

For the year Jan. 1–Dec. 31, 2024, or other tax year beginning _____, 2024, ending _____, 20_____

See separate instructions.

Your first name and middle initial	Last name	Your identifying number (see instructions)
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Home address (number and street). If you have a P.O. box, see instructions.	Apt. no.
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City, town, or post office. If you have a foreign address, also complete spaces below.	State	ZIP code
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Foreign country name	Foreign province/state/county	Foreign postal code
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Filing Status Check only one box.	<input type="checkbox"/> Single <input type="checkbox"/> Married filing separately (MFS) <input type="checkbox"/> Qualifying surviving spouse (QSS) <input type="checkbox"/> Estate <input type="checkbox"/> Trust If you checked the QSS box, enter the child's name if the qualifying person is a child but not your dependent: _____
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Digital Assets	At any time during 2024, did you: (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions.) <input type="checkbox"/> Yes <input type="checkbox"/> No
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Dependents (see instructions): If more than four dependents, see instructions and check here <input type="checkbox"/>	(1) First name	Last name	(2) Dependent's identifying number	(3) Relationship to you	(4) Check the box if qualifies for (see inst.): Child tax credit	Credit for other dependents
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>

Income Effectively Connected With U.S. 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 get a Form W-2CM, see instructions.	1a	Total amount from Form(s) W-2CM, box 1 (see instructions)		1a		
	b	Household employee wages not reported on Form(s) W-2CM		1b		
	c	Tip income not reported on line 1a (see instructions)		1c		
	d	Medicaid waiver payments not reported on Form(s) W-2CM (see instructions)		1d		
	e	Taxable dependent care benefits from Form 2441, line 26		1e		
	f	Employer-provided adoption benefits from Form 8839, line 29		1f		
	g	Wages from Form 8919, line 6		1g		
	h	Other earned income (see instructions)		1h		
	i	Reserved for future use	1i			
	j	Reserved for future use		1j		
	k	Total income exempt by a treaty from Schedule OI (Form 1040-NR), item L, line 1(e)	1k			
	z	Add lines 1a through 1h		1z		
	2a	Tax-exempt interest	2a		2b	Taxable interest
	3a	Qualified dividends	3a		3b	Ordinary dividends
	4a	IRA distributions	4a		4b	Taxable amount
5a	Pensions and annuities	5a		5b	Taxable amount	
6	Reserved for future use		6			
7	Capital gain or (loss). Attach Schedule D (Form 1040) if required. If not required, check here <input type="checkbox"/>		7			
8	Additional income from Schedule 1CM (Form 1040CM), line 10, column C		8			
9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and 8. This is your total effectively connected income		9			
10	Adjustments to income from Schedule 1CM (Form 1040CM). These are your total adjustments to income		10			
11	Subtract line 10 from line 9. This is your adjusted gross income		11			
12	Itemized deductions (from Schedule A (Form 1040NR-CM)) or, for certain residents of India, standard deduction (see instructions)		12			
13a	Qualified business income deduction from Form 8995 or Form 8995-A	13a				
b	Exemptions for estates and trusts only (see instructions)	13b				
c	Add lines 13a and 13b		13c			
14	Add lines 12 and 13c		14			
15	Subtract line 14 from line 11. If zero or less, enter -0-. This is your taxable income		15			

Tax and Credits	16	Tax (see instructions). Check if any from Form(s): 1 <input type="checkbox"/> 8814 2 <input type="checkbox"/> 4972 3 <input type="checkbox"/>	16	
	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 dependents from Schedule 8812 (Form 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 zero or less, enter -0-	22	
	23a	Tax on income not effectively connected with a U.S. trade or business from Schedule NEC (Form 1040-NR), line 15	23a	
	b	Other taxes, including self-employment tax, from Schedule 2 (Form 1040), line 21	23b	
	c	Transportation tax (see instructions)	23c	
	d	Add lines 23a through 23c	23d	
	24	Add lines 22 and 23d. This is your total tax	24	
Payments	25	Federal income tax withheld from:		
	a	Form(s) W-2	25a	
	b	Form(s) 1099	25b	
	c	Other forms (see instructions)	25c	
	d	Add lines 25a through 25c	25d	
	e	Form(s) 8805	25e	
	f	Form(s) 8288-A	25f	
	g	Form(s) 1042-S	25g	
	h	NMTIT withheld from forms W-2CM and 1099 (within CNMI)	25h	
	26	2024 estimated tax payments and amount applied from 2023 return	26	
	27	Reserved for future use	27	
	28	Additional child tax credit from Schedule 8812 (Form 1040)	28	
	29	Credit for amount paid with Form 1040-C	29	
30	Reserved for future use	30		
31	Amount from Schedule 3 (Form 1040), line 15	31		
	32	Add lines 28, 29, and 31. These are your total other payments and refundable credits	32	
	33	Add lines 25d, 25e, 25f, 25g, 25h, 26, and 32. These are your total payments	33	
	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid . See supplemental instructions	34	
	35	Subtract line 33 from line 24. This is the amount you owe See Part A on page 8.	35	

Third Party Designee

Do you want to allow another person to discuss this return with the Division of Revenue and Taxation? See instructions ☐ **Yes**. Complete below. ☐ **No**

Designee's name	Phone no.	Personal identification number (PIN)
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Sign Here

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your signature	Date	Your occupation
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Phone no.	Email address
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Paid Preparer Use Only

Preparer's name	Preparer's signature	Date	PTIN	Check if: <input type="checkbox"/> Self-employed
Firm's name	Phone no.			
Firm's address	Firm's EIN			

SCHEDULE A
(Form 1040NR-CM)

Department of Finance
Division of Revenue and Taxation

Name shown on Form 1040NR-CM

Itemized Deductions

Attach to Form 1040NR-CM.

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

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

2024

Attachment
Sequence No. 7A

Your identifying number

Taxes You Paid
1a State and local income taxes
1b Enter the smaller of line 1a or \$10,000 (\$5,000 if married filing separately)

Gifts to U.S. Charities
2 Gifts by cash or check. If you made any gift of \$250 or more, see instructions
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
4 Carryover from prior year
5 Add lines 2 through 4

Casualty and Theft Losses
6 Casualty and theft loss(es) from a federally declared disaster (other than net qualified disaster losses). Attach Form 4684 and enter the amount from line 18 of that form. See instructions

Other Itemized Deductions
7 Other—from list in instructions. List type and amount:

Total Itemized Deductions
8 Add the amounts in the far right column for lines 1b through 7. Also, enter this amount on Form 1040-NR, line 12

Enter **amount of income** under the appropriate rate of tax. See instructions.

Nature of Income		(a) 10%	(b) 15%	(c) 30%	(d) Other (specify)	
					%	%
1	Dividends and dividend equivalents:					
a	Dividends paid by CNMI corporations	1a				
b	Dividends paid by foreign corporations	1b				
c	Dividend equivalent payments received with respect to section 871(m) transactions	1c				
2	Interest:					
a	Mortgage	2a				
b	Paid by foreign corporations	2b				
c	Other	2c				
3	Industrial royalties (patents, trademarks, etc.)	3				
4	Motion picture or TV copyright royalties	4				
5	Other royalties (copyrights, recording, publishing, etc.)	5				
6	Real property income and natural resources royalties	6				
7	Pensions and annuities	7				
8	Social security benefits	8				
9	Capital gain from line 18 below	9				
10	Gambling—Residents of Canada only. Enter net income in column (c). If zero or less, enter -0-.					
a	Winnings _____					
b	Losses _____	10c				
11	Gambling—Residents of countries other than Canada. Note: Enter winnings only. Losses aren't allowed	11				
12	Other (specify): _____					
		12				
13	Add lines 1a through 12 in columns (a) through (d)	13				
14	Multiply line 13 by rate of tax at top of each column	14				
15	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

Capital Gains and Losses From Sales or Exchanges of Property									
Enter only the capital gains and losses from property sales or exchanges that are from sources 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 on Schedule D (Form 1040), Form 4797, or both.	16	(a) Kind of property and description (if necessary, attach statement of descriptive details not shown below)	(b) Date acquired mm/dd/yyyy	(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).	
	17 Add columns (f) and (g) of line 16						17	()	
	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-							18	

SCHEDULE OI
(Form 1040NR-CM)

Department of Finance
Division of Revenue and Taxation

Name shown on Form 1040NR-CM

Other Information

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

A Of what country or countries were you a citizen or national during the tax year? _____

B In what country did you claim residence for tax purposes during the tax year? _____

C Have you ever applied to be a green card holder (lawful permanent resident) of the United States? ☐ Yes ☐ No

D Were you ever:

1. A U.S. citizen? ☐ Yes ☐ No

2. A green card holder (lawful permanent resident) of the United States? ☐ Yes ☐ No

If you answer "Yes" to (1) or (2), see Pub. 519, chapter 4, for expatriation rules that apply to you.

E 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 (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 2024. See instructions.
Note: If you're a resident of Canada or Mexico **AND** commute to work in the United States at frequent intervals, **check the box for Canada or Mexico** and skip to item H ☐ Canada ☐ Mexico

Date entered United States mm/dd/yy	Date departed United States mm/dd/yy	Date entered United States mm/dd/yy	Date departed United States mm/dd/yy

H Give number of days (including vacation, nonworkdays, and partial days) you were present in the CNMI during:
2022 _____, 2023 _____, and 2024 _____.

I Did you file a CNMI income tax return for any prior year? ☐ Yes ☐ No

If "Yes," give the latest year and form number you filed: _____

J Are you filing a return for a trust? ☐ Yes ☐ No

If "Yes," did the trust have a CNMI or foreign owner under the grantor trust rules, make a distribution or loan to a CNMI person, or receive a contribution from a CNMI person? ☐ Yes ☐ No

K Did you receive total compensation of \$250,000 or more during the tax year? ☐ Yes ☐ No

If "Yes," did you use an alternative method to determine the source of this compensation? ☐ Yes ☐ 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.

(a) Country	(b) Tax treaty article	(c) Number of months claimed in prior tax years	(d) Amount of exempt income in current tax year

(e) Total. Enter this amount on Form 1040NR-CM, line 1k. Do not enter it anywhere else on line 1

2. Were you subject to tax in a foreign country on any of the income shown in 1(d) above? ☐ Yes ☐ No

3. Are you claiming treaty benefits pursuant to a Competent Authority determination? ☐ Yes ☐ No

If "Yes," attach a copy of the Competent Authority determination letter to your return.

M 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 with a CNMI trade or business under section 871(d). See instructions ☐

2. You have made an election in a previous year that has not been revoked, to treat income from real property located in the United States as effectively connected with a CNMI trade or business under section 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 Islands

(Please type or print in ink)

2024

Your first name and initial	Last name	Your social security number
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Part A Annual Wage and Salary Tax Computation

1	CNMI wages and salaries from Form(s) W-2CM	1	
2	Other CNMI wages and salaries not included in line 1	2	
3	Total CNMI wages and salaries (add lines 1 and 2)	3	
4	Amount on line 3 not subject to the wage and salary tax (attach Schedule WSD)	4	
5	CNMI wages and salaries (subtract line 4 from line 3)	5	
6	Annual wage and salary tax. Multiply the amount on line 5 above by the tax rate from the tax table below. Enter the result here	6	

Part B Earnings Tax Computation

1	Gain from the sale of personal property	1		Attach Form W-2CM here. Also attach Forms W-2G, W-2GCM, and 1099-R if tax was withheld
2	One half of the gain from the sale of real property	2		
3	One half of the net income from leasing of real property	3		
4	Interest, dividends, rents, royalties	4		
5a	Gross winnings from any gaming, lottery, raffle, etc.	5a		
5b	Less amount excludable (attach Form(s) W-2G and/or W-2GCM).	5b		
5c	Balance (subtract line 5b from line 5a)	5c		
6	Other income subject to the NMTIT, unless excludable under the earnings tax	6		
7	Total income subject to the earnings tax (add lines 1 through 4, line 5c, and 6)	7		
8	Annual earnings tax. Multiply the amount on line 7 above by the tax rate from the tax table below. Enter the result here	8		

Part C Combined Wage and Salary and Earnings Tax Due or (Overpaid)

1	Wage and salary tax and earnings tax	1	
2	Education tax credit (attach Schedule ETC)	2	
3	Tax after education tax credit. Subtract line 2 from line 1. If line 2 is greater, enter -0-	3	
4a	Enter total wage and salary tax and earnings tax withheld and amount paid in 2024	4a	
b	Enter the total chapter 2 tax withheld and paid in 2024 from Form(s) 1823, line H	4b	
c	Enter the total estimated chapter 2 tax withheld and paid in 2024 from Form(s) 500-ES, line G2.	4c	
d	Add lines 4a 4b, 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	

Table

Wage and Salary and Earnings Tax

	From	To	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%

**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)

2024

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 amount from line 3, Part C of Form NMI-A **1**

2 Business gross revenue tax

Name	Tax ID No.
a	
b	
c	

a	
b	
c	
3	
4	

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 Rebate Computation

6 Total NMTIT. Enter amount from line 24 of Form 1040NR-CM **6**

7 Total NMTIT payments made. Amount from line 33 of Form 1040NR-CM **7**

8 Total nonrefundable credits. Enter amount from line 5 **8**

9 Rebate base. Subtract line 8 from line 6. If zero or less, enter -0- **9**

10 NMTIT overpayment. Subtract line 9 from line 7. If zero or less, enter -0- **10**

11 NMTIT underpayment. Subtract line 7 from line 9. If zero or less, enter -0- **11**

12 Rebate offset amount. Use the Rebate Table below to calculate this amount based on line 9 **12**

13 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 **13**

14 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**

15 Enter the amount from line 28 of Form 1040NR-CM **15**

16 NMTIT overpayment. If line 13 is greater than line 15, subtract line 15 from line 13. Otherwise, enter zero **16**

17 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 **17**

18 Subtract line 10 from line 15 of Schedule 3 **18**

19 Tax on overpayment of credit. If line 18 is greater 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 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 ☐ if Form 2210 is attached **23**

24 Total NMTIT underpayment. If line 21 is -0-, add lines 22 and 23. If line 21 is greater than -0-, subtract line 21 from line 23. If -0- or less, enter -0- **24**

25 Total NMTIT overpayment. If line 21 is -0- or less, enter -0-. Otherwise, subtract line 23 from line 21. If the result is less than -0-, enter -0- **25**

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

Summary of Taxes Due or Overpayment

Part A Combined Due or Overpayment

1a

Total wage and salary and earnings tax due. Enter amount from line 5a, Part C of Form NMI-A

1a

b

Total wage and salary and earnings tax overpaid. Enter amount from line 5b, Part C of Form NMI-A

1b

()

2a

NMTIT amount due. Enter amount from line 24 os Schedule OS-3405A

2a

b

NMTIT amount overpayment. Enter amount from line 25 of Schedule OS-3405A

2b

()

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 -0-, skip lines 4 and 5

3

4

Amount of line 3 (overpayment) you want applied to your **2025 estimated tax**

4

5

Amount available for refund. Add line 3 and line 4

5

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

1

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.

2

3

ACTC refund. Subtract line 2 from line 1

3

4

Balance after offset of ACTC. Subtract line 2 from line 3, Part A

4

Part C Balance Due

1

Enter amount from line 4, Part B above. PAY THIS AMOUNT

1

Part D Direct Deposit

If you want your refund deposited directly to your bank, please provide your checking or savings account information below. To ensure the accuracy of your account number, please attach a copy of a void check.



Your bank account must be active for direct deposit to be processed.

1a

Account Type

☐ Savings

☐ Checking

1b

Routing number ▶

1c

Account number ▶

Third Party Designee

Do you want to allow another person to discuss this return with the Division of Revenue and Taxation? See instructions

☐ Yes. Complete below.

☐ No

Designee's name

Phone no.

Personal identification number (PIN)

Sign Here

Under penalties of perjury, i declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your signature

Date

Your occupation

Paid Preparer Use Only

Preparer's name

Preparer's signature

Date

PTIN

Check if:

☐ self-employed

Firm's name

Phone no.

Firm's address

Firm's EIN

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 and 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.



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.

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 9-digit 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.