

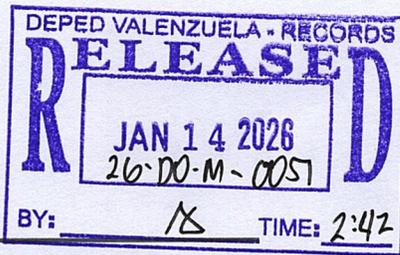


DepEd ICT Unit

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Republic of the Philippines
Department of Education
NATIONAL CAPITAL REGION

SCHOOLS DIVISION OFFICE OF VALENZUELA CITY



Office of the Schools Division
Superintendent

DIVISION MEMORANDUM

No. 0044 s. 2026

FILING OF FORM 2316 FOR CY 2025 TO THE BUREAU OF INTERNAL REVENUE

To: Public Elementary and Secondary School Heads
School Finance Officers
All Others Concerned

1. The field is hereby informed that the printing and filing of CY 2025 BIR Form 2316 are still school-based. The form shall be signed by the School Head and by the employee attesting to the information stated therein.

2. The deadline for the submission of the following forms and attachments to the Bureau of Internal Revenue - RDO 024 Valenzuela City is on February 28, 2026.

- a. Two copies of duly signed BIR Form 2316 (School Copy/ Employees copy)
- b. Transmittal letter addressed to the Revenue District Officer (ESTRELLA MANALO)
- c. Three copies of Notarized Certification (Annex F) RR-11-2018
- d. Three copies of Notarized Sworn Declaration (Annex C) RR-2-2015
- e. Validation Report 2025
- f. Documentary Stamp - 2 pcs.
- g. CD or USB Flash Drive (save scanned copies of BIR Form 2316 - properly labeled)

REQUIRED FORMAT: PDF File (Total number of employees should tally with the submitted list of employees) – Hard Copy

FILENAME FORMAT: **LAST NAME_TIN_TAXABLE PERIOD.pdf**

Example: Dela Cruz_123456789000_12312025

3. After filing, the school shall give a copy of BIR Form 2316 to the employee's concerned.

4. Moreover, furnish the Schools Division Office - Accounting Unit, a copy of the received Notarized Certification for monitoring purposes.

5. Immediate and wide dissemination, and strict compliance of this Memorandum is desired.

NOEL D. BAGANO
Schools Division Superintendent

Encl.: As stated
To be indicated in the Perpetual Index
under the following subjects:

FORMS FILE ACCOUNTING

ACCTG/MJCA -1/14/26



Address: Pio Valenzuela St., Marulas, Valenzuela City
Telephone Nos.: (02) 8293-4507, 8277-4648, 8291-0873, 8277-3439
Email Address: sdovalenzuela@deped.gov.ph
Official Website: <https://www.depedvalenzuela.com>





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ANNEX C

SWORN DECLARATION

REPUBLIC OF THE PHILIPPINES
 PROVINCE OF _____
 CITY/ MUNICIPALITY OF _____

I, (Name of Authorized Representative), (Nationality), of legal age designated as (Position)
 of (Registered Name of Company/ Corporation), with business address located at _____
 _____ do hereby certify the following:

- 1 That in compliance with the requirements of Revenue Regulations No. 2-2015,
 submitted herewith is/ are (Number of DVD-R/s or USB/Flash Drive) containing
 (Number of Scanned BIR Form 2316) covering the period mm/dd/yyyy.
- 2 That the contents of the DVD-Rs or USB/Flashdrive being submitted herewith
 conform to the conditions/ specification requirements set by the Bureau of Internal
 Revenue.
- 3 That the soft copies of the BIR Form 2316 contained in DVD-Rs or USB/Flash Drive
 being submitted herewith are the complete and exact copies of the original thereof.

**I HEREBY DECLARE UNDER THE PENALTIES OF PERJURY THAT THE FOREGOING
 ATTESTATIONS ARE TRUE AND CORRECT.**

 Name and Signature of Authorized
 Representative

Tin: _____

SUBSCRIBE AND SWORN to before me, in the City/ Municipality of _____,
 this _____ day of _____ 20_____ by _____ with
 Residence Certificate No. _____ issued at _____ on
 _____ 20_____.

NOTARY PUBLIC
 Doc No.: _____
 Page No.: _____
 Book No.: _____
 Series of: _____



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ANNEX F

CERTIFICATION

This is to certify that the employees listed below are qualified for substituted filing of their Income Tax pursuant to the provision of Section 2.83.4 of Revenue Regulations No. 2-98, as amended.

Name of Employee	Tax Identification Number	Amount of Compensation	Tax Due withheld and Remitted

I declare under the penalties of perjury, that this declaration has been made in good faith, and to the best of my knowledge and belief to be true and correct.

 Signature Over Printed Name of Authorized Representative/ designation

SUBSCRIBE AND SWORN to before me this _____ day of _____ 20_____
 in _____, Applicant exhibited to me his/ her _____ issued at
 _____ on _____.

NOTARY PUBLIC

Doc No.: _____
 Page No.: _____
 Book No.: _____
 Series of: _____



Address: **Pio Valenzuela St., Marulas, Valenzuela City**
 Telephone Nos.: **(02) 8293-4507, 8277-4648, 8291-0873, 8277-3439**
 Email Address: **sdovalenzuela@depd.gov.ph**
 Official Website: **https://www.sdovalenzuelacity.deped.gov.ph**





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National Capital Region
SCHOOLS DIVISION OFFICE - VALENZUELA

CERTIFICATION

ESTRELLA MANALO

Bureau of Internal Revenue
District Office No. 024
Valenzuela City

I have the honor to submit BIR FORM 2316 for taxable year 2025 of the following teachers/ personnel of Schools Division Office - Valenzuela City. To wit:

- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10
- 12
- 13
- 14
- 15
- 16
- 17
- 18
- 19
- 20

Name and Signature of Authorized Representative



Address: Pfo Valenzuela St., Marulas, Valenzuela City

Telephone Nos.: (02) 8293-4507, 8277-4648, 8291-0873, 8277-3439

Email Address: sdovalenzuela@deped.gov.ph

Official Website: <https://www.sdovalenzuelacity.deped.gov.ph>



PRIME-HRM

LEVEL II ACCREDITED

