VOID 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 ch				ld (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			
					7 Social security tips		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		12a Code	See instruc	tions 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		
							12d Code		
15 CNMI Tax ID number	16 CNMI Wa	IMI Wages and Salary 17 Wage & salary tax withhel (chapter 2)		withheld	A Location code	<b>B</b> Days out of the CNMI	<b>C</b> Citizensl	hip code	
					<b>D</b> NAICS	E SOC			

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

Copy 1 For Division of Revenue and Taxation

2015

			For Revenue and Taxation use only					
<b>b</b> Employer identification number (EIN)	<del></del>	1 Wages, tips, other compensation						
<b>c</b> Employer's name, address, and ZIP code		<b>3</b> Social security wa	ges	4 Social security tax withheld				
		5 Medicare wages a	nd tips	6 Medicare tax withheld				
			7 Social security tips	S	8 Allocated tips			
<b>d</b> Control number (Serial number)		9		10 Dependent care benefits				
<b>e</b> Employee's first name and initial	Last name	Suff.	11 Nonqualified plans		12a Code See instructions for box 12			
<b>f</b> Employee's address and ZIP code		.J	13 Statutory Retire employee plan	ment Third-party sick pay	<b>12b</b> Code			
		14a Other	<b>14b</b> Code	12c Code				
					<b>12d</b> Code			

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

2015

Division of Revenue and Taxation
Commonwealth of the Northern Mariana Islands

**Department of Finance** 

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

VOID 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			
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					7 Social security tipe	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 CNMI W	ages and Salary 17 Wage & salary tax withhel (chapter 2)		ithheld	A Location code	<b>B</b> Days out of the CNMI	C Citizenship code		
					<b>D</b> NAICS	E SOC			

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

2015

VOID 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				
c Employer's name, address, and ZIP code					<b>3</b> Social security wa	ges	4 Social security tax withheld		
					5 Medicare wages a	and tips	<b>6</b> Medicare tax withheld		
					7 Social security tip	s	8 Allocated tips		
<b>d</b> Control number (Serial num				9		10 Dependent care benefits			
e Employee's first name and initial Last name Suff.					11 Nonqualified plans		12a Code See	e 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	14b Code	12c Code		
							<b>12d</b> Code		
15 CNMI Tax ID number	16 CNMI W	MI Wages and Salary 17 Wage & salary tax withhel (chapter 2)			A Location code	B Days out of the CNMI C Citizenship code		code	
	•				<b>D</b> NAICS	<b>E</b> SOC			

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

Copy B For employee's record



VOID 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 cha				
c Employer's name, address, and ZIP code					<b>3</b> Social security wa	ges	4 Social security tax withheld		
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<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	12c Code		
							<b>12d</b> Code		
15 CNMI Tax ID number	16 CNMI Wag	CNMI Wages and Salary 17 Wage & salary tax withhel (chapter 2)			A Location code	B Days out of the CNMI		ocode	
					<b>D</b> NAICS	E SOC			

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

Copy C For employer's record

