## Schedule IN-H

State Form 48684 (R8 / 9-14)

## **Indiana Household Employment Taxes**

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

This schedule should be filed by an individual who:

2014

Enclosure Sequence No. 12

Nam	e of employer (as shown on individual incom	e tax return)	Employer Social Security	Number
A Di	Yes. Go to question B.  No. Stop. Do not file this schedule.	r shown above?	Employer Federal Identific	cation Number
B Di	id you withhold state and/or county income to	ax for any household employee	?	
	Yes. Complete Part II on the back of th	s schedule.		
	No. Stop. Do not file this schedule.			
С М	ake sure you enclose the state copy of your	employee's W-2 forms.		
	Complete Part II first. Cari	y those totals to the Par	t I Summary below.	
Part	1: Summary of H	ousehold Employment 1	axes	
и г.	nter the total State Tax withheld from Part II,	line 2	1	.00
1. E	· ·			
	nter the total County Tax withheld from Part I	I, line 3	2	.00
<ol> <li>Er</li> <li>Ac</li> </ol>	nter the total County Tax withheld from Part I		3	
2. Er 3. Ad	nter the total County Tax withheld from Part I		3	.00
2. Er 3. Ac Er Under	nter the total County Tax withheld from Part I  dd lines 1 and 2. Enter the total here  nter this amount on your Indiana individual ir  Form IT-40 Schedule 4, line 2,	come tax return on the followin	g lines:	.00

## Part II: 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: 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 and www.in.gov/dor/3618.htm

Employee Name (First, M.I., Last)	Employee Social Security Number
Income	
State Tax Withheld	
County Tax Withheld	
County Code Number (2-digit)	4
Employee Name (First, M.I., Last)	Employee Social Security Number
Income	1 .0
State Tax Withheld	
County Tax Withheld	
County Code Number (2-digit)	
Employee Name (First, M.I., Last)	Employee Social Security Number
Income	
State Tax Withheld	2 .0
County Tax Withheld	
County Code Number (2 digit)	4