

Delaware	DELAWARE RESIDENT SCHEDULE 1 CREDIT FOR INCOME TAXES PAID TO ANOTHER STATE (Attach to return)	2023
Name(s)	Social Security Number	

		Filing Status 4 ONLY Spouse Information COLUMN A		All other filings statuses You or You plus Spouse COLUMN B	
Tax imposed by State of _____ (enter 2 character state name)			00		00
Tax imposed by State of _____ (enter 2 character state name)			00		00
Tax imposed by State of _____ (enter 2 character state name)			00		00
Tax imposed by State of _____ (enter 2 character state name)			00		00
Tax imposed by State of _____ (enter 2 character state name)			00		00
Tax imposed by State of _____ (enter 2 character state name)			00		00
Tax imposed by State of _____ (enter 2 character state name)			00		00
Tax imposed by State of _____ (enter 2 character state name)			00		00
Tax imposed by State of _____ (enter 2 character state name)			00		00
Tax imposed by State of _____ (enter 2 character state name)			00		00
Tax imposed by State of _____ (enter 2 character state name)			00		00
Tax imposed by State of _____ (enter 2 character state name)			00		00
Tax imposed by State of _____ (enter 2 character state name)			00		00
Tax imposed by State of _____ (enter 2 character state name)			00		00
Tax imposed by State of _____ (enter 2 character state name)			00		00
Tax imposed by State of _____ (enter 2 character state name)			00		00
Tax imposed by State of _____ (enter 2 character state name)			00		00
Total from this page			00		00
Total from all pages			00		00