

TAX YEAR:

DO NOT WRITE OR STAPLE IN THIS AREA

NON-RESIDENT AMENDED DELAWARE PERSONAL INCOME TAX RETURN (FOR TAX YEARS BEGINNING 2000)

or Fiscal year beginning _____ and ending _____

ATTACH LABEL

DEDUCTIONS FROM INCOME

STAPLE W-2 FORMS HERE

STAPLE CHECK HERE

Personal information section including Social Security numbers, names, address, and filing status (Single, Married, Joint, Head of Household).

Main tax calculation table with columns for 'COMPLETE ALL SECTIONS OF THIS RETURN. NAMES AND SSN'S MUST MATCH ORIGINAL RETURN.' and 'CORRECTED AMOUNTS'. Rows include Adjusted Gross Income, Deductions, Taxable Income, Tax Liability, Credits, and Refunds.

Declaration and signature section: 'Under penalties of perjury, I declare that I have examined this return...' followed by signature lines for the taxpayer and preparer.

NOTE: IF YOUR ORIGINAL RETURN WAS FILED USING TWO SEPARATE FORMS, YOU MUST FILE TWO SEPARATE AMENDED FORMS

IS AN AMENDED FEDERAL RETURN BEING FILED?..... YES NO

HAS THE DELAWARE DIVISION OF REVENUE ADVISED YOU YOUR ORIGINAL RETURN IS BEING AUDITED?..... YES NO

IS THIS AMENDED RETURN BEING FILED AS A PROTECTIVE CLAIM?..... YES NO

A DETAILED EXPLANATION OF ALL CHANGES MUST BE PROVIDED IN THIS SPACE. ALL SUPPORTING SCHEDULES AND/OR DOCUMENTATION MUST BE ATTACHED.

ADDITIONAL STANDARD DEDUCTION WORKSHEET			
	65 OR OVER	BLIND	TOTAL NO. TOTAL AMOUNT
1. SELF.....	<input type="checkbox"/>	<input type="checkbox"/>	_____ X 2500 = _____
2. SPOUSE.....	<input type="checkbox"/>	<input type="checkbox"/>	_____ X 2500 = _____

NOTE: IF YOU ARE FILING A JOINT RETURN, ADD THE TOTAL OF LINES 1 AND 2 AND ENTER ON PAGE 1, LINE 3.

TAX RATE SCHEDULE

IF INCOME ON LINE 5 IS:		YOUR TAX IS:
AT LEAST	BUT NOT OVER	
\$ 0.	\$ 2,000.	\$ 0.
2,000.	5,000.	2.20% OF AMOUNT OVER \$2,000.
5,000.	10,000.	\$66.00 + 3.90% OF AMOUNT OVER \$5,000.
10,000.	20,000.	\$261.00 + 4.80% OF AMOUNT OVER \$10,000.
20,000.	25,000.	\$741.00 + 5.20% OF AMOUNT OVER \$20,000.
25,000.	60,000.	\$1,001.00 + 5.55% OF AMOUNT OVER \$25,000.
60,000 AND OVER		\$2,943.50 + 5.95% OF AMOUNT OVER \$60,000.

DELAWARE DIVISION OF REVENUE TELEPHONE AND ADDRESS INFORMATION

NEW CASTLE COUNTY
 Carvel State Office Building
 820 North French Street
 Wilmington, DE 19801
 (302) 577-8200

KENT COUNTY
 Thomas Collins Building
 540 South DuPont Highway
 Dover, DE 19901
 (302) 744-1085

SUSSEX COUNTY
 422 North DuPont Highway
 Suite 2
 Georgetown, DE 19947
 (302) 856-5358

Toll-free telephone number (Delaware only) 1-800-292-7826