

Reference No: 602500063730574 Date Filed: January 23 2025 08:00 AM Batch Number : 0



Republic of the Philippines Department of Finance Bureau of Internal Revenue

For BIR Use Only: BCS/ Item:

BIR Form No.

1604-E January 2018 (ENCS) Page 1 **Annual Information Return**

of Creditable Income Taxes Withheld (Expanded)/ Income Payments Exempt from Withholding Tax

Enter all required information in CAPITAL LETTERS using BLACK ink. Mark applicable boxes with an "X". Two copies MUST be filed with the BIR and one held by the Taxpayer



1604-E 01/18ENCS P

1 For the Year (20YY)	2024			2 Amended Return?		Yes No	3 Number of Sheet/s Attach	ed	0
			Part I -	- Background Ir	nformat	tion			
4 Taxpayer Identification	Number (TIN)	004	661	920	000		5 RDO Code	050	
6 Withholding Agent's Na	ame (Last Name, Firs	t Name, Middle Nan	ne for Individ	dual OR Registered	Name fo	or Non-Individual)			
KOLIN MARKETING, IN	IC.								
7 Registered Address (In registered address by us	dicate complete addr ing BIR Form No. 196	ress. If branch, indica 05)	ate the bran	ch address. If the re	egistered	l address is differen	nt from the current address, go	to the R	DO to update
1854 STA. RITA ST. GU	ADALUPE NUEVO N	MAKATI CITY							
							7A ZipCode	1212	
8 Category of Withholdin	ng Agent			8A If p	rivate, to	p witholding?			
Private Govern	nment				Yes N	No.			
9 Contact Number				10 Em	ail Addre	ess			
5514792				effore	e@koling	phil com ph		Proprieta Contractor	

Part II - Summary of Remittances

Schedule 1 - Remittance per BIR Form No. 1601-EQ

Quarter	Date of Remittance (MM/DD/YYYY)	Drawee Bank/ Bank code/ Agency	TRA/eROR/eAR Number	Taxes Withheld	Penalties	Total Amount Remitted
1st Quarter	04/12/2024	000	240815978	131,246.23	0.00	131,246.23
2nd Quarter	07/10/2024	000	242650168	226,045.51	0.00	226,045.51
3rd Quarter	10/15/2024	000	244524872	171,397.83	0.00	171,397.83
4th Quarter	01/16/2025	000	256191982	230,315.35	0.00	230,315.35
TOTAL				759,004.92	0.00	759,004.92

Schedule 2 - Remittance per BIR Form No. 1606

Month	Date of Remittance (MM/DD/YYYY)	Drawee Bank/ Bank code/ Agency	TRA/eROR/eAR Number	Taxes Withheld	Penalties	Total Amount Remitted
January				0.00	0.00	0.00
February	And the state of t		AND COMMON TO SECURITION AND AND ADDRESS OF THE PARTY OF	0.00	0.00	0.00
March				0.00	0.00	0.00
April			CONTROL OF AN ADDRESS OF THE STATE OF THE ST	0.00	0.00	0.00
May				0.00	0.00	0.00
June				0.00	0.00	0.00
July				0.00	0.00	0.00
August				0.00	0.00	0.00
September				0.00	0.00	0.00
October				0.00	0.00	0.00
November				0.00	0.00	0.00
December			Annual Control of the	0.00	0.00	0.00
TOTAL				0.00	0.00	0.00

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

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

Attachments



https://efps.bir.gov.ph

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Annual Information Return

of Creditable Income Taxes Withheld (Expanded)/ Income Payments Exempt from Withholding Tax



TIN Withholding Agent's Name (Last Name for Individual OR Registered Name for Non-Individual)

004 661 920 000 KOLIN MARKETING, INC.

Schedule	3 - Alphalist	of Payees Subject to Expanded Withho	olding T	ax (Declared and Certified u	sing BIR F	Form No. 2307)
SEQ. No.	TIN	Name of Payees (Last Name, First Name, Middle Name for Individual)/(Registered name for NonIndividual)	ATC	Amount of Income Payment	Tax Rate	Amount of Tax Withheld
(1)	(2)	(3)	(4)	(5)	(6)	(7) = (5 x 6)
TOTAL					1	
Schedule		of Other Payees Whose Income Paym ax (Declared and Certified using BIR Form No. 2		Exempt from Withhol	ding Ta	x but Subject to
SEQ. No.			2304)	T	T	Amount of Income Payment
SEQ.	Income T	Name of Payees (Last Name, First Name, Middle Name for Individual)/(Registered name for	2304)	T	T	Amount of Income
SEQ.	Income T	Name of Payees (Last Name, First Name, Middle Name for Individual)/(Registered name for	2304)	T	T	Amount of Income
SEQ.	Income T	Name of Payees (Last Name, First Name, Middle Name for Individual)/(Registered name for	2304)	T	T	Amount of Income
SEQ.	Income T	Name of Payees (Last Name, First Name, Middle Name for Individual)/(Registered name for	2304) for AT	T	T	Amount of Income

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