

## FORM IV (A) (Amended-1)

### ANNUAL RETURN OF TDS UNDER SECTION 35 OF THE UTTARAKHAND VAT ACT, 2005

PAN OF THE BUSINESS

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1.	TDAN/TIN of the Deductor/contractee	
2.	Office code of Sector/Range	
3.	Period of Return	
4.	Assessment year	
5.	Name & Address of Deductor/contractee	

### PAYMENT & DEDUCTION DETAILS

	TIN of the contractor/sub-contractor	Name & address of the contractor /sub-contractor	Contract No.& date	Nature of the Contract	Gross value of the contract	Gross amount of the bill of payment	Date of payment	Rate of deduction	Amount of Tax Deducted at Source
(i)									
(ii)									
6.	TOTAL of Gross amount of the bill of the payment (i+ii+.....)								
7.	TOTAL Amount of Tax Deducted at Source (i+ii+.....)								

**Payment of Differential amount of TDS, Interest, late fees (If any)**

	Challan/e-Challan Date	Challan Id. Number(CIN)	Bank's Name, Address	MICR code of Bank	TDS Deposited
(i)					
(ii)					
8.	TOTAL TDS Deposited (i+ii+.....)				
9.	Interest Deposited				
10.	Late fee Deposited				
11.	Grand Total (07+08+09)				
12.	Grand Total (In words)				

**13. Details of utilization of Form-8 (TDS Certificate) received from the office**

Description of forms	Opening Balance	Received during the Assessment Year	Consumed during the Assessment Year	Returned during the Assessment Year	Lost during the Assessment Year	Closing Balance	List of consumed forms to be submitted in the following prescribed Annexure
13- Form-8							Annexure - 001

**Note: Proof of Returned or lost forms to be submitted as annexure.**

14.	Details of due Periodical Composition money, interest & late fee	Annexure 002
15.	Proof of differential amount, interest, late fees (if any) (Annexure no. to be self-allotted in increasing no.)	Annexure - Annexure -

16.	Total no of papers (including returns, annexure, challans excluding "Acknowledgment" submitted)	
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**Declaration**

I \_\_\_\_\_ S/o \_\_\_\_\_ am authorized to sign this return and I do hereby declare and verify that, the information and particulars given in this return are true and complete and nothing has been willfully omitted or wrongly stated.

Sign of Authorized Signatory \_\_\_\_\_

Name of Authorized Signatory \_\_\_\_\_

Father's Name \_\_\_\_\_

Date \_\_\_\_\_

Status of Authorized Signatory in Business \_\_\_\_\_

## **“ACKNOWLEDGEMENT”**

**(Of annual return in form-IV-A)(Amended-1) TDS**

**DEPARTMENT OF COMMERCIAL TAX UTTARAKHAND**

1.	Serial No Of Acknowledgement	
2.	Date Of Acknowledgement	
3.	Office Code of Sector/ Range	
4.	Period Of Return	From To
5.	TDAN/TIN Of The Person/Dealer	
6.	Name and address of the Person/Dealer	
7.	Assessment Year	
8.	TOTAL GROSS AMOUNT OF BILLS OF PAYMENT (06)	
9.	TOTAL AMOUNT DEPOSITED (with annual returns) (11)	
10.	ATE FEE DEPOSITED (with annual returns) (10)	
11.	Total no. of papers (including returns, annexure, challans excluding “Acknowledgment”) submitted (16)	

Signature

(Authorized Signatory)

SEAL, Signature &

Name of Receiving Official