

Republic of the Philippines)
Province of Pampanga)
) S.S.

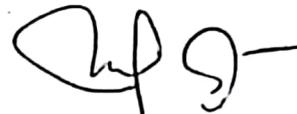
AFFIDAVIT OF INCOME

I, **MANUEL D. ATIENZA JR.**, of legal age, Filipino, , married and a resident of Brgy. San Agustin, San Luis, Pampanga, Philippines, after having been duly sworn to in accordance with law, do hereby depose and state that:

1. I am the proprietor of **HANSULIT STORE**, a business within the barangay.
2. The average monthly income I receive from the operation of said sari-sari store is Five Thousand Pesos (Php 5000) only.
3. I have no other sources of income other than that I receive from the operation of my sari-sari store as abovementioned.
4. I am not employed in any capacity in other establishments nor do I have other businesses aside from the abovementioned sari-sari store.
5. I execute this affidavit to certify and attest to the truth of the foregoing facts and for whatever legal purpose/s that this affidavit may serve.

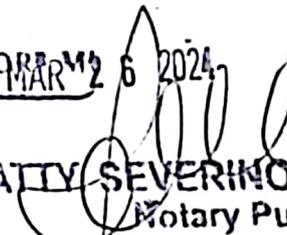
IN WITNESS WHEREOF, I have set my hand this MAR 26 2024

at San Luis, Pampanga.



MANUEL D. ATIENZA JR.
SSS ID No. 33-1760594-6
Issued at SSS-Mandaluyong City

DESCRIBED AND SWORN TO BEFORE ME MAR 26 2024
at San Luis, Pampanga, Philippines On


ATTY. SEVERINO T. SANTOS
Notary Public

Until December 31, 2025
PTR NO 4553485/ 11-8-2023
IBP NO 327500 DEC. 13 2023
City of San Fernando, Pampanga
TIN: 139-044-704/Roll No. 19182
MCLE COMP NO. VII-001843

Doc No. 41;
Page No. 10;
Book No. 276
Series of 2024.

Annual Income Tax Return
Individuals (including MIXED Income Earner), Estates and Trusts



TIN 219 788 809 000	Taxpayer/Filer's Last Name ATIENZA
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PART IV - Background Information of Spouse

1 Spouse's Taxpayer Identification Number (TIN) _____	2 RDO Code _____
3 Filer's Spouse Type <input type="checkbox"/> Single Proprietor <input type="checkbox"/> Professional <input type="checkbox"/> Compensation Earner	
4 Alphanumeric Tax Code (ATC) <input type="radio"/> 11012 Business Income-Graduated IT Rates <input type="radio"/> 11014 Income from Profession-Graduated IT Rates <input type="radio"/> 11013 Mixed Income-Graduated IT Rates <input type="radio"/> 11011 Compensation Income <input type="radio"/> 11015 Business Income-8% IT Rate <input type="radio"/> 11017 Income from Profession-8% IT Rate <input type="radio"/> 11016 Mixed Income-8% IT Rate	
5 Spouse's Name (Last Name, First Name, Middle Name) _____	
6 Contact Number _____	7 Citizenship _____
8 Claiming Foreign Tax Credits? <input type="radio"/> Yes <input type="radio"/> No	9 Foreign tax number (if applicable) _____
10 Income EXEMPT from Income Tax? <input type="radio"/> Yes <input type="radio"/> No [If yes, fill out also consolidation of ALL activities per Tax Regime (Part X)]	11 Income subject to SPECIAL/PREFERENTIAL RATE? <input type="radio"/> Yes <input type="radio"/> No [If yes, fill out also consolidation of ALL activities per Tax Regime (Part X)]
12 Tax Rate* (Choose Method of Deduction in Item 12A) <input type="radio"/> Graduated Rates <input type="radio"/> 8% in lieu of Graduated Rates under Sec. 24(A) & Percentage Tax under Sec. 116 of NIRC [available if gross sales/receipts and other non-operating income do not exceed Three million pesos (P3M)]	
12A Method of Deduction (choose one) <input type="radio"/> Itemized Deduction [Sec. 34(A-J), NIRC] <input type="radio"/> Optional Standard Deduction (OSD) [40% of Gross Sales/Receipts/Revenues/Fees [Sec. 34(L), NIRC]]	

PART V - Computation of Tax

Schedule 1 - Gross Compensation Income and tax Withheld (Attach Additional Sheet/s, if necessary)
 On Items 1 and 2, enter the required information for each of your employer/s and mark (X) whether the information is for the Taxpayer or the Spouse. On Item 3A, enter the Total Gross Compensation and Total tax Withheld for the Taxpayer and on Item 3B, for the Spouse. (DO NOT enter Centavos; 49 Centavos or less drop down; 50 or more round up)

		a. Name of Employer	
1	<input type="radio"/> Taxpayer	_____	
	<input type="radio"/> Spouse	_____	b. Employer's TIN _____
2	<input type="radio"/> Taxpayer	_____	
	<input type="radio"/> Spouse	_____	b. Employer's TIN _____
		c. Compensation Income	d. Tax Withheld
1		0.00	0.00
2		0.00	0.00
3A	Gross Compensation Income and Total Tax Withheld for TAXPAYER (To Part V Schedule 2 Item 4A and Part VII Item 5A)	0.00	0.00
3B	Gross Compensation Income and Total Tax Withheld for SPOUSE (To Part V Schedule 2 Item 4B and Part VII Item 5B)	0.00	0.00

Schedule 2 - Taxable Compensation Income (DO NOT enter Centavos; 49 Centavos or less drop down; 50 or more round up)

Particulars	A. Taxpayer/Filer	B. Spouse
4 Gross Compensation Income (From Part V Schedule 1 Item 3Ac/3Bc)	0.00	0.00
5 Less: Non-Taxable / Exempt Compensation	0.00	0.00
6 Taxable Compensation Income (Item 4 Less Item 5)	0.00	0.00
7 Tax Due-Compensation Income (Item 6 x applicable Income Tax Rate)	0.00	0.00

Schedule 3 - Taxable Business Income (If graduated rates, fill in items 8 to 24; if 8% flat income tax rate, fill in items 25 to 30)

3.A - For Graduated Income Tax Rates		
8 * Sales/revenues/receipts/Fees	204,032.00	0.00
9 Less: Sales Returns, Allowances and Discounts	0.00	0.00
10 Net Sales/Revenues/Receipts/Fees (Item 8 Less Item 9)	204,032.00	0.00
11 Less: Cost of Sales/Services (applicable only if availing Itemized Deductions)	0.00	0.00
12 Gross Income/(Loss) from Operation (Item 10 less Item 11)	204,032.00	0.00
Less: Deductions Allowable under Existing Laws		
13 Ordinary Allowable Itemized Deductions (From Part V Schedule 4 Item 18)	0.00	0.00
14 Special Allowable Itemized Deductions (From Part V Schedule 5 Item 3 and/or Item 6)	0.00	0.00
15 Allowable for Net Operating Loss Carry Over (NOLCO) (From Part V Schedule 6 Item 8 and/or Item 13)	0.00	0.00
16 Total Allowable Itemized Deductions (Sum of Items 13 to 15)	0.00	0.00
OR		
17 Optional Standard Deduction (OSD) (40% of Item 10)	81,613.00	0.00
18 Net Income/(Loss) (If Itemized, Item 12 Less Item 16; If OSD, Item 10 Less Item 17)	122,419.00	0.00
Add: Other Non-Operating Income (specify below)		
19 _____	0.00	0.00
20 _____	0.00	0.00
21 Amount Received/Share in Income by a Partner from General Professional Partnership (GPP)	0.00	0.00
22 Total Other Non-Operating Income (Sum of Items 19 to 21)	0.00	0.00
23 Taxable Income-Business (Sum of Items 18 and 22)	122,419.00	0.00
24 Total Taxable Income - Compensation & Business (Sum of Items 6 and 23)	122,419.00	0.00
25 Total Tax Due-Compensation and Business Income (under graduated rates)(Item	0.00	0.00

For BIR BCS/ Use Only Item

**Republic of the Philippines
Department of Finance
Bureau of Internal Revenue**

BIR Form No. 1701
January 2018 (ENCS)
Page 1

Annual Income Tax Return
Individuals (including MIXED Income Earner), Estates and Trusts
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 Tax Filer.

1701 01/18ENCS P1

1 Month 12 For the Year (YYYY) 2023 2 Amended Return? Yes No 3 Short Period Return? Yes No

PART I - BACKGROUND INFORMATION OF TAXPAYER/FILER

4 Taxpayer Identification Number (TIN) 219 - 788 - 869 - 000 5 RDO Code 218

6 Taxpayer Type Single Proprietor Professional Estate Trust Compensation Earner

7 Alphabetic Tax Code (ATC) 1012 Business Income-Graduated IT Rates 1014 Income from Profession-Graduated IT Rates 1013 Mixed Income-Graduated IT Rates
 1011 Compensation Income 1015 Business Income-8% IT Rate 1017 Income from Profession-8% IT Rate 1016 Mixed Income-8% IT Rate

8 Taxpayer's Name (Last Name, First Name, Middle Name)ESTATE OF (First Name, Middle Name, Last Name)TRUST FAO (First Name, Middle Name, Last Name)
ATIENZA, NERIBEL CUNANAN

9 Registered Address (Indicate complete address. If the registered address is different from the current address, got to the RDO to update registered address by using BIR Form No. 1905)
STO TOMAS SAN LUIS PAMPANGA

9A ZIP Code 2014

10 Date of Birth (MM/DD/YYYY) 10/04/1978 11 Email Address Carol26bir@gmail.com

12 Citizenship FILIPINO 13 Claiming Foreign Tax Credits? Yes No 14 Foreign Tax Number, if applicable

15 Contact Number (Landline/Celphone No.) 0000000000 16 Civil Status (if applicable) Single Married Legally Separated Widower

17 If married, spouse has income? Yes No 18 Filing Status Joint Filing Separate Filing

19 Income EXEMPT from Income Tax? Yes No 20 Income subject to SPECIAL/PREFERENTIAL RATE? Yes No
 [If yes, fill out also consolidation of ALL activities per Tax Regime (Part X)] [If yes, fill out also consolidation of ALL activities per Tax Regime (Part X)]

21 Tax Rate* (Choose Method of Deduction in Item 21A) (choose one) Graduated Rates 8% in lieu of Graduated Rates under Sec. 24(A) & Percentage Tax under Sec. 116 of NIRC [available if gross sales/receipts and other non-operating income do not exceed Three million pesos (P3M)]

21A Method of Deduction (choose one) Itemized Deduction Optional Standard Deduction (OSD) [Sec. 34(A-J), NIRC] [40% of Gross Sales/Receipts/Revenues/Fees [Sec. 34(L), NIRC]]

PART II - TOTAL TAX PAYABLE (Do NOT Enter Centavos, 49 Centavos or Less drop down, 50 or more round up)

Particular	A. Taxpayer/Filer	B. Spouse
22 Tax Due (From Part VI Item 5)	0.00	0.00
23 Less: Total Tax Credits/Payments (From Part VII Item 10)	0.00	0.00
24 Tax Payable(Overpayment) (Item 22 Less Item 23)	0.00	0.00
25 Less: Portion of Tax Payable Allowed for 2nd Installment to be paid on or before October 15 (50% or less of Item 22)	0.00	0.00
26 Amount of Tax payable(Overpayment) (Item 24 Less Item 25)	0.00	0.00
Add: Penalties 27 Interest	0.00	0.00
28 Surcharge	0.00	0.00
29 Compromise	100.00	0.00
Total Penalties (Sum of Items 27 to 29)	100.00	0.00
Total Amount Payable(Overpayment) (Sum of Items 26 and 30)	100.00	0.00
Aggregate Amount Payable(Overpayment) (Sum of Items 26 and 30)	100.00	0.00

Overpayment, mark one (1) box only. (Once the choice is made, the same is irrevocable)
 To be refunded To be issued a Tax Credit Certificate (TCC) To be carried over as a tax credit for next year/quarter

I declare under the penalties of perjury that this return, and all its attachments, have been made in good faith, verified by me, and to the best of my knowledge and belief, are true and correct, pursuant to the provisions of the National Internal Revenue Code, as amended, and the regulations issued under authority thereof. Further, I give my consent to the processing of my information as contemplated under the "Data Privacy Act of 2012 (R.A. No. 10173) for legitimate and lawful purposes. (If signed by an Authorized Representative, indicate TIN and attach authorization letter)

33 Number of Attachments 00

Printed Name and Signature of Taxpayer/Authorized Representative

PART III - DETAILS OF PAYMENT

Particulars	Drawee Bank/Agency	Number	Date (MM/DD/YYYY)	Amount
Cash/Bank Debit Memo				
Check				
Fax Debit Memo				
Others (specify below)				

Validation/Revenue Official Receipt Details (If not filed with an Authorized Agent Bank) Stamp of Receiving Office/AAB and Date of Receipt (RO's Signature/Bank Teller's Initial)

LAND BANK OF THE PHILIPPINES
MAR 25 2024
Bank Code 036-547
RDO

The BIR Data Privacy Policy is in the BIR website (www.bir.gov.ph)

the amount will be accountable the payment slip screen, key in together with the 00 worth of coins to make sure the envelope BANK p. Bank Applications bank bank company Bank ent Bank ent Bank pment Bank nk Inc. nking Corp. Trust Co. ered Bank kyo LTD Bank the Philippines