



THE NATIONAL INSTITUTE OF HEALTH AND FAMILY WELFARE
ACCOUNTS SECTION

NIHFW/Acctts./Misc./2018-19

Dated:- 11.10.2021

Subject: Calculation of Income Tax for the Financial Year 2021-2022.

An exercise of review the Income Tax deducted at source is being undertaken for the current financial year. You are requested to furnish the details in the proforma given below supported by the documentary evidence of payments made towards house rent, NSC/LIC/UTI/ Medi-Claim policies, home loan, tuition fee, tax-saving bonds etc., and return this sheet to the undersigned before 12.11.2021, failing which it is presumed that the employee has nothing to produce for the purpose of rebates allowed on recognized investments. Please mention your PAN, it is mandatory for filing the return.

As per Finance Act, 2020, one has to be opting in following options.

- (a) Old Regime; (No change in existing rate of Personal Income Tax).
- (b) New Regime under Section 115-BAC; **(provided he/she does not avail any exemption or deductions except section 80CCD(2)).**

If such intimation is not made by the employee, the employer shall make TDS without considering the provision of section 115BAC of the Act.

Thanking you.


Section Officer (Accounts)

S. No.	Particulars	Amount	To be filled by Accountant
1	Gross Salary		
2	Allowances to the extent u/s 10		
	(a) Conveyance Allowance		
	(b) House Rent Paid (Annual)*		
	(c) Interest Paid on Home Loan		
3	Income from Other Sources (if any)		
4	Rebate & Relief u/s 80C (Max. upto Rs.1,50,000/-)		

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	(d) GPF/NPS		
	(e) PPF/Sukanya Samridhi Account Scheme		
	(f) GIS		
	(g) LIC or other policies (including Jeevan Suraksha)		
	(h) NSC/UTI/PLI or FD (for a minimum period of 5 years)		
	(i) Home Loan Premium		
	(j) Infrastructure Bonds/Mutual Fund(s)		
	(k) Tuition Fees		
	(l) CGHS/Medi-Claim Policies (u/s 80D)		
	(m) Donations (u/s 80G)		
	(n) Contribution to pension scheme (u/s 80CCD(1B))		
	(o) Any Other		
5	Taxable Income		
6	Income+Cess		
7	Tax Deducted at Source		
8	Tax to be deducted		
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*Assesses shall furnish name, address and PAN of his/her landlord(s).

Name of employee with designation : _____

Deptt./Section with intercom No. : _____

PAN : _____

Signature with Date : _____