

DELAWARE DIVISION OF REVENUE
FORM 1100-T – DELAWARE CORPORATE TENTATIVE TAX RETURN

FEDERAL IDENTIFICATION NUMBER	CALENDAR OR FISCAL YEAR ENDING	DUE ON OR BE FORE	VOUCHER
-------------------------------	--------------------------------	-------------------	---------

Check Here If A
Request For
Change Form Is
Being Filed



BALANCE DUE FROM LINE 5 OF WORKSHEET	\$	00
---	----	----

Mail This Form With Remittance Payable To:
Delaware Division of Revenue
P.O. Box 8751, Wilmington, DE 19899-8751

CHANGES MUST BE MADE ON THE REQUEST FOR CHANGE FORM.
CHECK THE BOX IF YOU ARE FILING A CHANGE FORM.

AUTHORIZED SIGNATURE I declare under penalties of perjury, that this
is a true, correct and complete return.

DATE

TELEPHONE NUMBER

If desired, provide an e-mail address where we may
contact you regarding this return.