

2024 DP-59-A

## PAYMENT FORM AND APPLICATION FOR 7-MONTH EXTENSION OF TIME TO FILE INTEREST AND DIVIDENDS TAX RETURN

## DO NOT FILE THIS FORM IF LINE 3 IS NEGATIVE OR ZERO THIS IS NOT AN EXTENSION OF TIME TO PAY

MAKE YOUR PAYMENTS ONLINE AT GRANITE TAX CONNECT gtc.revenue.nh.gov/TAP/\_/

For the CALENDAR year <b>2024</b> or other taxa MMDDYYYY and end	MMDDYYYY	ENTITY TYPE - Check One Individual/Joint	Partnership/LLC Estate	
Last Name				
First Name	MI Social Securit	ty Number	Taxpayer Identification Number	
Spouse's Last Name			If issued a DIN, use DIN in the	
First Name	MI Social Securit	ty Number	appropriate taxpayer identification box. DO NOT enter SSN or FEIN	
Name of Partnership, Estate, or LLC				
Number & Street Address  Address (continued)				
City / Town		State Zip Code + 4 (or Can	adian Postal Code)	
100% PAYMENT IS DUE ON OR BE	FORE THE DUE DATE OF THE TAX	(	ROUND TO THE NEAREST WHOLE DOLLAR	
File online at Granite Tax Connect gtc.revenue.nh.gov/TAP/_/	1 Enter 100% of the Interest and Dividends Tax determined to be due (net of RSA 77-G Education Tax Credit)			
Make check payable to: State of New Hampshire	2(a) Enter credit carried over from prior year and total estimated tax payments			
Mail to: NH DRA PO BOX 1265	2(b) Enter payment previously made, if applicable			
CONCORD NH 03302-1265  Enclose, but do not staple or tape your	2 Total advance payments and credi (Line 2(a) plus Line 2(b))	ts		
payment to this extension.  If negative or zero DO NOT file this application.	3 NET BALANCE DUE: (Line 1 minus Line 2)	PAY THIS AMO	DUNT	