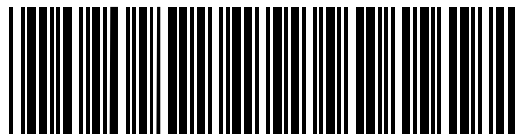


2022 PIT-1 NEW MEXICO PERSONAL INCOME TAX RETURN

For the year January 1 - December 31, 2022

or fiscal year beginning F.1 _____ ending F.2 _____

If amending use Form 2022 PIT-X.



1064 01 1

Print your name (first, middle, last) 1a A A		SOCIAL SECURITY NUMBER 1b 490-54-9999		Blind 1c <input type="checkbox"/>	Age 65 or over 1d <input checked="" type="checkbox"/>	Residency status 1e R	Taxpayer's date of birth 1f 01/01/1952
Print your spouse's name (first, middle, last). If married filing separately, include spouse. 2a A A		2b 490-54-2222		2c <input type="checkbox"/>	2d <input type="checkbox"/>	2e R	Spouse's date of birth 2f 01/01/1990
3a <input type="checkbox"/> If the address is new or changed, mark this box.		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. You must also attach Form RPD-41083. 4a _____ Name 4b _____ SSN		If taxpayer or spouse died before this return is filed, enter date of death. 4c _____ Taxpayer's date of death 4d _____ Spouse's date of death		Residency status: For taxpayer and spouse (1e and 2e), enter: R if RESIDENT N if NON-RESIDENT F if FIRST-YEAR RES. P if PART-YEAR RES.	
Mailing Address (Number and street) 3b _____							
City _____ State _____ Postal/ZIP Code _____							
If foreign address, enter country _____ Foreign province and/or state _____							
5 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 _____

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.)

First name	Column 1 Last name	Column 2 Dependent's SSN	Column 3 Date of birth (MM/DD/CCYY)
A	A	490-54-8888	01/01/2010
B	A	490-54-7777	01/01/2010
C	A	490-54-6666	01/01/2011

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) _____

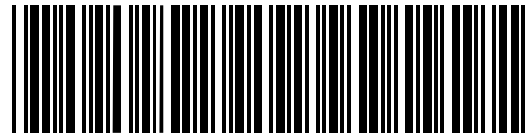
☐ (5) Qualifying widow(er) with dependent child

9. FEDERAL ADJUSTED GROSS INCOME. (from federal Form 1040 or 1040-SR, line 11).	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 5a. See the worksheet in the instructions.	+	10
11. Total Additions to federal adjusted gross income (PIT-ADJ, line 5). Attach PIT-ADJ	+	11
12. Federal standard or itemized deduction amount (from federal Form 1040, line 12)	-	12 27,300
12a. If you itemized , mark the box 12a <input type="checkbox"/>		
13. Deduction for certain dependents. See the worksheet in the instructions	-	13 8,000
14. New Mexico low- and middle-income tax exemption. See PIT-1 instructions.	-	14 12,500
15. Total Deductions and Exemptions from federal income (PIT-ADJ, line 26). Attach PIT-ADJ.	-	15 8,000
16. Medical care expense deduction. See PIT-1 instructions. You must complete both lines 16 and 16a or the deduction will be denied.	-	16
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 Cannot be less than zero.	=	17
18. New Mexico tax on amount on line 17 or from PIT-B, line 14		18
18a. From Tax Rate Table = R . From PIT-B, line 14 = B 18a R		
19. Additional amount for tax on lump-sum distributions. See PIT-1 instructions.	+	19
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
21. Business-related income tax credits applied, from Schedule PIT-CR, line A. Attach PIT-CR	-	21
22. NET NEW MEXICO INCOME TAX. Add lines 18 and 19, then subtract lines 20 and 21. Cannot be less than zero.	=	22

Electronic filers: If you file your New Mexico Personal Income Tax return online and also pay tax due online, your due date is May 01, 2023. All others must file by April 18, 2023. See PIT-1 instructions for details.

Continue on the next page.

2022 PIT-1 (page 2)
NEW MEXICO PERSONAL INCOME TAX RETURN



1
YOUR SOCIAL SECURITY NUMBER

490-54-9999

Do not submit a photocopy of this form to the Department. Submit only original forms and keep a copy for your records. If submitting this return by mail, send to: New Mexico Taxation and Revenue Department, P. O. Box 25122, Santa Fe, New Mexico 87504-5122

23. The amount on line 22 from page 1	23	
24. Total claimed on rebate and credit schedule (PIT-RC, line 25). Attach PIT-RC	24	520
25. Working families tax credit. (You must complete lines 25, 25a, and 25b* or the deduction will be denied.)	25	
25a. The amount of federal earned income credit (EIC) reported on your 2022 federal income tax return or calculated under NM Expansion	25a	0
25b. *NM Expansion Only: Check this box if you did not qualify for the EIC on your federal return	25b	<input type="checkbox"/>
26. Refundable business-related income tax credits from Schedule PIT-CR, line B. Attach PIT-CR	26	
27. New Mexico income tax withheld. Attach annual statements of income and withholding	27	
28. New Mexico income tax withheld from oil and gas proceeds. Attach 1099-Misc or RPD-41285	28	
29. New Mexico income tax withheld from a pass-through entity. Attach 1099-Misc or RPD-41359	29	
30. 2021 estimated income tax payments. See PIT-1 instructions	30	
31. Other Payments	31	
32. TOTAL PAYMENTS AND CREDITS. Add lines 24 through 31	32	520
33. TAX DUE. If line 23 is greater than line 32, enter the difference here	33	
34. Penalty on underpayment of estimated tax. If you want penalty computed for you, leave blank	34	
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. Attach RPD-41272	35	
36. Penalty. See PIT-1 instructions. If you want penalty computed for you, leave blank	36	
37. Interest. See PIT-1 instructions. If you want interest computed for you, leave blank	37	
38. TAX, PENALTY, AND INTEREST DUE. Add lines 33, 34, 36, and 37	38	
39. OVERPAYMENT. If line 23 is less than line 32, enter the difference here	39	520
40. Refund voluntary contributions (PIT-D, line 19). Attach PIT-D	40	
41. Amount from line 39 you want applied to your 2023 Estimated Tax	41	
42. AMOUNT TO BE REFUNDED TO YOU. Line 39 minus lines 40 and 41	42	520

!! REFUND EXPRESS !! HAVE IT DIRECTLY DEPOSITED! SEE INSTRUCTIONS AND COMPLETE ALL QUESTIONS IN THIS BLOCK.

RE.1 Routing number:

RE.2 Account number:

RE.3 Type: Choose one.
Checking ☐ Mark **X** by your choice.
Savings ☐

RE.4 YES ☐ NO ☐

HSD.1 ☐ Check this box if you would like to see if you and the members of your household qualify for medical insurance through the Human Services Department (HSD) or Health Insurance Exchange (NMHIE). Important: Checking this box gives the Taxation and Revenue Department permission to share information provided on the PIT-1 and PIT-S with HSD and NMHIE. See instructions for additional information.

I declare 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.

Your signature	Date
Driver's License, State ID No. or enter "NONE" or "DECLINED"	State Expiration Date
Spouse's signature	Date
Spouse's Driver's License, State ID No. or enter "NONE" or "DECLINED"	State Expiration Date

(If filing jointly, BOTH must sign even if only one had income.)

Taxpayer's phone number

Taxpayer's email address

Paid preparer's use only:

Signature of preparer 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

P.6 ☐ Mark this box if Form RPD-41338 is on file for this taxpayer. See PIT-1 instructions.