

2026

This form may be electronically filed and paid at crisp.columbus.gov

Form **IT-11** City of Columbus, Income Tax Division
Employer's Quarterly Return of City Tax Withheld

ACCOUNT INFORMATION	
Account ID WTH-	TAX YEAR 2026
FEIN	QUARTER
Employer name	Check this box if AMENDED ☐
Address	Should this account be inactivated? ☐ YES ☐ NO
City State Zip code	IF YES, please explain
	Effective date

WITHHOLDING DUE			
CITY	QUALIFIED WAGES	TAX RATE	TAX DUE
01 Columbus		2.5%	
88 Alternate Columbus*			
1. TOTAL TAX DUE *For additional tax due from residents working in cities with a lower tax rate.			1
2. LESS PRIOR PAYMENT.....			2
3. TOTAL NET AMOUNT DUE (PLEASE DO NOT REMIT AMOUNTS OF \$10.00 OR LESS).....			3

Make checks payable to: **CITY TREASURER**
Mail to: Columbus Income Tax Division
PO Box 182158
Columbus, OH 43218-2158

- It is the employer's responsibility to determine the required frequency of depositing withholding based on the withholding amounts. See IT-11 Instructions for details.
- This return must be filed even if no wages were paid during the quarter.
- The Payroll Schedule must be completed on Page 2.

SIGNATURE

OFFICER NAME (Please print)	OFFICER SIGNATURE
OFFICER TITLE	DATE

PAYROLL SCHEDULE	
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