

2024 PIT-X
NEW MEXICO PERSONAL INCOME TAX
AMENDED RETURN For the year January 1 - December 31, 2024

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

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BARCODE SHOULD READ *240169999* where the last four digits are replaced with your vendor code.

FOR DEPARTMENT USE ONLY

Vendor Product Version
9999 99 9

Disaster Relief
XXXXXXXXXXXXXXXXXXXXXXXXXXXX

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

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

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

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

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

Mailing Address (Number and street)
3b XXX
City State Postal/ZIP Code
3c XXXXXXXXXXXXXXXXXXXXXXX XX XXXXXXXXXXXXX
If foreign address, enter country Foreign province and/or state
3d XXXXXXXXXXXXXXX XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

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/claimant. You must also attach Form RPD-41083.
If taxpayer or spouse died before this return is filed, enter date of death.
4a XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
Claimant's Name
4b 999-99-9999
Claimant's SSN
Taxpayer's date of death 4c MM/DD/CCYY
Spouse's date of death 4d 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

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)

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. 6b MM/DD/CCYY

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)
XXXXXXXXXXXXXXXXXXXXXXXXXXXX	999-99-9999	MM/DD/CCYY
XXXXXXXXXXXXXXXXXXXXXXXXXXXX	999-99-9999	MM/DD/CCYY
XXXXXXXXXXXXXXXXXXXXXXXXXXXX	999-99-9999	MM/DD/CCYY
XXXXXXXXXXXXXXXXXXXXXXXXXXXX	999-99-9999	MM/DD/CCYY
XXXXXXXXXXXXXXXXXXXXXXXXXXXX	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) XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
 (5) Surviving Spouse with dependent child

	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 <input checked="" type="checkbox"/>	
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 28). Attach PIT-ADJ ...	- 15 999,999,999	999,999,999
16. Medical care expense deduction. See PIT-1 instructions..... You must complete both lines 16 and 16a or the deduction will be denied.	- 16 999,999,999	999,999,999
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	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	999,999,999
18a. From Tax Rate Table = R. From PIT-B, line 14 = B	18a <input checked="" type="checkbox"/>	
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.

