

BIR Form No. 2316 September 2021 (ENCS)		Certificate of Compensation Payment/Tax Withheld For Compensation Payment With or Without Tax Withheld		2316 09/21 ENCS	
1 For the Year (YYYY) 2025		2 For the Period From (MM/DD) 01 01 To (MM/DD) 12 31			
Part I - Employee Information				Part IV-B Details of Compensation Income and Tax Withheld from Present Employer	
3 TIN 744 554 335 000		A. NON-TAXABLE/EXEMPT COMPENSATION INCOME		Amount	
4 Employee's Name (Last Name, First Name, Middle Name) GARCIA, LEONARDO DESAMPARADO		5 RDO Code			
6 Registered Address AVOCADO BANTAYAN CEBU		6A Zip Code 0000		29 Basic Salary (including the exempt P250,000 & be or the Statutory Minimum Wage of the MWE) 0.00	
6B Local Home Address AVOCADO BANTAYAN CEBU		6C Zip Code 0000		30 Holiday Pay (MWE) 0.00	
6D Foreign Address		6E Zip Code		31 Overtime Pay (MWE) 0.00	
7 Date of Birth (MM/DD/YYYY) 03 01 1985		8 Telephone Number		32 Night Shift Differential (MWE) 0.00	
9 Statutory Minimum Wage rate per day				33 Hazard Pay (MWE) 0.00	
10 Statutory Minimum Wage rate per month				34 13th Month Pay and Other Benefits (maximum of P90,000) 37,003.43	
11 Minimum Wage Earner whose compensation is exempt from withholding tax and not subject to income tax				35 De Minimis Benefits 46,189.91	
Part II - Employer Information (Present)				36 SSS, GSIS, PHIC & PAG-IBIG Contributions and Union Dues (Employee share only) 34,177.89	
12 Taxpayer 207 396 481 000				37 Salaries and Other Forms of Compensation 52,996.57	
13 Employer's Name DEDON MANUFACTURING INC.				38 Total Non-Taxable/Exempt Compensation Income (Sum of Items 29 to 37) 170,367.80	
14 Registered Address 7 BIRDS OF PARADISE, RIVERSIDE, CANDUMAN, MANDAUE CITY		14A Zip Code 6014		B. TAXABLE COMPENSATION INCOME REGULAR	
15 Type of Employer ☒ Main Employer ☐ Secondary Employer				39 Basic Salary 448,664.06	
Part III - Employer Information (Previous)				40 Representation 0.00	
16 TIN				41 Transportation 0.00	
17 Employer's Name				42 Cost of Living Allowance (COLA) 0.00	
18 Registered Address		18A Zip Code		43 Fixed Housing Allowance 0.00	
Part IV-A - Summary				44 Others (Specify) 0.00	
19 Gross Compensation Income from Present Employer (Sum of Items 38 and 52) 643,335.29				44A 0.00	
20 Less: Total Non-Taxable/Exempt Compensation Income from Present Employer (From Item 38) 170,367.80				44B 0.00	
21 Taxable Compensation Income from Present Employer (Item 19 Less Item 20) (From Item 52) 472,967.49				SUPPLEMENTARY	
22 Add: Taxable Compensation Income from Previous Employer, if applicable 0.00				45 Commission 0.00	
23 Gross Taxable Compensation Income (Sum of Items 21 and 22) 472,967.49				46 Profit Sharing 0.00	
24 Tax Due 37,093.50				47 Fees including Director's Fees 0.00	
25 Amount of Taxes Withheld				48 Taxable 13th Month Pay Benefits 0.00	
25A Present Employer 37,093.50				49 Hazard Pay 0.00	
25B Previous Employer 0.00				50 Overtime Pay 0.00	
26 Total Amount of Taxes Withheld as adjusted (Sum of Items 25A and 25B) 37,093.50				51 Others (Specify)	
27 5% Tax Credit (PERA Act of 2008) 0.00				51A 24,303.43	
28 Total Taxes Withheld (sum of items 26 and 27) 37,093.50				51B 0.00	
29 Total Taxable Compensation Income (Sum of Items 39 to 51B) 472,967.49					
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 ANNABELLE ACEBO QUINTANA Present Employer/ Authorized Agent Signature Over Printed Name		Date Signed 02 21 2026			
CONFORME: 52 GARCIA, LEONARDO DESAMPARADO Employee Signature Over Printed Name		Date Signed 02 21 2026			
CTC/Valid ID No. CCI2023 19703110 Place of Issue Mandaue City		Date of Issue 02 04 2026		Amount Paid, if CTC 577.00	
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			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.		
53 ANNABELLE ACEBO QUINTANA Present Employer/ Authorized Agent Signature Over Printed Name (Head of Accounting/ Human Resource or Authorized Representative)			54 GARCIA, LEONARDO DESAMPARADO Employee Signature Over Printed Name		

Certificate of Compensation Payment/Tax Withheld

Bureau of Internal Revenue



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".

For the Year
(YYYY)

2025

2 For the Period
From (MM/DD)

01 01

To (MM/DD)

12 31

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

Part I - Employee Information

3 TIN 744 554 335 000

4 Employee's Name (Last Name, First Name, Middle Name)

GARCIA, LEONARDO DESAMPARADO

5 RDO Code

6 Registered Address

AVOCADO BANTAYAN CEBU

6A Zip Code

0000

6B Local Home Address

AVOCADO BANTAYAN CEBU

6C Zip Code

0000

6D Foreign Address

6E Zip Code

7 Date of Birth (MM/DD/YYYY)

03 01 1985

8 Telephone Number

9 Statutory Minimum Wage rate per day

10 Statutory Minimum Wage rate per month

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

Part II - Employer Information (Present)

12 Taxpayer

207

396

481

000

13 Employer's Name

DEDON MANUFACTURING INC.

14 Registered Address

7 BIRDS OF PARADISE, RIVERSIDE, CANDUMAN, MANDAUE CITY

14A Zip Code

6014

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 38 and 52) 643,335.29

20 Less: Total Non-Taxable/Exempt Compensation Income from Present Employer (From Item 38) 170,367.80

21 Taxable Compensation Income from Present Employer (Item 19 Less Item 20) (From Item 52) 472,967.49

22 Add: Taxable Compensation Income from Previous Employer, if applicable 0.00

23 Gross Taxable Compensation Income (Sum of Items 21 and 22) 472,967.49

24 Tax Due 37,093.50

25 Amount of Taxes Withheld

25A Present Employer 37,093.50

25B Previous Employer 0.00

26 Total Amount of Taxes Withheld as adjusted (Sum of Items 25A and 25B) 37,093.50

27 5% Tax Credit (PERA Act of 2008) 0.00

28 Total Taxes Withheld (sum of items 26 and 27) 37,093.50

A. NON-TAXABLE/EXEMPT COMPENSATION INCOME

Amount

29 Basic Salary (including the exempt P250,000 & below the Statutory Minimum Wage of the MWE) 0.00

30 Holiday Pay (MWE) 0.00

31 Overtime Pay (MWE) 0.00

32 Night Shift Differential (MWE) 0.00

33 Hazard Pay (MWE) 0.00

34 13th Month Pay and Other Benefits (maximum of P90,000) 37,003.43

35 De Minimis Benefits 46,189.91

36 SSS, GSIS, PHIC & PAG-IBIG Contributions and Union Dues (Employee share only) 34,177.89

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43 Fixed Housing Allowance 0.00

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44A 0.00

44B 0.00

45 Commission 0.00

46 Profit Sharing 0.00

47 Fees including Director's Fees 0.00

48 Taxable 13th Month Pay Benefits 0.00

49 Hazard Pay 0.00

50 Overtime Pay 0.00

51 Others (Specify) 24,303.43

51A 0.00

51B 0.00

52 Total Taxable Compensation Income (Sum of Items 39 to 51B) 472,967.49

53 0.00

54 0.00

55 0.00

56 0.00

57 0.00

58 0.00

59 0.00

60 0.00

61 0.00

62 0.00

63 0.00

64 0.00

65 0.00

66 0.00

67 0.00

68 0.00

69 0.00

70 0.00

71 0.00

72 0.00

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74 0.00

75 0.00

76 0.00

77 0.00

78 0.00

79 0.00

80 0.00

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

ANNABELLE ACEBO QUINTANA

Present Employer/ Authorized Agent Signature Over Printed Name

Date Signed

02 21 2026

CONFORME:

52

GARCIA, LEONARDO DESAMPARADO

Employee Signature Over Printed Name

Date Signed

02 21 2026

CTC/Valid ID No.
of Employee

CCI2023 19703110

Place of
Issue

Mandaue City

Date of Issue

02 04 2026

Amount Paid, if CTC

577.00

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

ANNABELLE ACEBO QUINTANA

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

GARCIA, LEONARDO DESAMPARADO

Employee Signature Over Printed Name