

FORM 12BB

(See Rule 26C)

Statement showing particulars of claims by an employee for deduction of tax under section 192

1. Name and Address of the employee : **Hemanth Kumar Babu**
2. Permanent Account Number of the employee : **ABSPH0291D**
3. Financial year : **2024 - 2025**

| Details of claims and evidence thereof | | | |
|--|--|--|------------------------------|
| Sl.No. | Nature of Claim | Amount | Evidence / Particulars |
| (1) | (2) | (3) | (4) |
| 1. | House Rent Allowance : (i) Rent paid to the landlord (ii) Name of the landlord (iii) Address of the landlord (iv) Permanent Account Number of the landlord Note: Permanent Account Number shall be furnished if the aggregate rent paid during the previous year exceeds one lakh rupees | ₹5,99,988.00 Praveen Kumar Plot No. 120 A1, Indira Gandhi Street, Tellus Avenue Phase 1, Rajakilpakkam, Chennai 600073 ARPPP3380C | 2 proof(s) attached. |
| 2. | Leave travel concessions or assistance | ₹1,03,200.00 | 3 proof(s) attached. |
| 3. | Deduction of interest on borrowing: (i) Interest payable/paid to the lender (ii) Name of the lender (iii) Address of the lender (iv) Permanent Account Number of the lender (a) Financial Institutions(if available) (b) Employer(if available) (c) Others | | |
| 4. | Deduction under Chapter VI-A (A) Section 80C,80CCC and 80CCD | | |

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| | (i) Section 80C | | |
| | (a) Life Insurance Premium | ₹2,04,500.00 | 2 proof(s) attached. |
| | (ii) Section 80CCC | | |
| | (iii) Section 80CCD(1) | | |
| | (a) Additional exemption on voluntary NPS | ₹50,000.00 | 1 proof(s) attached. |
| | (B) Other sections (e.g. 80E, 80G, 80TTA, etc.) under Chapter VI-A | | |
| | (i) Section 80D | | |
| | (a) Medi Claim Policy for self, spouse, children - 80D | ₹28,112.00 | 1 proof(s) attached. |
| | (b) Medi Claim Policy for parents for senior citizen - 80D | ₹50,000.00 | 1 proof(s) attached. |
| | (c) Preventive health check up for parents - 80D | ₹5,000.00 | 1 proof(s) attached. |
| | (d) Medical Bills for parents for senior citizen - 80D | ₹50,000.00 | 1 proof(s) attached. |
| | (e) Preventive health check up - 80D | ₹5,000.00 | 2 proof(s) attached. |
| | (ii) Section 80DD | | |
| | (a) Treatment of dependent with severe disability | ₹1,50,000.00 | 1 proof(s) attached. |
| | (iii) Section 80G | | |
| | (a) Donation eligible for 100% exemption | ₹20,00,000.00 | 1 proof(s) attached. |
| 5. | Deduction under Section 24 | | |
| | Income/Loss from Let Out Property - 1 | ₹-6,090.00 | 2 proof(s) attached. |
| 6. | Other Incomes | | |
| | Interest Earned from Savings Deposit | | |
| | Interest Earned from Fixed Deposit | | |
| | Income from other sources | | |
| | Interest Earned from National Savings Certificates | | |
| 7. | Previous Employment | | |
| | Income After Exemptions | | |
| | Income Tax | | |
| | Professional Tax | | |

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|--|-----------------------------|-------------------------------|--|
| | Employee Provident Fund | | |
| | Leave Encashment Exemptions | | |
| Verification | | | |
| I Hemanth Kumar Babu son/daughter of R. Babu do hereby certify that the information given above is complete and correct. | | | |
| Place: | | (Signature of the employee) | |
| Date: 30/12/2024 | | | |
| Designation: General Manager | | Full Name: Hemanth Kumar Babu | |