

ICMR – National Institute of Traditional Medicine Belagavi – 590010

File No. IT/2024-25

Dated: 20.09.2024

CIRCULAR

Sub: Submission of Declaration form for the Financial Year 2024-25.

All Officers/staff are hereby informed that Declaration Form to Income Tax Calculation purpose for the financial year 2024-25 is made available on NITM website as well as sent to your official ID. All Officers/Staff of NITM are hereby requested to send duly completed Declaration form with details about Income/Savings/Investments to Accounts Section on or before 26.09.2024.

Further, there are two different options available to Assessee to select whether he/she wish to get calculation done in Old Tax Regime or New Tax Regime (details of Tax Regime enclosed herewith).

It is requested to submit self-attested copies of saving/contributions/investments made by staff (as mentioned in Declaration form) by 10.02.2025. In case, no self-attested copies are received by 10.02.2025, it will be assumed that no saving/investment/contributions are made and also tax will be calculated without considering Investment/Saving declared.

- Sd -
Drawing & Disbursing Officer
For Director
ICMR NITM Belagavi

**ICMR-National Institute of Traditional Medicine
Belagavi- 590010**

Form no. 12BB (see rule 26C)
Declaration Form for the purpose of Income Tax for the **Financial Year 2024-25**
(A.Y 2025-2026)

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	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	
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	
(Maximum limit up to Rs. 1,50,000/-).			
2.	U/S 80 D	1) Medical Insurance Premium, including premium for parents (Max. Limit Rs.25,000/-) 2) Payment for Preventive Health Check-up (Max. Limit Rs. 5,000/-) 3) Amount paid on account of medical expenditure (Original bills to be submitted. It is advisable to keep photocopy of the same for your own reference.) 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/-) 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. (*Please mention the net qualifying amount other than ICMR-NITM deducted)	
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 2024 to March 2025). Enclose photocopy of PAN of Landlord where Rent per month is above Rs. 8333/-	

- 11. Any other income:**
- 1) Salary Income (other than ICMR NITM) :
 - 2) Income from HouseProperty (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 NITM)} :

Signature of the Employee

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 2024-25. (Assessment Year 2025-26)

The self-attested documentary proof for claiming the benefits of various savings / investments already made or likely to be made, will be submitted by 19th September 2024, failing which the tax may be recovered from me by nullifying the savings / investments stated in declaration form.

I hereby state that the claim of deduction shown above is in my name and if it is in joint account then it is declared herewith that the other claimant will not claim it in his/her ITR.

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: 26th September 2024.

Note: Tax (tentative) will be deducted on the basis of above declaration up to January 2025. For February 2025, tax will be deducted as per applicable rates, if details of savings supported with self-attested documentary proof are not submitted by 10th February 2025.

Signature of the Employee