



**DIVISION OF REVENUE AND TAXATION**  
**COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS**  
**APPLICATION FOR REBATE ON CNMI SOURCE INCOME TAX**



**FOR USE WITH FORM 1120CM**

*(Please type or print in ink) (See instructions on reverse side)*

**2004**

|                 |                             |                |
|-----------------|-----------------------------|----------------|
| Corporate Name  |                             | TIN            |
| Mailing Address | Telephone number<br>(     ) | Contact person |

**PART A - NON-REFUNDABLE CREDITS**

1 Business gross revenue tax

| Name  | Tax ID No. |    |  |
|---|------------|----|--|
| a)  |            | a) |  |
| b)  |            | b) |  |
| c)  |            | c) |  |
| 2 User fees paid.....                                       |            | 2  |  |
| 3 Fees and taxes imposed under 4CMC §2202(h).....           |            | 3  |  |
| 4 Total non-refundable credits (add lines 1 through 3)..... |            | 4  |  |

**PART B - REBATE COMPUTATION**

|  |           |  |  |
|--|-----------|--|--|
| 5 Allocable percentage: a Tax without the CNMI   | 5a _____% |  |  |
| b Tax within the CNMI  | 5b _____% |  |  |
| 6 Total NMTIT on all sources.....  | 6         |  |  |
| 7 Total NMTIT payments made .....  | 7         |  |  |
| 8 Tax on sources without CNMI (multiply line 6 by the percentage as shown on line 5a).....                         | 8         |  |  |
| 9 Tax on sources within the CNMI (multiply line 6 by the percentage as shown on line 5b)....                       | 9         |  |  |
| 10 Total non-refundable credits (enter amount from line 4, part A).....  | 10        |  |  |
| 11 Adjusted CNMI source tax (subtract line 10 from line 9. If zero or less, enter -0-).....                        | 11        |  |  |
| 12 Total CNMI and NON-CNMI source tax after non-refundable credits (add lines 8 and 11).....                       | 12        |  |  |
| 13 NMTIT overpayment (subtract line 12 from line 7. If zero or less, enter -0).....                                | 13        |  |  |
| 14 Total tax underpaid (If line 12 is greater than line 7, subtract line 7 from line 12, otherwise, enter -0)..... | 14        |  |  |
| 15 Rebate base computation (Enter here and on line 4, page 2, Part A.....)   | 15        |  |  |

**PART C - Business Gross Revenue Tax Credit Allocation**

Enter the TIN and amount you want credited from line 8, Part A, page 2. The total credit allocation shall be equal to the amount on line 8, Part A, page 2.

| TIN      | 3105G | 3105AF | 3105B | 3105MW |
|----------|-------|--------|-------|--------|
|          |       |        |       |        |
| TAX TYPE |       |        |       |        |
| AMOUNT   |       |        |       |        |

|                                 |   |   |      |  |
|---------------------------------|---|---|------|--|
| <b>PLEASE SIGN HERE</b>         | Under penalties of perjury, I declare that I have examined this return, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which the preparer has any knowledge. |   |      |  |
|                                 | ➔   | Signature of officer                                | Date | Title  |
| <b>PAID PREPARER'S USE ONLY</b> | ➔   | Preparer's signature                                | Date | Check if self-employed <input type="checkbox"/> Preparer's social security no. _____ |
|                                 | ➔   | Firm's name (or yours if self-employed) and address |      | EIN _____<br>ZIP code _____  |

| <b>FOR OFFICIAL USE ONLY</b> |           |             |             |             |           |
|------------------------------|-----------|-------------|-------------|-------------|-----------|
|                              | DATE PAID | AMOUNT PAID | RECEIPT NO. | VERIFIED BY | POSTED BY |
|                              |           |             |             |             |           |

\*If received after the due date, show post mark.

# OS-3405A INSTRUCTIONS

## GENERAL

- ! Name and address. Fill in name and address.
- ! TIN. Enter taxpayer identification number.

## PART A. NON-REFUNDABLE CREDITS

1. Enter the amount of business gross revenue tax paid or accrued during the taxable year under 4CMC Chapter 3. For partners and/or shareholders of a sub-chapter S corporation, your share of BGRT should be in accordance with the percentage of profit or losses, or the equity, whichever is applicable. If you have more than one business name, list each one separately with its respective TIN and amount of BGRT. This is the tax under 4CMC §1301.
2. Enter the amount of user fees paid during the taxable year under 4CMC §1421.
3. Enter the amount of fees and taxes paid or accrued during the taxable year under 4CMC §2202(h).
4. Add all amounts shown in lines 1 through 3.

## PART B. REBATE COMPUTATION

- 5a. Enter the percentage (allocable ratio) of tax without the CNMI. This should be the percentage shown on Form 1120CM, page 1, line 28a, column A.
- 5b. Enter the percentage (allocable ratio) of tax within the CNMI. This should be the percentage shown on Form 1120CM, page 1, line 28a, column B.
6. Enter the tax from Form 1120CM, line 31.
7. Enter the total payments made for the taxable year from Form 1120CM, line 32h.
8. Multiply the amount on line 6 by the percentage of tax without the CNMI as shown on line 5a.
9. Multiply the amount on line 6 by the percentage of tax within the CNMI as shown on line 5b.
10. Enter the total non-refundable credits from line 4, part A.
11. Subtract line 10 from line 9. If zero or less, enter zero.
12. Add lines 8 and 11.
13. Subtract line 12 from line 7, but enter an amount not less than zero.
14. If line 12 is greater than line 7, subtract line 7 from line 12, otherwise, enter zero.
15. Compute the amount on line 11 as shown on the rebate table below.

| CORPORATE TAXPAYER   |   |  |
|----------------------|---|--|
| IF REBATE BASE IS:   | THE REBATE AMOUNT IS:                                 | EXAMPLE:                               |
| ! Not over \$20,000  | ! 90% of the rebate base                              | ! Rebate base X 90%                    |
| ! \$20,000-\$100,000 | ! \$18,000 plus 70% of the rebate base over \$20,000  | ! Rebate base - 20,000 X 70% + 18,000  |
| ! Over \$100,000     | ! \$74,000 plus 50% of the rebate base over \$100,000 | ! Rebate base - 100,000 X 50% + 74,000 |

## PART C. BUSINESS GROSS REVENUE TAX CREDIT ALLOCATION

Enter for each type of tax the Taxpayer Identification Number (TIN) and amount to be allocated. The total credit allocation shall be equal to the amount on line 8, Part A, page 2.

If filing by mail, please send to: **DIVISION OF REVENUE AND TAXATION**  
**POST OFFICE BOX 5234 CHR**  
**SAIPAN, MP 96950**