## Final 1.00 07/17/2025

### 2025 PIT-X

#### **NEW MEXICO PERSONAL INCOME TAX**

**AMENDED RETURN** For the year January 1 - December 31, 2025 or fiscal year beginning  $_{\text{E},1}$ MM/DD/CCYY ending  $_{\text{E}}$ MM/DD/CCYY

2025 PIT-X, PAGE 1
BARCODE SHOULD READ \*250169999\* where the
last four digits are replaced with your vendor code.

FOR DEPARTMENT USE ONLY 9999 99 Age 65 Residency Print your name (first, middle, last) as it appears on your state-issued driver's license or ID SOCIAL SECURITY NUMBER Blind or over status Taxpaver's date of birth 999-99-9999 MM/DD/CCYY Print your spouse's name (first, middle, last). If married filing separately, include spouse Spouse's date of birth 999-99-9999 MM/DD/CCYY X If the address is new or changed, mark this box Taxpayer's date of death Mailing Address (Number and street) If a deceased taxpayer's refund must If taxpayer or spouse died before this MM/DD/CCYY be made payable to a person other return is filed, enter than the taxpayer or spouse named date of death Spouse's date of death on this return, enter below the name and social security number of that MM/DD/CCYY person/claimant. You must also at-XXXXXXXXX tach Form RPD-41083. Residency status: f foreign address, enter country Foreign province and/or state For taxpayer and spouse (1e and 2e), enter: XXXXXXXXXXXX Claimant's Name R if Resident **EXEMPTIONS:** Taxpayer, spouse, dependents, and other dependents 999-99-9999 N if Non-Resident reported on federal Form 1040. If you are a dependent or other dependent of Claimant's SSN F if First-Year Resident another taxpayer, enter 00. (See instructions) P if Part-Year Resident EXTENSION OF TIME TO FILE: If you have a federal or state 7. FILING STATUS. Mark only one box. 6b MM/DD/CCYY extension, mark box 6a and enter the extension date in box 6b. (1) Single DEPENDENTS AND OTHER DEPENDENTS. As listed on your federal return. (You must report the first 5 dependents and other dependents in this table. Use Schedule PIT-S for additional entries.) (2) Married filing jointly Column 1 Column 3 Column 2 (3) Married filing separately (Enter spouse's name Date of birth (MM/DD/CCYY) Last name Dependent's SSN and social security number in 2a and 2b.) 999-99-9999 MM/DD/CC (4) Head of household (Enter name of person 999-99-9999 MM/DD/CC qualifying you as head of household if that person is not 999-99-9999 MM/DD/CCYY counted as a qualified dependent on your federal return. 999-99-9999 MM/DD/CCYY 999-99-9999 MM/DD/CCYY X (5) Surviving Spouse with dependent child **AS PREVIOUSLY FILED AS AMENDED** 9 999,999,999 999,999,999 9. FEDERAL ADJUSTED GROSS INCOME. (from federal Form 1040 or 1040SR, line 11) ...... If you itemized your federal deduction amount, enter the amount of state and local tax deduction claimed on federal Form 1040, Schedule A, line 5a. See the instructions..... 999,999,999 999,999,999 Total Additions to federal adjusted gross income (PIT-ADJ, line 6). Attach PIT-ADJ..... 999, 999, 999 999,999,999 12. Federal standard or itemized deduction amount (from federal Form 1040, line 12) ...... 999,999,999 999,999,999 13. Deduction for certain dependents. See the worksheet in the PIT-1 instructions ............ 999,999,999 999,999,99 New Mexico low- and middle-income tax exemption. See PIT-1 instructions ...... 999,999,999 999,999,999 Total Deductions and Exemptions from federal income (PIT-ADJ, line 28). Attach PIT-ADJ... DO NOT USE DO NOT USE 16. Reserved for Future Use 999,999,999 NEW MEXICO TAXABLE INCOME. Add lines 9, 10 and 11, then subtract lines 12, 13, 14, and 15 ..... 999,999,999 999,999 999,999 999, 999,999,999 18. New Mexico tax on amount on line 17 or from PIT-B, line 14 ..... 19. Additional amount for tax on lump-sum distributions. See PIT-1 instructions ...... 999,999,999 999,999,999 20. Credit for taxes paid to another state. You must have been a New Mexico resident during all 999,999,999 999,999,999 or part of the year. Include a copy of other state's return. See PIT-1 instructions...... 999,999,999 999,999,999 21. Business-related income tax credits applied, from Schedule PIT-CR, line A. Attach PIT-CR... 999**,**999**,**999 22. NET NEW MEXICO INCOME TAX. Add lines 18 and 19, then subtract lines 20 and 21 ........ 999,999,999

# Final 1.00 07/17/2025

**2025 PIT-X** (page 2) NEW MEXICO PERSONAL INCOME TAX AMENDED RETURN

Version Code 9

2025 PIT-X, PAGE 2 BARCODE SHOULD READ \*250179999\* where the last four digits are replaced with your vendor code.

#### YOUR SOCIAL SECURITY NUMBER

999-99-9999

Reason for amending: XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX									
Fina	I Determination Date: MM/DD/CCYY				OUSLY I			AMENDE	
23.	The amount on line 22 from page 1				999,			999,	
24.	Total claimed on rebate and credit schedule (PIT-RC, line 26 ). Attach PIT-RC		24	999,	999,	999		999,	
25.	Working families tax credit. (Lines 25, 25a, and 25b* or the deduction will be denied.)	) . <u></u>	<b>+</b> 25	999,	999,	999	999,	999,	999
	25a. The amount of federal earned income credit (EIC) reported on your 25a 99	99 <b>,</b> 99	9,9	99					
	2025 federal income tax return or calculated under NM Expansion 256 25b. *NM Expansion Only: Check this box if you <b>did not</b> qualify for the EIC on your								
	federal return	25b X							
26.	Refundable business-related income tax credits from Schedule PIT-CR, line B. Attach P	PIT-CR	<b>+</b> 26	999,	999,	999	999,	999,	999
27.	New Mexico income tax withheld. Attach annual statements of income and withhold	olding	<b>+</b> 27	999,	999,	999	999,	999,	999
28.	New Mexico income tax withheld from oil and gas proceeds. Attach 1099-Misc or RPD-41285	85	<b>+</b> 28		999,		999,	999,	999
29.	New Mexico income tax withheld from or paid as Entity-level tax or Composite income	e tax by	<b>+</b> 29	999,	999,	999	999,	999,	999
	a pass-through entity. Attach 1099-Misc or RPD-41359		T [2]						
30.	2025 estimated income tax payments. See PIT-1 instructions		<b>+</b> 30	999,	999,	999		999,	
31.	Other Payments less any refunds from this schedule, line S3, below		<b>+</b> 31		999,		999,	999,	999
32.	TOTAL PAYMENTS AND CREDITS. Add lines 24 through 31				999,			999,	
33.	TAX DUE. If line 23 is greater than line 32, enter the difference here				999,			999,	
34.	Penalty on underpayment of estimated tax. See PIT-1 instructions		<b>+</b> 34	999,	999,	999	999,	999,	999
35.	Special method allowed for calculation of underpayment of estimated tax penalty. Enter 3, 4, or 5 in the box. (See Instructions) Attach RPD-41272		35		9	W			
36.	Penalty. See PIT-1 instructions.		+ 36	999,	999,	999	999,	999,	999
37.	Interest. See PIT-1 instructions.		<b>+</b> 37	999,	999,	999	999,	999,	999
38.	TAX, PENALTY, AND INTEREST DUE. Add lines 33, 34, 36, and 37		<b>=</b> 38	999,	999,	999	999,	999,	999
39.	OVERPAYMENT. If line 23 is less than line 32, enter the difference here		39	999,	999,	999	999,	999,	999
40.	Refund voluntary contributions (PIT-D, line 18). Attach PIT-D						999,	999,	999
41.	Amount from line 39 you want applied to your 2026 Estimated Tax		<b>-</b> 41	999,	999,	999	999,	999,	999
42.	AMOUNT TO BE REFUNDED TO YOU. Line 39 minus lines 40 and 41		<b>=</b> 42	999,	999,	999	999,	999,	999
Ref	fund Expr <u>ess!! Have it directly depo</u> sited! See instructions and complete all questions in this bloc	ock.							
RE. 1 Routing Number 99999999 RE.3 Account Type: Checking X Savings X									
Re. 4: Will this refund go to or through an account outside of the United States? Important: If "yes," you can not use this refund method. See instructions.									
	are I have examined this return, including accompanying schedules and statements, and to the best of my ledge and belief it is true, correct, and complete.	d pr <mark>epar</mark> e	er's u	se only	:				
Your	signature Date								
	MM/DD/CCYY Sign	nature of	prepa	rer				ate	
Driver's License, State ID No. or enter "NONE" or "DECLINED"  State Expiration Date  XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX							(Χ <u></u>		
X	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	P.1 Firm's name (or yours, if self-employed)							
Spou		NMBTIN							
	P.3 P	Preparer's	PTIN	X99	9999	99			
Spous	Spouse's Driver's License, State ID No. or enter "NONE" or "DECLINED" State Expiration Date  P.4 FEIN 99-9999999999999999999999999999999999								
X	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	Preparer's	phor	e numb	er 99	9-9	99-99	999	_
(If fil	ling jointly, BOTH must sign even if only one had income.)	Manda	ا د:داد،	: £ F-		44000	::- <b>6</b> :1-	£ 41-:-	
Tax	payer's phone number <u>(999) 999-9999</u> P.6 [X				rm RPD estruction		is on file	ior this	tax-
Taxpayer's email address XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX									
Co	omplete this schedule and report the result on line 31, Other payments less any re	refunds			Date			mount	000
fro	om schedule below.				DD/CC			999,	
61	2025 Other navments. List any tay year 2025 navments made before or separate fr	from the s	b_	MM/I	DD/CC	YY	999,	999,	. 999

Complete this schedule and report the result on line 31, Other payments less any refunds	Date	Amount		
from schedule below.	MM/DD/CCYY	999,999,999		
ayments reported on line 30 of this form. If you made more than four payments, attach a schedule	MM/DD/CCYY	999,999,999		
	MM/DD/CCYY	999,999,999		
	MM/DD/CCYY	999,999,999		
	S1a Sum of payments	999,999,999		
not include any interest the New Mexico Taxation and Revenue Department paid, if any, on your	MM/DD/CCYY	999,999,999		
	MM/DD/CCYY	999,999,999		
	S2a Sum of refunds	999,999,999		
S3. Subtract line S2a from line S1a. Subtract the sum of refunds reported on line S2a from the sum				
of payments reported on line S1a. Enter here and on line 31 of this form. May be a negative number.	S3	999,999,999		