

#### **FORM NO. 16** [See rule 31(1)(a)] **PART A** Certificate under Section 203 of the Income-tax Act, 1961 for tax deducted at source on salary Certificate No. FKQLGNJ Last updated on 26-May-2016 Name and address of the Employee Name and address of the Employer NOVARTIS HEALTHCARE PRIVATE LIMITED 4TH FLOOR, DR. ANNIE BESANT ROAD, SANDOZ HOUSE, MANIK PRABHU NANNA WORLI, MUMBAI - 400018 H NO 3-45/2, NEAR MAIN X ROAD, NARSAPUR, MEDAK - 502313 Maharashtra Telangana +(91)22-24988888 HROPERATIONS.INDIA@NOVARTIS.COM Employee Reference No. PAN of the Employee **PAN** of the Deductor TAN of the Deductor provided by the Employer (If available) MUMN12719A ABRPY2492A AAACN5094N CIT (TDS) Assessment Year Period with the Employer The Commissioner of Income Tax (TDS) Room No. 900A, 9th Floor, K.G. Mittal Ayurvedic Hospital 2016-17 01-Apr-2015 31-Mar-2016 Building, Charni Road, Mumbai - 400002 Summary of amount paid/credited and tax deducted at source thereon in respect of the employee Receipt Numbers of original Amount of tax deposited / remitted Amount of tax deducted quarterly statements of TDS Amount paid/credited Quarter(s) (Rs.) under sub-section (3) of (Rs.) Section 200 Q1 QRHDEDQD 362262.00 40355.00 40355.00 Q2 **QRLASPIB** 281262.00 15729.00 15729.00 281262.00 15729.00 15729.00 Q3 **QRPEHPQG** Q4 **QRVGFPHD** 440342.00 68878.00 68878.00 Total (Rs.) 1365128.00 140691.00 140691.00 I. DETAILS OF TAX DEDUCTED AND DEPOSITED IN THE CENTRAL GOVERNMENT ACCOUNT THROUGH BOOK ADJUSTMENT (The deductor to provide payment wise details of tax deducted and deposited with respect to the deductee) **Book Identification Number (BIN)** Tax Deposited in respect of the Sl. No. deductee Date of transfer voucher Status of matching Receipt Numbers of Form DDO serial number in Form no. with Form no. 24G (Rs.) (dd/mm/yyyy) No. 24G Total (Rs.) II. DETAILS OF TAX DEDUCTED AND DEPOSITED IN THE CENTRAL GOVERNMENT ACCOUNT THROUGH CHALLAN (The deductor to provide payment wise details of tax deducted and deposited with respect to the deductee) Challan Identification Number (CIN) Tax Deposited in respect of the Sl. No. deductee Date on which Tax deposited **Challan Serial Number BSR Code of the Bank** Status of matching with (Rs.) **OLTAS\*** Branch (dd/mm/yyyy) 1 24747.00 6910333 07-05-2015 15451 F 8062.00 6910333 05-06-2015 18814 F 2 3 7546.00 6910333 07-07-2015 19990 4 5243.00 6910333 07-08-2015 23373 F

Sl. No.	Tax Deposited in respect of the deductee (Rs.)	Challan Identification Number (CIN)			
		BSR Code of the Bank Branch	Date on which Tax deposited (dd/mm/yyyy)	Challan Serial Number	Status of matching with OLTAS*
5	5243.00	6910333	07-09-2015	18262	F
6	5243.00	6910333	06-10-2015	21062	F
7	5243.00	6910333	06-11-2015	22212	F
8	5243.00	6910333	07-12-2015	17058	F
9	5243.00	6910333	07-01-2016	17775	F
10	5243.00	6910333	05-02-2016	15909	F
11	14987.00	6910333	04-03-2016	18239	F
12	48648.00	6910333	29-04-2016	13907	F
Total (Rs.)	140691.00				

#### Verification

I, GEETHA SUDHEERKUMAR MENON, son / daughter of SANKARANKUTTY MENON working in the capacity of PAYROLL MANAGER (designation) do hereby certify that a sum of Rs. 140691.00 [Rs. One Lakh Fourty Thousand Six Hundred and Ninety One Only (in words)] has been deducted and a sum of Rs. 140691.00 [Rs. One Lakh Fourty Thousand Six Hundred and Ninety One Only] has been deposited to the credit of the Central Government. I further certify that the information given above is true, complete and correct and is based on the books of account, documents, TDS statements, TDS deposited and other available records.

Place	MUMBAI	
Date	30-May-2016	(Signature of person responsible for deduction of Tax)
Designation: PAYROLL MANAGER		Full Name: GEETHA SUDHEERKUMAR MENON

#### Notes:

- 1. Part B (Annexure) of the certificate in Form No.16 shall be issued by the employer.
- 2. If an assessee is employed under one employer during the year, Part 'A' of the certificate in Form No.16 issued for the quarter ending on 31st March of the financial year shall contain the details of tax deducted and deposited for all the quarters of the financial year.
- 3. If an assessee is employed under more than one employer during the year, each of the employers shall issue Part A of the certificate in Form No.16 pertaining to the period for which such assessee was employed with each of the employers. Part B (Annexure) of the certificate in Form No. 16 may be issued by each of the employers or the last employer at the option of the assessee.

  4. To update PAN details in Income Tax Department database, apply for 'PAN change request' through NSDL or UTITSL.

## Legend used in Form 16

#### \* Status of matching with OLTAS

Legend	Description	Definition
U	Unmatched	Deductors have not deposited taxes or have furnished incorrect particulars of tax payment. Final credit will be reflected only when payment details in bank match with details of deposit in TDS / TCS statement
P	Provisional	Provisional tax credit is effected only for TDS / TCS Statements filed by Government deductors."P" status will be changed to Final (F) on verification of payment details submitted by Pay and Accounts Officer (PAO)
F	Final	In case of non-government deductors, payment details of TDS / TCS deposited in bank by deductor have matched with the payment details mentioned in the TDS / TCS statement filed by the deductors. In case of government deductors, details of TDS / TCS booked in Government account have been verified by Pay & Accounts Officer (PAO)
0	Overbooked	Payment details of TDS / TCS deposited in bank by deductor have matched with details mentioned in the TDS / TCS statement but the amount is over claimed in the statement. Final (F) credit will be reflected only when deductor reduces claimed amount in the statement or makes new payment for excess amount claimed in the statement

40007987/ABRPY2492A MANIK PRABHU YERRAVALLI

Emp Code: 40007987

# PART B (Annexure)

Details of Salary Paid and any other in	come and tax deducte	ed	
1. Gross Salary			
(a) Salary as per provision contained in sec.17 (1)	1365128		
(b) Value of perquisites u\s 17(2) (as per Form no12 BA,	0		
wherever applicable )			
(c) Profits in lieu of salary under section17 (3) ( as per			
Form No. 12 BA, wherever applicable ) (d) TOTAL		1365128	
Less: Allowance to the extent exempt under section 10		144300	
3. Balance (1-2)			12208
4. Deductions :			
(a) Entertainment Allowance			
(b) Tax on Employment		2400	
5. Aggregate of 4(a) and (b)		2400	24
6. Income chargeable under the head "Salaries" (3-5)			12184
7. Add: Any other income reported by the Employee			12104
Income from House Property			
Other Income			
8. Gross Total Income (6+7)			12184
9. Deduction Under Chapter VI-A	GROSS AMT	QUALIFYING AMT	DEDUCTIBLE AM
A) Sections 80C, 80CCC and 80CCD			
a) Sec 80C	04440		
(i) Provident Fund	64440		
(ii) Voluntary Provident Fund	0		
(iii) Superannuation	0		
(iv) Life insurance premium	138414		
(v) Equity Linked Savings Schemes	0		
(vi) Housing Loan Principal Repayment	0		
(vii) NSC	0		
(viii) NSC Interest	0		
(ix) Infrastructure Bond	0		
(x) Contribution to Public Provident Fund (xi) Senior Citzen Savings Scheme	0		
. ,	0		
(xii) Mutual fund/ SIP (xiii) Child Education Fees	97000		
(xiv) Sukanya Samridhi	97000		
(xv) ULIP	49992		
(xvi) Fixed Deposits	49992		
(xvii) POTD	0		
(b) Under Section 80CCC	0		
(c) NPS - Employee Contribution -80CCD (1)	0		
Section 80CCE Total		349846	1500

Note: 1. Aggregate amount deductible under sections 80C, 80CCC and 80CCD (1), shall not exceed one lakh fifity thousand rupees.

MANIK PRABHU YERRAVALLI 40007987/ABRPY2492A

Employee No 40007987	Employee Name	ame MANIK PRABHU YERRAVALLI		
(B) Other sections under Chapter VI A		Gross Amt.	Qualifying Amt.	Deductible Amt.
(a) NPS Employer Contribution 80CCD (2)		0	0	
(b) Under Section 80CCD (1B)		0	0	
(c) Under Section 80CCG		0	0	
(d) Under Section 80D		29786	29786	
(e) Under Section 80DD		0	0	
(f) Under Section 80GGA		0	0	
(g) Under Section 80DDB		0	0	
(h) Under Section 80E		0	0	
(i) Under Section 80GG		0	0	
(j) Under Section 80U		0	0	
10. Aggregate of deductible amount under chapter VI-A				179786
11. Total Income (8-10)				1038642
12. Tax on Total income				136593
13. Education Cess @3% ( on tax computed at S.No.12)				4098
14. Tax Payable (12+13)				140691
15. Less : Relief under section 89				0
16. Net Tax Payable (14-15)				140691
Verification				

I, GEETHA SUDHEERKUMAR MENON, Daughter of SANKARANKUTTY MENON, working in the capacity of PAYROLL MANAGER, do hereby certify that the information given above is true, complete, and correct and is based on the books of account, documents, TDS Statements and other available records.

Place MUMBAI Date: 30/05/2016 Signature of the person responsible for deduction of tax

GEETHA SUDHEERKUMAR MENON Full Name :

PAYROLL MANAGER Designation:

40007987/ABRPY2492A MANIK PRABHU YERRAVALLI

#### Form 12BA

### [See Rule 26A(2)(b)]

Statement showing particulars of perquisites, other fringe benefits or amenities and profits in lieu of salary with value thereof

1) Name and address of

employer

NOVARTIS HEALTHCARE PRIVATE LIMITED

4TH FLOOR, DR. ANNIE BESANT ROAD,

SANDOZ HOUSE, WORLI,

MUMBAL

MAHARASHTRA-400018

2) TAN MUMN12719A 3) TDS Assessment Range of the employer MUMWT824

4) Name, Designation and PAN of the employee MANIK PRABHU YERRAVALLI(40007987)

TRIAL ACCOUNT MANAGER

1365128

ABRPY2492A

5) Is the employee a director or a person with substantial interest in the company (Where the employer is a company) NO

6) Income under the head "Salaries" of the employee (Other

than from perquisites)

2015-2016

7) Financial Year

8) Valuation of Perquisites:

S.No.	Nature of Perquisites (See Rule 3)	Value of perquisite as per rules (Rs.)	Amount, if any, recovered from the employee (Rs.)	Amount of perquisite chargeable to tax (Rs.)
1.	Accomodation	0	0	0
2.	Cars / Other automotive	0	0	0
3.	Sweeper, gardener, watchman or personal attendant	0	0	0
4.	Gas, Electricity, Water	0	0	0
5.	Interest free or concessional loans	0	0	0
6.	Holiday expenses	0	0	0
7.	Free or concessional travel	0	0	0
8.	Free Meals	0	0	0
9.	NPS Perk	0	0	0
10.	Gifts, Vouchers etc	0	0	0
11.	Superannuation	0	0	0
12.	Club expenses	0	0	0
13.	Use of movable assets by employees	0	0	0
14.	Transfer of assets to employees	0	0	0
15.	Value of any other benefit/ amenity/ service/ privilege	0	0	0
16.	Stock options(non-qualified options)	0	0	0
17.	Other benefits or amenities	0	0	0
18.	Total value of perquisites	0	0	0
19.	Total value of profits in lieu of salary as per section 17(3)			

9) Details of Tax

a) Tax deducted from salary of the employee u/s 192(1) b) Tax Paid by employer on behalf of the employee u/s 192(1A) c) Total Tax Paid

d) Date of Payment into Government treasury

AS PER FORM 16

#### **DECLARATION BY EMPLOYER**

I, GEETHA SUDHEERKUMAR MENON, Daughter of SANKARANKUTTY MENON, working as PAYROLL MANAGER, do hereby declare on behalf of NOVARTIS HEALTHCARE PRIVATE LIMITED that the information given above is based on the books of account, documents and other relevant records or information available with us and the details of value of each such perquisite are in accordance with section 17 and rules framed thereunder and that such information is true and correct.

Place: MUMBAI

Date: 30/05/2016 Signature of the person responsible for deduction of Signature

140691

140691

0

GEETHA SUDHEERKUMAR MENON Full Name :

PAYROLL MANAGER Designation:

Digitally signed Date: 2016