

DELAWARE 2 0 2 4 DIVISION OF REVENUE PIT-NNS



DELAWARE NON-RESIDENT SCHEDULES

NAME TAXPAYER ID

DE SCHEDULE I - CREDIT FOR INCOME TAXES PAID TO ANOTHER STATE Enter the credit in the highest to lowest amount order. ${f @}$ See the instructions and complete the worksheet prior to completing DE Schedule I. 1. |\$ 1. Tax imposed by State of (Enter 2 character state name) .00 2. Tax imposed by State of 2. \$ (Enter 2 character state name) .00 3. Tax imposed by State of (Enter 2 character state name) 3. \$.00 4. \$ Tax imposed by State of (Enter 2 character state name) .00 (Enter 2 character state name) 5. Tax imposed by State of 5. \$.00 Enter the total here and on Form PIT-NON, Page 2 Line 45. You must attach a copy of the other state return(s) with your Delaware tax return. 6. \$.00

DE SCHEDULE II - EARNED INCOME TAX CREDIT (EITC)

This schedule does not apply to the Non-Resident form. It is intentionally excluded.

DI	E SCHEDULE III - CONTRIBUTIONS TO SPECIAL FUNDS See instructions for a descripti	on of each wo	orthw	hile fund listed below.
7A.	NON-GAME WILDLIFE	7.4	. \$.00
7B.	BEAU BIDEN FUND	7E	\$.00
7C.	EMERGENCY HOUSING	70	\$.00
7D.	BREAST CANCER EDUCATION	70	. \$.00
7E.	ORGAN DONATIONS	7E	. \$.00
7F.	DIABETES EDUCATION	76	. \$.00
7G.	VETERANS HOME	76	i. \$.00
7H.	DELAWARE NATIONAL GUARD	7H	ı. \$.00
71.	JUVENILE DIABETES FUND	71	. \$.00
7J.	MULTIPLE SCLEROSIS SOCIETY	7)	. \$.00
7K.	OVARIAN CANCER FOUNDATION	71	\$.00
7L.	SL24: UNLOCKE THE LIGHT FOUNDATION FUND	71	. \$.00
7M.	WHITE CLAY CREEK	7N	1. \$.00
7N.	HOME OF THE BRAVE	71	ı. \$.00
70.	SENIOR TRUST FUND	70	. \$.00
7P.	VETERANS TRUST FUND	7F	\$.00
7Q.	PROTECT DELAWARE'S CHILD FUND		. \$.00
7R.	FOOD BANK OF DELAWARE	7R	. \$.00
7 S.	DELAWARE HABITAT FOR HUMANITY	75	. \$.00
7T.	B+ CHILDHOOD CANCER	71	\$.00
7U.	COMBINED CAMPAIGN FOR JUSTICE	71	ı. Ş	.00
8.	TOTAL - Enter the total Contribution amount here and on Form PIT-NON, Line 57 - Add Lines 7A through 7U	8.	\$.00

1 See the instructions for ALL required documentation to attach.

This page MUST be sent in with your Delaware return if any of the schedules (above) are completed.

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DELAWARE 2024 DIVISION OF REVENUE PIT-NNS



DELAWARE NON-RESIDENT SCHEDULES

NAME		TAXPAYER ID	
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DE SCHEDULE IV - W-2 AND 1099-R INFORMATION

Complete this Schedule listing all of your, and if applicable, your spouse's, forms W-2 and 1099-R showing Delaware Income Tax withheld. Forms W-2 and 1099-R showing income tax withheld must still be attached to the front of your return if you elect to file by paper. Failure to do so may delay the processing of your return.

ТҮРЕ	EMPLOYER NAME	EMPLOYER TAXPAYER ID	STATE	STATE WAGES	STATE WITHHOLDING	TAXPAYER OF SPOUSE
W-2						Taxpayer
1099-R						Spouse
W-2						Taxpayer
1099-R						Spouse
W-2						Taxpayer
1099-R						Spouse
W-2						Taxpayer
1099-R						Spouse
W-2						Taxpayer
1099-R						Spouse
W-2						Taxpayer
1099-R						Spouse
W-2						Taxpayer
1099-R						Spouse
W-2						Taxpayer
1099-R						Spouse
W-2						Taxpayer
1099-R						Spouse
W-2						Taxpayer
1099-R						Spouse
W-2						Taxpayer
1099-R						Spouse

DE SCHEDULE V - DELAWARE S CORPORATION PAYMENTS

Complete this Schedule by listing all estimated Delaware tax payments made by an S Corporation on behalf of you or your spouse. Failure to do so may delay the processing of your return.

S CORPORATION FEIN	NAME OF S CORPORATION	PAYEE ID	AMOUNT OF ESTIMATED PAYMENT