FORM NO. 26D

[See section 194D and rule 37]

Annual return of deduction of tax from insurance commission under section 206 of the Income-tax, Act 1961, for the year ending 31st March,……………..

1. (a) Tax Deduction Account Number

   (b) Permanent Account Number

2. Details of the person responsible for paying any income by way of remuneration or reward or commission for soliciting or procuring insurance business under section 194D :

   (a) Name /Designation

   (b) Address

   Flat/Door/Block No.

   Name of premises/Building

   Road/Street/Lane

   Area/Locality

   Town/City/District

   State

   Pin Code

© Has address of the person responsible for paying any income by way of remuneration or reward or commission for soliciting or procuring insurance business referred to in section 194D, changed since submitting the last return Tick as applicable Yes ☐ No.☐

3. Payments of income under section 194D made and tax deducted thereon:

Payee	Gross payment made during the year	Total payment on which no tax deducted		Total payment on which tax deducted	Total amount of tax deducted		
		Amount (Rs.)	No. of persons		Income-tax (Rs.)	Surcharge (Rs.)	Total (Rs.)
	(1)	(2)	(3)	(4)	(5)	(6)	(7)
1. Companies							
2. person other than companies							
Total							

4. Details of tax paid to the credit of the Central Government :

Sl. No.	Challan Number	Date of payment	Amount of tax paid	Name and address of the bank
(1)	(2)	(3)	(4)	(5)
		Total		

4. Details of income referred to in section 194D credited/paid during the financial year and of tax deducted at source at the prescribed rates in force :

(a) In the case of income credited/paid to companies:

Sl. No.	Permanent Account Number (PAN)	Name of company	Address of the company	Amount of commission credited /paid, (Rs.)	Date on which amount of commission credited or paid whichever is earlier	Amount of tax deducted (Rs.)	Date on which tax deducted	Date on which tax was paid to the credit of Central Government	Tax deduction Certificate Number	Date of furnishing of tax Deduction Certificate to the company
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)
			Total							

(b) In the case of income credited/paid to person/payee other than companies:

Sl. No.	Permanent Account Number (PAN)	Name of person/ payee	Address of the person/ payee	Amount of commission credited /paid, (Rs.)	Date on which amount of commission credited or paid whichever is earlier	Amount of tax deducted (Rs.)	Date on which tax deducted	Date on which tax was paid to the credit of Central Government	Tax deduction Certificate Number	Date of furnishing of tax Deduction Certificate to the person/ payee
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)
			Total							

4. Details of income, refereed to in section 194D, which has been credited/paid during the year and of tax deducted at source at a lower rate or no tax deducted in accordance with section 197:

(a) In the case of companies:

Sl. No.	Permanent Account Number (PAN)	Name of company	Address of the company	Amount of commission credited /paid, (Rs.)	Date on which amount of commission credited or paid whichever is earlier	Rate of deduction of tax (%)	Amount of tax deducted (Rs.)	Date on which tax deducted	Date on which tax was paid to the credit of Central Government	Assessing Officer's Certificate Reference Number	Tax deduction Certificate Number	Date of furnishing of tax Deduction Certificate to the company
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)
			Total									

(b) In the case of person/payees other than companies:

Sl. No.	Permanent Account Number (PAN)	Name of person/ payee	Address of the person/ payee	Amount of commission credited /paid, (Rs.)	Date on which amount of commission credited or paid whichever is earlier	Rate of deduction of tax (%)	Amount of tax deducted (Rs.)	Date on which tax deducted	Date on which tax was paid to the credit of Central Government	Assessing Officer's Certificate Reference Number	Tax deduction Certificate Number	Date of furnishing of tax Deduction Certificate to the person/ payee
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)
			Total									

Verification

I, …………………………………………………………….., certify that all the particulars furnished above are correct and complete.

Place: *Name and signature of the responsible for deducting tax at source.…………………………………………………….*

Date: *Designation: ………………………….*