

**FORM NO.16(PART B(Annexure))**

<b>Name and Address of the Employer</b>		<b>Name and Designation of the Employee</b>	
VIGNAN's INSTITUTE OF INFORMATION TECHNOLOGY (A unit of Lavu Educational Socieity) # 8-1-13, Siripuram Junction, VISAKHAPATNAM – 500 003		P.ALEKYA Computer Operator	
<b>PAN/GIR NO.</b> AAAALO584H	<b>TAN :</b> VPNL00159F	<b>PAN NUMBER</b>	
TDS Circle where Annual Return Statement under section 206 is to be filed.	<b>PERIOD</b>		<b>ASSESSMENT YEAR</b>
	<b>FROM</b>	<b>TO</b>	2019-20
	01.04.18	31.03.19	

**DETAILS OF SALARY PAID AND ANY OTHER INCOME AND TAX DEDUCTED**

		Rs.	Rs.
1	Gross Salary		
	a. Salary as per provisions contained in sec.17(1)	116983	
	b. Value of perquisites' u/s 17(2)(as per Form No.12BA where ever applicable)	0	
	c. Profits in lieu of Salary u/s 17(3) as per Form No.12BA where ever applicable)	0	
	d. Total	116983	116983
2	Less :Allowance to the extent exempt under section.10		12982
3	Balance (1 - 2)		104001
4	Deductions		
	a) Standard Deduction	40000	
	b) Tax on Employment	0	
5	Aggregate of 4 (a & b )		40000
6	Income chargeable under the head "Salaries" (3-5)		64001
7	Add :Any other income reported by the employee		0
8	Gross Total Income (6 + 7)		64001
9	Deduction of Loss from House Property(Interest on Home Loan)		0
10	Total Income (8 - 9)		64001
11	Deductions under chapter VI-A		
	i) Under Section 80C,80CCC,80CCD	13934	
	ii) Under Section 80D,80DD,80E,80GG and 80U	0	
12	Aggregate of deductible amount under chapter VI-A (11i - 11ii)		13934
13	Taxable Income (10 - 12)		50067
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	<b>Tax Refundable (15 - 16)</b>		0

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

