

Liquidator:	Reviewer:	2019	GOVERNMENT OF PUERTO RICO DEPARTMENT OF THE TREASURY	2019	Serial Number
Field audited by:		Corporation Income Tax Return			<input type="checkbox"/> AMENDED RETURN
Date ____/____/____		TAXABLE YEAR BEGINNING ON _____ AND ENDING ON _____			TAXABLE YEAR: 1 <input type="checkbox"/> CALENDAR 2 <input type="checkbox"/> FISCAL 3 <input type="checkbox"/> 52-53 WEEKS
R	M	N			Payment Stamp

Taxpayer's Name		Employer Identification Number	
Postal Address		Department of State Registry No.	
Zip Code		Industrial Code	Municipal Code
Location of Principal Industry or Business - Number, Street, City		Merchant's Registration Number	
Type of Principal Industry or Business (i.e. Hardware store, Cafeteria, etc.)		Telephone Number - Extension	
Date Incorporated		Receipt No. _____	
Day ____ / Month ____ / Year ____		Amount: _____	
Manufacturer number (if applicable)	NAICS Code	Place Incorporated	Type of Entity
Check the corresponding box, if applicable		1 <input type="checkbox"/> Domestic (PR)	
1 <input type="checkbox"/> First return	2 <input type="checkbox"/> Last return	2 <input type="checkbox"/> Foreign	
Contracts with Governmental Entities		E-mail Address of the Contact Person	
<input type="checkbox"/> Yes	<input type="checkbox"/> No	Indicate if you are member of a group of related entities	
		<input type="checkbox"/> Yes <input type="checkbox"/> No	
		Group number	

GO TO PAGE 3 TO DETERMINE YOUR REFUND OR PAYMENT.			
Refund	1. AMOUNT OVERPAID (Part IV, line 21. Indicate distribution on lines A, B, C and D)	(1)	00
	A) To be credited to estimated tax for 2020	(1A)	00
	B) Contribution to the San Juan Bay Estuary Special Fund	(1B)	00
	C) Contribution to the University of Puerto Rico Special Fund	(1C)	00
	D) TO BE REFUNDED	(1D)	00
Payment	2. AMOUNT OF TAX DUE (Part IV, line 21)	(2)	00
	3. Less: Amount paid (a) With Return	(3a)	00
	(b) Interests (See instructions)	(3b)	00
	(c) Surcharges and Penalties (See instructions)	(3c)	00
4. BALANCE OF TAX DUE (Subtract line 3(a) from line 2 and add lines 3(b) and 3(c))	(4)	00	

OATH

I, the undersigned (president, vice-president, treasurer, assistant treasurer or other principal or finance officer of the corporation for which this income tax return is made), 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, made in good faith, pursuant to the Puerto Rico Internal Revenue Code of 2011, as amended, and the Regulations thereunder.

Authorized Officer's Name and Title

Authorized Officer's Signature

Date

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)	Self-employed Specialist <input type="checkbox"/>	Registration Number	FOR THE CPA USE ONLY	
Firm's name			CPA License Number	CPA Association Stamp
Address	Zip Code		CPA Association Stamp Number	
Specialist's Signature	Date			

Part I		Determination of the Gross Operating Income	
A. Sale of goods income			
1. Net sales of goods or products (See instructions)	(1)		00
2. Less: Cost of goods sold or direct costs of production (From Part V, line 7)	(2)		00
3. Gross profit (or loss) on sale of goods or products (Subtract line 2 from line 1) (Gross profit margin percentage: 2018 _____% 2019 _____%. See instructions)	(3)		00
B. Manufacturing income			
4. Income	(4)		00
5. Less: Cost of goods sold or direct costs of production (From Part V, line 7)	(5)		00
6. Manufacturing gross profit (or loss) (Subtract line 5 from line 4) (Gross profit margin percentage: 2018 _____% 2019 _____%. See instructions)	(6)		00
C. Services income			
7. Gross income on sale of services	(7)		00
D. Other income			
8. Net capital gain (Schedule D Corporation, Part IV, line 21)	(8)		00
9. Net gain (or loss) from the sale of property other than capital assets (Schedule D Corporation, Part V, line 22)	(9)		00
10. Rent (Total \$ _____) (See instructions)	(10)		00
11. Interests: (a) Subject to the preferential rate of 10% _____ (b) Others _____	(11)		00
12. Income from commissions	(12)		00
13. Dividends from corporations: (a) Domestic _____ (b) Foreign _____	(13)		00
14. Distributable share on net income from partnerships and special partnerships (Schedule R Corporation, Part III, line 5)	(14)		00
15. Distributable share on net income subject to preferential rates from partnerships and special partnerships (See instructions)	(15)		00
16. Net income derived from the operations of an international financial entity that operates as a bank unit	(16)		00
17. Freight and fares	(17)		00
18. Royalties	(18)		00
19. Debt discharge (Form 480.6A)	(19)		00
20. Public shows	(20)		00
21. Other payments reported in a Form 480.6A or 480.6B	(21)		00
22. Miscellaneous income (Submit detail)	(22)		00
23. Total income (Add lines 3 and 6 through 22)	(23)		00
24. Less: Exempt amount under Act 135-2014 (See instructions) (Services income \$ _____)	(24)		00
25. Total income after the exemption under Act 135-2014 (Subtract line 24 from line 23)	(25)		00

Part II		Deductions		Regular Tax	Alternative Minimum Tax
A. Deductions reported on informative return:					
1. Compensation to directors (See instructions Part X)	(1)		00		00
2. Compensation to officers (See instructions Part XI)	(2)		00		00
3. Salaries, commissions and bonuses to employees (See instructions)	(3)		00		00
4. Salaries paid to young university students (Total \$ _____) "Programa de Pasantias del Departamento de Hacienda" (Total \$ _____)	(4)		00		00
5. Services rendered	(5)		00		00
6. Services subcontracted	(6)		00		00
7. Commissions to businesses	(7)		00		00
8. Lease, rent and royalties paid (See instructions) (a) Personal \$ _____ (b) Real \$ _____	(8)		00		00
9. Health or accidents plans	(9)		00		00
10. Property, contingency, public liability insurance and bonds (See instructions)	(10)		00		00
11. Telecommunication services	(11)		00		00
12. Internet and cable or satellite television services	(12)		00		00
13. Electric power	(13)		00		00
14. Water and sewage	(14)		00		00
15. Advertising	(15)		00		00
16. Royalties	(16)		00		00
17. Special contribution for professional advisory services under Act 48-2013 (See instructions)	(17)		00		00
18. Mortgage interests (See instructions)	(18)		00		00
19. Interests paid in automobiles financing lease	(19)		00		00
20. Professional associations fees paid for the benefit of employees	(20)		00		00
21. Homeowners association fees paid	(21)		00		00
22. Certain other expenses (See instructions)	(22)		00		00
23. Subtotal (Add lines 1 through 22)	(23)		00		00
B. Deductions not reported on informative returns:					
24. Interests on business debts	(24)		00		00
25. Property taxes, patents and licenses:					
(a) Property tax: Personal \$ _____ Real \$ _____	(25a)		00		00
(b) Other taxes: Patents \$ _____ Licenses \$ _____ Others \$ _____	(25b)		00		00
(c) State Insurance Fund premiums	(25c)		00		00
(d) Sales and use tax (See instructions)	(25d)		00		00
26. Depreciation and amortization (See instructions. Submit Schedule E)	(26)		00		00
27. Depreciation for businesses with volume less or equal to \$3,000,000 (Submit Schedule E1)	(27)		00		00
28. Contributions to pension or other qualified plans (See instructions. Submit Form AS 6042.1)	(28)		00		00
29. Deduction for employers who employ handicapped persons (See instructions)	(29)		00		00
30. Subtotal (Add lines 24 through 29)	(30)		00		00

C. Other deductions: Indicate the deductions that were validated with an Agreed Upon Procedures Report ("AUP")		Regular Tax	Alternative Minimum Tax
31. Social Security (FICA)	(31)	00	00
32. Unemployment insurance	(32)	00	00
33. Automobiles expenses (Mileage) (See instructions)	AUP <input type="radio"/> (33)	00	00
34. Other motor vehicle expenses (See instructions)	AUP <input type="radio"/> (34)	00	00
35. Repairs and maintenance (See instructions)	AUP <input type="radio"/> (35)	00	00
36. Travel expenses (Total expenses \$)	AUP <input type="radio"/> (36)	00	00
37. Meal and entertainment expenses (Total expenses \$) (See instructions)	AUP <input type="radio"/> (37)	00	00
38. Materials and office supplies	AUP <input type="radio"/> (38)	00	00
39. Materials used directly in the trade or business	AUP <input type="radio"/> (39)	00	00
40. Stamps, vouchers and fees	AUP <input type="radio"/> (40)	00	00
41. Shipping and postage charges	AUP <input type="radio"/> (41)	00	00
42. Uniforms	AUP <input type="radio"/> (42)	00	00
43. Parkings and toll	AUP <input type="radio"/> (43)	00	00
44. Office expenses (See instructions)	AUP <input type="radio"/> (44)	00	00
45. Bank fees	AUP <input type="radio"/> (45)	00	00
46. Contributions to educational contributions accounts for the employee's beneficiaries (See instructions)	AUP <input type="radio"/> (46)	00	00
47. Expenses incurred or paid to stockholders, persons or related entities outside of Puerto Rico (See instructions) (Total \$)	AUP <input type="radio"/> (47)	00	00
48. Deduction for expenses incurred or paid to stockholders, persons or related entities, fully deductible (See instructions)	AUP <input type="radio"/> (48)	00	00
49. Losses from fires, storm, other casualties or theft (See instructions)	AUP <input type="radio"/> (49)	00	00
50. Bad debts (See instructions)	AUP <input type="radio"/> (50)	00	00
51. Management fees	AUP <input type="radio"/> (51)	00	00
52. Expenses in property leased to the Puerto Rico Industrial Development Company or Warehouse of the Puerto Rico Trade and Export Company (See instructions)	AUP <input type="radio"/> (52)	00	00
53. Expenses for dues, subscriptions and memberships	AUP <input type="radio"/> (53)	00	00
54. Expenses related to licenses and computer programs that cannot be capitalized (See instructions)	AUP <input type="radio"/> (54)	00	00
55. Other deductions (Submit detail)	AUP <input type="radio"/> (55)	00	00
56. Subtotal (Add lines 31 through 55)	(56)	00	00
57. Charitable contributions	AUP <input type="radio"/> (57)	00	00
58. Deduction under Act 185-2014 (See instructions)	AUP <input type="radio"/> (58)	00	00
59. Total deductions (Add lines 23, 30, 56, 57 and 58)	(59)	00	00
Part III	Determination of Net Income (or Loss) Subject to Normal Tax and Surtax	Regular Tax	Alternative Minimum Tax
1. Total income (From Part I, line 25)	(1)	00	00
2. Total deductions (From Part II, line 59)	(2)	00	00
3. Net operating income (or loss) (Subtract line 2 from line 1)	(3)	00	00
4. Less: Net operating loss deduction from preceding year (Submit Schedule G Corporation. Cannot exceed 90% of line 3)	(4)	00	
5. Total income (or loss) after the net operating loss deduction from preceding year	(5)	00	00
6. Taxable farming income (Schedule S Corporation, Part III, line 7)	(6)	00	00
7. Net income (or loss) (Add lines 5 and 6)	(7)	00	00
8. Less: Dividends received from domestic corporations (See instructions)	(8)	00	
9. Net income subject to normal tax (Subtract line 8 from line 7)	(9)	00	
10. Less: Surtax net income deduction (Check here if comes from Form AS 2652.1 <input type="checkbox"/>)	(10)	00	
11. Net income subject to surtax (Subtract line 10 from line 9)	(11)	00	
Part IV	Computation of Tax		
1. Normal tax (Multiply line 9, Part III by: 1 <input type="checkbox"/> 18.5% 2 <input type="checkbox"/> 15% 3 <input type="checkbox"/> 10% 4 <input type="checkbox"/> 5% 5 <input type="checkbox"/> Optional tax (Schedule X Corp., Sec. 1022.07) 6 <input type="checkbox"/> ___%)	(1)		00
2. Surtax (See instructions)	(2)		00
3. Total Tax (Add lines 1 and 2)	(3)		00
4. Alternative Tax - Capital Gains and Preferential Rates (Schedule D1 Corporation, line 9)	(4)		00
5. Tax determined before the credit for taxes paid to foreign countries, the United States, its states, territories and possessions (Line 3 or 4, whichever is smaller, provided that line 4 is more than zero)	(5)		00
6. Credit for taxes paid to foreign countries, the United States, its states, territories and possessions (Schedule C Corporation, Part III, line 6(b))	(6)		00
7. Tax liability before the alternative minimum tax (Subtract line 6 from line 5)	(7)		00
8. Alternative minimum tax in excess of the regular tax (Schedule A Corporation, Part V, line 34)	(8)		00
9. Tax liability before the tax credits (Add lines 7 and 8)	(9)		00
10. Recapture of credit claimed in excess (Schedule B Corporation, Part I, line 3)	(10)		00
11. Credit for alternative minimum tax paid in previous years (Schedule A Corporation, Part VI, line 4)	(11)		00
12. Tax credits (Schedule B Corporation, Part II, line 27)	(12)		00
13. Tax responsibility before the branch profits tax or deemed dividend tax (Add lines 9 and 10 less lines 11 and 12)	(13)		00
14. Branch profits tax (Form AS 2879, Branch Profits Tax, line 11)	(14)		00
15. Deemed dividend tax (See instructions) (Form AS 2877, Deemed Dividend Tax, line 13)	(15)		00
16. Total Tax Liability (Add lines 13 through 15)	(16)		00
17. Less: Other Payments and Withholdings (Schedule B Corporation, Part III, line 11)	(17)		00
18. Balance of tax due (If line 17 is less than line 16, enter the difference here, otherwise, on line 19)	(18)		00
19. Excess of tax paid or withheld (See instructions)	(19)		00
20. Addition to the Tax for Failure to Pay Estimated Tax (Schedule T Corporation, Part II, line 21)	(20)		00
21. BALANCE: * If line 19 is more than the sum of lines 18 and 20, you have an overpayment. Enter the difference here and on line 1, page 1. * If line 19 is less than the sum of lines 18 and 20, you have a balance of tax due. Enter difference here and on line 2, page 1. * If the difference between line 19 and the sum of lines 18 and 20 is equal to zero, enter zero here and sign your return on page 1.	(21)		00

THE AMOUNT REFLECTED ON LINE 21 SHALL BE TRANSFERRED TO THE CORRESPONDING LINE OF PAGE 1.

Part V Cost of Goods Sold			
1. Inventory at the beginning of the year 1 <input type="checkbox"/> "C" 2 <input type="checkbox"/> "C" or "MV"	(1)		00
2. Purchase of materials or merchandise	(2)		00
3. Direct wages	(3)		00
4. Other direct costs (From Part VI, line 17)	(4)		00
5. Cost of good available for sale (Add lines 1 through 4)	(5)		00
6. Less: Inventory at the end of the year 1 <input type="checkbox"/> "C" 2 <input type="checkbox"/> "C" or "MV"	(6)		00
7. Total cost of goods sold or direct costs of production (Subtract line 6 from line 5. Transfer to Part I, line 2 or 5, as applicable)	(7)		00

Part VI Other Direct Costs			
Item	Amount	Item	Amount
1. Salaries, wages and bonuses	(1) 00	10. Electric power	(10) 00
2. Social security tax (FICA)	(2) 00	11. Water and sewage	(11) 00
3. Unemployment tax	(3) 00	12. Rent	(12) 00
4. State Insurance Fund Premiums	(4) 00	13. Packing products expenses	(13) 00
5. Health or accident plans	(5) 00	14. Meals expenses paid to production employees Total \$	(14) 00
6. Property, contingency and public liability insurance and bonds	(6) 00	15. Depreciation (Submit Schedule E)	(15) 00
7. Excise taxes / Use taxes	(7) 00	16. Other direct costs (Submit detail)	(16) 00
8. Sales and use tax on imports	(8) 00	17. Total other direct costs (Add lines 1 through 16. Transfer to Part V, line 4)	(17) 00
9. Repairs and maintenance	(9) 00		

Part VII Comparative Balance Sheet						
Assets	Beginning of the Year			Ending of the Year		
		Total			Total	
1. Cash on hand and in banks	(1)	00	(1)	00		00
2. Accounts receivable	(2)	00	(2)	00		00
3. Less: Reserve for bad debts	(3)	(00)	(3)	(00)		00
4. Inventories	(4)	00	(4)			00
5. Other current assets	(5)	00	(5)			00
6. Notes receivable	(6)	00	(6)			00
7. Investments	(7)	00	(7)			00
8. Depreciable assets	(8)	00	(8)	00		00
9. Less: Reserve for depreciation	(9)	(00)	(9)	(00)		00
10. Loans receivable from stockholders or related entities	(10)	00	(10)			00
11. Land	(11)	00	(11)			00
12. Other long-term assets	(12)	00	(12)			00
13. Total Assets	(13)	00	(13)			00
Liabilities and Stockholder's Equity						
Liabilities						
14. Accounts payable	(14)	00	(14)	00		00
15. Accrued expenses (not paid)	(15)	00	(15)	00		00
16. Other current liabilities	(16)	00	(16)	00		00
17. Long-term notes payable	(17)	00	(17)	00		00
18. Notes payable to stockholders or related entities	(18)	00	(18)	00		00
19. Other long-term liabilities	(19)	00	(19)	00		00
20. Total Liabilities	(20)	00	(20)			00
Stockholder's Equity						
21. Capital stock						
(a) Preferred stocks	(21a)	00	(21a)	00		00
(b) Common stocks	(21b)	00	(21b)	00		00
22. Additional paid in capital	(22)	00	(22)	00		00
23. Retained earnings	(23)	00	(23)	00		00
24. Reserve	(24)	00	(24)	00		00
25. Total Stockholder's Equity	(25)	00	(25)			00
26. Total Liabilities and Stockholder's Equity	(26)	00	(26)			00

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

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 income (Schedule IE Corp., Part II, line 22)		
3. Excess of capital losses over capital gains (3)		00	\$		
4. Taxable income not recorded on books this year (Itemize, use schedule if necessary)			(b) Excluded income (Schedule IE Corp., Part I, line 5)		
(a) \$			\$		
(b) \$			(c) \$		
(c) \$			(d) \$		
(d) \$			(e) \$		
(e) \$			(f) \$		
(f) \$			(g) \$		
Total (4)		00	Total (7)		00
5. Expenses recorded on books this year not claimed on this return (Itemize, use schedule if necessary)			8. Deductions on this tax return not charged against book income this year (Itemize, use schedule if necessary)		
(a) Meal and entertainment (amount not deductible) \$			(a) Depreciation \$		
(b) Depreciation \$			(b) \$		
(c) Vessels, airships and property located outside of P.R. \$			(c) \$		
(d) Expenses incurred or paid to stockholders, persons or related entities (amount not deductible) \$			(d) \$		
(e) Travel and lodging expenses (amount not deductible) \$			(e) \$		
(f) Indemnification for harassment and related costs \$			(f) \$		
(g) \$			(g) \$		
(h) \$			(h) \$		
(i) \$			(i) \$		
(j) \$			Total (8)		00
Total (5)		00	9. Total (Add lines 7 and 8) (9)		00
6. Total (Add lines 1 through 5) (6)		00	10. Net taxable income (or loss) per return (Subtract line 9 from line 6) (10)		00

Part IX Analysis of Retained Earnings per Books

1. Balance at the beginning of the year (1)		00	5. Distributions:	(a) Cash (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)		
4. Total (Add lines 1, 2 and 3) (4)		00 (6)		00
			7. Total (Add lines 5 and 6) (7)		00
			8. Balance at end of year (Subtract Line 7 from line 4) ... (8)		00

Part X Compensation to Directors

Name of director	Social security number	Percentage of time devoted to industry or business	Percentage of stocks owned		Compensation
			Common	Preferred	
					00
					00
					00
					00
Total compensation to directors (Transfer to Part II, line 1)					00

Part XI Compensation to Officers

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
Total compensation to officers (Transfer to Part II, line 2)					00

Part XII Questionnaire

		YES	NO	N/A			YES	NO	N/A
1.	If a foreign corporation, indicate if the trade or business in Puerto Rico was held as a branch	(1)			10.	Did the corporation claim expenses connected to:			
2.	If a branch, indicate the percent that represents the income from sources within Puerto Rico from the total income of the corporation: _____%				(a)	Housing? (except business employees)	(10a)		
3.	Did the corporation keep any part of its records on a computerized system during this year?	(3)			(b)	Employees attending conventions or meetings outside Puerto Rico or the United States?	(10b)		
4.	The corporation's books are in care of: Name _____ Address _____ E-mail _____ Telephone _____				11.	Did the corporation distribute dividends other than stock dividends or distributions in liquidation in excess of the corporation's current and accumulated earnings? If "Yes", indicate the amount \$ _____	(11)		
5.	Indicate the book accounting method for tax purposes: 1 <input type="checkbox"/> Cash 2 <input type="checkbox"/> Accrual 3 <input type="checkbox"/> Other (specify): _____				12.	Is the corporation a partner in any special partnership or partnership? (If more than one, submit detail) Name of the Special Partnership or Partnership _____ Employer identification number _____	(12)		
6.	Did the corporation file the following documents?: (a) Informative Return (Forms 480.6A, 480.6B, 480.6C, 480.6SP) (6a)				13.	Did you receive exempt income? (Submit Schedule IE Corporation)	(13)		
	(b) Withholding Statement (Form 499R-2/W-2PR)	(6b)			14.	Enter the amount corresponding to charitable contributions to municipalities included in Part II, line 57: \$ _____			
7.	The volume of business of the entity or group of related entities is \$3,000,000 or more? (a) Are audited financial statements or agreed-upon procedures signed by a CPA licensed in Puerto Rico included with this return, as established in Section 1061.15 of the Code? (See instructions)	(7a)			15.	Indicate if insurance premiums were paid to an unauthorized insurer	(15)		
	Number of the CPA Association Stamp _____				16.	Employer's number assigned by the Department of Labor and Human Resources: _____			
	(b) Do you include Schedule PCI with Uncertain Tax Position?	(7b)			17.	Number of stockholders: _____			
8.	Number of employees during the year: _____				(a)	Is any of the corporation stockholders a nonresident individual or foreign corporation?	(17a)		
9.	Did the corporation claim expenses related to the ownership, use, maintenance and depreciation of: (a) Vehicles?	(9a)			(1)	Indicate the participation percentage of the total nonresident stockholders or foreign corporations _____%			
	(b) Vessels?	(9b)			(2)	Indicate the origin country of the foreign stockholder _____			
	(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)			18.	Did you incur or pay expenses to stockholders, persons or related entities outside of Puerto Rico?	(18)		
	(c) Aircrafts?	(9c)			(a)	Do you include a pricing transfer study?	(18a)		
	(1) Did more than 80% of the total income was derived from activities exclusively related to transportation of passengers or cargo or lease?	(9c1)			(b)	Did you receive an administrative determination that allows you to claim the total deduction?	(18b)		
	(d) Residential property outside of Puerto Rico?	(9d)			19.	Did the corporation claim expenses related to services provided by nonresidents of Puerto Rico?	(19)		
	(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)			(a)	Did you pay the corresponding sales and use tax?	(19a)		
					20.	Did the corporation claim depreciation expenses for tangible personal property acquired outside Puerto Rico?	(20)		
					(a)	Did you pay the corresponding sales and use tax?	(20a)		
					21.	Did the corporation pay deemed dividend during the previous year? If "Yes", indicate the amount \$ _____	(21)		

Retention Period: Ten (10) years

PURPOSES ONLY.
DO NOT USE FOR
FILING.

Schedule A Corporation

Rev. 11.19



ALTERNATIVE MINIMUM TAX

2019

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 Book Adjustments and Operating Losses

1.	a. Net income (or loss) subject to alternative minimum tax (From Part III, line 7 of the return)	(1a)	00	
	b. Less: Income subject to preferential rates that you had elected to pay taxes at the corresponding preferential rate (Schedule D1 Corporation, line 3)	(1b)	00	
	c. Less: Dividends or profits received from domestic corporations (From Part III, line 8 of the return)	(1c)	00	
	d. Less: Distributable share in the adjustments for purposes of pass-through entities alternative minimum tax (Form 480.60 EC. See instructions)	(1d)	00	
	e. Net Income (or loss) subject to alternative minimum tax without considering: net operating loss from previous years, income subject to preferential rates and distributable share in the pass-through entities adjustments (Subtract lines 1(b), 1(c) and 1(d) from line 1(a))	(1e)		00
2. Adjustments:	a. Flexible depreciation	(2a)	00	
	b. Installment sales	(2b)	00	
	c. Long-term contracts	(2c)	00	
	d. Expenses related to exempt interest	(2d)	00	
	e. Accelerated depreciation	(2e)	00	
	f. Total adjustments (Add lines 2(a) through 2(e))	(2f)		00
3.	Alternative minimum net income (or loss) before the adjustments of Part I and the operating loss (Add lines 1(e) and 2(f))	(3)		00

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

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 through 6	(7)		00
8.	Exempt interest income net of related expenses	(8)	00	
9.	Dividend and profit distributions received from domestic corporations or partnerships, or from industrial or tourism development income	(9)	00	
10.	Income (or loss) from industrial development, exempt tourism development, bona fide agricultural business, rental income under Act 132-2010 or under Act 165-1996	(10)	00	
11.	Income (or loss) recognized under the equity method	(11)	00	
12.	Reserve for catastrophic losses	(12)	00	
13.	Income subject to preferential rates that you had elected to pay taxes at the corresponding preferential rate (From Part I, line 1(b)) (See instructions)	(13)	00	
14.	Capital gain under Section 1031.06 of the Code	(14)	00	
15.	Add lines 8 through 14	(15)		00
16.	Subtract line 15 from line 7	(16)		00
17.	Subtract line 3 from line 16. If line 3 is more than line 16, enter zero	(17)		00
18.	Adjustment for the excess of the adjusted net income per books over the alternative minimum net income of line 3 (Multiply line 17 by 60%)	(18)		00

Part III Computation of the Alternative Minimum Net Income

19.	Alternative minimum net income before the net operating loss (Add lines 3 and 18)	(19)		00
20.	Net operating loss from previous years to determine the alternative minimum tax (Cannot exceed 70% of line 19) (From Schedule G Corporation, Part II, line 13. Submit Schedule G Corporation) (See instructions)	(20)		00
21.	Subtract line 20 from line 19 (Enter the difference here, but not less than 30% of line 19)	(21)		00
22.	Exempt amount (See instructions)	(22)		00
23.	Alternative minimum net income (Subtract line 22 from line 21)	(23)		00

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

24.	Tentative minimum tax before the credit for foreign taxes paid (Enter the larger between \$500 or the result of line 23 multiplied by the applicable rate of 1 <input type="checkbox"/> 18.5% 2 <input type="checkbox"/> 23%	(24)	00	
25.	Alternative minimum net income before net operating loss deduction (Line 19)	(25)	00	
26.	Allowable exempt amount without considering the net operating loss (See instructions)	(26)	00	
27.	Subtract line 26 from line 25	(27)	00	
28.	Enter the larger between \$500 or the result of line 27 multiplied by the applicable rate of 1 <input type="checkbox"/> 18.5% 2 <input type="checkbox"/> 23%	(28)	00	
29.	Multiply line 28 by 10%	(29)		00
30.	Credit limitation (Subtract line 29 from line 24)	(30)		00
31.	Alternative minimum credit for foreign taxes paid (This amount cannot exceed the amount on line 30. See instructions)	(31)		00

Part V		Computation of the Alternative Minimum Tax	
32.	Tentative minimum tax after alternative minimum credit for foreign taxes paid (Subtract line 31 from line 24 of Part IV) ...	(32)	00
33.	Total tax net of credit for taxes paid to foreign countries, the United States, its states, territories and possessions (Subtract line 6 from line 3 of Part IV, page 3 of the return)	(33)	00
34.	Alternative minimum tax (Subtract line 33 from line 32. If line 33 exceeds line 32, enter zero, otherwise, enter the difference on Form 480.20, page 3, Part IV, line 8)	(34)	00

Part VI		Computation of Alternative Minimum Credit	
1.	Excess of regular tax over alternative minimum tax for the current year (Subtract line 32 from line 33 of Part V. If line 32 exceeds line 33, enter zero)	(1)	00
2.	Multiply line 1 by 25% and enter the result here	(2)	00
3.	Amount of alternative minimum tax paid in previous years and not claimed as credit (Part VII, line 11)	(3)	00
4.	Amount of credit to be claimed (Enter the smaller between line 2 or 3. Transfer to line 11, Part IV of the return)	(4)	00

Part VII				Determination of the Amount of Alternative Minimum Tax Paid in Prior Years Not Claimed as Credit			
Taxable Year (Day / Month / Year)		(A) Alternative Minimum Tax Paid in Excess of the Regular Tax		(B) Amount Used as Credit in Prior Years		(C) Balance	
1.		00		00		00	
2.		00		00		00	
3.		00		00		00	
4.		00		00		00	
5.		00		00		00	
6.		00		00		00	
7.		00		00		00	
8.		00		00		00	
9.		00		00		00	
10.		00		00		00	
11. Total (Transfer to Part VI, line 3 of this Schedule)							(11) 00

Retention Period: Ten (10) years

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Schedule B Corporation

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

Taxable year beginning on _____ and ending on _____

2019

Taxpayer's name

Employer Identification Number

Part I Recapture of Credit Claimed in Excess

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, etc.), and Total credit claimed in excess.

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

A. CREDITS SUBJECT TO MORATORIUM

Table with 2 columns: Description (Credit attributable to losses, investment in housing infrastructure, etc.) and Amount (00).

B. CREDITS NOT SUBJECT TO MORATORIUM

Table with 2 columns: Description (Credit for increase in investment, film industry development, etc.) and Amount (00).

Part III Other Payments and Withholdings

Table with 11 rows for tax payments and withholdings. Columns include description, line number, and amount. Total amount is 00.

Part IV Breakdown of the Purchase of Tax Credits

Check the box corresponding to the act (or acts) under which you acquired the credit and enter the amount:

A. CREDITS SUBJECT TO MORATORIUM

Table with 9 rows for credits subject to moratorium. Includes items like Solid Waste Disposal, Capital Investment Fund, etc. Total amount is 00.

B. CREDITS NOT SUBJECT TO MORATORIUM

Table with 10 rows for credits not subject to moratorium. Includes items like Tourism Development, Film Industry Development, etc. Total amount is 00.

Schedule C Corporation

Rev. 11.19



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

2019

Taxable year beginning on _____ and ending on _____

Taxpayer's name

Employer Identification Number

Computed for the alternative minimum tax

Place of incorporation: 1 Puerto Rico 2 State of the United States (Indicate) _____ 3 Other (Indicate possession, territory or country) _____

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

	Foreign Country, State, Territory or Possession of the United States			United States	Total
	A	B	C		
Name of the country, state, territory or possession					
1. Gross income subject to tax from sources of the country, state, territory or possession:					
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) 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
2. Deductions and losses:					
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, state, 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
3. Net income subject to normal tax from sources of the country, state, territory or possession (Subtract line 2(d) from line 1(h))⁽³⁾	00	00	00	00	00

Retention Period: Ten (10) years

Part II Taxes Paid to the United States, its States, Territories, Possessions and Foreign Countries						
Credit for taxes: 1 <input type="checkbox"/> Paid 2 <input type="checkbox"/> Accrued	Foreign Country; State, Territory or Possession of the United States			United States	Total	
	A	B	C			
Name of the country, state, territory or possession						
1. Taxes paid or accrued directly by the taxpayer during the year (1)	00	00	00	00	00	
2. Date paid or accrued (2)						
3. Tax paid or accrued under Section 1051.01(f) related to dividends received from foreign subsidiary (3)	00	00	00	00	00	
4. Total tax paid or accrued (4)	00	00	00	00	00	
Part III Determination of Credit						
1. Net income subject to normal tax from sources of the country, state, territory or possession (Part I, line 3) (1)	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) (See instructions) (3)	%	%	%	%	%	
4. Taxes to be paid in Puerto Rico (See instructions) (4)	00					
5. Limitation by country, state, territory or possession:						
a) Multiply line 4 by line 3 (5a)	00	00	00	00	00	
b) Enter the smaller of line 5(a) or Part II, line 4 (5b)	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) (See instructions). Transfer to Part IV, line 6 of the return (6b)					00	

Retention Period: Ten (10) years

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Schedule D Corporation

Rev. 11.19



GAINS AND LOSSES FROM SALE OR EXCHANGE OF PROPERTY

2019

Taxable year beginning on _____ and ending on _____

Taxpayer's name

Employer Identification Number

Part I Short-Term Capital Assets Gains and Losses (Held one year or less)

Description and Location of Property	(A) Date Acquired (Day/Month/Year)	(B) Date Sold (Day/Month/Year)	(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

1. Net short-term capital gain (or loss) (Sum of Column (F))	(1)	00
2. Net short-term capital gain (or loss) from investment funds (Schedule Q1)	(2)	00
3. Distributable share on net short-term capital gain (or loss) from Partnerships and Special Partnerships (Form 480.60 EC)	(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 short-term capital gain (or loss) (Add lines 1 through 4)	(5)	00

Part II Long-Term Capital Assets Gains and Losses (Held more than one year)

Description and Location of Property	Fill in if you Prepaid	(A) Date Acquired (Day/Month/Year)	(B) Date Sold (Day/Month/Year)	(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
	<input type="checkbox"/>			00	00	00	00	00
	<input type="checkbox"/>			00	00	00	00	00
	<input type="checkbox"/>			00	00	00	00	00
	<input type="checkbox"/>			00	00	00	00	00

6. Net long-term capital gain (or loss) (Sum of Column (G))	(6)	00
7. Net long-term capital gain (or loss) from investment funds (Schedule Q1)	(7)	00
8. Distributable share on net long-term capital gain (or loss) from Partnerships and Special Partnerships (Form 480.60 EC)	(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. Net long-term capital gain (or loss) (Add lines 6 through 9)	(10)	00

Part III Long-Term Capital Assets Gains and Losses Realized under Special Legislation

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

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

Gains or Losses		Column A	Column B	Column C
		Short-Term	Long-Term	Under Special Legislation
12. Enter the gains determined on lines 5, 10 and 11 in the corresponding Column (12)		00	00	00
13. Enter the losses determined on lines 5, 10 and 11 in the corresponding Column (13)		00	00	00
14. If any of Columns B and C reflect a loss on line 13, apply the total to the gain of the other Column (See instructions) (14)			00	00
15. Subtract line 14 from line 12. If any Column reflected a loss on line 13, enter zero here (15)			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
17. Subtract line 16 from line 15 (17)			00	00
18. Add the total of Columns B and C, line 17. However, if line 12 does not reflect any 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) for the current year (Add line 12, Column A and line 18. If the result is more than zero, continue with line 20. If the result is less than zero, do not complete line 20 and continue with line 21) (19)				00
20. Less: Net capital loss not used in previous years (In Column B you must enter the total net capital loss carryover (Part VI, line 23). Enter in Column C the smaller between line 20, Column B or the result of line 19 multiplied by 90%. This will be the deductible amount) (20)			00	00
21. Net capital gain (Line 19 less line 20. Enter here and on Form 480.20, Part I, line 8 or on the appropriate line of other returns. Also you must complete Part VII) (21)				00

Gains (or Losses) from Property Other than Capital Assets						
Description and Location of Property	(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
22. Net gain (or loss) from property other than capital assets (Enter here and transfer to Form 480.20, Part I, line 9 or to the appropriate line of other returns) (22)						00

Determination of the Net Capital Loss Carryover				
Year in which the loss was incurred (Day / Month / Year)	(A) Capital Loss Incurred	(B) Amount Used	(C) Capital Loss Carryforward (Column A - Column B)	Expiration Date
		00	00	
		00	00	
		00	00	
		00	00	
		00	00	
		00	00	
		00	00	
		00	00	
		00	00	
23. Total net capital loss carryover. (Transfer this amount to Part IV, line 20, Column B of this Schedule) (23)				00

Retention Period: Ten (10) years

Taxpayer's name	Employer Identification Number
-----------------	--------------------------------

Part VII Determination of the Net Long-Term Capital Gain - For Each Tax Rate

	Column A	Column B	Column C	Column D	Column E
	Short-Term	Long-Term (20%)	Special Legislation (____%)	Total Long-Term (Sum of Columns B and C)	Total Net Capital Gain (Sum of Columns A and D)
1. Net Capital Gain (or Loss) (In the case of short-term gains, transfer the amount on line 12 of Column A, Part IV of Schedule D Corporation. In the case of long-term gains (or losses), transfer the amounts on line 17 of Columns B and C, Part IV of Schedule D Corporation, as it corresponds) (1)	00	00	00	00	00
2. Transfer to Column A the loss included on line 1, Column D, if any. If line 1, Column D reflects gain, enter zero in Columns A through E (See instructions) (2)	00	00	00	00	00
3. Subtract line 2 from line 1. If line 1, Column D reflects loss, enter zero in Columns B and C. This is the current year net capital gain per category (3)	00	00	00	00	00
4. Allowable amount as net capital loss not used in previous years claimed on Schedule D Corporation (Transfer the amount included on line 20, Column C, Part IV of Schedule D Corporation) (The amount entered on this line cannot exceed 90% of the amount reflected on line 3, Column E of this Part) (4)	00				
5. Subtract in Column A line 4 from line 3 (If the result is more than zero, this is the net short-term capital gain. Therefore, enter zero on line 7 of Columns B and C. If the result is less than zero, continue on line 6) (5)	00				
6. Proportion of the gains according to each tax rate (Divide the amount on line 3, Columns B and C, by the total long-term gains indicated on line 3 of Column D. Enter the result rounded to two decimal places). Add the percentages in Columns B and C and enter the total in Column D. The total should be 100% (6)		%	%	%	
7. Capital loss carryforward attributable to long-term transactions (Columns B and C) (Multiply line 5 - Column A by line 6 of each Column. If the amount reflected on line 5 is more than zero, enter zero in Columns B and C) (7)		00	00	00	
8. Net long-term capital gain :					
(a) Net Long-Term Capital Gain subject to 20% (Column B – Subtract line 7 from line 3. Transfer the result to Column B of line 2(a) of Schedule D1 Corporation) (8a)		00		00	
(b) Net Long-Term Capital Gain subject to the tax rate provided by Special Legislation (Column C – Subtract line 7 from line 3. Transfer the result to Columns E, F or G, as applicable, of line 2(a) of Schedule D1 Corporation) ... (8b)			00	00	
9. Total net long-term capital gain (Column D - Add lines 8(a) and 8(b). Transfer this result to Column A – line 2(a) of Schedule D1 Corporation) (9)				00	
10. Net capital gain (If line 5 is more than zero, add lines 5 and 9 and enter the result here. Otherwise, enter here the amount of line 9. This amount must be the same as the one reported on line 21, Part IV of this Schedule) (10)					00

Schedule D1 Corporation

Rev. 11.19



TAX ON INCOME SUBJECT TO PREFERENTIAL RATES

2019

Taxable year beginning on _____, _____ and ending on _____, _____

Taxpayer's name

Employer Identification Number

	Column A	Column B	Column C	Column D	Column E	Column F	Column G
	Tax at Regular Rates	Tax at 20%	Tax at 10%	Tax at 4%	Tax at _____%	Tax at _____%	Tax at _____%
1. Net Income (From Part III, line 9 of the return) (1)	00						
2. Income subject to preferential rates:							
a) Net long-term capital gain (See instructions) (2a)	00	00			00	00	00
b) Interest subject to preferential rates (From Part I, line 11(a) of the return) (2b)	00		00				
c) Distributable share on net income subject to preferential rates from partnerships and special partnerships (From Part I, line 15 of the return. See instructions) (2c)	00		00	00	00	00	00
d) Net income subject to the 4% tax rate from the operations of an international financial entity that operates as a banking unit (From Part I, line 16 of the return) (2d)	00			00			
e) Other income subject to preferential rates (2e)	00	00	00	00	00	00	00
f) Total (Add lines 2a through 2e of Columns B through G) (2f)		00	00	00	00	00	00
3. Total income subject to preferential rates (Add line 2f of Columns B through G) (3)	00						
4. Net operating income (or loss) (excluding income subject to preferential rates) (Subtract line 3 from line 1) (4)	00						
5. Less: Deduction for surtax purposes (From Part III, line 10 of the return) (Check here if comes from Form AS 2652.1 <input type="checkbox"/>) (5)	00						
6. Net income subject to surtax (excluding income subject to preferential rates) (Subtract line 5 from line 4) (6)	00						
7. Computation of tax at preferential rates:							
a) Tax on income subject to preferential rates (See instructions) (7a)		00	00	00	00	00	00
b) Total tax at preferential rates (Add line 7a of Columns B through G) (7b)	00						
8. Computation of regular tax:							
a) Partial normal tax (Multiply line 4 by 18.5%) (8a)	00						
b) Surtax (See instructions) (8b)	00						
c) Total regular tax (Add lines 8a and 8b) (8c)	00						
9. Alternative Tax – Capital Gains and Preferential Rates (Add lines 7b and 8c. Transfer to Part IV, line 4 of the return) (9)	00						

Schedule E

Rev. 11.19



DEPRECIATION

2019

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 financial lease (Form 480.7D) (Amount of vehicles _____) (01) (02)

					00
--	--	--	--	--	----

TOTAL: (Add total of lines (a) through (f) of Column 6. Transfer to Schedules J, K, L, M and N Individual, whichever applies, or the corresponding line of other returns) (10)

					00
--	--	--	--	--	----

Schedule E1

Rev. 11.19



DEPRECIATION FOR BUSINESSES WITH VOLUME OF \$3,000,000 OR LESS

2019

Taxable year beginning on _____, _____ and ending on _____, _____

Taxpayer's name

Social Security or Employer Identification Number

1. Type of property	2. Date acquired	3. Original cost or other basis	4. Depreciation claimed in prior years	5. Estimated useful life to compute the depreciation	6. Depreciation claimed this year
---------------------	------------------	---------------------------------	--	--	-----------------------------------

38

(a) Computer systems (Section 1033.07(a)(1)(G))

Check here to elect:

			00	00	00
			00	00	00
			00	00	00
			00	00	00
			00	00	00

Total 00

(b) Ground transportation equipment, except automobiles (Section 1033.07(a)(1)(H))

Check here to elect:

			00	00	2	00
			00	00	2	00
			00	00	2	00
			00	00	2	00
			00	00	2	00

Total 00

(c) Machinery and equipment, furniture and fixtures, and any other fixed asset to be used in the industry or business (Section 1033.07(a)(1)(K))

Check here to elect:

			00	00	2	00
			00	00	2	00
			00	00	2	00
			00	00	2	00
			00	00	2	00

Total 00

Total (Add total of lines (a) through (c) of Column 6. Transfer to Schedules J, K, L, M and N Individual, whichever applies, or the corresponding line of other returns) (01) 00

By filing this schedule, I acknowledge that this election is irrevocable and that in subsequent years the depreciation on the books on these assets will not be deductible to determine the net income subject to income tax.

Schedule G Corporation

Rev. 11.19



DETAIL OF NET OPERATING LOSSES FROM PREVIOUS YEARS

2019

Taxable year beginning on _____ and ending on _____

Taxpayer's name

Employer Identification Number

Part I Detail of Net Operating Losses for Regular Tax Purposes

Year in which the loss was incurred (Day / Month / Year)	(A) Loss incurred according to return	(B) Adjustments under Section 1033.14 (See instructions)	(C) Total loss carryforward (Subtract Column B from Column A)	(D) Amount used in previous years	(E) Amount available (Subtract Column D from Column C)	Expiration date (Day / Month / Year)
1		00	00	00	00	
2		00	00	00	00	
3		00	00	00	00	
4		00	00	00	00	
5		00	00	00	00	
6		00	00	00	00	
7		00	00	00	00	
8		00	00	00	00	
9		00	00	00	00	
10		00	00	00	00	
11		00	00	00	00	
12		00	00	00	00	
13. Total (Transfer the total of Column E to line 4, Part III of the return) (13)		00	00	00	00	

Part II Detail of Net Operating Losses for Alternative Minimum Tax Purposes

Year in which the loss was incurred (Day / Month / Year)	(A) Loss incurred according to return	(B) Adjustments under Section 1033.14 (See instructions)	(C) Total loss carryforward (Subtract Column B from Column A)	(D) Amount used in previous years	(E) Amount available (Subtract Column D from Column C)	Expiration date (Day / Month / Year)
1		00	00	00	00	
2		00	00	00	00	
3		00	00	00	00	
4		00	00	00	00	
5		00	00	00	00	
6		00	00	00	00	
7		00	00	00	00	
8		00	00	00	00	
9		00	00	00	00	
10		00	00	00	00	
11		00	00	00	00	
12		00	00	00	00	
13. Total (Transfer the total of Column E to Schedule A Corporation, Part III, line 20) (13)		00	00	00	00	

Schedule IE Corporation

Rev. 11.19



EXCLUDED AND EXEMPT INCOME

2019

Taxable year beginning on _____ and ending on _____

Taxpayer's name _____

Employer Identification Number _____

Part I Exclusions from Gross Income

1. Plantation insurance	(1)	00
2. Income derived from discharge of debts (See instructions)	(2)	00
3. Other exclusions (Submit detail) (See instructions)	(3)	00
4. Net income (or loss) from sources outside Puerto Rico not related to the operation carried out in Puerto Rico by a foreign corporation	(4)	00
5. Total (Add lines 1 through 4. Transfer to line 7(b), Part VIII of the return).....	(5)	00

Part II Exemptions from Gross Income

1. Interests upon the following financial instruments:		
A) Obligations from the United States Government, its states, territories or political subdivisions	(1A)	00
B) Obligations from the Government of Puerto Rico	(1B)	00
C) Securities under Agricultural Loans Act	(1C)	00
D) Certain Mortgages (See instructions)	(1D)	00
E) Obligations secured or guaranteed under the Servicemen's Readjustment Act of 1944	(1E)	00
F) Securities issued by cooperative associations up to \$5,000	(1F)	00
G) Obligations issued by the Conservation, Housing and Human Development Trust, the San Juan Monument's Patronage and SER of Puerto Rico	(1G)	00
H) Loans granted by a commercial bank to an employees owned special corporation for certain purposes	(1H)	00
I) Loans granted by a commercial bank in Puerto Rico for acquisition and payment of membership certificates in an employees owned special corporation	(1I)	00
J) Loans granted by a commercial bank in Puerto Rico for the purchase or investment in preferred stocks of an employees owned special corporation	(1J)	00
K) Loans for the establishment or expansion of small and medium businesses up to \$250,000	(1K)	00
L) Loans for the capitalization of small and medium businesses up to \$250,000	(1L)	00
M) Bonds, notes, or other obligations under Section 6070.56(h) of Act 60-2019	(1M)	00
N) Other interests reported in a Form 480.6D	(1N)	00
O) Other interests not reported in a Form 480.6D (Submit detail)	(1O)	00
2. Dividends received from:		
A) Industrial development income derived from certain interests (See instructions)	(2A)	00
B) Cooperative associations	(2B)	00
C) International Insurer or Holding Company of the International Insurer	(2C)	00
D) Exempt business under Act 60-2019 (Section 6070.56(e))	(2D)	00
E) Other dividends reported in a Form 480.6D	(2E)	00
F) Other dividends not reported in a Form 480.6D (Submit detail)	(2F)	00
3. Recapture of bad debts, prior taxes, surcharges and other items	(3)	00
4. Income from news agencies or unions	(4)	00
5. Certain income related to the operation of an employees owned special corporation (See instructions)	(5)	00
6. Income received or earned in connection with the celebration of sports games organized by international associations or federations.....	(6)	00
7. Income derived by the International Insurer or Holding Company of the International Insurer	(7)	00
8. Rents from the Historic Zone	(8)	00
9. Income from vessels owners associations and mutual protection and indemnity	(9)	00
10. Income from buildings rented to the Government of Puerto Rico for public hospitals or schools, or health homes (Contracts in force as of November 22, 2010)	(10)	00
11. Income derived by the taxpayer from the resale of personal property or services which acquisition was subject to tax under Section 3070.01 or Section 2101 of the Internal Revenue Code of 1994	(11)	00
12. Distributions of Amounts Previously Notified as Deemed Eligible Distributions under Sections 1023.06(j) and 1023.25(b).....	(12)	00
13. Distributions of Dividends or Benefits from Industrial Development Income of Exempt Businesses and in Liquidation under Act 73-2008 and Act 135-1997	(13)	00
14. Rent of residential property under Act 132-2010	(14)	00
15. Income generated by a new business that operates under a special agreement for the creation of young companies (Act 135-2014)	(15)	00
16. Distributable share in the exempt income from pass-through entities (Form 480.60 EC)	(16)	00
17. Exempt income from rent under Act 165-1996	(17)	00
18. Exempt income of bonafide farmer (Schedule S Corporation, Part III, line 6)	(18)	00
19. Other payments reported in a Form 480.6 D	(19)	00
20. Other payments not reported in a Form 480.6 D (Submit detail)	(20)	00
21. Other exemptions (Submit detail)	(21)	00
22. Total (Add lines 1 through 21. Transfer to line 7(a), Part VIII of the return)	(22)	00



PARTNERSHIPS AND SPECIAL PARTNERSHIPS

Taxable year beginning on _____ and ending on _____

2019

Taxpayer's name

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
Type of form	1 <input type="checkbox"/> 480.60 EC 2 <input type="checkbox"/> K-1	1 <input type="checkbox"/> 480.60 EC 2 <input type="checkbox"/> K-1	1 <input type="checkbox"/> 480.60 EC 2 <input type="checkbox"/> K-1	1 <input type="checkbox"/> 480.60 EC 2 <input type="checkbox"/> K-1
Type of taxable year	1 <input type="checkbox"/> Calendar 2 <input type="checkbox"/> Fiscal	1 <input type="checkbox"/> Calendar 2 <input type="checkbox"/> Fiscal	1 <input type="checkbox"/> Calendar 2 <input type="checkbox"/> Fiscal	1 <input type="checkbox"/> Calendar 2 <input type="checkbox"/> Fiscal
Did the entity choose the optional tax under Section 1071.10 of the Code? (See instructions)	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No
Name of entity				
Employer identification number				
Percentage of participation in the entity				
Control number of Form 480.60 EC (Does not apply to Federal Schedule K-1)				
Electronic filing confirmation number of Form 480.60 EC (Does not apply to Federal Schedule K-1)				
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 from current year (See instructions)	(2a)	00	00	00
(b) Contributions made during the year	(2b)	00	00	00
(c) 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) Partnership's capital assets loss	(3b)	00	00	00
(c) Distributions during the year	(3c)	00	00	00
(d) Credits claimed the preceding year (See instructions)	(3d)	00	00	00
(e) Withholding at source during the year	(3e)	00	00	00
(f) Non 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 (Does not apply to special partnerships)	(3h)	00	00	00
(i) Partner's debts assumed and guaranteed by the partnership	(3i)	00	00	00
(j) Total basis decrease (Add lines 3(a) through 3(i))	(3j)	00	00	00
4. Adjusted Basis (Subtract line 3(j) from the sum of lines 1 and 2(g). Transfer this amount to line 6(a))	(4)	00	00	00
Part II Determination of Net Income or Loss in one or more Special Partnerships or Partnerships				00
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) Partnership's current debts assumed and guaranteed by the partner	(6c)	00	00	00
(d) Total partner's adjusted basis (Add lines 6(a) through 6(c))	(6d)	00	00	00
7. Distributable share on partnership's net income for the year (Form 480.60 EC) (See instructions)	(7)	00	00	00
8. Available losses (The smaller of lines 5(c) or 6(d))	(8)	00	00	00
9. Total income from this Schedule (Add the income determined on line 7, Columns A through C)	(9)			00
10. Total income from Schedule R1 Corporation (Enter the amount on line 9, Part II of all Schedules R1 Corporation included)	(10)			00
11. Total losses from this Schedule (Add losses determined on line 8, Columns A through C)	(11)			00
12. Total losses from Schedule R1 Corporation (Enter the total amount on line 10, Part II of all Schedules R1 Corporation included)	(12)			00
Part III Distributable Share on Benefits from Partnerships and Special Partnerships				
1. Aggregated net income from partnerships and special partnerships (Add lines 9 and 10 from Part II)	(1)			00
2. Multiply line 1 by .90	(2)			00
3. Aggregated net loss from partnerships and special partnerships (Add lines 11 and 12 from Part II)	(3)			00
4. Allowable loss (Enter the smaller of the absolute amounts reflected on lines 2 and 3. If line 3 is zero, enter zero on this line. See instructions)	(4)			00
5. Subtract line 4 from line 1. Transfer this amount to Form 480.20, Part I, line 14	(5)			00
6. Carryforward for future years (Subtract line 4 from line 3. See instructions)	(6)			00

Schedule R1 Corporation

Rev. 11.19



PARTNERSHIPS AND SPECIAL PARTNERSHIPS
(COMPLEMENTARY)

Taxable year beginning on _____ and ending on _____

2019

Taxpayer's name _____ 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	
Type of form	1 <input type="checkbox"/> 480.60 EC 2 <input type="checkbox"/> K-1	1 <input type="checkbox"/> 480.60 EC 2 <input type="checkbox"/> K-1	1 <input type="checkbox"/> 480.60 EC 2 <input type="checkbox"/> K-1	1 <input type="checkbox"/> 480.60 EC 2 <input type="checkbox"/> K-1	1 <input type="checkbox"/> 480.60 EC 2 <input type="checkbox"/> K-1	1 <input type="checkbox"/> 480.60 EC 2 <input type="checkbox"/> K-1	1 <input type="checkbox"/> 480.60 EC 2 <input type="checkbox"/> K-1
Type of taxable year	1 <input type="checkbox"/> Calendar 2 <input type="checkbox"/> Fiscal	1 <input type="checkbox"/> Calendar 2 <input type="checkbox"/> Fiscal	1 <input type="checkbox"/> Calendar 2 <input type="checkbox"/> Fiscal	1 <input type="checkbox"/> Calendar 2 <input type="checkbox"/> Fiscal	1 <input type="checkbox"/> Calendar 2 <input type="checkbox"/> Fiscal	1 <input type="checkbox"/> Calendar 2 <input type="checkbox"/> Fiscal	1 <input type="checkbox"/> Calendar 2 <input type="checkbox"/> Fiscal
Did the entity choose the optional tax under Section 1071.10 of the Code? (See instructions)	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No
Name of entity							
Employer identification number							
Percentage of participation in the entity							
Control number of Form 480.60 EC (Does not apply to Federal Schedule K-1)							
Electronic filing confirmation number of Form 480.60 EC (Does not apply to Federal Schedule K-1)							
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 from current year (See instructions)	(2a)	00		00		00	
(b) Contributions made during the year	(2b)	00		00		00	
(c) 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) 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) Non 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 (Does not apply to special partnerships)	(3h)	00		00		00	
(i) Partner's debts assumed and guaranteed by the partnership	(3i)	00		00		00	
(j) Total basis decrease (Add lines 3(a) through 3(i))	(3j)	00		00		00	
4. Adjusted Basis (Subtract line 3(j) from the sum of lines 1 and 2(g). Transfer this amount to line 6(a))	(4)	00		00		00	
Part II Determination of Net Income or 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) Partnership's current debts assumed and guaranteed by the partner	(6c)	00		00		00	
(d) Total partner's adjusted basis (Add lines 6(a) through 6(c))	(6d)	00		00		00	
7. Distributable share on partnership's net income for the year (Form 480.60 EC) (See instructions)	(7)	00		00		00	
8. Available losses (The smaller of line 5(c) or 6(d))	(8)	00		00		00	
9. Total income (Add the income determined on line 7, Columns A through C. Transfer to Schedule R Corporation, Part II, line 10)	(9)						00
10. Total losses (Add the losses determined on line 8, Columns A through C. Transfer to Schedule R Corporation, Part II, line 12)	(10)						00

Schedule S Corporation

Rev. 11.19



TAXABLE FARMING INCOME (BONAFIDE FARMER)

2019

Taxable year beginning on _____ and ending on _____

Taxpayer's name

Employer Identification Number

Part I Income

Table with 3 rows: 1. Income, 2. Less: Cost of goods sold, 3. Gross income. Includes columns for line numbers and amounts.

Part II Deductions

Regular Tax

Alternative Minimum Tax

A. Deductions reported on informative returns:

Table listing deductions A.1 through A.20 with columns for Regular Tax and Alternative Minimum Tax.

B. Deductions not reported on informative returns:

Table listing deductions B.1 through B.27 with columns for Regular Tax and Alternative Minimum Tax.

C. Other deductions: Indicate the deductions that were validated with an Agreed Upon Procedures Report ("AUP")

Table listing deductions C.1 through C.46 with columns for Regular Tax and Alternative Minimum Tax, including AUP checkboxes.

Schedule T Corporation

Rev. 11.19



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

2019

Taxable year beginning on _____ and ending on _____

Taxpayer's name

Employer Identification Number

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

1. Tax liability (Add lines 5, 8 and 10 of Part IV, page 3 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 (See instructions)	(5)	00
6. Enter the smaller of lines 4 and 5, provided you have filed an income tax return for the previous year. Otherwise, enter the total of line 4	(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="checkbox"/> CALENDAR YEAR				
2	<input type="checkbox"/> 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.	Failure to Pay (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	00
16.	If line 15 is equal or more 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	00
17.	Overpayment (If line 13 is more than line 15, subtract line 15 from line 13, and go to line 11 of next column. Otherwise, enter zero)	(17) 00	00	00	00
Section B - Penalty					
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 20 of Part IV, page 3 of the return)	(21)			00

Schedule X Corporation

Rev. 11.19



OPTIONAL TAX FOR CORPORATIONS THAT RENDER SERVICES

(Section 1022.07 of the Puerto Rico Internal Revenue Code of 2011, as amended)

2019

Taxable year beginning on _____, _____ and ending on _____, _____

Taxpayer's name

Employer Identification Number

Merchant's Registration Number

Optional tax election (Section 1022.07 of the Code): 1 Sworn Statement (CC RI 19-02) 2 With Return

Part I Gross Income

1. Gross income from services rendered (Line 7, Part I of the return)	(01)		00
2. Other income (See instructions)	(02)		00
3. Total taxable gross income (Add lines 1 and 2)	(03)		00
4. Exempt income (Schedule IE Corporation, Part II, line 22)	(04)		00
5. Total gross income received during the year (Add lines 3 and 4)	(05)		00
6. Percentage of income from services rendered over the gross income received (See instructions)	(06)		%

- If the result is less than 80%, you are not eligible to the optional tax. Do not complete the rest of this schedule and determine your tax responsibility on page 3 of the return according to the applicable tax rate.
- If the result is equal or more than 80% and you elect the optional tax, continue with Part II.

Part II Computation of the Optional Tax on Gross Income

1. Determine the optional tax as follows: If the total taxable gross income (Line 3, Part I of this Schedule) is:			
(a) Not over \$100,000, multiply line 3, Part I by 6%.			
(b) In excess of \$100,000, but not over \$200,000, multiply line 3, Part I by 10%.			
(c) In excess of \$200,000, but not over \$300,000, multiply line 3, Part I by 13%.			
(d) In excess of \$300,000, but not over \$400,000, multiply line 3, Part I by 15%.			
(e) In excess of \$400,000, but not over \$500,000, multiply line 3, Part I by 17%.			
(f) In excess of \$500,000, multiply line 3, Part I by 20%.			
This is your Optional Tax (Enter the corresponding amount on this line. Transfer to line 1, Part IV of the return and check the Optional tax box)	(01)		00

Retention Period: Ten (10) years

FOR INFORMATION PURPOSES ONLY. DO NOT USE FOR FILING.