



BIR Form No.

2316

September 2021 (ENCS)

**Certificate of Compensation
Payment/Tax Withheld**

For Compensation Payment With or Without Tax Withheld



2316 921 ENCS

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) **0102** To (MM/DD) **0924**

Part I - Employee Information

3 TIN **290-961-375-000000**

4 Employee's Name (Last Name, First Name, Middle Name) **Villarente, Neil Condes**

5 RDO Code

6 Registered Address **5A ZIP Code**

6B Local Home Address **6C ZIP Code**

6D Foreign Address

7 Date of Birth (MM/DD/YYYY) **11101991**

8 Contact Number

9 Statutory Minimum Wage rate per day **0.0000**

10 Statutory Minimum Wage rate per month **0.0000**

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

Part II - Employer Information (Present)

12 TIN **000-845-543-00000**

13 Employer's Name **Accenture Inc.**

14 Registered Address **14A ZIP Code**
77 ROBINSONS CYBERGATE 1 PIONEER ST. BARANGKA LAYA MANDALUYONG CITY METRO MANILA 1550

15 Type of Employer Main Employer 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 38 and 52) **231,112.54**

20 Less: Total Non-Taxable/Exempt Compensation Income from Present Employer (From Item 38) **231,112.54**

21 Taxable Compensation Income from Present Employer (Item 19 Less Item 20) (From Item 52) **0.00**

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

25A Present Employer **0.00**

25B Previous Employer, if applicable **0.00**

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

27 5% of Tax Credit (PERA Act of 2008) **0.00**

28 Total Taxes Withheld (Sum of Items 26 and 27) **0.00**

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

A. NON-TAXABLE/EXEMPT COMPENSATION INCOME Amount

29 Basic Salary (including the exempt P250,000 & below or the Statutory Minimum Wage of the MWE) **125,410.26**

30 Holiday Pay (MWE) **0.00**

31 Overtime Pay (MWE) **0.00**

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

33 Hazard Pay (MWE) **0.00**

34 13th Month Pay and Other Benefits (maximum of P90,000) **50,799.13**

35 De Minimis Benefits **35,255.20**

36 SSS, GSIS, PHIC & PAG-IBIG Contributions and Union Dues (Employee share only) **19,647.95**

37 Salaries and Other forms of Compensation **0.00**

38 Total Non-Taxable/Exempt Compensation Income (Sum of Items 29 to 37) **231,112.54**

B. TAXABLE COMPENSATION INCOME REGULAR

39 Basic Salary **0.00**

40 Representation **0.00**

41 Transportation **0.00**

42 Cost of Living Allowance (COLA) **0.00**

43 Fixed Housing Allowance **0.00**

44 Others (specify)

44A **0.00**

44B **0.00**

SUPPLEMENTARY

45 Commission **0.00**

46 Profit Sharing **0.00**

47 Fees including Director's fee **0.00**

48 Taxable 13th Month Benefits **0.00**

49 Hazard Pay **0.00**

50 Overtime Pay **0.00**

51 Others (specify)

51A **0.00**

51B **0.00**

52 Total Taxable Compensation Income (Sum of Items 39 to 51B) **0.00**

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.

Sheryl T. Baulista

53 **Sheryl T Baulista**
Present Employer/Authorized Agent Signature over Printed Name

Date Signed **11292024**

CONFORME:
54 **Villarente, Neil Condes**
Employee Signature over Printed Name

Date Signed

Amount Paid, if CTC

CTC/Valid ID No. **0629687312** Place of Issue

Date Issued

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.

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.

55 **Present Employer / Authorized Agent Signature over Printed Name (Head of Accounting/ Human Resource or Authorized Representative)**

56 **Employee Signature over Printed Name**