BIR Form No. 2316

Certificate of Compensation Payment/Tax Withheld



September 2021(ENCS) For Compensation Payment With or Without Tax Withheld ill in all applicable spaces. Mark all appropriate boxes with an For the Year For the Period 0 <u>1</u> 0 <u>1</u> To (MM/DD) 2 | 0 | 2 | 3 1 | 2 | 3 | (YYYY) From (MM/DD) Part I - Employee Information Part IV-B Details of Compensation Income & Tax Withheld from Present Employer 3 TIN 2 1 1 1 3 - 9 3 7 - 6 0 1 A. NON-TAXABLE/EXEMPT COMPENSATION INCOME 4 Employee's Name (Last Name, First Name, Middle Name) 5 RDO Code 29 Basic Salary (including the exempt P250,000 & below) 0.00 or the Statutory Minimum Wage of the MWE FRANCO, FRANCIS FRADES 30 Holiday Pay (MWE) 0.00 6 Registered Address 6A ZIP Code 1 1 31 Overtime Pay (MWE) 0.00 6B Local Home Address 6C ZIP Code 32 Night Shift Differential (MWE) 0.00 6D Foreign Address 33 Hazard Pay (MWE) 0.00 34 13th Month Pay and Other Benefits 90,000.00 7 Date of Birth (MM/DD/YYYY) 8 Contact Number (maximum of P90,000) 0 | 8 | 2 | 6 | 1 | 9 | 8 | 2 6,3,9,2,8,3,0,0,0,0,0 35 De Minimis Benefits 63,850.99 9 Statutory Minimum Wage rate per day 36 SSS, GSIS, PHIC & PAG-IBIG Contributions 36,600.00 and Union Dues (Employee share only) 10 Statutory Minimum Wage rate per month Salaries and Other Forms of Compensation 0.00 Minimum Wage Earner (MWE) whose compensation is exempt from withholding tax and not subject to income tax

Part II - Employer Information (Present) 38 Total Non-Taxable/Exempt Compensation 190,450.99 Income (Sum of Items 29 to 37) 12 TIN 0,0,6 - 6,5,8 - 5,6,0 - 0,0,0,0 **B. TAXABLE COMPENSATION INCOME REGULAR** 13 Employer's Name 39 Basic Salary 1,564,282.56 CGI Philippines Inc. 14 Registered Address
2F One World Square 40 Representation 14A ZIP Code 0.00 Bldg. Mckinley Hill, Taguig 1,6,3,4 41 Transportation 0.00 15 Type of Employer X Main Employer Secondary Employer 42 Cost of Living Allowance (COLA) Part III - Employer Information (Previous) 0.00 16 TIN 43 Fixed Housing Allowance 0.00 17 Employer's Name 44 Others (specify) 44A 52,028.61 18 Registered Address 18A ZIP Code 44B 0.00 SUPPLEMENTARY Part IVA - Summary 45 Commission 19 Gross Compensation Income from Present 0.00 2,252,959.49 Employer (Sum of Items 38 and 52) 46 Profit Sharing 0.00 20 Less: Total Non-Taxable/Exempt Compensation 190,450.99 Income from Present Employer (From Item 38) 47 Fees Including Director's Fees 21 Taxable Compensation Income from Present 0.00 2,062,508.50 Employer (Item 19 Less Item 20) (From Item 52) 48 Taxable 13th Month Benefits 22 Add: Taxable Compensation Income from 164,870.02 Previous Employer, if applicable 0.00 49 Hazard Pay 23 Gross Taxable Compensation Income 0.00 2,062,508.50 (Sum of Items 21 and 22) 50 Overtime Pay 181,910.64 421,252.55 51 Others (specify) 25 Amount of Taxes Withheld 421,252.55 51A 89,250.00 25A Present Employer 25B Previous Employer, if applicable 51B 0.00 10,166.67 Total Amount of Taxes Withheld as adjusted 52 Total Taxable Compensation Income 421,252.55 (Sum of Items 25A and 25B) 2,062,508.50 (Sum of Items 39 to 51B) 27 5% Tax Credit (PERA Act of 2008) 0.00 28 Total Taxes Withheld (Sum of Items 26 and 27) 421,252.55 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 Revy (1/2) (2), 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 (A) (R.A. No. 10173) for legitimate and lawful purposes. Marianno Ruth Casiño Date Signed | 0 | 1 | 3 | 0 | 2 | 0 | 2 | 4 Present Employer/Authorized Agent Signature over Printed Name FRANCO, FRANCIS FRADES CONFORME: 54 Date Signed Employee Signature over Printed Name Amount paid, if CTC CTC/Valid ID No. Place of DFANCR SOUTH P0925258C Date Issued 1/4/2/012/2 017 of Employee To be accomplished under substituted filing I declare, under the penalties of perjury that the information herein stated are reported under BIR Form No. 1604-0 Wild has been filed with the Bureau of Internal Revenue.

Marianne Ruth Casiño

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

I declare, under the penalties of periury 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 62 he BIR shall constitute as my income tax return; and that BIR Form No. 2316 shall serve the same purpose as if BIR Form No. 1740 has been filed pursuant to the provisions of Revenue Regulations (RR) No. 3-2002/as-amended.

FRANCO, FRANCIS FRADES