

DO NOT STAPLE



New Hampshire  
Department of  
Revenue Administration

2023  
DP-10

INTEREST AND DIVIDENDS TAX RETURN

MMDDYYYY

MMDDYYYY

For the CALENDAR year **2023** 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

Due Date for CALENDAR  
year filers is on or before  
April 15, 2024

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

Name of Partnership, Estate, or LLC

Number & Street Address

Address (continued)

Unit Type

Unit #

City / Town

State

Zip Code + 4 (or Canadian Postal Code)

STEP 2 - Return Type

ENTITY TYPE - Check One

☐ 1 - INDIVIDUAL

☐ 1 - JOINT

☐ 3 - PARTNERSHIP/LLC

☐ 4 - ESTATE

% of NEW HAMPSHIRE Ownership  
Interest in Entity Type

☐ INITIAL RETURN

MMDDYYYY

Established NH Residency

☐ FINAL DECEASED

Date of Death

☐ FINAL RETURN

MMDDYYYY

Abandoned NH Residency

Social Security Number

☐ AMENDED RETURN

☐

IRS ADJUSTMENT: A complete federal Revenue Agent Report (RAR) with all applicable Schedules must be included with a complete amended NH tax return. Do not use this form to report IRS adjustments for taxable periods ending on or before December 31, 2020.



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	
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3	Subtotal Gross Interest and Dividends Income and Distributions (Line 1(d) plus Line 2)	Subtotal 3	
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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)



**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	<input type="text"/>
5	Gross Taxable Income (Line 3 minus Line 4)	5	<input type="text"/>
6	Less: \$2,400 for Individual, Partnership and Estate; \$4,800 for Joint filers	6	<input type="text"/>
7	Adjusted Taxable Income (Line 5 minus Line 6) If less than zero, use minus sign.	7	<input type="text"/>

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



INTEREST AND DIVIDENDS TAX RETURN - continued

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

Round to the nearest whole dollar

10	<b>New Hampshire Interest and Dividends Tax</b> (Line 9 multiplied by 4%)		10	
11	RSA 77-G Education Tax Credit	11		
12	<b>New Hampshire Interest and Dividends Tax Net of Education Tax Credit</b> (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)		
	(d) Paid with original return (Amended returns only)	13(d)		
			13	Subtotal of Lines 13(a) through 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)		
	(d) Underpayment of Estimated Tax	15(d)		
			15	Subtotal of Lines 15(a) through 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	<b>Net Balance Due</b> (Line 16(a) minus Line 16(b)) (Make Check Payable to State of New Hampshire)		17 <b>PAY THIS AMOUNT</b>
18	<b>OVERPAYMENT</b> (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 ( <b>Not available for Federal RAR</b> )	19(a) <b>DO NOT PAY</b>	
	(b) Refund ( <b>Only option available for Federal RAR</b> )	19(b) <b>DO NOT PAY</b>	



**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**  
**[gta.revenue.nh.gov/TAP/\\_/](https://gta.revenue.nh.gov/TAP/_/)**