

CITY OF PHILADELPHIA
2012 SCHOOL INCOME TAX



DUE DATE: APRIL 15, 2013

Taxpayer Name and Address

Your Social Security Number

Spouse's Social Security Number

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

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

If you were a partial year resident in 2012, refer to page 1 and enter dates of residency here: to
 If you no longer have income subject to School Income Tax enter the termination date **AND** file a **CHANGE FORM.**

1. Net Taxable Dividends (School Income Tax Regulation 203(a)).....	1.	<input type="text"/>	.00
2. Taxable Interest (Reg. 203(b)).....	2.	<input type="text"/>	.00
3. "Subchapter S" Corporation (Reg. 203(a)). If loss, enter "0" (zero).....	3.	<input type="text"/>	.00
4. Limited Partnership Income (Reg. 203(i)). If loss, enter "0" (zero).....	4.	<input type="text"/>	.00
5. Taxable Income received by a Beneficiary of an Estate or Trust (Reg. 205).....	5.	<input type="text"/>	.00
6. Net Short Term Capital Gains (held 6 months or less) If loss, enter "0" (zero).....	6.	<input type="text"/>	.00
7. Net Rental Income (Reg. 203(c)). If loss, enter "0" (zero).....	7.	<input type="text"/>	.00
8. Other Taxable Income (Reg. 203(e, f, g and h)).....	8.	<input type="text"/>	.00
9. Total Taxable Income (Add lines 1 through 8).....	9.	<input type="text"/>	.00
10. Deductible Expenses (Reg. 204(a)).....	10.	<input type="text"/>	.00
11. Net Taxable Income (Subtract line 10 from line 9).....	11.	<input type="text"/>	.00
12. Gross Tax Due (Multiply line 11 by .039280).....	12.	<input type="text"/>	.00
13. Credit from overpayment of prior year or tax previously paid by extension.....	13.	<input type="text"/>	.00
14. TAX DUE If Line 12 is greater than Line 13, enter the difference here	14.	<input type="text"/>	.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.	<input type="text"/>	.00
OR			
15B. Applied to the 2013 School Income Tax.....	15B.	<input type="text"/>	.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 # _____