

NEW HAMPSHIRE DEPARTMENT OF REVENUE ADMINISTRATION
INTEREST AND DIVIDENDS TAX
REPORT OF CHANGE FOR IRS ADJUSTMENT ONLY

FOR DRA USE ONLY

For the CALENDAR year _____ or other taxable period beginning _____ Mo Day Year _____ and ending _____ Mo Day Year _____

STEP 1 Please Print or Type	LAST NAME	FIRST NAME & INITIAL	SOCIAL SECURITY NUMBER
	LAST NAME	FIRST NAME & INITIAL	SPOUSE'S SOCIAL SECURITY NUMBER
	NAME OF PARTNERSHIP OR FIDUCIARY		FEIN OR DIN
	NUMBER & STREET ADDRESS		
	ADDRESS (Continued)		
	CITY/TOWN, STATE & ZIP CODE		

STEP 2
Entity
Type

<input type="checkbox"/> ① INDIVIDUAL	<input type="checkbox"/> ③ PARTNERSHIP	} _____ % of NEW HAMPSHIRE Ownership Interest
<input type="checkbox"/> ② JOINT	<input type="checkbox"/> ④ FIDUCIARY	

STEP 3
IRS
Adjust-
ments

1	FROM YOUR FEDERAL FORM 1040 INCOME TAX RETURN: As originally filed or previously adjusted		
	(a) INTEREST INCOME	1(a)	
	(b) DIVIDEND INCOME	1(b)	
	(c) FEDERAL TAX EXEMPT INTEREST INCOME	1(c)	
	(d) SUBTOTAL INTEREST AND DIVIDEND INCOME [Sum of Lines 1(a), 1(b) and 1(c)]	1(d)	
2	TOTAL DISTRIBUTIONS As originally filed or previously adjusted	2	
3	SUBTOTAL INTEREST & DIVIDENDS INCOME AND DISTRIBUTIONS As adjusted (Line 1(d) plus Line 2)	3	
4	INTERNAL REVENUE SERVICE ADJUSTMENTS TO FEDERAL INCOME:		
	(a) AMOUNT OF CHANGE TO INTEREST INCOME from Page 2, Section 1, Line 1	4(a)	
	(b) AMOUNT OF CHANGE TO DIVIDEND INCOME from Page 2, Section 2, Line 2.	4(b)	
	(c) AMOUNT OF CHANGE TO FEDERAL EXEMPT INTEREST INCOME from Page 2, Section 3, Line 3	4(c)	
	(d) AMOUNT OF CHANGE TO OTHER INCOME from Page 2, Section 4, Line 4	4(d)	
	(e) SUBTOTAL (combine Lines 4(a), 4(b), 4(c) and 4(d)	4(e)	
5	TOTAL NON-TAXABLE INCOME As originally filed or previously adjusted	5	
6	GROSS TAXABLE INCOME AS ADJUSTED BY IRS ADJUSTMENTS (Line 3 minus Line 5) ...	6	
7	LESS: \$2,400 for Individual, Partnership and Fiduciary; \$4,800 for Joint filers	7	
8	ADJUSTED TAXABLE INCOME (Line 5 minus Line 6). If negative show in parenthesis	8	
9	CONTRIBUTIONS MADE PRIOR TO 5/24/04 TO A QUALIFIED INVESTMENT CAPITAL COMPANY	9	
10	CHECK THE EXEMPTIONS THAT APPLY.		
	<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		
	Year of birth _____ Year of birth _____		
	Multiply the total number of boxes checked above _____ x 1,200 =	10	
11	NET TAXABLE INCOME (Line 8 minus Line 9) If less than zero, enter amount in parenthesis	11	

STEP 4
Figure
Your Tax,
Interest
and
Penalties

12	NEW HAMPSHIRE INTEREST AND DIVIDENDS TAX AS ADJUSTED BY IRS ADJUSTMENTS ..	12	
	(Line 11 multiplied by 5%)		
13	NEW HAMPSHIRE INTEREST AND DIVIDENDS TAX As originally filed or previously adjusted ...	13	
14	BALANCE OF TAX DUE (Line 12 minus Line 13)	14	
15	INTEREST DUE (see DP-87 instructions)	15	
16	BALANCE DUE (Line 14 plus Line 15)	16	
	(If less than \$1.00 do not pay) PAY THIS AMOUNT →		
17	REFUND DUE (Line 13 adjusted by Line 12)	17	

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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.

X _____ Date _____ Signature (in ink) AND TITLE IF FIDUCIARY Date _____ Signature (in ink) of Paid Preparer Other Than Taxpayer Date _____

If joint return, BOTH parties must sign, even if only one had income _____ Date _____ Preparer's Tax Identification Number _____

NH DEPT OF REVENUE ADMINISTRATION
MAIL AUDIT DIVISION
TO: PO BOX 457
CONCORD NH 03302-0457

Preparer's Address _____
City/Town, State & Zip Code _____

REPORT OF CHANGE FOR IRS ADJUSTMENT ONLY

SECTION 1 IRS ADJUSTMENTS TO INTEREST INCOME.

If the number of adjustments exceed the lines provided, attach a schedule and summarize on Line E

	ADJUSTMENT DESCRIPTION	REPORTED	AMOUNT OF CHANGE	BALANCE AFTER CHANGE
A				
B				
C				
D				
E	Total from attached schedule			

Line 1 Enter total of Lines A through E here and on Page 1, Line 4(a) 1

SECTION 2 IRS ADJUSTMENTS TO DIVIDEND INCOME.

If the number of adjustments exceed the lines provided, attach a schedule and summarize on Line E

	ADJUSTMENT DESCRIPTION	REPORTED	AMOUNT OF CHANGE	BALANCE AFTER CHANGE
A				
B				
C				
D				
E	Total from attached schedule			

Line 2 Enter total of Lines A through E here and on Page 1, Line 4(b) 2

SECTION 3 IRS ADJUSTMENTS TO FEDERAL EXEMPT INTEREST INCOME.

If the number of adjustments exceed the lines provided, attach a schedule and summarize on Line E

	ADJUSTMENT DESCRIPTION	REPORTED	AMOUNT OF CHANGE	BALANCE AFTER CHANGE
A				
B				
C				
D				
E	Total from attached schedule			

Line 3 Enter total of Lines A through E here and on Page 1, Line 4(c) 3

SECTION 4 IRS ADJUSTMENTS TO OTHER INCOME SUBJECT TO INTEREST AND DIVIDENDS TAX. (see instructions).

If the number of adjustments exceed the lines provided, attach a schedule and summarize on Line E

	ENTITY TYPE	PAYER'S IDENTIFICATION ADJUSTMENT DESCRIPTION	NAME OF PAYER	AMOUNT OF CHANGE	BALANCE AFTER CHANGE
A					
B					
C					
D					
E	Total from attached schedule				

Line 4 Enter total of Lines A through E here and on Page 1, Line 4(d) 4