

INDIAN INCOME TAX RETURN

[For Individuals having Income from Salaries, one house property, other sources (Interest etc.) and having total income upto Rs.50 lakh]
(Refer instructions for eligibility)

Assessment Year

2017 - 18

PART A GENERAL INFORMATION

PAN		Name	Aadhaar Number (12 digit)/Aadhaar Enrolment Id (28 digit) (If eligible for Aadhaar)									
Mobile No.		Address: Flat/Door/Block No.	Name of Premises/Building/Village									
Email Address		Area/locality	Town/City/District	State	Country	Pin code						
Residential Status (Tick) <input checked="" type="checkbox"/> Resident <input type="checkbox"/> Non-Resident <input type="checkbox"/> Resident but Not Ordinarily Resident											Fill only one if you belong to –	
Return filed (Tick)[Please see instruction-] <input type="checkbox"/> On or before due date- u/s139(1), <input type="checkbox"/> Belated- u/s 139(4), <input type="checkbox"/> Revised - u/s 139(5), <input type="checkbox"/> u/s 119(2)(b), or in response to notice u/s <input type="checkbox"/> 139(9)-Defective, <input type="checkbox"/> 142(1), <input type="checkbox"/> 148, <input type="checkbox"/> 153A/153C											<input type="checkbox"/> Govt. <input type="checkbox"/> PSU <input type="checkbox"/> Others	
If revised/defective, then enter Receipt No. and Date of filing original return (DD/MM/YYYY)											/ /	
If filed in response to notice u/s 139(9)/142(1)/148/153A/153C, enter date of such notice											/ /	
Are you governed by Portuguese Civil Code as per section 5A? Tick) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If "YES" fill PAN of the Spouse)												

PART B GROSS TOTAL INCOME

Whole- Rupee (₹) only

B1	Income From Salary /Pension	B1	
B2	Income from One house property Self Occupied <input type="checkbox"/> Let Out <input type="checkbox"/> (If loss, put the figure in negative)	B2 ()	
B3	Income from Other Sources	B3	
B4	Gross Total Income (B1+B2+B3) (If loss, put the figure in negative)	B4()	

PART C – DEDUCTIONS AND TAXABLE TOTAL INCOME(Refer instructions for Deduction limit as per Income-tax Act)

80C		80D		80G		80TTA	
Any Other (Please specify section)							
Total deductions		C1	Taxable Total Income (B4-C1)			C2	

PART D – COMPUTATION OF TAX PAYABLE

D1	Tax payable on total income	D2	Rebate u/s 87A	D3	Tax after Rebate
D4	Cess, on D3	D5	Total Tax and Cess	D6	Relief u/s 89(1)
D7	Interest u/s 234A	D8	234B	D9	234C
D10	Total Tax and Interest(D5+D7+D8+D9 – D6)	D11	Total Taxes Paid		
D12	Amount payable (D10 –D11)(if D10 > D11)	D13	Refund (D11 – D10) (if D11 > D10)		
Exempt Income: For reporting purpose		10 (38)	10(34)	Agricultural Income (≤ Rs.5000)	Others Pls. specify

PART E – OTHER INFORMATION

D14 Details of all Bank Accounts held in India at any time during the previous year (excluding dormant accounts)					
Sl.	IFS Code of the Bank	Name of the Bank	Account Number (of 9 digits or more as per CBS system of the bank)	Cash deposited during 09.11.2016 to 30.12.2016 (if aggregate cash deposits during the period ≥ Rs.2 lakh)	(tick one account <input checked="" type="checkbox"/> for refund)
I					
II					
III					

Schedule IT Details of Advance Tax and Self-Assessment Tax payments

	BSR Code		Date of Deposit (DD/MM/YYYY)		Serial Number of Challan		Tax paid	
	Col (1)	Col (2)	Col (3)	Col (4)	Col (5)	Col (6)	Col (7)	Col (8)
R1								
R2								
R3								
R4								
R5								

Schedule TDS Details of TDS/TCS [As per Form 16/16A/27D issued by Deductor(s)/Employer(s)/Collector(s)]

	TAN of deductor	Name of the Deductor/Collector	Amount which is subject to tax deduction /collection	Deduction/ collection year	Tax Deducted/ collected	Amount out of (5) claimed this Year	Amount claimed in the hands of spouse if section 5A is applicable
	Col (1)	Col (2)	Col (3)	Col (4)	Col (5)	Col (6)	Col (7)
T1							
T2							
T3							

VERIFICATION

I, _____ son/ daughter of _____ solemnly declare that to the best of my knowledge and belief, the information given in the return is correct and complete and in accordance with the provisions of the Income-tax Act, 1961.

Date: _____

Sign: _____

Stamp Receipt No., Seal, Date & Sign of Receiving Official