^{ଘୁ} 1040l	VR-	CM Check Depart		nce—Division of Revenu			turn 20	23	o nor write or staple in this space
For the year	Jan. 1	-Dec. 31, 2023, or other tax yea	ır beginning	g	_, 2023, €	ending		, 20	See separate inst.
Your first nam		-	Last na						ntifying number
Home address	s (numl	per and street). If you have a P.O.	box, see ins	structions.					Apt. no.
City, town, or	post of	ffice. If you have a foreign address	, also comp	lete spaces below.			State	ZI	IP code
Foreign count	ry nam	е							
Filing Status Check only one box.	☐ Single ☐ Married filing separately (MFS) ☐ Qualifying surviving spouse (QSS) ☐ Estate ☐ True If you checked the QSS box, enter the child's name if the qualifying person is a child but not your dependent:								
Digital Asset		ny time during 2023, did you: (a) r erwise dispose of a digital asset (c	,		•		, .	. ,	exchange, or Yes No
Dependent (see instructions		(1) First name Last na	ame	(2) Dependent's identifying numbe	r (3) r	relationship to	Chil	d tax credit	if qualifies for (see inst.) Credit for other dependents
If more than for dependents, se instructions and check here	е ——								
Income Effectively Connected With CNMI Trade or Business Attach Form(s) W-2CM, 1042-S, SSA-1042-S, RRB-1042-S, and 8288-A here. Also Attach Form(s) 1099-R if tax was withheld. If you did not	1a b c d e f g h i j k z 2a 3a 4a 5a 6 7	Total amount from Form(s) W-Household employee wages in Tip income not reported on line Medical waiver payments not in Taxable dependent care beneficated and the Employer-provided adoption by Wages from Form 8919, line 6 Other earned income (see instraction Reserved for future use. Total income exempt by a treatitem L, line 1(e)	ot reported e 1a (see inseported on its from Forenefits from Forenefits from Fuctions).	on Form(s) W-2CM structions) . Form(s) W-2CM (srm 2441, line 26. In Form 8839, line 2	ee instructure in structure in	tions).			
get a Form W-2CM, see instructions.	8 9 10	Additional income from Sched Add lines 1z, 2b, 3b, 4b, 5b, 7, Adjustments to income from S	and 8. Thi	is is your total effe	ctively co	onnected in	come	9	

Add lines 12 and 13c

c Add lines 13a and 13b . .

adjustments to income

Substract line 10 from line 9. This is your adjusted gross income .

standard deduction (see instructions)

Qualified business income deduction from Form 8995 or Form 8995-A

Exemptions for estates and trusts only. See instructions .

Itemized deductions (from Schedule A (Form 1040NR-CM) or, for certain residents of India,

Substract line 14 from line 11. If zero or less, enter -0-. This is your **taxable income**

11

12

13a

b

14

11

12

13c

14

15

13a

Form 1040NR-C	CM (202	3)					Page 2
Tax and	16	Tax (see instructions). Check	f any from For	m(s): 1 8814 2 497	2 3	16	
Crdits	17	Amount from Schedule 2 (Fo	orm 1040CM),	, line 3		17	
Ordits	18	Add lines 16 and 17				18	3
	19	Child tax credit or credit for o	ther depende	ents from Schedule 8812 (Form	1040)	19	
	20	20					
	21	21					
	22	Subtract line 21 from line 18	. If zero or les	s, enter -0		22	
	23a	Tax on income not effective from Schedule NEC (Form 1		with a CNMI trade or business line 15			
	b	Other taxes, including self-er line 21. See instructions		k, from Schedule 2 (Form 1040)			
	С	Transportation tax (see instr	uctions)		23c		
	d	Add lines 23a through 23c.				23	d
	24			ах		24	
	25	Federal income tax withheld					
Payments	а	Form(s) W-2			25a		
	b	Form(s) 1099			051		
	С	, ,			25c		
	d	Add lines 25a through 25c.	,			25	d
	е					25	e
	f	, ,				25	f
	g	()				0.5	g
	h	- (-)		099 (within CNMI)			h
	26	2023 estimated tax paymen		,		26	
	27				27		
	28			8812 (Form 1040)	28		
	29				29		
	30	Reserved for future use .					
	31	Amount from Schedule 3 (Fo					
		0.0					
	32	s 32					
	33	33	,				
	34	If line 33 is more than line 24, See supplemental instructio		4 from line 33. This is the amour	nt you overpaid	34	ļ
	35	Amount you owe. Subtract lin	ne 33 from line	24. See Part A on page 8		35	;
Third Party	,	ou want to allow another person nue and Taxation? See instruct		s return with the Division of	· Yes. 0	Complete belov	v. No
Designee	Desig name	nal identification er (PIN)) -				
Sign Here				this return and accompanying scheo preparer (other than taxpayer) is base			
пете	Your signature			Date			
	Phon	e no.					
Paid	Prepa	arer's name	Preparer's si	gnature	Date	PTIN	Check if:
	L						Self-employed
Preparer	Firm's	s name				Phone no.	
Use Only	Firm's	Firm's EIN					

SCHEDULE A (Form 1040NR-CM)

Department of Finance
Division of Revenue and Taxation
Commonwealth of the Northern
Mariana Islands

Itemized Deductions

Attach to Form 1040NR-CM.

Caution: if you are claiming a net qualified disaster loss on Form 4684, see instructions for line 7.

2023

Name shown on Fo	rm 104	IONR-CM	Your iden	tifying number
Taxes You Paid	1a	State and local income taxes		
	b	Enter the smaller of line 1a or \$10,000 (\$5,000 if married filing separately)		1b
Gifts to CNMI Charities	2	Gifts by cash or check. If you made any gift of \$250 or more, see instructions		
Caution: If you made a gift and got a	3	Other than by cash or check. If you made any gift of \$250 or more, see instructions. You must attach Form 8283 if over \$500 3		
benefit for it, see	4	Carryover from prior year		
instructions.	5	Add lines 2 through 4	5	
Casualty and Theft Losses	6	Casualty and theft loss(es) from a federally declared disaster (other than net qua losses). Attach Form 4684 and enter the amount from line 18 of that form. See		6
Other Itemized Deductions	7	Other—from list in instructions. List type and amount		
				7
Total Itemized Deductions	8	Add the amounts in the far right column for lines 1b through 7. Also, enter thi Form 1040NR-CM, line 12		8
		" A . N . "		

For Paperwork Reduction Act Notice, see the Instructions for Form 1040-NR.

Schedule A (Form 1040NR-CM) 2023

SCHEDULE NEC

Mariana Islands

(Form 1040NR-CM)
Department of Finance
Division of Revenue and Taxation
Commonwealth of the Northern

Tax on Income Not Effectively Connected With a CNMI Trade or Business

Attach to Form 1040NR-CM.

2023

Name shown on Form 1040NR-CM Your identifying number Enter amount of income under the appropriate rate of tax. See instructions. (d) Other (specify) Nature of Income (a) 10% **(b)** 15% (c) 30% % 1 Dividends and dividend equivalents: 1a 1b Dividend equivalent payments received with respect to section 871(m) transactions 1c 2 Interest: 2a 2b 2c 3 3 4 Motion picture or TV copyright royalties 5 6 7 7 8 8 9 9 Gambling-Residents of Canada only. Enter net income in column (c). 10 If zero or less, enter -0-. а Winnings b Losses 10c Gambling-Residents of countries other than Canada. 11 11 Other (specify): 12 12 Add lines 1a through 12 in columns (a) through (d) 13 13 14 14 Tax on income not effectively connected with a CNMI trade or business. Add columns (a) through (d) of line 14. Enter the total here and on Form 1040NR-CM, line 23a 15 15 Capital Gains and Losses From Sales or Exchanges of Property Enter only the capital gains and 16 (a) Kind of property and description (f) LOSS (g) GAIN (b) Date acquired (c) Date sold (d) Sales price (e) Cost or losses from property sales or (if necessary, attach statement of If (e) is more than (d), If (d) is more than (e), mm/dd/yyyy mm/dd/yyyy other basis exchanges that are from sources descriptive details not shown below) subtract (d) from (e). subtract (e) from (d). within the CNMI and not effectively connected with a CNMI business. Do not include a gain or loss on disposing of a CNMI real property interest; report these gains and losses on Schedule D (Form 1040). Report property sales or exchanges that are effectively connected with a CNMI business 17 Add columns (f) and (a) of line 16 17 on Schedule D (Form 1040), 18 Capital gain. Combine columns (f) and (g) of line 17. Enter the net gain here and on line 9 above. If a loss, enter -0-Form 4797, or both.

SCHEDULE OI (Form 1040NR-CM)

Department of Finance Division of Revenue and Taxation Commonwealth of the Northern Mariana Islands

Other Information

Attach to Form 1040NR-CM.
Answer all questions.

2023

Name shown on Form 1040NR-CM Your identifying number Of what country or countries were you a citizen or national during the tax year? Α In what country did you claim residence for tax purposes during the tax year? В C Have you ever applied to be a green card holder (lawful permanent resident) of the United States? Were you ever: No Yes 1. A U.S. citizen? No If you answer "Yes" to (1) or (2), see Pub. 519, chapter 4, for expatriation rules that apply to you. If you had a visa on the last day of the tax year, enter your visa type. If you didn't have a visa, enter your U.S. Ε immigration status on the last day of the tax year. F Have you ever changed your visa type (nonimmigrant status) or U.S. immigration status? Yes No If you answered "Yes," indicate the date and nature of the change: G List all dates you entered and left the Commonwealth of the Northern Mariana Islands during 2023. See instructions. Note: If you are a resident of Canada or Mexico AND commute to work in the United States at frequent intervals, Mexico Date entered CNMI Date entered CNMI Date departed CNMI Date departed CNMI mm/dd/yy mm/dd/yy mm/dd/yy mm/dd/yy Give number of days (including vacation, nonworkdays, and partial days) you were present in the CNMI during: н 2021 ______, 2022 ______, and 2023 ______. Ves No ı If "Yes," give the latest year and form number you filed: No Yes J If "Yes," did the trust have a CNMI or foreign owner under the grantor trust rules, make a distribution or loan to a Yes No Κ Yes No If "Yes," did you use an alternative method to determine the source of this compensation? No L Income Exempt From Tax-If you are claiming exemption from income tax under a CNMI income tax treaty with a foreign country, complete (1) through (3) below. See Pub. 901 for more information on tax treaties. 1. Enter the name of the country, the applicable tax treaty article, the number of months in prior years you claimed the treaty benefit, and the amount of exempt income in the columns below. Attach Form 8833 if required. See instructions. (d) Amount of exempt (a) Country (b) Tax treaty article (c) Number of months claimed in prior tax years income in current tax vear (e) Total. Enter this amount on Form 1040NR-CM, line 1k. Do not enter it anywhere else on line 1 . . . No Yes No If "Yes," attach a copy of the Competent Authority determination letter to your return. Check the applicable box if: 1. This is the first year you are making an election to treat income from real property located in the CNMI as effectively connected 2. You have made an election in a previous year that has not been revoked, to treat income from real property located in the CNMI



ANNUAL WAGE AND SALARY AND EARNINGS TAX RETURN

Department of Finance
Division of Revenue and Taxation
Commonwealth of the Northern Mariana Jele

om	nonwealth of the Northern Mariana Islands	(Please type or print in ink)	<u> </u>
Υοι	ır first name and initial	Last name	Your social security number
Dai	rt A Annual Wage and Salary Tax Computa	ation	
			1
	CNMI wages and salaries from Form(s) W-2CM . Other CNMI wages and salaries not included in line		2
	Total CNMI wages and salaries (add lines 1 and 2)		3
	Amount on line 3 not subject to the wage and sala		4
	CNMI wages and salaries (subtract line 4 from line		5
5	Annual wage and salary tax. Compute the amou		
	Enter the result here		6
Pai	rt B Earnings Tax Computation		
ı	Gain from the sale of personal property		1
2	One half of the gain from the sale of real property		2
3	One half of the net income from leasing of real pro		3
	Interest, dividends, rents, royalties		4
	Gross winnings from any gaming, lottery, raffle, etc		5a
	Enter amount excludable (attach Form(s) W-2G and	4/01 W 20CW)	5b ;
5C	Balance (subtract line 5b from line 5a)		5c 3
5	Other income subject to the NMTIT, unless excluda	able under the earnings tax	6 i
7	Total income subject to the earnings tax (add lines		7
3	Annual earnings tax . Computer the tax on line 7. Enter the result here		8
	Litter the result here		
Pai	t C Combined Wage and Salary and Earnin	ngs Tax Due or (Overpaid)	
			1
			3
	Enter total wage and salary tax and earnings tax wi	_	4a
	Enter the total chapter 2 tax withheld and paid in 2	•	4b
	Enter the total estimated chapter 2 tax withheld an		4c
	Add lines 4a 4h and 4c	•	4c

5a Wage and salary tax and earnings tax due. Subtract line 4d from line 3. If zero or less, enter -0- . . 5a
5b Wage and salary tax and earnings tax overpaid. Subtract line 3 from line 4d. If zero or less, enter -0- 5b

Wage and Salary and Earnings Tax Table

- **1. Annual wage and salary tax Part A, Line 6**. Multiply the amount on line 5 by the applicable tax rate.
- **2. Annual earnings tax Part B, Line 8**. Multiply the amount on line 7 by the applicable tax rate.

	From	То	Rate
(a)	0	1,000.00	0
(b)	1,000.01	5,000.00	2.0%
(c)	5,000.01	7,000.00	3.0%
(d)	7,000.01	15,000.00	4.0%
(e)	15,000.01	22,000.00	5.0%
(f)	22,000.01	30,000.00	6.0%
(g)	30,000.01	40,000.00	7.0%
(h)	40,000.01	50,000.00	8.0%
(i)	50,000.01	And over	9.0%

909

Schedule **OS-3405A** (Form 1040NR-CM)

Application for Non-refundable Credit and Rebate on CNMI Source Income Tax

Department of Finance Division of Revenue and Taxation Commonwealth of the Northern Mariana Islands

(Attach to Form 1040NR-CM)

		20	2	3
--	--	----	---	---

the sand taxes imposed under 4 CMC § 2202(e). April non-refundable credits. Add lines 1, 2a, 2b, 2c, 3 and 4. April Computation State Computation State Computation State NMTIT. Enter amount from line 24 of Form 1040NR-CM. State NMTIT payments made. Amount from line 33 of Form 1040NR-CM. Total nonrefundable credits. Enter amount from line 5. State about 2 subtract line 8 from line 6. If zero or less, enter -0- MIT overpayment. Subtract line 9 from line 7. If zero or less, enter -0- MIT underpayment. Subtract line 9 from line 9. If zero or less, enter -0- MIT overpayment. Subtract line 7 from line 9. If zero or less, enter -0- MIT underpayment. Subtract line 7 from line 9. If zero or less, enter -0- MIT overpayment after rebate offset. If the sum of lines 10 and 12 is greater than line 11, abtract line 11 from the sum of lines 10 and 12. Otherwise, enter zero. MIT underpayment after rebate offset. If the sum of lines 10 and 12 is less than line 11, abtract the sum of lines 10 and 12 from line 11. Otherwise, enter zero. MIT underpayment. If line 13 is greater than line 15, subtract line 15 from line 13. Otherwise, enter zero. MIT overpayment. If line 13 is greater than zero, subtract line 13 from line 15. If the result is ses than zero, enter zero. If line 13 is not greater than zero, add lines 14 and 15. MIT underpayment of credit. Enter the lesser of line 16 or line 18. 19	
ser fees paid 4 CMC §1422	
ser fees paid 4 CMC §1422	
ser fees paid 4 CMC §1422	
the stand taxes imposed under 4 CMC § 2202(e). The state of the computation of the compu	
total non-refundable credits. Add lines 1, 2a, 2b, 2c, 3 and 4	
Total NMTIT payments made. Amount from line 24 of Form 1040NR-CM	
Fotal NMTIT. Enter amount from line 24 of Form 1040NR-CM	3
Total NMTIT payments made. Amount from line 33 of Form 1040NR-CM Total nonrefundable credits. Enter amount from line 5 Rebate base. Subtract line 8 from line 6. If zero or less, enter -0- NMTIT overpayment. Subtract line 9 from line 7. If zero or less, enter -0- NMTIT underpayment. Subtract line 7 from line 9. If zero or less, enter -0- NMTIT overpayment after rebate offset. If the sum of lines 10 and 12 is greater than line 11, subtract line 11 from the sum of lines 10 and 12. Otherwise, enter zero NMTIT underpayment after rebate offset. If the sum of lines 10 and 12 is less than line 11, subtract line 11 from the sum of lines 10 and 12. Otherwise, enter zero 13 NMTIT underpayment after rebate offset. If the sum of lines 10 and 12 is less than line 11, subtract the sum of lines 10 and 12 from line 11. Otherwise, enter zero 14 NMTIT overpayment after rebate offset. If the sum of lines 10 and 12 is less than line 11, subtract the amount from line 28 of Form 1040NR-CM 15 NMTIT overpayment. If line 13 is greater than line 15, subtract line 15 from line 13. Otherwise, enter zero NMTIT underpayment. If line 13 is greater than zero, subtract line 13 from line 15. If the result is less than zero, enter zero. If line 13 is not greater than zero, add lines 14 and 15. NMTIT underpayment of credit. Enter the lesser of line 16 or line 18 Tax on overpayment of credit. Enter the lesser of line 16 or line 18	6
Rebate base. Subtract line 8 from line 6. If zero or less, enter -0	7
Rebate base. Subtract line 8 from line 6. If zero or less, enter -0	8
NMTIT underpayment. Subtract line 7 from line 9. If zero or less, enter -0	9
Rebate offset amount. Use the Rebate Table below to calculate this amount based on line 9. NMTIT overpayment after rebate offset. If the sum of lines 10 and 12 is greater than line 11, subtract line 11 from the sum of lines 10 and 12. Otherwise, enter zero	10
NMTIT overpayment after rebate offset. If the sum of lines 10 and 12 is greater than line 11, subtract line 11 from the sum of lines 10 and 12. Otherwise, enter zero	11
NMTIT underpayment after rebate offset. If the sum of lines 10 and 12 is less than line 11, subtract the sum of lines 10 and 12 from line 11. Otherwise, enter zero	12
subtract the sum of lines 10 and 12 from line 11. Otherwise, enter zero	13
NMTIT overpayment. If line 13 is greater than line 15, subtract line 15 from line 13. Otherwise, enter zero	14
NMTIT underpayment. If line 13 is greater than zero, subtract line 13 from line 15. If the result is less than zero, enter zero. If line 13 is not greater than zero, add lines 14 and 15	15
less than zero, enter zero. If line 13 is not greater than zero, add lines 14 and 15	16
Tax on overpayment of credit. Enter the lesser of line 16 or line 18	17
	18
C. h	19
Subtract line 19 from line 16	20
apter 7 Tax Due or Overpayment	
NMTIT overpayment. Enter the amount from line 20	21
NMTIT underpayment. Enter the amount from line 17	22
Estimated tax penalty. Check if Form 2210 is attached	
Fotal NMTIT underpayment. Subtract line 21 from the sum of lines 22 and 23. If zero or less enter zero	
Total NMTIT overpayment. Subtract the sum of lines 22 and 23 from line 21. If zero or less enter zero	

REBATE TABLE										
If rebate base (line 9) 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 x70% + 18,000								
Over \$100,000	\$74,000 plus 50% of the rebate base over \$100,000	Rebate base - 100,000 x 50% +74,000								

Deadline: APRIL 15, 2024 Page 7

Su	ımmary	of Taxes Du	ie or Overpayn	nent												
Pa	rt A Co	mbined Due or	Overpayment													
1a	Total wag	e and salary and e	arnings tax due. Ent	er amount f	rom lin	ie 5a, P	art C c	f Form	NMI-A				1a			
b	Total wag	e and salary and e	arnings tax overpaid.	Enter amo	unt fro	m line s	b, Pa	t C of	Form NMI-	Α.			1b	(
2a	NMTIT ar	mount due. Enter	amount from line 24	os Schedi	ule OS	S-3405A	٠.						2a			
b	NMTIT ar	mount overpayme	nt. Enter amount fro	om line 25 o	of Sch	edule C	S-340)5A					2b	(
3			tax and earnings ta -, skip lines 4 and 5			or ove				a, 1b, 	2a, an •	nd 2b.	3			
4	Amount o	of line 3 (overpayn	nent) you want appli	ed to your 2	2024 e	stimat	ed tax						4			
5	Amount a	vailable for refu	nd. Add line 3 and li	ne 4 .									5			
Pai	rt B Add	ditional Child T	ax Credit (ACTC)	If you are than zero	not c	laimino r the ai	this noun	credit from	and the a line 3, Pa	moun	t of lir	ne 3, F 4 belo	art A	abov	e is gı	eater
1	Enter the	e amount from li	ne 28 of Form 104	0NR-CM,	page	2 .							. 1			
2			Part A is greater th s less than zero, e										. 2			
3	ACTC re	fund. Subtract	line 2 from line 1.										. 3			
4	Balance	after offset of A	CTC. Subtract line	e 2 from lir	ne 3.	Part A							. 4			
Par	rt C Ba	lance Due											-			
Pai	If you w	re the accuracy	deposited directly of your account nu unt must be active	mber, ple	ase at	tach a	сору	of a vo	oid check		ring a	ccour	ıt info		on bel	ow.
		1a	Account Type	Savin	gs	∐ c	hecki	ng								
		1b	Routing number	•												
		1c	Account number	•										\perp	\perp	
Thi Pai		Do you want to al and Taxation? So Designee's name	low another person to ee instructions	discuss thi	s retur		one	sion of	Revenue	Pers		dentifi	ete belo	ow.	□ No)
	o.gc	Under penalties of	perjury, i declare that I elief, they are true, correct enowledge.			s return	and ac			ules an	d state	ements				
Sig	gn ere	Your signature						Date			Your	r occu	pation			
		Phone no.							address							
Pa Pr	id eparer	Preparer's name			Prep	arer's s	ignatu	ire	Date			PTIN			Check	if: elf-employe
	e Only	Firm's name											ne no.			
	-	Firm's address										∣ ⊢irm′	s EIN			

Deadline: April 15, 2024 Page 8

Firm's address

Supplemental Instructions for Form 1040NR-CM 2023

Use in conjunction with the 2023 Internal Revenue Service (IRS) Form 1040NR instructions

- Income
- Additional Child Tax Credit (Schedule 8812)

Line 8

Use the CNMI Schedule 1CM instead of the U.S. version. Enter the amount from line 10 of Schedule 1CM.

Line 10

Enter the amount from line 26 of Schedule 1CM.

Line 23b

Caution: Do not include lines 4, 5, 6, 7, 9, 11, 13, and 17m from Part II of Schedule 2. Please consult a tax professional on these items.

Line 25a through 25c

Enter the total Federal Income Tax withheld (from Form(s) W-2 and/or 1099 from outside source document, issued from outside the CNMI). **Do not include these amounts on line 25h.**

Line 25h

Enter the total NMTIT withheld chapter 7 tax from Form(s) W-2CM and/or 1099 from within the CNMI only. **Do not include this amount on line 25d**.

Line 28

Refer to IRS Schedule 8812 (2023) instructions.

Line 31

Caution: Do not include lines 11 and 12 from Part II of Schedule 3. Please consult a tax professional on these items.

Line 34

The amount overpaid on this line may be subject to an adjustment for non- refundable credit and/or rebate offset as computed on line 2b, Part A, Summary of Taxes Due or Overpayment.

Summary of Taxes Due or Overpayment

Part A. Combined Due or Overpayment

1a. Total wage and salary and earnings tax due. Enter

amount from 5a, Part C of Form NMI-A.

- **1b.** Total wage and salary an earnings tax overpaid. Enter amount from line 5b, Part C of Form NMI-A.
- **2a.** NMTIT amount due. Enter amount from line 24 of Schedule OS-3405A.
- **2b.** NMTIT amount overpaid. Enter amount from line 25 of OS-3405A.
- **3**. Combined wage and salary tax and earnings tax and NMTIT due or overpayment. Add lines 1a, 1b, 2a, and 2b. If the result is more than zero, skip lines 4 and 5.

If the amount on line 3 is greater than zero, this is the amount you owe. Pay this amount unless you are claiming the additional child tax credit (ACTC) on Part B.

- **4**. Enter the overpayment amount on line 3 you want applied to your 2024 estimated tax. This amount cannot be greater than the (overpayment) available on line 3, Part A.
- 5. Add line 3 and line 4. This is your refund.

Part B. Additional Child Tax Credit (ACTC)

If you are not claiming this credit and the amount of line 3, Part A above is greater than zero, enter the amount from line 3, Part A on line 4 below.

- **1.** Enter the amount from line 28 of Form 1040NR-CM, page 2.
- 2. If the amount on line 3, Part A is greater than zero, enter the lesser of line 1 or the amount on line 3, Part A. If line 3, Part A is less than zero, enter zero.
- 3. ACTC refund. Subtract line 2 from line 1.
- **4.** Balance after offset of ACTC. Subtract line 2 from line 3, Part A.

Part C. Balance Due.

1. Enter the amount from line 4, Part B. Pay this amount.

Part D. Direct Deposit on Savings or Checking Account. Simple.Safe.Secure.



If you want your refund deposited directly to your bank account, please provide your checking or saving account information.

Why Use Direct Deposit?

- You get your refund faster by direct deposit than you do by check.
- Payment is more secure. There is no check that can get lost or stolen.
- It is more convenient. You do not have to make a trip to the bank to deposit your check.
- It saves tax dollars. It costs the government less to refund by direct deposit.



Your bank account must be active in order for **CAUTION** direct deposit to be processed.

Line 1a Account Type

Checkmark the box corresponding to the type of account you entered on line 1c. For example, if your account number is a savings account, checkmark the box for the savings account. Check only one box.

Line 1b. Routing Number

The routing number must be nine digits. Enter the 9digit routing number from the first set of numbers on the lower left corner of your check.

Line 1c. Checking or Savings Account Number

Enter the account number from your bank. This number is private and unique to your bank account. You will find it only on your checking or savings statement.

For example. If your checking account number is 0017-123456, you must enter it on line 1c as shown below. Omit the dash. Enter only alphanumeric characters.

Reasons Your Direct Deposit Request Will Be Rejected

If any of the following apply, your direct deposit request may be rejected by your financial institution and the CNMI Treasury will issue a check to you.

- A joint return refund is deposited to a non-joint checking or savings account.
- The name(s) on your account does not match the name(s) on the refund.

- You have given an invalid account number.
- Your bank account is inactive.



The Division of Revenue and Taxation is not responsible for a lost refund if you enter the wrong account information. Check with your

financial institution to get the correct routing and account numbers.