### New Hampshire Interest and Dividends Tax Partnership Credit/Refund Test Case 10 - 2017

This test case is of a partnership Interest and Dividends Tax Return with interest, dividend, and federal tax exempt interest amounts carried over from the Federal Return (not included in test scenario). In addition, there is a distribution from another entity are reported on Line 2. After deduction of the \$2,400 exemption, Adjusted Taxable Income is \$349,250 resulting in tax prior to application of payments of \$17,463.

Federal Forms: Not included

New Hampshire Form(s): DP-10

Taxpayer:

PARTNERSHIP FINANCIAL

**48 ISLINGTON STREET** 

PORTMOUTH, NH 03801

FEIN: 00-2009876

DOB: N/A

Filing Status/Entity Type: Partnership

Other: The \$10,000 Overpayment - \$5,000 is applied as a credit to subsequent period and

\$5,000 is refunded, no electronic funds deposit available.

#### DO NOT STAPLE



### New Hampshire

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### INTEREST AND DIVIDENDS TAX RETURN **MMDDYYYY** MMDDYYYY For the CALENDAR year **2017** or other taxable period beginning: 0 1 0 1 2 0 1 7 and ending: 1 2 3 1 2 0 1 7 **STEP 1 - PRINT OR TYPE** Check box if there has been a name change since last filing. Due Date for CALENDAR Last Name year filers is on or before April 15, 2018. Due Date for FISCAL year First Name Social Security Number MI filers is the 15th day of the 4th month after the close of the Spouse's Last Name taxable period. Federal Employer ID Number or First Name Social Security Number Department ID Number MI 0 0 2 0 0 9 8 7 6 Name of Partnership, Estate, or LLC PARTNERSHIP FINANCIAL Number & Street Address 48 ISLINGTON ST Address (continued) Zip Code + 4 (or Canadian Postal Code) State City / Town NH 0 3 8 0 1 **PORTSMOUTH** STEP 2 - Return Type and Alternate Address % of NEW HAMPSHIRE Ownership Interest in Entity Type ENTITY TYPE - Check One 1 - INDIVIDUAL 1 - JOINT X 3 - PARTNERSHIP 4 - ESTATE Tax Forms Mailing Address, City/Town, State & Zip Code MMDDYYYY Date of Death Established NH Residency FINAL DECEASED **INITIAL RETURN** MMDDYYYY Social Security Number FINAL RETURN Abandoned NH Residency AMENDED RETURN. DO NOT use this form to report IRS adjustment



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

### STEP 3 - Read instructions before you begin

	INTERE	EST & DIVIDENDS FROM	ALL SOURCES	Re	ound to th	e neare	est w	hole	doll	ar	
	r Federal Income Tax Return: (See Instructions) est Income. Enter the amount from Line 8(a) of you	r federal return		1(a)			8	6	3	5	
(b) Divid	end Income. Enter the amount from Line 9(a) of yo	our federal return		1(b)			1	2	3	0	
(c) Feder	al Tax-Exempt Interest Income. Enter the amount	rom Line 8(b) of your federal re	eturn	1(c)				1	5	0	
(d) Subto	otal Interest and Dividends Income. (Sum of Lines	(a), 1(b) and 1(c))	Subtotal	1(d)		1	0	0	1	5	
	le Annuities or Actual Cash & Property Distribution odes: 2 = S-CORPORATIONS; 3 = PARTNERSHIPS				OTHER						
l Entity Code	<b>II</b> Name of Payo	r	ffil Payor's ID Nu	mber	Dis	l tributi	IV on A	mou	nt		
2	PAYOR 1		111111	111			:	2 5	1	5 (	
		Total from s	upplemental schedule a — —	attached							
Total Distr	ributions (Sum of Column IV above)	2	2 5 1 5 (	0 0							
	Gross Interest and Dividends Income and Distribut	ions (Line 1(d) plus Line 2)	Subtota			3	5	1	6	5	
	s and amounts of interest and/or dividends NOT T				2:		,	,		-	
E	II.		III			<b>IV</b> Non-Taxable Amount					
Reason Code	Name of Payo	or	Payor's ID Nu	imber	No	n-Taxa	ble	Amoi	unt		
	iX + History										

(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**

9	STEP 3 - (continued) Read instructions before you begin							
	INTEREST & DIVIDENDS FROM	ALL SOURCES	Round	I to the nearest	wh	ole d	lollar	
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		3 !	5	1 6	5 5	0
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		3 4	1 9	9 2	2 5	0
_	Year of Birth			Year of Birt	h			
	Blind Spouse Blind 65 (or over) or disabled	Spouse 65 (or over	) or disabled	4				
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		3 4	4	9	2 5	0





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

S1	TEP 4 - Calculate Your Tax, Credits, Interest a	nd Penalties					Roun	d to the near	est	who	le d	lolla	r
10	New Hampshire Interest and Dividends Tax (Line 9 multiplied by 5%)						10		1	7	4	6	3
11	Payments: (a) Tax paid with application for extension	11(a)											
	(b) Current year estimated tax payments	11(b)											
	(c) Credit carryover from prior tax period	11(c)		5	0	0 0	11 Subtotal of	Lines 11(a) t	hroi	ugh	11(0	d)	
	(d) Paid with original return (Amended returns only)	11(d)								5 (	0	0	0
12	Subtotal Due (Line 10 minus Line 11 Subtotal)						12		1	2 4	4	6	3
13	Additions to Tax: (a) Interest	13(a)											
	(b) Failure to Pay	13(b)											
	(c) Failure to File	13(c)					13 Subtotal of	Lines 13(a) tl	nrou	ugh '	13(c	d)	
	(d) Underpayment of Estimated Tax	13(d)											
S1	TEP 5 - Calculate Your Net Balance Due or Ov	erpayment											
14	(a) Subtotal Due (Line 12 plus Line 13 subtotal)	14(a)	1	2	4	6 3							
	(b) Return Payment Made Electronically						14(b)		2	2	4	6	3
15	Net Balance Due (Line 14(a) minus Line 14(b)) (Make Check Payable to State of New Hampshire)			15	PA	Y TH	IS AMOUNT						
16	OVERPAYMENT (If balance due is less than zero, enter on Line 16)	16	1	0	0	0 0							
17	Amount of Line 16 to be applied to: (a) Credit - Next Year's Tax Liability						17(a)			5	0	0	0
	(b) Refund		1	17(b)	DC	NOT	<b>PAY</b>			5	0	0	0



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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.)

TAXPAYER'S SIGNATURE & INFOR	MATION		
Signature (in ink)			MMDDYYYY
			0 3 0 1 2 0 1 8
If joint return, BOTH parties must sign, ever	n if only one had income	۸	MMDDYYYY
Print Signatory Name(s) (and Title if applica	ble)		
TEST SIGNED			
	Filing as surviving spouse	1011	n 1310 attached
PAID PREPARER'S SIGNATURE & II Signature of Preparer	NFORMATION		MMDDYYYY
Signature of Preparer	NFORMATION		
	NFORMATION		
Signature of Preparer	NFORMATION  Preparer Identification Number		
Signature of Preparer  Printed Name of Preparer			
Signature of Preparer  Printed Name of Preparer  Preparer's Phone Number			



