

INTERCOMPANY TRANSACTION TRANSFER PRICING RETURN

Filed under the provisions of Transfer Pricing Regulations

Reporting Entity Name:	Tax Identification Number (TIN):
Reporting Period (From - To):	Functional Currency:

PART I: ASSOCIATED ENTERPRISES DETAILS

No.	Name of Associated Enterprise	Country of Tax Residence	Tax Identification Number	Relationship Type
1				
2				
3				
4				

PART II: SUMMARY OF INTERCOMPANY TRANSACTIONS

No.	Associated Enterprise	Transaction Type	Transfer Pricing Method	Transaction Value	Tested Party?	Profit Level Indicator (PLI)
1						
2						
3						
4						
5						

PART III: TRANSFER PRICING METHOD & BENCHMARKING ANALYSIS

No.	Comparable Search Criteria / Database	Lower Quartile (%)	Median (%)	Upper Quartile (%)	Tested Party Result (%)
1					
2					
3					

PART IV: FINANCIAL ADJUSTMENTS (IF ANY)

No.	Description of Adjustment	Adjustment Amount	Impact on Taxable Income
1			

No.	Description of Adjustment	Adjustment Amount	Impact on Taxable Income
2			

DECLARATION AND SIGNATURE

I hereby declare that to the best of my knowledge and belief, the information provided in this return is true, correct, and complete. I confirm that contemporaneous documentation as required by Transfer Pricing guidelines is maintained and available for inspection.

Name of Authorized Signatory:

Signature:

Designation / Title:

Date:
