Attention:

This is a fillable and machine readable form.

You must turn Off or set your page scaling option to None before printing. This would allow exact dimension as with the original in order to be scannable.

VOID ☐	**a** Employee's social security number	For Revenue and Taxation use only ▶	

b Employer identification number (EIN)	**1** Wages, tips, other compensation	**2** Income tax withheld (NMTIT chapter 7)
c Employer's name, address, and ZIP code	**3** Social security wages	**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** Code Amount (see instructions)
f Employee's address and ZIP code			**13** Statutory employee ☐ Retirement plan ☐ Third-party 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 withheld (chapter 2)	**A** Location code	**B** Days out of the CNMI	**C** Citizenship code	
			D NAICS	**E** SOC	**F** FNID	

Form **W-2CM** Wage and Tax Statement **2010**
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 ▶	
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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** Code — Amount (see instructions)
f Employee's address and ZIP code		**13** Statutory employee ☐ Retirement plan ☐ Third-party sick pay ☐	**12b** Code
		14a Other — **14b**	**12c** Code
			12d Code

Form **W-2CM** Wage and Tax Statement **2010**
Copy A For Social Security Administration

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	**2** Income tax withheld (NMTIT chapter 7)

c Employer's name, address, and ZIP code	**3** Social security wages	**4** Social security tax withheld
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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 Code — Amount (see instructions)

f Employee's address and ZIP code

13 Statutory employee ☐	Retirement plan ☐	Third-party 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 withheld (chapter 2)	**A** Location code	**B** Days out of the CNMI	**C** Citizenship code
			D NAICS	**E** SOC	**F** FNID

Form **W-2CM** Wage and Tax Statement **2010**

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

**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 ▶	
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f Employee's address and ZIP code			**13** Statutory employee ☐ Retirement plan ☐ Third-party sick pay ☐	**12b** Code
			14a Other **14b**	**12c** Code
				12d Code

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			D NAICS	**E** SOC	**F** FNID	

Form **W-2CM** Wage and Tax Statement **2010**

Copy B For employee's record

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 ▶

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e Employee's first name and initial	Last name	Suff.	**11** Nonqualified plans	**12a** Code Amount (see instructions)

f Employee's address and ZIP code	**13** Statutory employee ☐ Retirement plan ☐ Third-party 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 withheld (chapter 2)	**A** Location code	**B** Days out of the CNMI	**C** Citizenship code
			D NAICS	**E** SOC	**F** FNID

Form **W-2CM** Wage and Tax Statement **2010**
Copy C For employer's record

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