2017 DELAWARE NON-RESIDENT SCHEDULES

Schedule

Na	ames:		Social Security Number:	
		COME TAXES PAID TO ANOTHER STA		
	•	worksheet on Page 11 prior to completing	DE Schedule I.	
En	ter the credit in HIGHEST to LOWES	T amount order.		
1.	Tax imposed by State of	(enter 2 character state name)	1	
2.	Tax imposed by State of	(enter 2 character state name)	2	
3.	Tax imposed by State of	(enter 2 character state name)	3	
4.	Tax imposed by State of	(enter 2 character state name)	4	
5.	Tax imposed by State of	(enter 2 character state name)	5	
6.		Line 44. You must attach a copy of the other		
<u>DE</u>	SCHEDULE II - This schedule	does not apply to the Non-resident for	n. It is intentionally excluded.	

DE SCHEDULE III - CONTRIBUTIONS TO SPECIAL FUNDS

See Page 13 for a description of each worthwhile fund listed below.

A. Non-Game Wildlife	Н.	DE National Guard	0.	Senior Trust Fund	
B. U.S. Olympics	l.	Juvenile Diabetes Fund	P.	Veterans Trust Fund	
C. Emergency Housing	J.	Multiple Sclerosis Soc.	Q.	Protect DE's Chld Fnd	
D. Breast Cancer Edu.	K.	Ovarian Cancer Fund	R.	Food Bank of DE	
E. Organ Donations	L.	21st Fund for Children	S.	Ssx Cty Hab for Hum	
F. Diabetes Education	M.	White Clay Creek	T.	Ctrl DE Hab for Hum	
G. Veterans Home	N.	Home of the Brave	U.	NCC Hab for Humanity	

This page MUST be sent in with your Delaware return if any of the Schedules (above) are completed.

(Rev 09/2017)