



BIR Form No.  
**2316**

September 2021(ENCS)

# Certificate of Compensation Payment/Tax Withheld

For Compensation Payment With or Without Tax Withheld



2316 9/21ENCS

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) **01 15** To (MM/DD) **12 31**

### Part I - Employee Information

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

3 TIN **642 - 345 - 256**

#### A. NON-TAXABLE/EXEMPT COMPENSATION INCOME

4 Employee's Name (Last Name, First Name, Middle Name) **DE GUZMAN, JULLIANNE ANGELO CONEJAR**

29 Basic Salary (including the exempt P250,000 & below or the Statutory Minimum Wage of the MWE) **153,377.74**

6 Registered Address **OUANO LOOC MANDAUE CITY CEBU**

30 Holiday Pay (MWE)

6B Local Home Address

31 Overtime Pay (MWE)

6D Foreign Address

32 Night Shift Differential (MWE)

7 Date of Birth (MM/DD/YYYY) **06 29 2005**

8 Contact Number **091510151723772**

33 Hazard Pay (MWE)

9 Statutory Minimum Wage rate per day

34 13th Month Pay and Other Benefits (maximum of P90,000) **36,322.35**

10 Statutory Minimum Wage rate per month

35 De Minimis Benefits **19,050.80**

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

36 SSS, GSIS, PHIC & PAG-IBIG Contributions and Union Dues (Employee share only) **13,115.00**

### Part II - Employer Information (Present)

37 Salaries and Other Forms of Compensation **21,407.10**

12 TIN **244 - 963 - 876 - 000**

38 Total Non-Taxable/Exempt Compensation Income (Sum of Items 29 to 37) **243,272.99**

13 Employer's Name **QUALFON PHILIPPINES, INC.**

#### B. TAXABLE COMPENSATION INCOME REGULAR

14 Registered Address **Skyrise 3, Qualfon Bldg., IT Park, Apas, Cebu City**

39 Basic Salary

15 Type of Employer  Main Employer  Secondary Employer

40 Representation

### Part III - Employer Information (Previous)

16 TIN

41 Transportation

17 Employer's Name

42 Cost of Living Allowance (COLA)

18 Registered Address

43 Fixed Housing Allowance

### Part IVA - Summary

44 Others (specify)

19 Gross Compensation Income from Present Employer (Sum of Items 38 and 52) **243,272.99**

44A

20 Less: Total Non-Taxable/Exempt Compensation Income from Present Employer (From Item 38) **243,272.99**

44B

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

#### SUPPLEMENTARY

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

45 Commission

23 Gross Taxable Compensation Income (Sum of Items 21 and 22)

46 Profit Sharing

24 Tax Due

47 Fees Including Director's Fees

25 Amount of Taxes Withheld

48 Taxable 13th Month Benefits

25A Present Employer

49 Hazard Pay

25B Previous Employer, if applicable

50 Overtime Pay

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

51 Others (specify)

27 5% Tax Credit (PERA Act of 2008)

51A

51B

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

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.

53 **METHYL D. TAER**  
Present Employer/Authorized Agent Signature over Printed Name

Date Signed **02 05 2025**

CONFORME:  
54 **DE GUZMAN, JULLIANNE ANGELO C.**  
Employee Signature over Printed Name

Date Signed

CTC/Valid ID No. of Employee **06-4717724-4** 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.

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 hereon bears on.