2021 PIT-X NEW MEXICO PERSONAL INCOME TAX

AMENDED RETURN For the year January 1 - December 31, 2021

or fiscal year beginning _{F.1} ending _{F.2}



Print your name (first, middle, last)		Age 65 Residency SOCIAL SECURITY NUMBER Blind or over status Taxpayer's date of birth 1c 1d 1e 1f		
Print your spouse's name (first, middle, last). If married filing separately, include spouse. 2a		Spouse's date of birth		
3a If the address is new or changed, mark this box.				
Mailing Address (Number and street)		4. If a deceased taxpayer's refund must be made payable to a person other died before this 4c		
36		than the taxpayer or spouse named on this return, enter below the name on this return, enter below the name of date of death.		
City 3c	State Postal/ZIP Code	and social security number of that 4d person. You must also attach Form		
If foreign address, enter country	Foreign province and/or state	RPD-41083. Residency status: For taxpayer and spouse		
3d		Name (1e and 2e), enter:		
5. EXEMPTIONS: Taxpayer, spouse, dependents, and other dependents reported on federal Form 1040. If you are a dependent or other dependent of		4b R if Resident N if Non-Resident		
another taxpayer, enter 00. (See instructions)		SSN F if First-Year Resident P if Part-Year Resident		
6a EXTENSION OF TIME TO FILE: If you extension, mark box 6a and enter the extension	ou have a federal or state	7. FILING STATUS. Mark only one box.		
8 DEPENDENTS AND OTHER DEP	ENDENTS. As listed on ye	our federal return. (1) Single		
(You must report the first 5 dependents and other d	ependents in this table. Use Schedu Column 2	le PIT-S for additional entries.) Column 3 (2) Married filing jointly		
First name Last name	Dependent's SSN	Date of birth (MM/DD/CCYY) (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.)		
		(5) Qualifying widow(er) with dependent child		
	1	(-) 2,		
		AS PREVIOUSLY FILED AS AMENDED		
9. FEDERAL ADJUSTED GROSS INCOM	IE. (from federal Form 104	0 or 1040SR, line 11)		
 If you itemized your federal deduction a deduction claimed on federal Form 104 				
	·,, ·	10		
11. Total Additions to federal income (PIT-A	J 11			
12. Federal standard or itemized deduction				
(from federal Form 1040 or 1040SR, lin				
12a. If you itemized , mark the box		12a [_]		
13. Deduction for certain dependents. See	the worksheet in the PIT-1	instructions		
14. New Mexico low- and middle-income t				
15. Total Deductions and Exemptions from	' 			
 Medical care expense deduction. See F (You must complete both lines 16 and 16a or the det 				
16a. Unreimbursed and uncompensated n	,			
17. NEW MEXICO TAXABLE INCOME. Add lin	<u> </u>			
18. New Mexico tax amount on line 17 or fr				
18a. From Rate Table = R . From PIT-B, line	e 14 = B.	18a		
19. Additional amount for tax on lump-sum	distributions. See PIT-1 ins	tructions		
20. Credit for taxes paid to another state. Ye all or part of the year. Include a copy of				
21. Business-related income tax credits app				
22. NET NEW MEXICO INCOME TAX. Add	ract lines 20 and 21			

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



YOUR SOCIAL SECURITY NUMBER

New Mexico Taxation and Revenue Department P. O. Box 25122 Santa Fe, New Mexico 87504-5122 Atlach schedules even if they did not change from the previously filed return. 23. The amount on line 22 from page 1						
Astach schedules even if they did not change from the previously filed return. As PREVIOUSLY FILED AS AMENDED As	If submitting this return by mail, send to: New Mexico Taxation and Revenue Department P. O. Box 25122	Reason for amend	ding:			
AS PREVIOUSLY FILED AS AMENDED 23. The amount on line 22 from page 1						
24 Total claimed on rebate and credit schedule (PIT-RC, line 25), Attach PT-RC. 250. Working families tax credit. Line 25 and 25 are required or the decleution will be denied.)	Attach schedules even if they did not change from the previously filed return		AS PREVIOUSLY FILE	AS AMENDED		
25. More Marcial Care and 25s required or the deduction will be denied.)	23. The amount on line 22 from page 1		23			
25a. The amount of federal earned income read it (EIC) reported on your 2021 federal income tax withheld income tax withheld from all statements of income and withholding. 27 28 New Mexico income tax withheld from all and gas proceeds. Autach 1693-Msc or RPD-4128. 28 27 28 29 29 20 20 20 20 20 20	24. Total claimed on rebate and credit schedule (PIT-RC, line 25). Attach F	24				
reported on your 2021 federal income tax retirum		25				
26. Refundable business-related income tax credits from Schedule PTI-CR, line B. Asses PTI-CR	25a. The amount of federal earned income credit (EIC) reported on your 2021 federal income tax return					
28. New Mexico income tax withheld from oil and gas proceeds. Anach 1998-MISC or RPD-41286		, line B. Attach PIT-CR	26			
New Mexico income tax withheld from a pass-through entity, Attach 1994-MISC or RPD-41395. 29	27. New Mexico income tax withheld. Attach annual statements of income	27				
30. 2021 estimated income tax payments. See PTT-1 instructions	28. New Mexico income tax withheld from oil and gas proceeds. Attach 1099-1	28				
30. 2021 estimated income tax payments. See PTT-1 instructions	29 New Mexico income tax withheld from a pass-through entity. Attach 1099-M	ISC or RPD-41359	29			
31. Obter payments less any refunds from this schedule, line \$3, below						
32. TOTAL PAYMENTS AND CREDITS. Add lines 24 through 31	. ,		31			
33. TAX DUE. If line 23 is greater than line 32, enter the difference here	• •	32				
34. Penalty on underpayment of estimated tax. See PIT-1 instructions. 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. 35. Attach RPD-41272. 36. Penalty. See PIT-1 instructions. If you want penalty computed for you, leave blank. 37. Interest. See PIT-1 instructions. If you want interest computed for you, leave blank. 38. TAX, PENALTY, AND INTEREST DUE. Add lines 33, 34, 38, and 37. 39. OVERPAYMENT, If line 23 is less than line 32, enter the difference here. 39. OVERPAYMENT, If line 29 is less than line 32, enter the difference here. 39. OVERPAYMENT, If line 29 is less than line 32, enter the difference here. 39. OVERPAYMENT, If line 29 is less than line 32, enter the difference here. 39. OVERPAYMENT, If line 29 is less than line 32, enter the difference here. 39. OVERPAYMENT, If line 29 is less than line 32, enter the difference here. 39. OVERPAYMENT, If line 29 is less than line 32, enter the difference here. 39. OVERPAYMENT, If line 29 is less than line 32, enter the difference here. 39. OVERPAYMENT, If line 29 is less than line 32, enter the difference here. 39. OVERPAYMENT, If line 29 is less than line 32, enter the difference here. 39. OVERPAYMENT, If line 29 is less than line 32, enter the difference here. 39. OVERPAYMENT, If line 29 is less than line 32, enter the difference here. 39. OVERPAYMENT, If line 29 is less than line 32, enter the difference here. 39. OVERPAYMENT, If line 29 is less than line 32, enter the line line 19, enter line 19, line 19			33			
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41. Amount from line 39 you want applied to your 2022 Estimated Tax	,		40			
### REFUND EXPRESS !! HAVE IT DIRECTLY DEPOSITED SEE INSTRUCTIONS AND COMPLETE ALL CUESTIONS IN THIS BLOCK. RE.1 Routing number: RE.2 Account number: Lideclare have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief it is true, correct, and complete. (If filing jointly, BOTH must sign.) Spouse's signature Driver's License, State ID No. or enter "NONE" or "DECLINED" Spouse's Signature Date Date Date Date Diver's License, State ID No. or enter "NONE" or "DECLINED" Spouse's briver's License, State ID No. or enter "NONE" or "DECLINED" Spouse's briver's License, State ID No. or enter "NONE" or "DECLINED" Spouse's signature Date Date Date Date Date P.1 Firm's name (or yours, if self-employed) P.2 NMBTIN P.3 Preparer's phone number Taxpayer's phone number Taxpayer's email address Complete this schedule and report the result on line 31, Other payments less any refunds from schedule below. S1. 2021 Other payments. List any tax year 2021 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. S2. 2021 Refunds received. List any refunds received from a previously filed 2021 New Mexico P.1 Firm's name (or yours, if self-employed) P.2 NMBTIN P.3 Preparer's phone number P.6 Mark this box if Form RPD-41338 is on file for this taxpayer. See PIT-1 instructions. Date Amount Date Date P.1 Firm's name (or yours, if self-employed) P.2 NMBTIN P.3 Preparer's phone number P.4 Firm's name (or yours, if self-employed) P.5 Preparer's phone number P.6 Mark this box if Form RPD-41338 is on file for this taxpayer. See PIT-1 instructions.			41			
### REFUND EXPRESS !! HAVE IT DIRECTLY DEPOSITED ISEE INSTRUCTIONS AND COUNT ACCOUNT QUESTIONS IN THIS BLOCK. RE.1 Routing number: RE.2 ACCOUNT number:	42. AMOUNT TO BE REFUNDED TO YOU. I ine 39 minus lines 40 and 41					
RE.1 Routing number: RE.2 Account number: Ideclare 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. (If filing jointly, BOTH must sign.) Pate Pour signature Date Diriver's License, State ID No. or enter "NONE" or "DECLINED" Spouse's Driver's License, State ID No. or enter "NONE" or "DECLINED" Spouse's Driver's License, State ID No. or enter "NONE" or "DECLINED" Spouse's Driver's License, State ID No. or enter "NONE" or "DECLINED" Spouse's Driver's License, State ID No. or enter "NONE" or "DECLINED" Spouse's Driver's License, State ID No. or enter "NONE" or "DECLINED" Spouse's Driver's License, State ID No. or enter "NONE" or "DECLINED" Spouse's Driver's License, State ID No. or enter "NONE" or "DECLINED" Spouse's Driver's License, State ID No. or enter "NONE" or "DECLINED" Spouse's Driver's License, State ID No. or enter "NONE" or "DECLINED" Spouse's Driver's License, State ID No. or enter "NONE" or "DECLINED" Spouse's Driver's License, State ID No. or enter "NONE" or "DECLINED" State Expiration Date P.1 Firm's name (or yours, if self-employed) P.2 NMBTIN P.3 Preparer's PTIN P.4 FEIN P.5 Preparer's phone number Taxpayer's email address Complete this schedule and report the result on line 31, Other payments less any refunds from schedule below. St. 2021 Other payments. List any tax year 2021 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. Sta Sum of payments Sta Sum of refunds S22 2021 Refunds received. List any refunds received from a previously filed 2021 New Mexico P.1 Intervious Carbon State Stat						
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Date Date	I declare I have examined this return, including accompanying schedules and statements, and to the	ne best of Paid prepare	er's use only:			
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