## Final 1.0 08/16/2023

### **2023 PIT-X** NEW MEXICO PERSONAL INCOME TAX

 $\begin{array}{l} \textbf{AMENDED RETURN} \hspace{0.1in} \text{For the year January 1 - December 31, 2023} \\ \text{or fiscal year beginning}_{\underline{F,1}} \underline{MM}/\underline{DD}/\underline{CCYY} \hspace{0.1in} \text{ending}_{\underline{F,2}} \underline{MM}/\underline{DD}/\underline{CCYY} \end{array}$ 

2023 PIT-X, PAGE 1 BARCODE SHOULD READ \*230169999\* where the last four digits are replaced with your vendor code. ٦

				FO	R DEPARTMENT	USE ONLY	1
Get your refund faster, file online using Taxpayer Access Point TAP https://tap.state.nm.us.							
	, , , , , , , , , , , , , , , , , , , ,	aster Relief					
9	999 99 9 XXXXXXXX	XXXXXXXXXXXXX					
Prir	nt your name (first, middle, last)		SOCIAL SECURITY NUM	IBER B	Age 65 <b>Residence</b> Blind or over <b>status</b>	-	J s date of birth
1a X	******	XXXXXXXXXXXXXX	<sup>1b</sup> 999-99-999	9 1c	X 1d X 1e X		D/CCYY
Prir	nt your spouse's name (first, middle, last). If married filing	separately, include spouse.	]			Spouse's	date of birth
2a X	******	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	<sup>2b</sup> 999-99-999	9 2c	X 2d X 2e X		D/CCYY
3a	${f X}$ If the address is new or changed, mark this box.						
Ma	iling Address (Number and street)	RMATION	4. If a deceased taxpayer's refu		died before this	Taxpayer's	s date of death D/CCYY
	<u> </u>	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	- I	e named	return is filed, enter	Spouse's	date of death
City	·	State Postal/ZIP Code	and social security number	er of that			D/CCYY
<sup>3с</sup> Х	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	XX XXXXXXXX	person. You must also atta RPD-41083.	ach Form			
lf fo	oreign address, enter country	Foreign province and/or state	4a XXXXXXXXXX	XXXX	XXXXXXXXX	Residency For taxpaye	status: er and spouse
<sup>3d</sup> X		XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	Name			(1e and 2e)	
5.	99 <b>EXEMPTIONS:</b> Taxpayer, spouse, depreported on federal Form 1040. If you are a d	endents, and other dependents	46 999-99-99	99		R if Resider	
L	another taxpayer, enter 00. (See instructions		SSN			F if First-Yea	
_						P if Part-Yea	ar Resident
6a	X EXTENSION OF TIME TO FILE: If you extension, mark box 6a and enter the extension dates and ent	have a federal or state te in box 6b. 6b M	M/DD/C <mark>C</mark> YY		7. FILING STATU	<mark>S. Mar</mark> k only (	one box.
	8. DEPENDENTS AND OTHER DEPE			Χ	(1) Single		
	(You must report the first 5 dependents and other dep				(2) Married filing jo	intly	
Firs	Column 1 st name Last name	Column 2 Dependent's SSN	Column 3 Date of birth (MM/DD/CCYY)	X	(3) Married filing se		
X	*****	999-99-9999	MM/DD/CCYY		and social security n	umber in 2a and 2b	p.)
X	*****	999-99-9999	MM/DD/CCYY	X	(4) Head of house	old (Enter name o	of person
X	*****	999-99-9999	MM/DD/CCYY		qualifying you as hea counted as a gualifie		
X	*****	999-99-9999	MM/DD/CCYY	counted as a qualified dependent on your federal return.) (4a) XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX			
X	*****	999-99-9999	MM/DD/CCYY		(5) Surviving Spou		
L			1, 22, 0011		(-) 3 T	· ·	
				AS	S PREVIOUSLY FIL	LED AS A	MENDED
9.	FEDERAL ADJUSTED GROSS INCOM	E. (from federal Form 1040	) or 1040SR, line 11)	-	999,999,9		999,999
	If you itemized your federal deduction an	·			999,999,9		999,999
	deduction claimed on federal Form 1040			+ 10	, ,	- ·	,
11.	Total Additions to federal adjusted gross	income (PIT-ADJ, line 6).	Attach PIT-ADJ	+ 11	999,999,9	99 999,	999,999
12.	Federal standard or itemized deduction a	mount (from federal Form	1040, line 12)	<b>–</b> 12	999,999,9	99 999,	999,999
	12a. If you <b>itemized</b> , mark the box			1			
13.	Deduction for certain dependents. See the	e worksheet in the PIT-1 in			999,999,9	99 999,	999,999
14.	New Mexico low- and middle-income tax	exemption. See PIT-1 inst	ructions	_ 14	999,999,9	99 999,	999,999
15.	Total Deductions and Exemptions from fe	ederal income (PIT-ADJ, lir	ne 27). Attach PIT-ADJ	<b>-</b> 15	999,999,9	99 999,	999,999
16.	Medical care expense deduction. See PI	T-1 instructions	,	<b>-</b> 16	999,999,9	99 999,	999,999
	You must complete both lines 16 and 16a or the dedu	ction will be denied.				· · · · ·	
	16a. Unreimbursed and uncompensated	I medical care expenses	16a 999, 9	999,	999		
17.	NEW MEXICO TAXABLE INCOME. Add	ines 9, 10 and 11, then subtract line	es 12, 13, 14, 15 and 16	= 17	999,999,9	00 000	999,999
18.	Cannot be less than zero New Mexico tax on amount on line 17 or	from PIT-B, line 14		18	999,999,9		<u>999,999</u>
	18a. From Tax Rate Table = <b>R</b> . From Pl	Г-В, line 14 = <b>В</b>		ן ייי			
19.	Additional amount for tax on lump-sum d				999,999,9	99 999.	999,999
	Credit for taxes paid to another state. Yo	u must have been a New N	lexico resident during all	- 20	999,999,9		999,999
0.4	or part of the year. <b>Include a copy of ot</b>						
21.					999,999,9	<u>, 22 333, 000</u>	999,999
22.	NET NEW MEXICO INCOME TAX. Add	ines 18 and 19, then subtr	act lines 20 and 21	= 22	999,999,9	<u>, צצצ צב א</u>	999,999

You may file an amended return online through Taxpayer Access Point (TAP) at https://tap.state.nm.us.

Continue on the next page.

# Final 1.0 08/16/2023

**2023 PIT-X** (page 2) NEW MEXICO PERSONAL INCOME TAX AMENDED RETURN

Version Code 9

2023 PIT-X, PAGE 2 BARCODE SHOULD READ \*230179999\* where the last four digits are replaced with your vendor code. 

#### YOUR SOCIAL SECURITY NUMBER

### 999-99-9999

Reason for amending: XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX									
Fina		S PREVIOUSLY FILED AS AMENDED							
23.		3 999,999,999							
24.	Total claimed on rebate and credit schedule (PIT-RC, line 26). Attach PIT-RC	4 999,999,999							
25.	Working families tax credit. (Lines 25, 25a, and 25b* or the deduction will be denied.)	5 999 <b>,</b> 999 <b>,</b> 999	999,999,999						
	25a. The amount of federal earned income credit (EIC) reported on your 25a 999, 999,	999							
	2023 federal income tax return or calculated under NM Expansion <sup>230</sup> 25b. *NM Expansion Only: Check this box if you <b>did not</b> qualify for the EIC on your federal return								
26.	Refundable business-related income tax credits from Schedule PIT-CR, line B. Attach PIT-CR + 26	6 999,999,999	999,999,999						
27.	New Mexico income tax withheld. Attach annual statements of income and withholding +2								
28.	New Mexico income tax withheld from oil and gas proceeds. Attach 1099-Misc or RPD-41285	8 999,999,999	999,999,999						
29.	New Mexico income tax withheld from or paid by a pass-through entity.	999,999,999							
	Attach 1099-Misc or RPD-41359	999,999,999	999,999,999						
30.	2023 estimated income tax payments. See PIT-1 instructions		999,999,999						
31.	Other Payments less any refunds from this schedule, line S3, below		999,999,999						
32.	TOTAL PAYMENTS AND CREDITS. Add lines 24 through 31	2 999,999,999	999,999,999						
33.	TAX DUE. If line 22 is greater than line 32, enter the difference here	3 999,999,999	999,999,999						
34.	Penalty on underpayment of estimated tax. See PIT-1 instructions	4							
35.	Special method allowed for calculation of underpayment of estimated tax penalty. Enter 1, 2, 3, 4, or 5 in the box. (See Instructions) Attach <b>RPD-41272</b>								
36.	Penalty. See PIT-1 instructions	6 999,999,999	999,999,999						
37.	Interest. See PIT-1 instructions. + 3	7 999,999,999	999,999,999						
38.	TAX, PENALTY, AND INTEREST DUE. Add lines 33, 35, 36, and 37	8 999,999,999	999,999,999						
39.	OVERPAYMENT. If line 22 is less than line 32, enter the difference here	9999,999,999	999,999,999						
40.	Refund voluntary contributions (PIT-D, line 18). Attach PIT-D	999,999,999	999,999,999						
	Amount from line 39 you want applied to your 2024 Estimated Tax		999,999,999						
42.	AMOUNT TO BE REFUNDED TO YOU. Line 39 minus lines 40 and 41	2 999,999,999	999,999,999						
Refund Express!! Have it directly deposited! See instructions and complete all questions in this block.         RE. 1 Routing Number       99999999       RE. 2 Account Number       999999999999999999999999999999999999									
	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. Paid preparer's	use only:							
Your	signature Date								
	MM/DD/CCYY Signature of prep		Date						
		XXXXXXXXXXXXXXXXX							
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX									
Spou	Spouse's signature         P.2         NMBTIN         99-99999-009         99								
L	TAX INCODIA MM/DD/CCYYL P.3 Preparer's PTIN X99999999								
Spouse's Driver's License, State ID No. or enter "NONE" or "DECLINED" State Expiration Date P.4 FEIN 99-9999999 XXXXXXXXXXXXXXXXXXXXXXXXXXXX									
		one number $999-9$	99-9999						
	ling jointly, BOTH must sign even if only one had income.)         payer's phone number       (999) 999 – 9999         P.6       Mark this         payer's phone number       (999) 999 – 9999	box if Form RPD-41338	is on file for this tax-						
		e PIT-1 instructions.							
_									
	omplete this schedule and report the result on line 31, Other payments less any refunds om schedule below.	Date	Amount 999,999,999						
	. 2023 Other payments. List any tax year 2023 payments made before or separate from the sub-	MM/DD/CCYY	999,999,999						
	ssion of this amended return. Also, enter the date of the payment. Do not include any estimated yments reported on line 30 of this form. If you made more than four payments, attach a schedule		999,999,999						
	owing payment dates and amounts.	1117 007 0011	999,999,999						
		<b>S1a</b> Sum of payments	<u>999,999,999</u> 999,999,999						
	. 2023 Refunds received. List any refunds received from a previously filed 2023 New Mexico PIT-1.	MM/DD/CCYY	999,999,999						
	not include any interest the New Mexico Taxation and Revenue Department paid, if any, on your und.	MM/DD/CCYY	999,999,999,999						
		S2a Sum of refunds	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
	<b>. Subtract line S2a from line S1a.</b> Subtract the sum of refunds reported on line S2a from the sum payments reported on line S1a. Enter here and on line 31 of this form. May be a negative number.	S3	999,999,999						