





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

Bı	usiness Name		Employer Ide	enti	ficatio	n Nu	mber		,			
	25.7.655 1.6.1.16											
St	reet Address											
City		State	Zip Code	Tax Year		Must be File					e Filed b	
				2025							Apr	il 30, 202
1.	TOTAL INCOME TAX LIABILITY (You expect to owe))				1.	\$.00
2.	ESTIMATE TAX PAYMENTS (Including prior year ove	dit)		2.	\$.00		
3.	OTHER PAYMENTS AND CREDITS (See instructions)		•	3.	. \$.00							
4.	TOTAL - Add Line 2 to Line 3				=	4.	\$.00
5.	BALANCE DUE AND PAY IN FULL - Subtract Line 4		III	5.	\$.00		
BE SURE TO SIGN YOUR RETURN BELOW AND KEEP A COPY FOR YOUR RECORDS 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. If prepared by a person other than taxpayer, the declaration is based on all information of which the preparer has any knowledge.			RECORDS Jules and	6 is requested to file Con			MA	L COM			RM WIT	
_	SIGNATURE OF OFFICER	曲 DATE									P	f Revenue O Box 830 9899-0830
	TITLE OF OFFICER											
	❷ PHONE NUMBER											
ı	@ EMAIL ADDRESS											

DO NOT CUT THIS PAGE



DFCMPEXT2025019999V1 Revision 20250728