



DELAWARE 2024

DIVISION OF REVENUE FORM PIT-EXT



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

TAXPAYER ID	SPOUSE TAXPAYER ID	
TAXPAYER FIRST NAME	TAXPAYER LAST NAME	
SPOUSE FIRST NAME	SPOUSE LAST NAME	
STREET ADDRESS		
CITY	STATE	ZIP CODE

TAXABLE YEAR **2024** MUST BE FILED BY **APRIL 30, 2025**

1. Total Income Tax Liability You Expect to Owe	\$.00
2. Delaware Income Tax Withheld	\$.00
3. Tax Year: Estimated Tax Payments (Include prior year overpayments allowed as credit)	\$.00
4. Other Payments & Credits	\$.00
5. Total (Add Lines 2, 3, and 4)	\$.00
6. Balance Due Subtract Line 5 from Line 1 and remit the difference. If Line 5 is greater than Line 1, enter 0.	\$.00

File online at <https://tax.delaware.gov>

Mail to: State of Delaware, Division of Revenue, PO Box 830, Wilmington, DE 19899-0830

I DECLARE UNDER PENALTIES OF PERJURY, THAT THIS IS A TRUE, CORRECT AND COMPLETE RETURN.

TAXPAYER SIGNATURE

DATE

SPOUSE SIGNATURE

DATE

AN AUTOMATIC EXTENSION OF TIME UNTIL **OCTOBER 15, 2025** IS REQUESTED TO FILE DELAWARE PERSONAL INCOME TAX RETURN FOR **2024**.

DO NOT CUT THIS PAGE

