



BIR Form No.
1601-EQ
January 2018
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Quarterly Remittance Return of Creditable Income Taxes Withheld (Expanded)

Enter all required information in CAPITAL LETTERS using BLACK ink. Mark all applicable boxes with an "X". Two copies MUST be filled with the BIR and one held by the Taxpayer.



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1 For the Year 2021	2 Quarter <input checked="" type="radio"/> 1ST <input type="radio"/> 2ND <input type="radio"/> 3RD <input type="radio"/> 4TH	3 Amended Return? <input type="radio"/> Yes <input checked="" type="radio"/> No	4 Any Taxes Withheld? <input checked="" type="radio"/> Yes <input type="radio"/> No	5 No. of Sheet/s Attached 0
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Part I - Background Information

6 Taxpayer Identification Number (TIN)	009 590 900 000	7 RDO Code	54B
8 Withholding Agent's Name (Last Name, First Name, Middle Name for Individual OR Registered Name for Non-Individual) EGATE INC.			
9 Registered Address (Indicate complete address. If branch, indicate the branch address. If registered address is different from the current address, go to the RDO to update registered address by using BIR Form No. 1905) U-E NANAY NORA BLDG., CENTENNIAL ROAD GAHAK KAWIT CAVITE			
			9A ZIP Code 1300
10 Contact Number	09175078084	11 Category of Withholding Agent	<input checked="" type="radio"/> Private <input type="radio"/> Government
12 Email Address egateinc@yahoo.com			

Part II - Computation of Tax

	ATC	Tax base (Consolidated for the Quarter)	Tax Rate	Tax Withheld (Consolidated for the Quarter)
13	WI100	22,000.00	5.0 %	1,100.00
14			%	0.00
15			%	0.00
16			%	0.00
17			%	0.00
18			%	0.00

19 Total Taxes Withheld for the Quarter (Sum of Items 13 to 18)	19	1,100.00
20 Less: Remittances Made: 1 st Month of the Quarter	20	1,100.00
21 2 nd Month of the Quarter	21	0.00
22 Tax Remitted in Return Previously Filed, if this is an amended return	22	0.00
23 Over-remittance from Previous Quarter of the same taxable year	23	0.00
24 Total Remittances Made (Sum of Items 20 to 23)	24	1,100.00
25 Tax Still Due/(Over-remittance) (Item 19 less Item 24)	25	0.00
Add: Penalties 26 Surcharge	26	0.00
27 Interest	27	0.00
28 Compromise	28	0.00
29 Total Penalties (Sum of Items 26 to 28)	29	0.00
30 TOTAL AMOUNT STILL DUE/(Over-remittance)(Sum of Items 25 and 29)	30	0.00

If over-remittance, mark one (1) box only ☐ To be Refunded ☐ To be issued Tax Credit Certificate ☐ To be carried over to the next quarter within the same calendar year (not applicable for succeeding year)

I/We declare under the penalties of perjury that this remittance form, and all its attachments, has been made in good faith, verified by me/us, and to the best of my/our knowledge and belief, is true and correct, pursuant to the provisions of the National Internal Revenue Code, as amended, and the regulations issued under authority thereof. Further, I/we give my/our consent to the processing of my/our information as contemplated under the "Data Privacy Act of 2012 (R.A. No. 10173) for legitimate and lawful purposes. (If Authorized Representative, attach authorization letter)

For Individual:	For Non-Individual:		
Signature over Printed Name of Taxpayer/Authorized Representative/Tax Agent (Indicate Title/Designation and TIN)	Signature over Printed Name of President/Vice President/ Authorized Officer or Representative/Tax Agent (Indicate Title/Designation and TIN)		
Tax Agent Accreditation No./ Attorney's Roll No. (If applicable)	Date of Issue (MM/DD/YYYY)	Date of Expiry (MM/DD/YYYY)	

Part III - Details of Payment

Particulars	Drawee Bank/Agency	Number	Date (MM/DD/YYYY)	Amount
31 Cash/Bank Debit Memo				
32 Check				
33 Tax Debit Memo				
34 Others (specify below)				

Machine Validation/Revenue Official Receipt Details
(If not filed with an Authorized Agent Bank)

Stamp of Receiving Office/AAB and Date of Receipt
(RO's Signature/Bank Teller's Initial)