



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) <input style="width:100px;" type="text" value="2025"/></p> <p>3 TIN <input style="width:100px;" type="text" value="644-409-760-000"/></p> <p>4 Employee's Name (Last Name, First Name, Middle Name) <input style="width:100px;" type="text" value="SORIMA, JANHIEL EVE URSORA"/> 5 RDO Code <input style="width:50px;" type="text" value="43A"/></p> <p>6 Registered Address <input style="width:100px;" type="text" value="PHASE 2 LOT 20 ST. JUDE ACRES BULACAO Cg"/> 6A ZIP Code <input style="width:50px;" type="text"/></p> <p>6B Local Home Address <input style="width:100px;" type="text"/> 6C ZIP Code <input style="width:50px;" type="text"/></p> <p>6D Foreign Address <input style="width:100px;" type="text"/></p> <p>7 Date of Birth (MM/DD/YYYY) <input style="width:50px;" type="text" value="08"/> <input style="width:50px;" type="text" value="24"/> <input style="width:50px;" type="text" value="2004"/> 8 Contact Number <input style="width:100px;" type="text"/></p> <p>9 Statutory Minimum Wage rate per day <input style="width:100px;" type="text" value="0.00"/></p> <p>10 Statutory Minimum Wage rate per month <input style="width:100px;" type="text" value="0.00"/></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 <input style="width:100px;" type="text" value="005-057-181-000"/></p> <p>13 Employer's Name <input style="width:100px;" type="text" value="FOUNDEVER ASIA INCORPORATED"/></p> <p>14 Registered Address <input style="width:100px;" type="text" value="10F GLORIETTA 1 BPO OFC TOWER AYALA MAK"/> 14A ZIP Code <input style="width:50px;" type="text"/></p> <p>15 Type of Employer <input type="checkbox"/> Main Employer <input type="checkbox"/> Secondary Employer</p> <p>16 TIN <input style="width:100px;" type="text"/></p> <p>17 Employer's Name <input style="width:100px;" type="text"/></p> <p>18 Registered Address <input style="width:100px;" type="text"/> 18A ZIP Code <input style="width:50px;" type="text"/></p> <p>19 Gross Compensation Income from Present Employer (Sum of Items 38 and 52) <input style="width:100px;" type="text" value="6,061.19"/></p> <p>20 Less: Total Non-Taxable/Exempt Compensation Income from Present Employer (From Item 38) <input style="width:100px;" type="text" value="6,061.19"/></p> <p>21 Taxable Compensation Income from Present Employer (Item 19 Less Item 20) (From Item 52) <input style="width:100px;" type="text" value="0.00"/></p> <p>22 Add: Taxable Compensation Income from Previous Employer, if applicable <input style="width:100px;" type="text" value="0.00"/></p> <p>23 Gross Taxable Compensation Income (Sum of Items 21 and 22) <input style="width:100px;" type="text" value="0.00"/></p> <p>24 Tax Due <input style="width:100px;" type="text" value="0.00"/></p> <p>25 Amount of Taxes Withheld</p> <p>25A Present Employer <input style="width:100px;" type="text" value="0.00"/></p> <p>25B Previous Employer, if applicable <input style="width:100px;" type="text" value="0.00"/></p> <p>26 Total Amount of Taxes Withheld as adjusted (Sum of Items 25A and 25B) <input style="width:100px;" type="text" value="0.00"/></p> <p>27 5% Tax Credit (PERA Act of 2008) <input style="width:100px;" type="text" value="0.00"/></p> <p>28 Total Taxes Withheld (Sum of Items 26 and 27) <input style="width:100px;" type="text" value="0.00"/></p>	<p>2 For the Period From (MM/DD) <input style="width:50px;" type="text" value="01"/> <input style="width:50px;" type="text" value="01"/> To (MM/DD) <input style="width:50px;" type="text" value="01"/> <input style="width:50px;" type="text" value="22"/></p> <p>Part I - Employee Information</p> <p>Part IV-B Details of Compensation Income & Tax Withheld from Present Employer</p> <p>A. NON-TAXABLE/EXEMPT COMPENSATION INCOME Amount</p> <p>29 Basic Salary (including the exempt P250,000 & below) or the Statutory Minimum Wage of the MWE <input style="width:100px;" type="text" value="2,787.90"/></p> <p>30 Holiday Pay (MWE) <input style="width:100px;" type="text" value="0.00"/></p> <p>31 Overtime Pay (MWE) <input style="width:100px;" type="text" value="0.00"/></p> <p>32 Night Shift Differential (MWE) <input style="width:100px;" type="text" value="0.00"/></p> <p>33 Hazard Pay (MWE) <input style="width:100px;" type="text" value="0.00"/></p> <p>34 13th Month Pay and Other Benefits (maximum of P90,000) <input style="width:100px;" type="text" value="0.00"/></p> <p>35 De Minimis Benefits <input style="width:100px;" type="text" value="2,448.29"/></p> <p>36 SSS, GSIS, PHIC & PAG-IBIG Contributions and Union Dues (Employee share only) <input style="width:100px;" type="text" value="825.00"/></p> <p>37 Salaries and Other Forms of Compensation <input style="width:100px;" type="text" value="0.00"/></p> <p>38 Total Non-Taxable/Exempt Compensation Income (Sum of Items 29 to 37) <input style="width:100px;" type="text" value="6,061.19"/></p> <p>B. TAXABLE COMPENSATION INCOME REGULAR</p> <p>39 Basic Salary <input style="width:100px;" type="text" value="0.00"/></p> <p>40 Representation <input style="width:100px;" type="text" value="0.00"/></p> <p>41 Transportation <input style="width:100px;" type="text" value="0.00"/></p> <p>42 Cost of Living Allowance (COLA) <input style="width:100px;" type="text" value="0.00"/></p> <p>43 Fixed Housing Allowance <input style="width:100px;" type="text" value="0.00"/></p> <p>44 Others (specify)</p> <p>44A <input style="width:100px;" type="text"/> <input style="width:50px;" type="text" value="0.00"/></p> <p>44B <input style="width:100px;" type="text"/> <input style="width:50px;" type="text" value="0.00"/></p> <p>SUPPLEMENTARY</p> <p>45 Commission <input style="width:100px;" type="text" value="0.00"/></p> <p>46 Profit Sharing <input style="width:100px;" type="text" value="0.00"/></p> <p>47 Fees Including Director's Fees <input style="width:100px;" type="text" value="0.00"/></p> <p>48 Taxable 13th Month Benefits <input style="width:100px;" type="text" value="0.00"/></p> <p>49 Hazard Pay <input style="width:100px;" type="text" value="0.00"/></p> <p>50 Overtime Pay <input style="width:100px;" type="text" value="0.00"/></p> <p>51 Others (specify)</p> <p>51A <input style="width:100px;" type="text"/> <input style="width:50px;" type="text" value="0.00"/></p> <p>51B <input style="width:100px;" type="text"/> <input style="width:50px;" type="text" value="0.00"/></p> <p>52 Total Taxable Compensation Income (Sum of Items 39 to 51B) <input style="width:100px;" type="text" value="0.00"/></p>
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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 ~~RA 10173~~ RA 10173 of 2012 (R.A. No. 10173) for legitimate and lawful purposes.

53 RONALD PORTULA Present Employer/Authorized Agent Signature over Printed Name Date Signed

54 SORIMA, JANHIEL EVE URSORA Employee Signature over Printed Name Date Signed

CTC/Valid ID No. Place of Issue 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.

55 RONALD PORTULA 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 SORIMA, JANHIEL EVE URSORA Employee Signature over Printed Name