VOID	a Employ	ee's social security num	lber	For Revenue and Taxation use only				
b Employer identification number (EIN)				1 Wages, tips, othe	er compensation	2 Income tax withheld (NMTIT chapter 7)		
c Employer's name, address, and ZIP code				3 Social security w	ages	4 Social security tax withheld		
				5 Medicare wages and tips		6 Medicare tax withheld		
				7 Social security tips		8 Allocated tips		
d Control number (Serial number)				9 Advance EIC payment		10 Dependent care benefits		
e Employee's first name and initial Last name Suff.				11 Nonqualified plans		12a See instructions for box 12. Code \$		
f Employee's address and ZIP code				13 Statutory Retirement Third-party employee plan sick pay Image: Comparison of the party Image: Comparison of the party Image: Comparison of the party Image: Comparison of the party Image: Comparison of the party Image: Comparison of the party Image: Comparison of the party Image: Comparison of the party Image: Comparison of the party Image: Comparison of the party Image: Comparison of the party Image: Comparison of the party Image: Comparison of the party Image: Comparison of the party Image: Comparison of the party Image: Comparison of the party Image: Comparison of the party Image: Comparison of the party Image: Comparison of the party Image: Comparison of the party Image: Comparison of the party Image: Comparison of the party Image: Comparison of the party Image: Comparison of the party Image: Comparison of the party Image: Comparison of the party Image: Comparison of the party Image: Comparison of the party Image: Comparison of the party Image: Comparison of the party Image: Comparison of the party Image: Comparison of the party Image: Comparison of the party Image:		12b ^{Code} \$		
				14a Other	14b	12c Code	\$	
						12d Code	\$	
15 CNMI Tax ID number	16 Wages and salary (CNMI)	17 Wage & salary tax w (chapter 2)	vithheld	A Location code	B Days out of the CNMI	C Citizer	nship code	
				D NAICS	E SOC	F Entry	permit no.	

Form W-2CM Wage and Tax 2009 Copy 1 For Division of Revenue and Taxation

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

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 w	lages	4 Socia	4 Social security tax withheld			
		5 Medicare wages and tips		6 Medio	6 Medicare tax withheld		
			7 Social security ti	ps	8 Alloca	ated tips	
d Control number (Serial number)		9 Advance EIC payment		10 Dependent care benefits			
e Employee's first name and initial Last name Suff.			11 Nonqualified pla	ans	12a Se Code	e instructions for box 12.	
f Employee's address and ZIP code			13 Statutory Retirementary Ret	ment Third-party sick pay	12b Code	\$	
			14a Other	14b	12c Code	\$	
					12d Code	\$	

Form W-2CM Wage and Tax 2009 Copy A For Social Security Administration

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

VOID	a E	Employee's social secu	rity number	For Revenue and Taxation use only					
b Employer identification number (EIN)				1 Wages, tips, othe	2 Income tax withheld (NMTIT chapter 7)				
c Employer's name, address, and ZIP code				3 Social security w	4 Social security tax withheld				
				5 Medicare wages	6 Medicare tax withheld				
			7 Social security ti	8 Allocated tips					
d Control number (Serial number)				9 Advance EIC payment		10 Dependent care benefits			
e Employee's first name and initial Last name Suff.				11 Nonqualified plans		12a See ^{Code}	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	12c Code	\$		
						12d Code	\$		
15 CNMI Tax ID number	16 Wages and salary (CNMI) 17 Wage & sal (chapter 2)	lary tax withheld	A Location code B Days out of the CNMI		C Citizen	ship code		
				D NAICS	E SOC	F Entry p	permit no.		

Form W-2CM Wage and Tax Statement

d Tax 2009

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

Copy 2 To be filed with employee's income tax return

VOID	a Emp	ployee's social security nu	For Revenue and Taxation use only					
b Employer identification number (EIN)				1 Wages, tips, oth	er compensation	2 Income tax withheld (NMTIT chapter 7)		
c Employer's name, address, and ZIP code				3 Social security v	vages	4 Social security tax withheld6 Medicare tax withheld		
				5 Medicare wages	and tips			
				7 Social security t	ips	8 Allocated tips		
d Control number (Serial number)				9 Advance EIC pa	yment	10 Dependent care benefits		
e Employee's first name and initial Last name Suff.				11 Nonqualified pl	ans	12a See instructions for box 12.		
f Employee's address and ZIP code				13 Statutory Retire employee plan	ement Third-party sick pay	12b Code \$		
				14a Other	14b	12c Code	\$	
						12d Code	\$	
15 CNMI Tax ID number	16 Wages and salary (CNN	17 Wage & salary tax withheld (chapter 2)		A Location code B Days out of the CNMI		C Citizenship code		
				D NAICS	E SOC	F Entry	permit no.	
Form W-2CN	Wage and Tax Statement	2009			-	Divisi	Department of Finance on of Revenue and Taxatior	

Form W-2CM Wage and Tax Statement Copy B For employee's record

Division of Revenue and Taxation Commonwealth of the Northern Mariana Islands

VOID	a	Employee's social security num	nber	For Revenue and Taxation use only				
b Employer identification number (EIN)				1 Wages, tips, oth	er compensation	2 Income tax withheld (NMTIT chapter 7)		
c Employer's name, address, and ZIP code				3 Social security w	lages	4 Social security tax withheld		
				5 Medicare wages	and tips	6 Medicare tax withheld		
				7 Social security ti	ps	8 Allocated tips		
d Control number (Serial number)				9 Advance EIC payment		10 Dependent care benefits		
e Employee's first name and initial Last name Suff.				11 Nonqualified plans		12a See 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	12c Code	\$	
						12d Code	\$	
15 CNMI Tax ID number	16 Wages and salary (CNMI) 17 Wage & salary tax w (chapter 2)	vithheld	A Location code	B Days out of the CNMI	C Citizen	iship code	
		·		D NAICS	E SOC	F Entry p	permit no.	

2009

Form **W-2CM** Wage and Tax Statement Copy C For employer's record

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