## Additional Income and Adjustment to Income

Attach to Form 1040CM

Department of Finance Division of Revenue and Taxation Commonwealth of the Northern Mariana Islands Name(s) shown on Form 1040CM

Additional B. INCOME WITHIN C. TOTAL INCOME A. INCOME WITHOUT Income 1-9b 1-9b Reserved . . . . . . . . . . . Taxable refunds, credits, or offsets of state and local 10 10 income taxes . . . . . . . . . . . 11 Alimony . . . . . . . . . . . . . 11 12 Busines income or (loss). Attach Schedule C . . 12 13 Capital gain or (loss). Attach Schedule D . . . 13 14 Other gains or (losses). Attach Schedule 4797 . . 14 15a Reserved. . . . . . . . . . . . . 15b 16a Reserved. . . . . . . . . . . . . 16b 17 Rental real estate, royalties, partnerhips, S Corporations, trust, etc. Attach Schedule E . . 17 18 Farm income or (loss) . . . . . . . . 18 19 Unemployment compensation . . . . . . 19 20a Reserved . . . . . . . . . . 20b 21a Gambling winnings Attach Form(s) W-2G . . . 21a b Other income. List type and amount 21b 22 Combine the amount in every column. If you don't have any adjustment to income, enter here and include on Form 1040CM, line 6a. Otherwise, go to 22 line 23 . . . . . . . . . . . . . . . Adjustments to Income 23 Educator expenses . . . . . . . . . . . . 23 . . . . . 24 Certain business expenses of reservist, performing arts, and fee-basis 24 government officials. Attach Form 2106 . . . . . . . . . . . 25 Health savings account deduction. Attach Form 8889 . . . . . 25 26 Moving expenses for members of the Armed Forces. Attach Form 3903 26 27 Deductible part of self-employment tax. Attach Form 1040-SS . . . . 27 28 28 Self-employed SEP, SIMPLE, and qualified plans . . . . . . . 29 Self-employed health insurance deduction . . 29 . . . . . . 30 Penalty on early withdrawal of savings . . . 30 31a Alimony paid b Recipient's SSN ▶ \_\_\_\_ 31a . 32 IRA deduction . . . . . 32 . . . 33 33 Student loan interest deduction . . . 34 Reserved . . . . . . . . . . . 34 . 35 35 Reserved . . . . . . . . . . . . . 36 Add lines 23 through 35 . . 36 . . . . . . . . . .

For Paperwork Reduction Act Notice, see your tax return instructions.

Schedule 1CM (Form 1040CM) 2018



Your social security number

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