

DIVISION OF REVENUE AND TAXATIONCOMMONWEALTH OF THE NORTHERN MARIANA ISLANDS

CNMI Nonresident Alien Income Tax Return

Form 1040NR-CM beginning

For the year January 1–December 31, 2008, or other tax year

2008

_	Ϋ́		t name and initial	Last name	- Inding	Identify	ing number	Isaa naga 7	1				
	Tour instrume and middle								ring number (see page 7)				
							_						
ė.	Pr	esent h	ome address (number, street, and apt. no., or	if: Individual									
ξ				Estate or Trust									
ţo	Ci	ty, tov	vn or post office, state, and ZIP code. If yo	of entry visa (see page 7)									
Ë						•							
Please print or type.		ountry			ou a citizen or national dur	ring the tax year?							
lea	Gi	ive ado	dress outside the CNMI to which you w If same as above, write "Same."	ant any refund check	Give address in the If same as above, wi	country where you a	re a perma	nent reside	ent.				
Δ.	111	aneu.	ii same as above, write Same.		ii same as above, wi	nte same.							
			Filing Status and Exemption	ons for Individuals (see pages 7 and 8)			7a	7b				
	Fi	ling s	tatus. Check only one box (1–6 belo	w).				Yourself	Spouse				
	1		Single resident of Canada or Mex	ico, or a single U.S. nation	nal								
	2	F	-										
ed	3		Married resident of Canada or Mexico			ox 7b, enter your spou	(
ij	4		Married resident of the Republic of Ko		identifying nu		ise's						
. Se	5	H	Other married nonresident alien.										
×	2	F	-										
fta	0		Qualifying widow(er) with depen				No. of boxe	s checked					
-R	C	autioi	n: Do not check box 7a if your paren t check box 7b if your spouse had any	t (or someone else) can cla	iim you as a depende	ent.	on 7a and 7						
660	70		pendents: (see page 8)		(3) Dependent's	(4) if qualifying	No. of child 7c who:	ren on					
(s) 1		-		(2) Dependent's identifying number	relationship	child for child tax	• lived wit	h vou	•				
Ĕ		(1)	First name Last name		to you	credit (see page 8)	• did not li	•					
, F				<u> </u>			you due to	divorce					
ttac				<u> </u>			or separation Dependent		-				
Also attach Form(s) 1099-R if tax was withheld.				<u> </u>			not entered						
₹				<u> </u>			Add numbe	ers entered					
		d	Total number of exemptions claims	ed			on lines abo		<u> </u>				
		8	Wages, salaries, tips, etc. Attach For	rm(s) W-2									
	SS	9a	Taxable interest				. 9a						
	sine	b	Tax-exempt interest. Do not incl	ude on line 9a . . .	9b								
	CNMI Trade/Business	10a	Ordinary dividends				10a						
	ade	b	Qualified dividends (see page 10) .		[10b]								
	Ī.	11	Taxable refunds, credits, or offsets of	of state and local income	taxes (see page 10)		11						
	S	12	Scholarship and fellowship grants. Attac	ch Form(s) 1042-S or require	d statement (see page	e 10)	12						
	/ith	13	Business income or (loss). Attach So	hedule C or C-EZ (Form 1:	040)		13						
ent	ected With	14	Capital gain or (loss). Attach Schedule	D (Form 1040) if required. If	not required, check h	ere 🔲	14						
Ε		15	Other gains or (losses). Attach Form				15						
/ pa	Conn	16a		6a	16b Taxable amou	unt (see page 11) .	16b						
an)	Š	17a		7a		unt (see page 12) .							
ĥ,	tive	18	Rental real estate, royalties, partner	ships, trusts, etc. Attach S	Schedule E (Form 10)40)							
ıtta	:ffe	19	Farm income or (loss). Attach Sched	dule F (Form 1040)			19						
ot	Income Effectively	20	Unemployment compensation .				20						
l ok	nco	21	Other income. List type and amoun				21						
πt	_	22	Total income exempt by a treaty from										
e, b		23	Add lines 8, 9a, 10a, 11–15, 16b, and 17b	–21. This is your total effect		ne >	23						
Enclose, but do not attach, any payment.		24	Educator expenses (see page 14) $$.										
Enc		25	Health savings account deduction.	Attach Form 8889									
	41	26	Moving expenses. Attach Form 390	3									
	E C	27	Self-employed SEP, SIMPLE, and qu										
	ľ	28	Self-employed health insurance de-	duction (see page 14) .									
	oss	29	Penalty on early withdrawal of savin	ngs									
	Ğ	30	Scholarship and fellowship grants e										
	ted	31	IRA deduction (see page 15)										
	Adjusted Gross Income	32	Student loan interest deduction (se	e page 15)									
	Ad	33	Domestic production activities ded	uction. Attach Form 8903	3 33								
		34	Add lines 24 through 33				34						
		35	Subtract line 34 from line 23. Enter here	and on line 36. This is your	adjusted gross incon	ne >	35						

orm	1040NR-C	.M (2008)		Pag	ge 4
	36	Amount from line 35 (adjusted gross income)	36		
		Itemized deductions from page 3, Schedule A, line 17			
		Subtract line 37 from line 36			
		Exemptions (see page 17)			
		Taxable income. Subtract line 39 from line 38. If line 39 is more than line 38, enter -0			
.		Tax (see page 17). Check if any tax is from: a \square Form(s) 8814 b \square Form 4972	41		
Credits			42		
<u>ရ</u>		Alternative minimum tax (see page 18). Attach Form 6251	• —		
		Add lines 41 and 42	73		
and		Foreign tax credit. Attach Form 1116 if required			
		Credit for child and dependent care expenses. Attach Form 2441			
a×		Retirement savings contributions credit. Attach Form 8880			
	47	Child tax credit (see page 20). Attach Form 8901 if required 47			
	48	Credits from: a Form 8396 b Form 8839 c Form 5695			
	49 (Other credits. Check applicable box(es): a Form 3800			
	ı	b 🗌 Form 8801 c 🗎 Form			
	50	Add lines 44 through 49. These are your total credits	. 50		
	51	Subtract line 50 from line 43. If line 50 is more than line 43, enter -0	.▶ 51		
	52	Tax on income not effectively connected with a CNMI trade or business from page 4, line 88	. 52		
es		Unreported social security and Medicare tax from: a \square Form 4137 b \square Form 8919.			
laxes		Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required			
	-	Transportation tax (see page 20)	55		
Otner		Household employment taxes. Attach Schedule H (Form 1040).	56		
5		Add lines 51 through 56. This is your total tax			
			3.		
		NWITH Withheld from Forms W-2, 1099, 1042-3, etc.			
		2000 Estimated tax payments and amount applied non-zoon return			
		Excess social security and tier i harritax withheld (see page 22)	_		
		Additional child tax credit. Attach Form 8812			
		Amount paid with Form 4868 (request for extension)			
2		Other payments from: a Form 2439 b Form 4136 c Form 8885			
אווופוור)		Credit for amount paid with Form 1040-C			
	65	NMTIT withheld at source from page 4, line 85			
2	66	NMTIT withheld at source by partnerships under section 1446:			
	а	From Form(s) 8805			
	b	From Form(s) 1042-S			
	67	NMTIT withheld on dispositions of CNMI real property interests:			
		From Form(s) 8288-A			
		From Form(s) 1042-S			
	68	Refundable credit for prior year minimum tax from Form 8801, line 30 68			
	69	Add lines 58 through 68. These are your total payments	▶ 69		
		70 If line 69 is more than line 57, subtract line 57 from line 69. This is the amount you overpaid	70		
Ref	und	71a Amount of line 70 you want refunded to you. If Form 8888 is attached, check here	71a		
Direc	t		, <u>, , , , , , , , , , , , , , , , , , </u>		
	sit? See	b Routing number			
age	22.	d Account number			
		72 Amount of line 70 you want applied to your 2009 estimated tax			
١		Amount of the 70 year want applied to your 2009 estimated tax	▶ 73		
	ount Owe	73 Amount you owe. Subtract line 69 from line 57. For details on how to pay, see page 23 74 Estimated tax penalty. Also include on line 73 74	/3		
Ou	OWC	1 /	os Compl	lete the following.	⊐ N
hire	l Party			lete the following.	_ IN
	nee		entification		Т
		name • no. • () number (PI		ny knowledge as d	-
igı		Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of whi			
ler		Your signature Date Your occupat	tion in the II	nited States	
nis re	copy of turn for	Date Tour occupat	aon in the U	inica states	
our re	ecords.				
)-:-		Preparer's Check if	P	reparer's SSN or PTIN	
aid	a parer's	self-employe	ed 🔲		
	only	Firm's name (or yours if self-employed),			
<i>,</i> 30	Jiny		ne no.	()	

Schedule A	I1	temized Deductions (See pages 25, 26, and 27.)		07
State and Local	1	State income taxes		
Income Taxes	2	Local income taxes	3	
Total Gifts to CNMI		Caution: If you made a gift and received a benefit in return, see page 25.		
Charities	4	Gifts by cash or check. If you made any gift of \$250 or more, see page 25		
	5	Other than by cash or check. If you made any gift of \$250 or more, see page 25. You must attach Form 8283 if "the amount of your deduction" (see definition on page 26) is more than \$500 5		
	6	Carryover from prior year		
	7	Add lines 4 through 6	7	
Casualty and Theft Losses	8	Casualty or theft loss(es). Attach Form 4684. See page 26	8	
Job	9	Unreimbursed employee expenses—job travel, union dues, job education, etc. You must attach Form 2106 or		
Expenses and Certain Miscellaneous		Form 2106-EZ if required. See page 26		
Deductions	10	Tax preparation fees		
	11	Other expenses. See page 27 for expenses to deduct here. List type and amount		
	12	Add lines 9 through 11		
	13	Enter the amount from Form 1040NR-CM, line 36		
	14	Multiply line 13 by 2% (.02)		
	15	Subtract line 14 from line 12. If line 14 is more than line 12, enter -0	15	
Other Miscellaneous Deductions	16	Other—see page 27 for expenses to deduct here. List type and amount		
			16	
Total Itemized	17	Is Form 1040NR-CM, line 36, over \$159,950 (over \$79,975 if you checked filing status box 3, 4, or 5 on page 1 of Form 1040NR-CM)?		
Deductions		No. Your deduction is not limited. Add the amounts in the far right column for lines 3 through 16. Also enter this amount on Form 1040NR-CM, line 37.		
		☐ Yes. Your deduction may be limited. See page 27 for the amount to enter here and on Form 1040NR-CM, line 37.	17	

Tax on Income Not Effectively Connected With a CNMI Trade or Business Attach Forms 1042-S, SSA-1042S, RRB-1042S, or similar form.

Nature of income			(a) CNMI tax withheld at source		Enter amount of income under the appropriate rate of tax				(see page 28)					
					(b) 10%	(c) 15%	(c) 15%		(d) 30%		(e) Other (specify)			
					(5) 1070	(6) 15%					%	%		
75	Dividends paid by:													
а	CNMI corporations .		75a											
b	Foreign corporations		75b											
76	Interest:													
a	Mortgage		76a											
b	Paid by foreign corpor	ations	76b											
c	Other		76c											
77	Industrial royalties (pa	ents, trademarks, etc.)	77											
78	Motion picture or T.V.	copyright royalties	78											
79	Other royalties (copyrig	yhts, recording, publishing, etc.)	79											
80		and natural resources royalties	80											
81	Pensions and annuities	5	81											
82	Social security benefits		82											
83	Gains (include capital o	gain from line 91 below).....	83											
84	·													
			84											
85	lines 75a through 84. E	l at source. Add column (a) of nter the total here and on Form	85											
86	Add lines 75a through	84 in columns (b)–(e)			86									
87 88	Tax on income not ef	te of tax at top of each column fectively connected with a CNMI trade	or b	usiness. 	. Ac							88		
		Capital Gain	is and	d Losses Fro	om Sa	ales or Exchang	es of Propert	y	1					
and I or ex sour	nter only the capital gains osses from property sales changes that are from ces within the CNMI	89 (a) Kind of property and description (if necessary, attach statement of descriptive details not shown below)		(b) Date acquired (mo., day, yr.	.)	(c) Date sold (mo., day, yr.)	(d) Sales prid	ce	(e) Cost or oth basis	er	(f) LOSS If (e) is more than (d), subtrac from (e)		(g) GAIN If (d) is more than (e), subtrac from (d)	
	not effectively connected a CNMI business.													
Do n	ot include a gain or loss													
	sposing of a CNMI real erty interest; report													
these	gains and losses on													
	dule D (Form 1040).													
exch conn	eport property sales or anges that are effectively ected with a CNMI	90 Add columns (f) and (g) of line 8	89 .							90	()		
business on Schedule D (Form 1040), Form 4797, or both.		91 Capital gain. Combine columns (f) and (g) of line 90. Enter the net gain here and on line 83 above (if a loss, enter -0-)							•	91				

Form 1040NR-CM (2008) Page **5**

Other Information (If an item does not apply to you, enter "N/A.")

	What country issued your passport?	М	If you are claiming the benefits of a CNMI income tax treaty with a foreign country, give the following information. See pages 28 and 29 for additional information.
	Were you ever a U.S. citizen? Yes No		• Country •
c	Give the purpose of your visit to the CNMI		● Type and amount of effectively connected income exempt from tax. Also, identify the applicable tax treaty article. Do not enter exempt income on lines 8, 9a, 10a, 11-15, 16b, or 17b-21 of Form 1040NR-CM.
D	Current nonimmigrant status and date of change (see page 28) ▶		For 2008 (also, include this exempt income on line 22 of Form 1040NR-CM) ▶
Ε	Date you entered the CNMI (see page 28)		For 2007 •
F	Did you give up your permanent residence as an immigrant in the United States this year?		Type and amount of income not effectively connected that
G	Dates you entered and left the CNMI during the year. Residents of Canada or Mexico entering and leaving the CNMI at frequent intervals, give name of country only.		is exempt from or subject to a reduced rate of tax. Also, identify the applicable tax treaty article. For 2008
Н	Give number of days (including vacation and nonworkdays) you were present in the CNMI during:		For 2007 ►
I	Jef you are a resident of Canada, Mexico, or the Republic of Korea (South Korea), or a U.S. national, did your spouse contribute to the support of any child claimed on Form 1040NR-CM, line 7c?	N	 Were you subject to tax in that country on any of the income you claim is entitled to the treaty benefits? Yes Note Note 1
	If you were a resident of the Republic of Korea (South Korea) for any part of the tax year, enter in the space below your total foreign source income not effectively connected with a CNMI trade or business. This information is needed so that the exemption for your spouse and dependents residing in the CNMI (if applicable) may be allowed in accordance with Article 4 of the income tax treaty between the United States and the Republic of Korea (South Korea).	o	If you file this return for a trust, does the trust have a CNMI business?
J	Total foreign source income not effectively connected with a CNMI trade or business ▶ \$ Did you file a CNMI income tax return for any year before 2008?		Is this an "expatriation return" (see page 29)?
K	To which Revenue and Taxation office did you pay any amounts claimed on Form 1040NR-CM, lines 59, 62, and 64?		other affirmative steps to apply for, lawful permanent resident status in the United States or have an application pending to adjust your status to that of a lawful permanent resident of the United States?
L	Have you excluded any gross income other than foreign source income not effectively		permanent resident of the United States? ☐ Yes ☐ No. If "Yes," explain ►
	connected with a CNMI trade or business? Yes No If "Yes," show the amount, nature, and source of the excluded income. Also, give the reason it was excluded. (Do not include amounts shown in item M.)	R	Check this box if you have received compensation income of \$250,000 or more and you are using an alternative basis to determine the source of this compensation income (see page 29)



DIVISION OF REVENUE AND TAXATION

COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS

ANNUAL WAGE AND SALARY AND EARNINGS TAX RETURN

TO PART OF THE NORTHERN AND THE PART OF T

(See supplemental instructions)

or Form 🕽	LO40NR-CM)				20
	Your first name and initial	Last Name		Social security r	number
Please type or	If a joint return, spouse's first name and initial	Last Name		Spouse's social	security numb
ess print in	Home Address (number and street).	l	Apt. No.	▲ IMPOR You must	_
ink	City, town or post office, state, and ZIP code.		I		(s) above
PART A	WAGE AND SALARY TAX COMPUTATION	I			
1 CNMI w	vages and salaries from Form(s) W-2 and W-2CM			. 1	
2 Other C	CNMI wages and salaries not included in line 1			. 2	
3 Total Cl	NMI wages and salaries. Add lines 1 and 2			. 3	
	t on line 3 not subject to the wage and salary tax (attach			. 4	
	vages and salaries. Subtract line 4 from line 3			. 5	
	wage and salary tax			. 6	
	on tax credit (attach Schedule ETC)			. 7	
	and salary tax after credit. Subtract line 7 from line 6 .			. 8	
_	,			. 9	
10 Total w	age and salary tax due/(overpaid). Subtract line 10 from	n line 9. If zero or le	ess, place a bracket	▶ 10	
 One had One had Interest Gross who had had had had had had had had had had	alf of the gain from the sale of real property	earnings tax		2 3 4 5a 5b 5c 6 7 8 9	
10 Earning	s tax after credit. Subtract line 9 from line 8			▶ 10	
Total Wa	TOTAL CHAPTER 2 TAX DUE/(OVERPAYM age and Salary and Earnings taxes due/(overpayment). It han zero, place a bracket around the figure	Add lines 10 of Part A			 TE ON CNM
SOURCE TA	AX BEFORE COMPLETING PART D CHAPTER 7 TAX AND REBATE OFFSET	SHOUDE CREE	- AND ALLEGAL	- CH I CH REDA	O.V ONFI
1 Chapter	7 tax underpayment after non-refundable credit. Enter	amount from Form O	S-3405A, line 12, part E	3 1	
2 Chapter	7 tax overpayment after non-refundable credit. Enter a	mount from Form OS	-3405A, line 11, part B	2 (
3 Rebate	e offset amount. Enter amount from Form OS-3405A, li	ne 13, part B		. 3	
4 Chapter	7 liability or (overpayment) after rebate offset amount.	Add lines 1 through	3	. 4	
	overpayment of credits	_		_	
	ed tax penalty				
	napter 7 liability or (overpayment). Add lines 4, 5 and 6				

1	TE COMBINE									
		rpaid), Chapter 2 and ayment, skip lines 2 th								
2	CHAPTER 2 :		(b) Failure to F	ile	. 2	b				
_		Enter amount under	oaid (c) Failure to Pa	ay	. 2	с				
			(d) Interest Ch		_	d				
3			(b) Failure to F			b				
	(a)	Enter amount under				-		_		
			(d) Interest Ch	arge	. 3	d				_
4		nterest charges (add li						. 4		+
5	of part D	overpaid), Chapter 2 a								
6		ayment, enter amount								
7	•	ou want credited to yo								+
8	T F BUSINESS	nt						. • (
	7, Part E above. TIN	TAX TYPE	AMOUNT	\neg		TI	N	TAX TYPE	AMOL	JNT
		3105G						3105G		
		3105AF						3105AF		
		3105MW						3105MW		
		/		IC DIVISION	of Rever	iue and	iaxation is t	only facilitating y	our ACIC ci	laim
be	ed upon between the processed by the Enformation to the In-	e CNMI Department Division of Revenue	of Finance and the and Taxation, you	ne U.S. Trea u are giving	sury. By the Div	y applyi vision of	ng for the A0 Revenue an	CTC Refund and a day of the contraction authors are the contraction authors are the contraction and a day of the contraction are the contraction a	allowing the prization to a	laim refu relea
be x ir	processed by the D	e CNMI Department Division of Revenue ternal Revenue Ser	of Finance and the and Taxation, you vice (IRS). See so	ne U.S. Trea u are giving upplementa	sury. B the Div al instruc	y applyi vision of ctions fo	ng for the AC Revenue an Part G, line	CTC Refund and a d Taxation author 2 regarding reb	allowing the prization to a	laim refu relea
be x ir	e processed by the Enformation to the In	e CNMI Department Division of Revenue ternal Revenue Ser Fax Credit. Enter t	of Finance and the and Taxation, you vice (IRS). See so	ne U.S. Trea u are giving upplementa ne 13 of Fo	sury. B g the Div al instruc erm 8812	y applyi vision of ctions fo 2. (Attac	ng for the AC Revenue an Part G, line	TC Refund and a d Taxation author 2 regarding reb	allowing the prization to a	laim refu relea
be ix ir 1 2	e processed by the Enformation to the In Additional Child 1	e CNMI Department Division of Revenue ternal Revenue Ser Fax Credit. Enter t underpaid from line	tof Finance and the and Taxation, you vice (IRS). See so the amount from li 5, Part E above.	ne U.S. Trea u are giving upplementa ne 13 of Fo	sury. Br g the Div al instructure	y applyi vision of ctions fo (Attao	ng for the AG Revenue an or Part G, line ch Form 8812	CTC Refund and a d Taxation author 2 regarding reb	allowing the prization to a	laim refu relea
be x ir 1	e processed by the Enformation to the In Additional Child 1 Enter the amount to	e CNMI Department Division of Revenue ternal Revenue Ser Tax Credit. Enter t underpaid from line	tof Finance and the and Taxation, you vice (IRS). See so the amount from line 5, Part E above.	ne U.S. Treat are giving upplementa ne 13 of Fo	sury. B g the Div al instruc- rm 8812 but not	y applyi vision of ctions fo 2. (Attac less tha	ng for the AG Revenue an or Part G, line th Form 8812 	CTC Refund and a d Taxation author 2 regarding reb	allowing the prization to a	laim refu relea
be x ir 1	Additional Child 1 Additional Child 1 Additional Child 1 Additional Child 1 Amount you still ov	e CNMI Department Division of Revenue ternal Revenue Ser Tax Credit. Enter t underpaid from line Tax Credit refund. we on this return af	tof Finance and the and Taxation, you vice (IRS). See so the amount from list, Part E above. Subtract line 2 for the Administration of the Administration	ne U.S. Treat are giving upplementa ne 13 of Forman ine 1, CTC. Subtr	sury. Big the Divided Instruction 8812 but not ract line	y applyivision of ctions for the ctions for the ctions for the ctions for the ctions in the ction in the ctions in the ctions in the ction in the ctions in the ction in the ctions in the ction	ng for the AG Revenue an Part G, line The Form 8812 The Form 8812 The Form 2015 The Fo	TC Refund and a d Taxation author 2 regarding reb	allowing the prization to a steep offset and the of	laim refu relea
be be ix ir 1 2 3 4	Additional Child 1 Enter the amount u Additional Child 1 Amount you still ov than zero Do you want to allow a	e CNMI Department Division of Revenue ternal Revenue Ser Tax Credit. Enter t underpaid from line Tax Credit refund. we on this return af	tof Finance and the and Taxation, you vice (IRS). See so the amount from list, Part E above. Subtract line 2 for the Alexandre.	ne U.S. Treat are giving upplementa ne 13 of Forman ine 1, CTC. Subtr	sury. Big the Divided Instruction 8812 but not ract line	y applyivision of ctions for the ctions for the ctions for the ctions for the ctions in the ction in the ctions in the ctions in the ction in the ctions in the ction in the ctions in the ction	ng for the AG Revenue an Part G, line The Form 8812 The Form 8812 The Form Service an zero The Form Service an zero	TC Refund and a d Taxation author 2 regarding reb 2) 1 2 3 bt less 4 Yes. Complete the	allowing the prization to a steep offset and the of	aim refu relea moui
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		FOR OFFICIA	L USE ONLY		
DATE FILED *	DATE PAID	AMOUNT PAID	RECEIPT NO.	VERIFIED BY	POSTED BY

DEADLINE: APRIL 15, 2009



DIVISION OF REVENUE AND TAXATION

COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS





Form	OS-3405A (For Form 1040NR-CM)	See instruc	tions		2008
	Your first name and initial	Last na	ame		Social security number
Please Type	If a joint return, spouse's first name and initial	Last na	ame		Spouse's social security number
or Print n Ink	Home address (number and street)	I		Apt. No.	▲ IMPORTANT! ▲
	City, town or post office, state, and ZIP code				You must enter your SSN(s) above
PAR	T A - Non-refundable Credits				
1 W	/age and salary tax			1	
2 E	arnings tax			2	
3 B	usiness gross revenue tax				
	Name	Tax ID No),		
a)		-		a)	
b)				b)	
c)				c)	
4 U	ser fees paid			. 4	
5 Fe	ees and taxes imposed under 4CMC §2202(h)			. 5	
	T B - Rebate Computation Otal NMTIT				7
8 T	otal NMTIT payments made				8
9 T	otal non-refundable credits (enter amount from	line 6, Part A)			9
10 R	Rebate Base (adjusted CNMI source tax). Subt	ract line 9 from l	ine 7. If zero	o or less, enter -0) 10
11 N	IMTIT overpayment (If line 8 is greater than line	e 10, subtract line	e 10 from line	e 8, otherwise, er	nter -0-) . 11
12 N	IMTIT underpayment (If line 10 is greater than I	ine 8, subtract lii	ne 8 from line	e 10, otherwise, e	enter -0-) 12
	Rebate offset amount. Calculate this amount a ebate table provided in Part B of the instructions		the rebate I	pase (line 10) usi	ng the 13
li	Under penalties of perjury, I declare that I have examin sts all amounts and sources of income I received durin which the preparer has any knowledge.				
Here	Your signature	Dat	te	Your occupation	Daytime phone number ()
copy for Your Records	Spouse's signature. If a joint return, BOTH must si	gn. Dat	te	Spouse's occupation	
Paid Prepare	Preparer's signature		Date	Check if self-employed	Preparer's SSN or PTIN
Use onl	Firm's name (or yours if				EIN
	self-employed), address,				Phone no ()

Instructions for Form OS-3405A -Computation of Non-Refundable Credit and Application for Rebate on CNMI Source Income Tax 2008

PART A NON-REFUNDABLE CREDITS

- 1. Enter the wage and salary tax as shown on line 8, Part A of the Annual Wage and Salary and Earnings Tax Return.
- 2. Enter the earnings tax as shown on line 10 of Part B of the Annual Wage and Salary and Earnings Tax Return.
- 3. Enter the amount of business gross revenue tax paid or accrued during the taxable year under 4 CMC Chapter. For partners enter your share of BGRT in the partnership as applicable. If you have more than one business name, list each one separately with its respective TIN and amount of BGRT. This is the tax under 4 CMC §1301.
- 4. Enter the amount of user fees paid during the taxable year under 4 CMC §1421.
- 5. Enter the amount of fees and taxes paid or accrued during the taxable year under 4 CMC §2202(h), in lieu of the tax under 4 CMC §1301.
- 6. Add all amounts shown in lines 1 through 5. This is your total non-refundable credit.

PART B REBATE COMPUTATION

- 7. Enter the tax as shown on line 58 of Form 1040NR-CM.
- 8. Enter the total payments made for the taxable year as shown on line 70 of Form 1040NR-CM.
- 9. Enter the total non-refundable credits from line 6, part A.
- 10. Subtract line 9 from line 6. If zero or less, enter zero.
- 11. If line 8 is greater than line 10, subtract line 10 from line 8, otherwise, enter zero.
- 12. If line 10 is greater than line 8, subtract line 8 from line 10, otherwise, enter zero.
- 13. Calculate the rebate offset amount as determined by the rebate base (line 10) using the rebate table below. Enter the result here.

	REBATE TABLE	
IF REBATE BASE (line 10) IS:	THE REBATE OFFSET AMOUNT IS:	EXAMPLE:
Not over \$20,000	90% of the rebate base	Rebate base X 90%
\$20,001-\$100,000	\$18,000 plus 70% of the rebate base over \$20,000	Rebate base - 20,000 X 70% + 18,000
Over \$100,000	\$74,000 plus 50% of the rebate base over \$100,000	Rebate base - 100,000 X 50% + 74,000

If filing by mail, please send to: **DIVISION OF REVENUE AND TAXATION**

POST OFFICE BOX 5234 CHRB

SAIPAN, MP 96950

DEADLINE: APRIL 15, 2009