

Part A-GEN GENERAL

PERSONAL INFORMATION	First name	Middle name	Last name	PAN
	Flat/Door/Block No	Name Of Premises/Building/Village		Status (Tick) <input checked="" type="checkbox"/> Individual <input type="checkbox"/> HUF
	Road/Street/Post Office	Area/locality		Date of Birth (DD/MM/YYYY) (in case of individual) / /
	Town/City/District	State	Pin code	Sex (in case of individual) (Tick) <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female
	Email Address	(STD code)-Phone Number ()		Employer Category (if in employment) (Tick) <input checked="" type="checkbox"/> Govt <input type="checkbox"/> PSU <input type="checkbox"/> Others
FILING STATUS	Designation of Assessing Officer (Ward/Circle)			Return filed under Section [Please see instruction number-9(i)]
	Whether original or Revised return? (Tick) <input checked="" type="checkbox"/> Original <input type="checkbox"/> Revised			
	If revised, then enter Receipt No and Date of filing original return (DD/MM/YYYY)			/ /
	Residential Status (Tick) <input checked="" type="checkbox"/> Resident <input type="checkbox"/> Non-Resident <input type="checkbox"/> Resident but Not Ordinarily Resident			
	Whether this return is being filed by a representative assessee? (Tick) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
	If yes, please furnish following information -			
	(a)	Name of the representative		
(b)	Address of the representative			
(c)	Permanent Account Number (PAN) of the representative			

PART-B

Part B - TI Computation of total income

TOTAL INCOME	1	Salaries (6 of Schedule S)			1
	2	Income from house property (3c of Schedule HP) (enter nil if loss)			2
	3	Profits and gains from business or profession (6vi of Schedule BP) (enter nil if loss)			3
	4	Capital gains			
	a	Short term			
		i	Short-term (u/s 111A) (A5 of Schedule CG)	4ai	
		ii	Short-term (others) (A6 of Schedule CG)	4aaii	
		iii	Total short-term (3ai + 3aaii) (enter nil if loss)	4aiiii	
b	Long-term (B5 of Schedule CG) (enter nil if loss)		4b		
c	Total capital gains (3aiii + 3b)		4c		

Do not write or stamp in this area (Space for bar code)

For Office Use Only

Receipt No

Date

Seal and Signature of receiving official

5	Income from other sources		
	a	from sources other than from owning race horses (3 of Schedule OS) (enter nil if loss)	5a
	b	from owning race horses (4c of Schedule OS) (enter nil if loss)	5b
c	Total (a + b)		5c
6	Total (1+2+3+4c+5c)		6
7	Losses of current year set off against 6 (total of 2vii,3vii and 4vii of Schedule CYLA)		7
8	Balance after set off current year losses (6-7) (also total of column 5 of Schedule CYLA)		8
9	Brought forward losses set off against 8 (2vii of Schedule BFLA)		9
10	Gross Total income (8-9)(also 3viii of Schedule BFLA)		10
11	Deductions under Chapter VI-A (o of Schedule VIA)		11
12	Total income		12
13	Net agricultural income/ any other income for rate purpose (4 of Schedule EI)		13
14	'Aggregate income' (12+ 13)		14
15	Losses of current year to be carried forward (xi of Schedule CFL)		15

Part B - TTI Computation of tax liability on total income

COMPUTATION OF TAX LIABILITY	1	Tax payable on total income		
	a	Tax at normal rates	1a	
	b	Tax at special rates (11 of Schedule SI)	1b	
	c	Tax Payable on Total Income (1a + 1b)		1c
	2	Surcharge on 1c		2
	3	Education Cess on (1c + 2)		3
	4	Gross tax liability (1c+ 2 + 3)		4
	5	Tax relief		
	a	Section 89	5a	
	b	Section 90	5b	
c	Section 91	5c		
d	Total (5a + 5b+5c)		5d	
6	Net tax liability (4 – 5d)		6	
7	Interest payable			
a	For default in furnishing the return (section 234A)	7a		
b	For default in payment of advance tax (section 234B)	7b		
c	For deferment of advance tax (section 234C)	7c		
d	Total Interest Payable (7a+7b+7c)		7d	
8	Aggregate liability (6 + 7d)		8	
TAXES PAID	9	Taxes Paid		
	a	Advance Tax (from Schedule-IT)	9a	
	b	TDS (total of column 7 of Schedule-TDS1 and column 7 of Schedule-TDS2)	9b	
	c	Self Assessment Tax(from Schedule-IT)	9c	
d	Total Taxes Paid (9a+9b+9c)		9d	
10	Amount payable (Enter if 8 is greater than 9d, else enter 0)		10	
REFUND	11	Refund (If 9d is greater than 8, also give Bank Account details below)		11
	12	Enter your bank account number (mandatory in case of refund)		
	13	Do you want your refund by <input type="checkbox"/> cheque, or <input type="checkbox"/> deposited directly into your bank account? (tick as applicable <input checked="" type="checkbox"/>)		
	14	In case of direct deposit to your bank account give additional details		
	MICR Code		Type of Account (tick as applicable <input checked="" type="checkbox"/> Savings <input type="checkbox"/> Current	

15 E-filing Acknowledgement Number Date(DD/MM/YYYY) / /

VERIFICATION

I, _____ son/ daughter of _____ solemnly declare that to the best of my knowledge and belief, the information given in the return and schedules thereto is correct and complete and that the amount of total income and other particulars shown therein are truly stated and are in accordance with the provisions of the Income-tax Act, 1961, in respect of income chargeable to Income-tax for the previous year relevant to the Assessment Year 2007-2008.

Place

Date

Sign here →

16 If the return has been prepared by a Tax Return Preparer (TRP) give further details below:

Identification No. of TRP	Name of TRP	Counter Signature of TRP
If TRP is entitled for any reimbursement from the Government, amount thereof		17

Schedule S Details of Income from Salary

SALARIES	Name of Employer		PAN of Employer (optional)		
	Address of employer		Town/City	State	Pin code
	1	Salary (Excluding all allowances, perquisites & profit in lieu of salary)			1
	2	Allowances exempt under section 10	2		
3	Allowances not exempt			3	
4	Value of perquisites			4	
5	Profits in lieu of salary			5	
6	Income chargeable under the Head 'Salaries' (1+3+4+5)			6	

Schedule HP Details of Income from House Property

HOUSE PROPERTY	1	Address of property 1		Town/ City	State	PIN Code	
		<i>(Tick)</i> <input checked="" type="checkbox"/> if let out <input type="checkbox"/>		Name of Tenant		PAN of Tenant (optional)	
		a	Annual lettable value/ rent received or receivable (higher if let out for whole of the year, lower if let out for part of the year)			1a	
		b	The amount of rent which cannot be realized		1b		
		c	Tax paid to local authorities		1c		
		d	Total (1b + 1c)		1d		
		e	Balance (1a – 1d)			1e	
		f	30% of 1e		1f		
		g	Interest payable on borrowed capital		1g		
		h	Total (1f + 1g)			1h	
		i	Income from house property 1 (1e – 1h)			1i	
	2	Address of property 2		Town/ City	State	PIN Code	
		<i>(Tick)</i> <input checked="" type="checkbox"/> if let out <input type="checkbox"/>		Name of Tenant		PAN of Tenant (optional)	
		a	Annual lettable value/ rent received or receivable (higher if let out for whole of the year, lower if let out for part of the year)			2a	
		b	The amount of rent which cannot be realized		2b		
	c	Tax paid to local authorities		2c			
	d	Total (2b + 2c)		2d			
	e	Balance (2a – 2d)			2e		
	f	30% of 2e		2f			
	g	Interest payable on borrowed capital		2g			
	h	Total (2f + 2g)			2h		
	i	Income from house property 2 (2e – 2h)			2i		
3	Income under the head "Income from house property"						
	a	Rent of earlier years realized under section 25A/AA			3a		
	b	Arrears of rent received during the year under section 25B after deducting 30%			3b		
	c	Total (3a + 3b + 1i + 2i)			3c		

NOTE ▶ Please include the income of the specified persons referred to in Schedule SPI while computing the income under this head

Schedule IF

Information regarding partnership firms in which you are partner

FIRMS IN WHICH PARTNER	Number of firms in which you are partner						Capital balance on 31 st March in the firm
	Firm No	Name of the Firm	PAN of the firm	Percentage Share in the profit of the firm	Amount of share in the profit		
					i	ii	
1	1						
2	2						
3	3						
4	4						
5	5						
6	Total						

Schedule BP

Income under the head 'Profit and Gains from Business or Profession' (Income from firms in which you are partner)

INCOME FROM FIRMS	Sl. No.	Firm No. (From Schedule-IF)	Salary, bonus, commission or remuneration received from the firm	Interest received from the firm on the capital	Total ii + iii	Expenses in relation to iv	Net Income iv - v
		i	ii	iii	iv	v	vi
	1	1					
2	2						
3	3						
4	4						
5	5						
6	Total						

NOTE

Please include the income of the specified persons referred to in Schedule SPI while computing the income under this head

Schedule CG

Capital Gains

CAPITAL GAINS	A Short-term capital gain		
	1	From assets in case of non-resident to which first proviso to section 48 applicable	1
	2	From other assets	
		a Full value of consideration	2a
		b Deductions under section 48	
		i Cost of acquisition	bi
		ii Cost of Improvement	bii
		iii Expenditure on transfer	biii
		iv Total (i + ii + iii)	biv
		c Balance (3a – biv)	2c
	d Loss, if any, to be ignored under section 94(7) or 94(8)	2d	
	e Exemption under section 54/54B/54D/54EC/54F	2e	
	f Short-term capital gain (2c – 2d – 2e)	2f	
3	Amount deemed to be short term capital gains under sections 54/54B/54D/54EC/54ED/54F	3	
4	Total short term capital gain (1 + 2f +3 +4)	4	
5	Short term capital gain under section 111A included in 4	A5	
6	Short term capital gain other than referred to in section 111A (4 – 5)	A6	
B Long term capital gain			
1	Asset in case of non-resident to which first proviso to section 48 applicable	1	
2	Other assets where proviso to section 112(1) not applicable		
	a Full value of consideration	2a	
	b Deductions under section 48		
	i Cost of acquisition after indexation	bi	
	ii Cost of improvement after indexation	bii	
	iii Expenditure on transfer	biii	
	iv Total (bi + bii +biii)	biv	
	c Balance (2a – biv)	2c	
	d Deduction under sections 54/54B/54D/54EC/54F	2d	
	e Net balance (2c – 2d)	2e	
3	Other assets where proviso to section 112(1) is applicable		
	a Full value of consideration	3a	

			b Deductions under section 48				
			i	Cost of acquisition without indexation	bi		
			ii	Cost of improvement without indexation	bii		
			iii	Expenditure on transfer	biii		
			iv	Total (bi + bii + biii)	biv		
			c	Balance (3a – biv)	3c		
			d	Deduction under sections 54/54B/54D/54EC/54F	3d		
			e	Net balance		3e	
	4	Amount deemed to be long term capital gains under sections 54/54B/54D/54EC/54ED/54F				4	
	5	Total long term capital gain (1 + 2e + 3e + 4)				B5	
	C	Income chargeable under the head “CAPITAL GAINS” (A6 + B5)				C	
	D	Information about accrual/receipt of capital gain					
			Date	Upto 15/9 (i)	16/9 to 15/12 (ii)	16/12 to 15/3 (iii)	16/3 to 31/3 (iv)
	1		Long- term				
	2		Short-term				

NOTE ► Please include the income of the specified persons referred to in Schedule SPI while computing the income under this head

Schedule OS Income from other sources

OTHER SOURCES	1	Income other than from owning race horse(s):-				
		a	Dividends, Gross	1a		
		b	Interest, Gross	1b		
		c	Rental income from machinery, plants, buildings,	1c		
		d	Others, Gross	1d		
		e	Total (1a + 1b + 1c + 1d)			1e
		f	Deductions under section 57:-			
			i	Expenses	fi	
			ii	Depreciation	fii	
			iii	Total	fiii	
	g	Balance (1e – fiii)			1g	
	2	Winnings from lotteries, crossword puzzles, races, etc.				2
	3	Income from other sources (other than from owning race horses) (1g + 2)				3
	4	Income from owning and maintaining race horses				
		a	Receipts	4a		
		b	Deductions under section 57 in relation to (4)	4b		
		c	Balance (4a – 4b)		4c	
	5	Income chargeable under the head “Income from other sources” (1g + 2 + 3 + 4c)				5

NOTE ► Please include the income of the specified persons referred to in Schedule SPI while computing the income under this head

Schedule CYLA Details of Income after set-off of current years losses

CURRENT YEAR LOSS ADJUSTMENT	Sl.No	Head/ Source of Income	Income of current year (Fill this column only if income is zero or positive)	House property loss of the current year set off		Business Loss		Other sources loss (other than loss from race horses) of the current year set off		Current year's Income remaining after set off
				Total loss (3c of Schedule – HP)		Total loss (6vi of Schedule- BP)		Total loss (3 of Schedule- OS)		
				1	2	3	4	5=1-2-3-4		
	i	Salaries								
	ii	House property								
	iii	Business or profession								
	iv	Short-term capital gain								
	v	Long term capital gain								
	vi	Other sources (incl profit from owning race horses)								
	vii	Total loss set off								
	viii	Loss remaining after set-off								

Schedule BFLA Details of Income after Set off of Brought Forward Losses of earlier years

BROUGHT FORWARD LOSS ADJUSTMENT	Sl. No.	Head/ Source of Income	Income after set off, if any, of current year's losses as per 4 of Schedule CYLA)	Brought forward loss set off	Current year's income remaining after set off
	1			2	3
	i	Salaries			
ii	House property				
iii	Business or profession				
iv	Short-term capital gain				
v	Long-term capital gain				
vi	Other sources (including profit from owning race horses)				
vii	Total of brought forward loss set off				
viii	Current year's income remaining after set off Total (i3 + ii3 + iii3 + iv3 + v3+vi3)				

Schedule CFL Details of Losses to be carried forward to future years

CARRY FORWARD OF LOSS	Sl. No.	Assessment Year	Date of Filing (DD/MM/YYYY)	House property loss	Business or profession	Short-term capital loss	Long-term Capital loss	Other sources loss (other than loss from race horses)	Other sources loss (from owning race horses)	
	i	1999-00								
	ii	2000-01								
	iii	2001-02								
	iv	2002-03								
	v	2003-04								
	vi	2004-05								
	vii	2005-06								
	viii	2006-07								
	ix	Total of earlier year losses								
	x	Adjustment of above losses in Schedule BFLA								
	xi	2007-08 (Current year losses)								
	xii	Total loss Carried Forward to future years								

Schedule VIA Deductions under Chapter VI-A (Section)

TOTAL DEDUCTIONS	a	80C	h	80G	
	b	80CCC	i	80GG	
	c	80CCD	j	80GGA	
	d	80D	k	80GGC	
	e	80DD	l	80QQB	
	f	80DDB	m	80RRB	
	g	80E	n	80U	
	o	Total deductions (total of a to n)			

Schedule SPI Income of specified persons(spouse, minor child etc) includable in income of the assessee

Sl No	Name of person	PAN of person (optional)	Relationship	Nature of Income	Amount (Rs)
1					
2					

Schedule SI Income chargeable to Income tax at special rates IB [Please see instruction Number-9(iii) for section code and rate of tax]

SPECIAL RATE	Sl No	Section code	<input checked="" type="checkbox"/> Special rate (%)	Income i	Tax thereon ii	Sl No	Section code	<input checked="" type="checkbox"/> Special rate (%)	Income i	Tax thereon ii	
	1		<input type="checkbox"/>				6		<input type="checkbox"/>		
	2		<input type="checkbox"/>				7		<input type="checkbox"/>		
	3		<input type="checkbox"/>				8		<input type="checkbox"/>		
	4		<input type="checkbox"/>				9		<input type="checkbox"/>		

5	<input type="checkbox"/>			10	<input type="checkbox"/>		
11	Total (1ii to 10 ii)						

Schedule EI Details of Exempt Income (Income not to be included in Total Income)

EXEMPT INCOME	1	Interest income	1
	2	Dividend income	2
	3	Long-term capital gains on which Securities Transaction Tax is paid	3
	4	Net Agriculture income /any other income for rate purpose	4
	5	Share in the profit of firm/AOP etc.	5
	6	Others	6
	7	Total (1+2+3+4+5+6)	7

Schedule AIR Other Information (Information relating to Annual Information Return) [Please see instruction number-9(ii) for code]

Sl	Code of Transaction	<input type="checkbox"/>	Amount (Rs)	Sl	Code of Transaction	<input type="checkbox"/>	Amount (Rs)
1	001	<input type="checkbox"/>		5	005	<input type="checkbox"/>	
2	002	<input type="checkbox"/>		6	006	<input type="checkbox"/>	
3	003	<input type="checkbox"/>		7	007	<input type="checkbox"/>	
4	004	<input type="checkbox"/>		8	008	<input type="checkbox"/>	

Schedule IT Details of Advance Tax and Self Assessment Tax Payments of Income-tax

TAX PAYMENTS	Sl No	Name of Bank & Branch	BSR Code	Date of Deposit (DD/MM/YYYY)	Serial Number of Challan	Amount (Rs)
	i					
	ii					
	iii					
	iv					
	v					

NOTE ▶ Enter the totals of Advance tax and Self Assessment tax in Sl No. 9a & 9c of PartB-TTI

Schedule TDS1 Details of Tax Deducted at Source from Salary [As per Form 16 issued by Employer(s)]

TDS ON SALARY	Sl No	Tax Deduction Account Number (TAN) of the Employer	Name and address of the Employer	Income chargeable under Salaries	Deduction under Chapter VI-A	Tax payable (incl. surch. and edn. cess)	Total tax deposited	Tax payable/refundable
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
	i							
ii								

Schedule TDS2 Details of Tax Deducted at Source on Income [As per Form 16 A issued by Deductor(s)]

TDS ON OTHER INCOME	Sl No	Tax Deduction Account Number (TAN) of the Deductor	Name and address of the Deductor	Amount Paid	Date of Payment / Credit	Total tax deposited	Amount out of (6) claimed for this year
	(1)	(2)	(3)	(4)	(5)	(6)	(7)
	i						
ii							
iii							

NOTE ▶ Please enter total of column 7 of Schedule-TDS1 and column 7 of Schedule-TDS2 in 9(b) of PartB-TTI