



BIR Form No. 1604-F January 2018 Page 1		Annual Information Return of Income Payments Subjected to Final Withholding Taxes 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 Taxpayer.			 1604-F 01/18 P1	
1 For the Year (YYYY)		2 Amended Return? ☐ Yes ☐ No		3 No. of Sheet/s Attached		
Part I – Background Information						
4 Taxpayer Identification Number (TIN)			5 RDO Code			
6 Withholding Agent's Name (Last Name, First Name, Middle Name for Individual OR Registered Name for Non-Individual)						
7 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)						
8A ZIP Code						
8 Category of Withholding Agent ☐ Private ☐ Government			8A If private, top withholding agent? ☐ Yes ☐ No			
9 Contact Number		10 Email Address				
11 Are there payees availing of tax relief under Special Law or International Tax Treaty? ☐ Yes ☐ No		11A If yes, specify				
Part II – Summary of Remittances						
Schedule 1 – Remittance per BIR Form No. 1601-FQ on Final Taxes Withheld						
Quarter	Date of Remittance (MM/DD/YYYY)	TRA/eROR/eAR Number	Taxes Withheld	Penalties	Total Amount Remitted	
1 st Quarter						
2 nd Quarter						
3 rd Quarter						
4 th Quarter						
TOTAL						
Schedule 2 – Remittance per BIR Form No. 1602Q on Interest Payments						
Quarter	Date of Remittance (MM/DD/YYYY)	TRA/eROR/eAR Number	Taxes Withheld	Penalties	Total Amount Remitted	
1 st Quarter						
2 nd Quarter						
3 rd Quarter						
4 th Quarter						
TOTAL						
Schedule 3 – Remittance per BIR Form No. 1603Q on Fringe Benefits						
Quarter	Date of Remittance (MM/DD/YYYY)	TRA/eROR/eAR Number	Taxes Withheld	Penalties	Total Amount Remitted	
1 st Quarter						
2 nd Quarter						
3 rd Quarter						
4 th Quarter						
TOTAL						
I/We declare under the penalties of perjury that this return, 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.						
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)			

*NOTE: The BIR Data Privacy is in the BR website (www.bir.gov.ph)

