# New Hampshire Interest and Dividends Tax Joint Zero Test Case 5 - 2017

This test case is of a joint Interest and Dividends Tax Return with interest and dividend amounts carried over from the Federal Return (not included in test scenario). There are not any federal tax exempt interest 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. However, there are tax exempt amounts reported on Line 4 and Line 4(b). The amount of Line 4(b) requires a supplemental schedule reporting the detail of that amount (feel free to create your own detail). After exemptions on Line 6 of \$4,800, Net Taxable Income is \$104,000 resulting in tax prior to application of payments of \$5,200. The application of \$5,200 in payments from Line 11 results in a zero amount due.

Federal Forms: Not included

New Hampshire Form(s): DP-10

Taxpayer:

YYYYYYYY AAAA B

YYYYYYYYY BBBBB A

1313 MOCKING BIRD LN

LACONIA, NH 03246

SSN: TAXPAYER: 400-00-2222

SPOUSE: 400-00-2223

DOB: N/A

Filing Status/Entity Type: Joint

Other: Balance due \$0

# DO NOT STAPLE



**New Hampshire**Department of
Revenue Administration

2017 **DP-10** 



			MMI	DDYYY	Υ							M۱	NDD'	YYYY					
For the CALENDAR year <b>20</b>	17 or other taxable	e period beginn	ning: 0	1 0	1	2 0	1	7	an	d en	ding:	1	2	3	1 2	2 0	1 7		
TEP 1 - PRINT OR T	YPE	Check bo	ox if there	has b	een a	name	e cha	nge	since	las	filin	g.		Ĩ			4 - C	CALE	NID A
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Spouse's Last Name																	e close kable j		
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BBBBB			Α	4	0	0 0	0	2	2 2	2 3									
Number & Street Address 313 MOCKING BIRD																			
Name of Partnership, Estate Number & Street Address 1313 MOCKING BIRD Address (continued) City/Town						Sta	ate		Zi	ip Cc	•de+•	4 (or	Cana	dian F	Postal	Code)			
Number & Street Address 1313 MOCKING BIRD Address (continued) City/Town						Sta					de + + 3 2			dian ƙ	Postal	Code)			
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Number & Street Address 1313 MOCKING BIRD Address (continued)  City / Town LACONIA  STEP 2 - Return Type ENTITY TYPE - Check (	e and Alternate  One  X 1 - JOINT	<b>3</b> - P. & Zip Code	ARTNERSH Establishe		Resid	NI 4-E	Η			% In	of NE	4 EW H t in E	6 IAMF Entity	SHIRI	E Owi				
Number & Street Address 1313 MOCKING BIRD Address (continued)  City / Town LACONIA  STEP 2 - Return Type ENTITY TYPE - Check Of the continued	e and Alternate  One  X 1 - JOINT  sss, City/Town, State	<b>3</b> - P. & Zip Code	-		Resid	NI 4-E	Η			% In	of NE	4 EW H t in E	6  IAMF	SHIRI Type	E Own				



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# **INTEREST AND DIVIDENDS TAX RETURN - continued**

# STEP 3 - Read instructions before you begin

## **INTEREST & DIVIDENDS FROM ALL SOURCES** Round to the nearest whole dollar From Your Federal Income Tax Return: (See Instructions) 1 2 5 0 0 0 1(a) (a) Interest Income. Enter the amount from Line 8(a) of your federal return 1(b) (b) Dividend Income. Enter the amount from Line 9(a) of your federal return (c) Federal Tax-Exempt Interest Income. Enter the amount from Line 8(b) of your federal return 1(c) 1 3 1 0 0 Subtotal 1(d) (d) Subtotal Interest and Dividends Income. (Sum of Lines 1(a), 1(b) and 1(c))

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	<b>III</b> Payor's ID Number	<b>IV</b> Distribution Amount
	Tot	al from supplemental schedule attached	

2	Total Distributions (Sum of Column IV above)	2
2	Total Distributions (Sum of Column IV above)	2

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:

Reason Cod	ll de Name of Payor	<b>ill</b> Payor's ID Number	<b>IV</b> Non-Taxable Amount
01	RP	1 2 3 4 5 6 7 8 9	2 5 0 0
01	CG	2 3 4 5 6 7 8 9 1	1 6 0 0
03	PC	3 4 5 6 7 8 9 1 2	7 5 0 0
04	WE	5 6 7 8 9 1 2 3 4	8 1 0 0
01	NF	789123456	1 1 0 0

(a) Subtotal of non-taxable income above (Sum of Column IV)	4(a)	20800
(b) Total non-taxable income from supplemental schedule (Attached)	4(b)	1 4 0 0
(c) Non-taxable income (Subtotal of Lines 4(a) plus 4(b))	4(c)	2 2 2 0 0
(d) Part-year resident non-taxable income pro rata share	4(d)	



<sup>3</sup> Subtotal Gross Interest and Dividends Income and Distributions (Line 1(d) plus Line 2) Subtotal 3 1 0 0 0



# **New Hampshire**Department of Revenue Administration

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# **INTEREST AND DIVIDENDS TAX RETURN - continued**

>	TEP 3 - (continued) Read instructions before you begin								
	INTEREST & DIVIDENDS FROM ALL SOURCES		ſ	Round to the	nearest w	hole	e do	llar	
4	Total Non-Taxable Income (Sum of Line 4(c) plus Line 4(d))	4			2	2	2	0	

	Blind	Spouse Blind	65 (or over) or disabled	rear or birth	Spouse 65	or ove	) or disab	oled		Dir					
_				Year of Birth				_	Year of	Bir	th		_	_	_
7	Adjusted Tax	able Income (Line 5 minus	s Line 6) If less than zero, use min	nus sign.	7					1	0	4	0	0	0
6	Less: \$2,400	for Individual, Partnership	and Estate; \$4,800 for Joint filers	S	*		6					4	8	0	0
5	Gross Taxabl	e Income (Line 3 minus Li	ne 4)		5					1	0	8	8	0	0
4	Total Non-Ta	exable Income (Sum of Lin	e 4(c) plus Line 4(d))			4					2	2	2	0	0

x \$1200 =

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

Check the exemptions that apply. Total number of boxes checked

9

1 0 4 0 0 0

MAIL TO:





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# **INTEREST AND DIVIDENDS TAX RETURN - continued**

ST	EP 4 - Calculate Your Tax, Credits, Interest a	nd Penalties							Rou	ınd to	the ne	earest	whol	e do	llar
10	New Hampshire Interest and Dividends Tax (Line 9 multiplied by 5%)							10					5 2	2 0	) (
11	Payments:  (a) Tax paid with application for extension	11(a)		5	2	0	0								
	(b) Current year estimated tax payments	11(b)													
	(c) Credit carryover from prior tax period	11(c)						11 Sub	total	of Line	s 11(a	) thro	ugh 1	1(d)	i .
	(d) Paid with original return (Amended returns only)	11(d)											5 2	2 0	0
12	Subtotal Due (Line 10 minus Line 11 Subtotal)							12							
3	Additions to Tax: (a) Interest	13(a)													
	(b) Failure to Pay	13(b)													
	(c) Failure to File	13(c)						13 Sub	total o	of Line	s 13(a)	) thro	ugh 1	3(d)	
	(d) Underpayment of Estimated Tax	13(d)													
 S1	EP 5 - Calculate Your Net Balance Due or Ov	erpayment											-		
4	(a) Subtotal Due (Line 12 plus Line 13 subtotal)	14(a)													
	(b) Return Payment Made Electronically							14(b)							
5	<b>Net Balance Due</b> (Line 14(a) minus Line 14(b)) (Make Check Payable to State of New Hampshire)			15	PA	ΥT	HIS	S AMOUNT							
6	<b>OVERPAYMENT</b> (If balance due is less than zero, enter on Line 16)	16													
7	Amount of Line 16 to be applied to: (a) Credit - Next Year's Tax Liability							17(a)							
	(b) Refund			17(b)	DC	N	ОТ	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 & INFO	RMATION									
Signature (in ink)			MMDDY	YYY						
			0 3	0 5	2	0	1 8			
If joint return, BOTH parties must sign, eve	en if only one had income		MMDDY	ΎΥΥ						
			0 3	0 5	2	0	1 8	3		
Print Signatory Name(s) (and Title if applications)	able)									
SIGNED										
Taxpayer's Phone Number	Filing as surviving spouse		Form 1310	attache	ed					
DAID DDEDADED'S SIGNATURE &	INFORMATION									
PAID PREPARER'S SIGNATURE & Signature of Preparer	INFORMATION		MMDDY	YYY						
	INFORMATION		MMDDY		2	0	1 8	3	11-2	
	INFORMATION				2	0	1 8	3	1111	
Signature of Preparer	INFORMATION				2	0	1 8	3		
Signature of Preparer  Printed Name of Preparer  ABC PREPARER	INFORMATION  Preparer Identification Number				2	0	1 8	3		
Signature of Preparer  Printed Name of Preparer					2	0	1 8	3		
Signature of Preparer  Printed Name of Preparer  ABC PREPARER  Preparer's Phone Number	Preparer Identification Number				2	0	1 8	3		
Signature of Preparer  Printed Name of Preparer  ABC PREPARER  Preparer's Phone Number  6 0 3 2 3 0 5 0 0 0	Preparer Identification Number				2	0	1 8	3		
Signature of Preparer  Printed Name of Preparer  ABC PREPARER  Preparer's Phone Number  6 0 3 2 3 0 5 0 0 0  Preparer's Address	Preparer Identification Number	State		0 5						