# **DO NOT STAPLE**



Departmen



Department of Revenue Administration	<b>DP-10</b>	
INTI	REST AND DIVIDENDS TAX RETURN	
For the CALENDAR year <b>2024</b> or other taxable period be		DYYYY
STEP 1 - PRINT OR TYPE Last Name	Due Date for CALENDAR year filers is on or before April 15, 2025 Due Date for FISCAL year	
First Name	MI Social Security Number	filers is the 15th day of the 4th month after the close of the

First Name		MI	Social Security N	umber		Due Date f filers is the 4th m the cl	15, 2025 for FISCAL year 15th day of the onth after ose of the le period.
Spouse's Last Name						in the tax	DIN, use the DIN payer ID box.
First Name		MI	Social Security N	umber			se FEIN or SSN tification Number
Name of Partnership, Estate,	or LLC						
Number & Street Address							
Address (continued)						Unit Type	Unit #
City / Town			Stat	e Zip Code	+ 4 (or Canadiar	Postal Code)	
STEP 2 - RETURN TYP	'E						
ENTITY TYPE - Check O	ne			% of NEW HAMPS Interest in Entity		р	
INDIVIDUAL	JOINT PARTNERSH	HIP/LLC	ESTATE				
INITIAL RETURN	MMDDYYYY	Establish	ned NH Residency	FINAL DECEASE	Date of D	eath	
MMDDYYYY     Social S       FINAL RETURN     Abandoned NH Residency					Social Sec	curity Number	
AMENDED RETURN	IRS ADJUSTMENT: A tax return. <b>Do not use</b>	complete fede • this form to re	ral Revenue Agent Repo eport IRS adjustments	rt (RAR) with all applica for taxable periods e	able Schedules mu nding on or befo	ust be included with <b>re December 31, 2</b> 0	a complete amended N <b>020</b> .





### **STEP 3 - READ INSTRUCTIONS BEFORE YOU BEGIN**

### **INTEREST & DIVIDENDS FROM ALL SOURCES**

1	From Your Federal Income Tax Return: (See Instructions) (a) Interest Income. Enter the amount from Line 2(b) of your federal return		1(a)					
	(b) Dividend Income. Enter the amount from Line 3(b) of your federal return		1(b)					
	(c) Federal Tax-Exempt Interest Income. Enter the amount from Line 2(a) of your federal return		1(c)					
	(d) Subtotal Interest and Dividends Income. (Sum of Lines 1(a), 1(b) and 1(c))	Subtotal	1(d)					

2 List Taxable Annuities or Actual Cash & Property Distributions From S-Corporations, Trusts/Estates, Partnerships, and LLCs:

#### Entity Codes: 2 = S-CORPORATIONS; 3 = PARTNERSHIPS; 4 = TRUSTS OR ESTATES; 5 = LLC; 6 = FOUNDATIONS; 7 = OTHER

<b>I</b> Entity Code	<b>II</b> Name of Payor	III Payor's ID Number	<b>IV</b> Distribution Amount			
	Total from supplemental schedule attached					

Total Distributions (Sum of Column IV above) 2

3

Subtotal Gross Interest and Dividends Income and Distributions (Line 1(d) plus Line 2)

Subtotal 3

#### List payors and amounts of interest and/or dividends NOT TAXABLE to New Hampshire included on Lines 1(a), 1(b), 1(c) and/or 2: 4

2

l Reason Code	<b>II</b> Name of Payor	III Payor's ID Number	<b>IV</b> Non-Taxable Amount

(a) Subtotal of non-taxable income above (Sum of Column IV)	4(a)	
(b) Total non-taxable income from supplemental schedule (Attached)	4(b)	
(c) Non-taxable income (Subtotal of Lines 4(a) plus 4(b))	4(c)	
(d) Part-year resident non-taxable income pro rata share	4(d)	



Round to the nearest whole dollar



#### STEP 3 - READ INSTRUCTIONS BEFORE YOU BEGIN (continued)

	INTEREST & DIVIDENDS FROM ALL SOURCES	Round to the nearest whole dollar
4	Total Non-Taxable Income (Sum of Line 4(c) plus Line 4(d))	4
5	Gross Taxable Income (Line 3 minus Line 4) 5	
6	Less: \$2,400 for Individual, Partnership and Estate; \$4,800 for Joint filers	6
7	Adjusted Taxable Income (Line 5 minus Line 6) If less than zero, use minus sign.       7	
_	Year of Birth	Year of Birth
		5 (or over) or disabled
8	Check the exemptions that apply. Total number of boxes checked x \$1200 =	8
9	<b>Net Taxable Income</b> (Line 7 minus Line 8). If less than zero, use minus sign. 9	



ST	EP 4 - CALCULATE YOUR TAX, CREDITS, INTER		Round to the nearest whole dollar		
10	<b>New Hampshire Interest and Dividends Tax</b> (Line 9 multiplied by 3%)			10	
11	RSA 77-G Education Tax Credit	11			
12	New Hampshire Interest and Dividends Tax Net of Educat Credit (Line 10 minus Line 11. If negative enter zero)	ion Tax		12	
13	Payments: (a) Tax paid with application for extension	13(a)			
	(b) Current year estimated tax payments	13(b)			
	(c) Credit carryover from prior tax period	13(c)		13 Subt	otal of Lines 13(a) through 13(d)
	(d) Paid with original return (Amended returns only)	13(d)			
14	Subtotal Due (Line 12 minus Line 13 Subtotal)			14	
15	Additions to Tax: (a) Interest	15(a)			
	(b) Failure to Pay	15(b)			
	(c) Failure to File	15(c)		15 Subte	otal of Lines 15(a) through 15(d)
	(d) Underpayment of Estimated Tax	15(d)			

#### STEP 5 - CALCULATE YOUR NET BALANCE DUE OR OVERPAYMENT

16 (a) Subtotal Due (Line 14 plus Line 15 Subtotal)	16(a)
(b) Return Payment Made Electronically	16(b)
17 <b>Net Balance Due</b> (Line 16(a) minus Line 16(b)) (Make Check Payable to State of New Hampshire)	17 PAY THIS AMOUNT
18 <b>OVERPAYMENT</b> Refund only	18 <b>DO NOT PAY</b>







Under penalties of perjury, I declare that I have examined this return and to the best of my belief it is true, correct and complete. If prepared by a person other than the taxpayer, this declaration is based on all information of which the preparer has knowledge.

POA: By checking this box and signing below, you authorize us to discuss this return with the preparer listed below.

## **TAXPAYER'S SIGNATURE & INFORMATION**

Signature (in ink)		MMDDYYYY
lf joint return, BOTH parties m Print Signatory Name(s) (and	nust sign, even if only one had income Title if applicable)	MMDDYYYY
Taxpayer's Phone Number	Filing as surviving spouse	Form 1310 attached
PAID PREPARER'S SIGN Signature of Preparer	IATURE & INFORMATION	MMDDYYYY
Printed Name of Preparer		
Preparer's Phone Number Preparer's Address	Preparer Identification Number	
City / Town		State Zip Code + 4 (or Canadian Postal Code)
Mail to: NH DRA PO Box 637	Make Check Payable to: <b>STATE OF NEW HAMPSHIRE</b> Enclose but DO NOT staple or tape yo	FILE ONLINE AT GRANITE TAX CONNECT gtc.revenue.nh.gov/TAP/_/

PO Box 637 Concord NH 03302-0637 Enclose but DO NOT staple or tape your attachments

