Acknowledgement Receipt of Income Tax Forms



(Other Than Income Tax Return)

e-Filing Acknowledgement Number / Quarterly Statement Receipt Number 859528990270925

Date of e-Filing **27-Sep-2025**

Name	: INSTITUTE OF HEALTH SYSTEMS
PAN/TAN	: AAATI0679P
Address	: GROUND FLOOR, SIVANANDA REHAB. HOME CAMPUS, KUKATPALLY, HYDERABAD, TELANGANA, 500072
Form No.	: Form 10B (A.Y. 2023-24 onwards)
Form Description	Audit report under clause (b) of the tenth proviso to clause (23C) of section 10 and sub-clause (ii) of clause (b) of sub-section (1) of section 12A of the Income-tax Act, 1961, in the case of a fund or trust or institution or any university or other educational institution or any hospital or other medical institution
Assessment Year	: 2025-26
Financial Year	N A THE STATE OF T
Month	1 X WENT Y
Quarter	TAX DEPARTME
Filing Type	: Original
Capacity	: Chartered Accountant
Verified By	: 055839

(This is a computer generated Acknowledgement Receipt and needs no signature)

SI No	Attachment Name	Size(bytes)	Hash value of Attachment
1	BS.pdf	249332	0a68968fe6650f2af98daf f7e417179c5777d008e15 9b1ff18da725267df6fdb
2	IE.pdf	252372	862aa1330c4b8cb8c25f9 4ea6c8d56f3268f17c21c c9a6ecf9215108272ab4b 1
3	IE.pdf	252372	862aa1330c4b8cb8c25f9 4ea6c8d56f3268f17c21c

SI No	Attachment Name	Size(bytes)	Hash value of Attachment
			c9a6ecf9215108272ab4b 1
4	BS.pdf	249332	0a68968fe6650f2af98daf f7e417179c5777d008e15 9b1ff18da725267df6fdb

