BIR Form No.

1601-C

Monthly Remittance Return of Income Taxes Withheld on Compensation



January 2018 (ENCS) **Page 1** 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. 3 Any Taxes Withheld? 2 Amended Return? 4 Number of Sheet/s Attached For the Month (MM/YYYY) ATC Yes 2021 No No n WW010 **PART I - BACKGROUND INFORMATION** / 590 / 900 / 000 009 RDO Code 54B Taxpaver Identification Number (TIN) Withholding Agent's Name (Last Name, First Name, Middle Name for Individual OR Registered Name for Non-Individual) 9 Registered Address (Indicate complete address. If branch, indicate the branch 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) U-E NANAY NORA BLDG., CENTENNIAL ROAD GAHAK KAWIT CAVITE 4104 **9A** Zip Code 09175078084 10 Contact Number Government 11 Category of Withholding Agent Private 12 Email Address egateinc@yahoo.com 13 Are there payees availing of tax relief under No 13A If yes, specify Special Law or International Tax Treaty? **PART II - COMPUTATION OF TAX Total Amount of Compensation** 66,000.00 Less: Non-Taxable/Exempt Compensation 0.00 15 Statutory Minimum Wage for Minimum Wage Earners (MWEs) 15 0.00 16 Holiday Pay, Overtime Pay, Night Shift Differential Pay, Hazard Pay (for MWEs only) 16 0.00 17 13th Month Pay and Other Benefits 17 18 De Minimis Benefits 18 0.00 SSS, GSIS, PHIC, HDMF Mandatory Contributions & Union Dues (employee's share only) 19 0.00 19 20 0.00 20 Other Non-Taxable Compensation (specify) 21 Total Non-Taxable Compensation (Sum of Items 15 to 20) 21 0.00 66.000.00 22 Total Taxable Compensation (Item 14 Less Item 21) 22 Less: Taxable compensation not subject to withholding tax (for employees, other than MWEs, receiving P250,000 & below for the 0.00 23 23 66.000.00 Net Taxable Compensation (Item 22 Less Item 23) 24 24 25 0.00 25 **Total Taxes Withheld** 0.00 26 26 Add/(Less): Adjustment of Taxes Withheld from Previous Month/s (From Part IV-Schedule 1, Item 4) 0.00 27 Taxes Withheld for Remittance (Sum of Items 25 and 26) 27 Less: Tax Remitted in Return Previously Filed, if this is an amended return 0.00 28 28 0.00 29 29 Other Remittances Made (specify) 30 0.00 30 Total Tax Remittances Made (Sum of Items 28 and 29) 0.00 31 Tax Still Due/(Over-remittance) (Item 27 Less Item 30) 31 0.00 Add: Penalties 32 Surcharge 32 0.00 33 Interest 33 0.00 **34** Compromise 34 35 Total Penalties (Sum of Items 32 to 34) 35 0.00 TOTAL AMOUNT STILL DUE/(Over-remittance) (Sum of Items 31 and 35) 36 0.00 I/We declare under the penalties of perjury that this remittance return, and all its attachments, have been made in good faith, verified by me/us, and to the best of my/our knowledge and belief, is true and correct, pursua 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 trivacy Act of 2012 (R.A. No. 10173) for legitimate and lawful purposes. (If Authorized Representative, attach authorization letter) Signature over Printed Name of Taxpayer/Authorized Representative/Tax Agent (Indicate Title/Designation and TIN) Signature over Printed Name of President/Vice President Officer or Representative/Tax Agent (Indicate Title/Design Tax Agent Accreditation No./ Attorney's Roll No. (If applicable) Date of Expiry (MM/DD/YYYY **PART III - DETAILS OF PAYMENT** Drawee Bank/Agency Date (MM/DD/YYYY) **Particulars** Number Amount 37 Cash/Bank Debit Memo 38 Check 39 Tax Debit Memo 40 Others (specify below)