2024 SCHOOL INCOME TAX

CITY OF PHILADELPHIA - DEPARTMENT OF REVENUE

DUE DATE: APRIL 15, 2025

PHTIN	
SSN	

First Name	MI	Last Name	Taxpayer E-mail Address			
Stree	t Address	Apt / Suite	City	State Z	ip / Postal Code	
SPOUSE'S INFO IF APPLIES:		Spouse's First Name	MI	Spouse's Last Na	se's Last Name	
If you were a partial year res 1 of instructions and enter d			to			
Check Box If Applies:	Final Return:		Amended Return	Address Ch	ange	
1. Net Taxable Dividends	s (School Income Tax	Regulation 203(a))	1			
2. Taxable Interest (Reg.	203(b))		2.			
3. "Subchapter S" Corpor	ration Income Distribut	tion (Regs. 203(j))	3.			
4. Limited Partnership In	come (Reg. 203(i)). If	loss, enter "0" (zero)	4.			
5. Taxable Income receiv	ved by a Beneficiary o	f an Estate or Trust (Reg. 205)	5.			
		<u>hs or less</u>) (Reg. 203(d) and 204(b	0)).			
7. Net Rental Income (Re	eg. 203(c)). If loss, en	ter "0" (zero)	7.			
8. Other Taxable Income	·		8.			
9. Total Taxable Income	(Add lines 1 through 8	3)	9.			
10. Deductible Expenses	(cannot exceed line	9) (Reg. 204(a))				
11. Net Taxable Income (S	Subtract line 10 from li	ine 9)				
			12.			
Credit from overpayment of prior year or tax previously paid with an extension coupon			13.			
14. <u>TAX DUE</u> If Line 12 is and on the <u>PAYMENT</u>	14.					
VERPAYMENT OPTIONS 15A. REFUNDED. Do not	15a.					
15B. APPLIED to the 2025	OR School Income Tax		the second second second			
Under penalties of and accompanyir	of perjury, as set forth in ng statements and sched	18 PA C.S. §§ 4902-4903 as amende ules, and to the best of my knowledge a	d, I swear that I havand belief, they are t	re reviewed this retur	n	
Taxpayer Signature		Date	Phone	e #		
Spouse's Signature		Date	Phone	#		
Preparer Signature		Date	Phone	4		