

**2015 DELAWARE 2015
CORPORATION INCOME TAX RETURN
FORM 1100**

DO NOT WRITE OR STAPLE IN THIS AREA - REVENUE CODE 0042

FOR CALENDAR YEAR 2015

for Fiscal year beginning **MM/DD/YY** and ending **MM/DD/YY**

EMPLOYER IDENTIFICATION NUMBER

Name of Corporation

Street Address

City State Zip Code

CHECK APPLICABLE BOX:

INITIAL RETURN CHANGE OF ADDRESS EXTENSION ATTACHED

Delaware Address if Different than Above

City State Zip Code

IF OUT OF BUSINESS, ENTER DATE HERE:

State of Incorporation: Nature of Business: DATE OF INCORPORATION: **MM/DD/YY**

ATTACH COMPLETED COPY OF FEDERAL FORM 1120

1. Federal Taxable Income (See Specific Instructions)			1	00
2. Subtractions:				
(a) Foreign dividends, interest and royalties	2a	00		
(b) Net interest from U.S. securities (Schedule 1, Column 2)	2b	00		
(c) Interest from affiliated companies (Schedule 1, Column 3)	2c	00		
(d) Gain from sale of U.S. or Delaware securities	2d	00		
(e) Wage deduction - Federal Jobs Credit	2e	00		
(f) Handicapped accessibility deduction (Attach statement)	2f	00		
(g) Net operating loss carry-over	2g	00		
(h) Other	2h	00		
(i) Total. Add Lines 2(a) through 2(h)	2i	00		
3. Line 1 minus Line 2(i)	3	00		
4. Additions:				
(a) All state and political subdivision income taxes deducted in computing Line 1	4a	00		
(b) Loss from sale of U.S. or Delaware securities	4b	00		
(c) Interest income from obligations of any state except DE (Schedule 1, Column 4)	4c	00		
(d) Depletion expense - oil and gas	4d	00		
(e) Interest paid affiliated companies (See Instructions)	4e	00		
(f) Donations included in Line 1 for which Delaware income tax credits were granted	4f	00		
(g) Total. Add Lines 4(a) through 4(f)	4g	00		
5. Entire net income [Line 3 plus Line 4(g)]	5	00		
WHERE LINE 5 IS DERIVED ENTIRELY FROM SOURCES WITHIN DELAWARE, ENTER AMOUNT ON LINE 11. WHERE THE ENTIRE INCOME IS NOT DERIVED FROM SOURCES WITHIN DELAWARE, COMPLETE ITEMS 6 TO 10 INCLUSIVE.				
6. Total non-apportionable income (or loss) (Schedule 2, Column 3, Line 8)	6	00		
7. Income (or loss) subject to apportionment (Line 5 minus Line 6)	7	00		
8. Apportionment percentage (Schedule 3D, Line 8)	8	00		
9. Income (or loss) apportioned to Delaware (Line 7 multiplied by Line 8)	9	00		
10. Non-apportionable income (or loss) (Schedule 2, Column 1, Line 8)	10	00		
11. Total (Line 9 plus or minus Line 10)	11	00		
12. Delaware Taxable Income (Line 5 or Line 11, whichever is less)	12	00		
13. Tax @ 8.7%	13	00		
14. Delaware tentative tax paid	14	00		
15. Credit carry-over from prior year	15	00		
16. Other payments (attach statement)	16	00		
17. Approved income tax credits	17	00		
18. Total payments and credits. Add Lines 14 through 17	18	00		
19. If Line 13 is greater than Line 18 enter BALANCE DUE AND PAY IN FULL	19	00		
20. If Line 18 is greater than Line 13 enter OVERPAYMENT:				
(a) Total OVERPAYMENT	20a	00		
(b) to be REFUNDED	20b	00		
(c) to be CREDITED to 2016 TENTATIVE TAX	20c	00		



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PLEASE SEE REVERSE SIDE FOR SIGNATURE LINES AND MAILING INSTRUCTIONS.

SCHEDULE 1 - INTEREST INCOME

2015

FORM 1100

PAGE 2

Table with 5 columns: Description Of Interest, Column 1 Foreign Interest, Column 2 Interest Received From U.S. Securities, Column 3 Interest Received From Affiliated Companies, Column 4 Interest Received From State Obligations, Column 5 Other Interest Income. Rows 1-6 with Totals.

SCHEDULE 2 - NON-APPORTIONABLE INCOME ALLOCATED WITHIN AND WITHOUT DELAWARE

Table with 3 columns: Description, Column 1 Within Delaware, Column 2 Without Delaware, Column 3 Total. Rows 1-8 including Rents, Royalties, Gains, and Total non-apportionable income.

SCHEDULE 3 - APPORTIONMENT PERCENTAGE

Schedule 3-A - Gross Real and Tangible Personal Property

Table with 6 columns: Description, Within Delaware Beginning of Year, Within Delaware End of Year, Within and Without Delaware Beginning of Year, Within and Without Delaware End of Year. Rows 1-6 including Real and tangible property owned, rented, and average value.

Schedule 3-B - Wages, Salaries, and Other Compensation Paid or Accrued to Employees

Table with 3 columns: Description, Within Delaware, Within and Without Delaware. Rows 1-3 including Wages, salaries, and other compensation of all employees.

Schedule 3-C - Gross Receipts Subject to Apportionment

Table with 3 columns: Description, Within Delaware, Within and Without Delaware. Rows 1-3 including Gross receipts from sales of tangible personal property.

Schedule 3-D - Determination of Apportionment Percentage

Table with 6 columns: Description, Within Delaware, Within and Without Delaware, %, Row Number. Rows 1-8 including Average value of real and tangible property and Apportionment percentage.



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Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief it is true, correct, and complete.

Date Signature of Officer Title Email Address

Date Signature of individual or firm preparing the return Address

MAKE CHECK PAYABLE AND MAIL TO: Delaware Division of Revenue, P.O. Box 2044, Wilmington, DE 19899-2044

(Form Revised 12/19/15)