3E **DELAWARE DIVISION OF REVENUE**

FORM 200-ES DECLARATION OF ESTIMATED INCOME TAX

RETURN WITH INSTALLMENT DUE **SEPT 15, 2015**

0091-01-03 DO NOT WRITE OR STAPLE IN THIS AREA

DORET

0091010300000000000000123115091515000000000000000000030Q

SEPT 15, 2015

TAXPAYER SOC. SEC. NO.	SPOUSE SOC. SEC. NO.	**2015** TAXABLE YEAR

ENTER LAST NAME, FIRST NAME, SPOUSE NAME & ADDRESS

Last Name | First Name

Spouse's Last Name | Spouse's First Name

Street Address

City | State | Zip Code

1. Amount of this installment $
2. Amount of unused overpayment credit, if any, applied to this installment (see instructions) $
3. Amount of this installment payment (line 1 less line 2) $

RETURN THIS COPY WITH YOUR CHECK PAYABLE TO:
DIVISION OF REVENUE
P.O. BOX 830, WILMINGTON, DELAWARE 19899-0830

File Online at www.revenue.delaware.gov - It's Quick and Easy!

DF64015039999

2E **DELAWARE DIVISION OF REVENUE**

FORM 200-ES DECLARATION OF ESTIMATED INCOME TAX

RETURN WITH INSTALLMENT DUE **JUNE 15, 2015**

0091-01-02 DO NOT WRITE OR STAPLE IN THIS AREA

DORET

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JUNE 15, 2015

TAXPAYER SOC. SEC. NO.	SPOUSE SOC. SEC. NO.	**2015** TAXABLE YEAR

ENTER LAST NAME, FIRST NAME, SPOUSE NAME & ADDRESS

Last Name | First Name

Spouse's Last Name | Spouse's First Name

Street Address

City | State | Zip Code

1. Amount of this installment $
2. Amount of unused overpayment credit, if any, applied to this installment (see instructions) $
3. Amount of this installment payment (line 1 less line 2) $

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DF64015029999

1E **DELAWARE DIVISION OF REVENUE**

FORM 200-ES DECLARATION OF ESTIMATED INCOME TAX

RETURN WITH INSTALLMENT DUE **APRIL 30, 2015**

0091-01-01 DO NOT WRITE OR STAPLE IN THIS AREA

DORET

0091010100000000000000123115043015000000000000000000010B

APRIL 30, 2015

TAXPAYER SOC. SEC. NO.	SPOUSE SOC. SEC. NO.	**2015** TAXABLE YEAR

ENTER LAST NAME, FIRST NAME, SPOUSE NAME & ADDRESS

Last Name | First Name

Spouse's Last Name | Spouse's First Name

Street Address

City | State | Zip Code

1. Amount of this installment $
2. Amount of unused overpayment credit, if any, applied to this installment (see instructions) $
3. Amount of this installment payment (line 1 less line 2) $

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DF64015019999

REQUEST FOR CHANGE TO ESTIMATED INCOME TAX INFORMATION

(CHECK ALL THAT APPLY)

COMPLETE AND FORWARD TO THE DIVISION OF REVENUE IF:

1) YOUR LAST NAME IS INCORRECT
2) YOUR SPOUSE WILL NOT BE FILING ESTIMATED PAYMENTS WITH YOU NEXT YEAR
3) A NEW SPOUSE WILL BE MAKING JOINT ESTIMATED PAYMENTS WITH YOU
4) YOUR ADDRESS WILL BE DIFFERENT FROM THAT ON YOUR FINAL DELAWARE INDIVIDUAL INCOME TAX RETURN FILED THIS YEAR*

DF64315019999

REMIT COUPON TO: DELAWARE DIVISION OF REVENUE
P.O. BOX 830, WILMINGTON, DE 19899-0830

TAXPAYER SOC. SEC. NO.

CORRECTED INFORMATION

TAXPAYER SOC. SEC. NO.

EFFECTIVE DATE OF MOVE MM DD YY

Last Name First Name

Street Address

City State Zip Code

X

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

TELEPHONE NUMBER DATE MM DD YY

*** IF YOU FILED A FINAL RETURN WITH YOUR NEW ADDRESS, NEXT YEAR'S COUPONS WILL BE CORRECT. YOU DO NOT NEED TO SUBMIT THIS FORM OR RE-FILE YOUR ADDRESS.**

5E

DELAWARE DIVISION OF REVENUE

0001-26-05

FORM 1027 APPLICATION FOR AUTOMATIC EXTENSION
OF TIME TO FILE DELAWARE INDIVIDUAL INCOME TAX RETURN

EXTENSION FORM

MUST BE FILED BY **MAY 2, 2016**

DF63815019999

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May 2, 2016

2015

TAXPAYER SOC. SEC. NO. SPOUSE SOC. SEC. NO. TAXABLE YEAR

ENTER LAST NAME, FIRST NAME, SPOUSE NAME & ADDRESS

Last Name First Name

Spouse's Last Name Spouse's First Name

Street Address

City State Zip Code

1. Total income tax liability You expect to owe for 2015		$
2. Delaware Income Tax withheld	$	
3. Tax Year: 2015 Estimated Tax Payments (Include prior year over payments allowed as a credit)	$	
4. Other payments & credits (See instruction 4)	$	
5. Total (Add Lines 2, 3, and 4)		$
6. **BALANCE DUE** (Subtract Line 5 from 1 - REMIT)		$

File Online at www.revenue.delaware.gov - It's Quick and Easy!

An automatic extension of time until October 15, 20 is requested to file Delaware Personal Income Tax Return for 20 .

SIGNATURE DATE MM DD YY

I DECLARE UNDER PENALTIES OF PERJURY, THAT THIS IS A TRUE, CORRECT AND COMPLETE RETURN.

4E

DELAWARE DIVISION OF REVENUE

0091-01-04 DO NOT WRITE OR STAPLE IN THIS AREA

DORET

FORM 200-ES DECLARATION OF ESTIMATED INCOME TAX
RETURN WITH INSTALLMENT DUE **JAN 15, 2016**

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JAN 15, 2016

2015

TAXPAYER SOC. SEC. NO. SPOUSE SOC. SEC. NO. TAXABLE YEAR

ENTER LAST NAME, FIRST NAME, SPOUSE NAME & ADDRESS

Last Name First Name

Spouse's Last Name Spouse's First Name

Street Address

City State Zip Code

1. Amount of this installment	$
2. Amount of unused overpayment credit, if any, applied to this installment (see instructions)	$
3. Amount of this installment payment (line 1 less line 2)	$

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DIVISION OF REVENUE
P.O. BOX 830, WILMINGTON, DELAWARE 19899-0830

File Online at www.revenue.delaware.gov - It's Quick and Easy!

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