VOID a Employee's social security number					For Revenue and Taxation use only				
<b>b</b> Employer identification number (EIN)					<b>1</b> Wages, tips, other	ax withheld (NMTIT chapter 7)			
c Employer's name, address, and ZIP code					<b>3</b> Social security wa	ges	4 Social security tax withheld		
					<b>5</b> Medicare wages a	and tips	6 Medicare tax withheld		
					<b>7</b> Social security tip	S	8 Allocated tips		
d Control number (Serial number)					9		10 Dependent care benefits		
e Employee's first name and initial Last name Suff.					11 Nonqualified plans		12a Code Se	ee instructions for box 12	
f Employee's address and ZIP code					13 Statutory Retirement Third-party employee plan sick pay		<b>12b</b> Code		
					14a Other	<b>14b</b> Code	<b>12c</b> Code		
						12d Code			
15 CNMI Tax ID number	16 Wages a	es and Salary (CNMI) 17 Wage & salary tax withhel (chapter 2)		withheld	A Location code	<b>B</b> Days out of the CNMI	<b>C</b> Citizenshi	ip code	
					<b>D</b> NAICS	E SOC			

Form **W-2CM** Wage and Tax Statement

Copy 1 For Division of Revenue and Taxation



VOID	For Revenue and Taxation use only						
<b>b</b> Employer identification number (EIN)	1 Wages, tips, other compensation						
c Employer's name, address, and ZIP code	<b>3</b> Social security wa	ges	4 Social	4 Social security tax withheld			
	5 Medicare wages a	and tips	6 Medic	6 Medicare tax withheld			
		<b>7</b> Social security tip	S	8 Alloca	8 Allocated tips		
d Control number (Serial number)		9		10 Dependent care benefits			
e Employee's first name and initial	Last name	Suff.	11 Nonqualified plan	ns .	12a Code	See instructions for box 12	
<b>f</b> Employee's address and ZIP code	.J	Statutory Retire	ement Third-party sick pay	<b>12b</b> Code			
			14a Other	<b>14b</b> Code	<b>12c</b> Code		
					<b>12d</b> Code		

Form W-2CM Wage and Tax Statement

2014

**Copy A For Social Security Administration** - Send this entire page with Form W-3 to the Social Security Administration; photocopies are **not** acceptable.

VOID a Employee's social security number				For Revenue and Taxation use only					
<b>b</b> Employer identification number (EIN)					1 Wages, tips, other compensation 2 Income tax withheld (NMTIT chapt				eld (NMTIT chapter 7)
c Employer's name, address, and ZIP code					<b>3</b> Social security wa	4 Social security tax withheld			
					<b>5</b> Medicare wages a	6 Medicare tax withheld			
					<b>7</b> Social security tip:	8 Allocated tips			
d Control number (Serial number)					9		10 Dependent care benefits		
e Employee's first name and initial Last name Suff.				Suff.	11 Nonqualified plans		<b>12a</b> Code	See instru	ctions for box 12
<b>f</b> Employee's address and ZIP code					13 Statutory Retirement Third-party employee plan sick pay		<b>12b</b> Code		
					14a Other	<b>14b</b> Code	<b>12c</b> Code		
							<b>12d</b> Code		
15 CNMI Tax ID number	16 Wages an	nd Salary (CNMI) 17 Wage & salary tax withhel (chapter 2)		withheld	A Location code	<b>B</b> Days out of the CNMI	C Citizenship code		
	•				<b>D</b> NAICS	<b>E</b> SOC			

Form W-2CM Wage and Tax
Statement
Copy 2 To be filed with employee's income tax return

2014

VOID a Employee's social security number					For Revenue and Taxation use only				
<b>b</b> Employer identification number (EIN)					<b>1</b> Wages, tips, other	ax withheld (NMTIT chapter 7)			
c Employer's name, address, and ZIP code					<b>3</b> Social security wa	ges	4 Social security tax withheld		
					<b>5</b> Medicare wages a	and tips	6 Medicare tax withheld		
					<b>7</b> Social security tip	S	8 Allocated tips		
d Control number (Serial number)					9		10 Dependent care benefits		
e Employee's first name and initial Last name Suff.					11 Nonqualified plans		12a Code Se	ee instructions for box 12	
f Employee's address and ZIP code					13 Statutory Retirement Third-party employee plan sick pay		<b>12b</b> Code		
					14a Other	<b>14b</b> Code	<b>12c</b> Code		
						12d Code			
15 CNMI Tax ID number	16 Wages a	es and Salary (CNMI) 17 Wage & salary tax withhel (chapter 2)		withheld	A Location code	<b>B</b> Days out of the CNMI	<b>C</b> Citizenshi	ip code	
					<b>D</b> NAICS	E SOC			

Form **W-2CM** Wage and Tax Statement

Copy B For employee's record



VOID a Employee's social security number					For Revenue and Taxation use only				
<b>b</b> Employer identification number (EIN)					<b>1</b> Wages, tips, other	ax withheld (NMTIT chapter 7)			
c Employer's name, address, and ZIP code					<b>3</b> Social security wa	ges	4 Social security tax withheld		
					<b>5</b> Medicare wages a	and tips	6 Medicare tax withheld		
					<b>7</b> Social security tip	S	8 Allocated tips		
d Control number (Serial number)					9		10 Dependent care benefits		
e Employee's first name and initial Last name Suff.					11 Nonqualified plans		12a Code Se	ee instructions for box 12	
f Employee's address and ZIP code					13 Statutory Retirement Third-party employee plan sick pay		<b>12b</b> Code		
					14a Other	<b>14b</b> Code	<b>12c</b> Code		
						12d Code			
15 CNMI Tax ID number	16 Wages a	es and Salary (CNMI) 17 Wage & salary tax withhel (chapter 2)		withheld	A Location code	<b>B</b> Days out of the CNMI	<b>C</b> Citizenshi	ip code	
					<b>D</b> NAICS	E SOC			

Form **W-2CM** Wage and Tax Statement

Copy C For employer's record

