

Notice of Transfer of Rural Job Tax Credit

Purpose of this Form.

Form RPD-41365, *Notice of Transfer of Rural Job Tax Credit*, must be used to report to the New Mexico Taxation and Revenue Department (TRD) a transfer or distribution of approved rural job tax credit to another taxpayer. This notice must be signed by the holder or the authorized representative of the holder of an approved credit. Notice must be mailed to TRD within 10 days of a sale, exchange or other transfer. The current holder must have a TRD approved Form RPD-41238, *Application for Rural Job Tax Credit*, before using this Form RPD-41365 to report a transfer.

Mail to New Mexico Taxation and Revenue Department, PIT Edit Error, P.O. Box 5418, Santa Fe, New Mexico 87502-5418. For assistance completing this form, call (505) 476-3683.

Rural job tax credit sold, exchanged, transferred or distributed:

Credit number of holder:	Approval date of holder:	Date of the transfer:	Amount of rural job tax credit transferred:

Transferred from:

Name of holder		SSN or FEIN	
Name of contact (if applicable)	Phone number	E-mail address	

Under penalty of perjury, I certify that I have examined this form and attachments and to the best of my knowledge and belief, it is true, correct and complete.

Signature of the holder authorizing the transfer of the credit. _____ Date _____

Transferred to:

Name of new holder	SSN or FEIN
Mailing address	City, state and ZIP code

Under penalty of perjury, I certify that I have examined this form and attachments and to the best of my knowledge and belief, it is true, correct and complete.

Signature of the holder to whom the credit is transferred. _____ Date _____

TO BE COMPLETED BY THE NEW MEXICO TAXATION AND REVENUE DEPARTMENT

New credit number:	Date of approval of the credit:	Approved amount of rural job tax credit:

- Rural job tax credit is approved as submitted.
- Rural job tax credit is not approved. See the attached explanation.
- Rural job tax credit is approved, but the amount of the credit has been adjusted. See the attached explanation.

Signature of Secretary or authorized delegate: _____ Date: _____

Name (please print): _____ Title: _____