(To be filled up by the BIR)
DLN: PSIC:

Republika ng Pilipinas
Kagawaran ng Pananalapi
Kawanihan ng Rentas Internas

Remittance Return of Percentage Tax on Winnings and Prizes Withheld by Race Track Operators

BIR Form No.
1600-WP
January 2010 (ENCS)

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

1 For the Period (MM/DD/YYYY) From ____ To ____
2 Amended Return? Yes No
3 No. of Sheet/s Attached
4 Any Taxes Withheld? Yes No

Part I — Background Information

5 TIN
6 RDO Code
7 Category of Withholding Agent: Private / Government
8 Withholding Agent's Name (Last Name, First Name, Middle Name for Individuals)/(Registered Name for Non-Individuals)
9 Registered Address
10 Zip Code
11 Are there payees availing of tax relief under Special Law or International Tax Treaty? Yes No If yes, specify

Part II — Computation of Tax

*ATC	NATURE OF PAYMENT	TAX BASE	RATE	TAX REQUIRED TO BE WITHHELD
WB 191	Tax on winnings from double, forecast/quinella and trifecta bets on horse races paid by Government Withholding Agent		4%	
WB 192	Tax on winnings or prizes paid to winners of winning horse race tickets other than double, forecast/ quinella and trifecta bets; & owners of winning race horses paid by Government Withholding Agent		10%	
WB 193	Tax on winnings from double, forecast/quinella and trifecta bets on horse races paid by Private Withholding Agent		4%	
WB 194	Tax on winnings or prizes paid to winners of winning horse race tickets other than double, forecast/ quinella and trifecta bets; and owners of winning race horses paid by Private Withholding Agent		10%	

12 Tax Required to be Withheld and Remitted — 12
13 Less: Tax Remitted in Return Previously Filed, if this is an amended return — 13
14 Tax Still Due/(Overremittance) — 14
15 Add: Penalties — Surcharge 15A — Interest 15B — Compromise 15C — 15D
16 Total Amount Still Due / (Overremittance)(Sum of Items 14 & 15D) — 16
For late filers with overremittance, extend amount of penalties (Item 15D to 16).
If overremittance, mark one box only: To be Refunded / To be issued a Tax Credit Certificate

ATTACHMENT TO BIR FORM 1600-WP - ALPHABETICAL LIST OF PAYEES (FORMAT ONLY) Page ____ of ____

FOR THE PERIOD (MM/DD/YYYY) FROM ____ TO ____ WITHHOLDING AGENT TIN: ____ WITHHOLDING AGENT NAME: ____

Schedule 1.1 ALPHABETICAL LIST OF PAYEES FROM WHOM TAXES WERE WITHHELD (Attach additional sheet/s, if necessary)

SEQ. NO.	PAYEE DETAILS		*ATC	INCOME PAYMENT/TAX WITHHELD DETAILS		TAX	TAX REQUIRED
	TIN	INDIVIDUAL/CORPORATION		NATURE OF PAYMENT	AMOUNT	RATE	TO BE WITHHELD
(1)	(2) (Including Branch Code)	(3) (LAST NAME, FIRST NAME, MIDDLE NAME FOR INDIVIDUALS OR REGISTERED NAME FOR NON-INDIVIDUALS)	(4)	(5)	(6)	(7)	(8)
				TOTAL	P		P

I declare, under the penalties of perjury that this return has been made in good faith, verified by me, and to the best of my 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.

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Taxpayer/Authorized Representative/Accredited Tax Agent — Title/Position of Signatory — TIN of Signatory
Tax Agent Acc. No./Atty's Roll No. (if applicable) — Date of Issuance — Date of Expiry

Part III — Details of Payment

Particulars		Drawee Bank/ Agency		Number		Date (MM DD YYYY)		Amount
18 Cash/ Bank Debit Memo	18A		18B		18C		18D	
19 Check	19A		19B		19C		19D	
20 Others	20A		20B		20C		20D	

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

Machine Validation/Revenue Official Receipt Details (If not filed with the bank)