ICMR – NATIONAL INSTITUTE OF PATHOLOGY SAFDARJANG HOSPITAL CAMPUS, NEW DELHI

Declaration Form for the purpose of Income Tax

for the Financial Year **2023-24-23** (Assessment Year **2024-2025**)

**Emp.ID: NAME: DEPARTMENT:**

**Sr. Citizen: Yes/No DESIGNATION: PAN NO.: Tax Calculation (please tick one option) Old Tax Regime New Tax Regime**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **No.** | **Sections** | **Particulars of Investments/Deduction** | | **Total Amount** |
| 1. | U/S 80 C | **Particular** | **Investment Amount in Rs.** |  |
| PPF/GPF |  |
| LIC (Certify that the policy/policies  is/are paid by self only) |  |
| Sukanya deposit |  |
| GIS/NSC |  |
| Tuition Fee (other than reimbursed  by office) |  |
| NPS (other than deducted by office) |  |
| Post office time deposits |  |
| Repayment of principal amount of housing loan/HBA |  |
| Any other allowed Investment if any, specify |  |
| Additional Deduction under NPS u/s. 80CCD  (upto Rs. 50,000/-) |  |
|  |  |
| (Maximum limit up to Rs. 2,00,000/-). | |
| 2. | U/S 80 D | 1. Medical Insurance Premium, including premium for parents (Max. Limit Rs. 25,000/-) If self or parents are senior citizen then max limit of Rs.50,000/- 2. Payment for Preventive Health Check-up (Max. Limit Rs. 5,000/-)   **Note: (a) Maximum limit of (1) will be reduced to the extent claim in (2) has been availed.**  **(b) Total of (1), (2) and (3) not to exceed Rs. 50,000.** | |  |
| 3. | U/S 80 DD | Maintenance / Treatment of Handicapped dependent or deposit for maintenance of Handicapped  dependent who is person with disability (max. Rs.75,000/- for disability and Rs.1,25,000/- for severe disability 80% and above). | |  |
| 4. | U/S 80 E | Interest on a loan taken for higher education max. 8 years.(no limit). | |  |
| 5. | \*U/S 80 G | Donation should be made only to specified Fund (Prime Minister’s Relief Fund, Chief Minister’s  Relief Fund or Lt. Governor’s Relief Fund). Rebate for any other donation should be claimed directly. | |  |
| 6. | U/S 80 U | Physical Disability (max. Rs.75,000/- for disability and Rs.1,25,000/- for severe disability). | |  |
| 7. | U/S 24 (1) (b) | Interest on Housing Loan up to Rs.2,00,000/- (Rs.3,00,000 for senior citizen) | |  |
| 8. | U/S 10 (13A) | Rent Paid (For HRA exemption, employees should provide self-attested copy of rent  agreement and rent receipts/Bank statement for all months i.e. from April 2022 to March 2023).  **Enclose photocopy of PAN of Landlord where Rent per month is above Rs. 8333/-** | |  |
| 9. | U/S 80EEA | Additional Deduction for Interest on Home Loan | |  |
| 10. | U/S 80 EEB | Deduction for Interest on Loan taken to Buy Electrical Vehicle | |  |
| 11. | U/s. 80GG | Rent paid in excess of 10% of total income for furnished/unfurnished residential accommodation  (subject to maximum of Rs. 5,000 p.m. or 25% of total income, whichever is less) | |  |

1. **Any other income**:
   1. Salary Income (other than NIP, New Delhi) :
   2. Income from House Property (If let out) :
   3. Income from other sources (Honorarium or Professional

income from other Institutes) :

**Total Other Income** :

**13. Tax Credit (please attach self-attested proof)**

{i.e. TDS made by Bank/ employer (other than ICMR)} :

**DECLARATION**

**I hereby declare that the particulars given on pre-page/above are correct and complete in all respect. I may be allowed appropriate tax rebate while calculating my tax liability of Financial Year 2023-24 Assessment Year 2024-25**.

The self-attested documentary proof for claiming the benefits of various savings / investments already made or likely to be made, will be submitted by 31st January 2024, failing which the tax may be recovered from me by nullifying the savings / investments stated in declaration form.

In case of payment/ contribution/ investments, I will produce the original document for verification, whenever it will be asked for.

**Last date of submission of Declaration Form: 10th Nov. 2023**

**Signature of the Employee Date:**