





## APPLICATION FOR AUTOMATIC EXTENSION OF TIME TO FILE DELAWARE COMPOSITE INCOME TAX RETURN

Βι	usiness Name		Employer Identifica							
St	reet Address									
City		State Zip Code		Tax Year		Must be Filed				
				2024					Apı	il 30, 202
1.	TOTAL INCOME TAX LIABILITY (You expect to owe	)				1.  \$				.00
2.	ESTIMATE TAX PAYMENTS (Including prior year over	erpayments	allowed as a credit	)		2. \$				.00
3.	. OTHER PAYMENTS AND CREDITS (See instructions)				1	3. \$	. \$ .00			
4.	TOTAL - Add Line 2 to Line 3					4. \$				.00
5.	5. BALANCE DUE AND PAY IN FULL - Subtract Line 4 from Line 1									.00
stater	SURE TO SIGN YOUR RETURN BELOW AND KEEP A COPY Under penalties of perjury, I declare that I have examined this return, including accoments, and believe it is true, correct and complete. If prepared by a person other the based on all information of which the preparer has any knowled	ompanying schei ian taxpayer, the edge.	dules and			М	REMIT	<b>TANCE F</b> Delawar	F	of Revenue O Box 830
	SIGNATURE OF OFFICER	甸 DATE						Wilmir	igton, DE 1	9899-0830
Г	TITLE OF OFFICER									
_	சி PHONE NUMBER									
	@ EMAIL ADDRESS									

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DFCMPEXT2024019999V1 Revision 20240701