

INDIVIDUAL INCOME TAX DECLARATION FOR ELECTRONIC FILING

PIT - 8453

2005

For the year January 1 - December 31, 2005

Your first name & middle initial	Last name	Social Security Number	<input type="checkbox"/> RESIDENCY STATUS
Spouse's first name & middle initial	Last name	Social Security Number	<input type="checkbox"/> RESIDENCY STATUS

Your mailing address, city, state and zip

**FILING STATUS (Check One)**

(1) Single

(2) Married filing jointly

(3) Married filing separately (Enter spouse's Social Security Number)

(4) Head of household  
Enter name of person who qualifies you as head of household \_\_\_\_\_

(5) Qualifying widow(er) Year spouse died - 2001 2002 (circle one)

**PART I TAX RETURN INFORMATION (WHOLE DOLLARS ONLY)**

1. Federal Adjusted Gross Income (PIT-1 Form, Line 5)	1.	
2. Net New Mexico Income Tax (PIT-1 Form, Line 15)	2.	
3. New Mexico Income Tax Withheld (PIT-1 Form, Line 17)	3.	
4. Tax Due (PIT-1 Form, Line 20)	4.	
5. Overpayment (PIT-1 Form, Line 21)	5.	

**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 income tax return given to me by my tax return preparer/transmitter, and that I have also compared the information contained on my return with the information I provided to my preparer/transmitter. 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**

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.

PAID  
PREPARER'S/  
TRANSMITTER'S  
USE ONLY

Your signature	Date
Check if self-employed <input type="checkbox"/>	CRS Identification Number 38 2957030
Firm's Name (or yours if self-employed) Express File, Inc.	
Address (number, street, city & state) Express File, Inc. , P.O. Box 131007. Ann Arbor, MI	Zip Code 48113-1007