



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

2024 INDIVIDUAL  
PICKERINGTON CITY  
INCOME TAX RETURN  
DUE APRIL 15, 2025

FILING REQUIRED EVEN IF NO TAX IS DUE

Name and Address:

ACCOUNT #

TAXPAYER SOCIAL SECURITY #

SPOUSE SOCIAL SECURITY #

☐ 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**  
Check only one

☐ Single ☐ Married filing jointly ☐ Married filing separately (enter name of spouse): \_\_\_\_\_  
☐ 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
In none, see exemption form.	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 ½%) .....	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 ½%; 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%) _____ + Interest (0.83% per mo) _____ + Late filing fee .....	16 _____	_____
	17. <b>Total due or (overpayment) (15 + 16)</b> .....	17 _____	_____
	18(A) <b>Carry forward/apply to prior \$</b> _____ <b>18(B) Refund \$</b> .....	18 _____	_____
	<b>DECLARATION OF ESTIMATED TAX FOR YEAR 2025 REQUIRED BY LAW ON ALL INCOME FROM WHICH CITY OF PICKERINGTON TAX IS NOT WITHHELD. THERE IS A 15% PENALTY FOR NON-COMPLIANCE.</b>		
<b>ESTIMATE FOR 2025</b>	19. Estimated income subject to tax \$ _____ . Multiply by tax rate of 1% .....	19 _____	_____
	20. Pickerington Tax to be withheld .....	20 _____	_____
	21. Wages taxed by another city \$ _____ . Multiply by ½% (0.005) .....	21 _____	_____
	22. Credit from line 18(A) .....	22 _____	_____
	23. <b>Total credits (20 + 21 + 22)</b> .....	23 _____	_____
	24. <b>Net estimated tax due (19 - 23)</b> .....	24 _____	_____
	25. <b>First quarter estimate (enter ¼ of line 24) vouchers for remaining quarters are on city website</b> ...	25 _____	_____
<b>TAX DUE</b>	26. ENTER BALANCE DUE FROM LINE 17 ABOVE .....	26 _____	_____
	27. <b>TOTAL TAX DUE (ADD LINES 25 AND 26)</b> .....	27 _____	_____

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	WORKED REMOTELY	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.		<input type="checkbox"/>			
B.		<input type="checkbox"/>			
C.		<input type="checkbox"/>			
D.		<input type="checkbox"/>			
<b>E. TOTALS</b>		<input type="checkbox"/>			

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.

**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) ..... \$ \_\_\_\_\_
4. Other Income (from Pass-through-Entities, Estates, Trusts, Fees, Tips etc.) ..... \$ \_\_\_\_\_  
*Attach Federal Schedule 1, 1099s, K-1 or appropriate Federal Schedules*
5. Net Loss Per Previous Pickerington Tax Returns (see note below)..... - \$ ( \_\_\_\_\_ )
6. TOTAL (Add lines 1-5)..... \$ \_\_\_\_\_  
 (Carry to page 1, line 2)

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)