

DELAWARE F O R M

DIVISION OF REVENUE **RTT-TAX**

REALTY TRANSFER TAX RETURN AND AFFIDAVIT OF GAIN AND VALUE

Formerly 5402



Form RTT-TAX must be completed for all conveyances and must be presented at the time of recording.

PART A - TO BE COMPLETED BY GRANTOR / SELLER(S)	
TAXPAYER ID NO.	
NAME OF GRANTOR	
ADDRESS	
ADDRESS 2	
CITY	
STATE	ZIP
THE GRANTOR / SELLER(S) IS A	
<input type="checkbox"/> Individual	<input type="checkbox"/> Partnership
<input type="checkbox"/> Corporation	<input type="checkbox"/> Fiduciary (estate or trust)
<input type="checkbox"/> S Corporation	<input type="checkbox"/> Government Agency
<input type="checkbox"/> LLC	

PART B - TO BE COMPLETED BY GRANTEE / BUYER(S)	
TAXPAYER ID NO.	
NAME OF GRANTEE	
ADDRESS	
ADDRESS 2	
CITY	
STATE	ZIP
THE GRANTEE / BUYER(S) IS A	
<input type="checkbox"/> Individual	<input type="checkbox"/> Partnership
<input type="checkbox"/> Corporation	<input type="checkbox"/> Fiduciary (estate or trust)
<input type="checkbox"/> S Corporation	<input type="checkbox"/> Government Agency
<input type="checkbox"/> LLC	

TAXPAYER ID NO.	
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ADDRESS	
ADDRESS 2	
CITY	
STATE	ZIP
THE GRANTOR / SELLER(S) IS A	
<input type="checkbox"/> Individual	<input type="checkbox"/> Partnership
<input type="checkbox"/> Corporation	<input type="checkbox"/> Fiduciary (estate or trust)
<input type="checkbox"/> S Corporation	<input type="checkbox"/> Government Agency
<input type="checkbox"/> LLC	

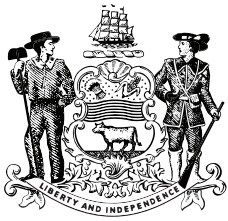
TAXPAYER ID NO.	
NAME OF GRANTEE	
ADDRESS	
ADDRESS 2	
CITY	
STATE	ZIP
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<input type="checkbox"/> Individual	<input type="checkbox"/> Partnership
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PART C - PROPERTY LOCATION AND COMPUTATION OF THE TAX

1. ADDRESS			
CITY		STATE	ZIP
COUNTY		DATE OF REAL ESTATE CONVEYANCE	
If this is a transfer of an interest in real estate through a transfer of an ownership interest in an entity, check this box and enter the name and EIN of the entity here:		Name	
		EIN	
2.	Enter the amount of consideration received including cash, checks, mortgages, liens, encumbrances, and any other good and valuable consideration	\$	
	Was like kind properly exchanged?	Yes	No (If Yes, see instructions.)
3.	Enter the Highest assessed value (for local tax purposes) of the real estate being conveyed	\$	
4.	Enter the Greater of Line 2 or Line 3	\$	
5.	% rate of total Realty Transfer Tax due to the State, county, and/or municipality		4.0 %
6.	% rate of Realty Transfer Tax due to the county or municipality		%
7.	% rate reduction for contracts executed prior to 8/1/17 (see instructions)		%
8.	% rate of Realty Transfer due to the State of Delaware (Subtract Lines 6 and 7 from Line 5)		%
9.	Delaware Realty Transfer Tax Before Credits. Multiply Line 4 by Line 8.	\$	
10.	% of responsibility by	Grantor / Seller(s)	Grantee / Buyer(s)
11.	Amount Due by (Multiply Line 10 by Line 9)	Grantor / Seller(s) \$	Grantee / Buyer(s) \$
12.	Exclusions and Credits	Grantor / Seller(s) \$	Grantee / Buyer(s) \$
13.	Total Amount Due by (Subtract Line 12 from Line 11)	Grantor / Seller(s) \$	Grantee / Buyer(s) \$
TOTAL PAYMENT		\$	

PART D - EXEMPT CONVEYANCES

If transaction is exempt from realty transfer tax, please complete the information in Part C that is available (including consideration paid, if any), and explain the basis for the exemption below:

The seller authorizes the Division of Revenue or such other appropriate state agency as may be designated to obtain any appropriate or necessary federal income tax forms, including the Seller(s) attached schedules or other attachments, and any other related papers filed by such seller which relate solely to the said real estate to which title is purported to be conveyed by the deed or instrument being recorded. Delaware law requires an income tax return to be filed for the taxable year during which there was disposition of real property within this state.

SELLER SIGNATURE	SELLER SIGNATURE	SELLER SIGNATURE	SELLER SIGNATURE
TITLE OF OFFICER / PARTNER	TITLE OF OFFICER / PARTNER	TITLE OF OFFICER / PARTNER	TITLE OF OFFICER / PARTNER

Sworn to and subscribed before me on _____, 20_____

NOTARY SIGNATURE

