

2025 SCHOOL INCOME TAX

CITY OF PHILADELPHIA - DEPARTMENT OF REVENUE

2025 SCHOOL INCOME TAX
DUE DATE: APRIL 15, 2026

PHTIN

SSN

First Name

MI

Last Name

Taxpayer E-mail Address

Street Address

Apt / Suite

City

State

Zip / Postal Code

SPOUSE'S INFO

IF APPLIES:

Spouse's SSN

Spouse's First Name

MI

Spouse's Last Name

If you were a partial year resident in 2025, refer to page 1 of instructions and enter dates of residency here:

Check Box If Applies:

Final Return:

(add Cease Date)

Amended Return

Address Change

- | | | | |
|--|-----|--|-----|
| 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. 203(j))..... | 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..... | 8. | | .00 |
| 9. Total Taxable Income (Add lines 1 through 8)..... | 9. | | .00 |
| 10. Deductible Expenses (cannot exceed line 9) (Reg. 204(a))..... | 10. | | .00 |
| 11. Net Taxable Income (Line 9 minus Line 10)..... | 11. | | .00 |
| 12. Gross Tax Due (Multiply line 11 by .037400)..... | 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 COUPON | 14. | | .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 2026 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 # _____

