

DELAWARE
FORM 400-EX

DECLARATION OF ESTIMATED
FIDUCIARY INCOME TAX

DO NOT WRITE OR STAPLE IN THIS AREA

5E

RETURN WITH INSTALLMENT DUE:

APRIL 30, 2024

REV CODE 0007-25

FILE THIS FORM ONLY IF YOU ARE MAKING A PAYMENT OF ESTIMATED TAX

2023

EMPLOYER IDENTIFICATION NUMBER:

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TRUST NUMBER:

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FISCAL YEAR END DATE
(Fiscal Year Filers Only):

MM	DD	YY
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AMOUNT OF THIS INSTALLMENT:

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PLEASE WRITE THE TRUST'S OR ESTATE'S EIN
AND FORM 400-ES ON YOUR CHECK OR
MONEY ORDER.

MAKE CHECK PAYABLE AND MAIL TO:
DELAWARE DIVISION OF REVENUE
P.O. BOX 2044, WILMINGTON, DE 19899-2044

NAME OF TRUST OR ESTATE:

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NAME OF FIDUCIARY:

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TITLE OF FIDUCIARY:

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P.O. BOX OR STREET ADDRESS:

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CITY

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STATE

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ZIP CODE

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I REQUEST AN AUTOMATIC EXTENSION OF TIME TO FILE DE FORM 400

TO OCTOBER 15, 2024 (OR FISCAL YEAR, FROM

MM	DD	YY
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TO

MM	DD	YY
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FOR THE TAX YEAR ENDING:

MM	DD	YY
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SIGNATURE OF FIDUCIARY OFFICER OR REPRESENTATIVE

DATE