

<b>Tax Item (Identifier)</b>	<b>Source</b>	<b>Location</b>	<b>Description</b>	<b>Format</b>
1	Official Header		Magic Code and Header Version	T1
2	Official Header		Developer Code	Assigned number from NACTP
3	State Specific		Jurisdiction	DE
4	State Specific DE PIT-NON p. 1	H	Form Type	DEPIT-NON
5	State Specific		Specification Version	<b>2021V1.0</b>
6	State Specific		Software/Form Version	
7	DE PIT-NON p. 1	H	Tax Year	<b>2021</b>
8	DE PIT-NON p. 1	H	Taxpayer Social Security Number	##### (9)
9	DE PIT-NON p. 1	H	Spouse Social Security Number	##### (9)
10	DE PIT-NON p. 1	H	Taxpayer First Name	Text
11	DE PIT-NON p. 1	H	Taxpayer Middle Initial	Text (1)
12	DE PIT-NON p. 1	H	Taxpayer Last Name	Text
13	DE PIT-NON p. 1	H	Taxpayer Suffix	Text
14	DE PIT-NON p. 1	H	Spouse First Name	Text
15	DE PIT-NON p. 1	H	Spouse Middle Initial	Text (1)
16	DE PIT-NON p. 1	H	Spouse Last Name	Text
17	DE PIT-NON p. 1	H	Spouse Suffix	Text
18	DE PIT-NON p. 1	H	Present Home Address Line 1	Number/text
19	DE PIT-NON p. 1	H	Present Home Address Line 2	Number/text
20	DE PIT-NON p. 1	H	City	Text
21	DE PIT-NON p. 1	H	State	Text
22	DE PIT-NON p. 1	H	Zip	##### (5) or ##### (9)
23	DE PIT-NON p. 1	H	Filing Status 1 - Only 1 of the filing status blocks should be checked.	X or blank
24	DE PIT-NON p. 1	H	Filing Status 2	X or blank
25	DE PIT-NON p. 1	H	Filing Status 3	X or blank
26	DE PIT-NON p. 1	H	Filing Status 5	X or blank
27	DE PIT-NON p. 1	H	Form DE PIT-UND Indicator	X or blank
28	DE PIT-NON p. 1	H	Part Year Residency Begin Date	MMDDYYYY
29	DE PIT-NON p. 1	H	Part Year Residency End Date	MMDDYYYY
30	DE PIT-NON p. 1	H	Full Year Non-Residency	X or blank
31	DE PIT-NON p. 1	1 col A	Wages, salaries, tips, etc.	Number
32	DE PIT-NON p. 1	1 col B		Number
33	DE PIT-NON p. 1	2 col A	Interest	Number
34	DE PIT-NON p. 1	2 col B		Number
35	DE PIT-NON p. 1	3 col A	Dividends	Number
36	DE PIT-NON p. 1	3 col B		Number
37	DE PIT-NON p. 1	4 col A	State refunds, credits or offsets of state & local income taxes	Number
38	DE PIT-NON p. 1	4 col B		Number
39	DE PIT-NON p. 1	5 col A	Alimony received	Number
40	DE PIT-NON p. 1	5 col B		Number
41	DE PIT-NON p. 1	6 col A	Business income or (loss)	Number
42	DE PIT-NON p. 1	6 col B		Number
43	DE PIT-NON p. 1	7a col A	Capital gain or (loss)	Number
44	DE PIT-NON p. 1	7a col B		Number
45	DE PIT-NON p. 1	7b col A	Other gains or (losses)	Number
46	DE PIT-NON p. 1	7b col B		Number

<b>Tax Item (Identifier)</b>	<b>Source</b>	<b>Location</b>	<b>Description</b>	<b>Format</b>
47	DE PIT-NON p. 1	8 col A	IRA distributions	Number
48	DE PIT-NON p. 1	8 col B		Number
49	DE PIT-NON p. 1	9 col A	Taxable pensions and annuities	Number
50	DE PIT-NON p. 1	9 col B		Number
51	DE PIT-NON p. 1	10 col A	Rents, royalties, partnerships, S corps, estates, trusts, etc.	Number
52	DE PIT-NON p. 1	10 col B		Number
53	DE PIT-NON p. 1	11 col A	Farm income or (loss)	Number
54	DE PIT-NON p. 1	11 col B		Number
55	DE PIT-NON p. 1	12 col A	Unemployment compensation (insurance)	Number
56	DE PIT-NON p. 1	12 col B		Number
57	DE PIT-NON p. 1	13 col A	Taxable Social Security Benefits	Number
58	DE PIT-NON p. 1	13 col B		Number
59	DE PIT-NON p. 1	14 col A	Other income	Number
60	DE PIT-NON p. 1	14 col B		Number
61	DE PIT-NON p. 1	15 col A	Total Income	Number
62	DE PIT-NON p. 1	15 col B		Number
63	DE PIT-NON p. 1	16 col A	Total Federal Adjustments	Number
64	DE PIT-NON p. 1	16 col B		Number
65	DE PIT-NON p. 1	17 col A	Federal AGI	Number
66	DE PIT-NON p. 1	17 col B		Number
67	DE PIT-NON p. 1	18 col A	Interest received on obligations of any state other than Delaware	Number
68	DE PIT-NON p. 1	18 col B		Number
69	DE PIT-NON p. 1	19 col A	Fiduciary adjustment, oil depletion	Number
70	DE PIT-NON p. 1	19 col B		Number
71	DE PIT-NON p. 1	22 col A	Interest received on U.S. obligations	Number
72	DE PIT-NON p. 1	22 col B		Number
73	DE PIT-NON p. 1	23 col A	Pension/Retirement Exclusions	Number
74	DE PIT-NON p. 1	23 col B		Number
75	DE PIT-NON p. 1	24 col A	Delaware State tax refund	Number
76	DE PIT-NON p. 1	24 col B		Number
77	DE PIT-NON p. 1	25 col A	Fiduciary Adjustment, Work Opportunity Credit, Delaware NOL Carryforward	Number
78	DE PIT-NON p. 1	25 col B		Number
79	DE PIT-NON p. 1	26 col A	Taxable SocSec/RR Retirement Benefits/Higher Educ. Excl/Certain Lump Sum Dist.	Number
80	DE PIT-NON p. 1	26 col B		Number
81	DE PIT-NON p. 1	29 col A	Exclusion for certain persons 60 and over or disabled	Number
82	DE PIT-NON p. 1	29 col B		Number
83	DE PIT-NON p. 1	30 col A 30b	Delaware Adjusted Gross Income	Number
84	DE PIT-NON p. 1	30 col B 30a	modified Delaware Source Income	Number
85	DE PIT-NON p. 2	31	Total Itemized Deductions	Number
86	DE PIT-NON p. 2	32	Enter Foreign Taxes Paid	Number

<b>Tax Item (Identifier)</b>	<b>Source</b>	<b>Location</b>	<b>Description</b>	<b>Format</b>
87	DE PIT-NON p. 2	33	Enter Charitable Mileage Deduction	Number
88	DE PIT-NON p. 2	35	Form PIT-CRS Tax Credit Adjustment	Number
89	DE PIT-NON p. 2	37	Delaware AGI	Number
90	DE PIT-NON p. 2	38a	Delaware Standard Deduction	X or blank
91	DE PIT-NON p. 2	38b	Delaware Itemized Deduction	X or blank
92	DE PIT-NON p. 2	38	Deduction Amount	Number
93	DE PIT-NON p. 2	39a	Spouse 65 or Over	X or blank
94	DE PIT-NON p. 2	39b	Spouse Blind	X or blank
95	DE PIT-NON p. 2	39c	Taxpayer 65 or Over	X or blank
96	DE PIT-NON p. 2	39d	Taxpayer Blind	X or blank
97	DE PIT-NON p. 2	39	Additional Standard Deduction Amount	Number
98	DE PIT-NON p. 2	41	Taxable Income	Number
99	DE PIT-NON p. 2	42A	Line 30a	Number
100	DE PIT-NON p. 2	42B	Line 30b	Number
101	DE PIT-NON p. 2	42	Net Tax Liability	Number
102	DE PIT-NON p. 2	43a.a	Number of Exemptions	Number
103	DE PIT-NON p. 2	43a	Exemption Amount	Number
104	DE PIT-NON p. 2	43b.a	Spouse 60 or Over	X or blank
105	DE PIT-NON p. 2	43b.b	Taxpayer 60 or Over	X or blank
106	DE PIT-NON p. 2	43b	60 or Over Exemption Amount	Number
107	DE PIT-NON p. 2	44	Tax Imposed by Other State	Number
108	DE PIT-NON p. 2	45	Other Non-refundable Credits	Number
109	DE PIT-NON p. 2	48	Delaware Withholding	Number
110	DE PIT-NON p. 2	49	Estimated Tax Paid	Number
111	DE PIT-NON p. 2	50	S Corporation Payments	Number
112	DE PIT-NON p. 2	51	Refundable Business Credits	Number
113	DE PIT-NON p. 2	52	Capital Gains Tax Payments	Number
114	DE PIT-NON p. 2	56	Contributions to Special Funds	Number
115	DE PIT-NON p. 2	57	Amount of Refund to be Applied to Next Year	Number
116	DE PIT-NON p. 2	58	Penalty and Interest	Number
117	DE PIT-NON p. 2	59	Net Balance Due	Number
118	DE PIT-NON p. 2	60	Net Refund	Number
119	DD Info		State - Checking Acct.	X or blank
120	DD Info		State - Savings Acct.	X or blank
121	DD Info		State - Routing Transit	Number/text
122	DD Info		State - Deposit Acct. Number	Number/text
123	DD Info		IAT Indicator	X or blank
124	DE PIT-NON p. 2	F	Preparer Name	Text
125	DE PIT-NON p. 2	F	Date Prepared	MMDDYYYY
126	DE PIT-NON p. 2	F	Preparer Address	Number/text (separate each line with commas)
127	DE PIT-NON p. 2	F	Preparer City	Text
128	DE PIT-NON p. 2	F	Preparer State	Text
129	DE PIT-NON p. 2	F	Preparer Zip Code	##### (5) or ##### (9)
130	DE PIT-NON p. 2	F	Taxpayer Home Phone Number	##### (10)
131	DE PIT-NON p. 2	F	Preparer Phone Number	##### (10)
132	DE PIT-NON p. 2	F	Preparer ID Number	PTIN, STIN or SSN

<b>Tax Item (Identifier)</b>	<b>Source</b>	<b>Location</b>	<b>Description</b>	<b>Format</b>
133	DE PIT-NON p. 2	F	Taxpayer E-Mail Address	Text
134	DE PIT-NON p. 2	F	Preparer E-Mail Address	Text
135	DE Sched I	1	Other State name	Two letter state code
136	DE Sched I	1 Col 1	Other State Tax credit	Number
137	DE Sched I	2	Other State name	Two letter state code
138	DE Sched I	2 Col 1	Other State Tax credit	Number
139	DE Sched I	3	Other State name	Two letter state code
140	DE Sched I	3 Col 1	Other State Tax credit	Number
141	DE Sched I	4	Other State name	Two letter state code
142	DE Sched I	4 Col 1	Other State Tax credit	Number
143	DE Sched I	5	Other State name	Two letter state code
144	DE Sched I	5 Col 1	Other State Tax credit	Number
145	DE Sched III	7a	Contributions to Non-Game Wildlife	Number
146	DE Sched III	7b	Contributions to Beau Biden Fund	Number
147	DE Sched III	7c	Contributions to Emergency Housing	Number
148	DE Sched III	7d	Contributions to Breast Cancer Education	Number
149	DE Sched III	7e	Contributions to Organ Donor Awareness	Number
150	DE Sched III	7f	Contributions to Diabetes Education	Number
151	DE Sched III	7g	Contributions to Veteran's Home	Number
152	DE Sched III	7h	Contributions to National Guard	Number
153	DE Sched III	7i	Contributions to Juvenile Diabetes Fund	Number
154	DE Sched III	7j	Contributions to Multiple Sclerosis	Number
155	DE Sched III	7k	Contributions to Ovarian Cancer	Number
156	DE Sched III	7l	Contributions to 21st Fund for Children	Number
157	DE Sched III	7m	Contributions to White Clay Creek	Number
158	DE Sched III	7n	Contributions to Home of the Brave Foundation Fund	Number
159	DE Sched III	7o	Contributions to Senior Trust Fund	Number
160	DE Sched III	7p	Contributions to Delaware Veterans Trust Fund	Number
161	DE Sched III	7q	Contributions to Protecting DE's Children Fund	Number
162	DE Sched III	7r	Contributions to the Food Bank of Delaware	Number
163	DE Sched III	7s	Contributions to the Delaware Habitat for Humanity	Number
164	DE Sched III	7t	Contributions to the B+ Childhood Cancer Fund	Number
165	DE Sched III	7u	Contributions to the Combined Campaign for Justice	Number
166	DE PIT-UND p. 1 Part 2	L	Short Method - Estimated Penalty	Number
167	DE PIT-UND p. 1 Part 4	30 col 1	Delaware Withholding, S Corp Payments, or Refundable Business Credits	Number
168	DE PIT-UND p. 1 Part 4	30 col 2		Number
169	DE PIT-UND p. 1 Part 4	30 col 3		Number

<b>Tax Item (Identifier)</b>	<b>Source</b>	<b>Location</b>	<b>Description</b>	<b>Format</b>
170	DE PIT-UND p. 1 Part 4	30 col 4		Number
171	DE PIT-UND p. 2 Part 3	2 col 1	Delaware AGI from your 2019 Delaware Return	Number
172	DE PIT-UND p. 2 Part 3	2 col 2		Number
173	DE PIT-UND p. 2 Part 3	2 col 3		Number
174	DE PIT-UND p. 2 Part 3	2 col 4		Number
175	DE PIT-UND p. 2 Part 3	5 col 1	Delaware Itemized Deductions	Number
176	DE PIT-UND p. 2 Part 3	5 col 2		Number
177	DE PIT-UND p. 2 Part 3	5 col 3		Number
178	DE PIT-UND p. 2 Part 3	5 col 4		Number
179	DE PIT-UND p. 2 Part 3	8 col 1	Total Delaware Standard Deduction Amount	Number
180	DE PIT-UND p. 2 Part 3	8 col 2		Number
181	DE PIT-UND p. 2 Part 3	8 col 3		Number
182	DE PIT-UND p. 2 Part 3	8 col 4		Number
183	1 <sup>st</sup> W-2/1099-R		Form Type	W2 or 1099R
184	1 <sup>st</sup> W-2/1099-R		W2 Employer ID Or 1099-R Payer ID	##### (9)
185	1 <sup>st</sup> W-2/1099-R		W2 Box #1 Wages/Tips/Salaries Or 1099-R Taxable Amount	Number
186	1 <sup>st</sup> W-2/1099-R		W2 Employee SSN Or 1099-R Payee SSN	##### (9)
187	1 <sup>st</sup> W-2/1099-R		W2 Employee Name Or 1099-R Payee Name	Text
188	1 <sup>st</sup> W-2/1099-R		W2 State Name 1 Or 1099-R State Name 1	Two letter state code
189	1 <sup>st</sup> W-2/1099-R		W2 State Wages 1 Or Blank for 1099-R	Number
190	1 <sup>st</sup> W-2/1099-R		W2 State Withholding 1 Or 1099-R Withholding 1	Number
191	1 <sup>st</sup> W-2/1099-R		W2 State Name 2 Or 1099-R State Name 2	Two letter state code
192	1 <sup>st</sup> W-2/1099-R		W2 State Wages 2 Or Blank for 1099-R	Number
193	1 <sup>st</sup> W-2/1099-R		W2 State Withholding 2 Or 1099-R Withholding 2	Number

<b>Tax Item (Identifier)</b>	<b>Source</b>	<b>Location</b>	<b>Description</b>	<b>Format</b>
194	2nd W-2/1099-R		Form Type	W2 or 1099R
195	2nd W-2/1099-R		W2 Employer ID Or 1099-R Payer ID	##### (9)
196	2nd W-2/1099-R		W2 Box #1 Wages/Tips/Salaries Or 1099-R Taxable Amount	Number
197	2nd W-2/1099-R		W2 Employee SSN Or 1099-R Payee SSN	##### (9)
198	2nd W-2/1099-R		W2 Employee Name Or 1099-R Payee Name	Text
199	2nd W-2/1099-R		W2 State Name 1 Or 1099-R State Name 1	Two letter state code
200	2nd W-2/1099-R		W2 State Wages 1 Or Blank for 1099-R	Number
201	2nd W-2/1099-R		W2 State Withholding 1 Or 1099-R Withholding 1	Number
202	2nd W-2/1099-R		W2 State Name 2 Or 1099-R State Name 2	Two letter state code
203	2nd W-2/1099-R		W2 State Wages 2 Or Blank for 1099-R	Number
204	2nd W-2/1099-R		W2 State Withholding 2 Or 1099-R Withholding 2	Number
205	3rd W-2/1099-R		Form Type	W2 or 1099R
206	3rd W-2/1099-R		W2 Employer ID Or 1099-R Payer ID	##### (9)
207	3rd W-2/1099-R		W2 Box #1 Wages/Tips/Salaries Or 1099-R Taxable Amount	Number
208	3rd W-2/1099-R		W2 Employee SSN Or 1099-R Payee SSN	##### (9)
209	3rd W-2/1099-R		W2 Employee Name Or 1099-R Payee Name	Text
210	3rd W-2/1099-R		W2 State Name 1 Or 1099-R State Name 1	Two letter state code
211	3rd W-2/1099-R		W2 State Wages 1 Or Blank for 1099-R	Number

<b>Tax Item (Identifier)</b>	<b>Source</b>	<b>Location</b>	<b>Description</b>	<b>Format</b>
212	3rd W-2/1099-R		W2 State Withholding 1 Or 1099-R Withholding 1	Number
213	3rd W-2/1099-R		W2 State Name 2 Or 1099-R State Name 2	Two letter state code
214	3rd W-2/1099-R		W2 State Wages 2 Or Blank for 1099-R	Number
215	3rd W-2/1099-R		W2 State Withholding 2 Or 1099-R Withholding 2	Number
216	4th W-2/1099-R		Form Type	W2 or 1099R
217	4th W-2/1099-R		W2 Employer ID Or 1099-R Payer ID	##### (9)
218	4th W-2/1099-R		W2 Box #1 Wages/Tips/Salaries Or 1099-R Taxable Amount	Number
219	4th W-2/1099-R		W2 Employee SSN Or 1099-R Payee SSN	##### (9)
220	4th W-2/1099-R		W2 Employee Name Or 1099-R Payee Name	Text
221	4th W-2/1099-R		W2 State Name 1 Or 1099-R State Name 1	Two letter state code
222	4th W-2/1099-R		W2 State Wages 1 Or Blank for 1099-R	Number
223	4th W-2/1099-R		W2 State Withholding 1 Or 1099-R Withholding 1	Number
224	4th W-2/1099-R		W2 State Name 2 Or 1099-R State Name 2	Two letter state code
225	4th W-2/1099-R		W2 State Wages 2 Or Blank for 1099-R	Number
226	4th W-2/1099-R		W2 State Withholding 2 Or 1099-R Withholding 2	Number
227	5th W-2/1099-R		Form Type	W2 or 1099R
228	5th W-2/1099-R		W2 Employer ID Or 1099-R Payer ID	##### (9)
229	5th W-2/1099-R		W2 Box #1 Wages/Tips/Salaries Or 1099-R Taxable Amount	Number

<b>Tax Item (Identifier)</b>	<b>Source</b>	<b>Location</b>	<b>Description</b>	<b>Format</b>
230	5th W-2/1099-R		W2 Employee SSN Or 1099-R Payee SSN	##### (9)
231	5th W-2/1099-R		W2 Employee Name Or 1099-R Payee Name	Text
232	5th W-2/1099-R		W2 State Name 1 Or 1099-R State Name 1	Two letter state code
233	5th W-2/1099-R		W2 State Wages 1 Or Blank for 1099-R	Number
234	5th W-2/1099-R		W2 State Withholding 1 Or 1099-R Withholding 1	Number
235	5th W-2/1099-R		W2 State Name 2 Or 1099-R State Name 2	Two letter state code
236	5th W-2/1099-R		W2 State Wages 2 Or Blank for 1099-R	Number
237	5th W-2/1099-R		W2 State Withholding 2 Or 1099-R Withholding 2	Number
238	6th W-2/1099-R		Form Type	W2 or 1099R
239	6th W-2/1099-R		W2 Employer ID Or 1099-R Payer ID	##### (9)
240	6th W-2/1099-R		W2 Box #1 Wages/Tips/Salaries Or 1099-R Taxable Amount	Number
241	6th W-2/1099-R		W2 Employee SSN Or 1099-R Payee SSN	##### (9)
242	6th W-2/1099-R		W2 Employee Name Or 1099-R Payee Name	Text
243	6th W-2/1099-R		W2 State Name 1 Or 1099-R State Name 1	Two letter state code
244	6th W-2/1099-R		W2 State Wages 1 Or Blank for 1099-R	Number
245	6th W-2/1099-R		W2 State Withholding 1 Or 1099-R Withholding 1	Number
246	6th W-2/1099-R		W2 State Name 2 Or 1099-R State Name 2	Two letter state code



<b>Tax Item (Identifier)</b>	<b>Source</b>	<b>Location</b>	<b>Description</b>	<b>Format</b>
247	6th W-2/1099-R		W2 State Wages 2 Or Blank for 1099-R	Number
248	6th W-2/1099-R		W2 State Withholding 2 Or 1099-R Withholding 2	Number
249	Official Trailer		Trailer Static String	EOD*