2020 NR DEI

DELAWARE NON-RESIDENT FORM 200-02, PAGE 2

SEC	TION A - INCOME AND ADJUSTMENTS FROM FEDERAL RETURN		Federal COLUMN 1	Delaware Source Income/Loss COLUMN 2
		1		COLUMN 2
1. 2.	Wages, salaries, tips, etc.			
		_		
3.	Dividends State refunds greatite or offeets of state & legal income tayen			
4.	State refunds, credits or offsets of state & local income taxes			
5.	Alimony received			
6.	Business income or (loss) (See instructions on page 6)			
7a.	Capital gain or (loss)			
7b.	Other gains or (losses)			
8.	IRA distributions			
9.	Taxable pensions and annuities	9		
10.	Rents, royalties, partnerships, S corps, estates, trusts, etc.	10		
11.	Farm income or (loss)	11		
12.	Unemployment compensation (insurance)	12		
13.	Taxable Social Security benefits	13		
14.	Other income (state nature and source)	14		
15.	Total income. Add Lines 1 through 14	15		
16.	Total Federal Adjustments (see instructions on Page 6)	16		
17.	Federal Adjusted Gross Income for Delaware purposes. Subtract Line 16 from 15	17		
SEC	TION B - DELAWARE MODIFICATIONS AND ADJUSTMENTS - ADDITIONS (+)		COLUMN 1	COLUMN 2
18.	Interest received on obligations of any state other than Delaware	18		
19.	Fiduciary adjustment, oil depletion	19		
20.	TOTAL - Add Lines 18 & 19	20		
21.	Add Lines 17 & 20	21		
SEC	TION C - DELAWARE MODIFICATIONS AND ADJUSTMENTS - SUBTRACTIONS (-)		COLUMN 1	COLUMN 2
22.	Interest received on U.S. obligations	22		
23.	Pension/Retirement Exclusions (For a definition of eligible income, see instructions on Page 7)	23		
24.	Delaware State tax refund	24		
25.	Fiduciary Adjustment, Work Opportunity Credit, Delaware NOL Carryforward	25		
26.	Taxable Social Security Benefits/Railroad Retirement Benefits/Higher Education Exclusion			
27.	TOTAL - Add lines 22 through 26	27		
28.	Subtract Line 27 from Line 21 and enter here	28		
29.	Exclusion for certain persons 60 and over or disabled (see instructions on Page 8)	29		
30A	Column 2. Subtract Line 29 from Line 28. This is your modified Delaware Source Income			
JUA	Enter on front side Line 42, Box A		30A	
30B	Column 1. Subtract Line 29 from Line 28. This is your Delaware Adjusted Gross Income			
	Enter on front side Line 37 and Line 42, Box B	30B		
SEC	TION D - ITEMIZED DEDUCTIONS (ATTACH DELAWARE SCHEDULE A)		COLUMN 1	
	,	24	00	
31.	Enter total Itemized Deductions (If Filing Status 3, See instructions on Page 8) Enter Foreign Taxes Paid (See instructions on Page 8)	31		
32.		32		
33.	Enter Charitable Mileage Deduction (See instructions on Page 8)	33		
34.	TOTAL - Add Lines 31, 32, and 33	34		
	F . F . T00 T . O . IVA II	0.5		
35.	Enter Form 700 Tax Credit Adjustment (See instructions on Page 9)	35		
36.	Subtract Line 35 from Line 34. Enter here and on front, Line 38	36		
SEC If you	TION E - DIRECT DEPOSIT INFORMATION u would like your refund deposited directly to your checking or savings account, complete boxes a, b, c, and d below	v. See instruc	ctions for details.	
	a. Routing Number	b.	Type: Checking	Savings
	c. Account Number		Is this refund going to or located outside of the Uni	

NOTE: If your refund is adjusted by \$100.00 or more, a paper check will be issued and mailed to the address on your return.

BALANCE DUE W/PAYMENT ENCLOSED (LINE 58):

DELAWARE DIVISION OF REVENUE P.O. BOX 508, WILMINGTON, DE 19899-0508 REFUND (LINE 59):

DELAWARE DIVISION OF REVENUE P.O. BOX 8710, WILMINGTON, DE 19899-8710 **ALL OTHER RETURNS:**

DELAWARE DIVISION OF REVENUE P.O. BOX 8711, WILMINGTON, DE 19899-8711

No

MAKE CHECK PAYABLE TO: DELAWARE DIVISION OF REVENUE. REMEMBER TO ATTACH APPROPRIATE SUPPORTING SCHEDULES WHEN FILING (Rev 20200323) YOUR RETURN, AND KEEP A COPY OF THE RETURN FOR YOUR RECORDS