


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)		2 For the Period From (MM/DD) To (MM/DD)			
Part I - Employee Information			Part IV-B Details of Compensation Income & Tax Withheld from Present Employer		
3 TIN			A. NON-TAXABLE/EXEMPT COMPENSATION INCOME		
4 Employee's Name (Last Name, First Name, Middle Name)			Amount		
5 RDO Code			27 Basic Salary (including the exempt P250,000 & below or the Statutory Minimum Wage of the MWE)		
6 Registered Address			28 Holiday Pay (MWE)		
6A ZIP Code			29 Overtime Pay (MWE)		
6B Local Home Address			30 Night Shift Differential (MWE)		
6C ZIP Code			31 Hazard Pay (MWE)		
6D Foreign Address			32 13th Month Pay and Other Benefits (maximum of P90,000)		
7 Date of Birth (MM/DD/YYYY)		8 Contact Number		33 De Minimis Benefits	
9 Statutory Minimum Wage rate per day				34 SSS, GSIS, PHIC & PAG-IBIG Contributions and Union Dues (Employee share only)	
10 Statutory Minimum Wage rate per month				35 Salaries and Other Forms of Compensation	
11 <input type="checkbox"/> Minimum Wage Earner (MWE) whose compensation is exempt from withholding tax and not subject to income tax				36 Total Non-Taxable/Exempt Compensation Income (Sum of Items 27 to 35)	
Part II - Employer Information (Present)			B. TAXABLE COMPENSATION INCOME REGULAR		
12 TIN			37 Basic Salary		
13 Employer's Name			38 Representation		
14 Registered Address			39 Transportation		
14A ZIP Code			40 Cost of Living Allowance (COLA)		
15 Type of Employer <input type="checkbox"/> Main Employer <input type="checkbox"/> Secondary Employer			41 Fixed Housing Allowance		
Part III - Employer Information (Previous)			42 Others (specify)		
16 TIN			42A		
17 Employer's Name			42B		
18 Registered Address			SUPPLEMENTARY		
18A ZIP Code			43 Commission		
Part IVA - Summary			44 Profit Sharing		
19 Gross Compensation Income from Present Employer (Sum of Items 36 and 50)			45 Fees Including Director's Fees		
20 Less: Total Non-Taxable/Exempt Compensation Income from Present Employer (From Item 36)			46 Taxable 13th Month Benefits		
21 Taxable Compensation Income from Present Employer (Item 19 Less Item 20) (From Item 50)			47 Hazard Pay		
22 Add: Taxable Compensation Income from Previous Employer, if applicable			48 Overtime Pay		
23 Gross Taxable Compensation Income (Sum of Items 21 and 22)			49 Others (specify)		
24 Tax Due			49A		
25 Amount of Taxes Withheld			49B		
25A Present Employer			50 Total Taxable Compensation Income (Sum of Items 37 to 49B)		
25B Previous Employer, if applicable					
26 Total Amount of Taxes Withheld as adjusted (Sum of Items 25A and 25B)					
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 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 Present Employer/Authorized Agent Signature over Printed Name		Date Signed			
CONFORME:					
52 Employee Signature over Printed Name		Date Signed			
CTC/Valid ID No. of Employee		Place of Issue		Date Issued	
				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. 1604-C 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 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 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 Present Employer/Authorized Agent Signature over Printed Name (Head of Accounting/Human Resource or Authorized Representative)			54 Employee Signature over Printed Name		

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