2023 CIT-1 NEW MEXICO CORPORATE INCOME AND FRANCHISE TAX RETURN



Corporation name					
1a					
Mailing address (number and street name)					
2a	CHECK ONE (Required): 4a Original Return	FOR DEPARTMENT USE ONLY			
City State Postal/ZIP code	4b Amended Return				
3a If foreign address, enter country Foreign province and/or state	4b.(i) Type:				
3Ь	4b.(ii) Date:				
FEIN (Required) New Mexico Business ID #					
5a 5b					
Final (as Chart Vees) Tay Vees Starte Final (as Chart Vees) Tay Vees Finds	Extended Due Date				
Fiscal (or Short-Year) Tax Year Starts Fiscal (or Short-Year) Tax Year Ends 6a 6b 6c 6c	Extended Due Date				
COMPLETE THE FOLLOWING:		Contact phone number			
A. State of incorporation	A1. Date of incorporation				
	ate of commercial domicile				
C. Name and address of registered agent in New Mexico First Name and La	ast Name				
Address	City	State ZIP code			
D. NAICS Code (Required) D1. Principal	business activity in New Mexico				
E. Is this a return for a unitary group? Yes No E1. If yes, which	h type of unitary group? Worldwid	de combined group			
		.			
Member of a unitary group, filing separately. Name of parent en	tity				
NOTE: A unitary group has certain filing requirements. See page 9 o	f the instructions for definition.				
F. Indicate method of accounting: Cash Accrual	Other (specify) F1.				
G. If this is the corporation's final return, was the corporation:					
Dissolved Merged or reorganized	Withdrawn G1. Date				
H. Has this corporation's federal income tax liability changed for any ye	ar due to an IRS audit or the filing of an	amended federal return that has not			
been reported to New Mexico? Yes No If yes, submit an a	mended New Mexico Corporate Income	and Franchise Tax Return,			
and a copy of the amended federal return or Revenue Agent's Report	rt (RAR), if applicable, to the New Mexic	co Taxation and Revenue Department.			
I. If this a return for a filing group, complete the following information for	or each corporation in the filing group.				
The total of column 3 must equal CIT-1, page 2, line 27, and the total	l of column 4 must equal CIT-1, page 2	, line 23. If there are more than three			
members of the filing group, complete CIT-S to add additional corpor		Column 4			
Column 1 Column 2	Column 3 Amount of quarterly, tentative,	Column 4 or other \$50 if corporation			
Corporation name FEIN	payments to apply to this re				
	4				
	Totals				
I If other than a corporation onto your level entity type /f	LLC or portnorship)				
J. If other than a corporation, enter your legal entity type (for example,		HDED. WILL THIS DEFLIND SO TO SO			
Refund Express!! Have your refund directly deposited. See instru	uchons and fill in 1, 2, 3, and 4.	JIRED: WILL THIS REFUND GO TO OR DUGH AN ACCOUNT LOCATED OUTSIDE			
RE1 1. Routing number: RE3 3. Type: C	niccking Cavings	UNITED STATES? If yes, you may not use this delivery option. See instructions.			
RE2 2. Account number:	RE4 YE	S NO You must answer this question.			

Taxpayer's email address

3 CIT-1 (page 2) MEXICO CORPORATE INCOME AND FRANCHISE TAX RETURN	
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L				
1.	Taxable income before NOL and special deductions (see CIT-1 instruc	ctions).	1.	
	1a. Captive REIT deductions.	1a.		
	1b. Exempt entity deductions.	1b.	1	
2.	Interest income from municipal bonds, excluding New Mexico bonds.	<u> </u>	2.	
3.	Other additions to the base income of a unitary group (see CIT-1 instru	uctions).	3.	
4.	Subtotal of base income after additions. Add lines 1, 1a, 1b, 2 and 3.		4.	
5.	Federal special deductions (from federal Form 1120, line 29b). Enter of	only a positive number.	5.	
6.	Interest from U.S. government obligations or federally-taxed New Mex	ico bond.	6.	
7.	Deduction for certain expenses related to a New Mexico licensed cann	nabis business.	7.	
8.	Deductions for certain foreign dividends, Subpart F income, and GILTI	(from CIT-C line 6).	8.	
9.	Other subtractions to the base income of a unitary group (see CIT-1 in	structions).	9.	
10.	New Mexico net income or loss. Subtract lines 5, 6, 7, 8, and 9 from lin	ne 4.	10.	
11.	Net allocated income or loss (from CIT-B, line 8).		11.	
12.	Total apportionable income or loss. Subtract line 11 from line 10.		12.	
13.	New Mexico apportionment percentage (from CIT-A, line 5, or 100%).		13.	%
14.	Income or loss apportioned to New Mexico. Line 12 multiplied by the p	percentage on line 13.	14.	
15.	Net New Mexico allocated income or loss (from CIT-B, line 9).		15.	
16.	New Mexico apportioned net income or loss. Add lines 14 and 15.		16.	
17.	Net operating loss deduction, not in excess of 80% of line 16. Attach	form RPD-41379.	17.	
18.	Liquor license lessor deduction (see CIT-1 Instructions).		18.	
19.	New Mexico taxable income. Subtract lines 17 and 18 from line 16.		19.	
20.	New Mexico Income tax. Tax on amount on line 19 (see tax table on p	age 13 of CIT-1 instructions).	20.	
21.	Total tax credits applied against the income tax liability on line 20 (fron	= :	21.	
22.	Net income tax. Subtract line 21 from line 20. Amount cannot be negar	•	22.	
23.	Franchise tax (\$50 per corporation).		23.	
24.	Total income and franchise tax. Add lines 22 and 23.		24.	
25.	Amended Returns Only. Enter amount of all 2023 refunds received a	and overpayments applied to 2024 (see	25.	
	instructions for line 27).	ina overpaymente applica te 2021 (eee	20.	
26.	Subtotal. Add lines 24 and 25.		26.	
27.	Total Payments: ☐ Quarterly ☐ Extension ☐ Applied from price	or vear	27.	
	27a. Mark this box if you want to use method 4 to calculate pena estimated tax. See instructions, attach RPD-41287.	•		
28.	New Mexico income tax withheld from oil and gas proceeds. Attach F	orms 1099-MISC, RPD-41285.	28.	
29.	New Mexico income tax withheld from a pass-through entity. Attach F	orms 1099-MISC, RPD-41359.	29.	
30.	Total payments and tax withheld. Add lines 27 through 29.		30.	
31.	Tax due. If line 26 is greater than line 30, subtract line 30 from line 26.		31.	
32.	Penalty (see CIT-1 Instructions).		32.	
33.	Interest (see CIT-1 Instructions).		33.	
34.	Total amount due. Mail your check or pay online using TAP. Add lines	31 through 33.	34.	
35.	Overpayment. If line 30 is greater than line 26, enter the difference.	-	35.	
36.	Amount of overpayment to apply to 2024 liability (not more than line 3	5).	36.	
37.	Amount of overpayment to refund. Subtract line 36 from line 35.	,	37.	
38.	• •		38.	
39.			39.	
	· · · · · · · · · · · · · · · · · · ·		-	
I dec and t prepa	are that I have examined this return, including accompanying schedules and statements, o the best of my knowledge and belief, it is true, correct, and complete. Declaration of urer (other than taxpayer or an employee of the taxpayer) is based on all information of upreparer has any knowledge.	Paid Preparer's Use Only Signature of preparer if other than employee of NMBTIN		er Date
	ature of officer Date	P ² FEIN		
Title	Contact phone number			

Contact phone number

P4 Preparer's phone number _

2023 CIT-A NEW MEXICO APPORTIONED INCOME FOR MULTISTATE CORPORATIONS (attach to CIT-1)



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Taxpayers with income from inside and outside N The Department cannot accept computerized schedu Everywhere, and all other applicable line items for the	ules instead of this form. Yo	u must complete colum	
A. Have you changed your reporting of any class or t a prior taxable year?	,		
B. This entity submitted written notification of its electrocome for tax year ending T	·	• • • • • • • • • • • • • • • • • • • •	nment of business See instructions.
C. Mark the box indicating the special method electe	ed. Manufacturers	Headquarters	s Operation
PROPERTY FACTOR	Column 1 Total Everywhere	Column 2 Inside New Mexico	Percent Inside New Mexico
Average annual value of inventory			Calculate each percentage to four decimal places; for example, 22.5431%
1. Property factor. Divide Total property column 2 by column 1	and then multiply by 100	1	%
PAYROLL FACTOR Wages, salaries, commissions, and other compensation of employees related to apportionable income			
2. Payroll factor. Divide column 2 by column 1 and then multiply	y by 100	+ 2	%
SALES FACTOR Gross receipts			
3. Sales factor. Divide column 2 by column 1 and then multiply b	oy 100		%
4. Sum of factor percentages. Add lines 1, 2, and 3		+ 4	%
4a. Count of factors. Enter the total count of all factors used.		. 4a	
5. NEW MEXICO PERCENTAGE. Divide line 4 by the number of on CIT-1, page 2, line 13.			%

2023 CIT-B

NEW MEXICO ALLOCATION OF NON-BUSINESS INCOME OR LOSS



FEIN			

SCHEDULE OF INCOME NOT DERIVED FROM THE CORPORATION'S TRADE OR BUSINESS

The Department cannot accept computerized schedules instead of this form. Round all dollar amounts.

	_			_	
		Column 1 Gross Amount	Column 2 Related Expenses	Column 3 Column 1 less Column	Column 4 1 2 Allocation to New Mexico
1.	Non-business dividends				
2.	Non-business interest				
3.	Non-business rents				
4.	Non-business royalties 4				
5.	Profit or loss on sale or exchange of non-business assets				
6.	Non-business partnership income or loss 6				
7.	Other non-business income or loss				
8.	Net allocated income. Enter here and on CIT-1, line 11. Add column	3, lines 1 through 7	8	3	
9.	Net New Mexico allocated income. Enter here and on CIT-1, line 15. Add column	A lines A through 7			
	023 CIT-C ERTAIN FOREIGN DIVIDENDS, SU	BPART F, AND GII	LTI		
1.	Certain dividends from foreign corporations (fr	om federal form 1120, S	Schedule C, Line 14)	1	
	. Subpart F inclusions derived from hybrid dividends of tiered corporations (from federal form 1120, Schedule C, Line 16b)				
	Line 16b)				
3.	Other inclusions from CFCs under subpart F (from federal form 1120,	Schedule C, Line 16c)	3	
	Global Intangible Low Taxed Income (GILTI) n 1120, Schedule C, Line 17, net of line 22)				
5.	Foreign dividend gross-up (from federal form	1120, Schedule C, Line	18)	5	
3.	Total. Add lines 1 through 5. Also enter on CI	Γ-1, Line 8		6	