

**SCHEDULE V  
(Form 1120-F)**

Department of the Treasury  
Internal Revenue Service

**List of Vessels or Aircraft, Operators, and Owners**

▶ Attach to Form 1120-F, Section I, line 9.  
▶ See separate instructions.

OMB No. 1545-0126

**2008**

Name of corporation

Employer identification number

Provide the following information for each vessel or aircraft with respect to which the corporation is subject to a 4% rate of tax under section 887.

	A	B	C	D
1 Name of vessel or aircraft . . . . .				
2 Vessel or aircraft ID number . . . . .				
3 Was the vessel or aircraft chartered in? . . . . .	<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
4 Was the vessel or aircraft chartered out? . . . . .	<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
5 Name of registered owner . . . . .				
6 EIN of registered owner . . . . .				
7 Name of operator . . . . .				
8 EIN of operator . . . . .				
9 U.S. source gross transportation income . . . . .				

**10 Total U.S. source gross transportation income.** Add the amounts on line 9, columns A through D (and the amounts on line 9 of any attachments). Enter here and on Form 1120-F, Section I, line 9, column (b) ▶

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