2021 PIT-X NEW MEXICO PERSONAL INCOME TAX

AMENDED RETURN For the year January 1 - December 31, 2021 or fiscal year beginning F.1 ending F.2

Print your name (first, middle, last)		SOCIAL SECURITY NUM	Age 65 Residency MBER Blind or over status	Taxpayer's date of birth
Print your spouse's name (first, middle, last). If married filing separately, include spouse.		2b	2c 2d 2e	Spouse's date of birth
3a If the address is new or changed, mark this box.				21
Mailing Address (Number and street)		4. If a deceased taxpayer's ref	fund must If taxpayer or spouse	Taxpayer's date of death
3b		be made payable to a pers than the taxpayer or spous	se named return is filed, enter	4c
City	State Postal/ZIP Code	on this return, enter below to and social security number	tne name	Spouse's date of death
30	Farrism manifest and the state	person. You must also atta RPD-41083.	ach Form	Residency status:
If foreign address, enter country 3d	Foreign province and/or state	4a		For taxpayer and spouse (1e and 2e), enter:
5. EXEMPTIONS: Taxpayer, spouse, dep	pendents, and other dependents	Name		R if Resident
reported on federal Form 1040. If you are a another taxpayer, enter 00. (See instruction	dependent or other dependent of	4b SSN		N if Non-Resident F if First-Year Resident
EXTENSION OF TIME TO FILE.	·			P if Part-Year Resident
6a EXTENSION OF TIME TO FILE: If you extension, mark box 6a and enter the extension d	ate in box 6b.			S. Mark only one box.
DEPENDENTS AND OTHER DEPE (You must report the first 5 dependents and other dependents)			(1) Single (2) Married filing join	ntly
Column 1 First name Last name	Column 2	Column 3 Date of birth (MM/DD/CCYY)	I 🖂 ` ′	parately (Enter spouse's name
I list lialite Last lialite	Dependent's SSN	Date of biltin (WilWi/DD/CC11)	and social security nu	
				old (Enter name of person d of household if that person is not
				d dependent on your federal return.)
			(4a) Ouglifying widow	w(er) with dependent child
			(5) Qualifying widow	w(er) with dependent child
			AS PREVIOUSLY FILE	D AS AMENDED
9. FEDERAL ADJUSTED GROSS INCOM	E. (from federal Form 104	10 or 1040SR, line 11)	. 9	
 If you itemized your federal deduction and deduction claimed on federal Form 1040 			10	
	,			
11. Total Additions to federal income (PIT-AD	DJ, line 5). Attach PIT-AD	J	11	
12. Federal standard or itemized deduction amount.				
(from federal Form 1040 or 1040SR, line 12)			12	
iza. Ii you itemizeu , mark me box		IZa 🔲		
13. Deduction for certain dependents. See the	he worksheet in the PIT-1	instructions	13	
14. New Mexico low- and middle-income tax exemption. See PIT-1 instruction		nstructions	14	
45 Tatal Daductions and Everyntians from 6	adamalimasana (DIT AD L.	ine 20) Attack DIT AD I	15	
 Total Deductions and Exemptions from federal income (PIT-ADJ, line 22). Attach PIT-ADJ Medical care expense deduction. See PIT-1 instructions 			15 16	
(You must complete both lines 16 and 16a or the dedu	iction will be denied.)			
16a. Unreimbursed and uncompensated me	edical care expenses. 16a	a		
17. NEW MEXICO TAXABLE INCOME. Add lines 9, 10 and 11, then subtract lines 12,13,14,15 and 16			17	
 New Mexico tax amount on line 17 or fro From Rate Table = R. From PIT-B, line 			18	
19. Additional amount for tax on lump-sum d			19	
20. Credit for taxes paid to another state. Yo				1
all or part of the year. Include a copy of other state's return . See PIT-1 instructions			20	
21. Business-related income tax credits applied, from Schedule PIT-CR, line A. Attach PIT-CR22. NET NEW MEXICO INCOME TAX. Add lines 18 and 19, then subtract lines 20 and 21			21	
			22	

YOUR SOCIAL SECURITY NUMBER			
If submitting this return by mail, send to:	ding:		
New Mexico Taxation and Revenue Department			
P. O. Box 25122			
Santa Fe, New Mexico 87504-5122			
Attach schedules even if they did not change from the previously filed return.		AS PREVIOUSLY FILE	D AS AMENDED
23. The amount on line 22 from page 1		23	
24. Total claimed on rebate and credit schedule (PIT-RC, line 25). Attach PIT-	RC	24	
25. Working families tax credit. (Lines 25 and 25a required or the deduction wi	II be denied.)	25	
25a. The amount of federal earned income credit (EIC) reported on your 2021 federal income tax return			
26. Refundable business-related income tax credits from Schedule PIT-CR, lin		26	
27. New Mexico income tax withheld. Attach annual statements of income a	•	27	
28. New Mexico income tax withheld from oil and gas proceeds. Attach 1099-MISC	or RPD-41285	28	
29. New Mexico income tax withheld from a pass-through entity. Attach 1099-MISC	or RPD-41359	29	
30. 2021 estimated income tax payments. See PIT-1 instructions			
31. Other payments less any refunds from this schedule, line S3, below			
32. TOTAL PAYMENTS AND CREDITS. Add lines 24 through 31		32	
33. TAX DUE. If line 23 is greater than line 32, enter the difference here		33	
34. Penalty on underpayment of estimated tax. See PIT-1 instructions		34	
35. Special method allowed for calculation of underpayment of estimated tax penalty on underpayment of estimated tax and you qualify, enter 1, 2, 3, 4,		35.	
Attach RPD-41272.			
36. Penalty. See PIT-1 instructions. If you want penalty computed for you, leav	e blank	36	
37. Interest. See PIT-1 instructions. If you want interest computed for you, leav		37	
38. TAX, PENALTY, AND INTEREST DUE. Add lines 33, 34, 36, and 37		38	
39. OVERPAYMENT. If line 23 is less than line 32, enter the difference here		39	
40. Refund voluntary contributions (PIT-D, line 19). Attach PIT-D		40	
41. Amount from line 39 you want applied to your 2022 Estimated Tax		41	
42. AMOUNT TO BE REFUNDED TO YOU. Line 39 minus lines 40 and 41		42	
!! REFUND EXPRESS !! HAVE IT DIRECTLY DEPOSITED! SEE INSTRUCTION	NS AND COMPLETE AL	L REQUIRED: You must	
QUESTIONS IN THIS BLOCK. RE.3 Typ	e: Choose one.	WILL THIS REFUND GO TO	OR THROUGH AN ACCOUNT INITED STATES? If yes, you may no
	necking Mark X I	y this notional deliceme enti-	
RE.2 Account number:	avings	RE.4 YES	NO
I declare I have examined this return, including accompanying schedules and statements, and to the be	Paid prepare	er's use only:	
my knowledge and belief it is true, correct, and complete. (If filing jointly, BOTH must sign.) Your signature Date			
	Signature of	preparer	Date
Driver's License, State ID No. or enter "NONE" or "DECLINED" State Expiration Date			
Spouse's signature Date		ne (or yours, if self-employ	
Spouse's signature Date			
Spouse's Driver's License, State ID No. or enter "NONE" or "DECLINED" State Expiration Date		PTIN	
State State	P.4 FEIN		
		phone numberthis box if Form RPD-41338 is	on file for this taxpayor
Taxpayer's phone number		PIT-1 instructions.	on the for this taxpayer.
Taxpayer's email address Complete this schedule and report the result on line 31. Other n	aymente less	Date	Amount
Complete this schedule and report the result on line 31, Other p any refunds from schedule below.	ayments less	Date	Amount
S1. 2021 Other payments. List any tax year 2021 payments made before of	or separate from		
the submission of this amended return. Also, enter the date of the payment. Do	not include any		
estimated payments reported on line 30 of this form. If you made more than attach a schedule showing payment dates and amounts.			1
 anach a schenne showno navmeni dates and amounts 			
attach a schedule showing payment dates and amounts.		S1a Sum of payments	
S2. 2021 Refunds received. List any refunds received from a previously filed 2	n four payments, 021 New Mexico	S1a Sum of payments	
S2. 2021 Refunds received. List any refunds received from a previously filed 2 PIT-1. Do not include any interest the New Mexico Taxation and Revenue De	n four payments, 021 New Mexico	S1a Sum of payments	
S2. 2021 Refunds received. List any refunds received from a previously filed 2 PIT-1. Do not include any interest the New Mexico Taxation and Revenue De any, on your refund.	n four payments, 021 New Mexico partment paid, if	S2a Sum of refunds	
S2. 2021 Refunds received. List any refunds received from a previously filed 2 PIT-1. Do not include any interest the New Mexico Taxation and Revenue De	021 New Mexico partment paid, if	S2a Sum of refunds	