

2021 PIT-1 NEW MEXICO PERSONAL INCOME TAX RETURN

For the year January 1 - December 31, 2021

or fiscal year beginning F₁ MM/DD/CCYY ending F₂ MM/DD/CCYY

2021 PIT-1, PAGE 1
 BARCODE SHOULD READ *210189999* where the last four digits are replaced with your vendor code.

Vendor Product Version
 9 999 99 9

If amending use Form 2021 PIT-X.

Disaster Relief
 XXXXXXXXXXXXXXXXXXXXXXXXXX

1a Print your name (first, middle, last)
 XX

2a Print your spouse's name (first, middle, last). If married filing separately, include spouse.
 XX

3a If the address is new or changed, mark this box.

3b Mailing Address (Number and street)
 XX

3c City State Postal/ZIP Code
 XXXXXXXXXXXXXXXXXXXXXXX XX XXXXXXXXXXXXX

3d If foreign address, enter country Foreign province and/or state
 XXXXXXXXXXXXXXX XXXXXXXXXXXXXXXXXXXXXXXX

5 EXEMPTIONS: Taxpayer, spouse, dependents, and other dependents reported on federal Form 1040. If you are a dependent or other dependent of another taxpayer, enter 00. (See instructions)
 99

6a EXTENSION OF TIME TO FILE: If you have a federal or state extension, mark box 6a and enter the extension date in box 6b.

1b SOCIAL SECURITY NUMBER 999-99-9999
 1c Blind 1d Age 65 or over 1e Residency status
 1f Taxpayer's date of birth MM/DD/CCYY

2b SOCIAL SECURITY NUMBER 999-99-9999
 2c Blind 2d Age 65 or over 2e Residency status
 2f Spouse's date of birth MM/DD/CCYY

4. If a deceased taxpayer's refund must be made payable to a person other than the taxpayer or spouse named on this return, enter below the name and social security number of that person. You must also attach Form RPD-41083.
 4a XXXXXXXXXXXXXXXXXXXXXXXX
 4b 999-99-9999
 SSN

4c Taxpayer's date of death MM/DD/CCYY
 4d Spouse's date of death MM/DD/CCYY
 Residency status:
 For taxpayer and spouse (1e and 2e), enter:
 R if Resident
 N if Non-Resident
 F if First-Year Resident
 P if Part-Year Resident

8. 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.)

First name	Column 1 Last name	Column 2 Dependent's SSN	Column 3 Date of birth (MM/DD/CCYY)
XXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXX	999-99-9999	MM/DD/CCYY
XXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXX	999-99-9999	MM/DD/CCYY
XXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXX	999-99-9999	MM/DD/CCYY
XXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXX	999-99-9999	MM/DD/CCYY
XXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXX	999-99-9999	MM/DD/CCYY

7. FILING STATUS. Mark only one box.

(1) Single
 (2) Married filing jointly
 (3) Married filing separately (Enter spouse's name 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.)
 (4a) XXXXXXXXXXXXXXXXXXXXXXXX
 (5) Qualifying widow(er) with dependent child

9. FEDERAL ADJUSTED GROSS INCOME. (from federal Form 1040 or 1040SR, line 11)..... 9 999,999,999

10. 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 worksheet in the instructions..... + 10 999,999,999

11. Total Additions to federal adjusted gross income (PIT-ADJ, line 5). Attach PIT-ADJ..... + 11 999,999,999

12. Federal standard or itemized deduction amount (from federal Form 1040, line 12)..... - 12 999,999,999

12a. If you itemized, mark the box..... 12a

13. Deduction for certain dependents. See the worksheet in the instructions - 13 999,999,999

14. New Mexico low- and middle-income tax exemption. See PIT-1 instructions..... - 14 999,999,999

15. Total Deductions and Exemptions from federal income (PIT-ADJ, line 23). Attach PIT-ADJ..... - 15 999,999,999

16. Medical care expense deduction. See PIT-1 instructions..... - 16 999,999,999

You must complete both lines 16 and 16a or the deduction will be denied.

16a. Unreimbursed and uncompensated medical care expenses..... 16a 999,999,999

17. NEW MEXICO TAXABLE INCOME. Add lines 9, 10 and 11, then subtract lines 12, 13, 14, 15 and 16..... = 17 999,999,999
 Cannot be less than zero.

18. New Mexico tax on amount on line 17 or from PIT-B, line 14..... 18 999,999,999

18a. From Tax Rate Table = R. From PIT-B, line 14 = B. 18a

19. Additional amount for tax on lump-sum distributions. See PIT-1 instructions..... + 19 999,999,999

20. Credit for taxes paid to another state. You must have been a New Mexico resident during all or part of the year. Include a copy of other state's return. See PIT-1 instructions..... - 20 999,999,999

21. Business-related income tax credits applied, from Schedule PIT-CR, line A. Attach PIT-CR..... - 21 999,999,999

22. NET NEW MEXICO INCOME TAX. Add lines 18 and 19, then subtract lines 20 and 21. Cannot be less than zero..... = 22 999,999,999

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

Version Code **9**

YOUR SOCIAL SECURITY NUMBER

999-99-9999

2021 PIT-1, PAGE 2
 BARCODE SHOULD READ *21019999* where the last four digits are replaced with your vendor code.

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	999,999,999
24. Total claimed on rebate and credit schedule (PIT-RC, line 25). Attach PIT-RC	24	999,999,999
25. Working families tax credit. (You must complete both lines 25 and 25a or the deduction will be denied.).....	25	999,999,999
25a. The amount of federal earned income credit (EIC) reported on your 2021 federal income tax return.....	25a	999,999,999
26. Refundable business-related income tax credits from Schedule PIT-CR, line B. Attach PIT-CR	26	999,999,999
27. New Mexico income tax withheld. Attach annual statements of income and withholding	27	999,999,999
28. New Mexico income tax withheld from oil and gas proceeds. Attach 1099-Misc or RPD-41285	28	999,999,999
29. New Mexico income tax withheld from a pass-through entity. Attach 1099-Misc or RPD-41359	29	999,999,999
30. 2021 estimated income tax payments. See PIT-1 instructions.....	30	999,999,999
31. Other Payments.....	31	999,999,999
32. TOTAL PAYMENTS AND CREDITS. Add lines 24 through 31.....	32	999,999,999
33. TAX DUE. If line 23 is greater than line 32, enter the difference here.....	33	999,999,999
34. Penalty on underpayment of estimated tax. If you want penalty computed for you, leave blank.....	34	999,999,999
35. Special method allowed for calculation of underpayment of estimated tax penalty. If you owe penalty on underpayment of estimated tax and you qualify, enter 1, 2, 3, 4, or 5 in the box. Attach RPD-41272	35.	9
36. Penalty. See PIT-1 instructions. If you want penalty computed for you, leave blank.....	36	999,999,999
37. Interest. See PIT-1 instructions. If you want interest computed for you, leave blank.....	37	999,999,999
38. TAX, PENALTY, AND INTEREST DUE. Add lines 33, 34, 36, and 37.....	38	999,999,999
39. OVERPAYMENT. If line 23 is less than line 32, enter the difference here.....	39	999,999,999
40. Refund voluntary contributions (PIT-D, line 19). Attach PIT-D	40	99,999
41. Amount from line 39 you want applied to your 2022 Estimated Tax	41	999,999,999
42. AMOUNT TO BE REFUNDED TO YOU. Line 39 minus lines 40 and 41.....	42	999,999,999

!! REFUND EXPRESS !! HAVE IT DIRECTLY DEPOSITED! SEE INSTRUCTIONS AND COMPLETE ALL QUESTIONS IN THIS BLOCK.

RE.1 Routing number: 999999999

RE.2 Account number: 99999999999999999999

RE.3 Type: Checking Savings

RE.4 YES NO

REQUIRED: You must answer this question. WILL THIS REFUND GO TO OR THROUGH AN ACCOUNT LOCATED OUTSIDE THE UNITED STATES? If yes, you may not use this refund delivery option. See instructions.

I declare I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief it is true, correct, and complete.

Your signature	Date
XXXXXXXXXXXXXXXXXXXXXXXXXXXX	MM/DD/CCYY
Driver's License, State ID No. or enter "NONE" or "DECLINED"	State Expiration Date
XXXXXXXXXXXXXXXXXXXXXXXXXXXX	XX MM/DD/CCYY
Spouse's signature	Date
XXXXXXXXXXXXXXXXXXXXXXXXXXXX	MM/DD/CCYY
Spouse's Driver's License, State ID No. or enter "NONE" or "DECLINED"	State Expiration Date
XXXXXXXXXXXXXXXXXXXXXXXXXXXX	XX MM/DD/CCYY

(If filing jointly, BOTH must sign even if only one had income.)

Taxpayer's phone number (999) 999-9999

Taxpayer's email address XXXXXXXXXXXXXXXXXXXXXXXX

Paid preparer's use only:

Signature of preparer _____ Date _____

XX

P.1 Firm's name (or yours, if self-employed) _____

P.2 NMBTIN 99-999999-009

P.3 Preparer's PTIN X99999999

P.4 FEIN 99-9999999

P.5 Preparer's phone number (999) 999-9999

P.6 Mark this box if Form RPD-41338 is on file for this taxpayer. See PIT-1 instructions.