

Header section containing personal information: Name (ANTHONY WEBSTER), Spouse's Name, Home Address (919 N PORTER ST HUDSON NH 03051-), City, State, and ZIP Code, and Social Security Numbers.

Presidential Election Campaign section with checkboxes for 'You' and 'Spouse'.

Filing Status section with options: Single, Married filing jointly, Married filing separately, and Qualifying widow(er).

Exemptions section including checkboxes for 'Yourself' and 'Spouse', and a table for dependents with columns for name, SSN, and relationship.

Income section with a table listing various income sources (7-22) and their taxable amounts, including wages, interest, dividends, and other income.

Adjusted Gross Income section with a table listing deductions (23-37) and the final adjusted gross income amount.

Tax and Credits	38	Amount from line 37 (adjusted gross income)	38	24,782.
	39a	Check <input type="checkbox"/> You were born before Jan. 2, 1946, <input type="checkbox"/> Blind. <input type="checkbox"/> Total boxes checked <input type="checkbox"/> 39a		
		if: <input type="checkbox"/> Spouse was born before Jan. 2, 1946, <input type="checkbox"/> Blind.		
	b	If your spouse itemizes on a separate return or you were a dual-status alien, see instructions and check here <input type="checkbox"/> 39b		
	40	Itemized deductions (from Schedule A) or your standard deduction (see instructions)	40	8,400.
	41	Subtract line 40a from line 38	41	16,382.
	42	Exemptions. Multiply \$3,650 by the number on line 6d	42	3,650.
	43	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-	43	12,732.
	44	Tax (see instructions). Check if any tax is from: a <input type="checkbox"/> Form(s) 8814 b <input type="checkbox"/> Form 4972	44	1,311.
	45	Alternative minimum tax (see instructions). Attach Form 6251	45	
	46	Add lines 44 and 45	46	1,311.
	47	Foreign tax credit. Attach Form 1116 if required	47	30.
	48	Credit for child and dependent care expenses. Attach Form 2441	48	
	49	Education credits from Form 8863, line 23	49	
	50	Retirement savings contributions credit. Attach Form 8880	50	
51	Child tax credit (see instructions)	51		
52	Residential energy credits. Attach Form 5695	52		
53	Other credits from Form: a <input type="checkbox"/> 3800 b <input type="checkbox"/> 8801 c <input type="checkbox"/>	53		
54	Add lines 47 through 53. These are your total credits	54	30.	
55	Subtract line 54 from line 46. If line 54 is more than line 46, enter -0-	55	1,281.	
Other Taxes	56	Self-employment tax. Attach Schedule SE	56	
	57	Unreported social security and Medicare tax from Form: a <input type="checkbox"/> 4137 b <input type="checkbox"/> 8919	57	
	58	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required	58	
	59	a <input type="checkbox"/> Form(s) W-2, box 9 b <input type="checkbox"/> Schedule H c <input type="checkbox"/> Form 5405, line 16	59	
	60	Add lines 55 through 59. This is your total tax	60	1,281.
Payments	61	Federal income tax withheld from Forms W-2 and 1099	61	2,691.
	62	2010 estimated tax payments and amount applied from 2009 return	62	
	63	Making work pay and government retiree credits. Attach Schedule M	63	400.
	64 a	Earned income credit (EIC) NO	64a	
	b	Nontaxable combat pay election 64b		
	65	Additional child tax credit. Attach Form 8812	65	
	66	American opportunity credit from Form 8863, line 14	66	
	67	First-time homebuyer credit from Form 5405, line 10	67	
	68	Amount paid with request for extension to file (see inst.)	68	
	69	Excess social security and tier 1 RRTA tax withheld (see inst.)	69	
	70	Credit for federal tax on fuels. Attach Form 4136	70	
	71	Credits from Form: a <input type="checkbox"/> 2439 b <input type="checkbox"/> 8839 c <input type="checkbox"/> 8801 d <input type="checkbox"/> 8885	71	
72	Add lines 61, 62, 63, 64a and 65 through 71. These are your total payments	72	3,091.	
Refund	73	If line 72 is more than line 60, subtract line 60 from line 72. This is the amount you overpaid	73	1,810.
	74 a	Amount of line 73 you want refunded to you. If Form 8888 is attached, check here <input type="checkbox"/>	74a	1,810.
	b	Routing number 062005690 c Type: <input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings		
	d Account number 00578965542			
	Amount of line 73 you want applied to your 2011 estimated tax	75		
Amount You Owe	76	Amount you owe. Subtract line 72 from line 60. For details on how to pay, see inst.	76	
	77	Estimated tax penalty (see instructions)	77	

If you have a qualifying child, attach Schedule EIC.

Third Party Designee Do you want to allow another person to discuss this return with the IRS (see instructions)? Yes. Complete the following. No

Designee's name _____ Phone no. _____
 Personal identification number (PIN) _____

Sign Here Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your signature	Date	Your occupation	Daytime phone number
_____	_____	GEN CONTRACTOR	603-888-8888
Spouse's signature. If a joint return, both must sign.	Date	Spouse's occupation	
_____	_____		

Paid Preparer's Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN S12052601
	Firm's name	NASHUA SENIOR CENTER			Firm's EIN
	Firm's address	70 TEMPLE STREET NASHUA NH 03060			Phone no.

SCHEDULE B
(Form 1040A or 1040)

Department of the Treasury
Internal Revenue Service (99)

Interest and Ordinary Dividends

▶ **Attach to Form 1040A or 1040.** ▶ **See Instructions**

OMB No. 1545-0074

2010
Attachment
Sequence No. **08**

Name(s) shown on return
ANTHONY WEBSTER

Your social security number
151-69-1253

Part I
Interest

(See instructions and the instructions for Form 1040A, or Form 1040, line 8a.)

Note. If you received a Form 1099-INT, Form 1099-OID, or substitute statement from a brokerage firm, list the firm's name as the payer and enter the total interest shown on that form.

		Amount
1 List name of payer. If any interest is from a seller-financed mortgage and the buyer used the property as a personal residence, see instructions and list this interest first. Also, show that buyer's social security number and address ▶ HAMPTON FIRST NATL B CITIZENS BANK US SAVINGS BOND INT	1	1,016. 2,500. 1,000.
2 Add the amounts on line 1	2	4,516.
3 Excludable interest on series EE and I U.S. savings bonds issued after 1989. Attach Form 8815	3	
4 Subtract line 3 from line 2. Enter the result here and on Form 1040A, or Form 1040, line 8a ▶	4	4,516.

Note. If line 4 is over \$1,500, you must complete Part III.

Part II
Ordinary Dividends

(See instructions and the instructions for Form 1040A, or Form 1040, line 9a.)

Note. If you received a Form 1099-DIV or substitute statement from a brokerage firm, list the firm's name as the payer and enter the ordinary dividends shown on that form.

		Amount
5 List name of payer ▶	5	
6 Add the amounts on line 5. Enter the total here and on Form 1040A, or Form 1040, line 9a ▶	6	

Note. If line 6 is over \$1,500, you must complete Part III.

Part III
Foreign Accounts and Trusts

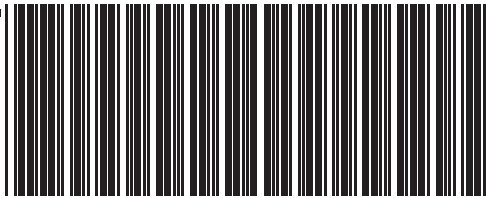
(See instructions)

		Yes	No
You must complete this part if you (a) had over \$1,500 of taxable interest or ordinary dividends; (b) had a foreign account; or (c) received a distribution from, or were a grantor of, or a transferor to, a foreign trust.			
7 a At any time during 2010, did you have an interest in or a signature or other authority over a financial account in a foreign country, such as a bank account, securities account, or other financial account? See instructions for exceptions and filing requirements for Form TD F 90-22.1	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b If "Yes," enter the name of the foreign country ▶			
8 During 2010, did you receive a distribution from, or were you the grantor of, or transferor to, a foreign trust? If "Yes," you may have to file Form 3520. See instructions	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

For Paperwork Reduction Act Notice, see your tax return instructions.

Schedule B (Form 1040A or 1040) 2010

US Schedule B		Interest Received					2010		
Payer	Amount	TSJ	State adjustment +/-	Amount	NAE OB	NAEOB amount	AMT PAB	Early penalty	Federal withheld
HAMPTON FIRST NATL B	1016.	T							115.
CITIZENS BANK	2500.	T							
US SAVINGS BOND INT	1000.	T	-	1000.					
PA MUNICIPAL BOND IN			+	200.	e	200.			
	4516.			1200.		200.			115.



2010 Form 1-NR/PY MA1000611045
 Massachusetts Nonresident/Part-Year Resident
 Income Tax Return

For the year January 1 - December 31, 2010 or other taxable
 Yr. beginning Ending

ANTHONY WEBSTER 151-69-1253
 919 N PORTER ST HUDSON NH 03051
 919 N PORTER ST HUDSON NH 03051
 Apt. no.

State Election Campaign Fund:

Fill in if veteran of U.S. armed forces who served in Operation Enduring Freedom, Iraq Freedom or Noble Eagle

Taxpayer deceased

Fill in if under age 18

Check one: Nonresident

Part-year resident

Filing as both nonresident and part-year resident

Nonresident composite

1. Filing status (select one only): ▶

Single

Married filing joint return

Married filing separate return

Head of household ▶ Custodial parent has released claim to exemption for child(ren)

2. Part-year residents. Enter dates as Massachusetts resident: From ▶ To ▶

Total days as Massachusetts resident ÷ 365 = ▶ 2

3. Total income ▶ 3 24782

4. Exemptions:

a. Personal exemptions

4a 6800

b. No. of dependents. (Do not include yourself or your spouse.) Enter no. ▶

x \$1,000 = **4b**

c. Age 65 or over before 2011 You + Spouse = ▶

x \$700 = **4c**

d. Blindness You + Spouse = ▶

x \$2,200 = **4d**

e. 1. Medical/dental ▶ 2. Adoption ▶

1 + 2 = **4e**

f. Total exemptions. Add items 4a through 4e. Enter here and on line 22a

▶ **4f** 6800

5. Wages, salaries, tips

▶ **5** 18310

6. Taxable pensions and annuities

▶ **6**

SIGN HERE. Under penalties of perjury, I declare that to the best of my knowledge and belief this return and enclosures are true, correct and complete.

Your signature

Date

Spouse's signature

Date

May the Dept. of Revenue discuss this return with the preparer shown here? ▶ Yes

I do not want preparer to file my return electronically ▶ (this may delay your refund)

Print paid preparer's name

Date Check if self-employed

12212011

Paid preparer's SSN

▶ S12052601

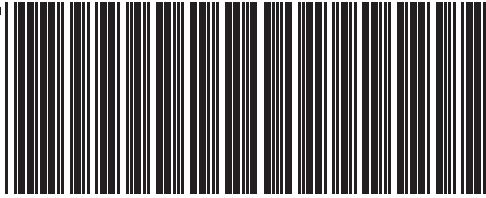
Paid preparer's signature

Paid preparer's phone

Paid preparer's EIN

PRIVACY ACT NOTICE AVAILABLE UPON REQUEST

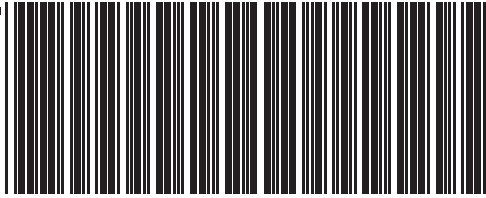
12/21/2011 21:08:04



2010 Form 1-NR/PY, pg. 2 MA1000621045
 Massachusetts Nonresident/Part-Year Resident Income Tax Return
 151-69-1253

7. Mass. bank interest: a. ▶	- b. exemption	=	7
8. Business/profession or farm income or loss		▶	8
9. Rental, royalty and REMIC, partnership, S corp., trust income/loss		▶	9
10a. Unemployment		▶	10a
10b. Mass. lottery winnings		▶	10b
11. Other income		▶	11
12. TOTAL 5.3% INCOME			12
			1956
			20266
13. NONRESIDENT APPORTIONMENT WORKSHEET. You cannot apportion Mass. wages as shown on Form W-2. Do not use this worksheet if you know the exact amount of your Mass. source income. Only use when income from employment/business is earned both inside and outside Mass. and the exact Mass. amount is not known.			
	Basis: working days miles sales other:		
Working days (or other basis) outside Massachusetts			13a
Working days (or other basis) inside Massachusetts			13b
Total working days			13c
Nonworking days (holidays, weekends, etc.)			13d
Massachusetts ratio		▶	13e
Total income being apportioned. You cannot apportion Massachusetts wages as shown on Form W-2			13f
Massachusetts income			13g
14. NONRESIDENT DEDUCTION AND EXEMPTION RATIO			
a. Total 5.3% income			14a
b. Interest income			14b
c. Total capital gain income			14c
d. Total income this return			14d
e. Non-Massachusetts source income. Not less than ``0"		▶	14e
f. Total income			14f
g. Deduction and exemption ratio			14g
15a. Amount paid to Soc. Sec. Medicare, R.R., U.S. or Mass. Retirement		▶	15a
15b. Amount your spouse paid to Soc. Sec., Medicare, R.R., U.S. or Mass. Retirement		▶	15b
			20266
			20266
			3716
			23982
			0.8451
			1400

BE SURE TO INCLUDE THIS PAGE WITH FORM 1-NR/PY, PAGE 1

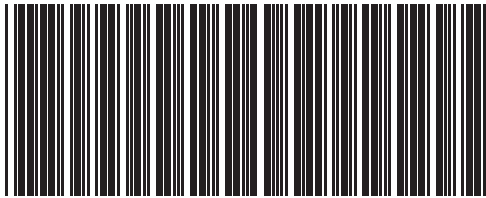


2010 Form 1-NR/PY, pg. 3 MA1000631045
 Massachusetts Nonresident/Part-Year Resident Income Tax Return

ANTHONY WEBSTER 151-69-1253

16.	Child under age 13, or disabled dependent/spouse care expenses	▶	16	
17.	Number of dependent member(s) of household under age 12, or dependents age 65 or over (not you or your spouse) as of 12/31/10, or disabled dependent(s)			
	Not more than two. a.▶			
		x \$3,600 = ▶	17	
18.	Rental deduction. a.▶	÷ 2 = ▶	18	
	Nonresidents, during 2010, did you have a family home or any other dwelling outside MA to which you generally or customarily returned or intend to return in the future? Yes No. If "Yes," you do not qualify for this deduction.			
19.	Other deductions from Schedule Y, line 16	▶	19	
20.	Total deductions. Add lines 15 through 19	▶	20	1400
21.	5.3% INCOME AFTER DEDUCTIONS. Subtract line 20 from line 12. Not less than ``0"	▶	21	18866
22.	Exemption amount a. 6800	▶	22	5747
23.	5.3% INCOME AFTER EXEMPTIONS. Subtract line 22 from line 21. Not less than ``0"	▶	23	13119
24.	INTEREST AND DIVIDEND INCOME	▶	24	
25.	TOTAL TAXABLE 5.3% INCOME. Add lines 23 and 24	▶	25	13119
26.	TAX ON 5.3% INCOME. Note: If choosing the optional 5.85% tax rate, fill in and multiply line 25 and the amount in Sch. D, line 20 by .0585 ▶	▶	26	696
27.	12% INCOME. Not less than "0." a.▶	x .12 = ▶	27	
28.	TAX ON LONG-TERM CAP. GAINS. Not less than ``0." Fill in if filing Sch. D-IS ▶	▶	28	
	Fill in if any excess exemptions were used in calculating lines 24, 27 or 28 ▶			
29.	Credit recapture amount and/or additional tax on installment sale ▶	▶	29	
	▶ BC EOA LIH HR Installment sale			
30.	If you qualify for No Tax Status, fill in and enter "0" on line 31 ▶			
31.	TOTAL INCOME TAX. Add lines 26 through 29	▶	31	696
32.	Limited Income Credit	▶	32	
33.	Credits from Schedule Z, line 9	▶	33	
34.	Credits from Schedule Z, line 12	▶	34	
35.	Total credits	▶	35	
36.	INCOME TAX AFTER CREDITS. Subtract line 35 from line 31. Not less than ``0"	▶	36	696

BE SURE TO INCLUDE THIS PAGE WITH FORM 1-NR/PY, PAGE 1



2010 Form 1-NR/PY, pg. 4 MA1000641045
 Massachusetts Nonresident/Part-Year Resident Income Tax Return
 151-69-1253

37. Voluntary Contributions

a. Endangered Wildlife Conservation	▶	37a	
b. Organ Transplant Fund	▶	37b	
c. Massachusetts AIDS Fund	▶	37c	
d. Massachusetts U.S. Olympic Fund	▶	37d	
e. Massachusetts Military Family Relief Fund	▶	37e	
Total. Add lines 37a through 37e		37	
38. Use tax due on out-of-state purchases. If no use tax due enter "0"	▶	38	0
39. Health care penalty a. You ▶ 0 b. Spouse ▶ 0		a + b = 39	0
40. INCOME TAX AFTER CREDITS PLUS CONTRIBUTIONS AND USE TAX. Add lines 36 through 39		40	696
41. Massachusetts income tax withheld	▶	41	765
42. 2009 overpayment applied to your 2010 estimated tax	▶	42	
43. 2010 Massachusetts estimated tax payments	▶	43	
44. Payments made with extension	▶	44	
45. Earned Income Credit a. No. of qualifying children ▶ 0 Amount from U.S. return ▶		x .15 =▶ 45	
46. Senior Circuit Breaker Credit	▶	46	
47. Other Refundable Credits	▶	47	
48. TOTAL. Add lines 41 through 47		48	765
49. Overpayment. Subtract line 40 from line 48	▶	49	69
50. Amount of overpayment you want applied to your 2011 estimated tax	▶	50	
51. Refund. Subtract line 50 from line 49. Mail to: Massachusetts DOR, PO Box 7001, Boston, MA 02204	▶	51	69

Direct deposit of refund. Type of account ▶ checking
 savings
 RTN #▶062005690 account # ▶ 00578965542

52. Tax due. Mail to: Massachusetts DOR, PO Box 7002, Boston, MA 02204	▶	52	
Interest ▶	Penalty ▶	M-2210 amt. ▶	▶ EX enclose Form M-2210

BE SURE TO INCLUDE THIS PAGE WITH FORM 1-NR/PY, PAGE 1

12/21/2011 21:11:53



2010 Schedule B MA1001011045

ANTHONY

WEBSTER

151-69-1253

Part 1. Interest and Dividend Income

1. Total interest income	1	4716
2. Total ordinary dividends	2	
3. Other interest and dividends not included above	3	
4. Total interest and dividends	4	4716
5. Total interest from Massachusetts banks	5	
6. Other interest and dividends to be excluded	6	4716
7. Subtotal	7	
8. Allowable deductions from your trade or business	8	
9. Subtotal	9	

Part 2. Short-Term Capital Gains/Losses and Long-Term Gains on Collectibles

10. Short-term capital gains	10	
11. Long-term capital gains on collectibles and pre-1996 installment sales	11	
12. Gain on the sale, exchange or involuntary conversion of property used in a trade or business and held for one year or less	12	
13. Add lines 10 through 12	13	
14. Allowable deductions from your trade or business	14	
15. Subtotal	15	
16. Short-term capital losses	16	
17. Loss on the sale, exchange or involuntary conversion of property used in a trade or business and held for one year or less	17	
18. Prior short-term unused losses for years beginning after 1981	18	
19. Combine lines 15 through 18	19	
20. Short-term losses applied against interest and dividends	20	



2010 Schedule B, pg. 2 MA1001021045
151-69-1253

21.	Available short-term losses	21
22.	Short-term losses applied against long-term gains	22
23.	Short-term losses available for carryover in 2011	23
24.	Short-term gains and long-term gains on collectibles	24
25.	Long-term losses applied against short-term gain	25
26.	Subtotal	26
27.	Long-term gains deduction	27
28.	Short-term gains after long-term gains deduction	28

Part 3. Adjusted Gross Interest, Dividends, Short-Term Capital Gains and Long-Term Gains on Collectibles

29.	Enter the amount from line 9	29
30.	Short-term losses applied against interest and dividends	30
31.	Subtotal interest and dividends	31
32.	Long-term losses applied against interest and dividends	32
33.	Adjusted interest and dividends	33
34.	Enter the amount from line 28	34

Part 4. Taxable Interest, Dividends and Certain Capital Gains

35.	Adjusted gross interest, dividends and certain capital gains	▶ 35
36.	Excess exemptions	36
37.	Subtract line 36 from line 35	37
38.	Interest and dividends taxable at 5.3%	▶ 38
39.	Taxable 12% capital gains	▶ 39
40.	Available short-term losses for carryover in 2011	40

NEW HAMPSHIRE DEPARTMENT OF REVENUE ADMINISTRATION
INTEREST AND DIVIDENDS TAX RETURN

For the CALENDAR year **2010** or other taxable period beginning _____ and ending _____ FOR DRA USE ONLY

Due Date for CALENDAR year is on or before April 18, 2011 or the 15th day of the 4th month after the close of the taxable period.

STEP 1 Print or Type	LAST NAME WEBSTER	FIRST NAME & INITIAL ANTHONY	SOCIAL SECURITY NUMBER 151-69-1253
	SPOUSE'S LAST NAME	FIRST NAME & INITIAL	SOCIAL SECURITY NUMBER
	NAME OF PARTNERSHIP, TRUST, ESTATE, OR LLC		FEDERAL IDENTIFICATION NUMBER OR DEPARTMENT IDENTIFICATION NUMBER
	NUMBER & STREET ADDRESS 919 N PORTER ST		
	ADDRESS (CONTINUED)		
	CITY/TOWN, STATE & ZIP CODE HUDSON NH 03051-		

STEP 2
Return Type & Alternate Address

ENTITY TYPE - CHECK ONE: _____ % of NEW HAMPSHIRE Ownership Interest in Fiduciary or Trust

(1) INDIVIDUAL (1) JOINT Mo Day Year

(3) PARTNERSHIP (4) FIDUCIARY

TAX FORMS MAILING ADDRESS, CITY/TOWN, STATE & ZIP CODE: _____

Initial Return _____ Established NH Residency

Final Return _____ Abandoned NH Residency

Final Deceased _____ SSN _____

Amended Return: DO NOT use this form to report IRS adjustment.

STEP 3 **COMPLETE THE SECOND PAGE OF THIS RETURN BEFORE PROCEEDING TO STEP 4**

STEP 4 Figure Your Tax, Credits, Interest and Penalties	10	Net Taxable Income (from Line 9)		10	1,316		
	11	New Hampshire Interest and Dividends Tax (Line 10 multiplied by 5%)		11	66		
	12	Payments:					
		(a) Tax paid with Application for Extension	12(a)				
		(b) Payments from current tax period Estimated Tax	12(b)				
		(c) Credit carryover from prior tax period	12(c)				
		(d) Paid with original return (Amended returns only)	12(d)		12		
	13	Tax Due (Line 11 minus Line 12)			13	66	
	14	Additions to Tax:					
		(a) Interest	14(a)				
(b) Failure to Pay		14(b)					
(c) Failure to File		14(c)					
	(d) Underpayment of Estimated Tax	14(d)		14			
STEP 5 Figure Your Net Balance Due or Overpayment	15	(a) Subtotal Due (Line 13 plus Line 14)	15(a)	66			
		(b) Return Payment Made Electronically			15(b)		
15	Net Balance Due [Line 15(a) minus Line 15(b)] (Make Check Payable to State of New Hampshire)		PAY THIS AMOUNT ▶	15	66		
16	OVERPAYMENT (If balance due is less than zero, enter on Line 16)	16					
17	Amount of Line 16 to be applied to:		DO NOT PAY ▶				
	(a) Credit - Next Year's Tax Liability			17(a)			
	(b) Refund (Allow 12 weeks for processing)			17(b)			

FOR DRA USE ONLY

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) _____ Date _____ Preparer's Tax Identification Number _____ Preparer's Telephone Number _____

If joint return, BOTH parties must sign, even if only one had income _____ Date _____ Signature (in ink) of Paid Preparer _____ Date _____

Filing as surviving spouse Form 1310 attached

Print Signatory Name & Title if Fiduciary/Trust _____

Printed Name of Preparer
70 TEMPLE STREET

Preparer's Address
NASHUA NH 03060

City/Town, State & Zip Code

MAIL TO: NH DRA, PO BOX 2072, CONCORD NH 03302-2072 603-888-8888 Taxpayer's Telephone Number

2045 City/Town, State & Zip Code



FORM

NEW HAMPSHIRE DEPARTMENT OF REVENUE ADMINISTRATION

DP-10

INTEREST AND DIVIDENDS TAX RETURN

Page 2

STEP 3 Read instructions before you begin.

INTEREST & DIVIDENDS FROM ALL SOURCES

Total

1 From Your Federal Income Tax Return: (See Instructions)

Table with 4 rows: (a) Interest Income, (b) Dividend Income, (c) Federal Tax Exempt Interest Income, (d) Subtotal Interest and Dividends Income. Values: 4,516, 200, 4,716.

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 = OTHER

Table with 4 columns: I ENTITY CODE, II NAME OF PAYER, III PAYER'S IDENTIFICATION NUMBER, IV DISTRIBUTION AMOUNT. Includes a row for 'Total from supplemental schedule attached'.

Summary rows: 2 Total Distributions, 3 Subtotal Gross Interest & Dividends Income and Distributions. Values: 4,716.

A return is required if Gross Interest and Dividends exceeds \$2400.

4 List payers and amounts of interest and/or dividends NOT TAXABLE to New Hampshire included on Lines 1(a), 1(b), 1(c) and/or 2:

Table with 4 columns: I REASON CODE, II NAME OF PAYER, III PAYER'S IDENTIFICATION NUMBER, IV NON-TAXABLE AMOUNT. Row 1: 1 US GOVERNMENT INTEREST, 1,000.

Summary rows for non-taxable income: (a) Subtotal of non-taxable income above, (b) Total non-taxable income from supplemental schedule, (c) Non-taxable income subtotal, (d) Part-year resident non-taxable income pro rata share. Values: 1,000.

Summary rows: 4 Total Non-Taxable Income, 5 Gross Taxable Income, 6 Less: \$2,400 for Individual, Trust and Fiduciary; \$4,800 for Joint filers, 7 Adjusted Taxable Income. Values: 1,000, 3,716, 2,400, 1,316.

Exemption checkboxes: Blind, Spouse Blind, 65 (or over) or disabled, Spouse 65 (or over) or disabled. Includes fields for Year of birth.

Row 8: Check the exemptions that apply. Multiply the total number of boxes checked above x 1,200=. Row 9: Net Taxable Income (Line 7 minus Line 8) If less than zero, enter amount in parenthesis. Value: 1,316.

Enter Line 9 amount on Page 1 Step 4, Line 10.

