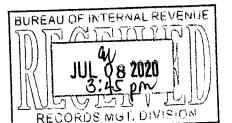
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(Fill out the table properly. Write N/A if not applicable and use additional sheet/s, if necessary) A. Foreign Related Party Transactions		
Taxpayer Identification Number Availed of Treaty Benefits? Yes / No Applicable Treaty Rate Amount of Income/ Expense Tax Withheld on Income Payments to Related Party (For Expenses)	ed Party Related Party	
B. Domestic Related Party Transactions		
Nature of Transaction / Related Account Name Domestic Related Party Address		
Tax Withheld on Income	ax Withheld by the	
Taxpayer Identification Number Amount of Income / Expense Payments to Related Party (For Expenses)	Related Party (For Receipts)	
Part III – Details of Related Party Transactions per Category (Fill out the table properly. Write N/A if not applicable and use additional sheet/s, if necessary)		
A. Details of Transactions with the Parent		
Name of Company Address Natu	re of Transaction	
Amount / Volume Outstanding Balance Terms Conditions Provisions for	Expense	
Amount / Volume Outstanding Balance Terms Conditions Doubtful Debts*	Recognized**	



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February 2020	N TRANSAC	DRMATION RE TIONS WITH R RNATIONAL AND/OR DO		RTY	
Page 2		Taxpayer's Nam			1709 02/
Taxpayer Identifica	ation Number (TIN)	Taxpayer's Nam		<u>te la la dela fiste de la terre de la de</u>	<u> </u>
B. Summary of Tra Name of C		ies with Joint Control	or Significant Influe dress	nce over the Entity	e of Transaction
Name of O	Uniparty				
				Provisions for	Expense
Amount / Volume	Outstanding Balance	Terms	Conditions	Doubtful Debts*	Recognize
	ansactions with Subs				
Name of C	ompany	Ac	ldress	Natur	re of Transaction
		· · · · · · · · · · · · · · · · · · ·			
Amount / Volume	Outstanding Balance	Terms	Conditions	Provisions for Doubtful Debts*	Expense Recognize
,					
D. Summary of Tra Name of C	ansactions with Asso Company		idress	Natu	re of Transaction
			idress	Natur	re of Transaction
		Ac	idress Conditions	Provisions for Doubtful Debts*	Expense
Name of C	company	Ac		Provisions for Doubtful Debts*	Expense
Name of C	company	Ac		Provisions for	Expense
Name of C	company	Ac		Provisions for Doubtful Debts*	Expense
Name of C Amount / Volume E. Summary of Tra	Outstanding Balance	Ac	Conditions	Provisions for Doubtful Debts*	Expense Recognize
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Name of C Amount / Volume E. Summary of Tra	Outstanding Balance	Ac Terms	Conditions e Entity is a Joint Ve	Provisions for Doubtful Debts*	Expense Recognize
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Name of C Amount / Volume E. Summary of Tra	Outstanding Balance	Ac Terms Ventures in which the Ac	Conditions e Entity is a Joint Ve	Provisions for Doubtful Debts*	Expense Recognize re of Transaction
Name of C Amount / Volume E. Summary of Tra Name of C	Company Outstanding Balance ansactions with Joint	Ac Terms Ventures in which the Ac	Conditions e Entity is a Joint Ve Idress	Provisions for Doubtful Debts*	Expense Recognize re of Transaction
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۰, **INFORMATION RETURN** ON TRANSACTIONS WITH RELATED PARTY (INTERNATIONAL AND/OR DOMESTIC)



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l axpayer identificat	ION NUMBER (IIN)	laxpa	iyer's Nam	8				na senten en e
	nsactions with Other	Related Pa	arties		200 년 21 문			
Name of Company Address / Place of Residence					College and a sec	Nature of Transaction		
			100 1					
Amount / Volume	Outstanding Balance	Ten	me	Con	ditions		sions for	Expense
Amount' Volume	Outstantunig Dalaritos		uis:	001	GIGOIIS	Doubtf	ul Debts*	Recognized**
	or Outstanding Balances:							
The expense recognized	ebts related to the amount of during the period in respec	t of bad or dou	ubtful debts du	e from rela	ed parties			
			rt IV - Oth			2012년 21년		
A. Brief business ov	rerview of the ultimate							
		purorit com	PHI		ander og en	an a	<u></u>	
			<u> </u>					
			Nationalia			ting the second s		
B. Brief business ov	erview/functional profi	le of the tax	cpayer		<u>90 89 88</u> .			<u></u>
·····								
C. Has there been a	iny change in the funct	tional profile	e of the taxr	aver? If	/es. please	provide de	tails.	Yes No
			an Managaran an an an				<u>, , , , , , , , , , , , , , , , , , , </u>	
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D. Has there been a	iny change in the owne	ership struc	ture of the t	axpayer	f yes, plea	se provide	e details.	
E. Did the taxpayer	undergo business rest	tructuring d	uring the ye	ar or the	last five (5)	years?	-	Yes No
If yes, please pro								
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Ē Davas kasa nor		(A				harity of al	har	Yes No
	ding Tax Treaty Relief	rApplication	n with the B	IR OF WILF	i the tax aut	nonity of of	mer	
If yes, please pro	vide details.							
			·····					
· · · · ·								
G. Do you have an	Advance Pricing Agree	ement (APA) with your	related p	arties?			Yes No
If yes, please atta	ach copy of the APA.							n Angelik (State Chilling) 1974 - Angelik State 1974 - Angelik State
We declare under the ne	nalties of perjury that this rel	turn has heen	made in nord	faith vorifie	d by me/ue or	nd to the bee	t of my/our	
knowledge and belief, is true	e and correct, pursuant to the	provisions of th	ne National Rev	enue Code,	as amended, a	nd the regulat	ions issued	Stamp of receiving Office Date of Receipt
	Further, I/we give my/our cor n as the Data*Privacy Act of 2							RO's Signature
no. 10173, otherwise know an authorization letter.)	Tas the Data Filled ACT OF 2	.v⊥z, iur iegitima	ace and idwivil (nipuses. (11	aununzea repr	osentauve, pl	case dilach	-
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	ne of Taxpayer/President/ Prir prized Representative	ncipal Officer/	49344 - 293 - 6 1970-1985 - 20		er printed name ssistant Treasur			
Title of Signatory/TIN	Andrea (Cepresentauve	<u>a an an</u>	Title of Sign		Solotant Hoasu	werden der Br		
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