

New Mexico Taxation and Revenue Department
**INDIVIDUAL INCOME TAX DECLARATION FOR
ELECTRONIC FILING AND TRANSMITTAL**

First Name, Middle Initial, and Last Name ROHIT KOLLI	Social Security Number (SSN) 036-98-6558	<input checked="" type="checkbox"/> Residency Status
Spouse First Name, Middle Initial, and Last Name	Social Security Number (SSN)	<input type="checkbox"/> Residency Status
Mailing Address, City, State, and Zip Code 4129 S MEADOWS ROAD, APT. 1322 SANTA FE NM 87507		
TAX YEAR (CCYY): <u>2023</u>		
FILING STATUS (Check One)		
<input checked="" type="checkbox"/> (1.) Single	<input type="checkbox"/> (4.) Head of household (Enter name of person who qualifies you as head of household if that person is not counted as a qualified exemption on your federal return.) _____	
<input type="checkbox"/> (2.) Married filing jointly	<input type="checkbox"/> (5.) Qualifying widow(er)	
<input type="checkbox"/> (3.) Married filing separately (Enter spouse's name and social security number.)		

PART I: TAX RETURN INFORMATION (Whole Dollar Amounts Only)

1. Federal Adjusted Gross Income (as reported on PIT-1)	1.	24,286
2. Net New Mexico Income Tax (as reported on PIT-1).....	2.	191
3. Total Payments and Credits (as reported on PIT-1)	3.	1,013
4. Tax Due (as reported on PIT-1).....	4.	
5. Overpayment (as reported on PIT-1)	5.	822

PART II: DECLARATION OF TAXPAYER

I declare the amounts described in Part I above agree with the amounts shown on the corresponding lines of my New Mexico personal income tax return, and that I have examined the contents of my electronic return and accompanying schedules and statements. To the best of my knowledge and belief, my return is true, correct, and complete. I consent that my return, including accompanying schedules and statements, be electronically transmitted to the New Mexico Taxation and Revenue Department.

PLEASE
SIGN
HERE

Your signature

Date

Spouse's signature (If joint return, BOTH MUST sign.)

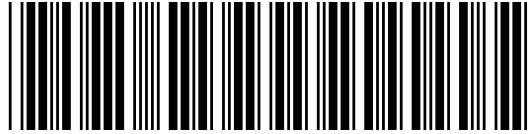
PART III: DECLARATION OF PREPARER/TRANSMITTER (If Applicable)**PAID PREPARER'S, ELECTRONIC RETURN ORIGINATOR'S or OTHER THIRD-PARTY TRANSMITTER'S USE ONLY**

I declare the above taxpayer's return is based on all pertinent information of which I have knowledge. I have verified that the taxpayer's name shown on this declaration agrees with the name that appears on the proof of account. A copy of all forms and information to be filed with or transmitted to the New Mexico Taxation and Revenue Department have been provided to the taxpayer.

Preparer's/Transmitter's signature SYAM PRIYA RAM SAGAR GUPTA TALLAM		Date 02/19/2024
Check if self-employed <input type="checkbox"/>	Preparer's PTIN P02082703	Preparer's NMBTIN (if applicable)
Firm's name (or yours, if self-employed) GLOBAL TAXES LLC		
Address (number, street, city, and state) 245 ROONEY CT E BRUNSWICK NJ		ZIP code 08816

When required to submit a copy of this form to the Department, mail the form and attachments to:
New Mexico Taxation and Revenue Department, P.O. Box 5418, Santa Fe, NM 87502-5418

2023 PIT-1 NEW MEXICO PERSONAL INCOME TAX RETURN



For the year January 1 - December 31, 2023
or fiscal year beginning F.1 ending F.2
If amending use Form 2023 PIT-X.

FOR DEPARTMENT USE ONLY

Get your refund faster, file online using Taxpayer Access Point TAP <https://tap.state.nm.us>.

1555 02 2

1a Print your name (first, middle, last)
ROHIT KOLLI

2a Print your spouse's name (first, middle, last). If married filing separately, include spouse.

SOCIAL SECURITY NUMBER **036-98-6558**

Blind Age 65 or over Residency status **R**

1f Taxpayer's date of birth **03/31/2000**

2f Spouse's date of birth

3a If the address is new or changed, mark this box.

3b Mailing Address (Number and street)
4129 S MEADOWS ROAD APT 1322

3c City **SANTA FE** State **NM** Postal/ZIP Code **87507**

3d If foreign address, enter country Foreign province and/or state

5. **1** **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)

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.

If taxpayer or spouse died before this return is filed, enter date of death.

4a Name

4b SSN

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 Resident
P if Part-Year Resident

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)

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.)

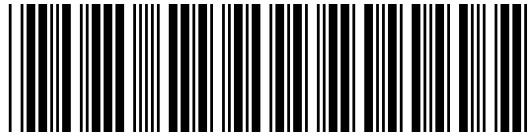
(4a) (5) Surviving Spouse with dependent child

9. FEDERAL ADJUSTED GROSS INCOME. (from federal Form 1040 or 1040SR, line 11).....	9	24,286
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 6). Attach PIT-ADJ	+	11
12. Federal standard or itemized deduction amount (from federal Form 1040, line 12).....	-	12
12a. If you itemized , mark the box.....	12a	<input type="checkbox"/>
13. Deduction for certain dependents. See the worksheet in the instructions.....	-	13
14. New Mexico low- and middle-income tax exemption. See PIT-1 instructions.....	-	14
15. Total Deductions and Exemptions from federal income (PIT-ADJ, line 27). Attach PIT-ADJ	-	15
16. Medical care expense deduction. See PIT-1 instructions.....	-	16
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.....	=	17
Cannot be less than zero		
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 **April 30, 2024**. All others must file by **April 15, 2024**. See PIT-1 instructions for details.

Continue on the next page.

2023 PIT-1 (page 2)
NEW MEXICO PERSONAL INCOME TAX RETURN



2
YOUR SOCIAL SECURITY NUMBER

036-98-6558

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	191
24. Total claimed on rebate and credit schedule (PIT-RC, line 26). Attach PIT-RC	24	81
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 2023 federal income tax return or calculated under NM Expansion.....	25a	
25b. *NM Expansion Only: Check this box if you did not qualify for the EIC on your federal return.. 25b		
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 or paid by a pass-through entity. Attach 1099-Misc or RPD-41359	+	29
30. 2023 estimated income tax payments. See PIT-1 instructions.....	+	30
31. Other Payments.....	+	31
32. TOTAL PAYMENTS AND CREDITS. Add lines 24 through 31.....	=	32
		1,013
33. TAX DUE. If line 22 is greater than line 32, enter the difference here.....	33	
34. Penalty on underpayment of estimated tax. See PIT-1 instructions	+	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.	+	36
37. Interest. See PIT-1 instructions.	+	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	822
40. Refund voluntary contributions (PIT-D, line 18). Attach PIT-D	-	40
41. Amount from line 39 you want applied to your 2024 Estimated Tax	-	41
42. AMOUNT TO BE REFUNDED TO YOU. Line 39 minus lines 40 and 41.....	=	42
		822

Refund Express!! *Have it directly deposited! See instructions and complete all questions in this block.*

RE. 1 Routing Number 111900659 RE. 2 Account Number 3832398063 RE.3 Account Type: Checking Savings

Re. 4: Will this refund go to or through an account outside of the United States? Important: If "yes," you can not use this refund method. See instructions. 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	
<u>47766101</u> TX <u>03/02/2024</u>	
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 (940) 758-1508
 Taxpayer's email address KOLLIROHIT2000@GMAIL.COM

Paid preparer's use only:

Signature of preparer SYAM PRIYA RAM SAGAR GUPTA T Date 02/19/2024

GLOBAL TAXES LLC

P.1 Firm's name (or yours, if self-employed)

P.2 NMBTIN

P.3 Preparer's PTIN P02082703

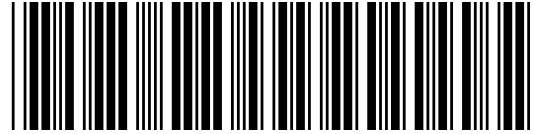
P.4 FEIN 84-3171965

P.5 Preparer's phone number (678) 965-9522

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

2023 PIT-RC

NEW MEXICO REBATE AND CREDIT SCHEDULE



This schedule may be used by individuals who qualify for one or more refundable rebates and credits offered by New Mexico. Include Schedule PIT-RC with your personal income tax return, Form PIT-1.

Print your name (first, middle, last)
 ROHIT KOLLI

YOUR SOCIAL SECURITY NUMBER

036-98-6558

SECTION 1: QUALIFICATIONS FOR REBATES AND CREDITS REPORTED IN SECTIONS 2 TO 5. Complete Section 1 to claim the following rebates and credits in Sections 2 through 5. **IMPORTANT:** To claim any refundable tax credits in Section 6, you do not need to complete Section 1.

Persons with Modified Gross Income of:

\$36,000 or less may qualify for the **low income comprehensive tax rebate** (Section 2)

\$16,000 or less who are age 65 or older may qualify for the **property tax rebate** (Section 3)

\$24,000 or less who live in **Los Alamos County, Santa Fe County, or Doña Ana County ONLY** may qualify for **additional low income property tax rebate** (Section 4)

\$30,160 or less may qualify for the **New Mexico child day care credit** (Section 5)

FOR COMPLETE ELIGIBILITY REQUIREMENTS, READ REBATE AND CREDIT SCHEDULE INSTRUCTIONS

Qualifications for Credits and Rebates Reported in Sections 2 to 5. You and your spouse, if applicable, must mark the box to indicate whether the statement is true. If the statement is not true, leave the box blank. If you are not married, leave the boxes in the spouse column blank.

	TAXPAYER	SPOUSE
A. I was a resident of New Mexico during any part of the tax year.....	TRUE <input checked="" type="checkbox"/>	TRUE <input type="checkbox"/>
B. In 2023, I was physically present in New Mexico for at least six months.....	TRUE <input checked="" type="checkbox"/>	TRUE <input type="checkbox"/>
C. In 2023, I was NOT eligible to be claimed as a dependent of another taxpayer for income tax purposes..	TRUE <input checked="" type="checkbox"/>	TRUE <input type="checkbox"/>
D. In 2023, I was NOT an inmate of a public institution for a period of more than six months.....	TRUE <input checked="" type="checkbox"/>	TRUE <input type="checkbox"/>

1. Number of exemptions from Form PIT-1, line 5.....		1
2. a. Enter number of household members who DO NOT qualify. If all exemptions qualify, leave blank..... See PIT-RC instructions	-	2a
b. Subtract 2a from 1. Number of allowable household members.....	=	2b 1
c. Extra Exemption: Enter 1 if you or your spouse (if married filing jointly) are blind for federal income tax purposes. Enter 2 if you and your spouse (if married filing jointly) are blind.....	+	2c
d. Add lines 2b and 2c.....	=	2d 1
e. If you are 65 or older, enter 2	+	2e
f. If married filing jointly and your spouse is 65 or older, enter 2	+	2f
g. Add lines 2d, 2e, and 2f.....	=	2g 1
h. If you checked filing status (3) married filing separately on your Form PIT-1, enter the number of exemptions, if any, your spouse claimed on line 2g of your spouse's PIT-RC.....	+	2h
3. Total. Add lines 2g and 2h. Enter here and on line 13a on page 2 of this form.....	=	3 1

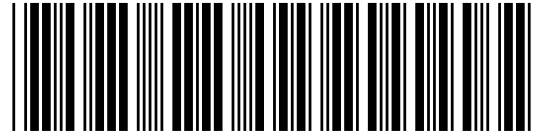
CALCULATE MODIFIED GROSS INCOME. Modified gross income, generally, is all income of the taxpayer and household members, both taxable and nontaxable, and undiminished by losses. See instructions for types of income you do not need to include in modified gross income. **NOTE:** If married filing separately, be sure to include your spouse's income.

4. Wages, salaries, tips, etc.....		4 24,286
5. Social security benefits, pensions, annuities, and Railroad Retirement.....	+	5
6. Unemployment and workers' compensation benefits.....	+	6
7. Public assistance, TANF and Supplemental Security Income (SSI).....	+	7
8. Net profit from business, farm, or rentals. If a loss, enter zero, DO NOT enter a negative number	+	8
9. Capital gains undiminished by capital losses.....	+	9
10. Gifts of cash or marketable tangible items received. (You must give the items a reasonable value.).....	+	10
11. All other income such as interest, dividends, gambling winnings, insurance settlements, scholarships, grants, VA benefits, trust income and inheritance, alimony, and child support.....	+	11
12. Modified Gross Income. Add lines 4 through 11. Enter the total on line 12 and on line 13 of page 2. (Total must equal or exceed Federal Adjusted Gross Income from Form PIT-1, line 9)	+	12 24,286

2023 PIT-RC (page 2) NEW MEXICO REBATE AND CREDIT SCHEDULE

2
YOUR SOCIAL SECURITY NUMBER

036-98-6558



SECTION 2: LOW INCOME COMPREHENSIVE TAX REBATE (If line 13 is MORE than \$36,000, DO NOT complete line 14.)

- 13. Enter Modified Gross Income from line 12.....
- a. Enter Total Exemptions from line 3.....
- 14. Low income comprehensive tax rebate. On Table 1 in the instructions, find the Modified Gross Income range that includes the amount on line 13, then move across to the column that matches the number of exemptions online 13a. Married couples filing separately must divide the result by two

13	24,286
13a	1
14	81

SECTION 3: PROPERTY TAX REBATE FOR PERSONS 65 OR OLDER. (If line 13 is more than \$16,000, DO NOT complete this section.)

- 15. PROPERTY OWNED. Tax billed for the calendar year on principal place of residence.....
- 16. PROPERTY RENTED
 - a. Amount of rent paid during the tax year for principal place of residence
 - b. If the amount entered on line 16a includes rent a government entity paid on your behalf, mark here..... 16b
 - c. **Multiply** line 16a by **0.06** and enter the amount here.....
- 17. REBATE AMOUNT
 - a. Add lines 15 and 16c and then enter the total here.....
 - b. **Find** the Modified Gross Income range, on Table 2 in the instructions, that corresponds to the amount on line 13. Read across the table to the Column showing your maximum property tax liability and enter the amount here.....
 - c. **Property tax rebate.** Subtract line 17b from 17a. Do not enter more than \$250, or if married filing separately, more than \$125

15	
16a	
16b	
16c	
17a	
17b	
17c	

SECTION 4: ADDITIONAL LOW INCOME PROPERTY TAX REBATE for Los Alamos, Santa Fe County, or Doña Ana County residents only. (If line 13 is over \$24,000, DO NOT complete this section.)

You must indicate the county.

- 18 LA Los Alamos County
- 18 SF Santa Fe County
- 18 DA Doña Ana County

- 18. REBATE AMOUNT
 - a. PROPERTY OWNED only. Tax billed for the calendar year on principal place of residence.....
 - b. **Find** the Modified Gross Income range, on Table 3 in the instructions, that corresponds to the amount on line 13. Read across the table to the Column showing your property tax rebate percentage and enter here.....
 - c. **Multiply** line 18a by line 18b and enter here. Do not enter more than \$350, or if married filing separately, more than \$175.....

18a	
18b	%
18c	

SECTION 5: NEW MEXICO CHILD DAY CARE CREDIT. If Modified Gross Income on line 13 is \$30,160 or less, use the worksheet in the instructions to calculate your available child day care credit. **Attach the worksheet and Forms PIT-CG.**

- 19. Enter either the total of Column G on the worksheet or \$1,200, **WHICHEVER IS LESS**.....
- 20. Number of qualified dependents under age 15 receiving child day care.....
- 21. Enter the portion of the federal child care credit applied against your federal tax from federal Schedule 3, line 2.....
- 22. New Mexico child day care credit. Subtract line 21 from line 19. Married couples filing separately must divide the result by two.....

19	
20	
21	
22	

SECTION 6: REFUNDABLE TAX CREDITS.

- 23. Refundable medical care credit for persons 65 or older. See PIT-RC instructions.....
- 24. Special needs adopted child tax credit.....
- 25. Child Income Tax Credit

23	
24	
25	

SECTION 7: TOTAL REBATES AND CREDITS CLAIMED

- 26. Add lines 14, 17c, 18c, 22, 23, 24, and 25. Enter here and on Form PIT-1, line 24.....

26	81
----	----