

**ICMR-National Institute of Traditional Medicine (NITM)  
Belagavi- 590010**

Declaration Form for the purpose of Income Tax for the Financial Year **2022-23**  
(A.Y 2023-2024)

**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 |
|--|----------------|--|--------------------------|--------------|
|  |                | Particular   | Investment Amount in Rs. |              |
| 1.   | U/S 80 C       | 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   |                          |              |
|  |                |  |                          |              |
|  |                |  |                          |              |
| <b>(Maximum limit up to Rs. 1,50,000/-).</b> |                |  |                          |              |
| 2.   | U/S 80 D       | 1) Medical Insurance Premium, including premium for parents (Max. Limit Rs.25,000/-)<br>2) Payment for Preventive Health Check-up (Max. Limit Rs. 5,000/-)<br>3) Amount paid on account of medical expenditure ( <b>Original bills to be submitted. It is advisable to keep photocopy of the same for your own reference.</b> ) incurred on the health of the assessee or any member of his family, who is a senior citizen and no amount has been paid to effect or to keep in force insurance on the health of such person (Max. Limit Rs. 50,000/-)<br><b>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.</b> |                          |              |
| 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. <b>(*Please mention the net qualifying amount other than ICMR-NITM deducted)</b>  |                          |              |
| 6.   | U/S 80 U       | Physical Disability (max. Rs.75,000/- for disability and Rs.1,25,000/- for severe disability).   |                          |              |
| 7.   | U/S 80EEA      | Additional Deduction for Interest on Home Loan   |                          |              |
| 8.   | U/S 80 EEB     | Deduction for Interest on Loan taken to Buy Electrical Vehicle   |                          |              |
| 9.   | U/S 24 (1) (b) | Interest on Housing Loan up to Rs.2,00,000/- (Rs.3,00,000 for senior citizen)  |                          |              |
| 10.  | 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). <b>Enclose photocopy of PAN of Landlord where Rent per month is above Rs. 8333/-</b>  |                          |              |

**11. Any other income:**

- 1) Salary Income (other than ICMR NITM) :
- 2) Income from House Property (If let out) :
- 3) Income from other sources (Honorarium or Professional income from other Institutes) :

**Total Other Income** :

**12. 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 2022-23. (Assessment Year 2023-24)**

The self-attested documentary proof for claiming the benefits of various savings / investments already made or likely to be made, will be submitted by 15<sup>th</sup> December 2022, 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: 15<sup>th</sup> December 2022.**

**Signature of the Employee**