|            | 12<br>nent of Fin | OF-CM                    | For calendar year 2019, or ta                                 | ne Tax Return                   |      |             | , 2019,   | -            | -    | oratio      |                         |           | 20]   | J <b>J</b><br>th of the |
|------------|-------------------|--------------------------|---|---------------------------------|------|-------------|-----------|--------------|------|-------------|-------------------------|-----------|---|-------------------------|
|            | of Revenu         | e and Taxation           | Go to https://fir   | nance.gov.mp for form           | and  | d instruct  | tions     |              | _    |             |                         |           | Northern Maria                              | ana Islands             |
|            | Name              | 2                        |   |                                 |      |             |           |              | E    | mployer ide | ntificatior             | n numbei  | r   |                         |
| Type<br>or | Numb              | per, street, and room o  | or suite no. (see instructions)                               |                                 |      |             |           |              |      | Check box(e |                         |           | Initial retur                               |                         |
| Print      | Cityo             | rtown state or provi     | nce, country, and ZIP or forei                                | ian nostal code                 |      |             |           |              |      | Name or     |                         | •         | Final return                                |                         |
|            | City 0            | i town, state of provi   | nee, country, and zir of fore                                 | ign postar code                 |      |             |           |              |      | First post  | -merger re<br>M-3 attac |           | Amended r                                   |                         |
| A Co       | buntry of         | f incorporation          |   |                                 | E    | lf the      | corpor    | ation had    | d ar | n agent in  | the CNN                 | /II at an | y time during                               | the tax                 |
|            |                   |                          | se laws the income re   |                                 |      | year, e     | •         |              |      |             |                         |           | ,   |                         |
|            | -                 |                          |   |                                 |      | (1) Ty      | pe of a   | gent         |      |             |                         |           |   |                         |
| C Da       | ate incor         |                          |   |                                 |      |             |           |              |      |             |                         |           |   |                         |
|            |                   |                          | primary books and re  |                                 |      | (3) Ad      | dress     |              |      |             |                         |           |   |                         |
|            | or state          | e, and country)          |   |                                 |      |             |           |              |      |             |                         |           |   |                         |
|            |                   | -                        |   |                                 |      |             |           |              |      |             |                         |           |   |                         |
|            |                   |                          |   |                                 | F    |             |           |              |      | nter the co |                         |           |   |                         |
| (2)        | ) Princip         | al location of world     | wide business   |                                 |      | (1) Bu      | siness    | activity co  | de   | number 🕨    |                         |           |   |                         |
|            |                   |                          |   |                                 |      | (2) Bu      | siness    | activity 🕨   |      |             |                         |           |   |                         |
|            |                   |                          |   |                                 |      |             |           | or service   |      |             |                         |           |   |                         |
| (3)        | ) If the o        | corporation maint        | ains an office or place                                       | of business in the              | G    | i Check     | metho     | od of acco   | unti | ing: (1     | ) 🗌 Ca                  | sh (      | (2) 🗌 Accrua                                | d i                     |
|            | CNMI, e           | check here               |   | 🗌                               |      |             |           | (specify)    |      |             |                         |           |   |                         |
|            |                   |                          |   | putation of Tax Du              | e c  | or Over     | paym      | ent          |      |             | _                       |           |   |                         |
| 1          | Tax from          | Section I, line 11,      | page 3  |                                 | •    | • •         | 1         |              |      |             | _                       |           |   |                         |
|            |                   | Section II, Schedu       |   |                                 | •    | • •         | 2         |              |      |             | _                       |           |   |                         |
|            |                   |                          | es 6 and 10 on page 6)  |                                 | •    |             | 3         |              |      |             |                         |           |   |                         |
|            |                   | . Add lines 1 thro       | -   |                                 | •    |             | · ·       |              | •    |             | 4                       |           |   |                         |
|            |                   |                          | d to 2019   | 5a                              |      |             | -         |              |      |             |                         |           |   |                         |
|            |                   |                          | nts   | 5b                              |      |             | -         |              |      |             |                         |           |   |                         |
|            |                   |                          | or on Form 4466 .   | 5c (                            |      | )           |           |              |      |             |                         |           |   |                         |
|            |                   | e lines 5a through       |   |                                 |      |             | 5d        |              |      |             | _                       |           |   |                         |
|            | •                 |                          | 004   |                                 | •    | • •         | 5e        |              |      |             | _                       |           |   |                         |
|            |                   | •                        | stributed capital gains (at                                   |                                 | ·    | • •         | 5f        |              |      |             | _                       |           |   |                         |
| -          |                   |                          | on fuels (attach Form 413                                     |                                 |      | • •         | 5g        |              |      |             | _                       |           |   |                         |
|            |                   | ble credit from For      |   |                                 |      |             | 5h        |              |      |             | _                       |           |   |                         |
|            |                   |                          | withheld at source (ad 05 (attach Forms 8288-A                |                                 |      |             | 5i        |              |      |             |                         |           |   |                         |
|            |                   | yments. Add lines !      |   |                                 | ·    | • •         | 1         |              |      |             | 5                       | i         |   |                         |
| -          |                   |                          | instructions). Check if Fo                                    |                                 | •    |             | • •       |              | •    |             |                         |           |   |                         |
|            |                   |                          | s smaller than the total o                                    |                                 | nou  | <br>Intowed | • •       |              | •    |             |                         |           |   |                         |
|            |                   | ,                        | larger than the total of I                                    | ,                               |      |             |           |              |      |             | 88                      |           |   |                         |
|            |                   |                          | on line 8a resulting  |                                 |      | •           |           | der Char     | oter | s 3 and     |                         |           |   |                         |
|            |                   | hedule W, line 7, p      |   |                                 |      |             |           |              |      |             | 8k                      |           |   |                         |
|            |                   |                          | want Credited to 2020   | estimated tax                   |      |             |           |              | F    | Refunded    | • 9                     |           |   |                         |
|            |                   |                          | I declare that I have examination of preparer (other than tax |                                 |      |             |           |              |      |             | e best of               | my know   | vledge and belief                           | , it is true,           |
| Sign       | correc            | ci, and complete. Declar | ation of preparer (other than tax                             | (payer) is based on all informa | tion | or which p  | reparer n | las any know | leag | e.          |                         |           | e Division of Reven                         |                         |
| Here       | e   • •           |                          |   |                                 |      | )           |           |              |      |             |                         |           | n discuss this return<br>er shown below (se |                         |
|            |                   | Signature of officer     |   | Date                            |      | Title       |           |              |      |             |                         | instruct  | tions)? 🗌 Yes                               | 🗌 No                    |
| Paid       |                   | Print/Type preparer      | 's name   | Preparer's signature            |      |             |           | Da           | ate  |             | Checl                   | k 🗌 if    | PTIN  |                         |
| Prep       | arer              |                          |   |                                 |      |             |           |              |      | ,           |                         | mployed   |   |                         |
| Use (      |                   | Firm's name              |   |                                 |      |             |           |              |      | Firr        | n's EIN 🕨               |           |   |                         |
|            | Unity             | Firm's address 🕨         |   |                                 |      |             |           |              |      | Pho         | one no.                 |           |   |                         |
| For Pa     | perwork           | Reduction Act Not        | ice, see separate instruct                                    | ions.                           |      |             |           |              |      |             |                         | For       | m 1120F-CN                                  | <b>VI</b> (2019)        |

| For | m 1120F-CM (2019)  |     |    |    |  |     | Page 2 |
|-----|--|-----|----|----|--|-----|--------|
| Ac  | ditional Information (continued from page 1)   |     |    | v  | At the end of the tax year, did any individual, partnership,   | Yes | No     |
| н   | Did the corporation's method of accounting change from the preceding tax year?   | Yes | No |    | corporation, estate, or trust own, directly or indirectly, 50% or more of the corporation's voting stock? (See section 267 (c) for rules of attribution.)  |     |        |
| I   | Did the corporation's method of determining income change from the preceding tax year?   |     |    |    | If "Yes," attach a statement showing the name and identifying number. (Do not include any information already entered in item T.) Enter percentage owned ►   |     |        |
| J   | Did the corporation file a CNMI income tax return for the preceding tax year?  |     |    | w  | (1) Is the corporation taking a position on this return that a CNMI tax treaty overrules or modifies a tax law of the CNMI,  |     |        |
| К   | (1) At any time during the tax year, was the corporation engaged in a trade or business in the CNMI?   |     |    |    | thereby causing a reduction of tax?  |     |        |
|     | (2) If "Yes," is taxpayer's trade or business within the CNMI solely the result of a section 897 (FIRPTA) sale or disposition?   |     |    |    | <ul><li>result in a \$10,000 penalty (see section 6712).</li><li>(2) Is the corporation claiming treaty benefits pursuant to, or otherwise filing its return pursuant to, a Competent Authority determination or an Advance Pricing Agreement?</li></ul>   |     |        |
| L   | Did the corporation have a permanent establishment<br>in the CNMI for purposes of any applicable tax treaty<br>between the CNMI and a foreign country?   |     |    |    | If "Yes," attach a copy of the Competent Authority determination letter or Advance Pricing Agreement to your return.   |     |        |
|     | If "Yes," enter the name of the foreign country:   |     |    | x  | During the tax year, did the corporation own any entity that<br>was disregarded as an entity separate from its owner under   |     |        |
| М   | Did the corporation have any transactions with related parties?  |     |    |    | Regulations sections 301.7701-2 and 301.7701-3?<br>If "Yes," attach a statement listing the name, country under whose<br>laws the entity was organized, and EIN (if any) of each such entity.  |     |        |
|     | instructions).<br>Enter number of Forms 5472 attached ►  |     |    | Y  | <ul><li>(1) Did a partnership allocate to the corporation a distributive share of income from a directly owned</li></ul>   |     |        |
| Ν   | Is the corporation a controlled foreign corporation?<br>(See section 957(a) for definition.)   |     |    |    | partnership interest, any of which is ECI or treated as ECI by the partnership or the partner?   |     |        |
| 0   | Is the corporation a personal service corporation?<br>(See instructions for definition.)   |     | _  |    | If "Yes," attach Schedule P. See instructions.<br>(2) During the tax year, did the corporation own, directly or  |     |        |
| Р   | Enter tax-exempt interest received or accrued during the tax year (see instructions) <b>&gt;</b> \$  |     |    |    | indirectly, at least a 10% interest, in any foreign partnership?<br>If "Yes," see instructions for required attachment.  |     |        |
| Q   | At the end of the tax year, did the corporation own, directly or indirectly, 50% or more of the voting stock of a CNMI corporation? (See section 267(c) for rules of   |     |    | Z  | (1) Has the corporation engaged in any transactions the results of which are subject to the arm's-length standard under section 482 and its regulations?   |     |        |
|     | attribution.)  |     |    |    | (2) Has the corporation recognized any interbranch amounts?<br>If "Yes," attach statement (see instructions)   |     |        |
|     | EIN of such CNMI corporation; (2) percentage owned;<br>and (3) taxable income or (loss) before NOL and<br>special deductions of such CNMI corporation for the<br>tax year ending with or within your tax year. |     |    | AA | A ls the corporation required to file Schedule UTP (Form 1120), Uncertain Tax Position Statement (see instructions)?<br>If "Yes," complete and attach Schedule UTP.  |     |        |
| R   | If the corporation has an NOL for the tax year and is electing to forego the carryback period, check here (see instructions) $\ldots \ldots \ldots \ldots $  |     |    | BB | During the corporation's tax year, did the corporation make<br>any payments that would require it to file Forms 1042 and<br>1042-S under chapter 3 (sections 1441 through 1464) or<br>chapter 4 (sections 1471 through 1474) of the Code?  |     |        |
| S   | Enter the available NOL carryover from prior tax years.<br>(Do not reduce it by any deduction on line 30a, page 4.) $\triangleright$ \$  |     |    | сс | <ul> <li>Is the corporation (including the home office or any branch) a qualified derivatives dealer (QDD)?</li> <li></li></ul>  |     |        |
| Т   | Is the corporation a subsidiary in a parent-subsidiary controlled group?   |     |    | DC | (2) If "Yes," enter the QI-EIN ►<br>Does the corporation have gross receipts of at least \$500   |     |        |
|     | If "Yes," enter the parent corporation's:<br>(1) EIN ►<br>(2) Name ►   |     |    |    | million in any of the 3 preceding tax years (see sections 59A(e)(2) and (3))?         59A(e)(2) and (3))?         If "Yes," complete and attach Form 8991.   |     |        |
| U   | (1) Is the corporation a dealer under section 475?   |     |    | EE | During the tax year, did the corporation pay or accrue any interest or royalty for which a deduction is not allowed  |     |        |
|     | (2) Did the corporation mark to market any securities or commodities other than in a dealer capacity?  |     |    |    | under section 267A (see instructions)?       . <td></td> <td></td> |     |        |

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| Additional Information       (continued from page 2)       HH During the tax year, did the corporation dispose of an 163(j) for any real property trade or business or any farming business in effect during the tax year (see instructions)?       Yes       No       Yes       No         GG Does the corporation satisfy one or more of the following (see instructions)?       Image: Corporation of the following (see instructions)? | Form 1120F-CM (2019)   |   | F | Page <b>3</b> |
|--|--|---|---|---------------|
| (1) The corporation owns a pass-through entity with current, or prior year carryover, excess business interest   | Additional Information       (continued from page 2)         FF       Did the corporation have an election under section 163(j) for any real property trade or business or any farming business in effect during the tax year (see instructions)?         GG       Does the corporation satisfy one or more of the following (see instructions)?         (1)       The corporation owns a pass-through entity with | interest in a partnership that directly or indirectly engaged in a trade or business within the CNMI?         II Is the corporation attaching Form 8996 to certify as a Qualified Opportunity Fund?         If "Yes," enter amount from |   | L             |
| (2) The corporation's aggregate average annual gross<br>receipts (determined under section 448(c)) for the 3 tax<br>years preceding the current tax year do not exceed \$26<br>million, and the corporation has business interest expense.   | receipts (determined under section 448(c)) for the 3 tax<br>years preceding the current tax year do not exceed \$26  |   |   |               |
| (3) The corporation is a tax shelter and the corporatio has business interest expense.       If "Yes," to any, complete and attach Form 8990.  | business interest expense.   |   |   |               |

#### SECTION I—Income From CNMI Sources Not Effectively Connected With the Conduct of a Trade or Business in the CNMI-Do not report items properly withheld and reported on Form 1042-S. See instructions.

Report all gross transportation income subject to 4% tax on line 9. Report other column (a) income items only if not properly withheld and reported on Form 1042-S. The rate of tax on these gross income items is 30% or such lower rate specified by tax treaty. No deductions are allowed against these types of income. Enter treaty rates where applicable. If the corporation is claiming a lower treaty rate, also complete item W on page 2. If multiple treaty rates apply to a type of income (for example, subsidiary and portfolio dividends or dividends received by disregarded entities), attach a statement showing the amounts, tax rates, and withholding for each.

|    | (a)<br>Class of income (see instructions)   | (b)<br>Gross amount       | (c)<br>Rate of tax (%) | (d)<br>Amount of tax liability | (e)<br>Amount of CNMI income tax<br>paid or withheld at the source |
|----|---|---------------------------|------------------------|--------------------------------|--|
| 1  | Interest  |                           |                        |                                |  |
| 2a | Dividends (excluding payments received by QDDs in their equity derivatives dealer capacity)                               |                           |                        |                                |  |
| 2b | Dividend equivalents (excluding payments received by QDDs in their equity derivatives dealer capacity)                    |                           |                        |                                |  |
| 3  | Rents   |                           |                        |                                |  |
| 4  | Royalties   |                           |                        |                                |  |
| 5  | Annuities   |                           |                        |                                |  |
| 6  | Gains from disposal of timber, coal, or domestic iron ore with a retained economic interest (attach supporting statement) |                           |                        |                                |  |
| 7  | Gains from sale or exchange of patents, copyrights, etc.  |                           |                        |                                |  |
| 8  | Fiduciary distributions (attach supporting statement)   |                           |                        |                                |  |
| 9  | Gross transportation income (see instructions)  |                           |                        |                                |  |
| 10 | Other items of income   |                           |                        |                                |  |
| 11 |   |                           |                        |                                |  |
| 12 | Total. Enter here and include on line 5i, page 1  |                           |                        |                                |  |
| 13 | Is the corporation fiscally transparent under t<br>listed above?  | he laws of the foreign ju | risdiction with res    | pect to any item of incor      | ne 🗌 Yes 🗌 No  |

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Taxable income or (loss). Subtract line 30c from line 29

|                                      |        | II—Income Effectively Connected With the Conduct of a Trade or Business in the CN<br>uctions)   | ١M  | I    |       |             |
|--------------------------------------|--------|---|-----|------|-------|-------------|
| <u>`</u>                             | ortant | ,   | Irn | in t | he in | structions. |
| <u>p</u>                             | 1a     | Gross receipts or sales b Less returns and allowances   |     |      | ▶     | 1c          |
|                                      | 2      | Cost of goods sold (attach Form 1125-A)   |     |      |       | 2           |
|                                      | 3      | Gross profit (subtract line 2 from line 1c)   |     |      |       | 3           |
|                                      | 4      | Dividends (Schedule C, line 13)   |     |      |       | 4           |
| e                                    | 5      | Interest  |     |      |       | 5           |
| ncome                                | 6      | Gross rents   |     |      |       | 6           |
| <u>u</u>                             | 7      | Gross royalties   |     |      |       | 7           |
|                                      | 8      | Capital gain net income (attach Schedule D (Form 1120))   |     |      |       | 8           |
|                                      | 9      | Net gain or (loss) from Form 4797, Part II, line 17 (attach Form 4797)  |     |      |       | 9           |
|                                      | 10     | Other income (see instructions—attach statement)  |     |      |       | 10          |
|                                      | 11     | Total income.         Add lines 3 through 10         .          .                         |     |      | ►     | 11          |
|                                      | 12     | Compensation of officers (see instructions—attach Form 1125-E)  |     |      |       | 12          |
| s.)                                  | 13     | Salaries and wages (less employment credits)  |     | •    |       | 13          |
| ion                                  | 14     | Repairs and maintenance   |     | •    |       | 14          |
| deductions.)                         | 15     | Bad debts (for bad debts over \$500,000, attach a list of debtors and amounts) .  |     | •    |       | 15          |
| bed                                  | 16     | Rents   |     | •    |       | 16          |
| u c                                  | 17     | Taxes and licenses  |     |      |       | 17          |
| (See instructions for limitations on | 18     | Interest expense from Schedule I, line 25 (see instructions)  |     | •    |       | 18          |
| atio                                 | 19     | Charitable contributions  |     |      |       | 19          |
| nita                                 | 20     | Depreciation from Form 4562 not claimed on Form 1125-A or elsewhere on return (attach Form 4562)  |     |      |       | 20          |
| r lir                                | 21     | Depletion   |     | •    |       | 21          |
| j fo                                 | 22     | Advertising   |     | •    |       | 22          |
| ou                                   | 23     | Pension, profit-sharing, etc., plans  |     | •    |       | 23          |
| ucti                                 | 24     | Employee benefit programs   |     |      |       | 24          |
| stri                                 | 25     | Reserved for future use   |     | •    |       | 25          |
| e.                                   | 26     | Deductions allocated and apportioned to ECI from Schedule H, line 20 (see instructions)   |     | •    |       | 26          |
| (Se                                  | 27     | Other deductions (attach statement)   |     | •    |       | 27          |
| s                                    | 28     | Total deductions.         Add lines 12 through 27         . |     |      | ►     | 28          |
| ion                                  | 29     | Taxable income before NOL deduction and special deductions (subtract line 28 from line 11)  |     |      | ►     | 29          |
| uct                                  | 30     | Less: a Net operating loss deduction (see instructions)   |     |      |       |             |
| Deductions                           |        | b Special deductions (Schedule C, line 14)  |     |      |       |             |
|                                      |        | c Add lines 30a and 30b   |     |      |       | 30c         |

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|      | ON II—Income Effectively Connected With the Conduct of a Trade or Bunued)                    | usiness in the CNMI        |       |   |
|------|--|----------------------------|-------|---|
| -    | dule C Dividends and Special Deductions (see instructions)                                   |                            |       |   |
|      |  | (a) Dividends received     | (b) % | (c) Special deductions:<br>(a) $\times$ (b) |
| 1    | Dividends from less-than-20%-owned domestic corporations (other than debt-financed stock)    |                            |       |   |
| 2    | Dividends from 20%-or-more-owned domestic corporations (other than debt-financed stock)      |                            |       |   |
| 3    | Dividends on certain debt-financed stock of domestic and foreign corporations (section 246A) |                            |       |   |
| 4    | Dividends on certain preferred stock of less-than-20%-owned public utilities                 |                            |       |   |
| 5    | Dividends on certain preferred stock of 20%-or-more-owned public utilities .                 |                            |       |   |
| 6    | Dividends from less-than-20%-owned foreign corporations                                      |                            |       |   |
| 7    | Dividends from 20%-or-more-owned foreign corporations  |                            |       |   |
| 8    | Subtotal. Add lines 1 through 7. See instructions for limitation                             |                            |       |   |
| 9    | Dividends from foreign corporations not included on line 3, 6, or 7                          |                            |       |   |
| 10   | IC-DISC and former DISC dividends not included on line 1, 2, or 3 (section 246(d))           |                            |       |   |
| 11   | Other dividends  |                            |       |   |
| 12   | Deduction for dividends paid on certain preferred stock of public utilities .                |                            |       |   |
| 13   | Total dividends. Add column (a), lines 8 through 11. Enter here and on line 4, page 4        |                            |       |   |
| 14   | Total special deductions. Add column (c), lines 8 and 12. Enter here and on line 30b, page   | ge4                        | . 🕨   |   |
| Sche | dule J Tax Computation (see instructions)  |                            |       |   |
| 1    | Check if the corporation is a member of a controlled group (attach Schedule O (Form 11       | 120))                      |       |   |
| 2    | Income tax   |                            | 2     |   |
| 3    | Base erosion minimum tax (attach Form 8991)  |                            | 3     |   |
| 4    | Add lines 2 and 3  |                            | 4     |   |
| 5a   | Foreign tax credit (attach Form 1118)  | 5a                         |       |   |
| b    | General business credit (attach Form 3800)   | ōb                         |       |   |
| с    | Credit for prior year minimum tax (attach Form 8827)   | 5c                         |       |   |
| d    | Bond credits from Form 8912  | 5d                         |       |   |
| 6    | Total credits. Add lines 5a through 5d   |                            | 6     |   |
| 7    | Subtract line 6 from line 4  |                            | 7     |   |
| 8    | Other taxes. Check if from: 🗌 Form 4255 🔹 Form 8611  | orm 8697                   |       |   |
|      | Form 8866     Form 8902     C  | Other (attach statement) . | 8     |   |
| 9    | Total tax. Add lines 7 and 8. Enter here and on line 2, page 1                               |                            | 9     |   |
|      |  |                            |       | Earm 1120E-CM (2019)                        |

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Page 5

| SEC  | FION III—Branch Profits Tax and Tax on Excess Interest  |       |              |     |    |
|------|---|-------|--------------|-----|----|
| Part | I—Branch Profits Tax (see instructions)   |       |              |     |    |
| 1    | Enter the amount from Section II, line 29   | 1     |              |     |    |
| 2    | Enter total adjustments to line 1 to get effectively connected earnings and profits. (Attach required statement   |       |              |     |    |
|      | showing the nature and amount of adjustments.) (See instructions.)  | 2     |              |     |    |
| 3    | Effectively connected earnings and profits. Combine line 1 and line 2   | 3     |              |     |    |
| 4a   | Enter CNMI net equity at the end of the current tax year. (Attach required statement.)  | 4a    |              |     |    |
| b    | Enter CNMI net equity at the end of the prior tax year. (Attach required statement.)  | 4b    |              |     |    |
| c    | Increase in CNMI net equity. If line 4a is greater than or equal to line 4b, subtract line 4b from line 4a. Enter the result here and skip to line 4e   | 4c    |              |     |    |
| d    | Decrease in CNMI net equity. If line 4b is greater than line 4a, subtract line 4a from line 4b  | 4d    |              |     |    |
| e    | Non-previously taxed accumulated effectively connected earnings and profits. Enter excess, if any, of effectively connected earnings and profits for preceding tax years beginning after 1986 over any dividend equivalent amounts for those tax years  | 4e    |              |     |    |
| 5    | Dividend equivalent amount. Subtract line 4c from line 3. If zero or less, enter -0 If no amount is entered on line 4c, add the lesser of line 4d or line 4e to line 3 and enter the total here   | 5     |              |     |    |
| 6    | Branch profits tax. Multiply line 5 by 30% (0.30) (or lower treaty rate if the corporation is a qualified resident or otherwise qualifies for treaty benefits). (See instructions.) Enter here and include on line 3, page 1. Also complete item W on page 2  | 6     |              |     |    |
| Part | II—Tax on Excess Interest (see instructions for this Part and for Schedule I (Form 1120-F))   |       | I            |     |    |
| 7a   | Enter the interest from Section II, line 18   | 7a    |              |     |    |
| b    | Enter the inverse of the total amount deferred, capitalized, and disallowed from Schedule I, line 24d (i.e., if line 24d is negative, enter as a positive number; if line 24d is positive, enter as a negative number)  | 7b    |              |     |    |
| с    | Combine lines 7a and 7b (amount must equal Schedule I, line 23)   | 7c    |              |     |    |
| 8    | Branch Interest (see instructions for definition): Enter the sum of Schedule I, line 9, column (c), and Schedule I, line 22. If the interest paid by the foreign corporation's CNMI trade or business was increased because 80% or more of the foreign corporation's assets are CNMI assets, check this box | 8     |              |     |    |
| 9a   | Excess interest. Subtract line 8 from line 7c. If zero or less, enter -0-   | 9a    |              |     |    |
| b    | If the foreign corporation is a bank, enter the excess interest treated as interest on deposits (see instructions for rules for computing this amount). Otherwise, enter -0-  | 9b    |              |     |    |
| с    | Subtract line 9b from line 9a   | 9c    |              |     |    |
|      |   | 70    |              |     |    |
| 10   | Tax on excess interest. Multiply line 9c by 30% (0.30) (or lower treaty rate if the corporation is a qualified resident or otherwise qualifies for treaty benefits). (See instructions.) Enter here and include on line 3, page 1.  |       |              |     |    |
| Daut | Also complete item W on page 2  | 10    |              |     |    |
| Part | III—Additional Information  |       |              | Vee | N  |
|      |   |       |              | Yes | No |
| 11   | Is the corporation claiming a reduction in, or exemption from, the branch profits tax due to:   |       |              |     |    |
| а    | A complete termination of all CNMI trades or businesses?  | • •   |              |     |    |
| b    | The tax-free liquidation or reorganization of a foreign corporation?  |       |              |     |    |
| c    | The tax-free incorporation of a CNMI trade or business?   |       |              |     |    |
|      | If 11a or 11b applies and the transferee is a domestic corporation, attach Form 8848. If 11c applies, attach the s by Temporary Regulations section 1.884-2T(d)(5).   | tatem | ent required |     |    |

Form 1120-F (2019)

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| lote: Check if completing on CNMI basis or              | Worldwide bas         | is  |     |     |  |
|---|-----------------------|-----|-----|-----|--|
| Schedule L Balance Sheets per Books                     |                       |     |     |     |  |
|   | Beginning of tax year |     |     |     |  |
| Assets  | (a)                   | (b) | (c) | (d) |  |
| Cash  |                       |     |     |     |  |
| a Trade notes and accounts receivable                   |                       |     |     |     |  |
| b Less allowance for bad debts (                        | )                     |     | ( ) |     |  |
| Inventories   |                       |     |     |     |  |
| CNMI government obligations                             |                       |     |     |     |  |
| Tax-exempt securities (see instructions)                |                       |     |     |     |  |
| a Interbranch current assets*                           |                       |     |     |     |  |
| b Other current non-CNMI assets*                        |                       |     |     |     |  |
| c Other current CNMI assets*                            |                       |     |     |     |  |
| Loans to shareholders                                   |                       |     |     |     |  |
| Mortgage and real estate loans                          |                       |     |     |     |  |
| a Other loans and investments—non-CNMI assets*          |                       |     |     |     |  |
| b Other loans and investments—CNMI assets* .            |                       |     |     |     |  |
| a Buildings and other depreciable assets                |                       |     |     |     |  |
| b Less accumulated depreciation (                       | )                     |     | ( ) |     |  |
| a Depletable assets                                     |                       |     |     |     |  |
| b Less accumulated depletion                            | )                     |     | ( ) |     |  |
| 2 Land (net of any amortization)                        | ,                     |     |     |     |  |
| a Intangible assets (amortizable only)                  |                       |     |     |     |  |
| b Less accumulated amortization (                       | )                     |     | ( ) |     |  |
| Assets held in trust                                    | ,                     |     |     |     |  |
| Other non-current interbranch assets*                   |                       |     |     |     |  |
| a Other non-current non-CNMI assets*                    |                       |     |     |     |  |
| b Other non-current CNMI assets*                        |                       |     |     |     |  |
| 7 Total assets  |                       |     |     |     |  |
| Liabilities   |                       |     |     |     |  |
| Accounts payable  |                       |     |     |     |  |
|   |                       |     |     |     |  |
| Mortgages, notes, bonds payable in less than<br>1 year: |                       |     |     |     |  |
| a Interbranch liabilities*                              |                       |     |     |     |  |
| b Third-party liabilities*                              |                       |     |     |     |  |
| Other current liabilities*                              |                       |     |     |     |  |
| Loans from shareholders                                 |                       |     |     |     |  |
| 2 Mortgages, notes, bonds payable in 1 year or more:    |                       |     |     |     |  |
| a Interbranch liabilities*                              |                       |     |     |     |  |
| b Third-party liabilities*                              |                       |     |     |     |  |
| B Liabilities held in trust                             |                       |     |     |     |  |
| a Other interbranch liabilities*                        |                       |     |     |     |  |
| b Other third-party liabilities*                        |                       |     |     |     |  |
| Equity  |                       |     |     |     |  |
| Capital stock: a Preferred stock                        |                       |     |     |     |  |
| b Common stock  |                       |     |     |     |  |
| Additional paid-in capital                              |                       |     |     |     |  |
| Retained earnings—Appropriated*                         |                       |     |     |     |  |
| Retained earnings—Unappropriated                        |                       |     |     |     |  |
| Adjustments to shareholders' equity*                    |                       |     |     |     |  |
| Less cost of treasury stock                             |                       | ,   | )   |     |  |
| Total liabilities and shareholders' equity              |                       |     |     |     |  |

\*Attach statement—see instructions.

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|--|-----|--------|
| Schedule W Overpayment Resulting From Tax Deducted and Withheld Under Chapters 3 and 4   | _   |        |
| 1 Total Chapter 3 and 4 payments. Enter the amount from page 1, line 5i  | . 1 |        |
| 2 Enter the tax amount from page 1, line 1   |     |        |
| 3 Enter the portion of the tax amount shown on page 1, line 2 pertaining to income associated with amounts deducted and withheld under sections 1445 and 1446 (see instructions for general guidelines)         and 1446 (see instructions for general guidelines) |     |        |
| 4 Total Chapter 3 and 4 tax. Combine lines 2 and 3 · ·   | 4   |        |
| 5 Tentative overpayment resulting from tax deducted and withheld under Chapters 3 and 4.   |     |        |
| Subtract line 4 from line 1  | 5   |        |
| 6 Enter the amount from page 1, line 8a  | 6   |        |
| 7 Overpayment resulting from tax deducted and withheld under Chapters 3 and 4.   |     |        |
| Enter the smaller of line 5 or line 6. Enter the result here and on page 1, line 8b  | 7   |        |
|  |     | 1100 5 |

Form 1120-F (2019)

# Application for Non-refundable Credit and Rebate on CNMI Source Income Tax

|             |   | 019        | or Official Use Only (DLN)         |
|-------------|---|------------|------------------------------------|
| Corporate i | name  | Та         | xpayer Identification Number (TIN) |
| Mailing add | dress Telephone   | number C   | contact person                     |
| PART A      | Non-refundable Credits  | l-         |                                    |
| 1           | Business gross revenue tax  |            |                                    |
|             | Name Tax ID No.   |            | -                                  |
| а           | aa  |            | _                                  |
| b           | b   |            | _                                  |
| c           | c   |            | _                                  |
| 2           | User fees paid under 4 CMC §1422  |            | -                                  |
| 3           | Fees and taxes imposed under 4 CMC § 2202(e)  |            |                                    |
| 4<br>PART B | Total non-refundable credits. Add lines 1a, 1b, 1c, 2, and 3  |            | 4                                  |
| FARID       | Rebate Computation  |            |                                    |
| 5           | Total NMTIT on all source. Enter amount from Form 1120F-CM, page 1, line 4  | 5          | ·                                  |
| 6           | Total NMTIT payments made. Enter amount from Form 1120F-CM, page 1, line 5j   | 6          |                                    |
| 7           | Total non-refundable credits. Enter amount from line 4 above  | 7          |                                    |
| 8           | Rebate offset base. Subtract line 7 from line 5. If zero or less, enter zero  | 8          |                                    |
| 9           | NMTIT overpayment. If line 6 is greater than line 8, subtract line 8 from line 6. Otherwise, en   |            |                                    |
| 10          | NMTIT underpaid. If line 8 is greater than line 6, subtract line 6 from line 8. Otherwise enter z   |            | (                                  |
| 11          | Rebate offset amount. Calculate this amount as determined by the rebate base on line 8.   | 11         | ()                                 |
| 12          | Total NMTIT tax liability or overpayment after rebate offset amount. Add lines 9, 10, and 11. If this is an overpayment, enclose the amount in parenthesis ( )  | · · · · 12 |                                    |
| PART C      | Chapter 7 Tax Adjustment  |            | <b></b>                            |
| 13          | Tax on overpayment of credit. See supplemental instructions   | 13         |                                    |
| 14          | Penalty and interest  |            |                                    |
|             | 14a Estimated tax penalty. Check if Form 2220 is attached   | 14a        | a                                  |
|             | <b>14b</b> Penalty for late filing and/or payment, and interest charges   | 14         | »                                  |
| 15          | Total due or (overpaid). Add lines 12 through 14b. If this line shows amount due, pay this amount. If this line shows an overpayment, enclose the amount in parenthesis () and continue on lines 16 a |            |                                    |
| 16          | Amount you want credited to your 2020 estimated tax   | 16         | ·                                  |
| 17          | Net overpayment. Add line 15 and line 16  | 17         |                                    |
|             |   |            | •                                  |

| REBATE TABLE                   |  |                                      |  |  |  |  |  |  |  |
|--------------------------------|--|--------------------------------------|--|--|--|--|--|--|--|
| If rebate base<br>(line 10) is | The rebate offset amount is:                           | Example                              |  |  |  |  |  |  |  |
| Not over \$20,000              | 90% of the rebate base                                 | Rebate base x 90%                    |  |  |  |  |  |  |  |
| \$20,001 - \$100,000           | \$18,000 plus 70% of the rebate base over<br>\$20,000  | Rebate base – 20,000 x 70% + 18,000  |  |  |  |  |  |  |  |
| Over \$100,000                 | \$74,000 plus 50% of the rebate base over<br>\$100,000 | Rebate base - 100,000 x 50% + 74,000 |  |  |  |  |  |  |  |

Schedule OS-3405A

# 2019 Schedule OS-3405A Instructions for Form 1120F-CM

Type or print your business name, mailing address, state, city, ZIP, or foreign postal code.

# Part A Non-refundable Credits

- 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 Taxpayer Identification Number (TIN) and amount of BGRT. This is the tax imposed under 4CMC §1301.
- 2. Enter the amount of user fees paid during the taxable year under 4 CMC § 1422.
- Enter the amount of fees and taxes paid or accrued during the taxable year under 4CMC §2202(e), in lieu of the tax imposed under 4 CMC §1301.
- 4. Add lines 1 through 3.

# Part B Rebate Computation

- 5. Enter the tax from Form 1120F-CM, page 1, line 4.
- 6. Enter the total payments made for the taxable year from Form 1120F-CM, page 1, line 5j.
- 7. Enter the total non-refundable credits from Part A, line 4 above.

- 8. Rebate offset base. Subtract line 7 from line 5. If line 7 is greater, enter zero.
- 9. NMTIT overpayment. If line 6 is greater than line 8, subtract line 8 from line 6. Otherwise, enter zero.
- 10. NMTIT underpaid. If line 8 is greater than line 6, subtract line 6 from line 8. Otherwise, enter zero.
- 11. Rebate amount. Compute the rebate base amount on line 8 as shown on the rebate table below.
- This is your total NMTIT tax liability or overpayment after rebate offset. Add lines 9, 10, and 11. If this is an overpayment, enclose the amount in parenthesis ().

## Part C Chapter 7 Tax Adjustment

- 13. Tax on overpayment of credits. Enter the lesser of line 9 (ignore parenthesis) of Part B, or the total of lines 5g and 5h as shown on Form 1120F-CM, page 1. If zero or less, enter zero.
- 14. **a.** Enter the estimated tax penalty. If Form 2220 is attached, checkmark the box provided.

**b.** Enter the total amount of late charges for failure to file on time, failure to pay on time, and interest.

- 15. Total due or (overpaid). Add lines 12 through 14b.
- 16. Enter the amount you want credited to your 2020 estimated tax.
- 17. Net overpayment. Add line 16 and line 17.

|                                       | REBATE TABLE   |   |  |  |  |  |  |  |  |
|---------------------------------------|--|---|--|--|--|--|--|--|--|
| If rebate offset<br>base (line 8) is: | The rebate offset amount is:                               | Example                                     |  |  |  |  |  |  |  |
| Not over \$20,000                     | 90% of the rebate offset base                              | Rebate offset base x 90%                    |  |  |  |  |  |  |  |
| \$20,001 - \$100,000                  | \$18,000 plus 70% of the rebate offset base over \$20,000  | Rebate offset base – 20,000 x 70% + 18,000  |  |  |  |  |  |  |  |
| Over \$100,000                        | \$74,000 plus 50% of the rebate offset base over \$100,000 | Rebate offset base - 100,000 x 50% + 74,000 |  |  |  |  |  |  |  |

#### If filing by mail, please send to:

Saipan Central Office Division of Revenue and Taxation P.O. Box 5234 CHRB Saipan, MP 96950 Rota District Office Division of Revenue and Taxation P.O. Box 1406 Rota, MP 96951 Tinian District Office Division of Revenue and Taxation P.O. Box 449 Tinian, MP 96952

#### Filing deadline

If fiscal year-end is December 31, the deadline for 2019 is April 15, 2020. For fiscal year-end other than December 31, the deadline is the 15<sup>th</sup> day of the 3<sup>rd</sup> month after year end.