FORM NO.16(PART B(Annexure)

VICHAN VIDYAL AYAM SCHOOL			Name and Designation of the Employee S.BHASKARA RAO	
PAN/GIR NO. AAAALO584H	TAN: VPNL00159F		PAN NUMBER: GLNPS9615H	
TDS Circle where Annual Return Statement under section 206 is to be filed.	PEF	RIOD	ASSESSMENT YEAR	
med.	FROM	TO	2019-20	
	01.04.18	31.03.19	2310 25	

	01.04.18 31.03.19							
		DETAILS OF SALARY PAID AND ANY OTHER INCO		IEU •				
			Rs.	Rs.				
	1	Gross Salary						
		a. Salary as per provisions contained in sec.17(1)	158306	8. F				
		b. Value of perquisites' u/s 17(2)(as per Form No.12BA where	0					
		ever applicable) c. Profits in lieu of Salary u/s 17(3) as per Form No.12BA where						
		ever applicable)	0					
		d. Total	158306	158306				
	2	Less :Allowance to the extent exempt under section.10		0				
	3	Balance (1 - 2)		158306				
	4	Deductions	**					
		a) Standard Deduction	40000					
		b) Tax on Employment	300	9 S S				
	5	Aggregate of 4 (a & b)		40300				
	6	Income chargeable under the head "Salaries" (3-5)	2.2	118006				
	7	Add :Any other income reported by the employee		0				
	8	Gross Total Income (6 + 7)		153958				
	9	Deduction of Loss from House Property(Interest on Home Loan)		150050				
	10	Total Income (8 - 9)	8	153958				
	11	Deductions under chapter VI-A	* .					
		i) Under Section 80C,80CCC,80CCD	0					
		ii) Under Section 80D,80DD,80E,80GG and 80U	0					
	12	Aggregate of deductible amount under chapter VI-A (11i - 11ii)	*	0				
	13	Taxable Income (10 - 12)		153958				
1	14	Under Section 89 (attach details)	8	0				
	15	Tax Payable and surcharge incl. Education Cess there on		0				
	16	Less : Tax deducted at source	* 2	0				
	17	Tax Refundable (15 - 16)	•	U				
				L wife, that the above				

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

Place: Visakhapatnam Date: 31.07.2019

Full Name: S.SURESH **Designation: Accounts Manager**

