





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

TAXPAYER ID	SPOUSE TAXPAYER ID		TAXABLE YEAR	2025	MOST RE LITED F	3Y APRIL 30, 2026	
TAXPAYER FIRST NAME	TAXPAYER LAST NAME			1. Total Income Ta	x Liability You E	xpect to Owe \$.00
SPOUSE FIRST NAME	SPOUSE LAST NAME			2. Delaware Incom	ne Tax Withheld	\$.00
STREET ADDRESS				3. Tax Year: Estima (Include prior year			.00
CITY		STATE	ZIP CODE	4. Other Payments	s & Credits	\$.00
				5. Total (Add Lines	2, 3, and 4)	= \$.00
				6. Balance Due Subtract Line 5 from If Line 5 is greater t			.00
				File online at			
				https://tax.delaware	e.gov /		
	Mail to: State	of Delav	vare, Division of F	evenue, PO Box 830, W	. 0	399-0830	
	I DECLARE UNDER P	ENALTIE	ES OF PERJURY, TH	IAT THIS IS A TRUE, COI	RRECT AND COME	PLETE RETURN.	
□ TAXPAYER SIGNATUR		曲 DATE		 C∕2 SPOLIS	SE SIGNATURE		ATF
W TANFATER SIGNATOR	\L	⊞ D∖IL		<u>₩</u> 3F003	DL SIGNATURE	⊞ 07	VI L

AN AUTOMATIC EXTENSION OF TIME UNTIL OCTOBER 15, 2026 IS REQUESTED TO FILE DELAWARE PERSONAL INCOME TAX RETURN FOR 2025.

DO NOT CUT THIS PAGE

