



LUMP SUM DISTRIBUTIONS

	 This form applies, in the case of someone who is not self-employed, only when the distribution was made: Due to the participant's death; Due to the participant's separation from employment; or After the participant had attained age 59½ 			 In the case of a self-employed person, this form applies only when the distribution was made: Due to the participant's death; After the participant had attained age 59½ The participant was previously disabled 			
	 THIS FORM DOES NOT APPLY WHEN YOUR DISTRIBUTION WAS: Rolled over; An early distribution including an early distribution received for medical, education or housing exclusions; or Subject to the early withdrawal penalty of your Federal Form 1040, Schedule 2, Line 6. 						
YO	UR FIRST NAME	M.I.	LAST NAME		SUFFIX	YOUR TAXPAYER ID	
SPC	DUSE FIRST NAME	M.I.	LAST NAME		SUFFIX	SPOUSE TAXPAYER ID	
1. 2. 3. 4. 5. 6.	 ENTER ORDINARY INCOME PORTION OF DISTRIBUTION FROM BOX 2A OF FORM 1099R Add Lines 1 and 2 DEATH BENEFIT EXCLUSION ALLOWED ON FEDERAL FORM 4972 Subtract Line 4 from Line 3 						.00 .00 .00 .00 .00
 7. 8. 9. 10. 11. 12. 12. 	 ENTER 10% OF LINE 7 (Multiply Line 7 by .10) COMPUTE THE TAX ON LINE 8 (use Income Tax Table for Form PIT-RES) Multiply the amount on Line 9 by ten ENTER 10% OF LINE 6 (Multiply Line 6 by .10) COMPUTE THE TAX ON LINE 11 (use Income Tax Table for Form PIT-RES) 						00. 00. 00. 00. 00.
13. 14. 15. 16.	 Subtract Line 13 from Line 10 Divide Line 2 by Line 3 and enter result as a decimal (rounded to at least two places) 						.00 .00 .00
			File online at				

https://tax.delaware.gov

ATTACH FORM PIT-STC TO FORM PIT-RES OR FORM FID-TAX I DECLARE UNDER PENALTIES OF PERJURY, THAT THIS IS A TRUE, CORRECT AND COMPLETE RETURN.

TAXPAYER SIGNATURE

🛱 DATE

SPOUSE SIGNATURE

🗎 DATE