

DELAWARE DIVISION OF REVENUE

FORM 1100-T-EXT - DELAWARE CORPORATE INCOME TAX REQUEST FOR EXTENSION

ACCOUNT NUMBER	VERIFY BUSINESS FEIN	CALENDAR OR FISCAL YEAR ENDING	DUE ON OR BEFORE	VOUCHER	EXTENSION TO

FILE THIS FORM IF EXTENSION IS REQUESTED

Check here if a **Request For Change** form is being filed.

BALANCE DUE FROM LINE 7 OF WORKSHEET

(BALANCE OF TAX DUE FOR THE YEAR)



DF62415019999

Mail this form with remittance to:
Delaware Division of Revenue
P.O. Box 830, Wilmington, DE 19899-0830

CHANGES MUST BE MADE ON THE REQUEST FOR CHANGE FORM.
CHECK THIS BOX IF YOU ARE FILING A CHANGE FORM.

X
AUTHORIZED SIGNATURE I declare under penalties of perjury that this is a true, correct, and complete return.

TELEPHONE NUMBER

DATE MM DD YY

EMAIL ADDRESS

(Rev 09/2018)

CUT COUPON ON LINE ABOVE

TAXPAYER'S WORKSHEET AND RECORD OF PAYMENTS

1. Estimated Delaware taxable income for the year \$ _____
2. Multiply line 1 by corporate income tax rate x _____
3. Multiply line 1 by line 2, enter result on line 3 \$ _____
4. Estimated tax paid \$ _____
5. Subtract line 4 from line 3 \$ _____
6. Less credit carryover \$ _____
7. Amount due with extension \$ _____

Please fill in the federal identification number, business name, and address in the spaces provided. Sign and date the return and supply a telephone number where we may contact someone regarding this information.

PLEASE NOTE: Voucher 1 (T-1) is due the 15th day of the 4th month following the end of the year.
Voucher 2 (T-2) is due the 15th day of the 6th month following the end of the year.
Voucher 3 (T-3) is due the 15th day of the 9th month following the end of the year.
Voucher 4 (T-4) is due the 15th day of the 12th month following the end of the year.