

2018 Schedule II



APPORTIONMENT OF FOREIGN DIVIDENDS - SCHEDULE II

Principal Business Organization Name			
Taxpayer Identification # For the CALEN or other taxable positions in the contract of the con	MMDDYYYY DAR year 2018 eriod beginning:	and ending:	MMDDYYYY
1 SALES	EVERYWHERE (Denominator)	NEW HAMPSHIRE (Numerator)	New Hampshire as portion of EVERYWHERE
1(a) Enter the amounts from Form DP-80, Line 1			
1(b) Enter the total Foreign Dividend Sales Factor Increment from Form Schedule III, Column L			
1(c) Enter the Adjusted Sales Factor (Line 1(a) plus Line 1(b))			
1(d) Enter Line 1(c) New Hampshire divided by Line 1(c) Everywhere			
1(e) Enter Line 1(d) multiplied by 2	(1	express as a decimal to 6 places)	
2 PAYROLL	EVERYWHERE (Denominator)	NEW HAMPSHIRE (Numerator)	New Hampshire as portion of EVERYWHERE
2(a) Enter the amounts from Form DP-80, Line 2			
2(b) Enter the total Foreign Dividend Payroll Factor Increment from Form Schedule III, Column M			
2(c) Enter the Adjusted Payroll Factor (Line 2(a) plus Line 2(b))			
2(d) Enter Line 2(c) New Hampshire divided by Line 2(c) Everywh	ere (express as a decimal to 6 places)	
3 PROPERTY	EVERYWHERE (Denominator)	NEW HAMPSHIRE (Numerator)	New Hampshire as portion of EVERYWHERE
3(a) Enter the amounts from Form DP-80, Line 3			
3(b) Enter the total amount of Foreign Dividend Property Factor Increment from Form Schedule III, Column N			
3(c) Enter the Adjusted Property Factor (Line 3(a) plus Line 3(b))			
3(d) Enter Line 3(c) New Hampshire, divided by Line 3(c) Everywhere (express as a decimal to 6 places)			
4 Total (Add Lines 1(e), 2(d), and 3(d)) 4			
 Modified Apportionment Percentage (Line 4 divided by 4, expressed as a decimal to 6 places) If there are only one or two factors, then see instructions 			
6 FOREIGN DIVIDENDS as defined in RSA 77-A:1, XVII (This amount must agree with Form NH-1120-WE, Line 11(d) and the total of Schedule III, Column B)			
7 NEW HAMPSHIRE FOREIGN DIVIDENDS TAXABLE BUSINESS PROFITS (Line 6 multiplied by Line 5) Enter this amount on Form NH-1120-WE, Line 16 7			