FILING STATUS**  Single  Married filing jointly  Married filing separately (enter name of spouse): \_\_\_\_\_  
 Check only one  Retired with no taxable income.  Other (explain): \_\_\_\_\_

INCOME	ATTACH FEDERAL FORM 1040, FEDERAL SCHEDULE 1, 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.	<b>TOTAL INCOME: (1 + 2)</b> .....	3	_____
4.	LESS: EMPLOYEE BUSINESS EXPENSES (ATTACH FORMS 1040, 2106 AND SCH 1) (SEE SECTION 2, PAGE 2) 4	4	_____
5.	LESS: INCOME EARNED WHILE NON-RESIDENT (SEE SECTION 2, PAGE 2) .....	5	_____
6.	TOTAL DEDUCTIONS (LINE 4 + 5) .....	6	_____
7.	<b>TOTAL TAXABLE INCOME (LINE 3 - LINE 6)</b> .....	7	_____
<b>TAX</b>	8. TAX (MULTIPLY TAXABLE INCOME (LINE 7) BY 1% (0.01)) .....	8	_____
<b>TAX WITHHELD, PAYMENTS, &amp; CREDITS</b>	9. Pickerington tax withheld by employer (Do not include school tax SD 2307) .....	9	_____
	10. Credit allowed for earnings taxed by another city (limited to 1/2%) .....	10	_____
	<b>W-2 must show tax paid to other city (or attach another city return)</b>		
	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 1/2%; attach return) .....	13	_____
	14. <b>Total payments and credits (add lines 9 through 13)</b> .....	14	_____
<b>BALANCE DUE, REFUND OR CREDIT</b>	15. <b>Balance Due or (Overpayment) (line 8 minus line 14)</b> .....	15	_____
	16. Penalty: 15% of amount owed (Enter \$0 if total tax liability is less than \$200) .....	16	_____
	17. Late filing Fee: \$25.00 .....	17	_____
	18. Interest: 0.0083 x _____ months late) .....	18	_____
	19. <b>Total penalties and interest (16 + 17 + 18)</b> .....	19	_____
	20. <b>Total due or (overpayment) (15 + 19)</b> .....	20	_____
	21(A) <b>Carry forward/apply to prior \$</b> _____ <b>21(B) Refund \$</b> _____ .....	21	_____

**DECLARATION OF ESTIMATED TAX FOR YEAR 2024 REQUIRED BY LAW ON ALL INCOME FROM WHICH CITY OF PICKERINGTON TAX IS NOT WITHHELD. THERE IS A 15% PENALTY FOR NON-COMPLIANCE.**

<b>ESTIMATE FOR 2024</b>	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 1/2% (0.005) .....	24	_____
	25. Credit from line 21(A) .....	25	_____
	26. <b>Total credits (23 + 24 + 25)</b> .....	26	_____
	27. <b>Net estimated tax due (22 - 26)</b> .....	27	_____
	28. <b>First quarter estimate (enter 1/4 of line 27) vouchers for remaining quarters are on city website</b> ...	28	_____
<b>TAX DUE</b>	29. ENTER BALANCE DUE FROM LINE 20 ABOVE .....	29	_____
	30. <b>TOTAL TAX DUE (ADD LINES 28 AND 29)</b> .....	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.				
<b>E. TOTALS</b>				

ENTER ON:

PAGE 1, LINE 1

**YOU MUST INPUT WAGES\* AFTER  
DEDUCTIONS IN SECTION 3 BELOW  
TO CALCULATE CREDIT**

PAGE 1, LINE 9

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

\* TAXED BY ANOTHER CITY

**SECTION 1 - OTHER INCOME**

- 1. Profit/Loss from any Business Owned (Attach Federal Schedule 1 and Schedule C)..... \$ \_\_\_\_\_
- 2. Rental and/or Farm Income/Loss (Attach Federal Schedule 1 and Federal Schedule E and/or F) ..... \$ \_\_\_\_\_
- 3. Partnership Income/Loss (Attach Federal Schedule 1 and 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 Federal Schedule 1, 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 cannot 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.

**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) Attach pay stubs from move date if necessary.*
- B. 2106 Employee Business Expenses are for use only by Armed Forces reservists, qualified performing artists, fee-basis state or local government officials, and employees with impairment-related work expenses. **The 2106 Form, as filed with the IRS, with an itemization of all expenses reported, page 2 of Federal Form 1040 and a copy of Federal Schedule 1 MUST BE ATTACHED OR THE DEDUCTION WILL BE DISALLOWED** ..... \$ \_\_\_\_\_
- 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)