2023 PIT-X
NEW MEXICO PERSONAL INCOME TAX
AMENDED RETURN For the year January 1 - December 31, 2023

or fiscal year beginning F.1 MM/DD/CCYY ending F.2 MM/DD/CCYY

Get your refund faster, file online using Taxpayer Access Point TAP https://tap.state.nm.us.

FOR DEPARTMENT USE ONLY

Vendor	Product	Version	Disaster Relief
9999	99	9	XXXXXXXXXXXXXXXXXXXX

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

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

	SOCIAL SECURITY NUMBER	Blind	Age 65 or over	Residency status	
1b	999-99-9999	1c X	1d X	1e X	1f Taxpayer's date of birth MM/DD/CCYY
2b	999-99-9999	2c X	2d X	2e X	2f Spouse's date of birth MM/DD/CCYY

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

Mailing Address (Number and street)
3b XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

City	State	Postal/ZIP Code
3c XXXXXXXXXXXXXXXXXXXXXXXXXXXX	XX	XXXXXXXXXX

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

5. 99 **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)

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 XXXXXXXXXXXXXXXXXXXXXX Name

4b 999-99-9999 SSN

	If taxpayer or spouse died before this return is filed, enter date of death.	
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

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

7. FILING STATUS. Mark only one box.

- X (1) Single
- X (2) Married filing jointly
- X (3) Married filing separately (Enter spouse's name and social security number in 2a and 2b.)
- X (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
- X (5) Surviving Spouse with dependent child

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.)

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

			AS PREVIOUSLY FILED	AS AMENDED
9.	**FEDERAL ADJUSTED GROSS INCOME.** (from federal Form 1040 or 1040SR, line 11)	9	999,999,999	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 instructions	+10	999,999,999	999,999,999
11.	Total Additions to federal adjusted gross income (PIT-ADJ, line 6). **Attach PIT-ADJ**	+11	999,999,999	999,999,999
12.	Federal standard or itemized deduction amount (from federal Form 1040, line 12)	-12	999,999,999	999,999,999
	12a. If you **itemized**, mark the box	12a X		
13.	Deduction for certain dependents. See the worksheet in the PIT-1 instructions	13	999,999,999	999,999,999
14.	New Mexico low- and middle-income tax exemption. See PIT-1 instructions	14	999,999,999	999,999,999
15.	Total Deductions and Exemptions from federal income (PIT-ADJ, line 27). **Attach PIT-ADJ**	-15	999,999,999	999,999,999
16.	Medical care expense deduction. See PIT-1 instructions	-16	999,999,999	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. Cannot be less than zero	=17	999,999,999	999,999,999
18.	New Mexico tax on amount on line 17 or from PIT-B, line 14	18	999,999,999	999,999,999
	18a. From Tax Rate Table = **R**. From PIT-B, line 14 = **B**	18a X		
19.	Additional amount for tax on lump-sum distributions. See PIT-1 instructions	+19	999,999,999	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	999,999,999
21.	Business-related income tax credits applied, from Schedule PIT-CR, line A. **Attach PIT-CR**	-21	999,999,999	999,999,999
22.	**NET NEW MEXICO INCOME TAX.** Add lines 18 and 19, then subtract lines 20 and 21.	=22	999,999,999	999,999,999

You may file an amended return online through Taxpayer Access Point (TAP) at **https://tap.state.nm.us.** Continue on the next page.

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

Version Code 9

YOUR SOCIAL SECURITY NUMBER

999-99-9999

Reason for amending: XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

Final Determination Date: MM/DD/CCYY

			AS PREVIOUSLY FILED	AS AMENDED
23.	The amount on line 22 from page 1	23	999,999,999	999,999,999
24.	Total claimed on rebate and credit schedule (PIT-RC, line 26). **Attach PIT-RC**	24	999,999,999	999,999,999
25.	Working families tax credit. (Lines 25, 25a, and 25b* or the deduction will be denied.) **+**	25	999,999,999	999,999,999

25a. The amount of federal earned income credit (EIC) reported on your 2023 federal income tax return or calculated under NM Expansion   25a 999,999,999

25b. *NM Expansion Only: Check this box if you **did not** qualify for the EIC on your federal return.   25b X

			AS PREVIOUSLY FILED	AS AMENDED
26.	Refundable business-related income tax credits from Schedule PIT-CR, line B. **Attach PIT-CR** **+**	26	999,999,999	999,999,999
27.	New Mexico income tax withheld. **Attach annual statements of income and withholding** **+**	27	999,999,999	999,999,999
28.	New Mexico income tax withheld from oil and gas proceeds. **Attach 1099-Misc or RPD-41285** **+**	28	999,999,999	999,999,999
29.	New Mexico income tax withheld from or paid by a pass-through entity. **Attach 1099-Misc or RPD-41359** **+**	29	999,999,999	999,999,999
30.	2023 estimated income tax payments. See PIT-1 instructions **+**	30	999,999,999	999,999,999
31.	Other Payments less any refunds from this schedule, line S3, below **+**	31	999,999,999	999,999,999
32.	**TOTAL PAYMENTS AND CREDITS.** Add lines 24 through 31 **=**	32	999,999,999	999,999,999
33.	**TAX DUE.** If line 22 is **greater than** line 32, enter the difference here	33	999,999,999	999,999,999
34.	Penalty on underpayment of estimated tax. See PIT-1 instructions **+**	34		
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 **RPD-41272**	35	9	
36.	Penalty. See PIT-1 instructions. **+**	36	999,999,999	999,999,999
37.	Interest. See PIT-1 instructions. **+**	37	999,999,999	999,999,999
38.	**TAX, PENALTY, AND INTEREST DUE.** Add lines 33, 34, 36, and 37 **=**	38	999,999,999	999,999,999
39.	**OVERPAYMENT.** If line 22 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** **-**	40	999,999,999	999,999,999
41.	Amount from line 39 you want **applied to your 2024 Estimated Tax** **-**	41	999,999,999	999,999,999
42.	**AMOUNT TO BE REFUNDED TO YOU.** Line 39 minus lines 40 and 41 **=**	42	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 999999999   RE. 2 Account Number 999999999999999999   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.   Yes X   No X

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 MM/DD/CCYY

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

Spouse's signature   Date MM/DD/CCYY

Spouse's Driver's License, State ID No. or enter "NONE" or "DECLINED"   State   Expiration Date
XXXXXXXXXXXXXXXXXXXXXXXXX   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   XXXXXXXXXXXXXXXXXXXXX

Paid preparer's use only:

Signature of preparer   Date
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

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

Complete this schedule and report the result on line 31, Other payments less any refunds from schedule below.

	Date	Amount
S1. 2023 Other payments. List any tax year 2023 payments made before 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 four payments, attach a schedule showing payment dates and amounts.	MM/DD/CCYY	999,999,999
	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
S2. 2023 Refunds received. List any refunds received from a previously filed 2023 New Mexico PIT-1. Do not include any interest the New Mexico Taxation and Revenue Department paid, if any, on your refund.	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