2021 PIT-1 NEW MEXICO PERSONAL INCOME TAX RETURN For the year January 1 - December 31, 2021 or fiscal year beginning E1 ending $_{\rm F.2}$ If amending use Form 2021 PIT-X. Age 65 Residency Print your name (first, middle, last) SOCIAL SECURITY NUMBER Rlind status over Taxpayer's date of birth 1a Print your spouse's name (first, middle, last). If married filing separately, include spouse Spouse's date of birth Taxpayer's date of death If a deceased taxpayer's refund must If taxpayer or spouse died before this return is filed, enter If the address is new or changed, mark this box be made payable to a person other Mailing Address (Number and street) than the taxpayer or spouse named date of death. on this return, enter below the name Spouse's date of death and social security number of that 3ŀ 4d person. You must also attach Form Postal/ZIP Code State City RPD-41083 Residency status: 30 For taxpayer and spouse f foreign address, enter country Foreign province and/or state Name (1e and 2e), enter: R if Resident N if Non-Resident **EXEMPTIONS:** Taxpayer, spouse, dependents, and other dependents SSN F if First-Year Resident reported on federal Form 1040. If you are a dependent or other dependent of P if Part-Year Resident another taxpayer, enter 00. (See instructions) EXTENSION OF TIME TO FILE: If you have a federal or state 7. FILING STATUS. Mark only one box. 6b extension, mark box 6a and enter the extension date in box 6b (1) Single DEPENDENTS AND OTHER DEPENDENTS. As listed on your federal return. (2) Married filing jointly (You must report the first 5 dependents and other dependents in this table. Use Schedule PIT-S for additional entries. Column 1 Column 2 Column 3 (3) Married filing separately (Enter spouse's name First name Date of birth (MM/DD/CCYY) Last name Dependent's SSN and social security number in 2a and 2b.) (4) Head of household (Enter name of person qualifying you as head of household if that person is not counted as a qualified dependent on your federal return. (5) Qualifying widow(er) with dependent child FEDERAL ADJUSTED GROSS INCOME. (from federal Form 1040 or 1040SR, line 11)..... 9 If you itemized your federal deduction amount, enter the amount of state and local tax deduction claimed on 10 federal Form 1040, Schedule A, line 5a. See the worksheet in the instructions..... Total Additions to federal adjusted gross income (PIT-ADJ, line 5). Attach PIT-ADJ..... 11 12. Federal standard or itemized deduction amount (from federal Form 1040, line 12)..... 12 12a. If you itemized, mark the box..... 13 Deduction for certain dependents. See the worksheet in the instructions New Mexico low- and middle-income tax exemption. See PIT-1 instructions..... 14 15. Total Deductions and Exemptions from federal income (PIT-ADJ, line 23). Attach PIT-ADJ...... 15 Medical care expense deduction. See PIT-1 instructions..... 16. 16 You must complete both lines 16 and 16a or the deduction will be denied NEW MEXICO TAXABLE INCOME. Add lines 9. 10 and 11. then subtract lines 12. 13. 14. 15 and 16..... 17 Cannot be less than zero. 18. New Mexico tax on amount on line 17 or from PIT-B, line 14...... 18 Additional amount for tax on lump-sum distributions. See PIT-1 instructions..... 19 Credit for taxes paid to another state. You must have been a New Mexico resident during all or

Electronic filers: If you file your New Mexico Personal Income Tax return online and also pay tax due online, your due date is **May 02, 2022**. All others must file by **April 18, 2022**. See PIT-1 instructions for details.

part of the year. Include a copy of other state's return. See PIT-1 instructions.....

Business-related income tax credits applied, from Schedule PIT-CR, line A. Attach PIT-CR.....

NET NEW MEXICO INCOME TAX. Add lines 18 and 19, then subtract lines 20 and 21. Cannot be less

Continue on the next page.

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2021 PIT-1 (page 2) NEW MEXICO PERSONAL INCOME TAX RETURN

YOUR	SOCIAL SECURITY NUMBER	

Do not submit a **photocopy** of this form to the Department. Submit only original forms and keep a copy for your records. If submitting this return by mail, send to:

New Mexico Taxation and Revenue Department P. O. Box 25122 Santa Fe, New Mexico 87504-5122

				-	
23.	The amount on line 22 from page 1				23
24.	Total claimed on rebate and credit schedule (PIT-RC,	ſ	24		
	Working families tax credit. (You must complete both lir		25		
2	5a. The amount of federal earned income credit (EIC) reported on your 2021 federal income tax return		_		
26.	Refundable business-related income tax credits from	B. Attach PIT-CR	+	26	
27.	New Mexico income tax withheld. Attach annual stat	d withholding	+ [27	
28.		•	F	28	
29.	New Mexico income tax withheld from a pass-through			29	
30.	··	•		· · ·	30
31.	Other Payments				31
	•				
	TOTAL PAYMENTS AND CREDITS. Add lines 24 thro				32
33.	TAX DUE. If line 23 is greater than line 32, enter the	difference here		L	33
. .	D		Is and blank	. г	
	Penalty on underpayment of estimated tax. If you wan	. , ,	•	+ [34
35.	Special method allowed for calculation of underpayme underpayment of estimated tax and you qualify, enter				35.
36.	Penalty. See PIT-1 instructions. If you want penalty co	mputed for you, leave b	olank	+ [36
	· · · · · · · · · · · · · · · · · · ·	,, ,, ,		· L	<u> </u>
37	Interest. See PIT-1 instructions. If you want interest co	amputed for you leave h	olank	+ [37
	TAX, PENALTY, AND INTEREST DUE. Add lines 33,	•		- F	38
30.	TAX, FENALIT, AND INTEREST DOE. Add lines 33,	, 54, 50, and 57			
39	OVERPAYMENT. If line 23 is less than line 32, enter	the difference here		Γ	39
ı	•			40	
40.	Refund voluntary contributions (PIT-D, line 19). Attack		- L	40	
	A 46 E 00 4 E 14 0000 F		_ [41	
41.	Amount from line 39 you want applied to your 2022 E		_ L	41	
4.	AMOUNT TO BE DEFUNDED TO YOU Line 20 minut		_ [42	
├	AMOUNT TO BE REFUNDED TO YOU. Line 39 minu	DEOUIDED. V			
RE.1	REFUND EXPRESS !!HAVE IT DIRECTLY DEPOSITE QUESTIONS IN THIS BLOCK. Routing number:		oose one. WILL THIS REFUNI	D GO TO	answer this question. O OR THROUGH AN ACCOUNT INITED STATES? If yes, you may not on. See instructions. NO
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	clare I have examined this return, including accompany		Paid preparer's use only:		
	nts, and to the best of my knowledge and belief it is true,		1		
Your	signature	Date	Signature of preparer		Date
Drive	r's License, State ID No. or enter "NONE" or "DECLINED" . State	Expiration Date	 		
l l	To Elochoo, Glato IB No. of onto: None of Bedeines	Expiration Bate		1	1\
			P.1 Firm's name (or yours, if self	r-emplo	oyed)
Spouse's signature Date			P.2 NMBTIN		
_			P.3 Preparer's PTIN		
Spou	se's Driver's License, State ID No. or enter "NONE" or "DECLINED" State	Expiration Date	P.4 FEIN		
ب	l Bottle	L	P.5 Preparer's phone number		
•	iling jointly, BOTH must sign even if only one had incom	Mark this box if Form F	RPD-4	1338 is on file	
Tax	payer's phone number	P.6 for this taxpayer. See F			
	payer's email address				