

For BIR BCS/
Use Only Item:



Republic of the Philippines
Department of Finance
Bureau of Internal Revenue

BIR Form No.
2316

Certificate of Compensation Payment/Tax Withheld



January 2018 (ENCS)

For Compensation Payment With or Without Tax Withheld

2316 01/18ENCS

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

1 For the Year (YYYY) 2024	2 For the Period From (MM/DD) 01/01 To (MM/DD) 05/31
Part I - Employee Information	
3 TIN 771-734-754-000	Part IV - B Details of Compensation Income & Tax Withheld from Present Employer
4 Employee's Name (Last Name, First Name, Middle Name) Flores, Roxie Mae	5 RDO Code 081
6 Registered Address Sitio Plus Inayawan 7 Cebu City	6A ZIP Code 6000
6B Local Home Address Sitio Plus Inayawan 7 Cebu City	6C ZIP Code
6D Foreign Address	
7 Date of Birth (MM/DD/YYYY)	8 Contact Number
9 Statutory Minimum Wage rate per day	
10 Statutory Minimum Wage rate per month	
11 <input type="checkbox"/> Minimum Wage Earner (MWE) whose compensation is exempt from withholding tax and not subject to income tax	
Part II - Employer Information (Present)	
12 TIN 771-763-815-0000	
13 Employer's Name ContactPoint360PH CORP	
14 Registered Address 11F/ SkyRise 4 Bldg West Geonzon St. Cebu City IT Park	14A ZIP Code
15 Type of Employer <input type="checkbox"/> Main Employer <input type="checkbox"/> Secondary Employer	
Part III - Employer Information (Previous)	
16 TIN	
17 Employer's Name	
18 Registered Address	18A ZIP Code
Part IVA - Summary	
19 Gross Compensation Income from Present Employer (Sum of Items 36 and 50) 93,134.06	
20 Less: Total Non-Taxable/Exempt Compensation Income from Present Employer (From Item 36) 13,571.21	
21 Taxable Compensation Income from Present Employer (Item 19 Less Item 20) (From Item 50) 79,562.85	
22 Add: Taxable Compensation Income from Previous Employer, if applicable 0.00	
23 Gross Taxable Compensation Income (Sum of Items 21 and 22) 0.00	
24 Tax Due 0.00	
25 Amount of Taxes Withheld 0.00	
25A Present Employer	
25B Previous Employer, if applicable	
26 Total Amount of Taxes Withheld as adjusted (Sum of Items 25A and 25B) 0.00	
	A. NON-TAXABLE/EXEMPT COMPENSATION INCOME
	27 Basic Salary (including the exempt P250,000 & below) or the Statutory Minimum Wage of the MWF 0
	28 Holiday Pay (MWE)
	29 Overtime Pay (MWE)
	30 Night Shift Differential (MWE)
	31 Hazard Pay (MWE)
	32 13th Month Pay and Other Benefits (maximum of P90,000) 6,361.21
	33 De Minimis Benefits
	34 SSS, GSIS, PHIC & PAG - IBIG Contributions and Union Dues (Employee share only) 7,210.00
	35 Salaries and Other Forms of Compensation
	36 Total Non-Taxable/Exempt Compensation Income (Sum of Items 27 to 35) 13,571.21
	B. TAXABLE COMPENSATION INCOME REGULAR
	37 Basic Salary 79,562.85
	38 Representation
	39 Transportation
	40 Cost of Living Allowance (COLA)
	41 Fixed Housing Allowance
	42 Others (specify)
	42A
	42B
	SUPPLEMENTARY
	43 Commission
	44 Profit Sharing
	45 Fees Including Director's Fees
	46 Taxable 13th Month Benefits
	47 Hazard Pay
	48 Overtime Pay
	49 Others (specify)
	49A
	49B
	50 Total Taxable Compensation Income (Sum of Items 37 to 49B) 79,562.85

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 <u>Ely A. Chio</u> Present Employer/Authorized Agent Signature over Printed Name	Date Signed
CONFORME:	
52 <u>ROXIE MAE FLORES</u> Employee Signature over Printed Name	Date Signed
CTC/Valid ID No. of Employee	Place of Issue
	Date Signed
	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. 53 <u>Ely A. Chio</u> Present Employer/Authorized Agent Signature over Printed Name (Head of Accounting/Human Resource or Authorized Representative)	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. 54 <u>ROXIE MAE FLORES</u> Employee Signature over Printed Name
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*NOTE: The BIR Data Privacy is in the BIR website (www.bir.gov.ph)