FORM

NEW HAMPSHIRE DEPARTMENT OF REVENUE ADMINISTRATION

INTEREST AND DIVIDENDS TAX

REPORT OF CHANGE FOR IRS ADJUSTMENT ONLY

For the CALENDAR year ______ or other taxable period beginning ______ and ending ______

Mo Day Year Mo Day Year

FOR DRA USE ONLY

STEP 1
LAST NAME FIRST NAME & INITIAL TAXPAYER IDENTIFICATION NUMBER
SPouse’s LAST NAME FIRST NAME & INITIAL TAXPAYER IDENTIFICATION NUMBER
NAME OF PARTNERSHIP OR FIDUCIARY TAXPAYER IDENTIFICATION NUMBER

STEP 2 Entity Type
INDIVIDUAL 
PARTNERSHIP
% of NEW HAMPSHIRE Ownership Interest

STEP 3 IRS Adjustments
1 FROM YOUR FEDERAL INCOME TAX RETURN: As originally filed or previously adjusted
(a) INTEREST INCOME [from DP-10, Page 2, Line 1(a)] ..................................................... 1(a)
(b) DIVIDEND INCOME [from DP-10, Page 2, Line 1(b)] ..................................................... 1(b)
(c) FEDERAL EXEMPT INTEREST INCOME [from DP-10, Page 2, Line 1(c)] ................ 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 [from DP-10, Page 2, Line 2] 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: 4
(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 Subtotal Interest & Dividends Income and Distribution as adjusted by IRS adjustments
Line 3 adjusted by Line 4(e) ..................................................................................................... 5
6 TOTAL NON-TAXABLE INCOME as originally filed or previously adjusted (from DP-10, Pg 2, Line 4) .... 6
7 GROSS TAXABLE INCOME AS ADJUSTED BY IRS ADJUSTMENTS (Line 5 minus Line 6) ............. 7
8 LESS: $2,400 for Individual, Partnership and Fiduciary; $4,800 for Joint filers ................................. 8
9 ADJUSTED TAXABLE INCOME (Line 7 minus Line 8). If negative show in parenthesis .......... 9

10 CHECK THE EXEMPTIONS THAT APPLY.
[ ] Blind [ ] Spouse Blind [ ] 65 (or over) or disabled [ ] Spouse 65 (or over) or disabled

Year of birth __________ Year of birth __________

Multiply the total number of boxes checked above ________ x 1,200 =

11 NET TAXABLE INCOME (Line 9 minus Line 10) 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
(Line 11 multiplied by 5%) ........................................................................................................ 12
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) (If less than $1.00 do not pay) ........................................ 16
17 REFUND DUE (Line 13 adjusted by Line 12) ........................................................................... 17

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.

Signature (in Ink) AND TITLE IF FIDUCIARY Date

Signature (in Ink) AND TITLE IF Preparer Other Than Taxpayer Date

If joint return, BOTH parties must sign, even if only one had income Date

Print Preparer's Name & Tax Identification Number

Preparer's Address

City/Town, State & Zip Code +4

NH DRA
MAIL TAXPAYER SERVICES TO: PO BOX 3306
CONCORD NH 03302-3306

DP-87 ID
Rev 07/2017
SECTION 1  IRS ADJUSTMENTS TO INTEREST INCOME.
If the number of adjustments exceed the lines provided, attach a schedule and summarize on Line E

<table>
<thead>
<tr>
<th>ADJUSTMENT DESCRIPTION</th>
<th>REPORTED</th>
<th>AMOUNT OF CHANGE</th>
<th>BALANCE AFTER CHANGE</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
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<tr>
<td>E Total from attached schedule</td>
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</tbody>
</table>

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

<table>
<thead>
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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

<table>
<thead>
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<td>E Total from attached schedule</td>
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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

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