Taxation & Revenue Department - Tax Fraud Investigations Division

TFID - 70001 Rev. 03/04/2024



## REPORT OF TAX FRAUD INFORMATION



TFID USE ONL	Y Report Taken By:					Date:	
Information About the Person You Are Reporting							
Name						SSN	
Resident Address							
City				State		Zip Code	
Email Address						Phone Number	
Date of Birth	Occupation	Marital Status Name of Spouse			of Spouse		
Information About the Business You are Reporting							
Name of Business						Employer Tax ID #	
Business Owner's N	Type of Business						
Address						Web Site	
City				State		Zip Code	
Email Address				Phone Number		Fax Number	
Information Regarding the Alleged Violation							
Tax Year(s) Involved in Allegation							
Banks & Financial Institutions Used (if known)							
Type of Fraud							
Personal Income Tax (PIT) Gross Receipts Tax (GRT)					Non-filer		
☐ Illegal Income ☐ Unreported Income					False Deductions		
Other							

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Describe the specific facts of the alleged violation, for example, who, what, when, where and how you learned about and obtained the information in this report (attach additional information, if applicable).						
Information About Yourself						
This information is confidential and not required to process your report, but would be helpful should we need to contact you for additional information.						
Name						
Resident Address						
City		State	Zip Code			
Email Address			Phone Number			
Division Contact Information						
For help and information regarding this form, please contact the Tax Fraud Investigations Division/Forensic Audit Bureau at 1-866-457-6789 or Email: <a href="mailto:tax.fraud@tax.nm.gov">tax.fraud@tax.nm.gov</a>						
This form may be submitted to:  TFID-Forensic Audit Bureau P.O. Box 14010 Albuquerque, NM 87191		FAX: (505) 841-2973 Email: tax.fraud@tax.nm.gov				