Republika ng Pilipinas Kagawaran ng Pananalapi Kawanihan ng Rentas Internas

Certificate of Compensation Payment/Tax Withheld

2316

| For Compensation Payment With or Without Tax Withheld Fayille IIV Tax VVIIIII EIU July 2008 (ENCS) | |
|--|---|
| Fill in all applicable spaces. Mark all appropriate boxes with an "X" | 2 For the Period O4 O4 |
| (YYYY) • 2016 | ► From (MM/DD) 01 01 To (MM/DD) 12 31 |
| Part I Employee Information 3 Taxpayer Identification No. 309 479 698 0000 | Part IV-B Details of Compensation Income and Tax Withheld from Present Employer Amount A. NON-TAXABLE/EXEMPT COMPENSATION INCOME |
| 4 Employee's Name (Last Name, First Name, Middle Name) 5 RDO Cod | |
| VILLARBA, JUAN CARLO 6 Registered Address 6A Zip Code | Statutory Minimum Wage Minimum Wage Earner (MWE) |
| 6 Registered Address 6A Zip Code BLK 18 LOT 41, SANTAN STREET, PHASE 1, CAMELLA HOMES69R5Y. | BANKAL |
| 6B Local Home Address 6C Zip Code | 33 Holiday Pay (MWE) 33 |
| - | 34 Overtime Pay (MWE) 34 |
| 6E Zip Code | 35 Night Shift Differential (MWE) 35 |
| 7 Date of Birth (MM/DD/YYYY) 8 Telephone Number 02 03 1991 | 36 Hazard Pay (MWE) 36 |
| 9 Exemption Status | 37 13th Month Pay and Other Benefits 12,438.93 |
| Single Married 9A Is the wife claiming the additional exemption for qualified dependent children? Yes No 10 Name of Our lifted Parameter Children. | 38 De Minimis Benefits 38 25,000.00 |
| 10 Name of Qualified Dependent Children 11 Date of Birth (MM/DD/YYYY) | 39 SSS, GSIS, PHIC & Pag-ibig Contributions, & Union Dues (Employee share only) |
| 12 Statutory Minimum Wage rate per day 12 | 40 Salaries & Other Forms of Compensation 40 69,561.07 |
| 13 Statutory Minimum Wage rate per month 13 14 Minimum Wage Earner whose compensation is exempt from | 41 Total Non-Taxable/Exempt Compensation Income 41 115,507.00 |
| withholding tax and not subject to income tax Part II Employer Information (Present) | B. TAXABLE COMPENSATION INCOME REGULAR |
| 15 Taxpayer 423 687 498 0000 16 Employer's Name | 42 Basic Salary 42 140,760.12 |
| TATE PUBLISHING AND ENTERPRISES (PHILIPPINES), | 43 Representation 43 |
| 17 Registered Address 17A Zip Code SALINAS DRIVE LAHUG CEBU CITY 6000 | 44 Transportation 44 |
| Main Employer Secondary Employer | 45 Cost of Living Allowance 45 |
| Part III Employer Information (Previous) 18 Taxpayer | 46 Fixed Housing Allowance 46 |
| Identification No. 19 Employer's Name | 47 Others (Specify) |
| | 47A 39,924.94 |
| 20 Registered Address 20A Zip Code | 47B |
| Part IV-A Summary | SUPPLEMENTARY 48 Commission 48 |
| 21 Gross Compensation Income from Present Employer (Item 41 plus Item 55) 22 Less: Total Non-Taxable/ 23 Gross Compensation Income from 325,630.9 | 40 Drofit Charing |
| Exempt (Item 41) 115,507.0 23 Taxable Compensation Income 23 240,123.0 | |
| 24 Add: Taxable Compensation 24 | Food including Directors |
| Income from Previous Employer 25 Gross Taxable Compensation Income 25 Gross Taxable 210,123.9 | E4 Toyoble 12th Month Day E4 |
| 26 Less: Total Exemptions 26 50,000.0 | 0 52 Hazard Pay 52 |
| 27 Less: Premium Paid on Health and/or Hospital Insurance (If applicable) 28 Net Taxable 29 0.0 | F2 Overtime Pay |
| Compensation Income 160,123.9 | 54 OU (O |
| 27,531.0 | 544 |
| 30A Present Employer 30A 25,622.2 | 6 54B 54B |
| 30B Previous Employer 30B 0.0 31 Total Amount of Taxes Withheld 31 25 622 2 | |
| As adjusted 25,022.2 | Income d 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 rough the second seco | egulations issued under authority thereof. Date Signed Date Signed |
| CTC No. Employee Signature Over Printed Name of Employee Place of Issue | Date of Issue Amount Paid |
| To be accomplished under substituted filing I declare, under the penalties of perjury, that the information herein stated are reported I declare, under the penalties of perjury that I am qualified under substituted filing of | |
| under BIR Form No. 1604CF which has been filed with the Bureau of Internal Revenue. Diana Rose T. Bartulin | Income Tax Returns(BIR Form No. 1700), since I received purely compensation income from only one employer in the Phils. for the calendar year; that taxes have been correctly withheld by my employer (tax due equals tax withheld); that the BIR Form |
| Present Employer/ Authorized Agent Signature Over Printed Name (Head of Accounting/ Human Resource or Authorized Representative) | No. 1604CF 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 had been filed pursuant to the provisions of RR No. 3-2002, as amended. 59 Juan Carlo Villarba |