



BIR Form No.

**2316****Certificate of Compensation  
Payment/Tax Withheld**

September 2021 (ENCS)

For Compensation Payment With or Without Tax Withheld

2316 9215ENC3

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

1 For the Year (YYYY) <b>2 0 2 4</b>		2 For the Period From (MM/DD) <b>0 1 0 1</b> To (MM/DD) <b>1 1 0 5</b>	
<b>Part I - Employee Information</b>		<b>Part IV-B Details of Compensation Income &amp; Tax Withheld from Present Employer</b>	
3 TIN <b>6, 1, 5 - 6, 2, 0 - 7, 4, 8 -</b>		<b>A. NON-TAXABLE/EXEMPT COMPENSATION INCOME</b>	
4 Employee's Name (Last Name, First Name, Middle Name) <b>BAYLOSIS, KRIS ORENCO</b>		5 RDO Code <b>1, 2, 6</b>	
6 Registered Address		30 Holiday Pay (MWE) <b>0.00</b>	
6A ZIP Code		31 Overtime Pay (MWE) <b>0.00</b>	
6B Local Home Address		32 Night Shift Differential (MWE) <b>0.00</b>	
6C ZIP Code		33 Hazard Pay (MWE) <b>0.00</b>	
6D Foreign Address		34 13th Month Pay and Other Benefits (maximum of P90,000) <b>47,237.69</b>	
7 Date of Birth (MM/DD/YYYY) <b>0 6 2 1 1 9 9 9</b>		35 De Minimis Benefits <b>0.00</b>	
8 Contact Number		36 SSS, GSIS, PhIC & PAG-IBIG Contributions and Union Dues (Employee share only) <b>16,285.00</b>	
9 Statutory Minimum Wage rate per day <b>501.00</b>		37 Salaries and Other Forms of Compensation <b>9,943.54</b>	
10 Statutory Minimum Wage rate per month		38 Total Non-Taxable/Exempt Compensation Income (Sum of items 29 to 37) <b>73,466.23</b>	
11 <input type="checkbox"/> Minimum Wage Earner (MWE) whose compensation is exempt from withholding tax and not subject to income tax		<b>B. TAXABLE COMPENSATION INCOME REGULAR</b>	
<b>Part II - Employer Information (Present)</b>		39 Basic Salary <b>127,959.29</b>	
12 TIN <b>0 0 4 - 6 3 9 - 7 4 4 - 0 0 0</b>		40 Representation <b>0.00</b>	
13 Employer's Name <b>TELEPHILIPPINES, INC</b>		41 Transportation <b>0.00</b>	
14 Registered Address <b>2ND FLOOR, EDISA CORNER UNITED STREET, GREENFIELD DISTRICT, Mandaluyong City</b>		42 Cost of Living Allowance (COLA) <b>0.00</b>	
14A ZIP Code <b>6 0 0 0</b>		43 Fixed Housing Allowance <b>0.00</b>	
15 Type of Employer <input type="checkbox"/> Main Employer <input type="checkbox"/> Secondary Employer		44 Others (specify) 44A Allowances <b>17,806.14</b>	
<b>Part III - Employer Information (Previous)</b>		44B <b>0.00</b>	
16 TIN		<b>SUPPLEMENTARY</b>	
17 Employer's Name		45 Commission <b>0.00</b>	
18 Registered Address		46 Profit Sharing <b>0.00</b>	
18A ZIP Code		47 Fees including Director's Fees <b>0.00</b>	
<b>Part IVA - Summary</b>		48 Taxable 13th Month Benefits <b>0.00</b>	
19 Gross Compensation Income from Present Employer (Sum of items 39 and 52) <b>252,472.41</b>		49 Hazard Pay <b>0.00</b>	
20 Less: Total Non-Taxable/Exempt Compensation Income from Present Employer (From item 38) <b>73,466.23</b>		50 Overtime Pay <b>33,240.75</b>	
21 Taxable Compensation Income from Present Employer (Item 19 Less item 20) (From item 52) <b>179,006.18</b>		51 Others (specify) 51A Bonuses and Incentives <b>0.00</b>	
22 Add: Taxable Compensation Income from Previous Employer, if applicable <b>0.00</b>		51B Retirement Benefits <b>0.00</b>	
23 Gross Taxable Compensation Income (Sum of items 21 and 22) <b>179,006.18</b>		52 Total Taxable Compensation Income (Sum of items 39 to 51B) <b>179,006.18</b>	
24 Tax Due <b>0.00</b>			
25 Amount of Taxes Withheld			
25A Present Employer <b>0.00</b>			
25B Previous Employer, if applicable <b>0.00</b>			
26 Total Amount of Taxes Withheld as adjusted (Sum of items 25A and 25B) <b>0.00</b>			
27 5% Tax Credit (PERA Act of 2008) <b>0.00</b>			
28 Total Taxes Withheld (Item 26 less item 27) <b>0.00</b>			

I/We declare, under the penalties and 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 Present Employer/Authorized Agent Signature over Printed Name		Date Signed <b>0 1 3 1 2 0 2 5</b>	
54 <b>KRIS ORENCO BAYLOSIS</b> Employee Signature over Printed Name		Date Signed	
CTC/Valid ID No. of Employer		Date Issued	
Place of Issue		Amount paid, if CTC	

**To be accomplished under substituted filing**

I declare, under the penalties and perjury that the information herein is reported under BIR Form No. 1604-C which has been filed with the Bureau of Internal Revenue.		I declare, under the penalties and 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 reports are enclosed); 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 Present Employer/Authorized Agent Signature over Printed Name (Head of Accounting/Human Resource or Authorized Representative)		56 Employee Signature over Printed Name	

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