

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. USVSWHA	Last updated on 25-Jun-2019
Name and address of the Employer	Name and address of the Employee
NOVARTIS HEALTHCARE PRIVATE LIMITED 4TH FLOOR, SANDOZ HOUSE, DR. ANNIE BESANT ROAD, WORLI, MUMBAI - 400018 Maharashtra +(91)22-24988888 HROPERATIONS.INDIA@NOVARTIS.COM	MANIK PRABHU NANNA H NO 3-45/2, NEAR MAIN X ROAD, NARSAPUR, MEDAK - 502313 Telangana

PAN of the Deductor	TAN of the Deductor	PAN of the Employee	Employee Reference No. provided by the Employer (If available)
AAACN5094N	MUMN12719A	ABRPY2492A	

CIT (TDS)	Assessment Year	Period with the Employer
The Commissioner of Income Tax (TDS) Room No. 900A, 9th Floor, K.G. Mittal Ayurvedic Hospital Building, Charni Road , Mumbai - 400002	2019-20	From 01-Apr-2018 To 31-Mar-2019

Summary of amount paid/credited and tax deducted at source thereon in respect of the employee

Quarter(s)	Receipt Numbers of original quarterly statements of TDS under sub-section (3) of Section 200	Amount paid/credited	Amount of tax deducted (Rs.)	Amount of tax deposited / remitted (Rs.)
Q1	QTEYQPLA	484504.00	85068.00	85068.00
Q2	QTHKCEKF	372704.00	48768.00	48768.00
Q3	QTLBQBBC	381604.00	51546.00	51546.00
Q4	QTPXGIEA	636924.00	129645.00	129645.00
Total (Rs.)		1875736.00	315027.00	315027.00

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)

Sl. No.	Tax Deposited in respect of the deductee (Rs.)	Book Identification Number (BIN)			
		Receipt Numbers of Form No. 24G	DDO serial number in Form no. 24G	Date of transfer voucher (dd/mm/yyyy)	Status of matching with Form 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)

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*
1	52276.00	6910333	07-05-2018	23492	F
2	16396.00	6910333	07-06-2018	20567	F
3	16396.00	6910333	06-07-2018	12582	F
4	15923.00	6910333	07-08-2018	12871	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	15923.00	6910333	07-09-2018	17501	F
6	16922.00	6910333	05-10-2018	13475	F
7	16922.00	6910333	06-11-2018	25338	F
8	16922.00	6910333	06-12-2018	28268	F
9	17702.00	6910333	07-01-2019	28343	F
10	0.00	-	06-02-2019	-	F
11	16922.00	6910333	06-02-2019	26982	F
12	16142.00	6910333	07-03-2019	32071	F
13	0.00	-	07-03-2019	-	F
14	0.00	-	30-04-2019	-	F
15	96581.00	6910333	30-04-2019	49756	F
Total (Rs.)	315027.00				

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. 315027.00 [Rs. Three Lakh Fifteen Thousand and Twenty Seven Only (in words)]** has been deducted and a sum of **Rs. 315027.00 [Rs. Three Lakh Fifteen Thousand and Twenty Seven 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	(Signature of person responsible for deduction of Tax)
Date	04-Jul-2019	
Designation: PAYROLL MANAGER		Full Name:GEETHA SUDHEERKUMAR MENON

Notes:

- Part B (Annexure) of the certificate in Form No.16 shall be issued by the employer.
- 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.
- 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.
- 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 GEETHA SUDHEERKUMAR MENON
Date: 2019.07.05 01:05:54
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FORM NO. 16
PART B

Certificate under Section 203 of the Income-tax Act, 1961 for tax deducted at source on salary

Certificate No. USVSWHA	Last updated on 25-Jun-2019		
Name and address of the Employer	Name and address of the Employee		
NOVARTIS HEALTHCARE PRIVATE LIMITED 4TH FLOOR, SANDOZ HOUSE, DR. ANNIE BESANT ROAD, WORLI, MUMBAI - 400018 Maharashtra +(91)22-24988888 HROPERATIONS.INDIA@NOVARTIS.COM	MANIK PRABHU NANNA H NO 3-45/2, NEAR MAIN X ROAD, NARSAPUR, MEDAK -502313 Telangana		
PAN of the Deductor	TAN of the Deductor	PAN of the Employee	
AAACN5094N	MUMN12719A	ABRPY2492A	
CIT (TDS)	Assessment Year	Period with the Employer	
The Commissioner of Income Tax (TDS) Room No. 900A, 9th Floor, K.G. Mittal Ayurvedic Hospital Building, Charni Road , Mumbai - 400002	2019-20	From 01-Apr-2018	To 31-Mar-2019

Details of Salary Paid and any other income and tax deducted		Rs.	Rs.
1.	Gross Salary		
(a)	Salary as per provisions contained in section 17(1)	1875736.00	
(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		1875736.00
(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)	0.00	
(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)	0.00	

(f)	Amount of any other exemption under section 10 [Note: Break-up to be prepared by employer and issued to the employee, where applicable, before furnishing of Part B to the employee]		
(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)]		0.00
3.	Total amount of salary received from current employer [1(d)-2(h)]		1875736.00
4.	Less: Deductions under section 16		
(a)	Standard deduction under section 16(ia)	40000.00	
(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)]		42400.00
6.	Income chargeable under the head "Salaries" [(3+1(e)-5)]		1833336.00
7.	Add: Any other income reported by the employee under as per section 192 (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)		1833336.00
10.	Deductions under Chapter VI-A		
(a)	Deduction in respect of life insurance premia, contributions to provident fund etc. under section 80C		150000.00
(b)	Deduction in respect of contribution to certain pension funds under section 80CCC		0.00
(c)	Deduction in respect of contribution by taxpayer to pension scheme under section 80CCD (1)		0.00
(d)	Total deduction under section 80C, 80CCC and 80CCD(1)		150000.00
(e)	Deductions in respect of amount paid/deposited to notified pension scheme under section 80CCD (1B)		5000.00

(f)	Deduction in respect of contribution by Employer to pension scheme under section 80CCD (2)	0.00
(g)	Deduction in respect of health insurance premia under section 80D	43634.00
(h)	Deduction in respect of interest on loan taken for higher education under section 80E	0.00
(i)	Total Deduction in respect of donations to certain funds, charitable institutions, etc. under section 80G	0.00
(j)	Deduction in respect of interest on deposits in savings account under section 80TTA	0.00
(k)	Amount deductible under any other provision(s) of Chapter VI-A [Note: Break-up to be prepared by employer and issued to the employee, where applicable, before furnishing of Part B to the employee]	
(l)	Total of amount deductible under any other provision(s) of Chapter VI-A	0.00
11.	Aggregate of deductible amount under Chapter VI-A [10(d)+10(e)+10(f)+10(g)+10(h)+10(i)+10(j)+10(l)]	198634.00
12.	Total taxable income (9-11)	1634702.00
13.	Tax on total income	302911.00
14.	Rebate under section 87A, if applicable	0.00
15.	Surcharge, wherever applicable	0.00
16.	Health and education cess	12116.00
17.	Tax payable (13+15+16-14)	315027.00
18.	Less: Relief under section 89 (attach details)	0.00
19.	Net tax payable (17-18)	315027.00

Verification

I, GEETHA SUDHEERKUMAR MENON, son/daughter of SANKARANKUTTY MENON .Working in the capacity of PAYROLL MANAGER (Designation) 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	(Signature of person responsible for deduction of tax)	
Date	04-Jul-2019	Full Name:	GEETHA SUDHEERKUMAR MENON

Signature valid

Digitally signed by GEETHA SUDHEERKUMAR MENON
Date: 2019.07.05 01:05:55 IST

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.)	Gross Amount (Rs.)	Qualifying Amount (Rs.)	Deductible Amount (Rs.)
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10(k). Break up for 'Amount deductible under any other provision(s) of Chapter VIA 'to be filled in the table below

S No	Amount deductible under any other provision(s) of Chapter	Gross Amount (Rs.)	Qualifying Amount (Rs.)	Deductible Amount (Rs.)
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Place	MUMBAI	Signature of Person Responsible for Deduction of Tax
Date	04-Jul-2019	
Designation	PAYROLL MANAGER	
Full Name	GEETHA S MENON	

Signature valid

Digitally signed by GEETHA
SUDHEER MENON
Date: 2019.07.05 01:05:56
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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
4TH FLOOR, DR. ANNIE BESANT ROAD, SANDOZ HOUSE,
MUMBAI, Maharashtra, 400018
- (2) TAN MUMN12719A
- (3) TDS Assessment Range of the employer
- (4) Name, designation and PAN of employee MANIK PRABHU YERRAVALLI
CLINICAL PROJECT MANAGER
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) 18,33,336.00
- (7) Financial Year 2018-2019
- (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	Accommodation	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 (non-qualified options)	0.00	0.00	0.00
17	Other benefits or amenities	0.00	0.00	0.00
18	Total value of perquisites	0.00	0.00	0.00
19	Total value of profits in lieu of salary as per 17(3)			-

(9) Details of tax

(a) Tax Deducted from salary of the employee under section 192(1)	3,15,027.00
(b) Tax paid by the employer on behalf of the employee under section 192(1A)	0.00
(c) Total Tax paid	3,15,027.00

DECLARATION BY EMPLOYER

I, GEETHA S MENON, son/daughter of SANKARANKUTTY MENON working in the capacity of PAYROLL 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	MUMBAI	Signature of Person Responsible for Deduction of Tax
Date	04-Jul-2019	
Designation	PAYROLL MANAGER	
Full Name	GEETHA S MENON	

Document certified by GEETHA SUDHEER MENON
<GEETHA.MENON@NOVARTIS.COM>

Digitally signed by GEETHA
SUDHEER MENON
Date: 2019.07.05 01:05:58
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