



Division of Revenue and Taxation
Commonwealth of the Northern Mariana Islands
ANNUAL RECONCILIATION OF TAXES WITHHELD

CY 2013 (Please type or print in ink)		Do not write in this space - Date filed		Do not write in this space - DLN	
A Employer name			C Federal Employer Identification No. (FEIN)		D CNMI Employer Identification No. (TIN)
B Mailing address and ZIP code			E Person to contact		F Telephone no. ()
1 Totals per Quarterly Returns	1A CHAPTER 2 Tax Withheld	1B CHAPTER 7 Tax Withheld	1C TOTAL Tax Withheld	1D TOTAL Tax Paid	1E Wages and Salaries
a) 1st Quarter ▶					
b) 2nd Quarter ▶					
c) 3rd Quarter ▶					
d) 4th Quarter ▶					
e) Subtotal (a thru d) ▶					
2a Total per W-2CM ▶					
b Difference ▶					
3 No. of W-2CM attached to Form OS-3710 ▶					
4 Are you filing magnetically? Yes <input type="checkbox"/> No <input type="checkbox"/>					
FOR OFFICIAL USE ONLY					
Date filed *	Date paid	Receipt no.	Charges		

* If received after the due date, show postmark.

IMPORTANT: Filing due date is February 28, 2014.

See W-2CM Supplemental instruction for penalty information.

Form OS-3710 (Rev. 11/2013)