

**DELAWARE
FORM 400-ES**

**DECLARATION OF ESTIMATED
FIDUCIARY INCOME TAX**

RETURN WITH INSTALLMENT DUE:

REV CODE 0004-015

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

2020

EMPLOYER IDENTIFICATION NUMBER:

TRUST NUMBER:

FISCAL YEAR END DATE
(Fiscal Year Filers Only):

NAME OF TRUST OR ESTATE:

NAME OF FIDUCIARY:

TITLE OF FIDUCIARY:

P.O. BOX OR STREET ADDRESS:

CITY

STATE

ZIP CODE

AMOUNT OF THIS INSTALLMENT:

\$ 00

**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**



DF65019019999

(Revised 04/2019)

Cut Here