

Liquidator	<b>2020</b>	GOVERNMENT OF PUERTO RICO DEPARTMENT OF THE TREASURY	<b>2020</b>	Serial Number
<input type="checkbox"/> R	<b>CREDIT FOR PERSONS AGE 65 OR OLDER AND COMPENSATORY CREDIT FOR LOW INCOME PENSIONERS RETURN</b>			<input type="checkbox"/> AMENDED RETURN

Taxpayer's Name Initial Last Name Second Last Name Postal Address Zip Code Spouse's First Name and Initial Last Name Second Last Name Home Address (Town or Urbanization, Number, Street) Zip Code E-Mail Address	Taxpayer's Social Security Number	Receipt Stamp
Date of Birth Day Month Year Sex <input type="radio"/> M <input type="radio"/> F	Spouse's Social Security Number Spouse's Date of Birth Day Month Year Sex <input type="radio"/> M <input type="radio"/> F	
Home Telephone ( ) - Work Telephone ( ) -	CHANGE OF ADDRESS: <input type="checkbox"/> Yes <input type="checkbox"/> No	

<b>Questionnaire</b>	YES NO A. <input type="checkbox"/> <input type="checkbox"/> United States Citizen? B. <input type="checkbox"/> <input type="checkbox"/> Resident of Puerto Rico at the end of the year? C. <input type="checkbox"/> <input type="checkbox"/> Did you receive social security benefits? Indicate total \$ _____ D. <input type="checkbox"/> <input type="checkbox"/> Did you receive any other Puerto Rico excluded or tax exempt income, excluding any federal or state subsidy or stimulus due to COVID-19? Indicate total \$ _____ E. <input type="checkbox"/> <input type="checkbox"/> Did you receive income that have <b>not</b> been reported on a Withholding Statement or Informative Return in Puerto Rico, excluding social security benefits and any federal or state subsidy or stimulus due to COVID-19? 1. <input type="checkbox"/> Attributable to taxpayer \$ _____ 2. <input type="checkbox"/> Attributable to spouse \$ _____	F. HIGHEST SOURCE OF INCOME: 1. <input type="checkbox"/> Government, Municipalities or Public Corporation Employee 2. <input type="checkbox"/> Federal Government Employee 3. <input type="checkbox"/> Private Business Employee 4. <input type="checkbox"/> Retired/Pensioner 5. <input type="checkbox"/> Social Security 6. <input type="checkbox"/> Other _____ G. FILING STATUS AT THE END OF THE TAXABLE YEAR: 1. <input type="checkbox"/> Married Fill in here <input type="checkbox"/> if one of the spouses passed away at the time to claim the credit and indicate the date of death of the deceased spouse (See instructions) a) <input type="checkbox"/> Taxpayer: Day _____ Month _____ Year _____ b) <input type="checkbox"/> Spouse: Day _____ Month _____ Year _____ 2. <input type="checkbox"/> Individual taxpayer
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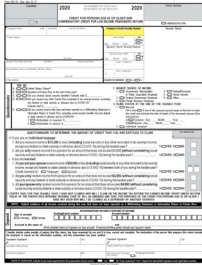
<b>QUESTIONNAIRE TO DETERMINE THE AMOUNT OF CREDIT THAT YOU ARE ENTITLED TO CLAIM</b>		For Internal Use
H. If you are an <b>individual taxpayer</b> : 1. did you receive income of <b>\$15,000</b> or less ( <b>including</b> social security or any other excluded or tax exempt income, except any federal or state subsidy or stimulus due to COVID-19) during the taxable year? ..... 1 <input type="checkbox"/> YES 2 <input type="checkbox"/> NO 2. did you <b>only</b> receive income from pension for an amount that does not exceed <b>\$4,800</b> ( <b>without considering</b> social security and any federal or state subsidy or stimulus due to COVID-19) during the taxable year? ..... 1 <input type="checkbox"/> YES 2 <input type="checkbox"/> NO I. If you are <b>married</b> : 1. did <b>you and your spouse</b> receive income of <b>\$30,000</b> or less ( <b>including</b> social security or any other excluded or tax exempt income, except any federal or state subsidy or stimulus due to COVID-19) between both of you during the taxable year? Credit claimed for: <input type="checkbox"/> Taxpayer <input type="checkbox"/> Spouse ..... 1 <input type="checkbox"/> YES 2 <input type="checkbox"/> NO 2. did <b>you only</b> receive income from pension for an amount that does not exceed <b>\$4,800</b> ( <b>without considering</b> social security and any federal or state subsidy or stimulus due to COVID-19) during the taxable year? ..... 1 <input type="checkbox"/> YES 2 <input type="checkbox"/> NO 3. did <b>your spouse only</b> receive income from pension for an amount that does not exceed <b>\$4,800</b> ( <b>without considering</b> social security and any federal or state subsidy or stimulus due to COVID-19) during the taxable year? ..... 1 <input type="checkbox"/> YES 2 <input type="checkbox"/> NO	\$ _____ <input type="checkbox"/> <input type="checkbox"/> Taxp. Spou. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
I CERTIFY THAT, FOR THIS TAXABLE YEAR, I HAVE NOT CLAIMED NOR WILL I CLAIM ON THE INCOME TAX RETURN THE EARNED INCOME CREDIT UNDER SECTION 1052.01 OF THE PUERTO RICO INTERNAL REVENUE CODE OF 2011, AS AMENDED AND THAT, FOR PURPOSES OF THE CREDIT FOR PERSONS AGE 65 OR OLDER, I HAVE NOT BEEN NOR WILL I BE CLAIMED AS A DEPENDENT BY ANOTHER TAXPAYER.		
NOTE: Submit evidence of <b>all</b> income received during the year that have not been reported on a Withholding Statement or Informative Return in Puerto Rico.		

<b>Deposit</b>	AUTHORIZATION FOR DIRECT DEPOSIT OF REFUND		
	Type of account <input type="checkbox"/> Checking <input type="checkbox"/> Savings	Routing/transit number <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Account number <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
	Account in the name of: _____ and _____ (Print complete name as it appears on your account. If married and filing jointly, include your spouse's name)		

I hereby declare under penalty of perjury that this return, has been examined by me and it is true, correct and complete. The declaration of the person that prepares this return (except the taxpayer) is based on the information available, and this information has been verified.			
Taxpayer's Signature <input checked="" type="checkbox"/>	Date	Spouse's Signature <input checked="" type="checkbox"/>	Date
Specialist's Name (Print)		Name of the Firm or Business	
Specialist's Signature	Date	Self-employed Specialist (fill in here) <input type="checkbox"/>	Registration Number

## FILING REQUIREMENTS

### WHAT IS FORM 481.10?



Form 481.10, Credit for Persons Age 65 or Older and Compensatory Credit for Low Income Pensioners Return (Credits Return), may be used by those taxpayers, individual or married, who claim only one or both of the following credits:

- Credit for Persons Age 65 or older; and
- Compensatory Credit for Low Income Pensioners.

### WHO MUST FILE THE CREDITS RETURN?

The Credits Return may be filed by every individual who meets the following requirements:



- is an individual resident of Puerto Rico;
- is age 65 or older on the last day of the taxable year and the gross income, including Social Security benefits, does not exceed \$15,000 or \$30,000 in the case of married taxpayers;
- is not age 65 or older on the last day of the taxable year but only received income from pension of \$4,800 or less (without including social security);
- is not claimed as a dependent in other return (applies only to credit for persons age 65 or older); and
- has not claimed nor will claim on the Individual Income Tax Return (Form 482.0) the earned income credit under Section 1052.01 of the Puerto Rico Internal Revenue Code of 2011, as amended (Code).



### WHEN MUST THE CREDITS RETURN BE FILED?



If you file on a calendar year basis, you must file your return **from July 2 until October 14, 2021**.

### HOW MUST THE RETURN BE FILED?



The return must be filed electronically through the Internal Revenue Integrated System (SURI, for its Spanish acronym). The Department of the Treasury (Department) will issue soon a publication with details of the procedure to follow in order to file this return.

**NAME, ADDRESS AND SOCIAL SECURITY NUMBER**

Indicate the required information in the spaces provided. **It is important that you enter your and your spouse's (if applicable) social security number in the corresponding space of the return. This number is necessary to process your return.**

**DATE OF BIRTH**

Indicate your and your spouse's (if applicable) date of birth in the space and format provided for this purpose. **If you do not include the date of birth, your return will not be processed** because this information is necessary to determine your eligibility for the Credit for Persons age 65 or older.

**AREA CODE**

Please include the area code (787 or 939) in the space provided in the heading of the return to indicate the telephone number of your residence and office.

**E-MAIL ADDRESS**

Include an e-mail address in the space provided for this purpose.

**CHANGE OF ADDRESS**

If there was a change of address at the moment of filing this return in relation to a return filed for taxable year 2019 (if applicable), select the corresponding oval and enter the new address to notify it. This allows us to keep our records up to date and send you any notice to the correct address.

You can also change your address at any time of the year through your SURI account following the steps indicated below: (i) Log in to your SURI account; (ii) In the *Names and Addresses* menu, select the address that you are interested in changing and click the *Change this address* link; (iii) Enter the new address and click the *Verify Address* link; (iv) Once the address is validated, click on the *Next* option to continue with the next screen; (v) On the *Review and Submit* screen, be sure to click the *Submit* link. The system will provide you with a confirmation number of the change of address request. We encourage you to keep said number in your records.

If you don't have an account in SURI, and you do not have to file the return yet, you must notify any change in your address using Form SC 2898 (Change of Address). Said form is available in our website: [www.hacienda.pr.gov](http://www.hacienda.pr.gov).

**AMENDED RETURN**

If you made any mistake when completing the information required on this return, you must amend the same. Select the oval corresponding to **Amended Return**. Such amended return must be filed within 4 years from the date the original return was filed.

**QUESTIONNAIRE**

Select the applicable oval to indicate if you are a United States citizen and if you were a resident of Puerto Rico at the end of the taxable year. Inform if you received social security benefits and enter the amount. Also, you must inform if you received excluded or exempt income during the year (Example: prizes from the Lottery of Puerto Rico or from racetrack winnings),

without including any federal or state subsidy or stimulus due to COVID-19 and enter the amount.

Additionally, indicate if you received income that have not been reported on a Withholding Statement or Informative Return in Puerto Rico, without considering social security benefits and any federal or state subsidy or stimulus due to COVID-19. You must include the amount of income attributable to the taxpayer and the spouse, as applicable.

**HIGHEST SOURCE OF INCOME**

Select the applicable oval in accordance with your highest source of income.

**FILING STATUS AT THE END OF THE TAXABLE YEAR**

Select the oval that identifies your filing status at the end of the taxable year:

**Married** - This filing status is for those individuals who at the end of the year have celebrated their marriage under the provisions of the Puerto Rico Civil Code or who are treated as married under the legal system in Puerto Rico. **You must submit your spouse's name and social security number.**

If after the end of the taxable year and on the date of filing this return one of the spouses died, select the oval corresponding to the taxpayer or spouse, as applicable, and indicate the date of death. Keep for your records copy of the Death Certificate.

**Individual Taxpayer** - This filing status is for those individuals who at the end of the year:

- are not married, either because they have never married, are widowed or divorced;
- are married, but before their marriage executed a prenuptial agreement expressly stipulating that the economic regime of the married couple is one of complete separation of property; or
- did not live with the spouse, and during an uninterrupted period of 12 months that includes the date of the end of the taxable year, he or she did not live in the same household as the spouse during an uninterrupted period of 183 days.

**Married filing separately** - Those individuals that at the end of the taxable year are legally married and live together, must file under the married status. **You must submit you spouse's name and social security number.**

**QUESTIONNAIRE TO DETERMINE THE AMOUNT OF CREDIT THAT YOU ARE ENTITLED TO CLAIM**

**Credit for Persons Age 65 or older**

Every taxpayer who is an individual resident of Puerto Rico and on the last day of the taxable year is age 65 or older, whose total income (including excluded and exempt income) does not exceed \$15,000 and is not claimed as a dependent by any other taxpayer for the same taxable year, may claim a reimbursable personal compensatory credit of \$200. The amount of the credit could be increased to \$400, subject to compliance with the General Fund net income test, as established in Section 1052.02(b)(1) of the Code.

In the case of married taxpayers, each one is entitled to claim this credit, provided that the aggregate income of both spouses (including excluded and exempt income) does not exceed \$30,000.

### **Compensatory Credit for Low Income Pensioners**

Every individual resident of Puerto Rico with low income who is a pensioner from the Employees' Retirement System Administration of the Government of Puerto Rico and the Judiciary, the Teachers' Retirement System, the University of Puerto Rico, the Electric Power Authority, as well as those duly pensioned by the private sector, shall be entitled to claim a reimbursable compensatory personal credit of \$300.

For purposes of this credit, an individual is considered to be a low income pensioner if **his/her only source of income consists of the pension for services rendered and the amount received does not exceed \$4,800 annually**. Do not include income received from social security benefits to determine the annual income amount of \$4,800.

### **Economic Incentives Payments and other aids due to the COVID-19 pandemic**

Article 5(i) of Act 57-2020, establishes that the amounts received from any federal subsidy or stimulus under the Coronavirus Aid, Relief and Economic Security Act ("CARES Act") or under any other federal legislation to address COVID-19 or under any state subsidy or stimulus granted as a result of COVID-19, will be excluded from gross income for income tax purposes, including the alternate basic tax or the alternative minimum tax, including the refundable tax credits, and other financial aids provided by this Act.

Therefore, for purposes of the Credit for Persons Age 65 or older, do not consider any subsidy or stimulus that you have received from the Federal Government or from Puerto Rico due to COVID-19, even though they are considered as an exclusion from gross income.

**Line H - Individual Taxpayer** (Refer to *FILING STATUS AT THE END OF THE TAXABLE YEAR* Section for details regarding which taxpayers are considered, for purposes of the Credits Return, as individual taxpayers):

**Line H.1.** – Add all your income, including social security benefits and any other excluded or exempt income, except any federal or state subsidy or stimulus due to COVID-19. If this amount is \$15,000 or less or if you did not receive any income, answer "Yes" on this line. Otherwise, answer "No" on this line.

**Line H.2.** – If you only received income from pension (without including social security and any federal or state subsidy or stimulus due to COVID-19) for an amount that does not exceed \$4,800 during the taxable year, answer "Yes" on this line. Otherwise, answer "No" on this line.

**If you received income subject to withholding or if your gross income, net of exemptions, is more than zero, you must also complete the Individual Income Tax Return (Form 482.0). Refer to the instructions of such return to make sure if you must file the same.**

### **Line I – Married Taxpayers:**

**Line I.1.** – Add all your and your spouse's income, including social security benefits and any other excluded or exempt

income, except any federal or state subsidy or stimulus due to COVID-19. If this amount is \$30,000 or less or if you did not receive any income, answer "Yes" on this line. Otherwise, answer "No" and go to line I.2. Also, you must select the corresponding oval(s) to indicate if you are claiming the credit for the Taxpayer and/or Spouse.

**Line I.2.** – If you only received income from pension (without including social security and any federal or state subsidy or stimulus due to COVID-19) for an amount that does not exceed \$4,800 during the taxable year, answer "Yes" on this line. Otherwise, answer "No" on this line.

**Line I.3.** – If your spouse only received income from pension (without including social security and any federal or state subsidy or stimulus due to COVID-19) by an amount that does not exceed \$4,800 during the taxable year, answer "Yes" on this line. Otherwise, answer "No" on this line.

**If you or your spouse received income subject to withholding or if your gross income, net of exemptions, is more than zero, you must also complete the Individual Income Tax Return (Form 482.0). Refer to the instructions of such return to make sure if you must file the same.**

### **AUTHORIZATION FOR DIRECT DEPOSIT OF REFUND**

In order to receive your reimbursable credits faster and safely, the Department will deposit your payment directly into your checking or savings account. To do that, you must complete all the information requested. Otherwise, the financial institution and the Department may reject the transaction.

**Type of Account** - Indicate if the deposit will be made into your checking or savings account, by selecting the oval corresponding to the type of account.

**Routing/Transit Number** - Enter the routing/transit number of your account. This information appears on the check. In the case of a savings account, you must call the financial institution to obtain the routing/transit number. **Do not leave blank spaces. Do not use hyphens or other symbols.**

**Account Number** - Enter the checking or savings account number. **Do not use hyphens or other symbols.** Do not fill out blank spaces with zeros. The account number may have less numbers than the spaces provided for this purpose in this part.

**Account in the name of** - Enter your name, as it appears on your account. In the case of married taxpayers filing jointly, **the account must be in the name of both spouses.**

If you do not complete this part, you will receive the reimbursable credits by paper check form through regular mail.

### **EARNED INCOME CREDIT**

Any taxpayer who for the 2019 taxable year claims the earned income credit under Section 1052.01 of the Code in the Individual Income Tax Return (Form 482.0), will not be able to claim the credits provided in this Credits Return.

### **TECHNICAL ASSISTANCE**

For additional information on the technical contents of this booklet or to clarify any doubts, please call **(787) 622-0123** or send a **message through your SURI account.**



## PAYMENTS APPLICATION

Any payment related to the claim of the credits granted through this return will be applied against any enforceable tax liability imposed by the Code. If married and one of the spouses owes taxes, the payment of the credits will be applied to any enforceable debt.

## RETENTION OF PAYMENT FOR THE CONCEPT OF CHILD SUPPORT

If you have the obligation to provide child support to your children through the Child Support Administration (ASUME, for its Spanish acronym) and you owe said child support, your payment related to the claim of the credits granted through this return may be withheld. If you understand that the withholding does not apply, you will have 10 days from the date of the notification to object the same at the ASUME office nearest to your residence.

## METHOD TO FILE THE RETURN

In order to protect and safeguard the wellbeing and legitimate claim of our citizens, Form 481.10 can only be filed electronically through SURI.

## EVIDENCES OF THE RETURN

Form 481.10 must be completed in **all** its parts and must be accompanied with the following evidences of the amount of income received during tax year 2020 and that at December 31, 2020, the taxpayer and his spouse, if applicable, were 65 years old or more:

- Identification that includes the date of birth, such as a driver's license, senior citizen's photo identification or any other official document that allows to determine the applicant's date of birth.
- Social Security benefits - Form SSA 1099 *Social Security Benefit Statement* (You may request it through the Internet at: [www.ssa.gov](http://www.ssa.gov) or by calling 1-800-772-1213)
- Other income that have not been reported on a Withholding Statement or Informative Return in Puerto Rico.
- Any other document required by the Department.

**If you do not receive any type of income, you must include a negative certification from the Social Security Administration.**

Returns that are not accompanied with the corresponding evidence will not be processed.

## SIGNATURE OF THE RETURN

The return will not be considered filed and will not be processed unless it is electronically signed and all necessary documents and information are submitted. In the case of married individuals filing jointly, both spouses must sign the return electronically.

## PAYMENTS FOR THE PREPARATION OF THE RETURN

Indicate if payments were made for the preparation of the tax return, and make sure that the specialist signs the return and includes his/her specialist registration number. THE CODE PROVIDES CIVIL AND CRIMINAL SANCTIONS TO THOSE SPECIALISTS WHO FAIL TO SUBMIT THIS INFORMATION

OR WHO DO NOT MEET ANY OTHER STATUTORY REQUIREMENTS.

## 360° SERVICE CENTERS

In the 360° Service Centers, besides **informing about the status of your refund**, other services are offered such as: Tax Return Filing Certifications, Return Copies, assistance for Cases of Inheritance and Donations, Individuals, Corporations or Partnerships and Professional Services Withholding Waivers.

Following are the postal address and telephone number of the Call and Correspondence Center and the location of each one of our 360° Service Centers:

☞ **"Hacienda Responde" Contact Center**  
Telephone: (787) 622-0123

☞ **San Juan 360° Services Center**  
Intendente Ramírez Building  
10 Paseo Covadonga, Office 101

☞ **San Juan 360° Services Center- Representative's Center**  
Intendente Ramírez Building  
10 Paseo Covadonga, Office 101

☞ **Aguadilla 360° Services Center**  
Governmental Center  
Muñoz Rivera Street  
Pueblo Ward, 1st Floor

☞ **Caguas 360° Services Center**  
Governmental Center, Basement  
Goyco Street, Acosta Corner

☞ **Arecibo 360° Services Center**  
Santiago Cabán Building  
158 Mariano Vidal Street, 1st Floor

☞ **Mayagüez 360° Services Center**  
Governmental Center  
50 Nenadich Street, Office 108

☞ **Cidra 360° Services Center**  
City Hall Annex Building  
33 Muñoz Barrios Street



Rev. Jul 1 21

# CREDIT FOR INDIVIDUALS RESIDENTS OF PUERTO RICO WHO ARE AGE 65 OR OLDER

## REQUIREMENTS TO CLAIM THE CREDIT

You must meet each one of these requirements:

1. You are a resident of Puerto Rico.
2. You are age 65 or older as of December 31, 2020.
3. If you have earned income during 2020, it must not exceed \$15,000 (if you will claim the credit as an individual taxpayer) or \$30,000 (if you will claim the credit as a married taxpayer).
4. You cannot be claimed as a dependent by other taxpayer on the 2020 Individual Income Tax Return.
5. You have not claimed nor will claim on the Individual Income Tax Return (Form 482.0) the earned income credit under Section 1052.01 of the Puerto Rico Internal Revenue Code of 2011, as amended.

The term income includes the income that is generally excluded or considered exempt for income tax purposes, such as social security income, except for the benefits of the Nutritional Assistance Program (PAN, for its Spanish acronym) or other similar benefit.

## EVIDENCES REQUIRED

Review your information and make sure that you include the following documents with your return, as applicable, to avoid any delay in the processing of the return:

- Identification with date of birth showing that as of December 31, 2020, you were age 65 or older, such as a driver's license, senior citizen's photo identification, or any similar document that allows to determine your age.
- Social Security benefits – Form SSA 1099 *Social Security Benefit Statement* (You may request it through the Internet at: [www.ssa.gov](http://www.ssa.gov) or by calling 1-800-772-1213)
- Other income that have not been reported on a Withholding Statement or Informative Return in Puerto Rico.
- Any other document required by the Department of the Treasury.

**If you do not receive any type of income, you must include a negative certification from the Social Security Administration.**



# \$300 COMPENSATORY CREDIT FOR LOW INCOME PENSIONERS

## REQUIREMENTS TO CLAIM THE CREDIT

You must meet each one of these requirements:

1. You are a resident of Puerto Rico.
2. Be a pensioner from the Employees' Retirement System of the Government of Puerto Rico and the Judiciary, the Teacher's Retirement System, the University of Puerto Rico, the Electric Power Authority or by the private sector. Therefore, those individuals who receive another type of pension, including pensions received by the Federal Government, do not qualify for this credit.
3. Received, as the **only source of income**, a pension for services rendered.
4. The pension received should not exceed \$4,800 annually.
5. Have not claimed nor will claim on the Individual Income Tax Return (Form 482.0) the earned income credit under Section 1052.01 of the Puerto Rico Internal Revenue Code of 2011, as amended.

For purposes of income calculation, do not include the income received for Federal Social Security, Christmas, Summer and Medicines bonuses related to your pension, or the benefits from the Nutrition Assistance Program (PAN, for its Spanish acronym) and any other similar benefits.

In the case of married taxpayers who file a joint return, if each one receives a pension and neither of them exceeds \$4,800 annually, they may claim a credit of \$600.

The Department reserves the right to confirm the compliance with the above with the corresponding agencies.

## REQUIRED EVIDENCES

Review your information and make sure you include the following documents with your return, as applicable, to avoid any delay in the processing of the return:

- Other income that have not been reported on a Withholding Statement or Informative Return in Puerto Rico.
- Any other document required by the Department of the Treasury.