

# 2025 PTE New Mexico Pass-Through Entities Tax Return



If the PTE reports 51 or more payees on the PTE-D, this return must be filed electronically.

Name of Pass-Through Entity		
FEIN	NMBTIN	NAICS

FOR DEPARTMENT USE ONLY
-------------------------

Mark this box if the address is new or changed.

Address (Number and street name)		
City	State	Postal/Zip Code
If foreign address, enter country	Foreign province and/or state	

**CHECK ONE (Required):**

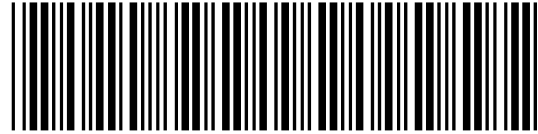
- A.  Original Return
- B.  Amended Return
  - B.(i) Type: \_\_\_\_\_
  - B.(ii) Date: \_\_\_\_\_
  - B.(iii) 7-1-13(G) Payment Election
- C. Mark the legal entity type that applies to you
  - LLC
  - Partnership

Beginning of Tax Year	Last Day of Tax Year	Federal Due Date	Extended Due (MM/DD/CCYY)
State where organized	Date of Organization	Date business began in NM	Date terminated in New Mexico

**Section 1. Computation of net income.** Round each percentage to four decimal places (for example, 22.6270%).

1. Ordinary business income (loss) from federal Form 1065, Schedule K.....		1.	
2. Other income (loss) from federal Form 1065, Schedule K.....	+	2.	
3. Interest income from municipal bonds, excluding New Mexico bonds.....	+	3.	
4. Subtotal of lines 1, 2, and 3 .....	=	4.	
5. Interest from U.S. government obligations or federally-taxed New Mexico bonds .....		5.	
6. Allowable deductions from Schedule K.....		6.	
7. Deduction for certain expenses related to a New Mexico licensed cannabis business.....		7.	
8. Total allocated income (from PTE-B, line 8, column 1) .....		8.	
9. Apportionable income. Add lines 5, 6, 7 and 8, then subtract from line 4 .....		9.	
10. Average New Mexico percentage (from PTE-A, line 5) .....		10.	_____ %
11. New Mexico apportionable income. Multiply line 9 by line 10.....		11.	
12. New Mexico allocated income (from PTE-B, line 9, column 2) .....	+	12.	
13. Add lines 11 and 12. <b>New Mexico net income</b> .....	=	13.	

**2025 PTE**  
**New Mexico Pass-Through Entities Tax Return**  
 (Page 2)



FEIN
------

**Section 2. Computation of withholding tax.** Complete lines 14 through line 18 if electing to file and pay withholding tax.

14. Amount of net income from line 13 that is subject to PTE withholding tax .....		14.	
15. Withholding tax rate .....	<b>x</b>	15.	5.9%
16. Multiply line 14 by line 15. Amount of withholding tax on net income .....	<b>=</b>	16.	
17. Total withholding tax passed directly to owners (see instructions) .....	<b>-</b>	17.	
18. Subtract line 17 from line 16. <b>Total withholding tax</b> .....	<b>=</b>	18.	

**Section 3. Computation of composite income tax.** Complete lines 19 and line 20 if electing to file and pay composite income tax.

19. Amount of net income from line 13 subject to composite income tax for electing owners .....		19.	
20. Composite income tax rate .....	<b>x</b>	20.	5.9%
21. Multiply line 19 by line 20. <b>Total composite income tax</b> .....	<b>=</b>	21.	

**Section 4. Computation of entity-level tax.** Complete lines 22 through line 29 if electing to file and pay entity-level tax.

22. <b>New Mexico net income</b> from line 13.....		22.	
23. Guaranteed payments required to be reported by partnerships. (see instructions) .....	<b>+</b>	23.	
24. <b>Subtotal.</b> Add lines 22 and 23 .....	<b>=</b>	24.	
25. New Mexico net capital gains deduction .....		25.	
26. Distributions not subject to entity-level tax.....		26.	
27. <b>Distributed net income subject to entity-level tax.</b> Add lines 25 and 26, then subtract from line 24 .....		27.	
28. Entity-level tax rate .....	<b>x</b>	28.	5.9%
29. Multiply line 27 by line 28. <b>Total entity-level tax</b> .....	<b>=</b>	29.	

**2025 PTE**  
**New Mexico Pass-Through Entities Tax Return**  
 (Page 3)



FEIN
------

**Section 5. Payments and Credits.**

30. Tax withheld from distributions of oil and gas proceeds made to this PTE. <b>Attach 1099-Misc or Form RPD-41285</b> .....		30.	
31. Tax withheld from distributions of a pass-through entity made to this PTE. <b>Attach 1099-Misc or Form RPD-41359</b> .....	+	31.	
32. Estimated payments, extension payments, and overpayments applied from prior year .....	+	32.	
33. Approved Film Production Tax Credit. <b>Attach RPD-41228</b> .....	+	33.	
34. Approved New Film Production Tax Credit. <b>Attach RPD-41228</b> .....	+	34.	
35. Approved New Mexico Film Partner New Film Production Credit. <b>Attach RPD-41228</b> .....	+	35.	
<b>36. Total payments and credits.</b> Add lines 30 through 35 .....	=	36.	

**Section 6. Tax due or overpayment.**

37. Total withholding, composite, and entity-level tax. Add lines 18, 21, and 29 .....		37.	
<b>38. Amended returns only.</b> Enter 2025 refunds received and overpayments applied to 2026 .....	+	38.	
<b>39. Subtotal of tax.</b> Add line 37 and 38 .....	=	39.	
<b>40. Tax due.</b> If line 39 is <b>greater than</b> line 36, subtract 36 from 39 .....		40.	
41. Penalty. (see instructions).....	+	41.	
42. Interest. (see instructions).....	+	42.	
<b>43. TAX, PENALTY, AND INTEREST DUE.</b> Add lines 40, 41, and 42 .....	=	43.	
<b>44. Overpayment.</b> If line 36 is <b>greater than</b> 39, subtract 39 from 36 .....		44.	
45. Amount of overpayment to apply to 2026 tax liability. Cannot be more than line 44 .....	-	45.	
<b>46. Amount to be refunded.</b> Subtract line 45 from line 44.....	=	46.	

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

RE. 1 Routing Number  RE. 2 Account Number  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

**Taxpayer's Signature**

I declare that 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. Declaration of preparer (other than taxpayer or an employee of the taxpayer) is based on all information of which preparer has any knowledge.

Signature of Officer, Member, or Partner	Date
Title	Contact 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 \_\_\_\_\_

**2025 PTE-A**  
**New Mexico Apportionment Factors**  
 (Page 3)



FEIN

Column 1 Total Everywhere	Column 2 Inside New Mexico	Percent Inside New Mexico
		Round each percentage to four decimal places (for example, 22.6270%).

**PROPERTY FACTOR**

- 1a. Average annual value of inventory.....
- 1b. Average annual value of real property.....
- 1c. Average annual value of personal property.....
- 1d. Rented property. Multiply annual rental value by 8.....
- 1e. Total property.....

1. Property factor. Divide Total property Column 2 by Column 1 and then multiply by 100 ..... 1.  .  %

**PAYROLL FACTOR**

Total compensation of employees .....

2. Payroll factor. Divide Column 2 by Column 1 and then multiply by 100 ..... 2.  .  %

**SALES FACTOR**

Gross receipts.....

3. Sales factor. Divide Column 2 by Column 1 and then multiply by 100 ..... 3.  .  %

4. TOTAL of lines 1, 2, and 3 ..... 4.  .  %

4a. Count of factors ..... 4a

5. Average New Mexico Percentage. Divide line 4 by the number of factors entered in line 4a. Enter here and on the PTE, line 10 ..... 5.  .  %

A. This entity submitted written notification of its election to use one of the special methods of apportionment of business income for tax year ending (h.) \_\_\_\_\_. The effective date of the election is (i.) \_\_\_\_\_. See instructions.

B. Mark the box indicating the special method elected.  Manufacturers  Headquarters Operation

**2025 PTE-B**  
**Allocated Non-Business Income Taxable to Owners**

	Column 1 Total Income Everywhere	Column 2 New Mexico Income
1. Net non-business dividends.....	1.	
2. Net non-business interest.....	2.	
3. Net non-business rents (loss).....	3.	
4. Net non-business royalties .....	4.	
5. Net non-business profit sale of assets (loss).....	5.	
6. Net non-business partnership income (loss).....	6.	
7. Other net non-business income (loss).....	7.	
8. Total allocated income. Add lines 1 through 7. Enter here and on the PTE, line 8.....	8.	
9. Total New Mexico allocated income. Add lines 1 through 7. Enter here and on the PTE, line 12.....	9.	

# 2025 PTE-D

## Detail of Owner Withholding, Composite Tax and Entity-Level Tax



FEIN
------

You can e-file and e-pay the PTE return using the Department's Taxpayer Access Point (TAP) website at <https://tap.state.nm.us>.

1	1a. Owner SSN/ITIN/FEIN		1b. ID Provided <input type="checkbox"/> SSN/ITIN <input type="checkbox"/> FEIN		3a. Owner Address (Number Street)			
	2 Owner Name (First, Middle, Last)				3b. City	3c. State	3d. ZIP/Postal	3e. Mark if outside of the US/ Country Code <input type="checkbox"/> _____
	4. Residency Status	5. Withholding required	6. Reason Code		7. Owner share of allocable net income		8. Owner share of withholding tax	
	9. Owner Percentage %		10. Amount of owner composite tax		11. Owner share of allocable net income subject to entity-level tax			12. Owner share of entity-level tax
2	1a. Owner SSN/ITIN/FEIN		1b. ID Provided <input type="checkbox"/> SSN/ITIN <input type="checkbox"/> FEIN		3a. Owner Address (Number Street)			
	2 Owner Name (First, Middle, Last)				3b. City	3c. State	3d. ZIP/Postal	3e. Mark if outside of the US/ Country Code <input type="checkbox"/> _____
	4. Residency Status	5. Withholding required	6. Reason Code		7. Owner share of allocable net income		8. Owner share of withholding tax	
	9. Owner Percentage %		10. Amount of owner composite tax		11. Owner share of allocable net income subject to entity-level tax			12. Owner share of entity-level tax
3	1a. Owner SSN/ITIN/FEIN		1b. ID Provided <input type="checkbox"/> SSN/ITIN <input type="checkbox"/> FEIN		3a. Owner Address (Number Street)			
	2 Owner Name (First, Middle, Last)				3b. City	3c. State	3d. ZIP/Postal	3e. Mark if outside of the US/ Country Code <input type="checkbox"/> _____
	4. Residency Status	5. Withholding required	6. Reason Code		7. Owner share of allocable net income		8. Owner share of withholding tax	
	9. Owner Percentage %		10. Amount of owner composite tax		11. Owner share of allocable net income subject to entity-level tax			12. Owner share of entity-level tax
4	1a. Owner SSN/ITIN/FEIN		1b. ID Provided <input type="checkbox"/> SSN/ITIN <input type="checkbox"/> FEIN		3a. Owner Address (Number Street)			
	2 Owner Name (First, Middle, Last)				3b. City	3c. State	3d. ZIP/Postal	3e. Mark if outside of the US/ Country Code <input type="checkbox"/> _____
	4. Residency Status	5. Withholding required	6. Reason Code		7. Owner share of allocable net income		8. Owner share of withholding tax	
	9. Owner Percentage %		10. Amount of owner composite tax		11. Owner share of allocable net income subject to entity-level tax			12. Owner share of entity-level tax

If you need more space, print this *Schedule PTE-D* directly from the website and attach the additional *PTE-D Supplemental* forms as needed after the first page of this form.

Page:
____ of ____

Reproducing from a photocopy reduces the readability of the barcode on scanning equipment and can cause processing delays.

If the PTE reports 51 or more payees on the PTE-D and PTE-D Supplemental, the return must be filed electronically.

# 2025 PTE-D Supplemental Detail of Owner Withholding, Composite Tax and Entity-Level Tax



FEIN

You can e-file and e-pay the PTE return using the Department's Taxpayer Access Point (TAP) website at <https://tap.state.nm.us>.

<b>1</b>	1a. Owner SSN/ITIN/FEIN		1b. ID Provided <input type="checkbox"/> SSN/ITIN <input type="checkbox"/> FEIN		3a. Owner Address (Number Street)			
	2 Owner Name (First, Middle, Last)				3b. City	3c. State	3d. ZIP/Postal	3e. Mark if outside of the US/ Country Code <input type="checkbox"/> _____
	4. Residency Status	5. Withholding required	6. Reason Code		7. Owner share of allocable net income		8. Owner share of withholding tax	
	9. Owner Percentage %		10. Amount of owner composite tax		11. Owner share of allocable net income subject to entity-level tax			12. Owner share of entity-level tax
<b>2</b>	1a. Owner SSN/ITIN/FEIN		1b. ID Provided <input type="checkbox"/> SSN/ITIN <input type="checkbox"/> FEIN		3a. Owner Address (Number Street)			
	2 Owner Name (First, Middle, Last)				3b. City	3c. State	3d. ZIP/Postal	3e. Mark if outside of the US/ Country Code <input type="checkbox"/> _____
	4. Residency Status	5. Withholding required	6. Reason Code		7. Owner share of allocable net income		8. Owner share of withholding tax	
	9. Owner Percentage %		10. Amount of owner composite tax		11. Owner share of allocable net income subject to entity-level tax			12. Owner share of entity-level tax
<b>3</b>	1a. Owner SSN/ITIN/FEIN		1b. ID Provided <input type="checkbox"/> SSN/ITIN <input type="checkbox"/> FEIN		3a. Owner Address (Number Street)			
	2 Owner Name (First, Middle, Last)				3b. City	3c. State	3d. ZIP/Postal	3e. Mark if outside of the US/ Country Code <input type="checkbox"/> _____
	4. Residency Status	5. Withholding required	6. Reason Code		7. Owner share of allocable net income		8. Owner share of withholding tax	
	9. Owner Percentage %		10. Amount of owner composite tax		11. Owner share of allocable net income subject to entity-level tax			12. Owner share of entity-level tax
<b>4</b>	1a. Owner SSN/ITIN/FEIN		1b. ID Provided <input type="checkbox"/> SSN/ITIN <input type="checkbox"/> FEIN		3a. Owner Address (Number Street)			
	2 Owner Name (First, Middle, Last)				3b. City	3c. State	3d. ZIP/Postal	3e. Mark if outside of the US/ Country Code <input type="checkbox"/> _____
	4. Residency Status	5. Withholding required	6. Reason Code		7. Owner share of allocable net income		8. Owner share of withholding tax	
	9. Owner Percentage %		10. Amount of owner composite tax		11. Owner share of allocable net income subject to entity-level tax			12. Owner share of entity-level tax

If you need more space, print additional *PTE-D Supplemental* forms as needed.

Reproducing from a photocopy reduces the readability of the barcode on scanning equipment and can cause processing delays.

Page:   
\_\_\_\_\_ of \_\_\_\_\_

If the PTE reports 51 or more payees on the PTE-D and PTE-D Supplemental, the return must be filed electronically.