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.



1	For the Year 2 Quarte	er		3 Amended	Return?	4	Any Tax	es Withheld?		5 No. of Sheet/s Attached
	2019 01:	ST 2ND 3RD	◯4TH	OYe	es 🔘	No	•	Yes C) No	0
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.										
g 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) UNIT E NANAY NORA BLDG., CENTENNIAL RD., GAHAK, KAWIT, CAVITE										
9A ZIP Code 4104										
10 Contact Number 09175092056 11 Category of Withholding Agent © Private Covernment										
12 Email Address grepovsky@yahoo.com										
Part II - Computation of Tax										
	ATC									
13	WI100		66,	00.00			5.0 %			3,300.00
14							%			0.00
15							%			0.00
16							%			0.00
17							%			0.00
18							%			0.00
19		he Quarter (Sum of Items 13 to	18)						19	3,300.00
20	Less: Remittances Made:	1 st Month of the Quarter							20	1,100.00
21						21	1,100.00			
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	2,200.00
25	Tax Still Due/(Over-remittance) (Item 19 less Item 24)							;	25	1,100.00
	Add: Penalties 26 Surcha			26			0.00			
	27 Intere			2			0.00			
	28 Comp	promise						;	28	0.00
	29 Total	Penalties (Sum of Items 26 to 2	28)					;	29	0.00
30	TOTAL AMOUNT STILL	DUE/(Over-remittance)(Sum of	f Items 25 an	d 29)				;	30	1,100.00
To be carried over to the next quarter within the same										
If over-remittance, mark one (1) box onlyTo be RefundedTo be issued Tax Credit CertificateTo be carried over to the rest quarter within the same calendar year (not applicable for succeeding year)										
belie	f, is true and correct, pursua	ant to the provisions of the Natio	onal Internal	Revenue Code,	as amended, a	and the regi	ulations iss	ued under auth	ority the	reof. Further, I/we give my/our
	ent to the processing of my/ h authorization letter)	our information as contemplate	d under the *	Data Privacy Ac	t of 2012 (R.A	. No. 10173	3) for legitin	nate and lawful	purpose	es. (If Authorized Representative,
For I	ndividual:				For Non-Indi	vidual:				
	Signature over Printed Na	Signature over Printed Name of President/Vice President/								
(Indicate Title/Designation and TIN) Tax Agent Accreditation No./					Authorized Officer or Representative/Tax Agent (Indicate Title/Designation and TIN) Date of Issue Date of Expiry					
Attorney's Roll No. (If applicable)				(MM/DD/YYYY)					/M/DD/Y	
Part III - Details of Payment										
24	Particulars	Drawee Bank/Agenc	у	Number		Date	(MM/DD/Y	YYY)		Amount
31	Cash/Bank Debit Memo	J.								
32	Check									
33	Tax Debit Memo									
34	Others (specify below)				I					
Mari	hine Validation/Devenue Of	ficial Pagaint Details				1,	04	n of Possities :	Office /^	AR and Data of Reseirt
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)			
1										

NOTE: *Please read the BIR Data Privacy Policy found in the BIR website (www.bir.gov.ph)