

New Hampshire Interest and Dividends Tax Individual Refund Test Case 3 - 2017

This test case is of an individual Interest and Dividends Tax Return with interest, dividend, and tax-exempt interest income amounts carried over from the Federal Return (not included in test scenario). In addition, there are no distributions from other entities reported on Line 2 and tax exempt amounts reported on Line 4. After exemptions, Net Taxable Income is \$24,179 resulting in tax of \$1,209 prior to application of payments of \$1,380.

Federal Forms: Not included

New Hampshire Form(s): DP-10

Taxpayer:

LLLLLL EEEE E

529 W SWANZEY RD

SWANZEY, NH 03446

SSN: TAXPAYER: 400-00-8888

DOB: N/A

Filing Status/Entity Type: Individual

Other: Overpayment of \$171 – requested refund of \$171. No electronic funds transfer available.

DO NOT STAPLE



New Hampshire
Department of
Revenue Administration

2017
DP-10



INTEREST AND DIVIDENDS TAX RETURN

For the CALENDAR year **2017** 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

LLLLLL

First Name

EEEE

MI

E

Social Security Number

4 0 0 0 0 8 8 8 8

Spouse's Last Name

First Name

MI

Social Security Number

Due Date for CALENDAR year filers is on or before April 15, 2018.
Due Date for FISCAL year filers is the 15th day of the 4th month after the close of the taxable period.

Federal Employer ID Number or Department ID Number

Name of Partnership, Estate, or LLC

Number & Street Address

529 W SWANZEY RD

Address (continued)

City / Town

SWANZEY

State

NH

Zip Code + 4 (or Canadian Postal Code)

0 3 4 4 6

STEP 2 - Return Type and Alternate Address

ENTITY TYPE - Check One

1 - INDIVIDUAL 1 - JOINT 3 - PARTNERSHIP 4 - ESTATE

% of NEW HAMPSHIRE Ownership Interest in Entity Type

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

INITIAL RETURN

MMDDYYYY

Established NH Residency

FINAL DECEASED

Date of Death

FINAL RETURN

MMDDYYYY

Abandoned NH Residency

Social Security Number

AMENDED RETURN. DO NOT use this form to report IRS adjustment



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									3	6	0	2	0
5	Gross Taxable Income (Line 3 minus Line 4)	5									2	6	5	7	9
6	Less: \$2,400 for Individual, Partnership and Estate; \$4,800 for Joint filers	6									2	4	0	0	
7	Adjusted Taxable Income (Line 5 minus Line 6) If less than zero, use minus sign.	7									2	4	1	7	9

<input type="checkbox"/>	Blind	<input type="checkbox"/>	Spouse Blind	<input type="checkbox"/>	65 (or over) or disabled	<input type="checkbox"/>	Spouse 65 (or over) or disabled	8							
				Year of Birth											
				Year of Birth											
8	Check the exemptions that apply. Total number of boxes checked <input type="checkbox"/> x \$1200 =							8							
9	Net Taxable Income (Line 7 minus Line 8). If less than zero, use minus sign.	9									2	4	1	7	9



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

0	1	2	8	2	0	1	8
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If joint return, BOTH parties must sign, even if only one had income

MMDDYYYY

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

Taxpayer's Phone Number

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Filing as surviving spouse

Form 1310 attached

PAID PREPARER'S SIGNATURE & INFORMATION

Signature of Preparer

MMDDYYYY

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Printed Name of Preparer

Preparer's Phone Number

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Preparer Identification Number

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Preparer's Address

City / Town

State

Zip Code + 4 (or Canadian Postal Code)

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