DO NOT STAPLE

New Hampshire
Department of
Revenue Administration

2020
DP-10

00DP102011862

INTEREST AND DIVIDENDS TAX RETURN

MMDDYYYY   MMDDYYYY

For the CALENDAR year **2020** or other taxable period beginning: [   ]   and ending: [   ]

STEP 1 - PRINT OR TYPE

[ ] **Check box if there has been a name change since last filing.**

Last Name

First Name   MI   Social Security Number

Spouse's Last Name

First Name   MI   Social Security Number

Name of Partnership, Estate, or LLC

Number & Street Address

Address (continued)   Unit Type   Unit #

City / Town   State   Zip Code + 4 (or Canadian Postal Code)

Due Date for CALENDAR year filers is on or before April 15, 2021.
Due Date for FISCAL year filers is the 15th day of the 4th month after the close of the taxable period.

If you have a DIN, use the DIN in the taxpayer ID box. DO NOT use FEIN or SSN
Taxpayer Identification Number

STEP 2 - Return Type and Alternate Address

ENTITY TYPE - Check One

[ ] **1** - INDIVIDUAL   [ ] **1** - JOINT   [ ] **3** - PARTNERSHIP/LLC   [ ] **4** - ESTATE

% of NEW HAMPSHIRE Ownership Interest in Entity Type

Tax Forms Mailing Address, City/Town, State & Zip Code

MMDDYYYY
[ ] INITIAL RETURN [   ]   Established NH Residency   [ ] FINAL DECEASED

Date of Death [   ]

MMDDYYYY
[ ] FINAL RETURN [   ]   Abandoned NH Residency

Social Security Number [   ]

[ ] AMENDED RETURN   **Do not use this form to report IRS adjustments**. See instructions.

Check Appropriate Box(es):

[ ] Payment Required   [ ] Refund Request   [ ] Credit Next Year's Tax Liability   [ ] No Payment Required

INTEREST AND DIVIDENDS TAX RETURN - continued

STEP 3 - Read instructions before you begin

INTEREST & DIVIDENDS FROM ALL SOURCES

Round to the nearest whole dollar

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

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

2 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

4 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:

I Reason Code	II Name of Payor	III Payor's ID Number	IV 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)

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INTEREST AND DIVIDENDS TAX RETURN - continued

STEP 3 - (continued) Read instructions before you begin

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
☐ Blind	☐ Spouse Blind	☐ 65 (or over) or disabled	☐ Spouse 65 (or over) or disabled	

8   Check the exemptions that apply.   Total number of boxes checked   ☐   x $1200 =   8

9   **Net Taxable Income** (Line 7 minus Line 8). If less than zero, use minus sign.   9

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INTEREST AND DIVIDENDS TAX RETURN - continued

STEP 4 - Calculate Your Tax, Credits, Interest and Penalties

Round to the nearest whole dollar

10 **New Hampshire Interest and Dividends Tax**
(Line 9 multiplied by 5%)   10

11 RSA 77-G Education Tax Credit   11

12 **New Hampshire Interest and Dividends Tax Net of Education Tax
Credit** (Line 10 minus Line 11. If negative enter zero)   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 Subtotal 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 Subtotal 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 **Net Balance Due** (Line 16(a) minus Line 16(b))
(Make Check Payable to State of New Hampshire)   17 **PAY THIS AMOUNT**

18 **OVERPAYMENT**
(If balance due is less than zero, enter on Line 18)   18

19 Amount of Line 18 to be applied to:
(a) Credit - Next Year's Tax Liability   19(a) **DO NOT PAY**

(b) **Refund**   19(b) **DO NOT PAY**

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INTEREST AND DIVIDENDS TAX RETURN - continued

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

If joint return, BOTH parties must sign, even if only one had income

MMDDYYYY

Print Signatory Name(s) (and Title if applicable)

Taxpayer's Phone Number

☐ Filing as surviving spouse   ☐ Form 1310 attached

PAID PREPARER'S SIGNATURE & INFORMATION

Signature of Preparer

MMDDYYYY

Printed Name of Preparer

Preparer's Phone Number   Preparer Identification Number

Preparer's Address

City / Town   State   Zip Code + 4 (or Canadian Postal Code)

Mail to:
NH DRA
PO Box 637
Concord NH 03302-0637

Make Check Payable to:
STATE OF NEW HAMPSHIRE
Enclose but DO NOT staple or tape your attachments

FILE ONLINE AT GRANITE TAX CONNECT
www.revenue.nh.gov/gtc

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