



BIR Form No.

2316

January 2018 (ENCS)

Certificate of Compensation Payment/Tax Withheld

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) **2020**

2 For the Period From (MM/DD) **01 01** To (MM/DD) **09 15**

Part I - Employee Information

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

3 TIN **362 004 875 0000**

A. NON-TAXABLE/EXEMPT COMPENSATION INCOME

4 Employee's Name (Last Name, First Name, Middle Name) **PAPAS, JAYREL**
5 RDO Code **081**

Amount

6 Registered Address
6A Zip Code

27 Basic Salary (including the exempt P250,000 & of the Statutory Minimum Wage of the MWE) **0.00**

6B Local Home Address
6C Zip Code

28 Holiday Pay (MWE) **0.00**

6D Foreign Address
6E Zip Code

29 Overtime Pay (MWE) **0.00**

7 Date of Birth (MM/DD/YYYY)

30 Night Shift Differential (MWE) **0.00**

8 Telephone Number

31 Hazard Pay (MWE) **0.00**

9 Statutory Minimum Wage rate per day **0.00**

32 13th Month Pay and Other Benefits (maximum of P90,000) **0.00**

10 Statutory Minimum Wage rate per month **0.00**

33 De Minimis Benefits **0.00**

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

34 SSS, GSIS, PHIC & Pag-ibig Contributions and Union Dues (Employee share only) **1,960.00**

12 Taxpayer **008 507 247 0000**

35 Salaries & Other Forms of Compensation **0.00**

13 Employer's Name **BRIDGECULTURE INC**

36 Total Non-Taxable/Exempt Compensation Income (Sum of Items 27 to 35) **1,960.00**

14 Registered Address **SPACE 20 GAGFA IT CENTER CABA HUG**
14A Zip Code **6000**

B. TAXABLE COMPENSATION INCOME REGULAR

15 Type of Employer Main Employer Secondary Employer

37 Basic Salary **38,221.54**

16 TIN

38 Representation

17 Employer's Name

39 Transportation

18 Registered Address
18A Zip Code

40 Cost of Living Allowance (COLA)

19 Gross Compensation Income from Present Employer (Sum of Items 36 and 50) **40,181.54**

41 Fixed Housing Allowance

20 Less: Total Non-Taxable/Exempt Compensation Income from Present Employer (From Item 36) **1,960.00**

42 Others (Specify)

21 Taxable Compensation Income from Present Employer (Item 19 Less Item 20) (From Item 50) **38,221.54**

42A **0.00**

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

42B

23 Gross Taxable Compensation Income (Sum of Items 21 and 22) **38,221.54**

SUPPLEMENTARY

24 Tax Due **0.00**

43 Commission

25 Amount of Taxes Withheld

44 Profit Sharing

25A Present Employer **0.00**

45 Fees Including Director's Fees

25B Previous Employer **0.00**

46 Taxable 13th Month Pay Benefits **0.00**

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

47 Hazard Pay

51 **ED MAREE KRISTEEN C. YBAÑEZ**
Present Employer/ Authorized Agent Signature Over Printed Name

48 Overtime Pay

Date Signed

52 **JAYREL PAPAS**
Employee Signature Over Printed Name

49 Others (Specify)

Date Signed

CTC/Valid ID No. of Employee

49A

Place of Issue

49B

Date of Issue

50 Total Taxable Compensation Income (Sum of Items 37 and 49B) **38,221.54**

Amount Paid, if CTC

To be accomplished under substituted filing

I declare, under the penalties of perjury, that this certificate has been made in good faith, verified by 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.

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

53 **ED MAREE KRISTEEN C. YBAÑEZ**
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 Returns (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 **JAYREL PAPAS**
Employee Signature Over Printed Name

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