

DELAWARE FORM 200-02-X

2020 NON-RESIDENT AMENDED PERSONAL INCOME TAX RETURN

DO NOT WRITE OR STAPLE IN THIS AREA

or Fiscal year beginning and ending
Your Social Security No. Spouse's Social Security No.

FILING STATUS (MUST CHECK ONE)
1. Single, Divorced, Widowed(er)
3. Married & Filing Separate Forms

ATTACH LABEL

Your Last Name First Name and Middle Initial, Jr., Sr., III., etc.

2. Joint 5. Head of Household

Spouse's Last Name Spouse's First Name, Jr., Sr., III., etc.

Check if FULL-YEAR non-resident in 2020 Form DE2210 Attached

Present Home Address (Number and Street) Apt. #

If you were a part-year resident in 2020, give the dates you resided in Delaware.

City State Zip Code

From 2020 To 2020
Month Day Month Day

COMPLETE ALL SECTIONS OF THIS RETURN. NAMES AND SSN'S MUST MATCH ORIGINAL RETURN. CORRECTED AMOUNTS

Table with 2 columns: Line Number and Amount. Includes sections for Delaware Adjusted Gross Income, Deductions, Taxable Income, and Credits.

STAPLE W-2 FORMS HERE

STAPLE CHECK HERE

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and believe it is true, correct and complete.

YOUR SIGNATURE DATE TELEPHONE NUMBER SPOUSE SIGNATURE (If Filing Joint)

SIGNATURE OF PREPARER PREPARER'S EIN OR SSN PREPARER'S PHONE DATE

STREET ADDRESS OF PREPARER CITY STATE ZIP

REMIT FORM TO: NET BALANCE DUE (LINE 25): P.O. BOX 508, WILMINGTON, DE 19899-0508
NET REFUND (LINE 26): P.O. BOX 8710, WILMINGTON, DE 19899-8710
ZERO DUE (LINE 26): P.O. BOX 8711, WILMINGTON, DE 19899-8711



NOTE: IF YOUR ORIGINAL RETURN WAS FILED USING TWO SEPARATE FORMS, YOU MUST FILE TWO SEPARATE AMENDED FORMS  
IS AN AMENDED FEDERAL RETURN BEING FILED?..... YES NO  
IF NO, PLEASE EXPLAIN. IF THE CHANGES PERTAIN TO THE DE RETURN ONLY, LIST THE LINE NUMBERS BEING AMENDED.

HAS THE DELAWARE DIVISION OF REVENUE ADVISED YOU YOUR ORIGINAL RETURN IS BEING AUDITED?..... YES NO  
IS THIS AMENDED RETURN BEING FILED AS A PROTECTIVE CLAIM?..... YES NO  
A DETAILED EXPLANATION OF ALL CHANGES MUST BE PROVIDED IN THIS SPACE. ALL SUPPORTING SCHEDULES AND/OR DOCUMENTATION MUST BE ATTACHED

Table with columns: SECTION A - INCOME AND ADJUSTMENTS FROM FEDERAL RETURN, Federal COLUMN 1, DE Source Income/Loss COLUMN 2. Rows include items like Wages, salaries, tips, Interest, Dividends, etc.