



For BIR BCS/
Use Only Item:

BIR Form No.
2316

Certificate of Compensation Payment/Tax Withheld



September 2021(ENCS)

For Compensation Payment With or Without Tax Withheld

2316 9/21ENCS

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

| <p>1 For the Year (YYYY) 2023</p> <p>3 TIN 743 962 429 000</p> <p>4 Employee's Name (Last Name, First Name, Middle Name) Delima, Mia Shanica Requieron</p> <p>5 RDO Code 077</p> <p>6 Registered Address Providence Negros Sub.</p> <p>6A ZIP Code 6100</p> <p>6B Local Home Address</p> <p>6C ZIP Code</p> <p>6D Negros Occidental</p> <p>6E Foreign Address</p> <p>7 Date of Birth (MM/DD/YYYY) 2/11/2000</p> <p>8 Contact Number</p> <p>9 Statutory Minimum Wage rate per day</p> <p>10 Statutory Minimum Wage rate per month</p> <p>11 <input type="checkbox"/> Minimum Wage Earner (MWE) whose compensation is exempt from withholding tax and not subject to income tax</p> <p>12 TIN 008 399 094 0000</p> <p>13 Employer's Name UBIQUITY GLOBAL SERVICES PHILIPPINES INC</p> <p>14 Registered Address 10/F Bench Tower, 30Th Street Corner Rizal Drive, Bonifacio Global City Taguig</p> <p>14A ZIP Code 1630</p> <p>15 Type of Employer <input checked="" type="checkbox"/> Main Employer <input type="checkbox"/> Secondary Employer</p> <p align="center">Part III - Employer Information (Previous)</p> <p>16 TIN 0000</p> <p>17 Employer's Name</p> <p>18 Registered Address</p> <p>18A ZIP Code</p> <p align="center">Part IVA - Summary</p> <p>19 Gross Compensation Income from Present Employer (Sum of Items 38 and 52) 269,887.84</p> <p>20 Less: Total Non-Taxable/Exempt Compensation Income from Present Employer (From Item 38) 81,343.67</p> <p>21 Taxable Compensation Income from Present Employer (Item 19 Less Item 20) (From Item 52) 188,544.17</p> <p>22 Add: Taxable Compensation Income from Previous Employer, if applicable 0.00</p> <p>23 Gross Taxable Compensation Income (Sum of Items 21 and 22) 188,544.17</p> <p>24 Tax Due 0.00</p> <p>25 Amount of Taxes Withheld</p> <p>25A Present Employer 0.00</p> <p>25B Previous Employer, if applicable 0.00</p> <p>26 Total Amount of Taxes Withheld as adjusted (Sum of Items 25A and 25B) 0.00</p> <p>27 5% Tax Credit (PERA Act of 2008) 0.00</p> <p>28 Total Taxes Withheld (Sum of Items 26 and 27) 0.00</p> | <p>2 For the Period From (MM/DD) 01/01 To 12/31</p> <p align="center">Part IV-B Details of Compensation Income & Tax Withheld from Present Employer</p> <p align="center">A. NON-TAXABLE/EXEMPT COMPENSATION INCOME</p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th style="text-align: right;">Amount</th> </tr> </thead> <tbody> <tr><td>29 Basic Salary (including the exempt P250,000 & below or the Statutory Minimum Wage of the MWE)</td><td></td></tr> <tr><td>30 Holiday Pay (MWE)</td><td></td></tr> <tr><td>31 Overtime Pay (MWE)</td><td></td></tr> <tr><td>32 Night Shift Differential (MWE)</td><td></td></tr> <tr><td>33 Hazard Pay (MWE)</td><td></td></tr> <tr><td>34 13th Month Pay and Other Benefits (maximum of P90,000)</td><td style="text-align: right;">41,618.01</td></tr> <tr><td>35 De Minimis Benefits</td><td style="text-align: right;">26,528.74</td></tr> <tr><td>36 SSS, GSIS, PHIC & PAG-IBIG Contributions and Union Dues (Employee share only)</td><td style="text-align: right;">13,196.92</td></tr> <tr><td>37 Salaries and Other Forms of Compensation</td><td style="text-align: right;">0.00</td></tr> <tr><td>38 Total Non-Taxable/Exempt Compensation Income (Sum of Items 29 to 37)</td><td style="text-align: right;">81,343.67</td></tr> </tbody> </table> <p align="center">B. TAXABLE COMPENSATION INCOME REGULAR</p> <table border="1" style="width:100%; border-collapse: collapse;"> <tbody> <tr><td>39 Basic Salary</td><td style="text-align: right;">148,940.56</td></tr> <tr><td>40 Representation</td><td></td></tr> <tr><td>41 Transportation</td><td></td></tr> <tr><td>42 Cost of Living Allowance (COLA)</td><td></td></tr> <tr><td>43 Fixed Housing Allowance</td><td></td></tr> <tr><td>44 Others (specify)</td><td></td></tr> <tr><td>44A Other Taxable Income</td><td style="text-align: right;">39,603.61</td></tr> <tr><td>44B</td><td></td></tr> </tbody> </table> <p align="center">SUPPLEMENTARY</p> <table border="1" style="width:100%; border-collapse: collapse;"> <tbody> <tr><td>45 Commission</td><td></td></tr> <tr><td>46 Profit Sharing</td><td></td></tr> <tr><td>47 Fees Including Director's Fees</td><td></td></tr> <tr><td>48 Taxable 13th Month Benefits</td><td style="text-align: right;">0.00</td></tr> <tr><td>49 Hazard Pay</td><td></td></tr> <tr><td>50 Overtime Pay</td><td></td></tr> <tr><td>51 Others (specify)</td><td></td></tr> <tr><td>51A</td><td></td></tr> <tr><td>51B</td><td></td></tr> <tr><td>52 Total Taxable Compensation Income (Sum of Items 39 to 51B)</td><td style="text-align: right;">188,544.17</td></tr> </tbody> </table> | | Amount | 29 Basic Salary (including the exempt P250,000 & below or the Statutory Minimum Wage of the MWE) | | 30 Holiday Pay (MWE) | | 31 Overtime Pay (MWE) | | 32 Night Shift Differential (MWE) | | 33 Hazard Pay (MWE) | | 34 13th Month Pay and Other Benefits (maximum of P90,000) | 41,618.01 | 35 De Minimis Benefits | 26,528.74 | 36 SSS, GSIS, PHIC & PAG-IBIG Contributions and Union Dues (Employee share only) | 13,196.92 | 37 Salaries and Other Forms of Compensation | 0.00 | 38 Total Non-Taxable/Exempt Compensation Income (Sum of Items 29 to 37) | 81,343.67 | 39 Basic Salary | 148,940.56 | 40 Representation | | 41 Transportation | | 42 Cost of Living Allowance (COLA) | | 43 Fixed Housing Allowance | | 44 Others (specify) | | 44A Other Taxable Income | 39,603.61 | 44B | | 45 Commission | | 46 Profit Sharing | | 47 Fees Including Director's Fees | | 48 Taxable 13th Month Benefits | 0.00 | 49 Hazard Pay | | 50 Overtime Pay | | 51 Others (specify) | | 51A | | 51B | | 52 Total Taxable Compensation Income (Sum of Items 39 to 51B) | 188,544.17 |
|---|--|--|--------|---|--|-----------------------------|--|------------------------------|--|--|--|----------------------------|--|--|-----------|-------------------------------|-----------|---|-----------|--|------|--|-----------|------------------------|------------|--------------------------|--|--------------------------|--|---|--|-----------------------------------|--|----------------------------|--|---------------------------------|-----------|------------|--|----------------------|--|--------------------------|--|--|--|---------------------------------------|------|----------------------|--|------------------------|--|----------------------------|--|------------|--|------------|--|--|------------|
| | Amount | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 29 Basic Salary (including the exempt P250,000 & below or the Statutory Minimum Wage of the MWE) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 30 Holiday Pay (MWE) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 31 Overtime Pay (MWE) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 32 Night Shift Differential (MWE) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 33 Hazard Pay (MWE) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 34 13th Month Pay and Other Benefits (maximum of P90,000) | 41,618.01 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 35 De Minimis Benefits | 26,528.74 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 36 SSS, GSIS, PHIC & PAG-IBIG Contributions and Union Dues (Employee share only) | 13,196.92 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 37 Salaries and Other Forms of Compensation | 0.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 38 Total Non-Taxable/Exempt Compensation Income (Sum of Items 29 to 37) | 81,343.67 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 39 Basic Salary | 148,940.56 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 40 Representation | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 41 Transportation | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 42 Cost of Living Allowance (COLA) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 43 Fixed Housing Allowance | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 44 Others (specify) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 44A Other Taxable Income | 39,603.61 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 44B | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 45 Commission | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 46 Profit Sharing | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 47 Fees Including Director's Fees | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 48 Taxable 13th Month Benefits | 0.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 49 Hazard Pay | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 50 Overtime Pay | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 51 Others (specify) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 51A | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 51B | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 52 Total Taxable Compensation Income (Sum of Items 39 to 51B) | 188,544.17 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

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.

| | |
|--|---|
| <p>53 <u>MARY ROSE GONZALES</u> Present Employer/Authorized Agent Signature over Printed Name</p> <p>CONFORME: <u>Delima, Mia Shanica Requieron</u></p> <p>54 _____ Employee Signature over Printed Name</p> <p>CTC/Valid ID No. _____ Place of Issue _____</p> | <p>Date Signed _____</p> <p>Date Signed _____</p> <p>Date Issued _____</p> <p>Amount paid, if CTC _____</p> |
|--|---|

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.

55 MARY ROSE GONZALES
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.

56 Delima, Mia Shanica Requieron
Employee Signature over Printed Name

*NOTE: The BIR Data Privacy is in the BIR website (www.bir.gov.ph)