

Liquidator:	Reviewer:	<b>20</b> _____	COMMONWEALTH OF PUERTO RICO DEPARTMENT OF THE TREASURY	<b>20</b> _____	Serial Number
Field audited by:		<b>Corporation Income Tax Return</b>			
Date ____/____/____		TAXABLE YEAR BEGINNING ON _____, ____ AND ENDING ON _____, ____			
R M N		<input type="checkbox"/> <b>AMENDED RETURN</b>			
		Payment Stamp			

Taxpayer's Name		Employer Identification Number			
Postal Address		Department of State Registry No.			
		Industrial Code	Municipal Code		
Zip Code		Merchant's Registration Number			
"Place Label here".		Telephone Number - Extension ( ) -		Receipt No. _____ Amount: _____	
Location of Principal Industry or Business - Number, Street, City		Date Incorporated Day ____/ Month ____/ Year ____		Type of Entity	
Type of Principal Industry or Business (i.e. Hardware, Cafeteria, etc.)		Place Incorporated		Indicate if you are member of a group of related entities <input type="checkbox"/> Yes <input type="checkbox"/> No	
Check the corresponding box, if applicable <input type="checkbox"/> First return <input type="checkbox"/> Last return		CHANGE OF ADDRESS <input type="checkbox"/> Yes <input type="checkbox"/> No			
Contracts with Governmental Entities <input type="checkbox"/> Yes <input type="checkbox"/> No		2013 RETURN <input type="checkbox"/> Spanish <input type="checkbox"/> English		Group Number	

<b>Part I</b>	1. <b>Net operating income (or loss)</b> (From Part V, line 47) .....	(1)		00
	2. Less: Net operating loss deduction from preceding year (Submit detail) .....	(2)		00
	3. <b>Net income (or loss)</b> .....	(3)		00
<b>Part II</b>	4. Less: Dividends received from domestic corporations (See instructions) .....	(4)		00
	5. <b>Net income subject to normal tax</b> (Subtract line 4 from line 3) .....	(5)		00
	6. Less: Surtax net income deduction (Check here if comes from Form SC 2652 <input type="checkbox"/> ) .....	(6)		00
	7. <b>Net income subject to surtax</b> (Subtract line 6 from line 5) .....	(7)		00
<b>Part III</b>	8. Normal tax (Multiply line 5 by 20%) (Check here if you used Schedule B4 Corporation <input type="checkbox"/> ) .....	(8)		00
	9. Surtax (See instructions) (Net income subject to 5% \$ _____) .....	(9)		00
	10. <b>Total Tax</b> (Add lines 8 and 9) .....	(10)		00
	11. Alternative Tax - Capital Gains and Preferential rates (Schedule D Corporation, Part V, line 39) .....	(11)		00
	12. <b>Tax Determined</b> (Line 10 or 11, whichever is smaller, provided that line 11 is more than zero) .....	(12)		00
	13. Recapture of credit claimed in excess (Schedule B Corporation, Part I, line 3) .....	(13)		00
	14. <b>Tax credits</b> (Schedule B Corporation, Part II, line 25) .....	(14)		00
	15. <b>Tax liability before alternative minimum tax</b> (Subtract line 14 from the sum of lines 12 and 13) .....	(15)		00
	16. Alternative minimum tax (Schedule A Corporation, Part V, line 35) .....	(16)		00
	17. Branch profits tax (Form AS 2879, line 11) .....	(17)		00
	18. Tax on income subject to preferential rates (Schedule D Corporation, Part VI, line 42) .....	(18)		00
	19. <b>Total Tax Liability</b> (Add lines 15 through 18) .....	(19)		00
	20. <b>Less: Other Payments and Withholdings</b> (Schedule B Corporation, Part III, line 10) .....	(20)		00
	21. Credit for the payment of additional duties on luxury automobiles under Act 42-2005 (See instructions) .....	(21)		00
	22. Returning Heroes and Wounded Warriors work opportunity tax credit (Submit Schedule B4 Corporation) .....	(22)		00
	23. Balance of tax due (If line 19 is larger than the sum of lines 20 through 22, enter the difference here, otherwise, on line 25)			
	a) Tax .....	(23a)		00
	b) Interest .....	(23b)		00
	c) Surcharges .....	(23c)		00
	d) Total (Add lines 23(a) through 23(c)) .....	(23d)		00
24. <b>Addition to the Tax for Failure to Pay Estimated Tax</b> (Schedule T Corporation, Part II, line 21) .....	(24)		00	
25. Excess of tax paid or withheld (See instructions) .....	(25)		00	
26. Amount paid with this return .....	(26)		00	
27. <b>Amount overpaid</b> (Subtract lines 20 through 22 from the sum of lines 19 and 24. Distribute line 27 between line A, B, C or D):				
A. To be credited to estimated tax for 2013 .....	(27A)		00	
B. Contribution to the San Juan Bay Estuary Special Fund .....	(27B)		00	
C. Contribution to the Special Fund for the University of Puerto Rico .....	(27C)		00	
D. To be refunded .....	(27D)		00	

Part IV	1. Net sales ..... (1)		00
	Less: Cost of goods sold or direct costs of production		
	2. Inventory at the beginning of the year <input type="checkbox"/> 1 "C" <input type="checkbox"/> 2 "C" or "MV"		
	(a) Materials ..... (2a)	00	
	(b) Goods in process ..... (2b)	00	
	(c) Finished goods or merchandise ..... (2c)	00	
	3. Purchase of materials or merchandise ..... (3)	00	
	4. Direct wages ..... (4)	00	
	5. Other direct costs (Detail in Part VI) ..... (5)	00	
	6. Total cost of goods available for sale (Add lines 2 through 5)..... (6)	00	
	7. Less: Inventory at the end of the year <input type="checkbox"/> 1 "C" <input type="checkbox"/> 2 "C" or "MV"		
	(a) Materials ..... (7a)	00	
	(b) Goods in process ..... (7b)	00	
	(c) Finished goods or merchandise ..... (7c)	00	00
	8. Gross profit on sales or production (Subtract the result of line 6 less line 7, from line 1) ..... (8)		00
	9. Net capital gain (Schedule D Corporation, Part IV, line 22) ..... (9)		00
	10. Net gain (or loss) from the sale of property other than capital assets (Schedule D Corporation, Part VII, line 43) ..... (10)		00
	11. Rent ..... (11)		00
	12. Interest ..... (12)		00
13. Income from services or commissions ..... (13)		00	
14. Dividends from corporations: (a) Domestic _____ (b) Foreign _____ (14)		00	
15. Distributable share on net income from partnerships and special partnerships (Schedule R Corporation, Part II, line 14) ..... (15)		00	
16. Taxable farming profit (Schedule S Corporation, Part I, line 9) ..... (16)		00	
17. Freight and fares ..... (17)		00	
18. Miscellaneous income ..... (18)		00	
19. <b>Total gross income</b> (Add lines 8 through 18) ..... (19)		00	

Part V	20. Compensation to officers (See instructions for Part X) ..... (20)		00
	21. Salaries, commissions and bonuses to employees (Total \$ _____) (See instructions) ..... (21)		00
	22. Commissions to businesses ..... (22)		00
	23. Social security tax (FICA) ..... (23)		00
	24. Unemployment tax ..... (24)		00
	25. State Insurance Fund premiums ..... (25)		00
	26. Medical or hospitalization insurance ..... (26)		00
	27. Insurances ..... (27)		00
	28. Interest (See instructions)..... (28)		00
	29. Rent ..... (29)		00
	30. Property tax: (a) Personal _____ (b) Real _____ (30)		00
	31. Other taxes, patents and licenses (See instructions) ..... (31)		00
	32. Losses from fire, storm, other casualties or theft ..... (32)		00
	33. Motor vehicle expenses (Mileage _____) (See instructions) ..... (33)		00
	34. Other motor vehicle expenses (See instructions) ..... (34)		00
	35. Meal and entertainment expenses (Total _____) (See instructions) ..... (35)		00
	36. Travel expenses ..... (36)		00
	37. Professional services ..... (37)		00
	38. Contributions to pension or other qualified plans (See instructions. Submit Form AS 6042.1) ..... (38)		00
	39. Depreciation and amortization (See instructions. Submit Schedule E) ..... (39)		00
	40. Bad debts (See instructions) ..... (40)		00
	41. Charitable contributions (See instructions) ..... (41)		00
	42. Repairs (See instructions) ..... (42)		00
	43. Deduction for employers who employ handicapped persons (See instructions) ..... (43)		00
	44. Contributions to educational contribution accounts for the employees' beneficiaries (See instructions) ..... (44)		00
	45. Other deductions (See instructions) ..... (45)		00
	46. <b>Total deductions</b> (Add lines 20 through 45) ..... (46)		00
	47. <b>Net operating income (or loss) for the year</b> (Subtract line 46 from line 19. Enter here and in Part I, line 1) ..... (47)		00

Part VI	Item	26	Amount	Item	Amount
	1. Salaries, wages and bonuses ..... (1)		00	8. Repairs ..... (8)	00
2. Social security tax (FICA) ..... (2)		00	9. Utilities ..... (9)	00	
3. Unemployment tax ..... (3)		00	10. Rent ..... (10)	00	
4. State Insurance Fund premiums ..... (4)		00	11. Depreciation (Submit Schedule E) ..... (11)	00	
5. Medical or hospitalization insurance ..... (5)		00	12. Other expenses (Submit detail) ..... (12)	00	
6. Other insurance ..... (6)		00	13. <b>Total other direct costs</b> (Add lines 1 through 12. Same as Part IV, line 5) ..... (13)	00	
7. Excise taxes / Use taxes ..... (7)		00			

**Corporation - Comparative Balance Sheet**

37

	Beginning of the Year			Ending of the Year		
		Total			Total	
<b>Assets</b>						
1. Cash on hand and in banks ..... (1)		00	(1)		00	
2. Accounts receivable ..... (2)	00		(2)	00		
3. Less: Reserve for bad debts ..... (3)	( 00)		(3)	( 00)		
4. Notes receivable ..... (4)		00	(4)		00	
5. Inventories ..... (5)		00	(5)		00	
6. Investments ..... (6)		00	(6)		00	
7. Depreciable assets ..... (7)	00		(7)	00		
8. Less: Reserve for depreciation ..... (8)	( 00)		(8)	( 00)		
9. Land ..... (9)		00	(9)		00	
10. Other assets ..... (10)		00	(10)		00	
11. <b>Total Assets</b> ..... (11)		00	(11)		00	
<b>Liabilities and Stockholder's Equity</b>						
<b>Liabilities</b>						
12. Accounts payable ..... (12)	00		(12)	00		
13. Accrued expenses ..... (13)	00		(13)	00		
14. Notes payable ..... (14)	00		(14)	00		
15. Other liabilities ..... (15)	00		(15)	00		
16. <b>Total Liabilities</b> ..... (16)		00	(16)		00	
<b>Stockholder's Equity</b>						
17. Capital stock						
(a) Preferred stocks ..... (17a)	00		(17a)	00		
(b) Common stocks ..... (17b)	00		(17b)	00		
18. Additional paid in capital ..... (18)	00		(18)	00		
19. Retained earnings ..... (19)	00		(19)	00		
20. Reserve ..... (20)	00		(20)	00		
21. <b>Total Stockholder's Equity</b> ..... (21)		00	(21)		00	
22. <b>Total Liabilities and Stockholder's Equity</b> ..... (22)		00	(22)		00	

Part VII

**Reconciliation of Net Income (or Loss) per Books with Net Taxable Income (or Loss) per Return**

38

1. Net income (or loss) per books ..... (1)	00	7. Income recorded on books this year not included on this return (Itemize, use schedule if necessary)	
2. Income tax per books ..... (2)	00	(a) Exempt interest _____	
3. Excess of capital losses over capital gains ..... (3)	00	(b) _____	
4. Taxable income not recorded on books this year (Itemize, use schedule if necessary)		(c) _____	
(a) _____		(d) _____	
(b) _____		Total ..... (7)	00
(c) _____		8. Deductions on this tax return not charged against book income this year (Itemize, use schedule if necessary)	
(d) _____		(a) Depreciation _____	
Total ..... (4)	00	(b) _____	
5. Expenses recorded on books this year not claimed on this return (Itemize, use schedule if necessary)		(c) _____	
(a) Meal and entertainment (amount not claimed) _____		(d) _____	
(b) Depreciation _____		Total ..... (8)	00
(c) Motor vehicles (in excess of the limit) _____		9. <b>Total</b> (Add lines 7 and 8) ..... (9)	00
(d) Vessels, airships and property located outside of P.R. _____		10. <b>Net taxable income (or loss) per return</b> (Subtract line 9 from line 6) ..... (10)	00
(e) _____			
Total ..... (5)	00		
6. <b>Total</b> (Add lines 1 through 5) ..... (6)	00		

Part VIII

**Analysis of Retained Earnings per Books**

39

1. Balance at the beginning of the year ..... (1)	00	5. Distributions:	(5a)	00
2. Net income per books ..... (2)	00	(b) Property ..... (5b)		00
3. Other increases (Itemize, use schedule if necessary) _____		(c) Stocks ..... (5c)		00
_____ (3)	00	6. Other decreases (Use schedule if necessary) ..... (6)		00
4. <b>Total</b> (Add lines 1, 2 and 3) ..... (4)	00	7. Total (Add lines 5 and 6) ..... (7)		00
		8. <b>Balance at end of year</b> (Subtract line 7 from line 4) ..... (8)		00

Part IX

**Compensation to Officers**

Part X	Name of officer	Social security number	Percentage of time devoted to industry or business	Percentage of stocks owned		Compensation
				Common	Preferred	
						00
						00
						00
						00
						00
						00
Total compensation to officers (Enter in Part V, line 20) .....						00

**Questionnaire**

42

Part XI	Yes		No		Yes	No
1. If a foreign corporation, indicate if the trade or business in Puerto Rico was held as a branch .....	(1)					
2. If a branch, indicate the percent that represents the income from sources within Puerto Rico from the total income of the corporation: _____%						
3. Did the corporation keep any part of its records on a computerized system during this year? .....	(3)					
4. The corporation's books are in care of: Name _____ Address _____ E-mail _____ Telephone _____						
5. Indicate the accounting method used for book (tax) purposes: <input type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify): _____						
6. Did the corporation file the following documents?: (a) Informative Return (Forms 480.5, 480.6A, 480.6B) .....	(6a)					
(b) Withholding Statement (Form 499R-2/W-2PR) .....	(6b)					
7. If the gross income of the entity or of the controlled group exceeds \$3,000,000, are financial statements audited by a CPA licensed in Puerto Rico included with this return? .....	(7)					
8. Number of employees during the year: _____						
9. Did the corporation claim expenses connected to the ownership, use, maintenance and depreciation of: (a) Vehicles? .....	(9a)					
(b) Vessels? .....	(9b)					
(1) Did more than 80% of the total income was derived from activities exclusively related to fishing or transportation of passengers or cargo or lease? .....	(9b1)					
(c) Airships? .....	(9c)					
(1) Did more than 80% of the total income was derived from activities exclusively related to fishing or transportation of passengers or cargo or lease? .....	(9c1)					
d) Residential property outside of Puerto Rico? .....	(9d)					
(1) Did more than 80% of the total income was derived from activities exclusively related to the lease of property to non related persons? ...	(9d1)					
10. Did the corporation claim expenses connected to: a) Housing (except business employees) .....	(10a)					
b) Employees attending conventions or meetings outside Puerto Rico or the United States? .....	(10b)					
11. Did the corporation distribute dividends other than stock dividends or distributions in liquidation in excess of the corporation's current and accumulated earnings? .....	(11)					
12. Is the corporation a partner in any special partnership? (If more than one, submit detail) .....	(12)					
Name of the special partnership _____ Employer identification number _____						
13. Did you receive exempt income? (Submit Schedule IE Corporation) .....	(13)					
14. Enter the amount corresponding to charitable contributions to municipalities included in Part V, line 41: _____						
15. Indicate if insurance premiums were paid by an unauthorized insurer .....	(15)					
16. Employer's number assigned by the Department of Labor and Human Resources: _____						
17. Number of stockholders: _____						

**OATH**

We, the undersigned, president (or vice-president, or other principal officer) and treasurer (or assistant treasurer), or agent of the corporation for which this income tax return is made, each for himself declare under penalty of perjury, that this return (including schedules and statements attached) has been examined by us, and to the best of our knowledge and belief, is a true, correct, and complete return, made in good faith, pursuant to the Puerto Rico Internal Revenue Code of 2011, as amended, and the Regulations thereunder.

\_\_\_\_\_  
President's or vice-president's signature

\_\_\_\_\_  
Treasurer's or assistant treasurer's signature

\_\_\_\_\_  
Agent

**SPECIALIST'S USE ONLY**

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

Specialist's name (Print)	Registration number	Date	Self-employed Specialist <input type="checkbox"/>
4P			
Firm's name			
Specialist's signature	Address	Zip Code	

**NOTE TO TAXPAYER**

Indicate if you made payments for the preparation of your return:  Yes  No. If you answered "Yes", require the Specialist's signature and registration number.

Schedule A Corporation

Rev. 04.13



ALTERNATIVE MINIMUM TAX

20\_\_

A

Taxable year beginning on \_\_\_\_\_ and ending on \_\_\_\_\_

Taxpayer's Name

Employer Identification Number

Part I Adjustments in the Computation of the Alternative Minimum Net Income Before Books Adjustments and Operating Losses

Table with 3 columns: Description, Code, and Amount. Rows include: 1. Net income subject to normal tax... (1) 00; 2. Adjustments: a. Flexible depreciation (2a) 00, b. Installment sales (2b) 00, c. Long-term contracts (2c) 00, d. Expenses related with exempt interest (2d) 00, e. Accelerated depreciation (2e) 00, f. Expenses incurred or paid to a related person... (2f) 00, g. Total adjustments (2g) 00; 3. Alternative minimum net income before the adjustments of Part II and the operating loss (3) 00.

Part II Adjustment for the Excess of the Net Income per Books over the Alternative Minimum Net Income Before Adjustments

Table with 3 columns: Description, Code, and Amount. Rows include: 4. Net income (or loss) per books (4) 00; 5. Goodwill amortization expense (5) 00; 6. Income tax expense per books (6) 00; 7. Add lines 4, 5 and 6 (7) 00; 8. Exempt interest income net of related expenses (8) 00; 9. Dividends and profit distributions received from domestic corporations or partnerships, or from industrial or tourism development income (9) 00; 10. Industrial development income, exempt tourism development income or bona fide agricultural business income (10) 00; 11. Income (or loss) recognized under the equity method (11) 00; 12. Reserve for catastrophic losses (12) 00; 13. Net long-term capital gain (See instructions) (13) 00; 14. Add lines 8 through 13 (14) 00; 15. Subtract line 14 from line 7 (15) 00; 16. Subtract line 3 from line 15. If line 3 is larger than line 15, enter zero (16) 00; 17. Adjustment for the excess of the adjusted net income per books over the alternative minimum net income of line 3 (Multiply line 16 by 50%) (17) 00.

Part III Computation of the Alternative Minimum Net Income

Table with 3 columns: Description, Code, and Amount. Rows include: 18. Alternative minimum net income before the net operating loss (Add lines 3 and 17) (18) 00; 19. Net operating loss to determine the alternative minimum tax (See instructions. Submit detail) (19) 00; 20. Subtract line 19 from line 18 (Enter here the difference, but not less than 10% of line 18) (20) 00; 21. Exempt amount (See instructions) (21) 00; 22. Alternative minimum net income (Subtract line 21 from line 20) (22) 00.

Part IV Computation of the Alternative Minimum Credit for Foreign Taxes Paid

Table with 3 columns: Description, Code, and Amount. Rows include: 23. Tentative minimum tax (Multiply line 22 by 20%) (23) 00; 24. Alternative minimum net income before net operating loss deduction (Line 18) (24) 00; 25. Allowable exempt amount without considering the net operating loss (See instructions) (25) 00; 26. Subtract line 25 from line 24 (26) 00; 27. Multiply line 26 by 20% (27) 00; 28. Multiply line 27 by 10% (28) 00; 29. Credit limitation (Subtract line 28 from line 23) (29) 00; 30. Alternative minimum credit for foreign taxes paid (This amount cannot exceed the amount on line 29. See instructions) (30) 00.

Part V Computation of the Alternative Minimum Tax

Table with 3 columns: Description, Code, and Amount. Rows include: 31. Tentative minimum tax after alternative minimum credit for foreign taxes paid (Subtract line 30 from line 23) (31) 00; 32. One percent (1%) of the purchases value of personal property of a related person (See instructions) (32) 00; 33. Tentative minimum tax (Enter the larger between lines 31 and 32) (33) 00; 34. Adjusted regular tax (See instructions) (34) 00; 35. Alternative minimum tax (Subtract line 34 from line 33. If line 34 is larger than line 33, enter zero, otherwise, enter the difference on Form 480.20, Part III, line 16) (35) 00.

Schedule B Corporation

Rev. 04.13



RECAPTURE OF CREDIT CLAIMED IN EXCESS, TAX CREDITS, AND OTHER PAYMENTS AND WITHHOLDINGS

20\_\_

B

Taxable year beginning on \_\_\_\_\_ and ending on \_\_\_\_\_

Taxpayer's Name

Employer Identification Number

Part I Recapture of Credit Claimed in Excess

B1

Table with 3 columns: Column A, Column B, Column C. Rows include Name of entity, Employer identification No., Credit for: Tourism Development, Solid Waste Disposal, Capital Investment Fund, etc.

Summary table for Part I with 4 rows: 1. Total credit claimed in excess, 2. Recapture of credit claimed in excess paid in previous year, 3. Recapture of credit claimed in excess paid this year, 4. Excess of credit due next year.

Part II Tax Credits (Do not include estimated tax payments. Refer to Part III of this Schedule)

B2

Table with 26 rows listing various tax credits such as Credit for taxes paid to the United States, Credit for increase in investment, Credit for alternative minimum tax, etc.

<b>Part III</b>		<b>Other Payments and Withholdings</b>		<b>B3</b>	
1.	Tax paid with automatic extension of time .....	(1)			00
2.	Estimated tax payments for 2012 .....	(2)			00
3.	Tax paid in excess on previous years credited to estimated tax (See instructions) .....	(3)			00
4.	Tax withheld at source .....	(4)			00
5.	Services rendered (Form 480.6B) .....	(5)			00
6.	Tax withheld at source on distributable share to partners of special partnerships (Form 480.60 SE) .....	(6)			00
7.	Tax withheld at source on distributable share to partners of partnerships (Form 480.60 S) .....	(7)			00
8.	Tax withheld at source on eligible interest .....	(8)			00
9.	Other payments and withholdings not included on the preceding lines (Submit detail) .....	(9)			00
10.	<b>Total Other Payments and Withholdings</b> (Add lines 1 through 9. Enter on Form 480.20, Part III, line 20) .....	(10)			00

<b>Part IV</b>		<b>Breakdown of the Purchase of Tax Credits</b>		<b>B4</b>	
Check the block corresponding to the act (or acts) under which you acquired the credit and enter the amount:					
1	<input type="checkbox"/> Tourism Development .....	(1)			00
2	<input type="checkbox"/> Solid Waste Disposal .....	(2)			00
3	<input type="checkbox"/> Capital Investment Fund .....	(3)			00
4	<input type="checkbox"/> Theatrical District of Santurce .....	(4)			00
5	<input type="checkbox"/> Film Industry Development .....	(5)			00
6	<input type="checkbox"/> Housing Infrastructure .....	(6)			00
7	<input type="checkbox"/> Construction or Rehabilitation of Rental Housing Projects for Low or Moderate Income Families .....	(7)			00
8	<input type="checkbox"/> Acquisition of an Exempt Business that is in the Process of Closing its Operations in Puerto Rico .....	(8)			00
9	<input type="checkbox"/> Conservation Easement .....	(9)			00
10	<input type="checkbox"/> Urban Centers Revitalization .....	(10)			00
11	<input type="checkbox"/> Economic Incentives (Research and Development) .....	(11)			00
12	<input type="checkbox"/> Economic Incentives (Strategic Projects) .....	(12)			00
13	<input type="checkbox"/> Economic Incentives (Industrial Investment) .....	(13)			00
14	<input type="checkbox"/> Green Energy Incentives (Research and Development) .....	(14)			00
15	<input type="checkbox"/> Other: .....	(15)			00
16	Total credit for the purchase of tax credits (Same as Part II, line 5) .....	(16)			00

Retention Period: Ten (10) years

Schedule B1 Corporation

Rev. 04.13



CREDITS FOR PURCHASE OF PRODUCTS MANUFACTURED IN PUERTO RICO AND PUERTO RICAN AGRICULTURAL PRODUCTS

Taxable year beginning on \_\_\_\_\_, \_\_\_\_\_ and ending on \_\_\_\_\_, \_\_\_\_\_

20\_\_

B1

Taxpayer's Name

Employer Identification Number

Part I Credit for Increase in Purchases of Puerto Rican Agricultural Products (Section 1051.07)

Table with 5 columns: Agricultural Production Group, Contract Number, Purchases Increase, Percentage Granted, Amount of Credit. Includes summary rows 1-3.

Part II Credit for Purchase of Products Manufactured in Puerto Rico (Section 1051.09)

Manufacturing Business: 1 Yes 2 No Exemption Decree: 3 Yes 4 No Annual Sales Volume in excess of \$5,000,000: 5 Yes 6 No

Eligible purchases of products manufactured in Puerto Rico:

Table with 5 columns: Manufacturing Business, Employer Identification Number, Manufacturing Business Identification Number, Eligibility question, Purchases Value.

Summary rows for Part II: 1. Total aggregate purchases value, 2. Aggregate purchases value of products manufactured in Puerto Rico during 3 of the 10 previous taxable years, 3. Average of aggregate purchases value, 4. Purchases increase, 5. Total available credit under Section 1051.09.

Part III Credit for Purchase of Products Manufactured in Puerto Rico (Processing of Tuna) (Section 1051.09)

Manufacturing Business: 1 Yes 2 No Exemption Decree: 3 Yes 4 No Annual Sales Volume in excess of \$5,000,000: 5 Yes 6 No

Eligible purchases of Tuna products manufactured in Puerto Rico:

Table with 5 columns: Manufacturing Business, Employer Identification Number, Manufacturing Business Identification Number, Eligibility question, Purchases Value.

Summary rows for Part III: 1. Total aggregate purchases value, 2. Amount of credit (Multiply by line 1 by 10%), 3. Credit for purchase of products manufactured in Puerto Rico, 4. Credit carried from previous years, 5. Total available credit under Section 1051.09.

Part IV Limitation of Credits for Purchases of Products Manufactured in PR and Puerto Rican Agricultural Products

Summary rows for Part IV: 1. Tax determined, 2. Recapture of credit claimed in excess, 3. Alternative minimum tax, 4. Branch profits tax, 5. Total tax liability, 6. Limitation of 1051.07 and 1051.09 credits, 7. Available credit under Sections 1051.07 and 1051.09, 8. Credit to be claimed under Sections 1051.07 and 1051.09.



**Schedule C Corporation**

Rev. 04.13



**CREDIT FOR TAXES PAID TO FOREIGN COUNTRIES, THE UNITED STATES, ITS TERRITORIES AND POSSESSIONS**

**20\_\_**

Taxable year beginning on \_\_\_\_\_, \_\_\_\_\_ and ending on \_\_\_\_\_, \_\_\_\_\_

Taxpayer's Name

Employer Identification Number

Computed for the alternative minimum tax

Place of incorporation:  Puerto Rico  State of the United States (Indicate) \_\_\_\_\_  Other (Indicate possession, territory or country) \_\_\_\_\_

**Part I Determination of Net Income from Sources Outside of Puerto Rico**

**30**

	Foreign Country, Territory or Possession of the United States			United States	Total
	A	B	C		
Name of the country, territory or possession .....					
<b>1. Gross income subject to tax from sources of the country, territory or possession:</b>					
a) Interest .....(1a)	00	00	00	00	00
b) Dividends .....(1b)	00	00	00	00	00
c) Rental income .....(1c)	00	00	00	00	00
d) Capital gain .....(1d)	00	00	00	00	00
e) Fiduciary income .....(1e)	00	00	00	00	00
f) Professions, industry or business .....(1f)	00	00	00	00	00
g) Others .....(1g)	00	00	00	00	00
h) Total gross income subject to tax .....(1h)	00	00	00	00	00
<b>2. Deductions and losses:</b>					
a) Expenses directly related to the income on line 1(h) .....(2a)	00	00	00	00	00
b) Losses from foreign sources .....(2b)	00	00	00	00	00
c) Pro rata share of other deductions:					
(i) Other expenses and deductions not related to a category of income .....(2c) <input type="text" value="00"/>					
(ii) Gross income subject to tax from all sources (See instructions) .....(2cii) <input type="text" value="00"/>					
(iii) Percentage of gross income subject to tax from sources of the country, territory or possession (Divide line 1(h) by line 2(c)(ii). Enter the result rounded to two decimal places) .....(2ciii)	%	%	%	%	%
(iv) Multiply line 2(c)(i) by line 2(c)(iii) .....(2civ)	00	00	00	00	00
d) Total deductions and losses (Add lines 2(a), 2(b) and 2(c)(iv)) .....(2d)	00	00	00	00	00
<b>3. Net income from sources of the country, territory or possession (Subtract line 2(d) from line 1(h)) .....(3)</b>	00	00	00	00	00

<b>Part II Taxes Paid to the United States, its Possessions and Foreign Countries</b>						
Credit for taxes: <input type="radio"/> Paid <input type="radio"/> Accrued	Foreign Country, Territory or Possession of the United States			United States	Total	
	A	B	C			
Name of the country, territory or possession .....						
1. Taxes paid or accrued directly by the taxpayer during the year (1)	00	00	00	00	00	00
2. Date paid or accrued ..... (2)	00	00	00	00	00	
3. Tax paid or accrued under Section 1050.01(f) regarding to dividends received from foreign subsidiary ..... (3)	00	00	00	00	00	00
4. Total tax paid or accrued ..... (4)	00	00	00	00	00	00

<b>Part III Determination of Credit</b>						
1. Net income subject to normal tax from sources of the country, territory or possession: (Part I, line 3) ..... (1)	00	00	00	00	00	00
2. Net income subject to normal tax from all sources (See instructions) ... (2)	00					
3. Limitation (Divide line 1 by line 2. Enter the result rounded to two decimal places) ..... (3)	%	%	%	%	%	%
4. Taxes to be paid in Puerto Rico (See instructions) ..... (4)	00					
5. Limitation by country, territory or possession:						
a) Multiply line 4 by line 3 ..... (5a)	00	00	00	00	00	00
b) Enter the smaller of line 5(a) or Part II, line 4 ..... (5b)	00	00	00	00	00	
6. Total limitation:						
a) Add line 5(b) from Columns A, B, C and United States ..... (6a)						00
b) Enter the smaller of the Total Column, line 5(a) or line 6(a). Transfer to Schedule B Corporation, Part II, line 1 ..... (6b)						00

**Schedule D Corporation**

Rev. 04.13



**GAINS AND LOSSES FROM SALE  
OR EXCHANGE OF PROPERTY AND  
COMPUTATION OF TAX AT  
PREFERENTIAL RATES**

**20**\_\_\_\_\_

Taxable year beginning on \_\_\_\_\_, \_\_\_\_\_ and ending on \_\_\_\_\_, \_\_\_\_\_

**D**

Taxpayer's Name

Employer Identification Number

**Part I Short-Term Capital Assets Gains and Losses (Held 6 months or less)**

Description and Location of Property	(A)	(B)	(C) Sale Price	(D) Adjusted Basis	(E) Selling Expenses	(F) Gain or Loss
	Date Acquired (Day/Month/Year)	Date Sold (Day/Month/Year)				
			00	00	00	00
			00	00	00	00
			00	00	00	00
			00	00	00	00

1. Net short-term capital gain (or loss) .....	(1)	00
2. Net short-term capital gain (or loss) from investment funds (Submit Schedule Q1) .....	(2)	00
3. Distributable share on net short-term capital gain (or loss) from Partnerships and Special Partnerships .....	(3)	00
4. Net short-term capital gain (or loss) attributable to direct investment and not through a Capital Investment Fund (Submit detail) .....	(4)	00
5. Net capital loss carryover (Submit detail) .....	(5)	00
6. <b>Net short-term capital gain (or loss)</b> (Add lines 1 through 5) .....	(6)	00

**Part II Long-Term Capital Assets Gains and Losses (Held more than 6 months)**

Description and Location of Property	Fill in if you Prepaid	(A)	(B)	(C) Sale Price	(D) Adjusted Basis	(E) Selling Expenses	(F) Gain or Loss (Act 132-2010 and Act 216-2011. See inst.)	(G) Gain or Loss
		Date Acquired (Day/Month/Year)	Date Sold (Day/Month/Year)					
	○			00	00	00	00	00
	○			00	00	00	00	00
	○			00	00	00	00	00
	○			00	00	00	00	00

7. Net long-term capital gain (or loss) .....	(7)	00
8. Distributable share on net long-term capital gain (or loss) from Partnerships and Special Partnerships .....	(8)	00
9. Net long-term capital gain (or loss) attributable to direct investment and not through a Capital Investment Fund (Submit detail) .....	(9)	00
10. <b>Net long-term capital gain (or loss)</b> (Add lines 7 through 9) .....	(10)	00

**Part III Long-Term Capital Assets Gains and Losses (Held more than 6 months) Realized under Special Legislation**

Description and Location of Property	Fill in if you Prepaid	(A)	(B)	(C) Sale Price	(D) Adjusted Basis	(E) Selling Expenses	(F) Gain or Loss
		Date Acquired (Day/Month/Year)	Date Sold (Day/Month/Year)				
	○			00	00	00	00

11. <b>Net long-term capital gain (or loss) under Act:</b> _____ (Decree No. _____) .....	(11)	00
---	------	----

Part IV Summary of Capital Gains and Losses		Column A		Column B		Column C	
Gains or Losses		Short - Term		Long - Term		Under Special Legislation	
12. Enter the gains determined on lines 6, 10 and 11 in the corresponding Column .....	(12)	00	00	00	00	00	00
13. Enter the losses determined on lines 6, 10 and 11 in the corresponding Column .....	(13)	00	00	00	00	00	00
14. If <b>any</b> of Columns B and C reflect a loss on line 13, apply the total to the gain in the other Column (See instructions) .....	(14)			00	00	00	00
15. Subtract line 14 from line 12. If any Column reflected a loss on line 13, enter zero here .....	(15)			00	00	00	00
16. Apply the loss from line 13, Column A proportionally to the gains in Columns B and C (See instructions) .....	(16)			00	00	00	00
17. Subtract line 16 from line 15 .....	(17)			00	00	00	00
18. Add the total of Columns B and C, line 17. However, if line 12 does not reflect <b>any</b> gain in Columns B and C, you must enter the total amount of line 13, Columns A, B and C .....	(18)						00
19. Net capital gain (or loss) (Add line 12, Column A and line 18) .....	(19)						00
20. Enter excess of net short-term capital gain over net long-term capital loss (See instructions) .....	(20)						00
21. Enter excess of net long-term capital gain over net short-term capital loss (See instructions) .....	(21)						00
22. Net capital gain (Add lines 20 and 21. Enter here and on Form 480.20, Part IV, line 9 or on the appropriate line of other returns) .....	(22)						00

Part V Determination of Alternative Tax - Capital Gain and Other Income Subject to Preferential Rates under the Code			
23. Net income .....	{ (a) Form 480.20, Part II, line 5 (b) Others - Enter the amount from the appropriate line of the return .....	(23)	00
24. Enter the amount from line 17, Column B .....	(24)	00	00
25. Enter the amount from line 17, Column C .....	(25)	00	00
26. Interest subject to preferential rate .....	(26)	00	00
27. Other income subject to preferential rate .....	(27)	00	00
28. Net income for purposes of alternative tax - capital gain and other income subject to preferential rates (Subtract lines 24 through 27 from line 23) .....	(28)	00	00

COMPUTATION OF NET INCOME TO DETERMINE ALTERNATIVE TAX

29. Net income for purposes of partial normal tax (Enter the amount from line 28) .....	(29)	00	00
30. Less: Credit for purposes of surtax (From the appropriate line of the return) (Check here if from Form AS 2652.1 <input type="checkbox"/> ) .....	(30)	00	00
31. Net income subject to partial surtax .....	(31)	00	00

COMPUTATION OF ALTERNATIVE TAX AND OTHER INCOME SUBJECT TO PREFERENTIAL RATES

32. Partial normal tax (Multiply line 28 by 20%) .....	(32)	00	00
33. Surtax (Net income subject to 5% \$ <input type="text"/> ) .....	(33)	00	00
34. Total tax (Add lines 32 and 33) .....	(34)	00	00
35. Plus: 15% of the amount on line 24 .....	(35)	00	00
36. Plus: 10% of the amount on line 26 .....	(36)	00	00
37. Plus: _____% (under special legislation) of the amount on line 25 (Enter the applicable percent) .....	(37)	00	00
38. Plus: _____% of the amount on line 27 .....	(38)	00	00
39. Alternative Tax - Capital gains and other income subject to preferential rates (Add lines 34 through 38. Enter the total here and transfer to Form 480.20, Part III, line 11 or to the appropriate line of other returns) .....	(39)	00	00

Part VI Determination of Tax at Preferential Rates under Special Acts			
40. Tax on distributable share of net income subject to preferential rates from partnerships and special partnerships (See instructions) (Net income \$ <input type="text"/> x Tax rate _____%) .....	(40)	00	00
41. Tax on net income subject to the 4% tax rate from the operations of an international financial entity that operates as a banking unit (Net income subject to 4% \$ <input type="text"/> x Tax rate 4%) .....	(41)	00	00
42. Total tax at preferential rates under special acts (Add lines 40 and 41. Enter here and transfer to Form 480.20, Part III, line 18) .....	(42)	00	00

Part VII Gains (or Losses) from Property Other than Capital Assets		(A) Date Acquired	(B) Date Sold	(C) Sale Price	(D) Adjusted Basis	(E) Selling Expenses	(F) Gain or Loss
				00	00	00	00
				00	00	00	00
				00	00	00	00
				00	00	00	00
43. Net gain (or loss) from property other than capital assets (Enter here and on Form 480.20, Part IV, line 10 or on the appropriate line of other returns) .....	(43)						00

**Schedule E**

Rev. Feb 19 13



**DEPRECIATION**

**20**\_\_

Taxable year beginning on \_\_\_\_\_, \_\_\_\_\_ and ending on \_\_\_\_\_, \_\_\_\_\_

Taxpayer's name	Social Security or Employer Identification Number
-----------------	---

1. Type of property (in case of a building, specify the material used in the construction).	2. Date acquired.	3. Original cost or other basis (exclude cost of land). Basis for automobiles may not exceed from \$30,000 per vehicle.	4. Depreciation claimed in prior years.	5. Estimated useful life to compute the depreciation.	6. Depreciation claimed this year.
---	-------------------	---	---	---	------------------------------------

37

(a) Current Depreciation					
			00	00	00
			00	00	00
			00	00	00
Total				00	00

(b) Flexible Depreciation					
			00	00	00
			00	00	00
			00	00	00
Total				00	00

(c) Accelerated Depreciation					
			00	00	00
			00	00	00
			00	00	00
Total				00	00

(d) Amortization (i.e. Goodwill)					
			00	00	00
			00	00	00
			00	00	00
Total				00	00

(e) Automobiles (See instructions)					
			00	00	00
			00	00	00
			00	00	00
Total				00	00

(f) Vehicles under lease (Form 480.7D) .....	(01)	00
--	------	----

**Note: Complete next line only if you are filling out Form 482.0 (Individual Income Tax Return - Long Form)**

**TOTAL:** (Add total of lines (a) through (f) of Column 6. Transfer to Schedules K, L, M and N Individual, whichever applies) ..... (10) 00

Schedule IE Corporation

Rev. 04.13



EXCLUDED AND EXEMPT INCOME

Taxable year beginning on \_\_\_\_\_ and ending on \_\_\_\_\_

20\_\_

Taxpayer's Name

Employer Identification Number

Part I Exclusions from Gross Income

Table with 3 columns: Description, Code, Amount. Rows include Plantation insurance, Income derived from discharge of debts, IVU Loto prizes, Other exclusions, and Total (Add lines 1 through 4).

Part II Exemptions from Gross Income

Table with 3 columns: Description, Code, Amount. Rows include Interest earned from various instruments (A-L), Dividends received from various sources (A-D), Recapture of bad debts, Income from news agencies or unions, Certain income related to the operation of an employees owned special corporation, Income received or earned in relation to the celebration of sports games, Income derived by the International Insurer or Holding Company of the International Insurer, Rents from the Historic Zone, Income from International Banking Entities, Income from vessels owners associations and mutual protection and indemnity, Income from buildings rented to the Government of Puerto Rico for public hospitals or schools, or health homes, Income derived by the taxpayer from the resale of personal property or services, Distributions of Amounts Previously Notified as Deemed Eligible Distributions, Distributions of Dividends and Benefits from Industrial Development Income, Rent of residential property, and Other exemptions.

**Schedule R Corporation**

Rev. 04.13



**PARTNERSHIPS AND SPECIAL PARTNERSHIPS**

Taxable year beginning on \_\_\_\_\_, \_\_\_\_\_ and ending on \_\_\_\_\_, \_\_\_\_\_

**20**\_\_

Taxpayer's Name \_\_\_\_\_

**R**

Employer Identification Number \_\_\_\_\_

Part I	Adjusted Basis Determination of a Partner in one or more Special Partnerships or Partnerships	Column A	Column B	Column C
Name of entity .....				
Employer identification number .....				
1.	Adjusted basis at the end of the previous taxable year ..... (1)	00	00	00
2.	Basis increase:			
(a)	Partner's distributable share on income and profits claimed on previous year (See instructions) ..... (2a)	00	00	00
(b)	Contributions made during the year ..... (2b)	00	00	00
(c)	Special partnership's capital assets gain ..... (2c)	00	00	00
(d)	Exempt income ..... (2d)	00	00	00
(e)	Farming income deduction granted by Section 1033.12 of the Code ..... (2e)	00	00	00
(f)	Other income or gains (See instructions) ..... (2f)	00	00	00
(g)	Total basis increase (Add lines 2(a) through 2(f)) ..... (2g)	00	00	00
3.	Basis decrease:			
(a)	Partner's distributable share on partnership's loss claimed on previous year ..... (3a)	00	00	00
(b)	Special partnership's capital assets loss ..... (3b)	00	00	00
(c)	Distributions during the year ..... (3c)	00	00	00
(d)	Credits claimed on the preceding year (See instructions) ..... (3d)	00	00	00
(e)	Withholding at source during the year ..... (3e)	00	00	00
(f)	No admissible expenses for the year ..... (3f)	00	00	00
(g)	Distributable share on losses from exempt operations during the year ..... (3g)	00	00	00
(h)	Donations (Do not apply to special partnerships) ..... (3h)	00	00	00
(i)	Total basis decrease (Add lines 3(a) through 3(h)) ..... (3i)	00	00	00
4.	<b>Adjusted Basis</b> (Add lines 1 and 2(g) less line 3(i). Transfer this amount to line 6(a)) ..... (4)	00	00	00
Part II	Determination of Net Income Loss in one or more Special Partnerships or Partnerships			
5.	(a) Partner's distributable share on partnership's loss for the year ..... (5a)	00	00	00
	(b) Loss carryover from previous years (See instructions) ..... (5b)	00	00	00
	(c) Total losses (Add lines 5(a) and 5(b)) ..... (5c)	00	00	00
6.	(a) Adjusted Basis (Part I, line 4) ..... (6a)	00	00	00
	(b) Partnership's debts under Tourism Incentives Act or Tourism Development Act attributable to partner (See instructions) .. (6b)	00	00	00
	(c) Total partner's adjusted basis (Add lines 6(a) and 6(b)) ..... (6c)	00	00	00
7.	Distributable share on partnership's net income for the year (Form 480.60 S or 480.60 SE) (See instructions) ..... (7)	00	00	00
8.	Excess of net income (or loss) on distributable share (Subtract line 5(c) from line 7) ..... (8)	00	00	00
	<ul style="list-style-type: none"> <li>If line 8 for all Columns is zero or more than zero, do not complete line 9 and transfer the sum of these amounts to line 10.</li> <li>If line 8 is less than zero for any of the Columns, continue with line 9.</li> </ul>			
9.	Available losses (The smaller of lines 6(c) or 8) ..... (9)	00	00	00
10.	Total income from this Schedule (Add the income determined on line 8, Columns A through C) ..... (10)			00
11.	Total income from Schedule R1 Corporation (Enter the amount on line 10, Part II of all Schedules R1 Corporation included) ..... (11)			00
12.	Total losses from this Schedule (Add losses determined on line 9, Columns A through C) ..... (12)			00
13.	Total losses from Schedule R1 Corporation (Enter the amount on line 11, Part II of all Schedules R1 Corporation included) ..... (13)			00
14.	Net income or loss (Subtract lines 12 and 13 from lines 10 and 11. If the result is more than zero, transfer this amount to Form 480.20, Part IV, line 15. If the result is less than zero, carryforward for future years) (See instructions) ..... (14)			00



**PARTNERSHIPS AND SPECIAL PARTNERSHIPS  
(COMPLEMENTARY)**

Taxable year beginning on \_\_\_\_\_, \_\_\_\_\_ and ending on \_\_\_\_\_, \_\_\_\_\_

**20**\_\_

Taxpayer's Name \_\_\_\_\_

**R**

Employer Identification Number \_\_\_\_\_

Part I	Adjusted Basis Determination of a Partner in one or more Special Partnerships or Partnerships	Column A	Column B	Column C
	Name of entity .....			
	Employer identification number .....			
1.	Adjusted basis at the end of the previous taxable year ..... (1)	00	00	00
2.	Basis increase:			
(a)	Partner's distributable share on income and profits claimed on previous year (See instructions) ..... (2a)	00	00	00
(b)	Contributions made during the year ..... (2b)	00	00	00
(c)	Special partnership's capital assets gain ..... (2c)	00	00	00
(d)	Exempt income ..... (2d)	00	00	00
(e)	Farming income deduction granted by Section 1033.12 of the Code ..... (2e)	00	00	00
(f)	Other income or gains (See instructions) ..... (2f)	00	00	00
(g)	Total basis increase (Add lines 2(a) through 2(f)) ..... (2g)	00	00	00
3.	Basis decrease:			
(a)	Partner's distributable share on partnership's loss claimed on previous year ..... (3a)	00	00	00
(b)	Special partnership's capital assets loss ..... (3b)	00	00	00
(c)	Distributions during the year ..... (3c)	00	00	00
(d)	Credits claimed on the preceding year (See instructions) ..... (3d)	00	00	00
(e)	Withholding at source during the year ..... (3e)	00	00	00
(f)	No admissible expenses for the year ..... (3f)	00	00	00
(g)	Distributable share on losses from exempt operations during the year ..... (3g)	00	00	00
(h)	Donations (Do not apply to special partnerships) ..... (3h)	00	00	00
(i)	Total basis decrease (Add lines 3(a) through 3(h)) ..... (3i)	00	00	00
4.	<b>Adjusted Basis</b> (Add lines 1 and 2(g) less line 3(i). Transfer this amount to line 6(a)) ..... (4)	00	00	00
Part II	Determination of Net Income Loss in one or more Special Partnerships			
5.	(a) Partner's distributable share on partnership's loss for the year ..... (5a)	00	00	00
	(b) Loss carryover from previous years (See instructions) ..... (5b)	00	00	00
	(c) Total losses (Add lines 5(a) and 5(b)) ..... (5c)	00	00	00
6.	(a) Adjusted Basis (Part I, line 4) ..... (6a)	00	00	00
	(b) Partnership's debts under Tourism Incentives Act or Tourism Development Act attributable to partner (See instructions) ..... (6b)	00	00	00
	(c) Total partner's adjusted basis (Add lines 6(a) and 6(b)) ..... (6c)	00	00	00
7.	Distributable share on partnership's net income for the year (Form 480.60 S or 480.60 SE) (See instructions) ..... (7)	00	00	00
8.	Excess of net income (or loss) on distributable share (Subtract line 5(c) from line 7) ..... (8)	00	00	00
	<ul style="list-style-type: none"> <li>If line 8 for all Columns is zero or more than zero, do not complete line 9 and transfer the sum of these amounts to line 10)</li> <li>If line 8 is less than zero for any of the Columns, continue with line 9.</li> </ul>			
9.	Available losses (The smaller of line 6(c) or 8) ..... (9)	00	00	00
10.	Total income (Add the income determined on line 8, Columns A through C. Transfer to Schedule R Corporation, Part II, line 11) ..... (10)			00
11.	Total losses (Add the losses determined on line 9, Columns A through C. Transfer to Schedule R Corporation, Part II, line 13) ..... (11)			00



Schedule S Corporation

Rev. 04.13



TAXABLE FARMING PROFIT (BONAFIDE FARMER)

20\_\_

Taxable year beginning on \_\_\_\_\_ and ending on \_\_\_\_\_



Taxpayer's Name

Employer Identification Number

Part I Income

Table with 9 rows for income calculation. Line 1: Net sales (1) 00. Line 2: Cost of goods sold or direct costs of production. Sub-rows a-f: Beginning inventory, Purchase of materials, Direct wages, Other direct costs, Total, Less: Ending inventory. Line 2g: Total cost of goods sold (2g) 00. Line 3: Gross income (3) 00. Line 4: Less: Operating expenses and other costs (4) 00. Line 5: Net income (5) 00. Line 6: Less: Net operating loss from previous years (6) 00. Line 7: Adjusted net income (7) 00. Line 8: Less: Exempt amount (8) 00. Line 9: Taxable farming profit (9) 00.

Part II Operating Expenses and Other Costs

Table with 22 rows for operating expenses. Line 10: Compensation to officers or partners (10) 00. Line 11: Wages, commissions and bonuses to employees (11) 00. Line 12: Commissions to businesses (12) 00. Line 13: Payroll expenses (13) 00. Line 14: Contributions to pension or other qualified plans (14) 00. Line 15: Medical or hospitalization insurance (15) 00. Line 16: Interest (16) 00. Line 17: Rent (17) 00. Line 18: Property tax: (a) Personal (b) Real (18) 00. Line 19: Other taxes, patents and licenses (19) 00. Line 20: Motor vehicles expenses (Mileage) (20) 00. Line 21: Other motor vehicles expenses (21) 00. Line 22: Utilities (22) 00. Line 23: Insurance (23) 00. Line 24: Travel expenses (24) 00. Line 25: Meal and entertainment expenses (25) 00. Line 26: Professional services (26) 00. Line 27: Repairs (27) 00. Line 28: Depreciation and amortization (28) 00. Line 29: Bad debts (29) 00. Line 30: Other expenses (30) 00. Line 31: Total (Add lines 10 through 30. Enter in Part I, line 4 of this Schedule) (31) 00.

**Schedule T Corporation**

Rev. 04.13



**ADDITION TO THE TAX FOR FAILURE TO PAY  
ESTIMATED TAX IN CASE OF  
CORPORATIONS**

20\_\_

Taxable year beginning on \_\_\_\_\_, \_\_\_\_\_ and ending on \_\_\_\_\_, \_\_\_\_\_

**T**

Taxpayer's Name

Employer Identification Number

**Part I Determination of the Minimum Amount of Estimated Tax to Pay**

1. Tax liability (Add lines 12, 13 and 16 of Part III, page 1 of the return) .....	(1)	00
2. Credits and overpayments (See instructions) .....	(2)	00
3. Estimated tax (Subtract line 2 from line 1. If it is zero or less, do not complete this Schedule) .....	(3)	00
4. Line 1 multiplied by 90% .....	(4)	00
5. Total tax determined as it appears on the income tax return from the previous year .....	(5)	00
6. Enter the smaller of lines 4 and 5 .....	(6)	00
7. Subtract line 2 from line 6 (If it is less than zero, enter zero). This is the minimum amount of estimated tax that you should have paid .....	(7)	00

**Part II Addition to the Tax for Failure to Pay**

Section A - Failure to Pay		Due date			
		(a) First Installment	(b) Second Installment	(c) Third Installment	(d) Fourth Installment
1 <input type="radio"/> CALENDAR YEAR .....					
2 <input type="radio"/> FISCAL YEAR (Enter the corresponding dates) .....					
8. Amount of estimated tax per installment (See instructions) .....	(8)	00	00	00	00
9. Amount of estimated tax paid per installment (See instructions) .....	(9)	00	00	00	00
10. Payment date (See instructions) .....	(10)				
11. Line 17 from previous column .....	(11)		00	00	00
12. Add lines 9 and 11 .....	(12)	00	00	00	00
13. Subtract line 8 from line 12 (If it is less than zero, enter zero) .....	(13)	00	00	00	00
14. <b>Failure to Pay</b> (If line 13 is zero, subtract line 12 from line 8, otherwise, enter zero) .....	(14)	00	00	00	00
15. Add lines 14 and 16 from previous column .....	(15)		00	00	
16. If line 15 is equal or larger than line 13, subtract line 13 from line 15 and go to line 11 of next column. Otherwise, go to line 17 .....	(16)		00	00	
17. Overpayment (If line 13 is larger than line 15, subtract line 15 from line 13, and go to line 11 of next column. Otherwise, enter zero) .....	(17)	00	00	00	
<b>Section B - Penalty</b>					
18. Multiply line 14 by 10% .....	(18)	00	00	00	00
19. If the date indicated on line 10 for any installment is after its due date and: • line 18 is zero, multiply the result of line 8 less line 17 from previous column by 10%; or • line 18 is more than zero, multiply the result of line 8 less line 17 from previous column by 10% and subtract the amount reflected on line 18. (See instructions) .....	(19)	00	00	00	00
20. Add lines 18 and 19 .....	(20)	00	00	00	00
21. Addition to the Tax for Failure to Pay Estimated Tax (Add the amounts from columns of line 20. Transfer to line 24 of Part III, page 1 of the return) .....	(21)				00