FORM NO. 16

[See rule 31(1)(a)] PART B (Annexure)

Name and address of the Employer		Name and Desig	gnation of the Emplo	yee	
PAN of the Deductor	TAN of the	he Deductor PAN of the Employee		e Employee	
CIT (TDS)	Assessm	Assessment Year		Period	
	, isossanoni rodi		From	То	
	2021	- 22	April-2020	March-2021	

Details of Salary paid and any other income and tax deducted

Gross	Deductible
Amount	Amount

Housing Loan Repayment (Principal)			
Subscription to equity shares or debenture	_		
Contribution to PPF account of Self, Spou			
Subscription of Infrastructure Bonds of NA			
Deposit under Seniour Citizen Saving Sch	eme		
Five year Time Deposit in Post Office	• .		
Contribution to NPS (Max 10% of Basic+D	•		
Total amount u/s 80C, 80CCC and 80 CCD is l	Rs.		
(B) Other sections (e.g. 80E, 80G etc.) under (Chapter VI-A	Gross Amount	Deductible Amount
Health Insurance - Mediclaim			
Expense on treatment of mentally or physic	ically handicapped dependents		
Expenditure on medical treatment of the e	mployee for specified deceases		
Interest on Educational Loan for higher ed			
Payment to Annuity Plan of Pension fund			
Donation to various charitable and other for			
Contribution made to political party / elect	oral trust		
Deduction for person with disability			
Subscription to long term infrastructure B			
Remaining Contribution to NPS (Max Rs.5) 11. Aggregate of deductible amount (10A + 10B)	0,000)		
12. Total Income rounded off to nearest multiple	of ten rupees (9 - 11)		
13. Tax on Total Income	<u> </u>		
14. Less: Rebate for the Income upto 5 Lakhs u/s	s 87 A		
15. Income tax after Rebate (13 - 14)			
16. Health and Education Cess [@ 4% of (15)]			
17. Total Tax Payable (15 + 16)			
18. Less: Relief for arrears of salary u/s. 89(1)			
19. Total Income Tax for the Year			(
	Verification		
I,	, son/daughter of		working
in the capacity of	(designation) do he	ereby certify tha	nt the
information given above is true, complete and co	orrect and is based on the books o	f account, docu	ments, TDS
statements, and other available records.			
Place:			
Date: ((Signature of person responsible for deduction of tax)		
Designation:	Full Name:		