





F. Base Period Income (BPI)

Specify whether Applicant, Stockholder, Member or any Affiliated Entity or Predecessor Business (both as defined in the Act and the Regulations promulgated thereunder) is presently performing, or was performing, in Puerto Rico the activities subject of this Application:

Yes  No

If the response is in the affirmative, the following information must be provided:

1. Date of Commencement of Operations: \_\_\_\_\_

2. Name of all Affiliated Entities and Predecessor Businesses: \_\_\_\_\_

3. As an appendix to this Application, provide Applicant’s proposed Base Period Income (as defined in the Act and the Regulations promulgated thereunder) and the basis for its calculation. Please fill in the chart below with the Income for the last three fiscal years preceding the date of filing this Application. Applicant must provide detailed information about allocations between eligible activities and non-eligible activities under the Act with respect to its financial information and tax returns and those of any Affiliated Entity or Predecessor Business. Applicant must submit Financial Statements for the last three taxable years. Final determination of Base Period Income will be determined by the Department of Treasury.

Year 1 Income	Year 2 Income	Year 3 Income	Average Income

G. Employment Information

Provide employee and payroll information for the current fiscal year and for each of the next three (3) fiscal years after the date of filing this Application:

	Current Year	Year _____	Year _____	Year _____
Number of Full-Time Equivalent Employees Engaged in Eligible Activities				
Number of Full-Time Equivalent Employees Engaged in Non- Eligible Activities				
Total Employees				
Payroll Allocated to Employees Engaged in Eligible Activities				
Payroll Allocated to Employees Engaged in Non- Eligible Activities				
Total Payroll				

Provide employee and payroll informational for the current fiscal year and for each of the next three (3) fiscal years after the filing date of the Application per employee position: Clerical, Technical and Management.

Full- Time Employees	Current Year	Year _____	Year _____	Year _____
Position:	Annual Payroll	Annual Payroll	Annual Payroll	Annual Payroll
Clerical				
Technical				
Management				

How many employees will be non-Puerto Rico residents at the time of hire? \_\_\_\_\_

How many employee positions will be filled by stockholders, partners or members? \_\_\_\_\_

H. Investment

1. Proposed Initial Capital Investment

- a. Date of Commencement of Investment \_\_\_\_\_
- b. Date of Completion of Investment \_\_\_\_\_

	Initial Investment	Planned Expansion
Machinery and Equipment		
Land		
Buildings		
Other		

I. Financial Information and Projections

Provide financial and operational estimates, solely with respect to the non-eligible activities, based on the projections for the three (3) years following the filing of this Application.

	Year _____	Year _____	Year _____
Total Revenues			
Total Expenses			
Net Income			
Income Tax Payments			
Payroll			

Projections: Provide financial and operational estimates, solely with respect to the eligible activities under the Act, based on the projections for the three (3) years following the filing of this Application.

	Year _____	Year _____	Year _____
Total Revenues			
Total Expenses			
Net Income			
Income Tax Payments			
Payroll			

J. BACKGROUND INFORMATION

- 1. Indicate whether applicant or any of its stockholders, member or partners have, or have had any proprietary interest in any other entity which has previously obtained a tax incentives grant from the Commonwealth of Puerto Rico or any of its agencies and municipalities, including but not limited to Act 73-2008, Act 22-2012, Act 273-2012, or any other law.

Yes  No

If you answered Yes to the question above, provide the following information:

Name of Business or Individual	Tax Exemption Grant No.	Is it effective?
		<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No

- 2. Has the Applicant and/or any of its direct or indirect shareholders been subject to any investigation by, or subject to any payment plans with, the Department of Treasury?

Yes  No

- 3. Have any of the members, stockholders, officers or directors of the company been committed of a felony or misdemeanor for which he/she was never arrested or convicted?

Yes  No

4. Have any of the members, stockholders, officers or directors of the company ever been arrested, detained, and/or sentenced for any offense or for any fraudulent act or cited to answer any criminal offense or violation for any reason, regardless of the intent of the event?
- Yes  No
5. Is any member, stockholder, officer or director of the company permanently or temporarily prohibited to perform any management or practice related to any business by a competent court or any Government entity?
- Yes  No

If you answered Yes to any of the questions from two (2) to five (5) in section J, please provide the details on a separate sheet.

Please tell us how you learned about the tax incentives under the Act to Promote the Transfer of Investors to Puerto Rico:

- a. Attorney/tax advisor
- b. Business contact
- c. Newspaper or magazine
- d. Business Journal
- e. Conference/Expo
- f. Website, please provide name of organization \_\_\_\_\_
- g. Other, please explain \_\_\_\_\_

***This Application must be signed by an authorized officer of the Applicant. All the information submitted in this Application is subject to verification, and additional information may be requested as needed for its consideration. The submission of false information in this Application will be grounds for denying the granting of a decree and Applicant may be civil and criminally liable in accordance with applicable statutes.***

By signing below, you acknowledge that you understand that a successful criminal background check of the members/stockholders is a condition to obtain a grant under Act 20-2012 from the Secretary of the Economic Development and Commerce of Puerto Rico and agree to waive and relinquish all claims you may have against the Department of Economic Development and any other agency or instrumentality of the Puerto Rico Government and their officers, agents, and employees, as a result of participating in the criminal background check.

\_\_\_\_\_  
Name (Print)

\_\_\_\_\_  
Authorized Signature

SWORN STATEMENT

I, \_\_\_\_\_, of legal age, \_\_\_\_\_, and resident of \_\_\_\_\_ under the most solemn and binding oath, under penalty of perjury, hereby declare that:

1. such are my personal circumstances;
2. my official title is \_\_\_\_\_ ;
3. I have been authorized by the Applicant to complete this Application;
4. I have read the foregoing Application and attachments and that the statements contained herein are true to the best of my personal knowledge and belief.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

AFFIDAVIT NUMBER: \_\_\_\_\_

Sworn and subscribed before me by \_\_\_\_\_, of the personal circumstances stated above to me personally known.

On the \_\_\_\_ day of \_\_\_\_\_ of \_\_\_\_\_.

\_\_\_\_\_  
Notary Public

Notes:

a. The Application must be sworn by an Officer of the Applicant, authorized by Corporate Resolution.

b. If this document is notarized outside of Puerto Rico, include evidence regarding the authority of the notary to administer oaths (e.g., county clerk's certificate or similar document).

PUBLIC NOTICE

Office of Industrial Tax Exemption

Case No. \_\_\_\_\_

The general public is hereby notified that

\_\_\_\_\_

has filed a Tax Incentives Application in the Office of Industrial Tax Exemption, located at 355 Franklin D. Roosevelt Avenue, PRIDCO Building, Hato Rey, Puerto Rico, under Act 20 of January 17, 2012, for \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Business address: \_\_\_\_\_  
Representative: \_\_\_\_\_  
Principal shareholders: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Any person, natural or legal, that opposes this Application, shall have an administrative hearing to be appointed at the Office of Industrial Tax Exemption, provided a written opposition statement (duly sworn and notarized) is previously filed within ten (10) working days, beginning on the publication date of this notice.

\_\_\_\_\_  
Director

## Annex A

Requirement Number		Tax Exemptions for New PR Businesses	Tax Exemption for Existing PR Businesses	Amendments for transfers with and without change of control	Mergers or Consolidation of Corporations	Amendment to add services	Other Amendments
	<b>Documents (Original and Two (2) copies of each)</b>						
1	Original petition, completed with sworn statement.	X	X				
3	Original financial statements from the petitioner corresponding to the last three (3) years (natural o fiscal) certified by a certified public accountant or sworn before a notary public.		X				
4	For Corporations - Copy of the Certificate of Registration expedited by the Puerto Rico State Department that authorizes the petitioner to do business in Puerto Rico or provide evidence that it was filed.	X <sup>1</sup>	X				
5	Certificate of Good Standing expedited by the Puerto Rico State Department, if applicable.		X				
6	Certificate from the Department of the Treasury of the filing of Income Tax Returns, for the Applicant, shareholders, members and owners. If you have not filed tax returns, provide for SC-2781 from the Department of the Treasury.		X			X	
7	Negative certification of debt from the Collection Bureau of the Department of the Treasury for the Applicant, shareholders, members and owners.		X	X		X	
8	Debt Certification from the Center of Municipal Income Collection "(CRIM) ".		X	X		X	
9	Social Security Debt Certification and Unemployment and Disability Debt Certification from the Department of Labor and Human Resources		X	X		X	
10	Certificate of debt from the State Insurance Fund.		X	X		X	
11	Corporate Resolution of merger, fusion or consolidation.				X		
12	Copies of the approved documents from the Puerto Rico State Department. (requirement num. 15)				X		
13	Sworn statement with details of the transaction.			X	X	X	X

<sup>1</sup> New PR Businesses may file this document after their Application has been approved.

## Filing Fees<sup>2</sup>

The filing fees will be paid only by Certified Check, Managers Check or Money Order in the order of the Secretary of the Treasury. VOUCHERS WILL NOT BE ACCEPTED.

1	NEW APPLICATION/CASE (has never filed under any other law)	\$750.00
2	Sucessor or Decree Extensions <sup>3</sup>	\$4,500.00
3	Revocations	\$100.00
4	Opositions	\$500.00
5	Ammendments	\$450.00
6	Transfer of Control of non affiliated companies	\$4,500.00
7	Transfer of shares without change in Control	\$450.00
8	Transfer of shares between related companies	\$750.00
9	Annual Reports	\$300.00
10	Applications, or submittals or issue of any certificate, affidavit or document for which no fixed various rights expressly.	\$50.00

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<sup>2</sup> Filing fees are subject to change without notice. Revised on September 8, 2009

<sup>3</sup> Petitioner must have complied with the filing of their annual reports.