



Commonwealth of Puerto Rico  
DEPARTAMENT OF THE TREASURY

**TRANSMITTAL FORM  
SCHEDULE A CORPORATION - PART V  
TAXABLE YEAR 2015**

Receipt Stamp

**THIS FORM MUST BE FILED WITH THE CORPORATION OR EXEMPT BUSINESSES UNDER INCENTIVES ACTS INCOME TAX RETURN CORRESPONDING TO TAXABLE YEAR 2015, TO WHICH PART II OR III OF THIS FORM APPLY.**

Taxpayer's Name

Employer Identification Number

**Part I General Information**

- Indicate the type of Income Tax Return attached:  
(a)  480.20 (b)  480.30(II)DI (c)  480.30(II)EV (d)  480.30(II)C (e)  480.30(II)DT (f)  480.30(II)LE
- The attached form indicated on line 1 is an:  
(a)  Original Return. If you selected this alternative, complete Part II and do not complete Part III.  
(b)  Amended Return. If you selected this alternative, complete Part III and do not complete Part II.

**Part II If you selected "Original Return" on line 2, complete the following:**

- Check here if during the taxable year you incurred or paid for expenses to a related person or made purchases of personal property from a related person; or if you transferred costs or allocated expenses, or if you transferred personal property from a Home Office located outside of Puerto Rico to a Branch engaged in trade or business in Puerto Rico.
- Indicate the total expenses incurred or paid to a related person and the amount representing the transfer of costs or allocation of expenses from a Home Office located outside of Puerto Rico to a Branch engaged in trade or business in Puerto Rico.....\$
- Indicate the total purchases of personal property from a related person or transfer of personal property from a Home Office located outside of Puerto Rico to a Branch engaged in trade or business in Puerto Rico.....\$

**Part III If you selected "Amended Return" on line 2, complete the following:**

- Check here if the only reason to file an Amended Return is to correct the computation of Parts V and VI of Schedule A Corporation, according to Administrative Determination No. 16-11 issued by the Department ("AD 16-11").
  - Check here if in addition to submitting the Amended Return to correct the computation of Parts V and VI of Schedule A Corporation, according to AD 16-11, you are also making other amendments to the form indicated on line 1.

	As Original Return	As Amended Return
7. a) Tax liability before the alternative minimum tax (Line 44, Part IV, page 2 of Form 480.20 or line 11, Part II of Schedule P Incentives, as applicable) .....	00	00
b) Alternative minimum tax in excess of the regular tax (Schedule A Corporation, Part VI, line 41) .....	00	00
c) Total Tax Liability (Line 53, Part IV, page 2 of Form 480.20; line 1f, Part I of Form 480.30(II)DI; line 1c, Part I of Form 480.30(II)EV; line 1c, Part I of Form 480.30(II)C; line 1f, Part I of Form 480.30(II)DT; or line 1, Part I of Form 480.30(II)LE, as applicable) .....	00	00
d) Other Payments and Withholding (Line 54, Part IV, page 2 of Form 480.20 or line 2h, Part I of Form 480.30(II)DI, 480.30(II)EV, 480.30(II)C, 480.30(II)DT or 480.30(II)LE, as applicable) .....	00	00
e) Balance of tax due (Excess of tax paid or withheld) (Line 7c less line 7d) .....	00	00

**OATH**

I declare under penalty of perjury that the information included in this form (including the return and schedules attached) has been examined by me, and to the best of my knowledge and belief, is a true, correct and complete form. The declaration of the person who prepares this form is with respect to the information received.

Officer's or agent's name (Print)	Officer's or agent's signature	Title	Date
Specialist's name (Print)	Firm's or Business' name		
Specialist's signature	Date	Self-employed Specialist (fill in here) <input type="checkbox"/>	Registration number