



PRINCE EDWARD ISLAND MANUFACTURING AND PROCESSING PROFITS TAX CREDIT

Name of corporation	Account / Business Number	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="border: none;">Taxation year end</td> <td style="border: none;">Day</td> <td style="border: none;">Month</td> <td style="border: none;">Year</td> </tr> <tr> <td style="border: none;"> </td> <td style="border: none;"> </td> <td style="border: none;"> </td> <td style="border: none;"> </td> </tr> </table>	Taxation year end	Day	Month	Year				
Taxation year end	Day	Month	Year							

Use this form if you are a corporation that maintained a permanent establishment in Prince Edward Island at any time in the taxation year, and had:

- taxable income earned in Prince Edward Island; and
- Canadian manufacturing and processing profits earned in the year in Prince Edward Island.

File one completed copy of this form with your *T2 Corporation Income Tax Return*.

Calculation of Prince Edward Island manufacturing and processing profits tax credit

Canadian manufacturing and processing profits for the year from line 233 on page 4 of the T2 return	_____		A
Deduct:			
The least of amounts on lines 223, 225, and 227 (or F, if it applies) of the small business deduction calculation on page 3 of the T2 return	_____		B
	_____	▶	C
Amount from line 235 on page 4 of the T2 return	_____		D
Lesser of C and D	_____	x	E
	$\frac{\text{Taxable income earned in Prince Edward Island}}{\text{Taxable income earned in all provinces}}$	=	E
Amount E	_____	x	F
	$\frac{\text{Number of days in the taxation year before July 1, 1997}}{\text{Number of days in the taxation year}}$	x 7.5% =	F
Amount E	_____	x	G
	$\frac{\text{Number of days in the taxation year after June 30, 1997}}{\text{Number of days in the taxation year}}$	x 8.5% =	G
Prince Edward Island manufacturing and processing profits tax credit – (amount F plus amount G)	_____		H

Enter amount H on line 682 of Schedule T2S-TC.

Certification

Signature only required if this form is filed separately from signed T2 return.

I, _____, certify that the information given on this form is, to the best of my
(Please print)
knowledge, correct and complete.

_____ Date Signature of authorized person Position or office