

ii.								
06- Total of gross amount of payment as per bills (i+ii+iii+...) (f)								
07- Total TDS (i+ii+....) (g)								
08- Total Tax due from Contractor (i+ii+....) (h)								

09- Net Tax due from Contractor (08-07)	
10- Refund claim (07-08)	
11- Amount carry forward (07-08)	

Details of utilization of Forms, Stamps received from the office in the prescribed Annexure :

Description of declaration forms/certificates /documents	Op. balance	Recd. during the Assessment year	Consumed during the Assessment year	Returned during the Assessment year	Lost during the Assessment year	Cl. balance	List to be submitted in the following prescribed Annexure
12- Form-16 (STATE)							Annexure – 001
13- Form-C (CENTRAL)							Annexure – 002
14- Other							Annexure – 003

Note-Proof of Returned or lost forms to be submitted as annexure

15- Computation of own Assessment of liability of composition money/tax	Annexure – 004
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16- Details of due periodical tax/composition money, interest, late fees	Annexure – 005
17- Proof of deposit of tax/composition money, interest, late fees, TDS deducted (Annexure no. to be self allotted in increasing number)	Annexure – Annexure – Annexure -
18- Copy of each work contract submitted (copy of each work contract to be allotted separate annexure number)	Annexure – Annexure – Annexure -
19- Copy of each bill of quantity submitted (copy of each bill of quantity to be allotted separate annexure number)	Annexure – Annexure – Annexure -
20-List of Annexure submitted	Annexure – 006
21- Total no. of papers(including return, annexure, challans & other documents excluding “Acknowledgement”)	

Payment of differential Tax/composition money, interest, late fees and other dues(with annual return) Amount :

	A/c Head	Challan Id. Number (CIN) and Date	Bank's Name, Address	Bank's MICR Code	Amount deposited (Rs.)
i.	0040001020100(VAT)				
22-	Tax/composition money deposited			TOTAL (i+ii+-----)	

i.	0040008000100 (Late Fee)				
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23-Late Fee Deposited	TOTAL (i+ii+----)	
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i.	0040008000100(Int.)			
24- INTEREST & OTHER DUES DEPOSITED		TOTAL (i+ii+----)		

25- TOTAL AMOUNT DEPOSITED	(48+49+50+51)	
(In words)		

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.

Signature of Authorized Signatory _____

Name of Authorized Signatory _____

Father's Name _____

Date _____

Status of Authorized Signatory _____

“ACKNOWLEDGEMENT”

{of annual return in form -IV(B) (Amended-1) for works contractors}

DEPARTMENT OF COMMERCIAL TAX UTTARAKHAND

01- Serial No. of Acknowledgement		
02 Date of Acknowledgement		
03-TIN of the work contractor	=(01)	
04-Office code of Sector/Range	=(02)	
05- Period of Return	=(03)	
06-Assessment year	=(04)	
07- Name and Address of work contractor	=(05)	
08- Total of Gross Amount of Payment as per Bills	=(06)	
09- TOTAL TDS	=(07)	
10- Total Amount Deposited	=(25)	
11- LATE FEE DEPOSITED	=(23)	

Signature

SEAL, Signature & Name of Receiving Official

(Authorized Signatory)

Note:

1. Information at SL. No. 01 and 02 shall be generated electronically if return filed online. Otherwise
2. To be submitted in two copies duly filed. One copy to be returned with a SL. No. date, stamp and sign of receiving official.