



Republika ng Pilipinas
Kagawaran ng Pananalapi
Kawanihan ng Rentas Internas

Certificate of Compensation Payment/Tax Withheld

BIR Form No.

2316

For Compensation Payment With or Without Tax Withheld

July 2008 (ENCS)

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

2017

For the Period From (MM/DD) To (MM/DD)

Part I Employee Information

319 175 245 0000

LAMOSAO, JAY VEE PUENTENEGRA 081

Address

Address

Address

Address

Date of Birth (MM/DD/YYYY) Telephone Number

Marital Status: Single Married

Are there any qualified dependent children? Yes No

Name of Qualified Dependent Children Date of Birth (MM/DD/YYYY)

12 Statutory Minimum Wage rate per day 13

14 Statutory Minimum Wage rate per month 15

16 Minimum Wage Earner whose compensation is exempt from withholding tax and subject to income tax

Part II Employer Information (Present)

484 634 961 0000

Name of Employer

IPLOY INC

Address UNIT A&F 11/F MSY TOWER CEBU BUSINESS 6000

17A Zip Code

Employer Type: Employer Secondary Employer

Part III Employer Information (Previous)

Address

Address

Address

Address

Address

Address

Address

Address

Address

Address

Address

Address

Address

Address

Address

Address

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

Amount

A. NON-TAXABLE/EXEMPT COMPENSATION INCOME

32 Basic Salary 32

33 Statutory Minimum Wage Minimum Wage Earner (MWE) 33

34 Holiday Pay (MWE) 34

35 Overtime Pay (MWE) 35

36 Night Shift Differential (MWE) 36

37 Hazard Pay (MWE) 37

38 13th Month Pay and Other Benefits 38

39 De Minimis Benefits 39

40 SSS, GSIS, PHIC & Pag-ibig Contributions & Union Dues (employee share only) 40

41 Salaries & Other Forms of Compensation 41

42 Total Non-Taxable/Exempt Compensation Income 42

43 **TAXABLE COMPENSATION INCOME**

44 **REGULAR**

45 Basic Salary 45

46 Representation 46

47 Transportation 47

48 Cost of Living Allowance 48

49 Fixed Housing Allowance 49

50 Others (Specify) 50

51 Total Taxable Compensation Income 51

52 **SUPPLEMENTARY**

53 Commission 53

54 Profit Sharing 54

55 Fees Including Director's Fees 55

56 Taxable 13th Month Pay and Other Benefits 56

57 Hazard Pay 57

58 Overtime Pay 58

59 Others (Specify) 59

60 Total Taxable Compensation Income 60

Part IV-A Summary

21 Total Compensation Income from Present Employer (Part 22) 145,787.89

22 Non-Taxable 40,398.12

23 Total Taxable Compensation Income from Present Employer (Part 24) 105,389.77

24 Total Taxable Compensation Income from Previous Employer 105,389.77

25 Other Income 50,000.00

26 Total Taxable Compensation Income 50,000.00

27 Total Tax Withheld on Health Insurance (Part 28) 0.00

28 Non-Taxable Compensation Income 55,389.77

29 Tax Due 6,308.47

30 Amount of Taxes Withheld 6,308.47

31 Total Amount of Taxes Withheld 6,308.47

55 Total Taxable Compensation Income 105,389.77

We declare, under the penalties of perjury that this certificate has been made in good faith, verified by us, and to the best of 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.
Date Signed 31 JAN 2018