Schedule IN-H State Form 48684 (R18 / 9-24)

## Indiana Department of Revenue

**Indiana Household Employment Taxes** 

Enclose with Form IT-40 or Form IT-40PNR.

2024

Enclosure Sequence No. 12

## 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.

Nai	me of employer (as shown on individual income tax return)	Emplo	yer Social Sec	arity Number	
		Federa	al Employer Ide	entification Number	
A.	Did you file federal Schedule H for the tax year shown about	ove?			
	Yes. Go to question B.				
	No. Stop. Do not file this schedule.				
В.	Did you withhold state and/or county income tax for any h	ousehold employee?			
	Yes. Complete Part II on the back of this schedule	e.			
	No. Stop. Do not file this schedule.				
C.	Make sure you enclose the state copy of your employee's	W-2 forms.			
Par	Complete Part 2 (on page 2) first. Car t 1 – Summary of Household Employment Taxes	ry those totals to the Part 1 Sum	mary below.		
1.	Enter the total State Tax withheld from Part II, line 2		1		.00
2.	Enter the total County Tax withheld from Part II, line 3		2		.00
3.	Add lines 1 and 2. Enter the total here		3		.00
	<ul> <li>Enter this amount on your Indiana individual income tax re</li> <li>Form IT-40 Schedule 4, line 2,</li> <li>Form IT-40PNR Schedule E, line 2.</li> </ul>	eturn on the following lines:			
	der penalties of perjury, I declare that I have examined this at of my knowledge and belief it is true, correct and complet		statements an	ਤੇ W-2 forms, and to	the
Em	ployer's signature	Daytime telephone number		Date	

## Part 2 - State and County Tax Withholding

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).

**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.** For detailed information on how to calculate state and county withholding amounts and to get the county code numbers, see Form WH-4 at <a href="mailto:forms.in.gov/Download.aspx?id=2702">forms.in.gov/Download.aspx?id=2702</a> and Departmental Notice #1 at <a href="https://www.in.gov/dor/files/dn01.pdf">https://www.in.gov/dor/files/dn01.pdf</a>.

Employee Name (First, Middle Initial, Last)	Employee Social Security Number	
Income	1 .00	
State Tax Withheld	2 .00	
County Tax Withheld	3 .00	
County Code Number (2-digit)	4	
Employee Name (First, Middle Initial, Last)	Employee Social Security Number	
Income	1 .00	
State Tax Withheld	2 .00	
County Tax Withheld	3.00	
County Code Number (2-digit)	4	
Employee Name (First, Middle Initial, Last)  Employee Social Security Number		
Income	1 .00	
State Tax Withheld	2 .00	
County Tax Withheld	3.00	
County Code Number (2-digit)	4	