

- Calendar Year  
 Fiscal Year (Month Corporate Year Ends: \_\_\_\_\_)  
 Amended Return

**PART I – CORPORATION INFORMATION**

<b>1</b>	Corporation Name _____	<b>2</b>	Taxpayer Identification Number (TIN) _____
<b>3</b>	Date of Incorporation _____	<b>4</b>	Line of Business / Industry _____
<b>5</b>	Registered Address _____		
<b>6</b>	Email Address _____	<b>7</b>	Contact Number _____

**PART II – COMPUTATION OF TAX**

No.	Particulars	Amount
8	Gross Sales / Receipts / Revenues	
9	Less: Cost of Sales / Services	
10	<b>Gross Income from Operations (Subtract Line 9 from Line 8)</b>	
11	Add: Other Taxable Income (not subjected to final tax)	
12	<b>Total Gross Income (Add Line 10 and Line 11)</b>	
13	Less: Ordinary Allowable Itemized Deductions	
14	Less: Special Allowable Itemized Deductions	
15	<b>Total Deductions (Add Line 13 and Line 14)</b>	
16	<b>Taxable Income (Subtract Line 15 from Line 12)</b>	
17	Applicable Income Tax Rate	_____ %
18	<b>Income Tax Due</b>	
19	Less: Share of Corporate Tax Credits/Payments (Prior quarters, Creditable Tax Withheld)	
20	<b>Net Tax Payable / (Overpayment) (Subtract Line 19 from Line 18)</b>	

**PART III – DETAILS OF PAYMENTS**

Particulars	Source / Drawers Bank	Number / Ref. No.	Date	Amount
Cash / Bank Debit Memo				
Check Payments				
Tax Debit Memo				

**DECLARATION AND SIGNATURES**

We declare under the penalties of perjury that this return, and all accompanying documents, have been made in good faith, verified by us, and to the best of our knowledge and belief, are true, correct, and complete.

\_\_\_\_\_  
**President / Authorized Representative**  
(Signature over Printed Name)

\_\_\_\_\_  
**Treasurer / Chief Financial Officer**  
(Signature over Printed Name)

Date Signed

Date Signed