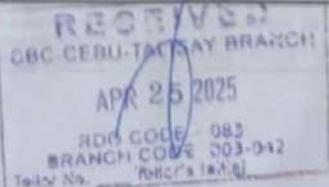


For BIR Use Only	BIR Form No. <b>1701</b> January 2018 (ENCS) Page 1	 <b>Republic of the Philippines</b> Department of Finance Bureau of Internal Revenue		
<b>Annual Income Tax Return</b>				
<b>Individuals (including MIXED Income Earner), Estates and Trusts</b> Enter all required information in CAPITAL LETTERS using BLACK INK. Mark all applicable boxes with an "X". Two copies MUST be filed with the BIR and one held by the Tax Filer.				
1 Month	[12]	For the Year (YYYY) [2018]		
<b>PART I - BACKGROUND INFORMATION OF TAXPAYER/FILER</b>				
4 Taxpayer Identification Number (TIN)	[B1] - [B2] - [B3] - [B4]	5 RDD Code [B8]		
6 Taxpayer Type	<input checked="" type="checkbox"/> Single Proprietor <input type="checkbox"/> Professional <input type="checkbox"/> Estate <input type="checkbox"/> Trust <input type="checkbox"/> Compensation Earner			
7 Alphanumeric Tax Code (ATC)	<input type="radio"/> 1011 Compensation Income <input checked="" type="radio"/> 1012 Business Income-Graduated IT Rates <input type="radio"/> 1014 Income from Profession-Graduated IT Rates <input type="radio"/> 1015 Business Income-BK IT Rate <input type="radio"/> 1017 Income from Profession-BK IT Rate <input type="radio"/> 1018 Mixed Income-Graduated IT Rates <input type="radio"/> 1019 Mixed Income-BK IT Rate			
8 Taxpayer's Name (Last Name, First Name, Middle Name)/ESTATE OF (First Name, Middle Name, Last Name)/TRUST FAD	[JUANITA L. BADUE]			
9 Registered Address (Indicate complete address. If the registered address is different from the current address, go to the RDO to update registered address before filing this return.) [VILLA VENNA CROSAN BULACAO (TALISAY CITY-CEBU)]				
10 Date of Birth (MM/DD/YYYY)	[B5]	9A Zip Code [B6]		
11 Email Address	[prepaidtaxi1992@gmail.com]			
12 Citizenship	[FLIPINO]			
13 Claiming Foreign Tax Credits?	<input checked="" type="radio"/> Yes <input type="radio"/> No			
14 Foreign Tax Credit Status	<input type="radio"/> Domestic Corporation <input type="radio"/> Nonresident Alien <input type="radio"/> Other [B7]			
15 Contact Number (Landline/Cellphone No.)	[B9]	16 Civil Status (if applicable)		
17 If married, spouse has income?	<input type="radio"/> Yes <input checked="" type="radio"/> No			
18 Filing Status	<input type="radio"/> Joint Filing <input type="radio"/> Separate Filing			
19 Income EXEMPT from Income Tax?	<input type="radio"/> Yes <input checked="" type="radio"/> No			
If yes, fill out also consolidation of ALL activities per Tax Regime (Part X)				
20 Income subject to SPECIAL/PREFERENTIAL RATE?	<input type="radio"/> Yes <input checked="" type="radio"/> No			
If yes, fill out also consolidation of ALL activities per Tax Regime (Part X)				
21 Tax Rate* (choose one)	<input checked="" type="radio"/> Graduated Rates <input type="radio"/> Itemized Deduction [Sec. 34(A-J), NIRC] <input type="radio"/> Optional Standard Deduction (OSD) [40% of Gross Sales/Receipts/Revenues/Fees [Sec. 34(L), NIRC]]			
<input type="radio"/> 8% in lieu of Graduated Rates under Sec. 24(A) & Percentage Tax under Sec. 116 of NIRC [Invaluable if gross sales/receipts and other non-operating income do not exceed Three million pesos (P3M)]				
<b>PART II - TOTAL TAX PAYABLE</b> (Do NOT Enter Comma; 48 Consecutive Lines drop down; 30 or more needed up)				
Particular	A. Taxpayer/Filer	B. Spouse		
22 Tax Due (From Part VI Item 5)	0.00	0.00		
23 Less: Total Tax Credits/Payments (From Part VII Item 10)	0.00	0.00		
24 Tax Payable(Overpayment) (Item 22 Less Item 23)	0.00	0.00		
25 Less: Portion of Tax Payable Allowed for 2nd Installment to be paid on or before October 15 (50% or less of item 22)	0.00	0.00		
26 Amount of Tax payable(Overpayment) (Item 24 Less Item 25)	0.00	0.00		
Add: Penalties	27 Interest	0.00		
	28 Surcharge	0.00		
	29 Compromise	0.00		
30 Total Penalties (Sum of Items 27 to 29)	0.00	0.00		
31 Total Amount Payable(Overpayment) (Sum of Items 26 and 30)	0.00	0.00		
32 Aggregate Amount Payable(Overpayment) (Sum of Items 26 and 30)	1,000.00			
If overpayment, mark one (1) box only. (Once the choice is made, the same is irrevocable)	<input type="radio"/> To be refunded <input checked="" type="radio"/> To be issued a Tax Credit Certificate (TCC) <input type="radio"/> To be carried over as a tax credit for next year/quarter			
I declare under the penalties of perjury that this return, and all its attachments, have been made in good faith, verified by me, and to the best of my knowledge and belief, are true and correct, pursuant to the provisions of the National Internal Revenue Code, as amended, and the regulations issued under authority thereof. Further, I give my consent to the processing of my information as contemplated under the "Data Privacy Act of 2012 (R.A. No. 10173) for legitimate and lawful purposes. (If signed by an Authorized Representative, indicate TIN and attach authorization letter)				
<i>Costado L. Alibio</i> Printed Name and Signature of Taxpayer/Authorized Representative		33 Number of Attachments [00]		
<b>PART III - DETAILS OF PAYMENT</b>				
Particulars	Drawee Bank/Agency	Number	Date (MM/DD/YYYY)	Amount
34 Cash/Bank Debit Memo				
35 Check				
36 Tax Debit Memo				
37 Others (specify below)				
Machine Validation/Revenue Official Receipt Details (if not filed with an Authorized Agent Bank)			Stamp of Receiving Office/ASB and Date of Receipt RDO's Signature/Handback Teacher's Initials	
NOTE: *The BIR Data Privacy Policy is in the BIR website ( <a href="http://www.bir.gov.ph">www.bir.gov.ph</a> )				



BIR Form No. <b>1701</b> January 2018 (ENCS) Page 2	<b>Annual Income Tax Return</b> Individuals (including MIXED Income Earner), Estates and Trusts	 1701 01/18ENCS P2
TIN 231 198 139 000	Taxpayer/Filer's Last Name JUANITA L. BACUS	
<b>PART IV - Background Information of Spouse</b>		
1 Spouse's Taxpayer Identification Number (TIN)	2 RDO Code	
3 Filer's Spouse Type <input type="checkbox"/> Single Proprietor	<input type="checkbox"/> Professional <input type="checkbox"/> Compensation Earner	
4 Alphanumeric Tax Code (ATC) <input type="radio"/> II011 Compensation Income <input type="radio"/> II012 Business Income-Graduated IT Rates <input type="radio"/> II015 Business Income-8% IT Rate <input type="radio"/> II014 Income from Profession-Graduated IT Rates <input type="radio"/> II017 Income from Profession-8% IT Rate <input type="radio"/> II013 Mixed Income-Graduated IT Rates <input type="radio"/> II018 Mixed Income-8% IT Rate		
5 Spouse's Name (Last Name, First Name, Middle Name)		
6 Contact Number	7 Citizenship	
8 Claiming Foreign Tax Credits? <input type="radio"/> Yes <input type="radio"/> No	9 Foreign tax number (if applicable)	
10 Income EXEMPT from Income Tax? [If yes, fill out also consolidation of ALL activities per Tax Regime (Part X)]	11 Income subject to SPECIAL/PREFERENTIAL RATE? [If yes, fill out also consolidation of ALL activities per Tax Regime (Part X)]	
12 Tax Rate* (Choose Method of Deduction in Item 12A) (choose one) <input type="radio"/> Graduated Rates <input type="radio"/> 8% in lieu of Graduated Rates under Sec. 24(A) & Percentage Tax under Sec. 116 of NIRC [Available if gross sales/receipts and other non-operating income do not exceed Three million pesos (P3M)]	12A Method of Deduction (choose one) <input type="radio"/> Itemized Deduction <input type="radio"/> Optional Standard Deduction (OSD) [Sec. 34(A-J), NIRC]    [40% of Gross Sales/Receipts/Revenues/Fees [Sec. 34(L); NIRC]]	
<b>PART V - Computation of Tax</b>		
Schedule 1 - Gross Compensation Income and tax Withheld (Attach Additional Sheet/s, if necessary)		
On Items 1 and 2, enter the required information for each of your employer/s and mark (X) whether the information is for the Taxpayer or the Spouse. On Item 3A, enter the Total Gross Compensation and Total tax Withheld for the Taxpayer and on Item 3B, for the Spouse. (DO NOT enter Centavos; 49 Centavos or less drop down; 50 or more round up)		
a. Name of Employer		
1 <input type="radio"/> Taxpayer	b. Employer's TIN	
<input type="radio"/> Spouse		
2 <input type="radio"/> Taxpayer	b. Employer's TIN	
<input type="radio"/> Spouse		
(Continuation of Table Above)		
1	c. Compensation Income	
2	d. Tax Withheld	
3A Gross Compensation Income and Total Tax Withheld for TAXPAYER (To Part V Schedule 2 Item 4A and Part VII Item 5A)	0.00	0.00
3B Gross Compensation Income and Total Tax Withheld for SPOUSE (To Part V Schedule 2 Item 4B and Part VII Item 5B)	0.00	0.00
Schedule 2 - Taxable Compensation Income		
(DO NOT enter Centavos; 49 Centavos or less drop down; 50 or more round up)		
Particulars		
4 Gross Compensation Income (From Part V Schedule 1 Item 3Ac/3Bc)	A. Taxpayer/Filer	B. Spouse
5 Less: Non-Taxable / Exempt Compensation	0.00	0.00
6 Taxable Compensation Income (Item 4 Less Item 5)	0.00	0.00
7 Tax Due-Compensation Income (Item 5 x applicable Income Tax Rate)	0.00	0.00
Schedule 3 - Taxable Business Income (if graduated rates, fill in items 8 to 24; if 8% flat income tax rate, fill in items 25 to 30)		
3.A - For Graduated Income Tax Rates		
8 Sales/revenues/Receipts/Fees	58,260.00	0.00
9 Less: Sales Returns, Allowances and Discounts	0.00	0.00
10 Net Sales/Revenues/Receipts/Fees (Item 8 Less Item 9)	58,260.00	0.00
11 Less: Cost of Sales/Services (applicable only if availing Itemized Deductions)	0.00	0.00
12 Gross Income/(Loss) from Operation (Item 10 less Item 11)	58,260.00	0.00
Less: Deductions Allowable under Existing Laws		
13 Ordinary Allowable Itemized Deductions (From Part V Schedule 4 Item 18)	0.00	0.00
14 Special Allowable Itemized Deductions (From Part V Schedule 5 Item 3 and/or Item 6)	0.00	0.00
15 Allowable for Net Operating Loss Carry Over (NOLCO) (From Part V Schedule 6 Item 8 and/or Item 13)	0.00	0.00
16 Total Allowable Itemized Deductions (Sum of Items 13 to 15)	0.00	0.00
OR		
17 Optional Standard Deduction (OSD) (40% of Item 10)	23,304.00	0.00
18 Net Income/(Loss) (If Itemized: Item 12 Less Item 16; If OSD: Item 10 Less Item 17)	34,956.00	0.00
Add: Other Non-Operating Income (specify below)		
19	0.00	0.00
20	0.00	0.00
21 Amount Received/Share in Income by a Partner from General Professional Partnership (GPP)	0.00	0.00
22 Total Other Non-Operating Income (Sum of Items 19 to 21)	0.00	0.00
23 Taxable Income-Business (Sum of Items 18 and 22)	34,956.00	0.00
24 Total Taxable Income - Compensation & Business (Sum of Items 6 and 23)	34,956.00	0.00
25 Total Tax Due-Compensation and Business Income (under graduated rates) (Item 24 x applicable income tax rate) (To Part VI Item 1)	0.00	0.00

BIR Form No. <b>1701</b> January 2018 (ENCS) Page 3	<b>Annual Income Tax Return</b> Individuals (including MIXED Income Earner), Estates and Trusts		 1701 01/18ENCS P3																														
TIN 231 199 138 000	Taxpayer/Filer's Last Name JUANITA L. BACUS																																
(DO NOT enter Centavos; 48 Centavos or less drop down; 50 or more round up)																																	
<b>3.B - For 8% Flat Income Tax Rate</b> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Particulars</th> <th style="text-align: center;">A. Taxpayer/Filer</th> <th style="text-align: center;">B. Spouse</th> </tr> </thead> <tbody> <tr> <td>26 Sales/Revenues/Receipts/Fees (net of sales returns, allowances and discounts)</td> <td style="text-align: center;">0.00</td> <td style="text-align: center;">0.00</td> </tr> <tr> <td>Add: Other Non-Operating Income (specify below)</td> <td></td> <td></td> </tr> <tr> <td>27</td> <td style="text-align: center;">0.00</td> <td style="text-align: center;">0.00</td> </tr> <tr> <td>28 Total Income (Sum of Items 26 and 27)</td> <td style="text-align: center;">0.00</td> <td style="text-align: center;">0.00</td> </tr> <tr> <td>Less: Allowable reduction from gross sales/receipts and other non-operating income 29 of purely self-employed individuals and/or professionals in the amount of P250,000 (not applicable if with compensation income)</td> <td style="text-align: center;">0.00</td> <td style="text-align: center;">0.00</td> </tr> <tr> <td>30 Taxable Income/(Loss) (Item 28 Less Item 29)</td> <td style="text-align: center;">0.00</td> <td style="text-align: center;">0.00</td> </tr> <tr> <td>31 Tax Due-Business Income (Item 30 x 8% Flat Income Tax Rate)</td> <td style="text-align: center;">0.00</td> <td style="text-align: center;">0.00</td> </tr> <tr> <td>32 Total Tax Due-Compensation &amp; Business Income (under flat rate)(Sum of Items 7 and 31) (To Part VI Item 1)</td> <td style="text-align: center;">0.00</td> <td style="text-align: center;">0.00</td> </tr> </tbody> </table>				Particulars	A. Taxpayer/Filer	B. Spouse	26 Sales/Revenues/Receipts/Fees (net of sales returns, allowances and discounts)	0.00	0.00	Add: Other Non-Operating Income (specify below)			27	0.00	0.00	28 Total Income (Sum of Items 26 and 27)	0.00	0.00	Less: Allowable reduction from gross sales/receipts and other non-operating income 29 of purely self-employed individuals and/or professionals in the amount of P250,000 (not applicable if with compensation income)	0.00	0.00	30 Taxable Income/(Loss) (Item 28 Less Item 29)	0.00	0.00	31 Tax Due-Business Income (Item 30 x 8% Flat Income Tax Rate)	0.00	0.00	32 Total Tax Due-Compensation & Business Income (under flat rate)(Sum of Items 7 and 31) (To Part VI Item 1)	0.00	0.00			
Particulars	A. Taxpayer/Filer	B. Spouse																															
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32 Total Tax Due-Compensation & Business Income (under flat rate)(Sum of Items 7 and 31) (To Part VI Item 1)	0.00	0.00																															
Schedule 4 - Ordinary Allowable Itemized Deductions (attach additional sheet/s, if necessary)																																	
1 Amortizations	0.00	0.00																															
2 Bad Debts	0.00	0.00																															
3 Charitable and Other Contributions	0.00	0.00																															
4 Depletion	0.00	0.00																															
5 Depreciation	0.00	0.00																															
6 Entertainment, Amusement and Recreation	0.00	0.00																															
7 Fringe Benefits	0.00	0.00																															
8 Interest	0.00	0.00																															
9 Losses	0.00	0.00																															
10 Pension Trusts	0.00	0.00																															
11 Rental	0.00	0.00																															
12 Research and Development	0.00	0.00																															
13 Salaries, Wages and Allowances	0.00	0.00																															
14 SSS, GSIS, Philhealth, HDMF and Other Contributions	0.00	0.00																															
15 Taxes and Licenses	0.00	0.00																															
16 Transportation and Travel	0.00	0.00																															
17 Others (Deductions Subject to Withholding Tax and Other Expenses) (specify below, Add additional sheet/s, if necessary)																																	
a Janitorial and Messengerial Services	0.00	0.00																															
b Professional Fees	0.00	0.00																															
c Security Services	0.00	0.00																															
d	0.00	0.00																															
18 Total Ordinary Allowable Itemized Deductions (Sum of Items 1 to 17d) (To part V Schedule 3.A Item 13)	0.00	0.00																															
Schedule 5 - Special Allowable Itemized Deductions (attach additional sheet/s, if necessary)																																	
5.A - Taxpayer/Filer	Description	Legal Basis	Amount																														
1			0.00																														
2			0.00																														
3	Total Special Allowable Itemized Deductions-Taxpayer/Filer (Sum of Items 1 and 2) (To part V Schedule 3.A Item 14A)		0.00																														
5.B - Spouse			0.00																														
4			0.00																														
5			0.00																														
6	Total Special Allowable Itemized Deductions-Spouse (Sum of Items 4 and 5) (To part V Schedule 3.A Item 14B)		0.00																														
Schedule 6 - Computation of Net Operating Loss carry Over (NOLCO)																																	
6.A - Computation of NOLCO																																	
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2" style="text-align: left;">Description</th> <th style="text-align: center;">A. Taxpayer/Filer</th> <th style="text-align: center;">B. Spouse</th> </tr> </thead> <tbody> <tr> <td>1 Gross Income</td> <td></td> <td style="text-align: center;">0.00</td> <td style="text-align: center;">0.00</td> </tr> <tr> <td>2 Less: Ordinary Allowable Itemized Deductions</td> <td></td> <td style="text-align: center;">0.00</td> <td style="text-align: center;">0.00</td> </tr> <tr> <td>3 Net Operating Loss (Item 1 Less Item 2) (To Schedule 6.A.1 Item 7A and/or Schedule 6.A.2 Item 12A)</td> <td></td> <td style="text-align: center;">0.00</td> <td style="text-align: center;">0.00</td> </tr> </tbody> </table>				Description		A. Taxpayer/Filer	B. Spouse	1 Gross Income		0.00	0.00	2 Less: Ordinary Allowable Itemized Deductions		0.00	0.00	3 Net Operating Loss (Item 1 Less Item 2) (To Schedule 6.A.1 Item 7A and/or Schedule 6.A.2 Item 12A)		0.00	0.00														
Description		A. Taxpayer/Filer	B. Spouse																														
1 Gross Income		0.00	0.00																														
2 Less: Ordinary Allowable Itemized Deductions		0.00	0.00																														
3 Net Operating Loss (Item 1 Less Item 2) (To Schedule 6.A.1 Item 7A and/or Schedule 6.A.2 Item 12A)		0.00	0.00																														
6.A.1 - Taxpayer/Filer's Detailed Computation of Available NOLCO																																	
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Net Operating Loss Year Incurred</th> <th style="text-align: center;">A. Amount</th> <th style="text-align: center;">B. NOLCO Applied Previous Years</th> <th style="text-align: center;">C. NOLCO Expired</th> <th style="text-align: center;">D. NOLCO Applied Current Year</th> <th style="text-align: center;">E. Net Operating Loss (Unapplied) (E)=A-(B+C+D)</th> </tr> </thead> <tbody> <tr> <td>4</td> <td style="text-align: center;">0.00</td> </tr> <tr> <td>5</td> <td style="text-align: center;">0.00</td> </tr> <tr> <td>6</td> <td style="text-align: center;">0.00</td> </tr> <tr> <td>7</td> <td style="text-align: center;">0.00</td> </tr> </tbody> </table>				Net Operating Loss Year Incurred	A. Amount	B. NOLCO Applied Previous Years	C. NOLCO Expired	D. NOLCO Applied Current Year	E. Net Operating Loss (Unapplied) (E)=A-(B+C+D)	4	0.00	0.00	0.00	0.00	0.00	5	0.00	0.00	0.00	0.00	0.00	6	0.00	0.00	0.00	0.00	0.00	7	0.00	0.00	0.00	0.00	0.00
Net Operating Loss Year Incurred	A. Amount	B. NOLCO Applied Previous Years	C. NOLCO Expired	D. NOLCO Applied Current Year	E. Net Operating Loss (Unapplied) (E)=A-(B+C+D)																												
4	0.00	0.00	0.00	0.00	0.00																												
5	0.00	0.00	0.00	0.00	0.00																												
6	0.00	0.00	0.00	0.00	0.00																												
7	0.00	0.00	0.00	0.00	0.00																												
8 Total NOLCO - Taxpayer/Filer (Sum of Items 4D to 7D) (To Part V Schedule 3.A Item 15A)																																	

<b>Chinabank</b>		Date (mm/dd/yyyy) <i>01/01/2024</i>	
		TIN 231-199-139-000 FOLIO# 1085 RHYAPAC PHP 1,000.00 GSN-BIR COOVAY POC 03085	
Taxpayer's Name <i>Juanita L. Badias</i>		TIN 231-199-139-000	
Tax Type <i>AT TR</i>	Tax Form No. <i>1701</i>	Tax Period Covered <i>12-2024</i>	
Amount to be Paid (in Words) <i>ONE Thousand</i>			
<b>FORM OF PAYMENT</b>			
CASH			PHP <i>1000.00</i>
CHECK <input type="checkbox"/> On-Us (CBC) <input type="checkbox"/> Local <input type="checkbox"/> MC/CC	Bank/Branch	Check Number	Date of Check
DEBIT ACCOUNT <input type="checkbox"/> Savings Account <input type="checkbox"/> Checking Account Account No.	<p><b>Authority to Debit.</b> This shall serve as my/our authority for the Bank to debit my/our account for the BIR payment. I/We hereby declare under the penalties of perjury that my/our co-depositor(s) is/are still living.</p> <p>Customer's Signature Over Printed Name </p>		
TAX DEBIT MEMO	TDM No.	Approved By 	Bank's Authorized Officer
		<b>TOTAL AMOUNT</b> PHP <i>1000.00</i>	

Distribution: 1-Bank (White), 2-Taxpayer (Yellow), 3-BIR (Green)

