



New Mexico  
**Secretary of State**

325 Don Gaspar, Suite 300 · Santa Fe, NM 87501  
(800) 477-3632 · www.sos.state.nm.us

APPLICATION FOR TAX CLEARANCE  
FOR DISSOLUTION/WITHDRAWAL  
(TYPE OR PRINT LEGIBLY)

Date: \_\_\_\_\_

The exact name of the entity as registered with our office is:

\_\_\_\_\_

NM Entity# \_\_\_\_\_ Taxation and Revenue ID# \_\_\_\_\_

**SUBJECT:** Tax Clearance Request for Dissolution/Withdrawal

This entity is in the process of dissolving/withdrawing from the State of New Mexico and is requesting tax clearance.

**FINAL DAY OF BUSINESS:** Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

NOTE: The entity cannot be issued a Tax Clearance for a future date or if it is delinquent in filing reports and/or paying fees due. A final report may be required through the final day of business, you will be advised accordingly.

\_\_\_\_\_  
Signature of Officer or Authorized Agent

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ ST: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

MAIL TO: Secretary of State-Tax Compliance Section  
325 Don Gaspar, Suite 300, Santa Fe NM 87501