

Division of Revenue and Taxation Commonwealth of the Northern Mariana Islands



ANNUAL RECONCILIATION OF TAXES WITHHELD

| | | | FOR OFFICIAL USE ONLY - DLN | | |
|--|------------------------------|-------------------------------------|---|---------------------------------------|-------------------------------------|
| CY 2025 (Please type or print in ink) | | | | | |
| A Employer name | | | C Federa | al Employer Identification No. (FEIN) | D CNMI Tax Identification No. (TIN) |
| B Mailing address and ZIP code | | | E Perso | 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 electronically? Yes ☐ No ☐ | | |