2017 PIT-X NEW MEXICO PERSONAL INCOME TAX

AMENDED RETURN For the year January 1 - December 31, 2017 or fiscal year beginning _{E.1} ending _{E.2}



Proceedings of the process of the	Print your name (first, middle, last) 1a	1b	SOCIAL SECURITY NUMB		Taxpayer's date of birth
Time address in new of campach, mank this box.	Print your spouse's name (first, middle, last). If married filing separately, include spouse.				Spouse's date of birth
The production and a street of the street of	3a If the address is new or changed, mark this box.				
State Postati/PP Code To response service service service below the many and service	Mailing Address (Number and street)	[n other died before this	. ,
Thorsign address, enter country Foreign province and/or state Province a	3b	ootol/ZID Codo		date of death	Spouse's date of death
Reduction patabases, enter country Foeeign province and for state 44 Name 18 Reduction patabase (and patabase in the state patabase in the sta		JStal/21F Code			4d
SEXEMPTIONS. Number of Qualified Exemptions. If you are a dependent of another taxpayer, enter 00. EXTENSION OF TIME TO FILE. If you have a federal or state extension, mark the box and enter the extension date. BEPENDENTS. As listed on your federal return. (You man support he risk objectives the extension date. BEPENDENTS. As listed on your federal return. (You man support he risk objectives the extension date. BEPENDENTS. As listed on your federal return. (You man support he risk objectives the box and enter the extension date. Bependents SSN Dependents on Schedule PIT-S.) Column 1 Dependents SSN Dead of brith (MMODOCOY) As Americal filing jointly (3) Married filing sparately (Einter spouse's name and social security number in 2a and 2b.) (4) Head of household (Einter name of person qualifying you as head of household (Einter name of person	If foreign address, enter country Foreign prov		RPD-41083. ↓		and spouse (1e and 2e), enter:
Fir First-YeAR RS Fir First YeAR RS Fir First YeAR RS Fir First-YeAR RS Fir First YeAR RS First YeAR R		mptions.			
If you thave a federal deduction amount, enter the amount of state and local tax deduction claimed on federal Form 1040, line 42; Form 1040A, line 24; or Form 1040E, line 5.) 1. Total Additions amount from federal Form 1040, line 42; Form 1040A, line 24; or Form 1040E, line 64; line 5. Total Deductions amount from federal income (PIT-ADJ, line 5.) 1. Total Deductions and Exemptions from federal income (PIT-ADJ, line 2). Total Deductions amount from federal income (PIT-ADJ, line 2). Total Deductions and Exemptions from federal income (PIT-ADJ, line 2). Total Deductions and Exemptions from federal income (PIT-ADJ, line 2). Total Deductions and Exemptions from federal income (PIT-ADJ, line 2). Total Deductions and Exemptions from federal income (PIT-ADJ, line 2). Total Deductions and Exemptions from federal income (PIT-ADJ, line 2). Total Deductions and Exemptions from federal income (PIT-ADJ, line 2). Total Deductions and Exemptions from federal income (PIT-ADJ, line 2). Total Deductions and Exemptions from federal income (PIT-ADJ, line 2). Total Deductions and Exemptions from federal income (PIT-ADJ, line 2). Attach PIT-ADJ. 15. Total Deductions and Exemptions from federal income (PIT-ADJ, line 2). Attach PIT-ADJ. 16. Medical care expense deduction. See PIT-1 instructions. 17. NEW MEXICO TAXABLE INCOME. As lines 9, 19 and 11, then subtractines 21, 19, 1, 15 and 16. 18. New Mexico tax amount on line 17 or from PIT-B, line 14 = B. 19. Additional amount for tax on lump-sum distributions. See PIT-1 instructions. 20. Credit for taxes paid to another state; Vou 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. 21. Business-related income tax credits applied, from Schedule PIT-CR, line A Attach PIT-CR. 22. NET NEW MEXICO INCOME TAX. Add lines 18 and 19, then subtract lines 20 and 21.		er, enter 00.			
mark the box and enter the extension date. • •	0-				PII PART-TEAR RES.
(2) Married filing pointly (2) Married filing separately (Enter spouse's name and oscill security number in 2 and 2 b.) First name Last name Last name Dependent's SSN Date of birth (MMDDICCYY) Dependent's SSN Date of birth (MMDDICCYY) (4) Head of Inousehold (finite reame of person qualified exemption on your federal return.) (4) Head of Inousehold (finite reame of person qualified exemption on your federal return.) (4) Head of Inousehold (finite reame of person qualified exemption on your federal return.) (4) Head of Inousehold (finite reame of person qualified exemption on your federal return.) (4) Head of Inousehold (finite reame of person qualified exemption on your federal return.) (4) Head of Inousehold (finite reame of person qualified exemption on your federal return.) (5) Qualifying widow(er) with dependent child AS PREVIOUSLY FILED AS AMENDED 9 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 5. See the instructions 10. If you itemized your federal deduction amount (from federal Form 1040, line 40; Form 1040A, line 24; or Form 1040Ez, leave blank). 11. Total Additions to federal income (PIT-ADJ, line 5). Attach PIT-ADJ 12. Federal standard or itemized deduction amount (from federal Form 1040, line 40; Form 1040A, line 24; or Form 1040Ez, leave blank). 13. Federal exemption amount (from federal Form 1040, line 42; Form 1040A, line 26; or if you filed Form 1040Ez, leave blank). 14. New Mexico low- and middle-income tax exemption. See PIT-1 instructions. 15. Total Deductions and Exemptions from federal income (PIT-ADJ, line 22). Attach PIT-ADJ 16. Medical care expense deduction will be denied. 17. NEW MEXICO TAXABLE INCOME. Add lines 9, 10 and 11, then subtract lines 12 and 14. 18a. From Rate Table = R. From PIT-B, line 14 = B. 19. Additional amount for tax on lump-sum distributions. See PIT-1 instructions. 20. Credit for taxes paid to another state. You must have been a New Mex				7. FILING STATUS.	Mark only one box.
Column 1 Column 2 Dependent's SN Date of brith (MMDDIDCCYY) Gold Separately (Enter spouse's name and social security number in 2s and 2b.) Gold Separately (Enter spouse's name and social security number in 2s and 2b.) Gold Separately (Enter spouse's name and social security number in 2s and 2b.) Gold Separately (Enter spouse's name and social security number in 2s and 2b.) Gold Separately (Enter spouse's name and social security number in 2s and 2b.) Gold Separately (Enter spouse's name and social security number in 2s and 2b.) Gold Separately (Enter spouse's name and social security number in 2s and 2b.) Gold Separately (Enter spouse's name and social security number in 2s and 2b.) Gold Separately (Enter spouse's name and social security number in 2s and 2b.) Gold Separately (Enter spouse's name and social security number in 2s and 2b.) Gold Separately (Enter spouse's name and social security number in 2s and 2b.) Gold Separately (Enter spouse's name and social security number in 2s and 2b.) Gold Separately (Enter spouse's name and social security number in 2s and 2b.) Gold Separately (Enter spouse's name and social security number in 2s and 2b.) Gold Separately (Enter spouse's name and social security number in 2s and 2b.) Gold Separately (Enter spouse's name and social security number in 2s and 2b.) Gold Separately (Enter spouse's name and social security number in 2s and 2b.) Gold Separately (Enter spouse's name and social security number in 2s and 2b.) Gold Separately (Enter spouse's name and social security number in 2s and 2b.) Gold Separately (Enter spouse's name and social security number in 2s and 2b.) Gold Separately (Enter spouse's name and social security number in 2s and 2b.) Gold Separately (Enter spouse's name and social security number in 2s and 2b.) Gold Separately (Enter spouse's name and social security number in 2s and 2b.) Gold Separately number in 2s and 2b. Gold Separately number in 2s and 2b. Gold Separately number in 2s and 2b			ahadula DIT C \	I H ` ′	
and social security number in 2a and 2b.) Condition to the Mexico tax amount of the tax persons in the subject of the subject o		Column 2	Column 3	I 🗀 ` '	·
9. FEDERAL ADJUSTED GROSS INCOME. (from federal Form 1040, line 38; Form 1040A, line 22; or Form 1040EZ, line 4.). 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 5. See the instructions. 11. Total Additions to federal income (PIT-ADJ, line 5). Attach PIT-ADJ. 12. Federal standard or itemized deduction amount (from federal Form 1040, line 40; Form 1040A, line 24; or Form 1040EZ, line 5.) 12a. If you itemized, mark the box. 13. Federal exemption amount (from federal Form 1040, line 42; Form 1040A, line 26; or if you filed Form 1040EZ, leave blank). 14. New Mexico low- and middle-income tax exemption. See PIT-1 instructions. 15. Total Deductions and Exemptions from federal income (PIT-ADJ, line 22). Attach PIT-ADJ. 16. Medical care expense deduction, See PIT-1 instructions. 17. NEW MEXICO TAXABLE INCOME. Add lines 9, 10 and 11; then subtract lines 12, 13, 14, 15 and 16. 18. New Mexico tax amount on line 17 or from PIT-B, line 14 = B. 19. Additional amount for tax on lump-sum distributions. See PIT-1 instructions. 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. 21. Business-related income tax credits applied, from Schedule PIT-CR, line A. Attach PIT-CR. 22. NET NEW MEXICO INCOME TAX. Add lines 18 and 19, then subtract lines 20 and 21.	First name Last name Dep	pendent's SSN Da	te of birth (MM/DD/CCYY)		
9. FEDERAL ADJUSTED GROSS INCOME. (from federal Form 1040, line 38; Form 1040A, line 22; or Form 1040EZ, line 4.) 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 5. See the instructions				(4) Head of househol	d (Enter name of person
9. FEDERAL ADJUSTED GROSS INCOME. (from federal Form 1040, line 38; Form 1040A, line 22; or Form 1040EZ, line 4.) 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 5. See the instructions					
9. FEDERAL ADJUSTED GROSS INCOME. (from federal Form 1040, line 38; Form 1040A, line 22; or Form 1040EZ, line 4.)					,
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 5. See the instructions				(5) Qualifying widow(er) with dependent child
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 5. See the instructions. 11. Total Additions to federal income (PIT-ADJ, line 5). Attach PIT-ADJ. 12. Federal standard or itemized deduction amount (from federal Form 1040, line 40; Form 1040A, line 24; or Form 1040EZ, line 5.)	9. FEDERAL ADJUSTED GROSS INCOME. (from fe	ederal Form 1040, lin	e 38; Form 1040A,	AS PREVIOUSLY FILED	AS AMENDED
deduction claimed on federal Form 1040, Schedule A, line 5. See the instructions	line 22; or Form 1040EZ, line 4.)			9	
deduction claimed on federal Form 1040, Schedule A, line 5. See the instructions					
11. Total Additions to federal income (PIT-ADJ, line 5). Attach PIT-ADJ				10	T
12. Federal standard or itemized deduction amount (from federal Form 1040, line 40; Form 1040A, line 24; or Form 1040EZ, line 5.)				[10]	
12 12a 1f you itemized, mark the box	11. Total Additions to federal income (PIT-ADJ, line 5).	Attach PIT-ADJ		11	
12a					
13. Federal exemption amount (from federal Form 1040, line 42; Form 1040A, line 26; or if you filed Form 1040EZ, leave blank)	•		12		
or if you filed Form 1040EZ, leave blank)	-				
14. New Mexico low- and middle-income tax exemption. See PIT-1 instructions				13	
15. Total Deductions and Exemptions from federal income (PIT-ADJ, line 22). Attach PIT-ADJ 16. Medical care expense deduction. See PIT-1 instructions					
16. Medical care expense deduction. See PIT-1 instructions					
(You must complete both lines 16 and 16a or the deduction will be denied.) 16a. Unreimbursed and uncompensated medical care expenses. 16a 17. NEW MEXICO TAXABLE INCOME. Add lines 9, 10 and 11, then subtract lines 12, 13, 14, 15 and 16	15. Total Deductions and Exemptions from federal inco	ome (PIT-ADJ, line 2	2). Attach PIT-ADJ	15	
16a. Unreimbursed and uncompensated medical care expenses. 16a 17. NEW MEXICO TAXABLE INCOME. Add lines 9, 10 and 11, then subtract lines 12, 13, 14, 15 and 16				16	
17. NEW MEXICO TAXABLE INCOME. Add lines 9, 10 and 11, then subtract lines 12, 13, 14, 15 and 16	,	· <u> </u>			
18. New Mexico tax amount on line 17 or from PIT-B, line 14				17	
18a. From Rate Table = R . From PIT-B, line 14 = B					
19. Additional amount for tax on lump-sum distributions. See PIT-1 instructions					1
all or part of the year. Include a copy of other state's return. See PIT-1 instructions					
21. Business-related income tax credits applied, from Schedule PIT-CR, line A. Attach PIT-CR 22. NET NEW MEXICO INCOME TAX. Add lines 18 and 19, then subtract lines 20 and 21	20. Credit for taxes paid to another state. You must ha	ve been a New Mexi	co resident during		
22. NET NEW MEXICO INCOME TAX. Add lines 18 and 19, then subtract lines 20 and 21					
Continue on the next page.	22. NET NEW MEXICO INCOME TAX. Add lines 18 at	na 19, then subtract	iines 20 and 21		lue on the next page

2017 PIT-X (page 2) NEW MEXICO PERSONAL INCOME TAX AMENDED RETURN

YOU	JR SOCIAL SECURITY NUMBER						
lf su	bmitting this return by mail, send to:		Reaso	n for amend	ling:_		
	Mexico Taxation and Revenue Department						
	. Box 25122 a Fe, New Mexico 87504-5122						
	ch schedules even if they did not change from the previ	ously filed return.					
	, , , , , , , , , , , , , , , , , , ,	•			\Box	PREVIOUSLY FILED	AS AMENDED
23.	The amount on line 22 from page 1				23		
24. 25	Total claimed on rebate and credit schedule (PIT-RC, li Working families tax credit. (Lines 25 and 25a required				24		
23.	5a. The amount of federal earned income credit (EIC)		ii be deli	ieu.)	25		
26	reported on your 2017 federal income tax return Refundable business-related income tax credits from S		DO B. Attac	oh DIT CD	20		
27.	New Mexico income tax withheld. Attach annual state				26 27		
28.	New Mexico income tax withheld from oil and gas process			U	28		
00		***			Н		
29. 30.	New Mexico income tax withheld from a pass-through e 2017 estimated income tax payments. See PIT-1 instru	•			29 30		
	Other payments less any refunds from this schedule, li				31		
	TOTAL PAYMENTS AND CREDITS. Add lines 24 throi	·			32		
33.	TAX DUE. If line 23 is greater than line 32, enter the c				33		
34.	Penalty on underpayment of estimated tax. See PIT-1	instructions			34		
35.	Special method allowed for calculation of underpayment penalty on underpayment of estimated tax and you qua				35.		
ı	Attach RPD-41272.						
36.	Penalty. See PIT-1 instructions. If you want penalty cor	mputed for you. leav	e blank		36		
	Interest. See PIT-1 instructions. If you want interest co				37		
	TAX, PENALTY, AND INTEREST DUE. Add lines 33, 3				38		
39.	OVERPAYMENT. If line 23 is less than line 32, enter t	he difference here			39		
40.	Refund voluntary contributions (PIT-D, line 17). Attach	PIT-D			40		
41.	Amount from line 39 you want applied to your 2018 E	stimated Tax			41		
42.	AMOUNT TO BE REFUNDED TO YOU. Line 39 minus	s lines 40 and 41			42		
	REFUND EXPRESS !! HAVE IT DIRECTLY DEPOSITE QUESTIONS IN THIS BLOCK. Routing number:	RE.3 Typ		noose one. Mark X b		REQUIRED: You must answ WILL THIS REFUND GO TO ACCOUNT LOCATED OUT not use this refund delivery option. S	
ı	Account number:		avings	your choi	ce.	RE.4 YES NO	П
I decl	are I have examined this return, including accompanying schedules and		est of Pa	aid prepare	r's u	se only:	_
	nowledge and belief it is true, correct, and complete. (If filing jointly, BO signature	ΓH must sign.) Date	—-I_			<u> </u>	
			Si	gnature of p	repa	irer	Date
REQ	JIRED: DRIVER'S LICENSE, STATE ID no. or "NONE" State	Expiration Date	_				
0		Data			•	yours, if self-employed	•
Spouse's signature Date		Date		P.2 NM CRS identification number			
DEO	UIRED: SPOUSE'S DRIVER'S LICENSE, STATE ID no. or "NONE" State	Expiration Date				·	_
REQ	OIRED. SPOUSE'S DRIVER'S LICENSE, STATE ID 110. 01 NONE State	Expiration Date	1 .				
			P.5			ne number ox if Form RPD-41338 is on	
	ayer's phone number		1.0	1 1		nstructions.	ille for tills taxpayer.
	ayer's email address omplete this schedule and report the result or	line 31 Other n	avment	te lace		Date	Amount
	ny refunds from schedule below.	i iiie o i, otilei p	ayın c ın	1000	Г		Amount
١٩	2017 Other navments Liet any tay year 2017 navm	ents made hefore o	nr senara	ate from			
S1. 2017 Other payments. List any tax year 2017 payments made before or sepa the submission of this amended return. Also, enter the date of the payment. Do not inc					\vdash		
estimated payments reported on line 30 of this form. If you made more than four p					\vdash		
attach a schedule showing payment dates and amounts.				s	1a Sum of payments		

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.

S2. 2017 Refunds received. List any refunds received from a previously filed 2017 New Mexico PIT-1. Do not include any interest the New Mexico Taxation and Revenue Department paid, if

any, on your refund.

S3

S2a Sum of refunds