DIVISION OF REVENUE AND TAXATION COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS CNMI Nonresident Alien Income Tax Return

2008	
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OFFICIALS				CNMI Nonresident						~ ~ ``	ART MENT OF
	For	m 1040NR-CM	Foi beginning	r the year January 1–De , 2003 ,	ecember 31, 2008, or 8, and ending	other tax y		20	20	80	
Y	our fir	st name and initial		Last name			Ide	ntifying	number	(see page 7	7)
Р	resent l	nome address (number, str	eet, and apt. no., or ru	iral route). If you have a	a P.O. box, see page 7	7.	Ch	eck if:	🗌 Ind	dividual	
		-							Est	tate or Trus	t
	ity, to	wn or post office, state, a	and ZIP code. If you	have a foreign addr	ess, see page 7.		Тур	pe of ent	ry visa (s	see page 7)	
							•				
	ountry	dress outside the CNM			y were you a citizen or		ring the tax year? country where y			nontracid	
n	nailed.	If same as above, write	"Same."	it any refutio check			rite "Same."	ou ale a	perma	lientresiu	ent.
\vdash		Filing Status	and Exemption	s for Individuals	(see pages 7	' and 8)				7a	7 k
F	iling s	tatus. Check only on								Yourself	Spor
1	Г	☐ Single resident of	Canada or Mexico	o, or a single U.S. r	national						
2		Other single nonre		· · · · · · ·							-
3		Married resident of (oox 7b, enter your		ſ		
	· [Married resident of t			,	ntifying nu			Ì		
5		Other married nor	nresident alien .								_
6		Qualifying widow								L	
C	autio	n: Do not check box	7a if your parent (or someone else) c	an claim you as a	depende	ent.		of boxe 7a and 7	s checked b	▶_
-		t check box 7b if your	spouse had any u		(3) Depe	ndent's	(4) if gualifying		of child who:	ren on	
'		First name	Last name	(2) Dependent's identifying numb	relatio	nship	child for child tax	•	lived wit	h you	►
	(1)	First name	Last name		to y	ou	credit (see page 8)	•	did not li	ve with	
\vdash									u due to separatio		▶_
									pendent t entered		•
\vdash											Γ
	d	Total number of exe	emptions claimed					— Ad . on	d numbe lines abo	ers entered ove	►L
	d Total number of exemptions claimed .										
s l	9a	Taxable interest .							Эа		
lines		Tax-exempt interest									
Bu	10a	Ordinary dividends						1	0a		
rade	b	Qualified dividends	(see page 10) .			10b					
CNMI Trade/Business		Taxable refunds, cre	-			5		· –	11 12		
th CN	12	Scholarship and fellow						· ⊢	12		
Wit	13 14	Business income or						· ⊢	14		
Connected Wi	15	Capital gain or (loss). <i>I</i> Other gains or (losse				a, check r	here		15		
nne		IRA distributions .				· · ·	unt (see page 1	· ·⊢	6b		
S		Pensions and annuit		a			unt (see page 1)	·/ · ⊢	7b		
tive	18	Rental real estate, ro		nips, trusts, etc. At					18		
ffec	19	Farm income or (los		-					19		
Income Effectively	20	Unemployment con	npensation					· · ∟	20		
L S	21	Other income. List ty						1	21		
-	22	Total income exemp									
	23	Add lines 8, 9a, 10a, 11				1 1	me		23		
	24	Educator expenses (24 25		_			
	25 26	Health savings acco Moving expenses. A				25					
he		Self-employed SEP,				27		_			
Adjusted Gross Income	27 28	Self-employed healt				28					
ss In	20 29	Penalty on early wit				29					
Ű	30	Scholarship and fell	-			30					
ted	31	IRA deduction (see p				31					
just	32	Student loan interes				32					
Ad	33	Domestic productio	n activities deduc			33					
	34	Add lines 24 throug							34		
	35	Subtract line 34 from li	ine 23. Enter here a	nd on line 36. This is	your adjusted gr	oss incor	me	▶ 3	35		

	36	Amount from line 35 (adjusted gross income)				36		
	37	temized deductions from page 3, Schedule A, line 17				37		
	38	Subtract line 37 from line 36			[38		
	39	Exemptions (see page 17)				39		
	40	Taxable income. Subtract line 39 from line 38. If line 39 is more t	han line 38, enter -0)		40		
S	41	Fax (see page 17). Check if any tax is from: a 🗌 Form(s) 8814	b Form 4972			41		
Credits	42	Alternative minimum tax (see page 18). Attach Form 6251				42		
r P		Add lines 41 and 42			. 🕨	43		
ð		Foreign tax credit. Attach Form 1116 if required						
Tax and	45	Credit for child and dependent care expenses. Attach Form 2441 .	45					
aX		Retirement savings contributions credit. Attach Form 8880.						
		Child tax credit (see page 20). Attach Form 8901 if required						
		Credits from: a Form 8396 b Form 8839 c Form 5						
	49	Other credits. Check applicable box(es): a Form 3800						
		c Form 8801 c Form				50		
		Add lines 44 through 49. These are your total credits				50		
		Subtract line 50 from line 43. If line 50 is more than line 43, enter				51		
s		Fax on income not effectively connected with a CNMI trade or busine				52		
×		Jnreported social security and Medicare tax from: a 🗌 Form 4	4137 b 🗌 Fo	rm 8919 .	· · · _	53		
Ta		Additional tax on IRAs, other qualified retirement plans, etc. Attach Form	5329 if required		· · ·	54		
Jer		Transportation tax (see page 20)			_	55		
Ē		Household employment taxes. Attach Schedule H (Form 1040).				56		
_	57	Add lines 51 through 56. This is your total tax		• • •	. 🕨	57		
		NMTIT withheld from Forms W-2, 1099, 1042-S, etc						
	59	2008 estimated tax payments and amount applied from 2007 return						
Payment	60	Excess social security and tier 1 RRTA tax withheld (see page 22)						
	61	Additional child tax credit. Attach Form 8812						
	62	Amount paid with Form 4868 (request for extension)						
ts	63	Other payments from: a 🗌 Form 2439 b 🗌 Form 4136 c 🗌 Forr						
e	64	Credit for amount paid with Form 1040-C						
ξ	65	NMTIT withheld at source from page 4, line 85	65					
Pa)		NMTIT withheld at source by partnerships under section 1446:						
_		From Form(s) 8805	66a					
	b	From Form(s) 1042-S	66b					
	67	NMTIT withheld on dispositions of CNMI real property interests:						
		From Form(s) 8288-A	67a					
		From Form(s) 1042-S	67b					
	68	Refundable credit for prior year minimum tax from Form 8801, line 30 .	68					
	69	Add lines 58 through 68. These are your total payments			. ►	69		
		70 If line 69 is more than line 57, subtract line 57 from line 69. This	s is the amount you ov	erpaid .		70		
Ref	und		is attached, check her	-		71a		
Direc					_			
depc page	sit? See 22.		Type: Checking	Savings				
		d Account number						
		72 Amount of line 70 you want applied to your 2009 estimated tax	▶ 72		1			
Am	ount	73 Amount you owe. Subtract line 69 from line 57. For details on h	now to pay, see page 2	3	►	73		
You	Owe	74 Estimatéd tax penalty. Also include on line 73	· · 74				ta tha fallouin a	
Thire	l Party	Do you want to allow another person to discuss this return with the CNMI Reve	nue and Taxation (see page		J	•	te the following.	□ No
	gnee	Designee's Phone)	Persona number	l identifica	tion		
	-	name no. (Under penalties of perjury, I declare that I have examined this return and accomp			. ,	tofm		
Sig		belief, they are true, correct, and complete. Declaration of preparer (other than ta						
Her Keep a	e a copy of	Your signature	Date	Your occu	pation in	the Un	ited States	
this re	turn for							
your r	ecords.		Date			D	Darar's CCN as DTIN	
Paie	d	Preparer's signature	Date	Check if	. —	Pre	eparer's SSN or PTIN	
	- parer's			self-empl	-	<u> </u>		
	Only	yours if self-employed),			IN			
	-	address, and ZIP code		I P	hone no.	(l J	

Form 1040NR-CM (2008)

Page **2**

FORTH TU40INK-CIVI (2			Page J
Schedule A	 It	temized Deductions (See pages 25, 26, and 27.)	07
State and Local	1	State income taxes	
Income Taxes	2 3	Local income taxes	
Total Gifts to CNMI Charities	4	Caution: If you made a gift and received a benefit in return, see page 25. Gifts by cash or check. If you made any gift of \$250 or	
	_	more, see page 25	
	5	Other than by cash or check. If you made any gift of \$250 or more, see page 25. You must attach Form 8283 if "the amount of your deduction" (see definition on page 26) is more than \$500 5	
	6	Carryover from prior year	
	7	Add lines 4 through 6	
Casualty and Theft Losses	8	Casualty or theft loss(es). Attach Form 4684. See page 26	
Job Expenses and Certain Miscellaneous	9	Unreimbursed employee expenses—job travel, union dues, job education, etc. You must attach Form 2106 or Form 2106-EZ if required. See page 26 9	
Deductions	10	Tax preparation fees	
	11	Other expenses. See page 27 for expenses to deduct here. List type and amount	
		<u> </u>	
	12	Add lines 9 through 11	
	13	Enter the amount from Form 1040NR-CM, line 36	
	14	Multiply line 13 by 2% (.02)	
	15	Subtract line 14 from line 12. If line 14 is more than line 12, enter -0	
Other Miscellaneous Deductions	16	Other—see page 27 for expenses to deduct here. List type and amount	
		16	
Total Itemized Deductions	17	Is Form 1040NR-CM, line 36, over \$159,950 (over \$79,975 if you checked filing status box 3, 4, or 5 on page 1 of Form 1040NR-CM)? No. Your deduction is not limited. Add the amounts in the far right column for lines 3 through 16. Also enter this amount on Form 1040NR-CM, line 37. Yes. Your deduction may be limited. See page 27 for the amount to 17	
		enter here and on Form 1040NR-CM, line 37.	

Form **1040NR-CM** (2008)

Tax on Income Not Effectively Connected With a CNMI Trade or Business Attach Forms 1042-S, SSA-1042S, RRB-1042S, or similar form.

Nature of income			(a) CNMI tax withheld		Enter amount of income under the appropriate rate of					ftax (see page 28)					
					(b) 10%	(c) 15%	(c) 15%		(d) 30%		(e) Other (specify)				
			_	at source			(1) 15/0		(0) 50%			%		%	
75	Dividends paid by:														
а	CNMI corporations .		75a												
b	Foreign corporations		75b												
76	Interest:														
а	Mortgage		76a												
b	Paid by foreign corpor	ations	76b												
c	Other		76c												
77	Industrial royalties (par	tents, trademarks, etc.)	77												
78	Motion picture or T.V.	copyright royalties	78												
79	Other royalties (copyrig	ghts, recording, publishing, etc.)	79												
80	Real property income a	and natural resources royalties	80												
81	Pensions and annuities	s	81												
82	Social security benefits	5	82												
83	Gains (include capital g	gain from line 91 below)	83												
84	Other (specify) 🕨														
			84												
85	Total NMTIT withheld	d at source. Add column (a) of													
	lines 75a through 84. E	Enter the total here and on Form													
	1040NR-CM, line 65		85												
86	Add lines 75a through	84 in columns (b)–(e)			86										
87		te of tax at top of each column			87										
88		fectively connected with a CNMI trad				d columns (b)–(e)									
	1040NR, line 52		• •					• •		•	🕨	88			
		Capital Gai	ns an	d Losses Fro	m Sa	les or Exchang	es of Proper	ty	-1		1				
	ter only the capital gains	89 (a) Kind of property and description		(b) Date		(c) Date			(e) Cost or oth	her	(f) LOSS If (e) is more	2	(g) GAIN If (d) is more	þ	
	osses from property sales changes that are from	(if necessary, attach statement of descriptive details not shown below)		acquired (mo., day, yr.)		sold (mo., day, yr.)	(d) Sales pr	ice	basis		than (d), subtrac		than (e), subtrac		
sourc	es within the CNMI			((from (e)		from (d)		
	ot effectively connected a CNMI business.														
Do no	ot include a gain or loss														
	sposing of a CNMI real erty interest; report														
these	gains and losses on														
	dule D (Form 1040).														
	port property sales or anges that are effectively										,				
conn	ected with a CNMI	90 Add columns (f) and (g) of line	89.							90	1)			
	ess on Schedule D (Form), Form 4797, or both.				_										
	,,, , , , , , , , , , , , , , , , , ,	91 Capital gain. Combine column	ıs (f) an	id (g) of line 90.	Ente	r the net gain here	and on line 83	above	(if a loss, enter	-0-)	•	91			

Page **4**

A	What country issued your passport?	м	If you are claiming the benefits of a CNMI income tax treaty with a foreign country, give the following information. See
В	Were you ever a U.S. citizen? Yes 🗌 No		pages 28 and 29 for additional information.
с	Give the purpose of your visit to the CNMI		 Country Type and amount of effectively connected income exempt
			from tax. Also, identify the applicable tax treaty article. Do not enter exempt income on lines 8, 9a, 10a, 11-15, 16b, or 17b-21 of Form 1040NR-CM.
D	Current nonimmigrant status and date of change (see page 28)		For 2008 (also, include this exempt income on line 22 of Form 1040NR-CM) ►
E	Date you entered the CNMI (see page 28) ▶		For 2007 ►
F	Did you give up your permanent residence as an immigrant in the United		
G	States this year? Yes No Dates you entered and left the CNMI during the year. Residents of Canada or Mexico entering and leaving the CNMI at frequent intervals, give name of country		 Type and amount of income not effectively connected that is exempt from or subject to a reduced rate of tax. Also, identify the applicable tax treaty article. For 2008
	only. ►		
н	Give number of days (including vacation and nonworkdays) you were present in the CNMI during:		For 2007 ►
	2006 , 2007 , and 2008 .		• Were you subject to tax in that country on any of the income you claim is entitled
I	If you are a resident of Canada, Mexico, or the Republic of Korea (South Korea), or a U.S. national, did your spouse contribute to the support of any child claimed on Form 1040NR-CM, line 7c? Yes No If "Yes," enter amount \blacktriangleright \$ If you were a resident of the Republic of Korea (South Korea)	N	 to the treaty benefits? Yes No Did you have a permanent establishment or fixed base (as defined by the tax treaty) in the United States at any time during 2008? Yes No If you file this return to report community income, give your spouse's name, address, and identifying number.
	for any part of the tax year, enter in the space below your total foreign source income not effectively connected with a CNMI trade or business. This information is needed so that the exemption for your spouse and dependents residing in the CNMI (if applicable) may be allowed in accordance with Article 4 of the income tax treaty between the United States and the Republic of Korea (South Korea).	o	If you file this return for a trust, does the trust have a CNMI business?
	Total foreign source income not effectively connected with a CNMI trade or business ► \$	P	Is this an "expatriation return" (see page 29)?
ſ	Did you file a CNMI income tax return for any year before 2008? Yes No If "Yes," give the latest year and form number	Q	If "Yes," you must attach an annual information statement. During 2008, did you apply for, or take other affirmative steps to apply for, lawful
к	To which Revenue and Taxation office did you pay any amounts claimed on Form 1040NR-CM, lines 59, 62, and 64?		permanent resident status in the United States or have an application pending to adjust your status to that of a lawful permanent resident of the United States? Yes No
L	Have you excluded any gross income other		If "Yes," explain
	than foreign source income not effectively		
	connected with a CNMI trade or business? Yes No	D	Check this box if you have received
	If "Yes," show the amount, nature, and source of the excluded income. Also, give the reason it was excluded. (Do not include amounts shown in item M.)	R	compensation income of \$250,000 or more and you are using an alternative basis to determine the source of this
			compensation income (see page 29)

L



DIVISION OF REVENUE AND TAXATION COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS

ANNUAL WAGE AND SALARY AND EARNINGS TAX RETURN

(See supplemental instructions)



(For Form **1040NR-CM**)

		Your first name and initial	Last Name		Social securi	ty number
Name	Please	If a joint return, spouse's first name and initial	Last Name		Spouse's soc	cial security number
and	type or					
	print in	Home Address (number and street).		Apt. No.		DRTANT !
	ink	City, town or post office, state, and ZIP code.				SN(s) above

PART A WAGE AND SALARY TAX COMPUTATION

1	CNMI wages and salaries from Form(s) W-2 and W-2CM	_
2	Other CNMI wages and salaries not included in line 1	_
3	Total CNMI wages and salaries. Add lines 1 and 2	_
4	Amount on line 3 not subject to the wage and salary tax (attach explanation)	_
5	CNMI wages and salaries. Subtract line 4 from line 3	_
6	Annual wage and salary tax	_
7	Education tax credit (attach Schedule ETC)	
8	Wage and salary tax after credit. Subtract line 7 from line 6	
9	Wage and salary tax withheld and/or paid (Form W-2CM) .	
10	Total wage and salary tax due/(overpaid). Subtract line 10 from line 9. If zero or less, place a bracket around the figure) Image: the figure is t	

PART B EARNINGS TAX COMPUTATION

Sain from the sale of personal property
Dne half of the gain from the sale of real property
Dne half of the net income from leasing of real property
nterest, dividends, rents, royalties
ross winnings from any gaming, lottery, raffle, etc
ess amount excludable (attach Form(s) W-2G)
alance. Subtract line 5b from line 5a
ther income subject to the NMTIT, unless excludable under the earnings tax
tal income subject to the earnings tax. Add lines 1 thru 4, 5c, and 6
nnual earnings tax
lucation tax credit (attach Schedule ETC)
arnings tax after credit. Subtract line 9 from line 8

PART C TOTAL CHAPTER 2 TAX DUE/(OVERPAYMENT)

Total Wage and Salary and Earnings taxes due/(overpayment). Add lines 10 of Part A and Part B.

COMPLETE FORM OS-3405A -COMPUTATION OF NON-REFUNDABLE CREDIT AND APPLICATION FOR REBATE ON CNMI SOURCE TAX BEFORE COMPLETING PART D

PART D CHAPTER 7 TAX AND REBATE OFFSET

1	Chapter 7 tax underpayment after non-refundable credit. Enter amount from Form OS-3405A, line 12, part B 1			
2	Chapter 7 tax overpayment after non-refundable credit. Enter amount from Form OS-3405A, line 11, part B 2	()	
3	Rebate offset amount. Enter amount from Form OS-3405A, line 13, part B	()	
4	Chapter 7 liability or (overpayment) after rebate offset amount. Add lines 1 through 3			
5	Tax on overpayment of credits			
6	Estimated tax penalty			
7	Total Chapter 7 liability or (overpayment). Add lines 4, 5 and 6			

PAR1	T E COMBINED DUE OR (OVERPAYMENT)					
1	Amount due or (overpaid), Chapter 2 and Chapter 7. Add the amount of amount is an overpayment, skip lines 2 through 4					
2	CHAPTER 2 : (b) Failure to File .			2b		
	(a) Enter amount underpaid (c) Failure to Pay .			2c		
	(d) Interest Charge .			2d		
3	CHAPTER 7 : (b) Failure to File .			3b		
	(a) Enter amount underpaid (c) Failure to Pay .			3с		
	(d) Interest Charge .			3d		_
4	Total penalty and interest charges (add lines 2b, 2c, 2d, 3b, 3c, and 3c	1).			4	
5	Total amount due/(overpaid), Chapter 2 and Chapter 7. Add lines 1 and	d 4 o	f this	part, and lines 5	and 6	
	of part D				5	
6	If line 5 is an overpayment, enter amount you want credited to your 20)09 E	STI	MATED TAX .	6	
7	Amount from line 5 you want credited to your 2009 BUSINESS GROSS F	REVE	NUE	ТАХ	7	 <u> </u>
8	Net overpayment	•	•		8 (· ·

PART F BUSINESS GROSS REVENUE TAX CREDIT ALLOCATION

Enter the TIN and amount you want credited from line 7, Part E above. The total credit allocation shall be equal to the amount on line 7, Part E above.

TIN	TAX TYPE	AMOUNT	TIN	TAX TYPE	AMOUNT
	3105G			3105G	
	3105AF			3105AF	
	3105MW			3105MW	

PART G ADDITIONAL CHILD TAX CREDIT COMPUTATION **Special Notice**

This Part is provided to enable the Division of Revenue and Taxation to process your claim of the Additional Child Tax Credit (ACTC). Please note that the ACTC is being paid by the U.S. Treasury, and the Division of Revenue and Taxation is only facilitating your ACTC claim as agreed upon between the CNMI Department of Finance and the U.S. Treasury. By applying for the ACTC Refund and allowing the refund to be processed by the Division of Revenue and Taxation, you are giving the Division of Revenue and Taxation authorization to release tax information to the Internal Revenue Service (IRS). See supplemental instructions for Part G, line 2 regarding rebate offset amount.

	1	Additional Child Tax Credit. Enter the an	nount from line 13 of Fo	orm 881	.2. (Attac	h Form 8812)	1		
	2	Enter the amount underpaid from line 5, Pa	rt E above					2		
	3	Additional Child Tax Credit refund. Sub	tract line 2 from line 1,	but no	t less tha	n zero .		. 3		
	4	Amount you still owe on this return after of than zero				ne 2, but no	t less	4		
Thire	d	Do you want to allow another person to discuss this	s return with the Division o	f Revenu	e and Taxa	ation?	Yes.	Complete the fol	llowing. 🗌 No	
Part		Designee's name	Phone no.			Personal Iden Number (PIN		ion 📔		
		Under penalties of perjury, I declare that I have exami they are true, correct, and complete. Declaration of								
Sigı	n He	re Your signature	Date		You	ur occupation		Daytime phon	ne number	
Keej								()		
copy for Youi Reco		Spouse's signature. If a joint return, BOTH n	ıust sign		Date		Spo	use's occupatio	n	
		Preparer's		Date		Check if		Preparer's S	SN or PTIN	
Paic	-	Signature				self-employ	ed			
	pare Onl						EIN			
		and ZIP code					Pho	ne no. ()	

		FOR OFFICIA	L USE ONLY		
DATE FILED *	DATE PAID	AMOUNT PAID	RECEIPT NO.	VERIFIED BY	POSTED BY



DIVISION OF REVENUE AND TAXATION COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS

COMPUTATION OF NON-REFUNDABLE CREDIT AND APPLICATION FOR REBATE ON CNMI SOURCE INCOME TAX



Form	OS-3405A (For Form 1040NR-CM) Se	e instructions			2008
	Your first name and initial	Last name		Social security	number
Please Type or	If a joint return, spouse's first name and initial	Last name		Spouse's social	security number
Print in Ink	Home address (number and street)		Apt. No.		RTANT !
	City, town or post office, state, and ZIP code			You mu your St above	ust enter SN(s)

PART A - Non-refundable Credits

1	Wage and salary tax	•	•	•	•		•		•	1	
2	Earnings tax									2	

3 Business gross revenue tax

	Name		Ta	x IC) No	э.						
a)								a)				
b)								b)				
c)								c)				
4 U	ser fees paid							. 4				
5 F	ees and taxes imposed under 4CMC §2202(h)							. 5				
6 T	otal non-refundable credits (add lines 1 throug	h 5)									6	

PART B - Rebate Computation

Sign

7	Total NMTIT	7	
	Total NMTIT payments made	8	
	Total non-refundable credits (enter amount from line 6, Part A)		
10	Rebate Base (adjusted CNMI source tax). Subtract line 9 from line 7. If zero or less, enter -0)	10	
11	. NMTIT overpayment (If line 8 is greater than line 10, subtract line 10 from line 8, otherwise, enter -0-) .	11	
12	NMTIT underpayment (If line 10 is greater than line 8, subtract line 8 from line 10, otherwise, enter -0-)	12	
13	Rebate offset amount. Calculate this amount as determined by the rebate base (line 10) using the rebate table provided in Part B of the instructions	13	

Under penalties of perjury, I declare that I have examined this return, and to the best of my knowledge and belief, it is true, correct, and accurately lists all amounts and sources of income I received during the tax year. Declaration of preparer (other than taxpayer) is based on all information of which the preparer has any knowledge.

Here Keep a copy for Your Records	Your signature Spouse's signature. If a joint return, BOTH must sign.	Date	Your occupation Spouse's occupation	Daytime phone number ()
Paid Preparer	Preparer's signature	Date	Check if Check if Self-employed	Preparer's SSN or PTIN
Use only	Firm's name (ar yours if			EIN Phone no. ()

PART A NON-REFUNDABLE CREDITS

- 1. Enter the wage and salary tax as shown on line 8, Part A of the Annual Wage and Salary and Earnings Tax Return.
- 2. Enter the earnings tax as shown on line 10 of Part B of the Annual Wage and Salary and Earnings Tax Return.
- Enter the amount of business gross revenue tax paid or accrued during the taxable year under 4 CMC Chapter. For partners enter your share of BGRT in the partnership as applicable. If you have more than one business name, list each one separately with its respective TIN and amount of BGRT. This is the tax under 4 CMC §1301.
- 4. Enter the amount of user fees paid during the taxable year under 4 CMC §1421.
- 5. Enter the amount of fees and taxes paid or accrued during the taxable year under 4 CMC §2202(h), in lieu of the tax under 4 CMC §1301.
- 6. Add all amounts shown in lines 1 through 5. This is your total non-refundable credit.

PART B REBATE COMPUTATION

- 7. Enter the tax as shown on line 58 of Form 1040NR-CM.
- 8. Enter the total payments made for the taxable year as shown on line 70 of Form 1040NR-CM.
- 9. Enter the total non-refundable credits from line 6, part A.
- 10. Subtract line 9 from line 6. If zero or less, enter zero.
- 11. If line 8 is greater than line 10, subtract line 10 from line 8, otherwise, enter zero.
- 12. If line 10 is greater than line 8, subtract line 8 from line 10, otherwise, enter zero.
- 13. Calculate the rebate offset amount as determined by the rebate base (line 10) using the rebate table below. Enter the result here.

	REBATE TABLE	
IF REBATE BASE (line 10) 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 X 70% + 18,000
Over \$100,000	\$74,000 plus 50% of the rebate base over \$100,000	Rebate base - 100,000 X 50% + 74,000

If filing by mail, please send to:

DIVISION OF REVENUE AND TAXATION POST OFFICE BOX 5234 CHRB SAIPAN, MP 96950

DEADLINE: APRIL 15, 2009