

DELAWARE 2023
DIVISION OF REVENUE PIT-RES
DELAWARE INDIVIDUAL RESIDENT INCOME TAX RETURN



Column A is for Spouse information, Filing status 4 only. All other filing status use Column B.

COLUMN A

COLUMN B

25. TOTAL TAX - Add Line 23 and Line 24
26a. PERSONAL CREDITS
26b. CHECK BOXES Spouse 60 or over (Column A) Self 60 or over (Column B)
27. TAX IMPOSED BY OTHER STATES
28. VOLUNTEER FIREFIGHTER CO. # Spouse (Column A) Self (Column B)
29. OTHER NON-REFUNDABLE CREDITS
30. CHILD CARE CREDIT. Must attach Form 2441. Enter 50% of Federal credit)
31. TOTAL NON-REFUNDABLE CREDITS
32. BALANCE - Subtract Line 31 from Line 25. If Line 31 is greater than Line 25, enter 0.
33. EARNED INCOME TAX CREDIT REFUNDABLE NON-REFUNDABLE
34. DELAWARE TAX WITHHELD
35. ESTIMATED TAX PAID & PAYMENTS WITH EXTENSIONS
36. S CORP PAYMENTS
37. REFUNDABLE BUSINESS CREDITS
38. CAPITAL GAINS TAX PAYMENTS
39. TOTAL REFUNDABLE CREDITS
40. BALANCE DUE
41. OVERPAYMENT
42. CONTRIBUTIONS TO SPECIAL FUNDS. If electing a contribution, complete and attach PIT-RSS.
43. AMOUNT OF LINE 41 TO BE APPLIED TO 2024 ESTIMATED TAX ACCOUNT
44. PENALTIES AND INTEREST DUE. If Line 40 is greater than \$800, see estimated tax instructions
45. NET BALANCE DUE.
46. NET REFUND.

SECTION E - DIRECT DEPOSIT INFORMATION

If you would like your refund deposited directly to your checking or savings account, complete Section E below. See instructions for details.

ACCOUNT TYPE CHECKING SAVINGS ROUTING NUMBER ACCOUNT NUMBER
Is this refund going to or through an account that is located outside of the United States? YES NO

DMV STATE ID #

BE SURE TO SIGN YOUR RETURN BELOW AND KEEP A COPY FOR YOUR RECORDS

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and believe it is true, correct and complete.

PAID PREPARER INFORMATION

YOUR SIGNATURE DATE PAID PREPARER SIGNATURE DATE
ADDRESS
SPOUSE SIGNATURE DATE CITY STATE ZIP CODE
HOME PHONE NUMBER BUSINESS PHONE NUMBER EIN, SSN or PTIN PHONE NUMBER
EMAIL ADDRESS EMAIL ADDRESS

BALANCE DUE WITH PAYMENT ENCLOSED (LINE 45)
MAIL COMPLETED FORM TO:
Delaware Division of Revenue
PO Box 508, Wilmington, DE 19899-0508
Make check payable to: Delaware Division of Revenue

REFUND (LINE 46)
MAIL COMPLETED FORM TO:
Delaware Division of Revenue
PO Box 8710
Wilmington, DE 19899-8710

ALL OTHER RETURNS
MAIL COMPLETED FORM TO:
Delaware Division of Revenue
PO Box 8711
Wilmington, DE 19899-8711

PLEASE REMEMBER TO ATTACH W-2, 1099-R AND APPROPRIATE SUPPORTING SCHEDULES WHEN FILING YOUR RETURN