



BIR Form No  
**2316**

September 2021 (ENCS)

**Certificate of Compensation  
Payment/Tax Withheld**

For Compensation Payment With or Without Tax Withheld



2316 9-21-ENCS

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

3 TIN **227 - 793 - 348 - 0000**

**Part I - Employee Information**

4 Employee's Name (Last Name, First Name, Middle Name) **MANGGOL, MARLON REVAREZ** 5 RDO Code **54A**

6 Registered Address **336 KALUBKOB SILANG CAVITE** 6A ZIP Code **41114**

6B Local Home Address 6B ZIP Code

6C Foreign Address

7 Date of Birth (MM/DD/YYYY) 8 Contact Number

9 Statutory Minimum Wage rate per day

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

**Part II - Employer Information (Present)**

12 TIN **007 - 116 - 110 - 00000**

13 Employer's Name **HARMO TECHNOLOGY CORPORATION**

14 Registered Address **FIRST CAVITE INDUSTRIAL ESTATE BRGY LANKAAN CAVITE CITY NCR** 14A ZIP Code **4114**

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 IV A - Summary**

19 Gross Compensation Income from Present Employer (Sum of items 29 and 52)	<b>264,772.53</b>
20 Less Total Non-Taxable/Exempt Compensation Income from Present Employer (From Item 36)	<b>57,869.47</b>
21 Taxable Compensation Income from Present Employer (Item 19 Less Item 20) (From Item 52)	<b>206,903.06</b>
22 Add Taxable Compensation Income from Previous Employer, if applicable	<b>0.00</b>
23 Gross Taxable Compensation Income (Sum of Items 21 and 22)	<b>206,903.06</b>
24 Tax Due	<b>0.00</b>
25 Amount of Taxes Withheld	<b>0.00</b>
25A Present Employer	<b>0.00</b>
25B Previous Employer, if applicable	<b>0.00</b>
26 Total Amount of Taxes Withheld as adjusted (Sum of Items 25A and 25B)	<b>0.00</b>
27 5% Tax Credit (RA 8436)	<b>0.00</b>
28 Total Taxes Withheld (Sum of Items 26 and 27)	<b>0.00</b>

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

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

Item	Amount
29 Basic Salary (including the exempt P250,000 & below or the Statutory Minimum Wage of the MWE)	<b>0.00</b>
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 P20,000)	<b>16,824.47</b>
35 De Minimis Benefits	<b>24,600.00</b>
36 SSS, GSIS, PHIC & PAG-IBIG Contributions and Union Dues (Employee share only)	<b>16,445.00</b>
37 Salaries and Other Forms of Compensation	<b>0.00</b>
38 Total Non-Taxable/Exempt Compensation Income (Sum of Items 29 to 37)	<b>57,869.47</b>

**B. TAXABLE COMPENSATION INCOME REGULAR**

Item	Amount
39 Basic Salary	<b>206,903.06</b>
40 Representation	
41 Transportation	
42 Cost of Living Allowance (COLA)	
43 Fixed Housing Allowance	
44 Others (specify)	
44A	<b>0.00</b>
44B	

**SUPPLEMENTARY**

Item	Amount
45 Commission	
46 Profit Sharing	
47 Fees Including Director's Fees	
48 Taxable 13th Month Benefits	<b>0.00</b>
49 Hazard Pay	
50 Overtime Pay	
51 Others (specify)	
51A	
51B	
52 Total Taxable Compensation Income (Sum of Items 39 to 51B)	<b>206,903.06</b>

I/we declare, under the penalty of perjury that the information herein stated 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 (RA No. 10173) for legitimate and lawful purposes.

53 Marites Olmo  
Present Employer Authorized Agent Signature over Printed Name Date Signed

CONFORME: 54 Marlon Revarez Manggol  
Employee Signature over Printed Name Date Signed

CTC/Valid ID No. of Employer **CCI 2020 - 28065068** Place of Issue **DASMARINAS CITY** Date Issued

Amount paid (CTC)

To be accomplished under substituted filing

I declare, under the penalty of perjury that the information herein stated are reported under BIR Form No. 1001-C, which has been filed with the Bureau of Internal Revenue.

55 Marites Olmo  
Head of Accounting/Human Resource or Authorized Representative

I declare, under the penalty of perjury, that I am qualified under substituted filing of Income Tax Return (BIR Form No. 1700) since I received purely compensable income from only one employer in the Philippines for the calendar year that I am now filing, and I am not an officer or director of any corporation, partnership, or other entity that has filed an income tax return with the BIR Form No. 2316 and I am not an officer or director of any corporation, partnership, or other entity that has filed an income tax return with the BIR Form No. 2316 and I am not an officer or director of any corporation, partnership, or other entity that has filed an income tax return with the BIR Form No. 2316.

Marlon Revarez Manggol  
Employee Signature over Printed Name

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