Republic of the Philippines
Department of Finance
Bureau of Internatl Revenue

BIR Form No.
2316
January 2018 (ENCS)

Certificate of Compensation Payment/Tax Withheld

For Compensation Payment With or Without Tax Withheld

2316 01/18ENCS

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

1 For the Year (YYYY): 2023

2 For the Period From (MM/DD): 01 01 To (MM/DD): 12 31

Part I - Employee Information

3 TIN: 902 003 705 0000

4 Employee's Name (Last Name, First Name, Middle Name): ALIADO, GLECILDA BANLUTA

5 RDO Code: 132

6 Registered Address: PII B10 L24 DONA MERCEDES PANACAN, DAVAO

6A Zip Code:

6B Local Home Address:

6C Zip Code:

6D Foreign Address:

6E Zip Code:

7 Date of Birth (MM/DD/YYYY): 05 13 1974

8 Telephone Number:

9 Statutory Minimum Wage rate per day: 0.00

10 Statutory Minimum Wage rate per month: 0.00

11 [X] Minimum Wage Earner whose compensation is exempt from withholding tax and not subject to income tax

Part II - Employer Information (Present)

12 Taxpayer: 001 378 205 0000

13 Employer's Name: DAVAO CITY NATIONAL HIGH SCHOOL

14 Registered Address: F. TORRES STREET 10-A DAVAO CITY

14A Zip Code: 8000

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 36 and 50)	438,966.37
20	Less: Total Non-Taxable/Exempt Compensation Income from Present Employer (From Item 36)	157,424.65
21	Taxable Compensation Income from Present Employer (Item 19 Less Item 20) (From Item 50)	338,695.62
22	Add: Taxable Compensation Income from Previous Employer, if applicable	0.00
23	Gross Taxable Compensation Income (Sum of Items 21 and 22)	338,695.62
24	Tax Due	7,690.65
25	Amount of Taxes Withheld	
25A	Present Employer	7,690.65
25B	Previous Employer	0.00
26	Total Amount of Taxes Withheld as adjusted (Sum of Items 25A and 25B)	7,690.65

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

A. NON-TAXABLE/EXEMPT COMPENSATION INCOME

		Amount
27	Basic Salary(including the exempt P250,000 & of the Statutory Minimum Wage of the MWE	0.00
28	Holiday Pay (MWE)	0.00
29	Overtime Pay (MWE)	0.00
30	Night Shift Differential (MWE)	0.00
31	Hazard Pay (MWE)	0.00
32	13th Month Pay and Other Benefits (maximum of P90,000)	90,000.00
33	De Minimis Benefits	6,000.00
34	SSS, GSIS, PHIC & Pag-ibig Contributions and Union Dues (Employee share only)	37,424.65
35	Salaries & Other Forms of Compensation	24,000.00
36	Total Non-Taxable/Exempt Compensation Income (Sum of Items 27 to 35)	157,424.65

B. TAXABLE COMPENSATION INCOME REGULAR

37	Basic Salary	334,424.87
38	Representation	
39	Transportation	
40	Cost of Living Allowance (COLA)	
41	Fixed Housing Allowance	
42	Others (Specify)	
42A		0.00
42B		

SUPPLEMENTARY

43	Commission	
44	Profit Sharing	
45	Fees Including Director's Fees	
46	Taxable 13th Month Pay Benefits	4,270.75
47	Hazard Pay	
48	Overtime Pay	
49	Others (Specify)	
49A		
49B		
50	Total Taxable Compensation Income (Sum of Items 37 and 49B)	338,695.62

I/We declare, under the penalties of perjury, that this certificate has been made in good faith, verified by 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.

51 EVELYN E. MAGNO
Present Employer/ Authorized Agent Signature Over Printed Name

Date Signed:

CONFORME:

52 GLECILDA BANLUTA ALIADO
Employee Signature Over Printed Name

Date Signed: 01 17 2024

CTC/Valid ID No. of Employee: 0586583

Place of Issue: Davao City

Date of Issue: 10 15 1999

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. 1604C which has been filed with the Bureau of Internal Revenue.

53 EVELYN E. MAGNO
Present Employer/ Authorized Agent Signature Over Printed Name
(Head of Accounting/ Human Resource or Authorized Representative)

I declare,under the penalties of perjury that I am qualified under substituted filing of Income Tax Returns(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.

54 GLECILDA BANLUTA ALIADO
Employee Signature Over Printed Name

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