





1 ESTIMATED	TAX BASE AND/OR TAXABLE BUSINESS PROFITS	BET (a)	BPT (b)
(a) BET Ta	xable Base After Apportionment		
(b) New H	ampshire Taxable Business Profits After Apportionment		
2 TAX			
(a) Line 1(a) x .0055		
(b) Line 1	b) x .075		
3 CREDITS			
(a) RSA 16	2-L:10 (CDFA Investment Tax Credit)		
(b) RSA 16	2-N (Economic Revitalization Zone Tax Credit)		
(c) RSA 16	2-P (Research & Development Tax Credit)		
(d) RSA 16	2-Q (Coos County Job Creation Tax Credit)		
(e) RSA 77	-G (Education Tax Credit)		
(f) RSA 40	0-A (Insurance Tax Credit)		
(g) RSA 77	-A:5, X (BET Credit)		
(h) RSA 18	8-E:9-a (CTE Centers Tax Credit)		
(i) RSA 21- Tax Cre	:103 (Granite State Paid Family and Medical Leave Plan dit)		
(j) Total C	redits (Sum of Lines 3(a) through 3(i))		
4 ESTIMATED	TAX FOR THE CURRENT YEAR (Line 2 minus Line 3(j))		
5 OVERPAYM	IENT FROM PREVIOUS TAXABLE PERIOD		
6 BALANCE C	OF BUSINESS TAXES DUE (Line 4 minus Line 5)		

COMPUTATION AND RECORD OF PAYMENTS

	Date Paid	Amount of Each Installment BET (1/4 of Line 6 above) BPT	Total Due (BET and/or BPT)	Calendar Year Dates	
1				April 15, 2024	
2				June 15, 2024	
3				Sept. 15, 2024	
1				Dec. 15, 2024	

IMPORTANT THE PENALTY PROVISIONS OF RSA 21-J:32 WILL APPLY IF THE ESTIMATE REQUIREMENTS HAVE NOT BEEN MET

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





2024 NH-1040-ES

	Ν	MMDDYYYY		MMDDYY	ſY
For the CALENDAR year 2024 or other t	axable period beginning:			and ending:	
Proprietor's Last Name					Taxpayer Identification Number
First Name	MI	Social Sec	urity Number		If issued a DIN, use the DIN in the appropriate taxpayer identification box. DO NOT enter SSN or FEIN
Limited Liability Company					
Number & Street Address					
Address (continued)					
City / Town			State	Zip Code + 4 (or Canadian	Postal Code)
	DO NO	DT CUT. SUBMI	T THIS ENTIRE PA	AGE.	
	T GRANITE TAX CC evenue.nh.gov/gto				
Or mail to: NH DRA		k Payable to:		1/4 BET 1	
PO Box 1265 Concord NH 03302-1265	Enclose, but do not stap			1/4 BPT 2	
				Amount of Payment ³	
					DO NOT FILE A \$0 ESTIMATE



2024 NH-1040-ES

	MMI	DDYYYY		MMDDYY	YY
For the CALENDAR year 2024 or other t	axable period beginning:			and ending:	
Proprietor's Last Name					Taxpayer Identification Number
First Name	MI	Social Secur	ity Number		If issued a DIN, use the DIN in the appropriate taxpayer identification box. DO NOT enter SSN or FEIN
Limited Liability Company					
Number & Street Address					
Address (continued)					
City / Town			State	Zip Code + 4 (or Canadian	Postal Code)
	DO NOT C	.ut. submit	THIS ENTIRE PA	AGE.	
	T GRANITE TAX CON	NECT			
Or mail to:	evenue.nh.gov/gtc Make Check Pa	ayable to:		1/4 BET 1	
NH DRASTATE OPO Box 1265Enclose, but do no		HAMPSHIRE or tape your mate.	payment	1/4 BPT 2	
				Amount of Payment ³	
					DO NOT FILE A \$0 ESTIMATE





		MMDDYYYY	,		MMD	DYYYY				
For the CALENDAR year 2024 or other t	axable period beginning:			ar	nd ending:					
Proprietor's Last Name						T	「axpayer l	dentifica	tion Nu	ımber
First Name	MI	Social	Security Num	ber			ide	a DIN, u propriat entificati T enter S	te taxp ion box	ayer
Limited Liability Company										
Number & Street Address										
Address (continued)										
City / Town			State	Zip	Code + 4 (or Canad	lian Pos	tal Code)			
	DO	NOT CUT. SUB	MIT THIS ENT	RE PAGE.						
	T GRANITE TAX C									
www.r	evenue.nh.gov/g				1/4 BET	1				
Or mail to: NH DRA PO Box 1265 Concord NH 03302-1265	NH DRASTATE OF NPO Box 1265Enclose, but do not st	eck Payable to: IEW HAMPSHIRE taple or tape your payment is estimate.		:	1/4 BPT	2				
					Amount of Payment					
						D	O NOT	FILE A :	\$0 ES	TIMATE



		MMDDYYYY	MMI	DDYYYY
For the CALENDAR year 2024 or other t	axable period beginning:		and ending:	
Proprietor's Last Name				Taxpayer Identification Number
First Name	MI	Social Security Nur	nber	If issued a DIN, use the DIN in the appropriate taxpayer identification box. DO NOT enter SSN or FEIN
Limited Liability Company				
Number & Street Address				
Address (continued)				
City / Town		State	Zip Code + 4 (or Can	adian Postal Code)
	DO N	OT CUT. SUBMIT THIS EN	TIRE PAGE.	
	T GRANITE TAX Co evenue.nh.gov/gt			
Or mail to:	Make Che	ck Payable to:	1/4 B	ET 1
NH DRA PO Box 1265 Concord NH 03302-1265	Enclose, but do not sta	EW HAMPSHIRE ple or tape your paymer estimate.	nt 1/4 Bl	PT 2
			Amount Payme	
				DO NOT FILE A \$0 ESTIMATE



Revenue Administration

WHO MUST PAY ESTIMATED TAX

Every entity required to file a Business Profits Tax (BPT) return and/or Business Enterprise Tax (BET) return must also make estimated tax payments for each individual tax for its subsequent taxable period, unless the annual estimated tax for the subsequent taxable period is:

2024

NH-1040-ES

- less than \$200 for Business Profits tax.
- less than \$260 for Business Enterprise tax.

WHERE TO MAKE PAYMENTS

Make estimated tax payments on-line at Granite Tax Connect www.revenue.nh.gov/gtc or mail to NH DRA, PO Box 1265, Concord, NH 03302-1265.

WHEN TO MAKE PAYMENTS

Note: If the 15th falls on a Saturday, Sunday, or legal holiday, the estimated tax payment is due on the next business day.

CALENDAR YEAR FILERS:

1st quarterly estimated tax payment is due April 15, 2024 2nd quarterly estimated tax payment is due June 15, 2024 3rd quarterly estimated tax payment is due September 15, 2024 4th quarterly estimated tax payment is due December 15, 2024

FISCAL YEAR FILERS:

A quarterly estimated tax payment is due on or before the 15th day of the 4th, 6th, 9th, and 12th months of the taxable period to which the estimated tax payment relates. **FISCAL YEAR FILERS MUST ENTER THE TAX PERIOD ON EACH ESTIMATED TAX PAYMENT FORM.**

PAYMENT OF ESTIMATED TAX

Estimated tax may be paid in full with the initial declaration, or in installments on the required quarterly due dates. If paying in full, only one payment form is required. By utilizing Granite Tax Connect at www.revenue.nh.gov/gtc, you may authorize the Department of Revenue Administration (DRA) to automatically withdraw estimate payments from your account electronically. Simply specify each date for which you would like a payment to be withdrawn from your account and each payment will be withdrawn on those dates.

UNDERPAYMENT OF ESTIMATED TAX PENALTY

A penalty may be imposed under RSA 21-J:32 for an underpayment of estimated taxes if the payments are less than 90% of that tax period's tax liability. If estimated tax payments are not made on time, even if 90% of the tax is eventually paid, an underpayment penalty may be assessed. If an estimated tax payment is missed, send the payment as soon as possible to reduce any penalty. **This penalty will not be imposed if any of the statutory exceptions are met.** See "Exceptions to the Underpayment of Estimated Tax Penalty" below.

EXCEPTIONS TO THE UNDERPAYMENT OF ESTIMATED TAX PENALTY

The underpayment of estimated tax penalty shall not apply if you meet one of the exceptions provided in RSA 21-J:32. Use Form DP-2210/2220 to determine whether you have met one of the exceptions or to compute the amount of the penalty associated with the underpayment of estimated tax. This form may be obtained from our website <u>www.revenue.nh.gov</u> or by calling the Forms Line at (603) 230-5001.

NOTE: BET FILING THRESHOLDS CHANGED

Please note for taxable periods beginning on or after January 1, 2023, the filing thresholds for the Business Enterprise Tax have increased to:

- Gross business receipts in excess of \$281,000 (from \$250,000)
- Enterprise value tax base greater than \$281,000 (from \$250,000)

NOTE: BPT FILING THRESHOLDS CHANGED

Please note for taxable periods beginning on or after January 1, 2023, the filing threshold for the Business Profits Tax has increased to:

Gross business income in excess of \$103,000 (from \$92,000)

NEED HELP?

Call the Department of Revenue Administration, Taxpayer Services at (603) 230-5920. Individuals with hearing or speech impairments may call TDD Access: Relay NH 1-800-735-2964.

