



BIR Form No. 2316

September 2021(ENCS)

Certificate of Compensation Payment/Tax Withheld

For Compensation Payment With or Without Tax Withheld



2316 9/21ENCS

Fill in all applicable spaces. Mark all appropriate boxes with an "X".

1 For the Year (YYYY) 2 0 2 3

2 For the Period From (MM/DD) 06 26 To (MM/DD) 09 25

Part I - Employee Information

Part IV-B Details of Compensation Income & Tax Withheld from Present Employer

3 TIN 6 1 9 - 6 7 3 - 5 4 4 - 0 0 0

A. NON-TAXABLE/EXEMPT COMPENSATION INCOME

4 Employee's Name (Last Name, First Name, Middle Name) GARRIDO, RENZ NOVEM CAMILO

29 Basic Salary (including the exempt P250,000 & below or the Statutory Minimum Wage of the MWE) 0.00

6 Registered Address Lychee St. Bldg 13 Lot 15,17 Pacific Grand Villas Pacific Grand Villas LapuLapu 6015

30 Holiday Pay (MWE) 0.00

6B Local Home Address

31 Overtime Pay (MWE) 0.00

6D Foreign Address

32 Night Shift Differential (MWE) 0.00

7 Date of Birth (MM/DD/YYYY) 1 1 2 9 1 9 9 7

33 Hazard Pay (MWE) 0.00

9 Statutory Minimum Wage rate per day

34 13th Month Pay and Other Benefits (maximum of P90,000) 16,506.76

10 Statutory Minimum Wage rate per month

35 De Minimis Benefits 6,000.00

11 Minimum Wage Earner (MWE) whose compensation is exempt from withholding tax and not subject to income tax

36 SSS, GSIS, PHIC & PAG-IBIG Contributions and Union Dues (Employee share only) 3,230.00

Part II - Employer Information (Present)

37 Salaries and Other Forms of Compensation 0.00

12 TIN 0 0 9 - 7 3 5 - 0 3 3 - 0 0 0

38 Total Non-Taxable/Exempt Compensation Income (Sum of Items 29 to 37) 25,736.76

13 Employer's Name AMAZON OPERATIONS SERVICES PHILIPPINES INC.

B. TAXABLE COMPENSATION INCOME REGULAR

14 Registered Address PHILAM LIFE CENTER CEBU CARDINAL ROSALES CORNER SAMAR LOOP CEBU BUSINESS PARK BARANGAY LUZ CEBU CITY

39 Basic Salary 50,851.15

15 Type of Employer Main Employer Secondary Employer

40 Representation 0.00

Part III - Employer Information (Previous)

41 Transportation 0.00

16 TIN

42 Cost of Living Allowance (COLA) 0.00

17 Employer's Name

43 Fixed Housing Allowance 0.00

18 Registered Address

44 Others (specify) 44A 0.00 44B 0.00

Part IVA - Summary

45 Commission 0.00

19 Gross Compensation Income from Present Employer (Sum of Items 38 and 52) 83,621.68

46 Profit Sharing 0.00

20 Less: Total Non-Taxable/Exempt Compensation Income from Present Employer (From Item 38) 25,736.76

47 Fees Including Director's Fees 0.00

21 Taxable Compensation Income from Present Employer (Item 19 Less Item 20) (From Item 52) 57,884.92

48 Taxable 13th Month Benefits 0.00

22 Add: Taxable Compensation Income from Previous Employer, if applicable 0.00

49 Hazard Pay 0.00

23 Gross Taxable Compensation Income (Sum of Items 21 and 22) 57,884.92

50 Overtime Pay 7,033.77

24 Tax Due 0.00

51 Others (specify) 51A 0.00 51B 0.00

25 Amount of Taxes Withheld 25A Present Employer 0.00 25B Previous Employer, if applicable 0.00

52 Total Taxable Compensation Income (Sum of Items 39 to 51B) 57,884.92

26 Total Amount of Taxes Withheld as adjusted (Sum of Items 25A and 25B) 0.00

27 5% Tax Credit (PERA Act of 2008) 0.00

28 Total Taxes Withheld (Sum of Items 26 and 27) 0.00

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.

53 Gladys Reyes Present Employer/Authorized Agent Signature over Printed Name

Date Signed 12 10 2023

CONFORME: 54 GARRIDO, RENZ NOVEM CAMILO Employee Signature over Printed Name

Date Signed

CTC/Valid ID No. of Employee 201628222 Place of Issue PASAY CITY

Date Issued Amount paid, if CTC

To be accomplished under substituted filing

I declare, under the penalties of perjury that the information herein stated are reported under BIR Form No. 1604-C which has been filed with the Bureau of Internal Revenue.

I declare, under the penalties of perjury that I am qualified under substituted filing of Income Tax Return (BIR Form No. 1700), since I received purely compensation income from only one employer in the Philippines for the calendar year; that taxes have been correctly withheld by my employer (tax due equals tax withheld); that the BIR Form No. 1604-C filed by my employer to the BIR shall constitute as my income tax return; and that BIR Form No. 2316 shall serve the same purpose as if BIR Form No. 1700 has been filed pursuant to the provisions of Revenue Regulations (RR) No. 3-2002, as amended.

55 Gladys Reyes Present Employer/Authorized Agent Signature over Printed Name (Head of Accounting/Human Resource or Authorized Representative)

56 GARRIDO, RENZ NOVEM CAMILO Employee Signature over Printed Name