

ALL INDIA INSTITUTE OF MEDICAL SCIENCES, JODHPUR

SAVING PROFORMA (FORM NO. 12BB)

for the year ending 31.03.2020 (A/Y 2020-21)

NAME OF EMPLOYEE		DESIGNATION		DEPARTMENT	
GENDER	(M / F)	SR. CITIZEN (60YRS OR MORE)	(Y /N)	PHONE NO:-	
PAN NO.		HANDICAPPED	(Y / N)	SEVERE DISABILITY	(Y/N)
DATE OF BIRTH		AGE AS ON 31.03.2020		NO. OF CHILDREN	
S.NO	PARTICULARS			AMOUNT	
I.	ANY OTHER INCOME REPORTED BY THE EMPLOYEE UNDER AS PER SECTION 192 (2B)				
(i)	Family Pension				
	Less : Std. Deduction (1/3 rd of Family Pension or Rs. 15000 which ever is least)				
(ii)	Self Pension				
(iii)	Income from Saving Bank Interest				
(iv)	Income from other than Saving Bank Interest (FDR Interest)				
(v)	Income / (Loss) from House Property				
	(a) Rental Income				
	Less : Standard Deduction (30% of Rent)				
	Less : INTEREST ON HOUSING LOAN {U/S 24 B} (Max. 2,00,000/-)				Annexure- " "
v)	Any other Income				
	TOTAL OF OTHER INCOME REPORTED BY THE EMPLOYEE				
II.	ALLOWANCE EXEMPTED U/S 10				
(i)	HOUSE RENT ALLOWANCE PAID DURING F.Y.2019-20				
	Mothly Rent	From (Month)	To (Month)	Total Months	Amount in Rupees
i					
ii					
iii					
	TOTAL RENT PAID				
	If the aggregate rent paid during the financial year exceeds one lakh rupees, provide these details :-				
	Land Lord Name & Address		Land Lord PAN		Annexure- " "
(ii)	UTILIZATION CERTIFICATE FOR RESEARCH PURSUIT ALLOWANCE/ACADEMIC ALLOWANCE				
III.	DEDUCTIONS UNDER CHAPTER VI-A				
(A)	Deduction U/s 80C,80CCC & 80CCD (Maximum 150000/-)				
1	General Provident Fund / C.P.F (if deducted from salary, to be filled by office)				
2	GIS (if deducted from salary, filled by office)				
3	PUBLIC PROVIDENT FUND CONTRIBUTION (SELF/SPOUCE/CHILD)				
5	LIFE INSURANCE PREMIUM (SELF/SPOUCE/CHILD)				
6	POSTAL LIFE INSURANCE (PLI) PREMIUM (SELF/SPOUCE/CHILD)				
7	National Saving Certificate / Scheme (NSC/NSS)				Annexure- " "
8	Interest on NSC / NSS				Annexure- " "
9	APPROVED MUTUAL FUND (eligible for deduction under section 80(c))				
10	Stamp Duty and Registration Fees of HOUSE PROPERTY (Paid in FY 2019-20)				Annexure- " "
11	Tuition Fee paid (for self or any two children for full time education upto any level)				Annexure- " "
12	House Loan(Principal amount paid in F.Y.2019-20)				Annexure- " "
13	Fixed Deposit (FOR 5 years and above)				Annexure- " "
14	Sukanya Samriddhi Account				Annexure- " "
15	Any other saving qualify U/S 80C				Annexure- " "
16	Contribution to Pension Fund (U/S 80CCC)				Annexure- " "
17	New Pension Scheme (Employee Share) [U/S 80CCD(1)] (filled by office)				
(B)	Additional Contribution under NPS (Employee Share) [U/S 80CCD(1B)]			Max. Rs.	Annexure- " "
	50000/-				
(C)	Employer Contribution under NPS [U/S 80CCD(2)] (filled by office)				

(D)	Other deductions (i.e. U/s 80D, 80DD, 80DDB, 80G , 80U etc)	
1	Medical Insurance Premium (U/s 80D)	Annexure- " "
2	Maintenance including Medical Treatment of a Handicapped dependant (U/s 80DD)	Annexure- " "
3	Medical Treatment of Himself or dependant (U/s 80DDB)	Annexure- " "
4	Interest on Loan for Higher Education (U/s 80E) (for self/wife/children)	
5	80EEA (Additional 1,50,000/- for Home Loan)	Annexure- " "
	Self-declaration certificate for u/s 80 EEA dedication	Annexure- " "
6	80EEB (Max. Rs 1.5 Lakh on Loan taken to purchase Electronic Vehicle)	Annexure- " "
	Self-declaration certificate for u/s 80 EEB dedication	Annexure- " "
7	DONATION (U/s 80G) (by CASH donation maximum upto Rs.2000 is eligible for deduction)	
i	Donation – 100% scheme	Annexure- " "
ii	Donation – 50% scheme	Annexure- " "
	TOTAL	
8	Deduction in respect of Rent paid (U/s 80GG) (Max. 60,000/-)	Annexure- " "
9	Saving Bank Interest (U/s 80TTA) (Max. Exemption Rs. 10000/-)	Annexure- " "
10	Interest on deposit (fixed deposit plus saving account) only for Sr. Citizen (60 Yrs or more) (U/s 80TTB) Max exemption Rs.50000/-)	Annexure- " "
11	Totally Blind / Ph.Handicapped (80-U) (Rs.75000 for Disability=>40% & upto79%)	Annexure- " "
12	Any Other Deduction	Annexure- " "

DECLARATION

I further hereby undertake that I have attached the requisite documents only relevant to the Financial Year 2019-20 as proof in support of deductions claimed in the Income Tax. I shall be personally responsible to file the return to the Income Tax Department, as required under the law and shall be liable to face the consequences for the wrong information supplied and income concealed, if any.

Place		(Signature of the employee)
Date		