

V	Centralize	ed Processing Cell   TDS F	Reconciliation A	Analysis an	d Correction	Enabling Syste	m			overnment of India ne Tax Department	
				FOR	M NO. 10	6					
				[See	rule 31(1)(a)]						
				P	ART A						
		Certificate und	er Section 203 o	f the Income	e-tax Act, 1961	1 for tax deducted	d at source on sa	alary			
rtificate No	o. AMGTI	NA						Last upd	ated on	15-Jul-2021	
	1	Name and address of the I	Employer			Na	me and address	of the Er	nployee		
7TH FLO BKC MA MAHAR Maharasi +(91)22-	OOR INSP AIN ROAD ASHTRA, htra 24988888	THCARE PRIVATE LIMI IRE BKC, BANDRA KUR ), , MUMBAI - 400018 INDIA@NOVARTIS.COM	LA COMPLEX,	G BLOCK		ANIK PRABHU N NO 3-45/2, NEAR		D, NARS.	APUR - :	502313 Telangana	
	PAN of	the Deductor		TAN o	f the Deductor	r	PAN of the En	ıployee		vee Reference No. ed by the Employer lable)	
	AAA	ACN5094N		MU	MN12719A		ABRPY24	92A			
		CIT (TDS)	- 15		_	Assessment Ye	ear	Pei	riod with	the Employer	
R	Room No. 9	e Commissioner of Income 200A, 9th Floor, K.G. Mitta ilding, Charni Road, Mumb Summary of amo	l Ayurvedic Hospoai - 400002		educted at sou	2021-22 urce thereon in re	espect of the em	01-Apr-	-2020	31-Mar-2021	
Quarte	r(s)	Receipt Numbers original quarterly statements of TDS ursub-section (3) of Section 200	nder Ar			Amount of tax deducted (Rs.)		Amount of tax deposited / remit (Rs.)		•	
Q1		QUDJUGQG			479166.00	)166.00		92679.00		92679	
Q2		QUEMIGQF			510170.00		99112.00	)		99112.0	
Q3		QUGFCZND			482720.00	82720.00				89953.0	
Q4		QULLUZHF		758240.00			94432.00		94432.0		
Total (I		F TAX DEDUCTED ANI  (The deductor to pr		IN THE CE				UGH BO	OOK AD	376176.0 JUSTMENT	
					Во	ook Identification	Number (BIN)				
Sl. No.  Tax Deposited in respect of the deductee (Rs.)		Receipt Numbers of Form No. 24G		DDO serial	DOO serial number in Form no. 24G		Date of transfer voucher (dd/mm/yyyy)		Status of matching with Form no. 240		
Total											
	II. DETA	The deductor to pro							GH CHA	LLAN	
	Tax De	posited in respect of the			Cha	allan Identificatio	on Number (CIN	<i>y</i> )			
Sl. No.		deductee (Rs.)	DSD Code		Date on w	hich Tax deposite	ed Challan Say		Sta	ntus of matching wit	

CL M-	Tax Deposited in respect of the	Challan Identification Number (CIN)						
Sl. No.	deductee (Rs.)	BSR Code of the Bank Branch	Date on which Tax deposited (dd/mm/yyyy)  Challan Serial Number		Status of matching with OLTAS*			
1	30838.00	6390340	06-05-2020	07412	F			
2	30685.00	6390340	05-06-2020	08184	F			
3	31156.00	6390340	07-07-2020	11581	F			
4	30120.00	6390340	07-08-2020	09931	F			

Certificate Number: AMGTINA TAN of Employer: MUMN12719A PAN of Employee: ABRPY2492A Assessment Year: 2021-22

	Tax Deposited in respect of the	Challan Identification Number (CIN)					
Sl. No.	deductee (Rs.)	BSR Code of the Bank Branch	Date on which Tax deposited (dd/mm/yyyy)	Challan Serial Number	Status of matching with OLTAS*		
5	39956.00	6390340	07-09-2020	10534	F		
6	29036.00	6390340	07-10-2020	11578	F		
7	43720.00	6390340	06-11-2020	16670	F		
8	22718.00	6390340	07-12-2020	35746	F		
9	23515.00	6390340	07-01-2021	36895	F		
10	23990.00	6390340	05-02-2021	28629	F		
11	0.00	-	05-03-2021	-	F		
12	70442.00	6390340	28-04-2021	24061	F		
Total	376176.00	_					

### Verification

I, NAGARAJ SRIRAM, son / daughter of AMRUTHUR NANJUNDA IYER NAGARAJ working in the capacity of SENIOR MANAGER PAYROLL AND RETIREMENT BENEFITS (designation) do hereby certify that a sum of Rs. 376176.00 [Rs. Three Lakh Seventy Six Thousand One Hundred and Seventy Six Only (in words)] has been deducted and a sum of Rs. 376176.00 [Rs. Three Lakh Seventy Six Thousand One Hundred and Seventy Six 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	16-Jul-2021	(Signature of person responsible for deduction of Tax)	
Designatio n:	SENIOR MANAGER PAYROLL AND RETIREMENT BENEFITS	Full NAGARAJ SRIRAM	

#### 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)
o	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

Signature valid
Digitally signed by Sriram N
Date: 202 107 4 10:17:46
IST





				Ancon	ie iax Department				
FORM NO. 16									
PART B									
Certificate under S	ection 203 of the Income-tax	Act, 1961 for tax deducted	l at source on	salary					
Certificate No. AMGTINA	Certificate No. AMGTINA Last updated on 15-Jul-2021								
Name and address of the Emp	loyer	Nai	ne and addre	ss of the Employee					
NOVARTIS HEALTHCARE PRIVATE LIMITED 7TH FLOOR INSPIRE BKC, BANDRA KURLA COMPLEX, G BLOCK BKC MAIN ROAD, MAHARASHTRA, MUMBAI - 400018 Maharashtra +(91)22-24988888 HROPERATIONS.INDIA@NOVARTIS.COM		MANIK PRABHU NANNA H NO 3-45/2, NEAR MAIN X ROAD, NARSAPUR - 502313 Telangana							
PAN of the Deductor	TAN of the	Deductor		PAN of the Emp	loyee				
AAACN5094N	MUMNI	2719A		ABRPY2492	A				
CIT (TDS)		Assessment Year		Period with the Employer					
The Commissioner of Income Tax Room No. 900A, 9th Floor, K.G. Mittal Ay Building, Charni Road, Mumbai -	urvedic Hospital	2021-22		From 01-Apr-2020	<b>To</b> 31-Mar-2021				

Details	of Salary Paid and any other income and tax deducted		
Wheth	er opting for taxation u/s 115BAC	No	
1.	Gross Salary	Rs.	Rs.
(a)	Salary as per provisions contained in section 17(1)	2230296.00	
(b)	Value of perquisites under section 17(2) (as per Form No. 12BA, wherever applicable)	0.00	
(c)	Profits in lieu of salary under section 17(3) (as per Form No. 12BA, wherever applicable)	0.00	
(d)	Total		2230296.00
(e)	Reported total amount of salary received from other employer(s)		0.00
2.	Less: Allowances to the extent exempt under section 10		
(a)	Travel concession or assistance under section 10(5)	17330.00	
(b)	Death-cum-retirement gratuity under section 10(10)	0.00	
(c)	Commuted value of pension under section 10(10A)	0.00	
(d)	Cash equivalent of leave salary encashment under section 10(10AA)	0.00	
(e)	House rent allowance under section 10(13A)	158384.00	

(f)	Amount of any other exemption under section 10 [Note: Break-up to be filled and signed by employer in the table provide at the bottom of this form]		
(g)	Total amount of any other exemption under section 10	0.00	
(h)	Total amount of exemption claimed under section 10 [2(a)+2(b)+2(c)+2(d)+2(e)+2(g)]		175714.00
3.	Total amount of salary received from current employer [1(d)-2(h)]		2054582.00
4.	Less: Deductions under section 16		
(a)	Standard deduction under section 16(ia)	50000.00	
(b)	Entertainment allowance under section 16(ii)	0.00	
(c)	Tax on employment under section 16(iii)	2400.00	
5.	Total amount of deductions under section 16 [4(a)+4(b) +4(c)]		52400.00
6.	Income chargeable under the head "Salaries" [(3+1(e) -5]		2002182.00
7.	Add: Any other income reported by the employee under as per section 1	92 (2B)	
(a)	Income (or admissible loss) from house property reported by employee offered for TDS	0.00	
(b)	Income under the head Other Sources offered for TDS	0.00	
8.	Total amount of other income reported by the employee [7(a)+7(b)]		0.00
9.	Gross total income (6+8)	Service of the servic	2002182.00
10.	Deductions under Chapter VI-A	Gross Amount	Deductible Amount
(a)	Deduction in respect of life insurance premia, contributions to provident fund etc. under section 80C	315905.00	150000.00
(b)	Deduction in respect of contribution to certain pension funds under section 80CCC	0.00	0.00
(c)	Deduction in respect of contribution by taxpayer to pension scheme under section 80CCD (1)	0.00	0.00
(d)	Total deduction under section 80C, 80CCC and 80CCD(1)	315905.00	150000.00
(e)	Deductions in respect of amount paid/deposited to notified pension scheme under section 80CCD (1B)	7000.00	7000.00

Certificate Number: AMGTINA Assessment Year: 2021-22 TAN of Employer: MUMN12719A PAN of Employee: ABRPY2492A

	•	AMGIINA	TAN OF Employer: M	0		T.L. voi Empi	oyee: ABRI 1 2492A			2021-22
(f)	pensio	n	et of contribution by on 80CCD (2)	Employer t	to			0.00		0.00
(g)		Deduction in respect of health insurance premia under section 80D				14489.00			14489.00	
(h)		Deduction in respect of interest on loan taken for higher education under section 80E					0.00		0.00	
							Gross Amount	Quali Amo		Deductible Amount
(i)			respect of donations ns, etc. under section		funds,		0.00		0.00	0.00
(j)	Deduc	-	ct of interest on depo	sits in savii	ngs		0.00		0.00	0.00
(k)	[Note:	Break-up to	e under any other pobe filled and sign tom of this form]							
(l)	Total o	Total of amount deductible under any other provision(s) of			0.00		0.00	0.00		
11.	1. Aggregate of deductible amount under Chapter VI-A $[10(d)+10(e)+10(f)+10(g)+10(h)+10(i)+10(j)+10(l)]$				171489.00					
12.	Total	taxable inco	me (9-11)							1830693.00
13.	Tax or	n total income	e							361708.00
14.	Rebate	e under section	on 87A, if applicable				0.00			
15.	Surcha	arge, whereve	er applicable		<b>N</b> :	-//	0.00			
16.	Health	and education	on cess		1	1				14468.00
17.	Tax pa	nyable (13+1:	5+16-14)			7				376176.00
18.	Less: I	Relief under s	section 89 (attach det	tails)						0.00
19.	Net ta	x payable (1	7-18)			7				376176.00
					Verificat	ion				
MAN	AGER P	AYROLL A	on/daughter of <u>AMR</u> ND RETIREMENT based on the books of	<b>BENEFITS</b>	(Designation	on) do hei	reby certify that the	informati	on given a	
Place			MUMBA	I		(Sign	ature of person resp	onsible fo	or deducti	on of
						<del>-   `                                  </del>				

NAGARAJ SRIRAM

Full

16-Jul-2021

Date

Full Name

SRIRAM N

2.(f) B	2.(f) Break up for 'Amount of any other exemption under section 10' to be filled in the table below								
S No	Amount of any other exemption under section 10 (Rs.)		section 10 (Rs.) (F		Deductible Amount (Rs.)				
10(k).	Break up for 'Am	ount deductible under ar	ny other provision(s) of C	Chapter VIA 'to be filled in	n the table below				
S No		ctible under any other n(s) of Chapter	Gross Amount (Rs.)	Qualifying Amount (Rs.)	Deductible Amount (Rs.)				
Place		BANGALORE							
Date		16-Jul-2021							
Design	nation	SENIOR MANAGER							

Signature of Person Responsible for Deduction of Tax

PAN: ABRPY2492A Name: MANIK PRABHU NANNA

# FORM NO. 12BA

[See rule 26A(2)(b)]

Statement Showing particular 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

7TH FLOOR INSPIRE BKC, BANDRA KURLA COMPLEX, G

BLOCK BKC MAIN ROAD, MAHARASHTRA, MUMBAI,

Maharashtra, 400018

TAN (2)MUMN12719A

(3) TDS Assessment Range of the employer

(4) Name, designation and PAN of employee MANIK PRABHU NANNA

**CLINICAL PROJECT MANAGER** 

ABRPY2492A

Is the employee a director or a person with substantial interest in the company(Where the employer is a company)

No

Income under the head Salaries of the employee (6)(Other than from Perquisites)

20,02,182.00

Financial Year (7)

2020-2021

(8)Valuation of Perquisites

S No	Nature of Perquisite (See rule 3)	Value of Perquisite as per rules (Rs.)	Amount, if any Recovered from the employee (Rs.)	Amount of perquisite chargeable to tax col(3) - col(4) (Rs.)
(1)	(2)	(3)	(4)	(5)
1	Accomodation	0.00	0.00	0.00
2	Cars / Other automotive	0.00	0.00	0.00
3	Sweeper, gardener, watchman or personal attendant	0.00	0.00	0.00
4	Gas, electricity, water	0.00	0.00	0.00
5	Interest free or concessional Loans	0.00	0.00	0.00
6	Holiday expenses	0.00	0.00	0.00
7	Free or concessional travel	0.00	0.00	0.00
8	Free Meals	0.00	0.00	0.00
9	Free Education	0.00	0.00	0.00
10	Gifts, Vouchers etc	0.00	0.00	0.00
11	Credit Card Expenses	0.00	0.00	0.00
12	Club Expenses	0.00	0.00	0.00
13	Use of movable assets by employees	0.00	0.00	0.00
14	Transfer of assets to employees	0.00	0.00	0.00
15	Value of any other benefit / amenity / service / privilege	0.00	0.00	0.00
16	Stock options allotted or transferred by employer being an eligigble startup as referred to in Section 80-IAC	0.00	0.00	0.00
17	Stock options (non-qualified options) other than ESOP above	0.00	0.00	0.00
18	Contribution by employer to fund and scheme (taxable under section 17(2)(vii))	0.00	0.00	0.00

19	Annual accretion of taxable interest/dividend to fund referred to above	0.00	0.00	0.00
20	Other benefits or amenities	0.00	0.00	0.00
21	Total value of perquisites	0.00	0.00	0.00
22	Total value of profits in lieu of salary as per 17(3)			0.00

# (9) Details of tax

(a)	Tax Deducted from salary of the employee under section 192(1)	3,76,176.00
(b)	Tax paid by the employer on behalf of the employee under section 192(1A)	0.00
(c)	Total Tax paid	3,76,176.00

## **DECLARATION BY EMPLOYER**

I, SRIRAM N, son/daughter of A N NAGARAJ working in the capacity of SENIOR MANAGER (designation) do hereby declare on behalf of NOVARTIS HEALTHCARE PRIVATE LIMITED (name of the employer) 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	BANGALORE
Date	16-Jul-2021
Designation	SENIOR MANAGER
Full Name	SRIRAM N

Signature of Person Responsible for Deduction of Tax