

01  
02  
03  
04  
05  
06  
07  
08  
09  
10  
11  
12  
13  
14  
15  
16  
17  
18  
19  
20  
21  
22  
23  
24  
25  
26  
27  
28  
29  
30  
31  
32  
33  
34  
35  
36  
37  
38  
39  
40  
41  
42  
43  
44  
45  
46  
47  
48  
49  
50  
51  
52  
53  
54  
55  
56  
57  
58  
59  
60  
61  
62  
63  
64  
65  
66

# Indiana Household Employment Taxes

Attach to Form IT-40 or Form IT-40PNR

## 2021

**This schedule should be filed by an individual who:**

- withholds state and county (if applicable) tax on household employees, AND
- pays those withholding taxes with the filing of his/her individual income tax return.

Name of employer (as shown on individual income tax return)

Employer Social Security Number

XX DN

999 99 9999 DP

Federal Employer Identification Number

A Did you file federal Schedule H for the tax year shown above?

99 9999999 DQ

Yes. Go to question B.

No. Stop. Do not file this schedule.

B Did you withhold state and/or county income tax for any household employee?

Yes. Complete Part II on the back of this schedule.

No. Stop. Do not file this schedule.

C Make sure you enclose the state copy of your employee's W-2 forms.

**Complete Part II (on page 2) first. Carry those totals to the Part I Summary below.**

### Part 1: Summary of Household Employment Taxes

1. Enter the total State Tax withheld from Part II, line 2	1	999999999999	.00
2. Enter the total County Tax withheld from Part II, line 3	2	999999999999	.00
3. Add lines 1 and 2. Enter the total here	3	999999999999	.00

Enter this amount on your Indiana individual income tax return on the following lines:

- Form IT-40 Schedule 4, line 2,
- Form IT-40PNR Schedule E, line 2.

Under penalties of perjury, I declare that I have examined this schedule, including accompanying statements and W-2 forms, and to the best of my knowledge and belief it is true, correct and complete.

Employer's signature

Daytime telephone number

Date



000000000111111111122222222223333333333344444444445555555555566666666666777777777778888888888899999999999

**Part II: State and County Tax Withholding**

**Line 4 -** Enter the 2-digit county code from Indiana Departmental Notice #1 for which the line 3 county tax was withheld.

**Summary -**

- ◆ Add all line 2 amounts and enter on Part I, line 1.
- ◆ Add all line 3 amounts and enter on Part I, line 2.

Note: Get Form WH-4 and Departmental Notice #1 for detailed information on how to calculate state and county withholding amounts and to get the county code numbers. This information is available on our web site at [www.in.gov/dor/3489.htm](http://www.in.gov/dor/3489.htm) and [www.in.gov/dor/3618.htm](http://www.in.gov/dor/3618.htm)

Enter below the employee's name and Social Security number as it appears on his/her W-2 form. Attach additional pages if withholding for more than three household employees.

**Line 1 -** Enter the amount on which you are withholding federal income tax (also enter on W-2 boxes 16 and 18.)

**Line 2 -** Enter the amount of Indiana state tax withheld (also enter on W-2 box 17. Also, enter "IN" on W-2 box 15.)

**Line 3 -** Enter the amount of county tax withheld (also enter on W-2 box 19).

**Employee Name (First, M.I., Last)**

**Employee Social Security Number**

XX

999

99

9999

**Income**

1 999999999999 .00

**State Tax Withheld**

2 999999999999 .00

**County Tax Withheld**

3 999999999999 .00

**County Code Number (2-digit)**

4 99

**Employee Name (First, M.I., Last)**

**Employee Social Security Number**

XX

999

99

9999

**Income**

1 999999999999 .00

**State Tax Withheld**

2 999999999999 .00

**County Tax Withheld**

3 999999999999 .00

**County Code Number (2-digit)**

4 99

**Employee Name (First, M.I., Last)**

**Employee Social Security Number**

XX

999

99

9999

**Income**

1 999999999999 .00

**State Tax Withheld**

2 999999999999 .00

**County Tax Withheld**

3 999999999999 .00

**County Code Number (2-digit)**

4 99

