

ATTACH LABEL HERE

STAPLE W-2 FORMS HERE

STAPLE CHECK HERE

For Fiscal year beginning MM | DD | YY and ending MM | DD | YY

Your Social Security No. Spouse's Social Security No.

Your Last Name First Name and Middle Initial Jr., Sr., III, etc.

Spouse's Last Name Spouse's First Name, Jr., Sr., III, etc.

Present Home Address (Number and Street) Apt. #

City State Zip Code

Check if FULL-YEAR Non-resident in 2018

FILING STATUS (MUST CHECK ONE)

- 1. Single, Divorced, Widow(er) 3. Married & Filing Separate Forms 2. Joint 5. Head of Household

Form DE2210 If you were a part-year resident in 2018, give the dates you resided in Delaware. From MM | DD 2018 to MM | DD 2018

Attached Month Day Month Day

Table with 3 columns: Line number, Description, and Amount. Includes lines 37-59 for income, deductions, credits, and tax liability.

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. Your Signature Date Spouse's Signature (if filing joint) Date

Home Phone: Business Phone: Email Address: Signature of Paid Preparer Date Address of Paid Preparer

