FORM NO.16(PART B(Annexure)

	1 0111111	10110(1.7111	D(/ iiiioxare/			
Name and Address of the Employer		Name and Designation of the Employee				
VIGNAN'S INSTITUTE OF INFORMAT		DLOGY				
(A unit of Lavu Educational Soceity)			D.JAYA PRASAD			
# 8-1-13, Siripuram Junction, VISAKHAPATNAM – 500 003			ASST. PROFESSOR			
PAN/GIR NO. AAAALO584H	TAN: VP	NL00159F	PAN NUMBER APNPD5788E			
TDS Circle where Annual Return Statement under section 206 is to be	PEF	RIOD	ASSESSMENT YEAR			
filed.		21	· · · · · · · · · · · · · · · · · · ·			
	FROM	ТО	2019-20			
	01.04.18	31.03.19				
DETAILS OF SALARY PAID AND ANY OTHER INCOME AND TAX DEDUCTED						

DETAILS OF SALARY PAID AND ANY OTHER INCOME AND TAX DEDUCTED					
		Rs.	Rs.		
1	Gross Salary				
# 6	 a. Salary as per provisions contained in sec.17(1) b. Value of perquisites' u/s 17(2)(as per Form No.12BA where ever applicable) 	154384			
	c. Profits in lieu of Salary u/s 17(3) as per Form No.12BA where ever applicable)	0			
	d. Total	154384	154384		
2	Less :Allowance to the extent exempt under section.10		18720		
3	Balance (1 - 2)		135664		
4	Deductions				
	a) Standard Deduction	40000			
12	b) Tax on Employment	300			
5	Aggregate of 4 (a & b)		40300		
6	Income chargeable under the head "Salaries" (3-5)		95364		
7	Add :Any other income reported by the employee		0		
8	Gross Total Income (6 + 7)		95364		
9	Deduction of Loss from House Property(Interest on Home Loan)	ž.	0		
10	Total Income (8 - 9)	,	95364		
11	Deductions under chapter VI-A				
	i) Under Section 80C,80CCC,80CCD	17197			
	ii) Under Section 80D,80DD,80E,80GG and 80U	0			
12	Aggregate of deductible amount under chapter VI-A (11i - 11ii)	* =	17197		
13	Taxable Income (10 - 12)		78167		
14	Under Section 89 (attach details)		0		
15	Tax Payable and surcharge incl. Education Cess there on		0		
16	Less : Tax deducted at source	-	0		
17	Tax Refundable (15 - 16)	* .	0		

I, <u>S.SURESH</u> S/o <u>Janardhana Rao</u> Working in the capacity of <u>Accounts Manager</u> do hereby certify that the above amount has been deducted and paid to the credit of the Central Government. I further certify that the information given above is true and correct based on the book of accounts, documents and other available records.

For LAVU EDUCATIONAL SOCIETY,

Authorized signatory

Signature of the person responsible

Full Name: S.SURESH

Designation: Accounts Manager

Place:Visakhapatnam Date: 31.07.2019

