RM 1100-T-EXT - DELAWARE CORPO					1100TE 930
FEDERAL IDENTIFICATION NUMBER	CALENDAR OR FISCAL YEAR E	ENDING DUE ON OR BE FOR	RE VOU	CHER	EXTENSION TO
SINESS MAILING NAME AND ADDRESS	Check Here If A Request For				
	Change Form Is Being Filed	BALANCE DUE FROM	LINE 5		
	□ 교)	OF WORKSHEET		\$	0
		(BALANCE OF TAX DUE FO	R THE YEAR)		
			Delaware Divi	sion of Reve	
ANGES MUST BE MADE ON THE REQUEST FOR CHANGE FO	DRM.		P.O. BOX 6751	, wiimingtor	n, DE 19899-8751
ECK THE BOX IF YOU ARE FILING A CHANGE FORM.					
	/				
THORIZED SIGNATURE I declare under penalties of perjury, that is a true, correct and complete return		TELEPHONE NUMBER		ovide an e-mail ntact you regard	address where we may ing this return.

(Cut Coupon on Line Above)

TAXPAYERS WORKSHEET AND RECORD OF PAYMENTS

1. Estimate Delaware taxable income for the year.	\$.00
2. Multiply Line 1 by Corporate Income Tax Rate.	X	.087
3. Enter result on Line 3.	\$.00
4. Actual Tax Liability for Year.	\$.00
5. Tentative Tax Paid.	\$.00
6. Subtract Line 2 from Line 1.	\$.00
7. Less Credit Carryover.	\$.00
8. Amount Due with Extension.	\$.00
9. Check No.		
10. Date Paid.		

Please fill in the federal identification number, business name and address in the spaces provided. Sign and date the return and supply a telephone number where we may contact someone regarding this information.

PLEASE NOTE: Voucher 1 (T-1) is due the 1st day of the 4th month following the end of the year. Voucher 2 (T-2) is due the 15th day of the 6th month following the end of the year. Voucher 3 (T-3) is due the 15th day of the 9th month following the end of the year. Voucher 4 (T-4) is due the 15th day of the 12th month following the end of the year.