

CITY OF PHILADELPHIA
2014 SCHOOL INCOME TAX
DUE DATE: APRIL 15, 2015



Your Social Security Number

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Spouse's Social Security Number

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File online or download forms at
www.phila.gov/revenue.

YOU MUST USE THE CHANGE FORM TO REPORT A CHANGE OF ADDRESS.

If you were a partial year resident in 2014,
refer to page 1 of instructions and enter dates of residency here:

If this is an amended return place an "X" here:

m	m	-	d	d	-	y	y	to	m	m	-	d	d	-	y	y
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If you no longer have income subject to School Income Tax enter the termination date **AND** file a CHANGE FORM.

m	m	-	d	d	-	y	y	y	y
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1. Net Taxable Dividends (School Income Tax Regulation 203(a)).....1.		,			,				.00
2. Taxable Interest (Reg. 203(b)).....2.		,			,				.00
3. "Subchapter S" Corporation Income Distribution (Regs. 202 and 203).....3.		,			,				.00
4. Limited Partnership Income (Reg. 203(i)). If loss, enter "0" (zero).....4.		,			,				.00
5. Taxable Income received by a Beneficiary of an Estate or Trust (Reg. 205).....5.		,			,				.00
6. Net Short Term Capital Gains (held 6 months or less) (Reg. 203(d) and 204(b)). If loss, enter "0" (zero).....6.		,			,				.00
7. Net Rental Income (Reg. 203(c)). If loss, enter "0" (zero).....7.		,			,				.00
8. Other Taxable Income (Reg. 203(e, f, g and h)).....8.		,			,				.00
9. Total Taxable Income (Add lines 1 through 8).....9.		,			,				.00
10. Deductible Expenses (Reg. 204(a)).....10.		,			,				.00
11. Net Taxable Income (Subtract line 10 from line 9).....11.		,			,				.00
12. Gross Tax Due (Multiply line 11 by .03920).....12.		,			,				.00
13. Credit from overpayment of prior year or tax previously paid with an extension coupon.....13.		,			,				.00
14. TAX DUE If Line 12 is greater than Line 13, enter the difference here and on the PAYMENT COUPON14.		,			,				.00
OVERPAYMENT OPTIONS If Line 12 is less than Line 13, enter the amount to be:									
15A. REFUNDED . Do not file a separate Refund Petition.....15A.		,			,				.00
OR									
15B. APPLIED to the 2015 School Income Tax.....15B.		,			,				.00

Under penalties of perjury, as set forth in 18 PA C.S. §§ 4902-4903 as amended, I swear that I have reviewed this return and accompanying statements and schedules, and to the best of my knowledge and belief, they are true and complete.

Taxpayer Signature _____ Date _____ Phone # _____

Spouse's Signature _____ Date _____ Phone # _____

Preparer Signature _____ Date _____ Phone # _____