State of New Mexico Taxation and Revenue Department

CIT-ES Corporate Income and Franchise Estimated Tax Payment Voucher

Taxpayers may submit payment with the payment voucher below or pay estimated personal income taxes online at no charge by electronic check. To pay online, go to the Taxation and Revenue Department website at www.tax.newmexico.gov and click **Online Services**. The electronic check authorizes the Department to debit your checking account in the amount and on the date you specify. You may also use any of these credit cards—Visa, MasterCard, American Express, or Discover Card—for your online payment. A convenience fee of 2.40% is applied for using a credit card. The State of New Mexico uses this fee, calculated on the transaction amount, to pay charges from the credit card companies.

SUBMIT ONLY A HIGH-QUALITY PRINTED, ORIGINAL FORM AND FOLLOW THESE INSTRUCTIONS. Because the Department uses high-speed scanners when processing payment vouchers, a quality form helps ensure accuracy. Do not use a photocopy of the voucher. The scanners can read only one page size to process vouchers; therefore, it is important that you **cut on the dotted line only**. When printing the voucher from the Department website or a software product, prevent resizing by setting the printer's page scaling function to **None**. If your payment voucher has a scanline (a very long row of numbers) within the bottom 1 and 1/2-inch of the voucher, do not write in the area around the scanline.

IMPORTANT: ALWAYS INCLUDE YOUR PAYMENT WITH THE PAYMENT VOUCHER.

Mail payment and voucher to: New Mexico Taxation and Revenue Department P.O. Box 25127, Santa Fe, NM 87504-5127

NOTE: When you provide a check as payment, you authorize the Department either to use information from your check to make a one-time electronic fund transfer from your account, or to process the payment as a check transaction.

Mail CIT-ES and payment to: New Mexico Taxation and Revenue Department PO Box 25127 Santa Fe, NM 87504-5127

Please cut on the dotted line to detach the voucher and then submit it with your payment to the Department.

Indicate quarter to which the payment is to be applied:	Tax year: be	ginning	ending(MM/DD/CCYY)		
	☐ 1ST QTR	□ 2NI	O QTR	3RD QTR	4TH QTR
CORPORATION'S NAME		<u> </u>	EDERAL FEIN)	EMPLOYER IDENTIF	ICATION NUMBER
MAILING ADDRESS		N	NEW MEX	ICO CRS IDENTIFICA	ATION NUMBER
CITY, STATE AND ZIP CODE					