

<b>1702-RT</b> January 2018(ENCS) Page 1	Corporation, Partnership and Other Non-Individual Taxpayer Subject Only to REGULAR Income Tax Rate Enter all required information in CAPITAL LETTERS. Mark applicable boxes with an "X". Two copies MUST be filed with the BIR and one held by the taxpayers.			 1702-RT 01/18ENCS P1
1 For <input checked="" type="radio"/> Calendar 2 Year Ended (MM/20YY) 12 - December 20 23	Fiscal	3 Amended Return? <input checked="" type="radio"/> Yes <input type="radio"/> No	4 Short Period Return <input checked="" type="radio"/> Yes <input type="radio"/> No	5 Alphanumeric Tax Code (ATC) IC 055-Minimum Corporate Income Tax (MCIT) IC010 - CORPORATION IN GENERAL - JAN 1, 2009

**Part I - Background Information**

6 Tax Identification Number (TIN)	728 - 148 - 085 - 00000	7 RDO Code	104
8 Registered Name (Enter only 1 letter per box using CAPITAL LETTERS) UMAYAM WOODCRAFT PRODUCERS COOPERATIVE			
9 Registered Address (Indicate complete address. If the registered address is different from the current address, go to the RDO to update registered address by using BIR Form No. 1905) PUROK 3, POBLACION, LORETO, ADS			
9A ZIP Code 8507			
10 Date of Incorporation/Organization (MM/DD/YYYY)	02/24/2017	11 Contact Number	000
12 Email Address jimevandermanilag@gmail.com		13 Method of Deductions <input checked="" type="radio"/> Itemized Deductions [Section 34 (A-J), NIRC]	
Optional Standard Deduction (OSD) - 40% of Gross Income [Section 34(L), NIRC as amended]			

**Part II - Total Tax Payable**

(Do NOT enter Centavos; 49 Centavos or Less drop down; 50 or more round up)

14 Tax Due	10,363
15 Less: Total Tax Credits/Payments	0
16 Net Tax Payable (Overpayment) (Item 14 Less Item 15)	10,363
Add: Penalties	
17 Surcharge	0
18 Interest	0
19 Compromise	0
20 Total Penalties (Sum of Items 17 to 19)	0
21 TOTAL AMOUNT PAYABLE (Overpayment) (Sum of Items 16 and 20)	10,363

If Overpayment, mark one(1) box only (Once the choice is made, the same is irrevocable)

To be refunded To be issued a Tax Credit Certificate (TCC) To be carried over as a tax credit for next year/quarter

We declare under the penalties of perjury that this return, and all its attachments, have been made in good faith, verified by us, and to the best of our 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. (If signed by an Authorized Representative, indicate TIN and attach authorization letter)

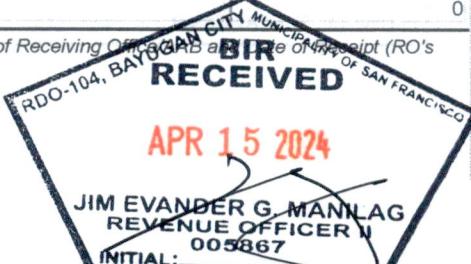
Signature over Printed Name of President/Principal Officer/Authorized Representative		22 Number of Attachments
Title of Signatory	TIN	Signature over Printed Name of Treasurer/Assistant Treasurer
		000

**Part III - Details of Payment**

Particulars	Drawee Bank/ Agency	Number	Date(MM/DD/YYYY)	Amount
23 Cash/Bank Debit Memo				0
24 Check				0
25 Tax Debit Memo				0
26 Others (Specify Below)				0

Machine Validation/Revenue Official Receipt Details [if not filed with an

Stamp of Receiving Office/CAB a/c to the Office of the Receiver (RO's



BIR Form No. <b>1702-RT</b> January 2018(ENCS) Page 3	<b>Annual Income Tax Return</b> Corporation, Partnership and Other Non-Individual Taxpayer Subject Only to REGULAR Income Tax Rate		
			1702-RT 01/18ENCS P3
Taxpayer Identification Number(TIN)		Registered Name	
728	148	085	00000
UMAYAM WOODCRAFT PRODUCERS COOPERATIVE			
<b>Part VI - Schedules</b> <small>(DO NOT enter Centavos; 49 Centavos or Less drop down; 50 or more round up)</small>			
<b>Schedule I - Ordinary Allowable Itemized Deductions</b> <small>(Attach additional sheet/s if necessary)</small>			
1 Amortization	0		
2 Bad Debts	0		
3 Charitable and Other Contributions	0		
4 Depletion	0		
5 Depreciation	0		
6 Entertainment, Amusement and Recreation	0		
7 Fringe Benefits	0		
8 Interest	0		
9 Losses	0		
10 Pension Trusts	0		
11 Rental	0		
12 Research and Development	0		
13 Salaries, Wages and Allowances	0		
14 SSS, GSIS, Philhealth, HDMF and Other Contributions	0		
15 Taxes and Licenses	0		
16 Transportation and Travel	0		
17 Others(Deductions Subject to Withholding Tax and Other Expenses) <small>(Specify below; Add additional sheet/s, if necessary)</small>			
a Janitorial and Messengerial Services	0		
b Professional Fees	0		
c Security Services	0		
d	0		
e	0		
f	0		
g	0		
h	0		
i	0		
<b>18 Total Ordinary Allowable Itemized Deductions</b> <small>(Sum of Items 1 to 17)</small>	0		
<b>Schedule II - Special Allowable Itemized Deductions</b> <small>(Attach additional sheet/s, if necessary)</small>			
Description	Legal Basis	Amount	
1		0	
2		0	
3		0	
4		0	
<b>5 Total Special Allowable Itemized Deductions</b> <small>(Sum of Items 1 to 4)</small>		0	