
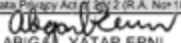


BIR Form No. 2316 January 2016 (ENC5)		Certificate of Compensation Payment/Tax Withheld For Compensation Payment With or Without Tax Withheld		 2316 01/16ENC5	
Fill in all applicable spaces. Mark all appropriate boxes with an "X".					
1 For the Year (YYYY) 2022		2 For the Period From (MM/DD) 0601 To (MM/DD) 1231			
Part I - Employee Information				Part IV-B Details of Compensation Income & Tax Withheld from Present Employer	
3 TIN 345-950-674		A. NON-TAXABLE/EXEMPT COMPENSATION INCOME			
4 Employee's Name (Last Name, First Name, Middle Name) BARRIENTOS, NICKO JIMENEZ		5 RDO Code 050		Amount	
6 Registered Address C/O PSBANK CENTER 777 PASEO DE ROXAS, MAKATI CITY		6A ZIP Code 1226		27 Basic Salary (including the exempt P250,000 & below) or the Statutory Minimum Wage of the MWE	
6B Local Home Address		6C ZIP Code		28 Holiday Pay (MWE)	
6D Foreign Address				29 Overtime Pay (MWE)	
7 Date of Birth (MM/DD/YYYY) 12161995		8 Contact Number		30 Night Shift Differential (MWE)	
9 Statutory Minimum Wage rate per day				31 Hazard Pay (MWE)	
10 Statutory Minimum Wage rate per month				32 13th Month Pay and Other Benefits (maximum of P90,000)	
11 <input type="checkbox"/> Minimum Wage Earner (MWE) whose compensation is exempt from withholding tax and not subject to income tax				33 De Minimis Benefits	
Part II - Employer Information (Present)				34 SSS, GSIS, PHIC & PAG-IBIG Contributions and Union Dues (Employee share only)	
12 TIN 000-663-983-000				35 Salaries and Other Forms of Compensation	
13 Employer's Name PHILIPPINE SAVINGS BANK				36 Total Non-Taxable/Exempt Compensation Income (Sum of Items 27 to 35)	
14 Registered Address C/O PSBANK CENTER 777 PASEO DE ROXAS, MAKATI CITY		14A ZIP Code 1226		B. TAXABLE COMPENSATION INCOME REGULAR	
15 Type of Employer <input type="checkbox"/> Main Employer <input type="checkbox"/> Secondary Employer				37 Basic Salary	
Part III - Employer Information (Previous)				38 Representation	
16 TIN				39 Transportation	
17 Employer's Name Infor PSS Inc.				40 Cost of Living Allowance (COLA)	
18 Registered Address		18A ZIP Code		41 Fixed Housing Allowance	
Part IVA - Summary				42 Others (specify)	
19 Gross Compensation Income from Present Employer (Sum of Items 36 and 50)		408,276.26		42A Other Taxable	
20 Less: Total Non-Taxable/Exempt Compensation Income from Present Employer (From Item 36)		91,766.33		42B	
21 Taxable Compensation Income from Present Employer (Item 19 Less Item 20) (From Item 50)		316,509.93		SUPPLEMENTARY	
22 Add: Taxable Compensation Income from Previous Employer, if applicable		0.00		43 Commission	
23 Gross Taxable Compensation Income (Sum of Items 21 and 22)		316,509.93		44 Profit Sharing	
24 Tax Due		13,301.98		45 Fees including Director's Fees	
25 Amount of Taxes Withheld				46 Taxable 13th Month Benefits	
25A Present Employer		13,301.98		47 Hazard Pay	
25B Previous Employer, if applicable		0.00		48 Overtime Pay	
26 Total Amount of Taxes Withheld as adjusted (Sum of Items 25A and 25B)		13,301.98		49 Others (specify)	
				49A Gratuity Pay	
				49B	
				50 Total Taxable Compensation Income (Sum of Items 37 to 49B)	
				316,509.93	
I/We declare, under the penalties of perjury that this certificate 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.					
51  ABIGAIL YATAR ERNI Present Employer/Authorized Agent Signature over Printed Name		Date Signed			
CONFORME: 52 BARRIENTOS, NICKO JIMENEZ Employee Signature over Printed Name		Date Signed			
CTC/Valid ID No.		Place of		Amount paid, if CTC	