


(To be filled up by the BIR)

► DLN:

PSOC:

► PSIC:



Republika ng Pilipinas  
Kagawaran ng Pananalapi  
Kawanihan ng Rentas Internas

Annual Information Return  
of Income Taxes Withheld on  
Compensation and Final Withholding Taxes

BIR Form No.  
**1604-CF**  
July 2008 (ENCS)

Fill in all applicable spaces. Mark all appropriate boxes with an "X".

1 For the Year (YYYY) ►

2 Amended Return? ► ☐ Yes ☐ No

3 No of Sheets Attached ►

Part I

Background Information

4 TIN ►

5 RDO Code ►

6 Line of Business/ Occupation ►

7 Withholding Agent's Name (Last Name, First Name, Middle Name for Individuals)/(Registered Name for Non-Individuals) ►

8 Telephone No. ►

9 Registered Address ►

10 Zip Code ►

11 In case of overwithholding/overremittance after the year-end adjustment on compensation, have you released the refund/s to your employee/s? ☐ Yes ☐ No

If yes, specify the date of refund

12 Total Amount of Overremittance on Tax Withheld under Compensation

13 Month of First Crediting of Overremittance

14 Category of Withholding Agent ☐ Private ☐ Government

Part II

Summary of Remittances

Schedule 1

Remittance per BIR Form No. 1601-C

MONTH	DATE OF REMITTANCE	NAME OF BANK/BANK CODE/ ROR NO., IF ANY	TAXES WITHHELD	ADJUSTMENT	PENALTIES	TOTAL AMOUNT REMITTED
JAN						
FEB						
MAR						
APR						
MAY						
JUN						
JUL						
AUG						
SEP						
OCT						
NOV						
DEC						
TOTAL						

Schedule 2

Remittance per BIR Form No. 1601-F

MONTH	DATE OF REMITTANCE	NAME OF BANK/BANK CODE/ ROR NO., IF ANY	TAXES WITHHELD	PENALTIES	TOTAL AMOUNT REMITTED
JAN					
FEB					
MAR					
APR					
MAY					
JUN					
JUL					
AUG					
SEP					
OCT					
NOV					
DEC					
TOTAL					

Schedule 3

Remittance per BIR Form No. 1602

MONTH	DATE OF REMITTANCE	NAME OF BANK/BANK CODE/ ROR NO., IF ANY	TAXES WITHHELD	PENALTIES	TOTAL AMOUNT REMITTED
JAN					
FEB					
MAR					
APR					
MAY					
JUN					
JUL					
AUG					
SEP					
OCT					
NOV					
DEC					
TOTAL					

Schedule 4

Remittance per BIR Form No. 1603

QUARTER	DATE OF REMITTANCE	NAME OF BANK/BANK CODE/ ROR NO., IF ANY	TAXES WITHHELD	PENALTIES	TOTAL AMOUNT REMITTED
1ST QTR					
2ND QTR					
3RD QTR					
4TH QTR					
TOTAL					

We declare, under the penalties of perjury, that this declaration has been made in good faith, verified by us, and to the best of 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.

15 President/Vice President/Principal Officer/Accredited Tax Agent/ Authorized Representative/Taxpayer (Signature Over Printed Name)

16 Treasurer/Assistant Treasurer (Signature Over Printed Name)

Title/Position of Signatory

TIN of Signatory

Tax Agent Acc. No./Atty's Roll No. (if applicable)

Date of Issuance

Date of Expiry

TIN of Signatory

Stamp of Receiving Office and Date of Receipt

Test Output