FORM NO.16(PART B(Annexure)

Name and Address of the Employer				Name and Designation of the Employee			
VIGNAN VIDYALAYAM SCHOOL (A unit of Lavu Educational Soceity)							
				A.MURALI KRISHNA			
# 8-1-13, Siripuram Junction, VISAKHAPATNAM – 500 003				Chemistry			
PAN/GIR NO. AAAALO584H TAN: VPNL00159F TDS Circle where Annual Return			PAN NUMBER: AZGPA1162N				
	ement under section 206 is to be	PERIOD		ASSESSMENT YEAR			
filed.				, and the second of the second			
•		FROM TO		2019-20			
	DETAIL COT CALAI	01.04.18	31.03.19		to a second seco		
	DETAILS OF SALAI	RY PAID A	ND ANY OT	HER INC	OME AND TAX DEDUC		
1	Gross Salary				Rs.	Rs.	
			7/4)		0 .	* * * * * * * * * * * * * * * * * * *	
	 a. Salary as per provisions contained in sec.17(1) b. Value of perquisites' u/s 17(2)(as per Form No.12 			ere	52000		
	ever applicable)				0		
	c. Profits in lieu of Salary u/s 17(3)	as per Forn	n No.12BA v	vhere	3		
	ever applicable)				0		
	d. Total				52000		52000
2	to the extent exempt and a section. To				to a first or a g		0
3	(52000
4	Deductions				9 P		
	a) Standard Deduction				40000		
-	b) Tax on Employment				200		
5	Aggregate of 4 (a & b)						40200
6	Income chargeable under the head "Salaries" (3-5)						11800
7	Add :Any other income reported by the employee						0
8	Gross Total Income (6 + 7)						14800
9	Deduction of Loss from House Property(Interest on Home Loan)						0
10	Total Income (8 - 9)						14800
11	Deductions under chapter VI-A					*	
	i) Under Section 80C,80CCC,80CC				0	1	
40	ii) Under Section 80D,80DD,80E,80GG and 80U				0	, T	
12	Aggregate of deductible amount under chapter VI-A (11i - 11ii)					10 H	0
13	axable Income (10 - 12)						14800
14	Under Section 89 (attach details)					_ 101 20 20	0
15	Tax Payable and surcharge incl. Education Cess there on					= 50; g	0
16	Less : Tax deducted at source					g	0
17	Tax Refundable (15 - 16)						0
						N ×	

I, S.SURESH S/o Janardhana Rao Working in the capacity of Accounts Manager 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

