2024 CIT-1 NEW MEXICO CORPORATE INCOME AND FRANCHISE TAX RETURN



You must answer this question.

№

RE4 YES

Corporation name		
1a Mailing address (number and street name)	_	
2a	CHECK ONE (Required):	
City State Postal/ZIP code	4a Original Return	FOR DEPARTMENT USE ONLY
	4b Amended Return	
If foreign address, enter country Foreign province and/or state	4b.(i) Type: 4b.(ii) Date:	
FEIN (Required) New Mexico Business ID #		
5a 5b		
Fiscal (or Short-Year) Tax Year Starts Fiscal (or Short-Year) Tax Year Ends	Extended Due Date	
6a 6b 6c	6d	
COMPLETE THE FOLLOWING:		Contact phone number
A. State of incorporation	A1 Date of incorporation	
B. Date business began in New Mexico B1. State		
C. Name and address of registered agent in New Mexico First Name and Last N	Name	
Address	City	State ZIP code
D. NAICS Code (Required)	siness activity in New Mexico	
	ype of unitary group? 🔲 Worldwid	le combined group
		U
Water's-edge group. Year of election Cons	solidated group. Year of election	
Member of a unitary group, filing separately. Name of parent entity	/	
NOTE: A unitary group has certain filing requirements. See page 9 of th	ne instructions for definition.	
F. Indicate method of accounting:	ther (specify) F1.	
G. If this is the corporation's final return, was the corporation:		
Dissolved Merged or reorganized W	Vithdrawn G1. Date ———	
H. Has this corporation's federal income tax liability changed for any year	due to an IRS audit or the filing of an	amended federal return that has not
been reported to New Mexico? Yes No	nded New Mexico Corporate Income	and Franchise Tax Return,
and a copy of the amended federal return or Revenue Agent's Report (I	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 e	each corporation in the filing group.	
The total of column 3 must equal CIT-1, page 2, line 27, and the total of	f 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 corporation	ions. Column 3	Column 4
Column 1 Column 2 Corporation name FEIN	Amount of quarterly, tentative, o	
	payments to apply to this re	eturn pays franchise tax
	Totals	
J. If other than a corporation, enter your legal entity type (for example, LLC	C or partnership):	
Refund Express!! Have your refund directly deposited. See instruction		JIRED: WILL THIS REFUND GO TO OR DUGH AN ACCOUNT LOCATED OUTSIDE
	cking Savings THE	UNITED STATES? If yes, you may not use this
RE2 2. Account number:	r X. Enter X. refund	delivery option. See instructions.

FEIN

Taxpayer's email address

2024 CIT-1 (page 2) NEW MEXICO CORPORATE INCOME AND FRANCHISE TAX RETURN



1.	Taxable income before NOL and special deductions (see CIT-1 instructions).	1.	
	1a. Captive REIT deductions. 1a.		
	1b. Exempt entity deductions. 1b.	1	
2.	Interest income from municipal bonds, excluding New Mexico bonds.	2.	
3.	Other additions to the base income of a unitary group (see CIT-1 instructions).	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 only a positive number.	5.	
6.	Interest from U.S. government obligations or federally-taxed New Mexico bond.	6.	
7.	Deduction for certain expenses related to a New Mexico licensed cannabis 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 instructions).	9.	
10.	New Mexico net income or loss. Subtract lines 5, 6, 7, 8, and 9 from line 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 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 page 13 of CIT-1 instructions).	20.	
21.	Total tax credits applied against the income tax liability on line 20 (from CIT-CR, line A). Attach CIT-CR.	21.	
22.	Net income tax. Subtract line 21 from line 20. Amount cannot be negative.	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 2024 refunds received and overpayments applied to 2025 (see	25.	
	instructions for line 27).		
26.	Subtotal. Add lines 24 and 25.	26.	
27.	Total Payments: Quarterly Extension Applied from prior year	27.	
	27a. A Mark this box if you want to use method 4 to calculate penalty and interest on underpayment of estimated tax. See instructions, attach RPD-41287.		
28.	New Mexico income tax withheld from oil and gas proceeds. Attach Forms 1099-MISC, RPD-41285.	28.	
29.	New Mexico income tax withheld from a pass-through entity. Attach Forms 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 2025 liability (not more than line 35).	36.	
37.	Amount of overpayment to refund. Subtract line 36 from line 35.	37.	
38.	Total portion of tax credits to refund (from CIT-CR, line B). Attach CIT-CR.	38.	
39.	Total refund of overpaid tax and refundable credit due to you. Add lines 37 and 38.	39.	

Taxpayer's Signature I declare that I have examined this return, including accomp and to the best of my knowledge and belief, it is true, correc	t, and complete. Declaration of	Paid Preparer's Use Only	
preparer (other than taxpayer or an employee of the taxpayer which preparer has any knowledge.	er) is based on all information of	Signature of preparer if other than employee of the taxpayer	Date
		P1 NMBTIN	
Signature of officer	Date	P2 FEIN	
Title	Contact phone number	P3 Preparer's PTIN	
		P4 Preparer's phone number	
Taxpaver's email address			

2024 CIT-A NEW MEXICO APPORTIONED INCOME FOR MULTISTATE CORPORATIONS (attach to CIT-1)



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Taxpayers with income from inside and outside New Mexico must complete this schedule. The Department cannot accept computerized schedules instead of this form. You must complete column 1, Total Everywhere, and all other applicable line items for the Department to process the return. Round all dollar amounts.

- A. Have you changed your reporting of any class or type of allocated or apportioned income from the way it was reported in a prior taxable year?
- B. This entity submitted written notification of its election to use one of the special methods of apportionment of business income for tax year ending ______. The effective date of the election is ______. See instructions.

C. Mark the box indicating the special method elected.

Manufacturers	Headquarters Operation

%

+ 2

PROPERTY FACTOR	Column 1 Total Everywhere	Column 2 Inside New Mexico	Percent Inside New Mexico
	a		
Average annual value of inventory	а b		Calculate each
	c		percentage to four
	d		decimal places; for example, 22.5431%.
	e		
1. Property factor. Divide Total property column 2 by colur	nn 1 and then multiply by 100		%
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 by 100.....

SALES FACTOR			-
Gross receipts ^{3a}			
	_		
3. Sales factor. Divide column 2 by column 1 and then multiply by 100	+	3	%

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 factors entered on line 4a. Enter amount here and on CIT-1, page 2, line 13.	=[5	%

2024 CIT-B NEW MEXICO ALLOCATION OF NON-BUSINESS INCOME OR LOSS



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-		

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 2	Column 4 Allocation to New Mexico
1.	Non-business dividends 1				
2.	Non-business interest 2				
3.	Non-business rents 3				
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 colum	n 3, lines 1 through 7	8]
9.	Net New Mexico allocated income. Enter here and on CIT-1, line 15. Add colum	nn 4, lines 1 through 7]

2024 CIT-C CERTAIN FOREIGN DIVIDENDS, SUBPART F, AND GILTI

1.	Certain dividends from foreign corporations (from federal form 1120, Schedule C, Line 14)	1
2.	Subpart F inclusions derived from hybrid dividends of tiered corporations (from federal form 1120, Schedule C, Line 16b)	2
3.	Other inclusions from CFCs under subpart F (from federal form 1120, Schedule C, Line 16c)	3
4.	Global Intangible Low Taxed Income (GILTI) net of the deduction provided under IRC Sec. 250 (federal form 1120, Schedule C, Line 17, net of line 22)	4
5.	Foreign dividend gross-up (from federal form 1120, Schedule C, Line 18)	5
6.	Total. Add lines 1 through 5. Also enter on CIT-1, Line 8	6