

Division of Revenue and Taxation Commonwealth of the Northern Mariana Islands



ANNUAL RECONCILIATION OF TAXES WITHHELD

CY 2016 (Please type or print in ink)			FOR OFFICIAL USE UNLI - DEN		
A Employer name			C Federa	Il Employer Identification No. (FEIN)	D CNMI Employer Identification No. (TIN)
B Mailing address and ZIP code			E Person	n to contact	F Telephone no.
Totals per Quarterly Returns	1A CHAPTER 2 Tax Withheld	1B CHAPTER 7 Tax Withheld		1C Wages and Salaries	FOR OFFICIAL USE ONLY DATE FILED
(a) 1st Quarter					
(b) 2nd Quarter ▶					
(c) 3rd Quarter					
(d) 4th Quarter					
(e) Total (a thru d)					
2(a) Total per W-2CM					
(b) Difference					LATE CHARGES
3 No. of W-2CM attached to this Form ▶				4 Are you filing magnetically? Yes ☐ No ☐	