

BIR Form No. **1800**

Donor's Tax Return



January 2018 (ENCS) Enter all re		PITAL LETTERS using BLAC ST be filed with the BIR and or			n an "X".		17.4.17		 	I8EN	CS P1	
1 Date of Donation (MM/DD/YY)		2 Amended Return?	Yes	NO I	of Shee	t/s		4 Alphanum Tax Code		DN	010	
		Part I – T	axpayer Int	ormation				•				
5 Donor's Taxpayer Identif	fication Number (TIN)		-	-	0 0	0,0,0	6 RDO Co	de			
7 Donor's Name (Last Name,	First Name, Middle N	lame for Individuals OR R	egistered Name	for Non-Indiv	riduals)							
8 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 Cod	de					
9 Residence Address (Indicate complete address)												
9A ZIP Code												
10 Contact Number 11 Email Address												
Donee's Name (Attach additional sheet/s, if necessary) Donee's Taynayer Identification Number												
12 Last Name, First N		Donee's Taxpayer Identification Number										
A B												
C												
D E												
13 Are you availing of tax relic		Yes No 13/	A If yes, specify									
		Part II –	Computation	on of Tax								
14 Total Net Gifts Subject to	Tax (From Part IV Iten	1 38)				<u> </u>				•	1	
15 Applicable Donors Tax Ra	ate								6	•	0%	
16 Total Donor's Tax Due (Ite	em 14 x Item 15)					<u> </u>				•	I	
17 Less: Tax Credit Payments												
17A Payments for I						•	L_					
17B Foreign Donor						•	L_					
17C Tax Paid in Pro	eviously Filed Retu	m, if this is an Amende	ed Return							•	L_	
17D Total Tax Credits/Payments (Sum of Items 17A to 17C)										•		
18 Tax Payable/(Overpayme	nt) (Item 16 Less Item	17D)								•		
19 Add: Penalties						l						
19A Surcharge										•		
19B Interest		l I				•						
19C Compromise						•	L_					
19D Total Penalties						•						
20 TOTAL AMOUNT PAYAE		* '	*				<u> </u>			•		
In case of overpayment, app I/We declare under the penalties of p					,	lour knowled	dae and helief	is true and correct nurs	ant to the	provisio	ne of	
the National Internal Revenue Code, as ame No. 10173) for legitimate and lawful purposes	nded, and the regulations iss	ued under authority thereof. Furth	er, I/we give my/our o									
For Individual:	s. (II Authorized Nepresental	ve, allacii opeciai i owei oi Alloiii	For Non-Individ	lual:								
Signature over Printed Name of Ta	Printed Name of				rized Officer or Rep	resentati	ive/Tax	Agent				
Tax Agent Accreditation No. /	tle/designation and TIN	(Indicate title/designation and TIN) te of Issue Date of Expiry UNDOACCO										
Attorney's Roll No. (If applicable) (MM/DD/YYYY) (MM/DD/YYYY) Part III – Details of Payment												
Details of Payment Drawee Bank/ Number Date (MM/DD/VVV) Amount												
21 Cash/Bank Debit Memo	Agency				,			7				
22 Check										•		
23 Tax Debit Memo										•		
24 Others (Specify below)								•				
		1 1 1 1			1 1				1		1	
Machine Validation				Stamp		zed Agent Bank a		of Red	ceipt			
			((Bank Teller's Initi	<i>11)</i>							

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J	anuary 2018 (ENCS Page 2	5)						Пп		771	ľď	180	0 01/1	8EN	CS P2
TI	IN	Donor's Name										.50	- 51/1	2-14V	
Part IV – Computation of Tax															
25	25 Personal Properties (From Part V Schedule A)													•	
26 Real Properties (From Part V Schedule B)													•		
27 Total Gifts in this Return (Sum of Items 25 and 26)														•	
Less: Deductions															
28							1		<u> </u>				Ì	•	
29							1		<u> </u>					•	
30														•	
31														•	
32														•	
33 Total Deductions Allowed (Sum of Items 28 to 32)													•		
34 Total Net Gifts in this Return (tems 27 Less Item 33)													•		
35 Add: Total Prior Net Gifts During the Calendar Year (Item 36 of Return Previously Filed within the year)													•		
36 Total Net Gifts (Sum of Items 34 and 35)													•		
37 Less: Exempt Gift								1 1	2	5 0	0 (0 0	•	0 0	
38	Total Net Gifts Su	bject to Tax (Item 36 Less Item 37)										<u> </u>		•	
	ahadula A. D	ovintion of Danata J Da	mal Person	Part V - Sc		<i>y</i>	,								
30	cheaule A - Des	scription of Donated Perso PARTIC		L y (Attach addit	ionai sheet/s,	, if necessary			F.	AIR M	ARKE	T VAL	UE		
1															
2	<u> </u>														
4															
5 6 7															
Ω															
9 10															
	OTAL (To Part IV Ite.	m 25)													
		scription of Donated Real F	Property (At	ttach additional	sheet/s. if ned	cessarv)									
0	CT/TCT/CCT NO.	TAX DECLARATION NO. (TD)			CATION			LOT	/IMPR	OVE	MENT	*CI	_ASSI	FICA	TION
2															
3															
4 5															
6															
7 o									_		_				
8												1			
10	•														
Schedule B – Continuation of the Description of Donated Real Property										FΔID	MAD	KET V	ALUE		
	AREA	FAIR MARKET VALUE (FMV)	PER TD	FMV PE	R BIR (ZON	AL VALUE)					nicheve				
1															
3															
5															
6															
7															
9															
10	OTAL (To Part IV I	tom 26)													
	JIAL (10 Part IV I	CIII 201													