

2006

R

DELAWARE INDIVIDUAL RESIDENT INCOME TAX RETURN FORM 200-01

DO NOT WRITE OR STAPLE IN THIS AREA

or Fiscal year beginning and ending

Your Social Security No. Spouse's Social Security No.

(Attach Label Here) DO NOT COVER SOCIAL SECURITY NUMBERS

Your Last Name First Name and Middle Initial Jr., Sr., III., etc.

Spouse's Last Name Spouse's First Name Jr., Sr., III., etc.

Present Home Address (Number and Street) Apt. #

City State Zip Code

FILING STATUS (MUST CHECK ONE)

- 1. Single, Divorced, Widow(er)
2. Joint
3. Married & Filing Separate Forms
4. Married & Filing Combined Separate on this form
5. Head of Household

Form DE2210 Attached

If you were a part-year resident in 2006, give the dates you resided in Delaware.

From Month Day 2006 To Month Day 2006

Table with columns for Column A and Column B, containing tax calculation lines 1 through 27, including Delaware Adjusted Gross Income, Deductions, Taxable Income, and Total Tax.

ATTACH LABEL

STAPLE W-2 FORMS HERE

STAPLE CHECK HERE

2006 DELAWARE RESIDENT SCHEDULES

COLUMNS: Column A is reserved for the spouse of those couples choosing filing status 4. (Reconcile your Federal totals to the appropriate individual. See Page 9 worksheet.) Taxpayers using filing statuses 1, 2, 3, or 5 are to complete Column B only.

Filing Status 4 ONLY Spouse Information COLUMN A	All other filings statuses You or You plus Spouse COLUMN B
--	--

DE SCHEDULE I - CREDIT FOR INCOME TAXES PAID TO ANOTHER STATE

Enter the credit in highest to lowest amount order.

1. Tax imposed by State of _____ (enter 2 character state name).....	1		00		00
2. Tax imposed by State of _____ (enter 2 character state name).....	2		00		00
3. Tax imposed by State of _____ (enter 2 character state name).....	3		00		00
4. Tax imposed by State of _____ (enter 2 character state name).....	4		00		00
5. Tax imposed by State of _____ (enter 2 character state name).....	5		00		00
6. Enter the total here and on EZ Return, Line 10 or Resident Return, Line 10.....	6		00		00

DE SCHEDULE II - EARNED INCOME TAX CREDIT (EITC)

Qualifying Child Information

	CHILD 1	CHILD 2
7. Child's Name (First and Last Name).....		
8. Child's SSN		
9. Child's Year of Birth.....		

10. Delaware State Income Tax from Line 8 (enter higher tax amount from Column A or B).....	10		00
11. Federal earned income credit from Federal Form 1040, Line 66a; Form 1040A, Line 40a; Form 1040 EZ, Line 8a.....	11		00
12. Delaware EITC Percentage (20%).....	12	.20	
13. Multiply Line 11 by Line 12	13		00
14. Enter the Smaller of Line 10 or Line 13 above. Enter here and on EZ Return, Line 11 or Resident Return, Line 14.....	14		00

DE SCHEDULE III - CONTRIBUTIONS TO SPECIAL FUNDS

15. A. Non-Game Wildlife		00	F. Organ Donations		00
B. U.S. Olympics		00	G. Diabetes Educ.		00
C. Emergency Housing		00	H. Veteran's Home		00
D. Children's Trust		00	I. DE National Guard		00
E. Breast Cancer Educ.		00	J. Juv. Diabetes Fund		00

Enter the total Contribution amount here and on EZ Return, Line 19
or Resident Return, Line 23.....

15		00
----	--	----

This page MUST be sent in with your Delaware return if any of the schedules (above) are completed.