For the year Jan. 1–Dec. 31, 2024, or other tax year beginning	<b>5</b> 1040N	R-	CM Check Departmen	t of Finan <b>Vonre</b>	ice—Division of Revenue	and Taxation	rn 20	<b>24</b> <sub>Do</sub>	nor write or staple in this spar	
Your first name and middle initial  Last name    Vour identifying number (see instructions)	For the year Jan.	. 1–D						20		
City, town, or post office. If you have a foreign address, also complete spaces below.    Foreign country name								Your identifying number		
Foreign country name	Home address (I	numk	per and street). If you have a P.O. box	, see ins	structions.			ļ i	Apt. no.	
Status   Single   Married filing separately (MFS)   Qualifying surviving spouse (QSS)   Estate   Trust   Tru	City, town, or po	st of	fice. If you have a foreign address, als	so comp	lete spaces below.		State	ZI	P code	
Status Check only one box.  Digital Assets Digital Digital Assets Digital Digital Assets Digital Digital Assets Digital Digital Assets Digital Digital Assets Digital Digital Assets Digital Dig	Foreign country	name	е	Foreigr	n province/state/coun	ty	Foreign	postal code		
otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions.)    Connected   Connecte	Status Check only	If y				, ,	` '		e 🗌 Trust	
See instructions :   (1) First name	Digital Assets									
dependents, see instructions and check here	-		(1) First name Last name			(3) Relationship to y	Chi		Credit for other	
Effectively b Household employee wages not reported on Form(s) W-2CM	dependents, see instructions and									
Attach Form(s) W-2CM, 1042-S, SSA-1042-S, Reserved for future use	Effectively Connected With U.S. Trade or	b c d e f	Household employee wages not rep Tip income not reported on line 1a (s Medicaid waiver payments not report Taxable dependent care benefits fro Employer-provided adoption benefit	orted on see instr rted on F im Form is from F	n Form(s) W-2CM . ructions) Form(s) W-2CM (see i 2441, line 26 Form 8839, line 29	nstructions)		. 1b . 1c . 1d . 1e . 1f		
tax was 3a Qualified dividends 3a b Ordinary dividends 3b withheld. 4a IRA distributions 4a b Taxable amount	Form(s) W-2CM, 1042-S, SSA-1042-S, RRB-1042-S, and 8288-A here. Also attach Form(s)	h i j k	Other earned income (see instruction Reserved for future use	ns) m Sched	lule OI (Form 1040-NF	1i 1i 3; 3; 3; 3; 3; 3; 3; 3; 3; 3; 3; 3; 3;		. 1h . 1j . 1z		
get a Form W-2CM, see instructions.  6 Reserved for future use	tax was withheld. If you did not get a Form W-2CM, see	3a 4a 5a 6 7	Qualified dividends 3a IRA distributions 4a Pensions and annuities 5a Reserved for future use	a	b (b ) b ' c	Ordinary dividends .  Taxable amount .  Taxable amount .  .  f not required, check he		3b 4b 5b 6		

Add lines 1z, 2b, 3b, 4b, 5b, 7, and 8. This is your total effectively connected income . . . .

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

standard deduction (see instructions) . . . . . . . . . . . . . . .

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

Exemptions for estates and trusts only (see instructions) . . . . .

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

**c** Add lines 13a and 13b . . . . . . . . . . . . . . . .

9

10

11 12

13a

14

9

10

11

12

13c

14

15

13a

orm 1040NR-C	CM (2024	4)								Page 2
Tax and	16	Tax (see instructions). Check if ar	y from For	m(s): <b>1</b>	314 <b>2</b> [	4972 <b>3</b>			16	
Credits	17	Amount from Schedule 2 (Form	1040), line	3					17	
	18	Add lines 16 and 17							18	
	19	Child tax credit or credit for other	r depende	ents from Sched	ule 8812 (For	m 1040) .			19	
	20	Amount from Schedule 3 (Form	1040), line	8					20	
	21	Add lines 19 and 20							21	
	22	Subtract line 21 from line 18. If z							22	
	23a	Tax on income not effectively co	nnected w	ith a U.S. trade	or business fr	rom				
		Schedule NEC (Form 1040-NR),	line 15 .			. 23a				
	b	Other taxes, including self-empl	oyment ta	x, from Schedule	e 2 (Form 10	40),				
		line 21				. 23b				
	С	Transportation tax (see instruction	ons)			. 23c				
	d	Add lines 23a through 23c							23d	
	24	Add lines 22 and 23d. This is you	ur <b>total ta</b> x	<b>x</b>					24	
Payments	25	Federal income tax withheld from								
•	а	Form(s) W-2				. 25a				
	b	Form(s) 1099				. 25b				
	С	Other forms (see instructions) .				. 25c				
	d	Add lines 25a through 25c							25d	
	е	Form(s) 8805							25e	
	f	Form(s) 8288-A							25f	
	g	Form(s) 1042-S							25g	
	h	NMTIT withheld from forms W-							25h	
	26	2024 estimated tax payments ar							26	
	27	Reserved for future use				1 1				
	28	Additional child tax credit from S								
	29	Credit for amount paid with Forn		•					1	
	30	Reserved for future use								
	31	Amount from Schedule 3 (Form								
	32	Add lines 28, 29, and 31. These					dits		32	
	33	Add lines 25d, 25e, 25f, 25g, 25l							33	
	34	If line 33 is more than line 24, su							+	
	•	See supplemental instructions				•	-		34	
	05								35	
	35	Subtract line 33 from line 24. The want to allow another person to							33	
Third		axation? See instructions					□ <b>v</b> ₄	es. Comp	lete he	ow. No
Party								nal identif		
Designee	Desig name			Phone no.				narideniii er (PIN)	ication	
<u> </u>	ł	penalties of perjury, I declare that I ha				chedules and		` '	ne best d	of my knowledge and
		they are true, correct, and complete. I								
Sign	Your	our signature Date Your occupation								
Here		3								
	Phone	e no.		Email address						
Paid	Prepa	arer's name	Preparer'	s signature		Date		PTIN		Check if:
Preparer										Self-employed
	Firm's	s name						Phone r	10.	
<b>Use Only</b>	Firm's	s address						Firm's E	IN	

## **SCHEDULE A** (Form 1040NR-CM)

Name shown on Form 1040NR-CM

Department of Finance

# **Itemized Deductions**

Attach to Form 1040NR-CM.

Go to www.finance.gov.mp for forms and instructions

Division of Revenue and Taxation Caution: If you are claiming a net qualified disaster loss on Form 4684, see instructions for line 7.

Attachment Sequence No. **7A** 

Your identifying number

Taxes You Paid	1a	State and local income taxes	1a				
	b	Enter the smaller of line 1a or \$10,000 (\$5,000 if married filing separate	ely) .			1b	
Gifts to U.S. Charities	2	Gifts by cash or check. If you made any gift of \$250 or more, see instructions	2				
Caution: If you made a gift and got	3	Other than by cash or check. If you made any gift of \$250 or more, see instructions. You <b>must</b> attach Form 8283 if over \$500	3				
a benefit for it, see	4	Carryover from prior year	4				
instructions.	5	Add lines 2 through 4				5	
Casualty and Theft Losses	6	Casualty and theft loss(es) from a federally declared disaster (oth disaster losses). Attach Form 4684 and enter the amount from line instructions		•		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 Form 1040-NR, line 12		this amou	unt on	8	

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

Schedule A (Form 1040NR-CM) 2024

# SCHEDULE NEC (Form 1040NR-CM)

Department of Finance

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

Attach to Form 1040NR-CM.

Go to www.finance.gov.mp for forms and instructions



Division of Revenue and Taxation

Name shown on Form 1040NR-CM

Your identifying number

Enter a	amount of income unde	r the appropriate rate of tax. See instructions.							
		Nature of Income			(a) 10%	<b>(b)</b> 15%	(c) 30%	(d) Other	(specify)
		Nature of income			(a) 1070	(b) 1370	(6) 30 %	%	%
1	Dividends and divide	nd equivalents:							
а	Dividends paid by CN	IMI corporations		1a					
b	Dividends paid by for	eign corporations		1b					
С	Dividend equivalent pa	ayments received with respect to section 871(m) t	ransactions	1c					
2	Interest:								
а	Mortgage			2a					
b	Paid by foreign corpo	rations		2b					
С	Other			2c					
3	Industrial royalties (pa	atents, trademarks, etc.)		3					
4	Motion picture or TV	copyright royalties		4					
5	Other royalties (copyr	ights, recording, publishing, etc.)		5					
6	Real property income	and natural resources royalties		6					
7	Pensions and annuitie	es		7					
8	Social security benefit	ts		8					
9		18 below		9					
10	If zero or less, enter		:).						
а	Winnings								
b		<u> </u>		10c					
11	Gambling—Residents	s of countries other than Canada. only. Losses aren't allowed		11					
12	Other (specify):			<u> </u>					
				12					
13		12 in columns (a) through (d)		13					
14	•	ate of tax at top of each column		14					
15		ectively connected with a CNMI trade or busines			through (d) of line 1	4 Enter the total her	re and on Form 1040N	JR-CM line 23a <b>15</b>	
		Capital Gains and	d Losses F	From	Sales or Excha	nges of Proper	tv	, 200	I
losses texchan	nly the capital gains and from property sales or ges that are from sources he CNMI and not	(a) Kind of property and description (if necessary, attach statement of descriptive details not shown below)	(b) Date acq mm/dd/yy	uired	(c) Date sold mm/dd/yyyy	(d) Sales price	(e) Cost or other basis	(f) LOSS If (e) is more than (d), subtract (d) from (e).	(g) GAIN  If (d) is more than (e), subtract (e) from (d).
effectiv	ely connected with a CNMI								
or loss	on disposing of a CNMI real								
gains a	y interest; report these nd losses on Schedule D								
(Form 1	•								
	property sales or ges that are effectively								
connec	ted with a CNMI business edule D (Form 1040),								
	797, or both.	18 Capital gain. Combine columns (f) and	(g) of line 17	7. Ente	er the net gain her	e and on line 9 ab	ove. If a loss, ente	r -0 <b>18</b>	

## SCHEDULE OI (Form 1040NR-CM)

Other Information
Attach to Form 1040NR-CM.

Attach to Form 1040NR-CM.

Go to **www.finance.gov.mp** for forms and instructions **Answer all questions.** 

2024
Attachment
Sequence No. 7C

Your identifying number

Department of Finance Division of Revenue and Taxation

Name shown on Form 1040NR-CM

Α	Of what country or countries were you a	citizen or nationa	I during the tax ye	ear?							
В	In what country did you claim residence	e for tax purposes	during the tax ye	ear?							
С	Have you ever applied to be a green car	d holder (lawful pe	ermanent residen	t) of the United States? .	∟Yes ∟No						
D	Were you ever:										
2	2. A green card holder (lawful permanent r	,			<b>☐ Yes ☐ No</b>						
Е	If you answer "Yes" to (1) or (2), see Pub				ter vour IIS						
-	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. immigration status on the last day of the tax year.										
F	Have you ever changed your visa type (										
	If you answered "Yes," indicate the date		-								
G	List all dates you entered and left the Co	mmonwealth of th									
	Note: If you're a resident of Canada or				ent intervals,						
	check the box for Canada or Mexico	and skip to item H		🗌 Canada	Mexico						
		parted United State	s	Date entered United State							
	mm/dd/yy	mm/dd/yy	_	mm/dd/yy	mm/dd/yy						
			_								
			<b>⊣</b> ⊦								
			<u> </u>								
н	Give number of days (including vacation,	nonworkdays and		wore present in the CNMI d							
	2022, 202										
ī.	Did you file a CNMI income tax return for	r any prior vear?	, and		 □ Yes □ No						
-	If "Yes," give the latest year and form no	ımber you filed:									
J	Are you filing a return for a trust?	· · · · · · ·			Yes . No						
	If "Yes," did the trust have a CNMI or for										
	CNMI person, or receive a contribution										
K	Did you receive total compensation of \$										
	If "Yes," did you use an alternative meth										
L	Income Exempt From Tax—If you are complete (1) through (3) below. See Pub				tax treaty with a foreign country,						
	<b>1.</b> Enter the name of the country, the applic				claimed the treaty benefit, and the						
	amount of exempt income in the columns				claimed the freaty beliefft, and the						
	(a) Country		(b) Tax treaty arti		ns (d) Amount of exempt						
	(4, 5 5 5)		(-,	claimed in prior tax ye	1 1						
	(a) Total Enterthic agency to Ferre 40	MOND ON the 4th	Do not anton !! -	unumbara alac an lina 4							
	(e) Total. Enter this amount on Form 10			•	Yes No						
	<ol> <li>Were you subject to tax in a foreign cou</li> <li>Are you claiming treaty benefits pursuar</li> </ol>				☐ Yes ☐ No						
•	If "Yes," attach a copy of the Competen				165 140						
М	Check the applicable box if:		allori lottor to y								
	1. This is the first year you are making an e	election to treat inc	come from real pr	operty located in the CNM	II as effectively connected						
	with a CNMI trade or business under se										
2	2. You have made an election in a previous										
	States as effectively connected with a C	NMI trade or busing	ness under sectio	n 871(d). See instructions							



# ANNUAL WAGE AND SALARY AND EARNINGS TAX RETURN

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

Commonwealth of the Northern Mariana Islands (Please type or print in ink)

Your first name and initial Your social security number Last name Part A Annual Wage and Salary Tax Computation CNMI wages and salaries from Form(s) W-2CM 1 2 3 4 Amount on line 3 not subject to the wage and salary tax (attach Schedule WSD) . . . <sub>.</sub>5 5 Annual wage and salary tax. Multiply the amount on line 5 above by the tax rate from the tax table Part B Earnings Tax Computation Gain from the sale of personal property Attach Form One half of the gain from the sale of real property . . . . . . . . . 2 2 W-2CM 3 One half of the net income from leasing of real property . . . . . here. 4 Also attach Forms Less amount excludable (attach Form(s) W-2G and/or W-2GCM). . . . W-2G. W-2GCM. and 6 6 Other income subject to the NMTIT, unless excludable under the earnings.tax . . . . . . 1099-R 7 if tax was Annual earnings tax. Multiply the amount on line 7 above by the tax rate from the tax table below. withheld Part C Combined Wage and Salary and Earnings Tax Due or (Overpaid) . 1 1 Education tax credit (attach Schedule ETC) 2 Tax after education tax credit. Subtract line 2 from line 1. If line 2 is greater, enter -0- . . .

T	ā	b	le

## Wage and Salary and Earnings Tax

	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%

# 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)

202	4

Your first	name and initial	Last name	Your social security number		
Part A	Non-refundable Credits				
1	Wage and salary tax and earnings tax. Enter the	ne amount from line 3, Part C of Form NMI-A	. 1		
2	Business gross revenue tax				
	Name	Tax ID No.			
á	a	a			
k		b			
•		с			
3	User fees paid 4 CMC §1422	3			
4	Fees and taxes imposed under 4 CMC § 2202	(e) 4			
5	Total non-refundable credits. Add lines 1, 2a,	2b, 2c, 3 and 4	5		
Part B F	Rebate Computation				
6	Total NMTIT. Enter amount from line 24 of For	m 1040NR-CM	. 6		
7	Total NMTIT payments made. Amount from lir		. 7		
8	Total nonrefundable credits. Enter amount fro		. 8		
9		ero or less, enter -0			
10			. 10		
11	NMTIT underpayment. Subtract line 7 from lin		. 11		
12			. 12		
13	NMTIT overpayment after rebate offset. If the subtract line 11 from the sum of lines 10 and 1		. 13		
14	NMTIT underpayment after rebate offset. If the subtract the sum of lines 10 and 12 from line 1		. 14		
15	Enter the amount from line 28 of Form 1040NF	R-CM	. 15		
16	NMTIT overpayment. If line 13 is greater than enter zero	line 15, subtract line 15 from line 13. Otherwise,	. 16		
17		n zero, subtract line 13 from line 15. If the result is ter than zero, add lines 14 and 15	17		
18	Subtract line 10 from line 15 of Schedule 3 .		18		
19	Tax on overpayment of credit. If line 18 is great	ater than zero, enter the lesser of line 16 or line 18 .	19		
20	Subtract line 19 from line 16		. 20		
Part C	Chapter 7 Tax Due or (Overpaid)				
21	NMTIT overpayment. If line 16 is greater than line	e 19, subtract line 19 from line 16. Otherwise enter -0-	. 21		
22	NMTIT underpayment. Enter the amount from	line 17	. 22		
23	Estimated tax penalty. Check I if Form 2210	0 is attached	23		
24	Total NMTIT underpayment. If line 21 is -0-, ac subtract line 21 from line 23. If -0- or less, enter	dd lines 22 and 23. If line 21 is greater than -0-,	24		
25	Total NMTIT overpayment. If line 21 is -0- or le 21. If the result is less than -0-, enter -0	ess, enter -0 Otherwise, subtract line 23 from line	. 25		
		REBATE TABLE			

	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 to 100,000	18,000 plus 70% of the rebate over 20,000	Rebate base minus 20,000 x 70% + 18,000
Over 100,000	74,000 plus 50% of the rebate base over 100,000	Rebate base minus 100,000 x 50% + 74,000

Deadline: APRIL 15, 2025 Page 7

Summ	ary of Taxes Due or Overpayment
Part A	Combined Due or Overpayment

Pai	rt A Co	ombined Due or Ove	erpay	ment													
1a	Total wa	ge and salary and earn	nings ta	ax due. Enter amour	nt from I	ine 5a	, Part	C of F	orm N	MI-A	٨.			1a			
b	Total wa	ge and salary and earn	nings ta	ax overpaid. Enter a	mount f	rom lir	ne 5b	, Part C	of F	orm N	NMI-A			1b	(		)
2a	NMTIT a	mount due. Enter amo	ount fr	om line 24 os Sched	ule OS-	3405A	١.							. 2a	1		
b	NMTIT a	mount overpayment.	Enter a	amount from line 25	of Sche	dule C	S-34	05A						2b	(		)
3		ed wage and salary tax cult is more than -0-, sk										2a, an	nd 2b	3			
4	Amount	of line 3 (overpayment	t) you v	vant applied to your	2025 es	timat	ed ta	х.						4			
5	Amount a	available for refund. A	dd line	3 and line 4 .										5			
Par	rt B Ad	ditional Child Tax C	Credit	(ACTC) If you are not than zero, e	ot claimi	ng this	credit	and the	e amo	unt of	line 3,	Part A	above	is gre	eater		
1	Enter the	e amount from line 28 c	of Form	•										1			
2		ount on line 3, Part A i f line 3, Part A is less t	U	•	he lesse 						,			2			
3	ACTC re	fund. Subtract line 2 fi	rom lin	ne 1										3			
4	Balance	after offset of ACTC.	Subtra	ct line 2 from line 3,	Part A									4			
Par	rt C Ba	lance Due															
1	Enter am	nount from line 4, Part I	B abov	/e. PAY THIS AMOL	JNT .									. 1			
Par	rt D Dir	ect Deposit															
	CAUTION	If you want your refinformation below.	To ens	sure the accuracy o													
	/ unprion	Tour bank account		be active for direct	•	t to be	e prod	cessed	l.								
	Constitution	Tour bank account			<b>deposi</b> t Savings	t to be	- -	cessed ecking	<b>I.</b>								
	2000100	Tour bank account	1a		•	t to be	- -		l. 								
	2000	Tour bank account	1a 1b	Account Type	•	t to be	- -		i. 	<u>                                       </u>		I	I		1		
	rd	Do you want to allow	1a 1b 1c anothe	Account Type S  Routing number Account number r  person to discuss the	Savings		Che	ecking	<u> </u>	enue		Yes C	omple		low		
Par	rd ty	<b>S</b>	1a 1b 1c anothe	Account Type S  Routing number Account number r  person to discuss the	Savings	with t	Che	ecking	<u> </u>	enue	Pers	Yes. C	entifica		elow.		0
Par	rd	Do you want to allow and Taxation? See in Designee's name	1a 1b 1c anothe	Account Type S  Routing number  Account number  or person to discuss the cons	Savings	with t . Pho	Che	ecking      vision o	   f Reve		Pers num	onal ide oer (PIN	entifica N)	ation			
Par	rd ty	Do you want to allow and Taxation? See in Designee's	1a 1b 1c anothe estruction	Account Type S Routing number Account number Account number Per person to discuss the person the person to discuss the person to dis	Savings	with t . Pho	Che	vision o	f Reve		Pers num ements	onal ide per (PIN	entifican	ation st of my	y know	lledge and	
Par	rd ty signee	Do you want to allow and Taxation? See in Designee's name Under penalties of perjury,	1a 1b 1c anothe estruction	Account Type S Routing number Account number Account number Per person to discuss the person the person to discuss the person to dis	Savings	with t . Pho	Che	vision o	f Reve		Pers num ements	onal ide per (PIN	entifica N) the best	ation st of my as any	y know	lledge and	
Par Des	rd ty signee	Do you want to allow and Taxation? See in Designee's name Under penalties of perjury, they are true, correct, and Your signature Phone no.	1a 1b 1c anothe estruction	Account Type S Routing number Account number Account number Per person to discuss the person the person to discuss the person to dis	Savings	with t . Pho no. Ind accord an taxpa	Che	vision o	f Reve	 nd stat	Pers num ements	onal ide per (PIN , and to nich prep	entifica N) the best parer ha	ation st of my as any	y know	lledge and	d belief,
Sig Hei	rd ty signee In re	Do you want to allow and Taxation? See in Designee's name Under penalties of perjury, they are true, correct, and	1a 1b 1c anothe estruction	Account Type S Routing number Account number Account number Per person to discuss the person the person to discuss the person to dis	Savings	with t . Pho no. Ind accord an taxpa	Che	vision o	f Reve	 nd stat	Pers num ements	onal ide per (PIN , and to nich prep	entifica N) the best	ation st of my as any	y know	lledge and	d belief,
Sig Hei	rd ty signee In re	Do you want to allow and Taxation? See in Designee's name Under penalties of perjury, they are true, correct, and Your signature Phone no.	1a 1b 1c anothe estruction	Account Type S Routing number Account number Account number Per person to discuss the person the person to discuss the person to dis	Savings	with t . Pho no. Ind accord an taxpa	Che	vision o	f Reve	 nd stat	Pers num ements	onal ide per (PIN , and to nich prep	entifica N) the best parer ha	ation st of my as any as any	y know	lledge and	d belief,

Deadline: April 15, 2025

# **Supplemental Instructions for Form 1040NR-CM 2024**

\_\_\_\_\_\_

# Use in conjunction with the 2024 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 (2024) 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 2025 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.** Tax due. 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 for 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.

0	0	1	7	1	2	3	4	5	6							
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## 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.



numbers.

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