BIR Form No.

Annual Income Tax Return

Taxpayer PSOC: Ropublika ng Pilipinas Kagawaran ng Pananalopi Kawanihan ng Rentas Internas Kawanihan ng Rentas Internas For Sef-Employed Individuals, Esteles, and Trusts (including those w/ both Business & Compensation Income)

July, 2008 (ENCS)

ar the Year (YYYY) _ 2, O, /, / 2 Amended Return?		Yes No	3 No. of Sheets Attached
Taxpayer/Filer 5 RDO	Sacra	Spous	The FCO
1/34 287 754 0.0.0.0 code	. 0.3.8		First Name: Middle Namou II addition and
[skotye]'s Harre (For Individuals)(hast Name, First Name, Middle Name) (Eat	RES	9 Spouse's Name (bast Name.	FISHNAME: MITTELE MARKOCH, STANGER
MINE DO DE	7(44	11 Registered Address	1 may
Redistered Address	12, 59 M	SON GC	
are of Birth (MM/UD/YYYY) 13 Zip Cotte 14 Telephone N	vumber (175)	15 Date of Birth (MM/DD/YYYY)	18 Zio Code 17 Tolennana stance
01.11.9.4.8 . 17.06 . 3.6.1.	7,8,4,5		25 ATCH 1 1 1 Composed
Line of Business/Occupation	Cart C 2011 (1984) 4 1 1 1 1	20 Une of Business/Occupation	21 ATCIT 011 Compens
Physicial - II 012 Busines	See a restriction	51	11012 Mixed Income
Later of Deduction:	aprackitan	23 Method of Deduction	40% Optional Standard Dec. 1111
Itemized Deduction 40% Optional Standar	Qualified	22B is the wife of	aiming the additional exemption for
Single Married Dependent	Children *	The state of the s	endent children? > Yes
Assembly availing of tay relief under Special Law/Infernational Tay	CTreaty?	Yes No Myes, sp	ecity of
Gor	nputation of T	Taxpayer/Filer	1 : 2 2
Gross Taxable Compensation Income (Schedule 1)	26A	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	265
Less: Deductions Figure 9 Paid on Health and/or Hospitalization	27A		278
Insurance not to exceed P2,400 pe: year.	27C	50,000.	270
Personal and Additional Exemptions Total Deductions (Sum of 27A & 27C/27B & 27D)	27E	50'000	
Tayable Compensation Income/(excess of Deductions over Taxable	28A		288
Compensation Income) (26A less 27E/26B less 2/F)	29A	281410	298
Sales/Receipts/Revenues/Fees (Schedule 2) Less: Cost of Sales/Services (Schedule 3/4)	30A	0.01	308
(For Taxoaver Availing of Hemized Deduction)	31A	281 410.	318
Gross Taxable Business/Profession Income (29A less 30A /29B less 30B)	32A		328
Add: Other Taxable Income (Schedule 5)	33A	281.410	33B
Total (Sum of 31A & 32A/31B & 32B) Less: Allowable Deductions		Total Cold	1000
Chanal Standard Deduction (Sch. 6) or Itemized Deductions (Sch. 7		112 564	34B
Net Income (33A less 34A/33B less 34B)	35A	168,846	35B
Less: F 4:6as of Deduction over Taxable Companies in Income (1 on Item 28/4/288) or the total deductions under line	38A	50 000	368
2 'S/27F if there is no compensation income	37A	118 846	378
Taxable Business Income (35A less 36A/35B less 36B). Total Taxable Income (Sum of Items 28A & 37A/28B & 37B	38A	118 846	388
filing 28 results to taxable income, otherwise, 37A/37B)		18 269,20	398
Tax Due	39A	and the second of the second	
Less: Tax Credits/Payments 46A/B Prior Years' Excess Credits.	40A	77 77 77 77 77 77	408
40C/D Tax Payments for the First Three Quarters	40C	14, 444, 40	40D 40F
40E/F Creditable Tax Withheld for the First Three Quarters	40E	AND THE PARTY OF T	40H
400/H Creditable Tax Withheld Per BIR Form No. 2307 for the 4th Ctr.	40G	1044-4	403
40I/J Tax Withheld Per BIR Form No. 2316	40K		400
40K/L Foreign Tax Credits 40M/N Tax Paid in Return Previously Fied. If this is an Amended Return	40M		40N
40O/P Other Payment's made (pls. attach proof of payment-BIR Form No. 0605)	400		40P
ADQ/R Total Fax Credits(Payments(Sum of 40A,C,E,G,LK,M,O,408,D,F,H,J,U,N,P.)	40Q		40R
1 Tax Payable/(Overpayment) (Item 39A less 40Q/39B less 40R)	41A	[1,175,20]	418
Z Add. Penalties Surcharge	42A	Contract of the Contract of th	420
Interest	42C 42E		42F
Compromise Total Penalties (Sum of Items 42A.C.E/42B,D.F)	42G		42H
 Fatel Amount Payable/ (Overnayment) (Sum of Items 41A, 42G/418, 42H) 	43A		(438)
Aggregate amount Payable/(Overpayment)(Sum of Item	s 43A & 43B)	43C	1/75,20)
If overnayment mark one box only: To be refunded	To be iss	ued a Tax Credit Certificate: 🔀.	Stamp of Receiving Utilian
erkill Drawes Sanki Details of P	Date	Amount	and Date of Receipt (R
Particulars Agency Number min	A DO LY	44D OUREAU DE LUS	Signature/Bank Teller's I
Debit Memo.	444	45D NO PAPMEN	WE REVENDE
45 Check 45A 45B 45C		460 A	VERWIT-
66 Tax Debit Memo 46A 46B		FEB 0 2	274
47 Others 47A 47B		TO A ST. 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	CONTRACTOR OF THE CONTRACTOR O