





APPLICATION FOR AUTOMATIC EXTENSION OF TIME TO FILE DELAWARE INDIVIDUAL INCOME TAX RETURN

TAXPAYER ID	SPOUSE TAXPAYER ID			TAXABLE YEAR	2023	MUST BE FILED	BY APRIL 30, 2024
TAXPAYER FIRST NAME	TAXPAYER LAST NAME			1. Total Income Ta	x Liability You E	expect to Owe \$.00
SPOUSE FIRST NAME	SPOUSE LAST NAME			2. Delaware Incom	e Tax Withheld	\$.00
STREET ADDRESS				3. Tax Year: Estima (Include prior year o			.00
CITY		STATE	ZIP CODE	4. Other Payments	& Credits	\$.00
				5. Total (Add Lines 2	2, 3, and 4)	= \$.00
				6. Balance Due Subtract Line 5 from If Line 5 is greater th			.00
				File online at			
				https://tax.delaware	e.gov		
	Mail to: State o	of Delaw	are, Division of R	evenue, PO Box 830, Wi		899-0830	
	I DECLARE UNDER PE	ENALTIE	S OF PERJURY, TH	AT THIS IS A TRUE, COR	RRECT AND COM	PLETE RETURN.	
		 DATE		<u> </u>	E SIGNATURE	 一 一	ATE

AN AUTOMATIC EXTENSION OF TIME UNTIL OCTOBER 15, 2024 IS REQUESTED TO FILE DELAWARE PERSONAL INCOME TAX RETURN FOR 2023.

DO NOT CUT THIS PAGE

