VOID	a Employee's social security number					For Revenue and Taxation use only				
b Employer identification number (EIN)					1 Wages, tips, other	compensation	2 Income	tax withhe	ld (NMTIT chapter 7)	
c Employer's name, address, and ZIP code					3 Social security wa	4 Social security tax withheld				
					5 Medicare wages a	6 Medicare tax withheld				
					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.					11 Nonqualified plans		12a Code	See instruc	tions for box 12	
f Employee's address and ZIP code					13 Statutory Retirement Third-party employee plan sick pay		12b Code			
					14a Other	14b Code	12c Code			
							12d Code			
15 CNMI Tax ID number	16 CNMI Wa	ages and Salary	17 Wage & salary tax (chapter 2)	withheld	A Location code	B Days out of the CNMI	C Citizensl	hip code		
					D NAICS	E SOC				

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

Copy 1 For Division of Revenue and Taxation



VOID	a Employee's social security number		For Revenue and Taxation use only			
b Employer identification number (EIN)	1 Wages, tips, other compensation					
c Employer's name, address, and ZIP code	3 Social security wa	ges	4 Social	4 Social security tax withheld		
	5 Medicare wages a	and tips	6 Medic	6 Medicare tax withheld		
		7 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 plan	ns .	12a Code	See instructions for box 12
f Employee's address and ZIP code		.J	Statutory Retire	ement Third-party sick pay	12b Code	
			14a Other	14b Code	12c Code	
					12d Code	

Form W-2CM Wage and Tax Statement

2017

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	a Employee's social security number				For Revenue and Taxation use only				
b Employer identification number (EIN)					1 Wages, tips, other compensation 2 Income tax withheld (NMTIT				
c Employer's name, address, and ZIP code					3 Social security wa	4 Social security tax withheld			
					5 Medicare wages a	6 Medicare tax withheld			
					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		12a Code	See instru	ctions for box 12
f Employee's address and ZIP code					13 Statutory Retirement Third-party employee plan sick pay		12b Code		
					14a Other	14b Code	12c Code		
							12d Code		
15 CNMI Tax ID number	16 CNMI W	ages and Salary	and Salary 17 Wage & salary tax withhel (chapter 2)		A Location code	B Days out of the CNMI	C Citizen	ship code	
	•				D NAICS	E SOC			

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

2017

VOID	OID Employee's social security number					For Revenue and Taxation use only				
b Employer identification number (EIN)					1 Wages, tips, other compensation 2 Income tax withheld (NMTIT of					
c Employer's name, address, and ZIP code					3 Social security wa	ges	4 Social security tax withheld			
					5 Medicare wages a	and tips	6 Medicare tax withheld			
					7 Social security tips	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	e instructions for box 12		
f Employee's address and ZIP code					13 Statutory Retirement Third-party employee plan sick pay		12b Code			
					14a Other	14b Code	12c Code			
							12d Code			
15 CNMI Tax ID number	16 CNMI Wag	es and Salary	17 Wage & salary tax w (chapter 2)	vithheld	A Location code	B Days out of the CNMI	C Citizenship	ocode		
					D NAICS	E SOC				

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

Copy B For employee's record



VOID		a Employee's so	ocial security number		For Revenue and Taxation use only					
b Employer identification number (EIN)					1 Wages, tips, other	r compensation	2 Income tax	2 Income tax withheld (NMTIT chapter 7)		
c Employer's name, address, and ZIP code					3 Social security wa	ges	4 Social security tax withheld			
					5 Medicare wages a	and tips	6 Medicare tax withheld			
				7 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 See	e instructions for box 12		
f Employee's address and ZIP code					13 Statutory Retirement Third-party employee plan sick pay		12b Code			
					14a Other	14b Code	12c Code			
						12d Code				
15 CNMI Tax ID number	16 CNMI W	ages and Salary 17 Wage & salary tax withhel (chapter 2)		withheld	A Location code	B Days out of the CNMI	C Citizenship	code		
	•				D NAICS	E SOC				

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

Copy C For employer's record

