



For BIR Use Only BCS/Item:

Certificate of Compensation Payment/Tax Withheld



2316 021E1CS

BIR Form No. **2316**

September 2021(ENCS)

For Compensation Payment With or Without Tax Withheld

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

1 For the Year (YYYY)		2, 0, 2, 6		2 For the Period From (MM/DD) To (MM/DD)		0, 1, 0, 1 To (MM/DD) 0, 1, 0, 3	
Part I - Employee Information							
3 TIN		6, 5, 1 - 2, 9, 1 - 7, 9, 7		5 RDO Code		1, 2, 6	
4 Employee's Name (Last Name, First Name, Middle Name)				6A ZIP Code			
Caracena, Michael Molina				6, 0, 0, 0			
6 Registered Address				6C ZIP Code			
Bangon Street, Apas				6, 0, 0, 0			
6D Foreign Address				Cebu City			
7 Date of Birth (MM/DD/YYYY)		8 Contact Number		9 Statutory Minimum Wage rate per day			
0, 8, 0, 5, 2, 0, 0, 1		0, 9, 1, 6, 8, 5, 2, 7, 0, 4, 9					
10 Statutory Minimum Wage rate per month		11 Minimum Wage Earner (MWE) whose compensation is exempt from withholding tax and not subject to income tax		12 TIN		4, 0, 2 - 0, 5, 1 - 1, 2, 9 - 0, 0, 0	
		<input type="checkbox"/>		13 Employer's Name		Teletech Offshore Investments BV	
				14 Registered Address		FIVECOM TUF HARDOR DR MOA Pasay City Metro Manila 1300	
				15 Type of Employer		<input type="checkbox"/> Main Employer <input type="checkbox"/> Secondary Employer	
				16 Part III - Employer Information (Previous)			
				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)		20 Less: Total Non-Taxable/Exempt Compensation Income from Present Employer (From Item 38)		21 Taxable Compensation Income from Present Employer (Item 19 Less Item 20) (From Item 52)		22 Add: Taxable Compensation Income from Previous Employer, if applicable	
20,565.22		3,075.00		17,490.22		0.00	
23 Gross Taxable Compensation Income (Sum of Items 21 and 22)		24 Tax Due		25 Amount of Taxes Withheld 25A Present Employer		25B Previous Employer, if applicable	
17,490.22		0.00		0.00		0.00	
26 Total Amount of Taxes Withheld as adjusted (Sum of Items 25A and 25B)		27 5% Tax Credit (PERA Act of 2008)		28 Total Taxes Withheld (Sum of Items 26 and 27)			
0.00		0.00		0.00			

Part IV-B Details of Compensation Income & Tax Withheld from Present Employer		Amount
A. NON-TAXABLE/EXEMPT COMPENSATION INCOME		
29 Basic Salary (including the exempt P250,000 & below) or the Statutory Minimum Wage of the MWE		
30 Holiday Pay (MWE)		
31 Overtime Pay (MWE)		
32 Night Shift Differential (MWE)		
33 Hazard Pay (MWE)		
34 13th Month Pay and Other Benefits (maximum of P90,000)		0.00
35 De Minimis Benefits		1,500.00
36 SSS, GSIS, PHIC & PAG-IBIG Contributions and Union Dues (Employee share only)		1,575.00
37 Salaries and Other Forms of Compensation		0.00
38 Total Non-Taxable/Exempt Compensation Income (Sum of Items 29 to 37)		3,075.00
B. TAXABLE COMPENSATION INCOME REGULAR		
39 Basic Salary		5,425.00
40 Representation		500.00
41 Transportation		0.00
42 Cost of Living Allowance (COLA)		0.00
43 Fixed Housing Allowance		
44 Others (specify)		
44A		
44B		
SUPPLEMENTARY		
45 Commission		
46 Profit Sharing		
47 Fees including Director's Fees		
48 Taxable 13th Month Benefits		0.00
49 Hazard Pay		
50 Overtime Pay		2,211.83
51 Others (specify)		
51A CO. Incentives		9,353.39
51B		
52 Total Taxable Compensation Income (Sum of Items 39 to 51B)		17,490.22

We declare, under the penalties of perjury that this certificate has been made in good faith, verified by means, and to the best of my/our knowledge and belief, to be 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 Ching, Emiliano Sanchez/ *[Signature]* Date Signed 0, 2, 1, 0, 2, 0, 2, 6
Present Employer/Authorized Agent Signature over Printed Name

54 Caracena, Michael Molina Date Signed _____ Amount paid, if CTC _____
Employee Signature over Printed Name

CTC/Valid ID No. _____ Place of Issue _____ Date Issued _____

55 Ching, Emiliano Sanchez/ *[Signature]* I declare, under the penalties of perjury that the information herein stated or reported under BIR Form No. 1604-C which has been filed with the Bureau of Internal Revenue.
Present Employer/Authorized Agent signature over Printed Name (Head of Accounting/Human Resource or Authorized Representative)

56 Caracena, Michael Molina 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 basis 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.
Employee Signature over Printed Name

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