

ITR – V	ACKNOWLEDGEMENT	AY 2019-20
Received with thanks from INTERNATIONAL SRI KRISHNA MANDIR AMALAPURAM TRUST a return of income in ITR No. 7 for assessment year 2019-20, having the following particulars		
(A1) First name	(A2) Middle name	(A3) Last name
INTERNATIONAL SRI KRISHNA MANDIR AMALAPURAM TRUST		AABTI 5779 D
(A5) Date of Formation (DD/MM/YYYY)	(A6) Flat/Door/Building	(A7) Name of Premises/Building/Village
04/10/2017	1-26	Brahmin Street,
(A8) Road/Street	(A9) Area/locality	(A10) Town/City/District
Irusumanda PO	Ambajipeta Mandal	Irusumanda
(A11) State	Country	(A12) Pin code
Andhra pradesh	India	533 239
(A13) Fill only one: Filed- <input checked="" type="checkbox"/> On or Before due date - 139(1) <input type="checkbox"/> After due date –139(4) <input type="checkbox"/> Revised Return – 139(5) 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"/> u/s 119(2)(b) <input type="checkbox"/> 92CD		
COMPUTATION OF INCOME AND TAX RETURN		Whole-Rupee (₹) only.
B1 Gross Total Income	B1 ()	NIL
B2 Deductions under Chapter- VI-A	B2	NIL
B3 Total Income	B3 ()	NIL
B4 Current Loss, if any	B4 (-)	NIL
B5 Net Tax Payable	B5	NIL
B6 Interest and fee Payable	B6	NIL
B7 Total Tax, Interest and fee Payable	B7	NIL
B8 Total Advance Tax Paid	B8	NIL
B9 Total Self-Assessment Tax Paid	B9	NIL
B10 Total TDS deducted	B10	NIL
B11 Total TCS collected	B11	NIL
B12 Total Prepaid Taxes (B8+B9+B10+B11)	B12	NIL
B13 Tax Payable (B7-B12, If B7 > B12)	B13	NIL
B14 Refund (B12-B7, If B12 > B7)	B14	NIL
B15 Exempt Income Agriculture	NIL	
	+	B15
Others	NIL	NIL
FOR OFFICIAL USE ONLY		SIGN HERE
➔ STAMP RECEIPT NO. HERE	SEAL, DATE AND SIGNATURE OF RECEIVING OFFICIAL.	

FORM	ITR-7	INDIAN INCOME TAX RETURN		Assessment Year	
		[For persons including companies required to furnish return under sections 139(4A) or 139(4B) or 139(4C) or 139(4D) only] (Please see rule 12 of the Income tax Rules 1962)		2 0 1 9 - 2 0	

Part A-GEN

Name (as mentioned in deed of creation/ establishing/ incorporation/ formation) INTERNATIONAL SRI KRISHNA MANDIR AMALAPURAM TRUST			PAN AABTI 5779 D						
Flat/Door/Block No 1-26		Name Of Premises/Building/Village Brahmin Street,		Date of formation/incorporation 04/10/2017					
Road/Street/Post Office Irumumanda PO		Area/Locality Ambajipeta Mandal		Status: 5 Sub Status: 5v					
Town/City/District Irumumanda		State Andhra pradesh		Pin code/Zip code 533 239					
Office Phone Number with STD code/Mobile No.1 () - / 91 7702010653			Fax Number/Mobile No. 2						
Email Address 1: vsm31214@gmail.com			Email Address 2:						
Whether any project/institution is run by the assessee? (Yes/No) If Yes, then please furnish the details:					<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center; width: 20%;">Yes</td> <td style="text-align: center; width: 20%;"><input checked="" type="checkbox"/></td> <td style="text-align: center; width: 20%;">No</td> <td style="text-align: center; width: 20%;"><input type="checkbox"/></td> </tr> </table>	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>						
Details of the projects/institutions run by you									
Sl.	Name of the project/institution	Nature of activity	Classification						
1	INTERNATIONAL SRI KRISHNA MANDIR AMALAPURAM TRUST	Charitable & Religious	Religious						
Details of registration or approval under the Income-tax Act (Mandatory, if required to be registered)									
Sl.	Section under which registered or approved	Date of registration or approval	Approval/ Notification/ Registration No.	Approving/ registering Authority					
1	12A/12AA	29/10/2018	HYD/12AA/2018-19/A/10308	CIT(EXEMPTION), HYD					
Details of registration or approval under any law other than Income-tax Act									
Law under which registered		Date of registration or approval	Approval/ Notification/ Registration No.	Approving/ registering Authority					
(a) Return filed u/s <input checked="" type="checkbox"/> 139(1)-On or Before due date, <input type="checkbox"/> 139(4)-After due date, <input type="checkbox"/> 139(5)-Revised Return, <input type="checkbox"/> 92CD-Modified return, <input type="checkbox"/> 119(2)(b)-after condonation of delay. Or filed in response to notice u/s <input type="checkbox"/> 139(9), <input type="checkbox"/> 142(1), <input type="checkbox"/> 148, <input type="checkbox"/> 153A <input type="checkbox"/> 153C									
(b) Return furnished under section <input checked="" type="checkbox"/> 139(4A) <input type="checkbox"/> 139(4B) <input type="checkbox"/> 139(4C) <input type="checkbox"/> 139(4D) <input type="checkbox"/> Others									
Please specify the section under which the exemption is claimed 11									
(c) If revised/ defective/modified, then enter Receipt No. and Date of filing original return (DD/MM/YYYY)									
(d) If filed, in response to a notice u/s 139(9)/142(1)/148/153A/153C/119(2)(b) or u/s 92CD enter Unique No.									
(e) If filed, in response to a notice u/s 139(9)/142(1)/148/153A/153C or order u/s 119(2)(b), enter date of such notice/order, or if filed u/s 92CD enter date of advance pricing agreement									
(f) Residential Status? (Tick) <input checked="" type="checkbox"/> Resident <input type="checkbox"/> Non-Resident									
(g) Whether any income included in total income for which claim under section 90/90A/91 has been made? [applicable in the case of resident] [if yes, ensure to fill Schedule FSI and Schedule TR]									
<div style="display: flex; justify-content: flex-end;"> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No </div>									
(h) Whether this return is being filed by a representative assessee ? (Tick) <input checked="" type="checkbox"/>									
If yes, please furnish following information –									
(1) Name of the representative									
(2) Capacity of the Representative									
(3) Address of the representative									
(4) Permanent Account Number (PAN) of the representative									

For Office Use Only

For Office Use Only

Receipt No.

Date

Seal and Signature of receiving official

(i)	Whether you are Partner in a firm? (Tick) <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, please furnish following information	
	Name of Firm	PAN

(j) Whether you have held unlisted equity shares at any time during the previous year? (Tick) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, please furnish following information in respect of equity shares												
Name of company	PAN	Opening balance		Shares acquired during the year					Shares transferred during the year		Closing balance	
		No. of shares	Cost of acquisition	No. of shares	Date of subscription / purchase	Face value per share	Issue price per share (in case of fresh issue)	Purchase price per share (in case of purchase from existing shareholder)	No. of shares	Sale consideration	No. of shares	Cost of acquisition
1	2	3	4	5	6	7	8	9	10	11	12	13

OTHER DETAILS	A	i	Where, in any of the projects/institutions run by you, one of the charitable purposes is advancement of any other object of general public utility then,-									
			a	i	whether there is any activity in the nature of trade, commerce or business referred to in proviso to section 2(15)?						<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
					If yes, then percentage of receipt from such activity vis-à-vis total receipts							
			b	i	whether there is any activity of rendering any service in relation to any trade, commerce or business for any consideration as referred to in proviso to section 2(15)?						<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
					If yes, then percentage of receipt from such activity vis-à-vis total receipts							
	ii	If 'a' or 'b' is YES, the aggregate annual receipts from such activities in respect of that institution										
		Sl. Name of the project/Institution								Amount of aggregate annual receipts from such activities		
	B	i	Whether approval obtained u/s 80G?									
			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No									
If yes, then enter Approval No.												
C	i	Is there any change in the objects/activities during the Year on the basis of which approval/registration was granted?										
		If yes, please furnish following information:-										
		a date of such change (DD/MM/YYYY) whether an application for fresh registration has been made in the prescribed form and manner within the stipulated period of thirty days as per Clause (ab) of sub-section (1) of section 12A c whether fresh registration has been granted under section 12AA d date of such fresh registration (DD/MM/YYYY)										
D	i	Whether registered under Foreign Contribution (Regulation) Act, 2010 (FCRA)?										
		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No										
		If yes, then enter Registration No.										
E	i	Whether a business trust registered with SEBI?										
		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No										
		If yes, then enter Registration No.										
F	i	Whether registered under Foreign Contribution (Regulation) Act, 2010 (FCRA)?										
		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No										
		If yes, then enter Registration No.										
G	i	Whether a business trust registered with SEBI?										
		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No										
		If yes, then enter Registration No.										
H	i	Whether a business trust registered with SEBI?										
		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No										
		If yes, then enter Registration No.										
Is this your first return?												
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No												
Are you liable for audit under the Income-tax Act?(Tick) <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No, If yes, furnish following information-												
Section under which you are liable for audit (specify section). Please mention date of audit report. (DD/MM/YY) (see Instruction 6(ii))												

	Section	Date of audit(DD/MM/YYYY)
a	Name of the auditor signing the tax audit report	
b	Membership No. of the auditor	
c	Name of the auditor (proprietorship/ firm)	
d	Permanent Account Number (PAN) of the proprietorship/ firm	
e	Date of audit report	
f	Date of furnishing of the audit report (DD/MM/YYYY).	

I	If liable to audit under any Act other than the Income-tax Act, mention the Act, section and date of furnishing the audit report?					
	Act and Section		Date of furnishing the audit report			
J	Particulars of persons who were members in the AOP on 31 st day of March, 2019 (to be filled by venture capital fund/investment fund)					
	S. No	Name and Address	Percentage of share (if determinate)	PAN	Aadhaar Number/ Enrolment Id (if eligible for Aadhaar)	Status
	(1)	(2)	(3)	(4)	(5)	(6)

SCHEDULES TO THE RETURN FORM (FILL AS APPLICABLE)

Schedule I		Details of amounts accumulated / set apart within the meaning of section 11(2)) or in terms of third proviso to section 10(23C)					
Year of accumulation (F.Yr.)	Amount accumulated in the year of accumulation	Purpose of accumulation	Amount applied for charitable/ religious purposes upto the beginning of the previous year	Amount invested or deposited in the modes specified in section 11(5)	Amounts applied for charitable or religious purpose during the previous year	Balance amount available for application (7) = (2) - (4) - (6)	Amount deemed to be income within meaning of sub-section (3) of section 11
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
Total	0		0	0	0	0	0

Schedule J		Statement showing the funds and investments as on the last day of the previous year [to be filled if registered under section 12A/12AA or approved under section 10(23C)(iv)/10(23C)(v)/10(23C)(vi)/10(23C)(via)/10(21)]							
A	i	Balance in the corpus fund as on the last day of the previous year					Rs	1,008	
	ii	Balance in the non-corpus fund as on the last day of the previous year					Rs	17,75,116	
B	Details of investment/deposits made under section 11(5)								
SI No	Mode of investment as per section 11(5)			Date of investment	Date of maturity	Amount of investment	Maturity amount		
(1)	(2)			(3)	(4)	(5)	(6)		
	Total								
C	Investment held at any time during the previous year (s) in concern (s) in which persons referred to in section 13(3) have a substantial interest								
SI No	Name and address of the concern	Where the concern is a company (tick as applicable <input checked="" type="checkbox"/>)		Number of shares held	Class of shares held	Nominal value of the investment	Income from the investment	Whether the amount in col (6) exceeds 5 percent of the capital of the concern during the previous year (tick as applicable <input checked="" type="checkbox"/>)	
(1)	(2)	(3)		(4)	(5)	(6)	(7)	(8)	
		<input type="checkbox"/> Yes <input type="checkbox"/> No						<input type="checkbox"/> Yes <input type="checkbox"/> No	

	Total							
D	Other investments as on the last day of the previous year							
Sl No	Name and address of the concern		Whether the concern is a company (tick as applicable <input checked="" type="checkbox"/>)			Class of shares held	Number of shares held	Nominal value of investment
(1)	(2)		(3)			(4)	(5)	(6)
				Yes		No		
	Total							
E	Voluntary contributions/donations received in kind but not converted into investments in the specified modes u/s 11(5) within the time provided							
Sl.No	Name and address of the donor	Value of contribution/donation		Value of contribution applied towards objective		Amount out of (3) invested in modes prescribed under section 11(5)		Balance to be treated as income under section 11(3)
(1)	(2)	(3)		(4)		(5)		(6)
iv	Total							

Schedule K	Statement of particulars regarding the Author(s) / Founder(s) / Trustee(s) / Manager(s), etc., of the Trust or Institution (to be mandatorily filled in by all persons filing ITR-7)		
A	Name(s) of author(s) / founder(s) / Settlor(s) and address(es), if alive		
Sl.	Name and address	PAN	Aadhaar Number/ Enrolment Id (if available)
B	Name(s) of the person(s) who was / were trustee(s) / manager(s) during the previous year(s)		
Sl.	Name and address	PAN	Aadhaar Number/ Enrolment Id (if available)
1	Mattaparthi Srinivaas, 6-47, Kothula Thota, Vanapalli, Kothapeta Mandal, East Godavari Dt - 533228		461483254243
2	Prakash Namasivayam, 37, First Floor, Fifth Cross, Jawahar Nagar, Reddiarpalayam, Pudhucherry - 605010		289772699089
3	Mattaparthi Parameswari, 6-47, Kothula Thota, Vanapalli, Kothapeta Mandal, East Godavari Dt - 533228		893523578480
C	Name(s) of the person(s) who has / have made substantial contribution to the trust / institution in terms of section 13(3)(b)		
Sl.	Name and address	PAN	Aadhaar Number/ Enrolment Id (if available)
D	Name(s) of relative(s) of author(s), founder(s), trustee(s), manager(s), and substantial contributor(s) and where any such author, founder, trustee, manager or substantial contributor is a Hindu undivided family, also the names of the members of the family and their relatives		
Sl.	Name and address	PAN	Aadhaar Number/ Enrolment Id (if available)

Schedule LA	Political Party	
1	Whether books of account were maintained? (tick as applicable <input checked="" type="checkbox"/>)	<input type="checkbox"/> Yes <input type="checkbox"/> No
2	a Whether any voluntary contribution from any person in excess of twenty thousand rupees was received during the year ? (tick as applicable <input checked="" type="checkbox"/>)	<input type="checkbox"/> Yes <input type="checkbox"/> No
	b If yes, whether record of each voluntary contribution (other than contributions by way of electoral bonds) in excess of twenty thousand rupees (including name and address of the person who has made such contribution) were maintained? (tick as applicable <input checked="" type="checkbox"/>)	<input type="checkbox"/> Yes <input type="checkbox"/> No
3	Whether the accounts have been audited? (tick as applicable <input checked="" type="checkbox"/>)	<input type="checkbox"/> Yes <input type="checkbox"/> No
	If yes, furnish the following information:-	
	a Date of furnishing of the audit report (DD/MM/YYYY)	
	b Name of the auditor signing the audit report	
	c Membership No. of the auditor	

	d	Name of the auditor (proprietorship/ firm)	
	e	Proprietorship/firm registration No.	
	f	Permanent Account Number (PAN) of the auditor (proprietorship/ firm)	
	g	Date of audit report	
4	Whether any donation exceeding two thousand rupees was received otherwise than by an account payee cheque or account payee bank draft or use of electronic clearing system through a bank account or through electoral bond? (tick as applicable <input checked="" type="checkbox"/>)		<input type="checkbox"/> Yes <input type="checkbox"/> No
5	Whether the report under sub-section (3) of section 29C of the Representation of the People Act, 1951 for the financial year has been submitted? (tick as applicable <input checked="" type="checkbox"/>)		<input type="checkbox"/> Yes <input type="checkbox"/> No
6	If yes, then date of submission of the report (DD/MM/YYYY)		

Schedule ET Electoral Trust

1	Whether books of account were maintained? (tick as applicable <input checked="" type="checkbox"/>)		<input type="checkbox"/> Yes <input type="checkbox"/> No
2	Whether record of each voluntary contribution (including name, address and PAN of the person who has made such contribution along with the mode of contribution) were maintained? (tick as applicable <input checked="" type="checkbox"/>)		<input type="checkbox"/> Yes <input type="checkbox"/> No
3	Whether record of each eligible political party to whom the distributable contributions have been distributed (including name, address, PAN and registration number of eligible political party) was maintained? (tick as applicable <input checked="" type="checkbox"/>)		<input type="checkbox"/> Yes <input type="checkbox"/> No
4	Whether the accounts have been audited as per rule 17CA(12)? (tick as applicable <input checked="" type="checkbox"/>)		<input type="checkbox"/> Yes <input type="checkbox"/> No
	If yes, date of audit report in Form No.10BC (DD/MM/YYYY)		
5	Whether the report as per rule 17CA(14) furnished to the Commissioner of Income-tax or Director of Income-tax? (tick as applicable <input checked="" type="checkbox"/>)		<input type="checkbox"/> Yes <input type="checkbox"/> No
6	Details of voluntary contributions received and amounts distributed during the year		
	i	Opening balance as on 1 st April	i
	ii	Voluntary contribution received during the year	ii
	iii	Total (i + ii)	iii
	iv	Amount distributed to Political parties	iv
	v	Amount spent on administrative and management functions of the Trust	v
	vi	Total (iv + v)	vi
	vii	Total amount eligible for exemption under section 13B	vii
	viii	Closing balance as on 31 st March (iii – vi)	viii

Schedule VC Voluntary Contributions (to be mandatorily filled in by all persons filing ITR-7)

A Local		
i	Corpus fund donation	Ai NIL
ii	Other than corpus fund donation	
	(a) Grants Received from Government	Aiia NIL
	(b) Grants Received from Companies under Corporate Social Responsibility	Aiib NIL
	(c) Other specific grants	Aiic NIL
	(d) Other Donations	Aiid 6,57,322
	(e) Total	Aiie 6,57,322
iii	Voluntary contribution local (Ai + Aiie)	Aiii 6,57,322
B Foreign contribution		
i	Corpus fund donation	Bi NIL
ii	Other than corpus fund donation	Bii NIL
iii	Foreign contribution (Bi + Bii)	Biii NIL
C Total Contributions (Aiii + Biii)		C 6,57,322
D Anonymous donations, included in C, chargeable u/s 115BBC		
i	Aggregate of such anonymous donations received	i NIL
ii	5% of total donations received at C or 1,00,000 whichever is higher	ii NIL
iii	Anonymous donations chargeable u/s 115BBC @ 30% (i – ii)	iii NIL

C	Disallowable expenditure (C1 + C2 + C3)	C	NIL
1	Bad debts	1	NIL
2	Provisions	2	NIL
3	Any other disallowable expenditure	3	NIL
D	Total Revenue expenditure incurred during the year (A16 + B10 + C)	D	6,86,478
E	Source of fund to meet revenue expenditure		
1	Income derived from the property/income earned during previous year	1	NIL
2	Income deemed as application in any preceding year under clause 2 of explanation 1 of section 11(1) (applicable only when exemption is claimed u/s 11 and 12)	2	NIL
3	Income of earlier years upto 15% accumulated or set apart	3	54,269
4	Borrowed Fund	4	NIL
5	Any other (Please specify)	5	NIL
	Description	Amount	

Schedule EC	Amount applied to charitable or religious purposes in India or for the stated objects of the trust/institution during the previous year–Capital Account [excluding amount exempt u/s 11(1A)] [to be filled by assesses claiming exemption u/s 11 and 12 or u/s 10(23C)(iv)/(v)/(vi)/(via)]		
			Amount
1	Addition to Capital work in progress (for which exemption u/s 11(1A) has not been claimed)	1	4,63,260
2	Acquisition of capital asset (not claimed earlier as application of income and for which exemption u/s 11(1A) has not been claimed)	2	NIL
3	Cost of new asset for claim of Exemption u/s 11(1A) (restricted to the net consideration (row 8 of schedule AI, if new asset is not application towards object)	3	12,29,800
4	Other capital expenses		
	Nature	Amount	
	Total expenses	4	NIL
5	Total capital expenses (1+2+3+4)	5	16,93,060
A	Source of fund to meet capital expenditure		
1	Income derived from the property during previous year	1	17,75,116
2	Income deemed as application in any preceding year under clause 2 of explanation 1 of section 11(1)	2	NIL
3	Income of earlier years upto 15% accumulated or set apart	3	NIL
4	Borrowed Fund	4	NIL
5	Any other (Please specify)	5	NIL
	Description	Amount	

Schedule IE- 1	Income & Expenditure statement (Applicable for assessee claiming exemption under sections 10(21), 10(22B), 10(23AAA), 10(23B), 10(23D), 10(23DA), 10(23EC), 10(23ED), 10(23EE), 10(29A), 10(46), 10(47) and other clauses of section 10 where income is unconditionally exempt)		
1	Total receipts including any voluntary contribution	1	
2	Application of income towards object of the institution	2	NIL
3	Accumulation of income	3	NIL

Schedule IE- 2	Income & Expenditure statement (Applicable for assessee claiming exemption under sections 10(23A), 10(24))		
A	1 Total receipts including any voluntary contribution	1	
	2 Application of income towards object of the institution	2	NIL
	3 Accumulation of income	3	NIL
B	1 Do you have any income which is taxable? If Yes Please provide details of taxable income (Tick) <input checked="" type="checkbox"/>		<input type="checkbox"/> Yes <input type="checkbox"/> No
	a Income from House Property (Please fill Schedule HP)	1a	NIL
	b Income from Business or Profession (Please fill Schedule BP)	1b	NIL
	c Income from Capital gains (Please fill Schedule CG)	1c	NIL
	d Income from other Sources (Please fill Schedule OS)	1d	NIL

Schedule IE- 3		Income & Expenditure statement (applicable for assessee claiming exemption under sections 10(23C)(iiab) or 10(23C)(iiac) (please fill up separate schedule for each institution):			
1 Objective of the institution	2 Addresses where activity is carrying out	3 Total receipts including any voluntary contribution	4 Government Grants out of Sl. No. 3 above	5 Amount applied for objective	6 Balance accumulated

Schedule IE- 4		Income & Expenditure statement (applicable for assessee claiming exemption under sections 10(23C)(iiad) or 10(23C)(iiac)(please fill up separate schedule for each institution):		
1 Objective of the institution	2 Addresses where activity is carrying out	3 Gross Annual receipts	4 Amount applied for objective	5 Balance accumulated

Schedule HP	Details of Income from House Property
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Address of property		Town/ City		State		PIN Code/ Zip Code	
Owner of the Property : Self							
Is the property co-owned?		<input type="checkbox"/> Yes		<input type="checkbox"/> No		(If "Yes" please enter following details)	
Assessee's percentage of share in the property.		<input type="text" value="NIL"/>					
Name of Co-owner(s)		PAN of Co-owner (s)		Percentage Share in Property			
[Tick <input checked="" type="checkbox"/> the applicable option]		Let out		deemed let out			
Name(s) of Tenant (if let out)		PAN of Tenant(s) (if available)		PAN/TAN of Tenant(s) (if TDS credit is claimed)			
a Gross rent received or receivable or lettable value				1a		NIL	
b The amount of rent which cannot be realized		1b		<input type="text" value="NIL"/>			
c Tax paid to local authorities		1c		<input type="text" value="NIL"/>			
d Total (1b + 1c)		1d		<input type="text" value="NIL"/>			
e Annual value (1a – 1d) (nil, if self -occupied etc. as per section 23(2) of the Act)				1e		NIL	
f 30% of 1e		1f		<input type="text" value="NIL"/>			
g Interest payable on borrowed capital		1g		<input type="text" value="NIL"/>			
h Total (1f + 1g)				1h		NIL	
i Arrears /Unrealised rent received during the year less 30%				1i		NIL	
j Income from house property 1 (1e – 1h + 1i)				1j		NIL	
3 Pass through income if any *				3		NIL	
4 Income under the head "Income from house property" (if negative take the figure to 2i of schedule CYLA)				4		NIL	
NOTE►		Furnishing of PAN of tenant is mandatory, if tax is deducted under section 194-IB. Furnishing of TAN of tenant is mandatory, if tax is deducted under section 194-I.					

Schedule CG	Capital Gains
A Short-term capital gain	
1 From assets (shares/units) where section 111A is applicable (STT paid)	
a Full value of consideration	1a <input type="text" value="NIL"/>
b Deductions under section 48	
i Cost of acquisition	bi <input type="text" value="NIL"/>
ii Cost of Improvement	bii <input type="text" value="NIL"/>
iii Expenditure on transfer	biii <input type="text" value="NIL"/>
iv Total (i + ii + iii)	biv <input type="text" value="NIL"/>
c Balance (1a – biv)	1c <input type="text" value="NIL"/>
d Loss, if any, to be ignored under section 94(7) or 94(8) (Enter positive value only)	1d <input type="text" value="NIL"/>
e Short-term capital gain (1c + 1d)	A1e <input type="text" value="NIL"/>
2 From assets where section 111A is not applicable	

a i In case assets sold include shares of a company other than quoted shares, enter the following details			
a	Full value of consideration received/receivable in respect of unquoted shares	ia	NIL
b	Fair market value of unquoted shares determined in the prescribed manner	ib	NIL
c	Full value of consideration in respect of unquoted shares adopted as per section 50CA for the purpose of Capital Gains (higher of a or b)	ic	NIL
i	Full value of consideration in respect of assets other than unquoted shares	aii	NIL
i	Total (ic + ii)	aiii	NIL
b Deductions under section 48			
i	Cost of acquisition	bi	NIL
ii	Cost of Improvement	bii	NIL
iii	Expenditure on transfer	biii	NIL
iv	Total (i + ii + iii)	biv	NIL
c	Balance (2aiii – biv)	2c	NIL
d	Loss, if any, to be ignored under section 94(7) or 94(8) (Enter positive value only)	2d	NIL
e	Short-term capital gain (2c +2d)	2e	NIL
3	Deemed short term capital gain on depreciable assets	A3	NIL
4	Exemption other than u/s 11(1A), if any (pls.specify section)	A4	NIL
5	Pass Through Income in the nature of Short Term Capital Gain, (Fill up schedule PTI) (A5a + A5b + A5c)	A5	NIL
a	Pass Through Income in the nature of Short Term Capital Gain, chargeable @ 15%	A5a	NIL
b	Pass Through Income in the nature of Short Term Capital Gain, chargeable at applicable rates	A5b	NIL
6	Total short term capital gain (A1e + 2e + A3 – A4+A5)	A6	NIL
B Long term capital gain			
1 From asset where proviso under section 112(1) is not applicable			
a i In case assets sold include shares of a company other than quoted shares, enter the following details		1	
a	Full value of consideration received/receivable in respect of unquoted shares	ia	NIL
b	Fair market value of unquoted shares determined in the prescribed manner	ib	NIL
c	Full value of consideration in respect of unquoted shares adopted as per section 50CA for the purpose of Capital Gains (higher of a or b)	ic	NIL
i	Full value of consideration in respect of assets other than unquoted shares	aii	NIL
i	Total (ic + ii)	aii	NIL
b Deductions under section 48			
i	Cost of acquisition after indexation	bi	NIL
ii	Cost of improvement after indexation	bii	NIL
iii	Expenditure on transfer	biii	NIL
iv	Total (bi + bii +biii)	biv	NIL
c	Balance (1aiii – biv)	1c	NIL
d	Long-term capital gains where proviso under section 112(1) is not applicable	B1d	NIL
2 From asset where proviso under section 112(1)/112A is applicable (without indexation)			
a	Full value of consideration	2a	NIL
b Deductions under section 48			
i	Cost of acquisition without indexation	bi	NIL
ii	Cost of improvement without indexation	bii	NIL

iii	Expenditure on transfer	biii	NIL	
iv	Total (bi + bii + biii)	biv	NIL	
c	Balance (2a – biv)	2c	NIL	
d	Exemption other than u/s 11(1A), if any (<i>pls.specify section</i>)	2d	NIL	
e	Exemption u/s 112A	2e		
f	Balance after exemption (2c-2d-2e)	2f	NIL	
g	Long-term capital gains where proviso under section 112(1)/112A is applicable (2f)	2g	NIL	
3	Pass Through Income in the nature of Long Term Capital Gain, (Fill up schedule PTI) (B3a + B3b)	B3	NIL	
a	Pass Through Income in the nature of Long Term Capital Gain chargeable @ 10%	B3a	NIL	
b	Pass Through Income in the nature of Long Term Capital Gain chargeable @ 20%	B3b	NIL	
4	Total long term capital gain (B1d + B2g+B3)	B4	NIL	
C	Income chargeable under the head "CAPITAL GAINS" (A6 + B4) (enter B4 as nil, if loss)	C	NIL	

Schedule OS

Income from other sources

1	Gross income chargeable to tax at normal applicable rates (1a+ 1b+ 1c+ 1d + 1e)				1	NIL
a	Dividends, Gross			1a	NIL	
b	Interest, Gross (bi + bii + biii + biv + bv)			1b	NIL	
i	From Savings Bank	bi	NIL			
ii	From Deposits (Bank/ Post Office/ Co-operative)	bii	NIL			
iii	From Income-tax Refund	biii	NIL			
iv	In the nature of Pass through income	biv	NIL			
v	Others	bv	NIL			
c	Rental income from machinery, plants, buildings, etc.,Gross			1c	NIL	
d	Income of the nature referred to in section 56(2)(x) which is chargeable to tax (di + dii + diii + div + dv)			1d	NIL	
i	Aggregate value of sum of money received without consideration			di	NIL	
ii	In case immovable property is received without consideration, stamp duty value of property			dii	NIL	
iii	In case immovable property is received for inadequate consideration, stamp duty value of property in excess of such consideration			diii	NIL	
iv	In case any other property is received without consideration, fair market value of property			div	NIL	
v	In case any other property is received for inadequate consideration, fair market value of property in excess of such consideration			dv	NIL	
e	Any other income (please specify nature)			1e	NIL	
2	Income chargeable at special rates (2a+ 2b+ 2c+ 2d + 2e + 2f related to sl.no.1)				2	NIL
a	Income from winnings from lotteries, crossword puzzles etc.			2a	NIL	
b	Income chargeable u/s 115BBE (bi + bii + biii + biv+ bv + bvi)			2b	NIL	
i	Cash credits u/s 68	bi	NIL			
ii	Unexplained investments u/s 69	bii	NIL			
iii	Unexplained money etc. u/s 69A	biii	NIL			
iv	Undisclosed investments etc. u/s 69B	biv	NIL			
v	Unexplained expenditure etc. u/s 69C	bv	NIL			
vi	Amount borrowed or repaid on hundi u/s 69D	bvi	NIL			
c	Accumulated balance of Recognised provident fund taxable u/s 111			2c	NIL	
	S.No.	Assessment Year	Income benefit	Tax benefit		
	Total		NIL	NIL		
d	Any other income chargeable at special rate			2d	NIL	

- e Pass through income in the nature of income from other sources chargeable at special rates 2e **NIL**
- f Amount included in 1 and 2 above, which is chargeable at special rates in India as per DTAA (total of column (2) of table below) 2f **NIL**

Sl. No.	Amount of income	Item No.1a to 2e in which included	Country name & Code	Article of DTAA	Rate as per Treaty (enter NIL, if not chargeable)	Whether TRC obtained (Y/N)	Section of I.T. Act	Rate as per I.T. Act	Applicable rate [lower of (6) or (9)]
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)

3 Deductions under section 57 (other than those relating to income chargeable at special rates under 2a, 2b & 2d)

a Expenses / Deductions	3a	NIL
b Depreciation	3b	NIL
c Total	3c	NIL

4 Amounts not deductible u/s 58

4 **NIL**

5 Profits chargeable to tax u/s 59

5 **NIL**

6 Net Income from other sources chargeable at normal applicable rates (1 – 3 + 4 + 5) (If negative take the figure to 4i of schedule CYLA)

6 **NIL**

7 Income from other sources (other than from owning race horses) (2 + 6) (enter 6 as nil, if negative)

7 **NIL**

8 Income from the activity of owning and maintaining race horses

a Receipts	8a	NIL
b Deductions under section 57 in relation to (3) receipts at 8a only	8b	NIL
c Amounts not deductible u/s 58	8c	NIL
d Profits chargeable to tax u/s 59	8d	NIL

e Balance (8a – 8b + 8c + 8d)

8e **NIL**

9 Income under the head "Income from other sources" (7 + 8e) (take 8e as nil if negative)

9 **NIL**

10 Information about accrual/receipt of income from Other Sources

S.No	Other Source Income	Upto 15/6	From 16/6 to 15/9	From 16/9 to 15/12	From 16/12 to 15/3	From 16/3 to 31/3
		(i)	(ii)	(iii)	(iv)	(v)
1	Dividend Income u/s 115BBDA	NIL	NIL	NIL	NIL	NIL
2	Income by way of winnings from lotteries, crossword puzzles, races, games, gambling, betting etc. referred to in section 2(24) (ix)	NIL	NIL	NIL	NIL	NIL

NOTE Please include the income of the specified persons (spouse, minor child etc.) referred to in Schedule SPI while computing the income under this head.

Schedule OA General

Do you have any income under the head business and profession? ☐ Yes ☒ No (if "yes" please enter following details)

1 Nature of Business or profession (refer to the instructions)	1	
2 Number of branches	2	
3 Method of accounting employed in the previous year (tick) <input checked="" type="checkbox"/> mercantile <input type="checkbox"/> Cash		
4 Is there any change in method of accounting (tick) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
5 Effect on the profit because of deviation, if any, in the method of accounting employed in the previous year from accounting standards prescribed under section 145	5	
6 Method of valuation of closing stock employed in the previous year	6	
a Raw Material (if at cost or market rates whichever is less write 1, if at cost write 2, if at market rate write 3)	6a	
b Finished goods (if at cost or market rates whichever is less write 1, if at cost write 2, if at market rate write 3)	6b	
c Is there any change in stock valuation method (tick) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	6c	
d Effect on the profit or loss because of deviation, if any, from the method of valuation prescribed under section 145A	6d	

Schedule BP
Computation of income from business or profession

A		From business or profession other than speculative business and specified business [including business income as referred to in section 11(4A)]	
1	Profit before tax as per profit and loss account	1	NIL
2	Net profit or loss from speculative business included in 1 (enter -ve sign in case of loss)	2	NIL
3	Net profit or loss from specified Business u/s 35AD included in 1 (enter -ve sign in case of loss)	3	NIL
4	Profit or loss included in 1, which is referred to in Section 44AD/44AE	4	NIL
5	Income credited to Profit and Loss account (included in 1) which is exempt		
a	Share of income from firm(s)	5a	NIL
b	Share of income from AOP/ BOI	5b	NIL
c	Any other exempt income	5c	NIL
d	Total exempt income	5d	NIL
6	Balance (1- 2 - 3 - 4 - 5d)	6	NIL
7	Expenses debited to profit and loss account considered under other heads of income	7	NIL
8	Expenses debited to profit and loss account which relate to exempt income	8	NIL
9	Total (7 + 8)	9	NIL
10	Adjusted profit or loss (6+9)	10	NIL
11	Deemed income under section 33AB/33ABA/35ABB	11	NIL
12	Any other item or items of addition under section 28 to 44DA	12	NIL
13	Any other income not included in profit and loss account/any other expense not allowable (Including income from salary, commission, bonus and interest from firms in which company is a partner)	13	NIL
(a)	Salary		NIL
(b)	Bonus		NIL
(c)	Commission		NIL
(d)	Interest		NIL
(e)	Others		NIL
14	Total (10 + 11 + 12 + 13)	14	NIL
15	Deduction allowable under section 32(1)(iii)	15	NIL
16	Any other amount allowable as deduction	16	NIL
17	Total (15 + 16)	17	NIL
18	Income (14 - 17)	18	NIL
19	Profits and gains of business or profession deemed to be under -		
i	Section 44AD	19i	NIL
ii	Section 44ADA	19ii	NIL
iii	Section 44AE	19iii	NIL
iv	Total (19i to 19iii)	19iv	NIL
20	Net profit or loss from business or profession other than speculative and specified business (18 +19iv)	20	NIL
21	Net Profit or loss from business or profession other than speculative business and specified business after applying rule 7A, 7B or 7C, if applicable (If rule 7A, 7B or 7C is not applicable, enter same figure as in 20)	A21	NIL
B		Computation of income from speculative business	
24	Net profit or loss from speculative business as per profit or loss account	24	NIL
25	Additions in accordance with section 28 to 44DA	25	NIL
26	Deductions in accordance with section 28 to 44DA	26	NIL
27	Profit or loss from speculative business (24+25-26) (enter nil if loss)	B27	NIL
C		Computation of income from specified business under section 35AD	
28	Net profit or loss from specified business as per profit or loss account	28	NIL
29	Additions in accordance with section 28 to 44DA	29	NIL
30	Deductions in accordance with section 28 to 44DA (other than deduction under section,- (i) 35AD, (ii) 32 or 35 on which deduction u/s 35AD is claimed)	30	NIL
31	Profit or loss from specified business (28+29-30)	31	NIL
32	Deductions in accordance with section 35AD(1)	32	NIL
33	Profit or loss from specified business (31-32) (enter nil if loss)	33	NIL
34	Relevant clause of sub-section (5) of section 35AD which covers the specified business		

D	Income chargeable under the head 'Profits and gains' (A21+B27+C33)	D	NIL
E	Computation of income chargeable to tax under section 11(4)		
35	Income as shown in the accounts of business under taking [refer section 11(4)]	E35	NIL
36	Income chargeable to tax under section 11(4) [D34-E35]	E36	NIL

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

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 than speculation or specified business loss) of the current year set off	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 (4 of Schedule -HP)	Total loss (A21 of Schedule-BP)	Total loss (6+2 of Schedule-OS)	
		1	2	3	4	5=1-2-3-4
	Loss to be adjusted →		NIL	NIL	NIL	
i	House property	NIL		NIL	NIL	NIL
ii	Business (excluding speculation income and income from specified business)	NIL	NIL		NIL	NIL
iii	Speculation Income	NIL	NIL		NIL	NIL
iv	Specified business Income	NIL	NIL		NIL	NIL
v	Short-term capital gain	NIL	NIL	NIL	NIL	NIL
vi	Long-term capital gain	NIL	NIL	NIL	NIL	NIL
vii	Other sources (excluding profit from owning race horses and winnings from lottery)	NIL	NIL	NIL		NIL
viii	Profit from owning and maintaining race horses	NIL	NIL	NIL		NIL
ix	Total loss set-off		NIL	NIL	NIL	
x	Loss remaining after set-off		NIL	NIL	NIL	

Schedule PTI Pass Through Income details from business trust or investment fund as per section 115UA, 115UB

Sl.	Name of business trust/ investment fund	PAN of the business trust/ investment fund	Head of income	Amount of income	TDS on such amount, if any	Income claimed to be exempt
NOTE Please refer to the instructions for filling out this schedule.						

Schedule SI Income chargeable to tax at special rates [Please see instruction]

Section	Special rate (%)	Income (i)	Tax thereon (ii)
Total		NIL	NIL

Schedule 115TD Accreted income under section 115TD

1	Aggregate Fair Market Value (FMV) of total assets of trust/institution			1	NIL
2	Less: Total liability of trust/institution			2	NIL
3	Net value of assets (1 – 2)			3	NIL
4	(i)	FMV of assets directly acquired out of income referred to in section 10(1)	4i	NIL	
	(ii)	FMV of assets acquired during the period from the date of creation or establishment to the effective date of registration u/s 12AA, if benefit u/s 11 and 12 not claimed during the said period	4ii	NIL	
	(iii)	FMV of assets transferred in accordance with third proviso to section 115TD(2)	4iii	NIL	
	(iv)	Total (4i + 4ii + 4iii)		4i v	NIL
5	Liability in respect of assets at 4 above			5	NIL

6	Accreted income as per section 115TD [3 – (4 – 5)]				6	NIL
7	Additional income-tax payable u/s 115TD at maximum marginal rate				7	NIL
8	Interest payable u/s 115TE				8	NIL
9	Specified date u/s 115TD				9	
10	Additional income-tax and interest payable				10	NIL
11	Tax and interest paid				11	NIL
12	Net payable/refundable (10 – 11)				12	NIL
13	Name of Bank and Branch	BSR Code	Date(s) of deposit of tax on accreted income	Serial number of challan	Amount deposited	

Schedule FSI Details of Income from outside India and tax relief

Sl.	Country Code	Taxpayer Identification number	Head of income (a)	Income from outside India (included in PART B-TI) (b)	Tax paid outside India (c)	Tax payable on such income under normal provisions in India (d)	Tax relief available in India (e)= (c) or (d) whichever is lower (e)	Relevant article of DTAA if relief claimed u/s 90 or 90A (f)
Total								

NOTE Please refer to the instructions for filling out this schedule.

Schedule TR Summary of tax relief claimed for taxes paid outside India

Schedule 11															
1	Details of Tax relief claimed														
	Country Code		Taxpayer Identification number		Total taxes paid outside India (total of (c) of Schedule FSI in respect of each country)			Total tax relief available (total of (e) of Schedule FSI in respect of each country)			Section under which relief claimed (specify 90, 90A or 91)				
	(a)		(b)		(c)			(d)			(e)				
	Total														
2	Total Tax relief available in respect of country where DTAA is applicable (section 90/90A) <i>(Part of total of 1(d))</i>										2				
3	Total Tax relief available in respect of country where DTAA is not applicable (section 91) <i>(Part of total of 1(d))</i>										3				
4	Whether any tax paid outside India, on which tax relief was allowed in India, has been refunded/credited by the foreign tax authority during the year? If yes, provide the details below										4		Yes	✓	No
	a	Amount of tax refunded		b	Assessment year in which tax relief allowed in India										

NOTE Please refer to the instructions for filling out this schedule.

Schedule FA Details of Foreign Assets and Income from any source outside India

A1 Details of Foreign Depository Accounts held (including any beneficial interest) at any time during the relevant accounting period											
Sl No	Country Name	Country code	Name of financial institution	Address of financial institution	ZIP code	Account number	Status	Account opening date	Peak balance during the period	Closing balance	Gross interest paid/credited to the account during the period
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
A2 Details of Foreign Custodial Accounts held (including any beneficial interest) at any time during the relevant accounting period											
Sl No	Country name	Country code	Name of financial institution	Address of financial institution	ZIP code	Account number	Status	Account opening date	Peak balance during the period	Closing balance	Gross amount paid/credited to the account during the period
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)

A3	Details of Foreign Equity and Debt Interest held (including any beneficial interest) in any entity at any time during the relevant accounting period											
SI No	Country name	Country code	Name of entity	Address of entity	ZIP code	Nature of entity	Date of acquiring the interest	Initial value of the investment	Peak value of investment during the period	Closing value	Total gross amount paid/credited with respect to the holding during the period	Total gross proceeds from sale or redemption of investment during the period
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)
A4	Details of Foreign Cash Value Insurance Contract or Annuity Contract held (including any beneficial interest) at any time during the relevant accounting period											
SI No	Country name	Country code	Name of financial institution in which insurance contract held		Address of financial institution	ZIP code	Date of contract		The cash value or surrender value of the contract		Total gross amount paid/credited with respect to the contract during the period	
(1)	(2)	(3)	(4)		(5)	(6)	(7)		(8)		(9)	
B	Details of Financial Interest in any Entity held (including any beneficial interest) at any time during the relevant accounting period											
SI No	Country Name and Code	Nature of entity	Name and Address of the Entity	Nature of Interest-Direct/ Beneficial owner/ Beneficiary	Date since held	Total Investment (at cost) (in rupees)	Income accrued from such Interest	Nature of Income	Income taxable and offered in this return			
									Amount	Schedule where offered	Item number of schedule	
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	
C	Details of Immovable Property held (including any beneficial interest) at any time during the relevant accounting period											
SI No	Country Name and Code	Address of the Property	Ownership-Direct/ Beneficial owner/ Beneficiary	Date of acquisition	Total Investment (at cost) (in rupees)	Income derived from the property	Nature of Income	Income taxable and offered in this return				
								Amount	Schedule where offered	Item number of schedule		
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)		
D	Details of any other Capital Asset held (including any beneficial interest) at any time during the relevant accounting period											
SI No	Country Name and Code	Nature of Asset	Ownership-Direct/ Beneficial owner/ Beneficiary	Date of acquisition	Total Investment (at cost) (in rupees)	Income derived from the asset	Nature of Income	Income taxable and offered in this return				
								Amount	Schedule where offered	Item number of schedule		
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)		
E	Details of account(s) in which you have signing authority held (including any beneficial interest) at any time during the relevant accounting period and which has not been included in A to D above.											
SI No	Name of the Institution in which the account is held	Address of the Institution	Name of the account holder	Account Number	Peak Balance/ Investment during the year (in rupees)	Whether income accrued is taxable in your hands?	If (7) is yes, Income accrued in the account	If (7) is yes, Income offered in this return				
								Amount	Schedule where offered	Item number of schedule		
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)		
F	Details of trusts, created under the laws of a country outside India, in which you are a trustee, beneficiary or settlor											
SI No	Country Name and Code	Name and address of the trust	Name and address of trustees	Name and address of Settlor	Name and address of Beneficiaries	Date since position held	Whether income derived is taxable in your hands?	If (8) is yes, Income derived from the trust	If (8) is yes, Income offered in this return			
									Amount	Schedule where offered	Item number of schedule	
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	

G Details of any other income derived from any source outside India which is not included in,- (i) items A to F above and, (ii) income under the head business or profession								
Sl No	Country Name and Code	Name and address of the person from whom derived	Income derived	Nature of income	Whether taxable in your hands?	If (6) is yes, Income offered in this return		
						Amount	Schedule where offered	Item number of schedule
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
NOTE		Please refer to instructions for filling out this schedule.						

SCHEDULE SH SHAREHOLDING OF UNLISTED COMPANY

If you are an unlisted company, please furnish the following details:-

Details of shareholding at the end of the previous year

Name of the shareholder	Residential status in India	Type of share	PAN	Date of acquisition	Number of shares held	Face value per share	Issue Price per share	Amount received

Details of equity share application money pending allotment at the end of the previous year

Name of the applicant	Residential status in India	Type of share	PAN	Date of application	Number of shares applied for	Application money received	Face value per share	Proposed issue price

Details of shareholders who is not a shareholder at the end of the previous year but was a shareholder at any time during the previous year

Name of the shareholder	Residential status in India	Type of share	PAN	Number of shares held	Face value per share	Issue Price per share	Amount received	Date of acquisition	Date on which cease to be shareholder	Mode of cessation	In case of transfer, PAN of the shareholder

PART-B

Part B - TI STATEMENT OF INCOME FOR THE PERIOD ENDED ON 31ST MARCH 2019

If registered under section 12A/12AA or approved under section 10(23C)(iv)/10(23C)(v)/ 10(23C)(vi)/10(23C)(via), fill out items 1 to 7 (as applicable)

1	Voluntary Contributions other than Corpus fund [(Aii + Bii) of Schedule VC]	1	6,57,322
2	Voluntary contribution forming part of corpus [(Ai + Bi) of schedule VC]	2	NIL
3	Aggregate of income referred to in sections 11, 12 and sections 10(23C)(iv),10(23C)(v),10(23C)(vi) and 10(23C)(via) derived during the previous year excluding Voluntary contribution included in 1 and 2 above (10 of Schedule AI)	3	NIL
4	Application of income for charitable or religious purposes or for the stated objects of the trust/institution:-		
i	Amount applied during the previous year- Revenue Account [Excluding application from borrowed fund, deemed application, previous year accumulation upto 15% etc, i.e. not from the income of prev. year] [(A16 + B10- E2-E3-E4-E5) from Schedule ER]	4i	6,32,209
ii	Amount applied during the previous year- Capital Account [Excluding application from Borrowed Funds, deemed application, previous year accumulation upto 15% etc., i.e. not from income of the prev. year] [(5 -A2-A3-A4-A5) of Schedule EC]	4ii	16,93,060
iii	Amount applied during the previous year – Revenue/ Capital Account (Repayment of Loan)	4iii	NIL
iv	Amount deemed to have been applied during the previous year as per clause (2) of Explanation to section 11(1)	4iv	NIL
a	If (iv) above applicable, whether option Form No. 9A has been furnished to the Assessing Officer	Yes No	
b	If yes, date of furnishing Form No. 9A (DD/MM/YYYY)		
v	Amount accumulated or set apart for application to charitable or religious purposes or for the stated objects of the trust/institution to the extent it does not exceed 15 per cent of income derived from property held in trust/ institution under section 11(1)(a)/11(1)(b) or in terms of third proviso to section 10(23C) [restricted to the maximum of 15% of (1 + 3) above]	4v	NIL

vi	Amount in addition to amount referred to in(iv) above, accumulated or set apart for specified purposes if all the conditions in section 11(2) and 11(5) or third proviso to section 10(23C) are fulfilled (fill out schedule I)	4vi		NIL
vii	Amount eligible for exemption under section 11(1)(c)	4vii		NIL
a	Approval number given by the Board	4viia		
b	Date of approval by board	4viib		
viii	Total [4i +4ii+4iii+4iv+4v+4vi+4vii]	4viii		23 , 25 , 269
5	Additions			
i	Corpus donation to other trust or institution chargeable as per Explanation 2 to section 11(1) [item No. B1(i) of Schedule ER]	5i		NIL
ii	Income chargeable under section 11(1B)	5ii		NIL
iii	Income chargeable under section 11(3)	5iii		NIL
iv	Income in respect of which exemption under section 11 is not available			
a	Being anonymous donation (Diii of schedule VC)	5iva		NIL
b	Disallowable u/s 13(1)(c) or 13(1)(d) (including Part E of Schedule J)	5ivb		NIL
v	Income chargeable under section 12(2)	5v		NIL
vi	Amount disallowable under section 11(1) r.w.s 40(a)(ia) or 10(23C) r.w.s 40(a)(ia)	5vi		NIL
vii	Amount disallowable under section 11(1) r.w.s 40A(3)/(3A) or 10(23C) r.w.s 40A(3)/(3A)	5vii		NIL
viii	Total [5i + 5ii+5iii+5iva+5ivb+5v + 5vi + 5vii]	5viii		NIL
6	Income chargeable u/s 11(4) [as per item No. E36 of Schedule BP]	6		NIL
7	Total (1+3-4viii+5viii+6)	7		NIL
8	Amount eligible for exemption under sections 10(21), 10(22B), 10(23A), 10(23AAA), 10(23B), 10(23EC), 10(23ED), 10(23EE), 10(29A)	8		NIL
9	Amount eligible for exemption under section 10(23C)(iiiab), 10(23C)(iiiac), 10(23C)(iiiad), 10(23C)(iiiad), 10(23D), 10(23DA), 10(23FB), 10(24), 10(46), 10(47)	9		NIL
10	Amount eligible for exemption under any other clause of section 10 (other than those at 8 and 9)	10		NIL
11	Income chargeable under section 11(3) read with section 10(21)	11		NIL
12a	Income claimed/ exempt under section 13A in case of a Political Party	12a		NIL
12b	Income claimed/ exempt under section 13B in case of an Electoral Trust (item No. 6vii of Schedule ET)	12b		NIL
13	Income not forming part of item no.7 to 12 above			
i	Income from house property [4 of Schedule HP] (enter nil if loss)	13i		NIL
ii	Profits and gains of business or profession [as per item No. D 34 of schedule BP]	13ii		NIL
iii	Income under the head Capital Gains			
a	Short term (A6 of schedule CG)	13iiia		NIL
b	Long term (B4 of schedule CG) (enter nil if loss)	13iiib		NIL
c	Total capital gains (13iiia +13iiib) (enter nil if loss)	13iiic		NIL
iv	Income from other sources [as per item No. 9 of Schedule OS]	13iv		NIL
v	Total (13i+13ii+13iiic+13iv)	13v		NIL
14	Gross Income [7+11+13v-12a]	14		NIL
15	Losses of current year to be set off against 13v (total of 2ix, 3ix and 4ix of Schedule CYLA)	15		NIL
16	Gross Total Income (14 - 15)	16		NIL
17	Income chargeable to tax at special rate under section 111A, 112 etc. included in 16	17		NIL
18	Deduction u/s 10AA	18		NIL
19	Total Income [16 – 18]	19		NIL
20	Income which is included in 19 and chargeable to tax at special rates (total of col. (i) of schedule SI)	20		NIL
21	Net Agricultural income for rate purpose	21		NIL
22	Aggregate Income (19 – 20 + 21) [applicable if (19-20) exceeds maximum amount not chargeable to tax]	22		NIL
23	Anonymous donations, included in 22, to be taxed under section 115BBC @ 30% (Diii of schedule VC)	23		NIL
24	Income chargeable at maximum marginal rates (22-23)	24		NIL

Part B - TTI Computation of tax liability on total income

1	Tax payable on total income		
a	Tax at normal rates on (22 – 23– 24) of Part B-TI	1a	NIL
b	Tax at special rates (total of col. (ii) of Schedule-SI)	1b	NIL
c	Tax on anonymous donation u/s 115BBC @30% on 23 of Part B-TI	1c	NIL

d	Tax at maximum marginal rate on 24 of Part B-TI	1d	NIL	
e	Rebate on agricultural income [applicable if (19-20) of Part B-TI exceeds maximum amount not chargeable to tax]	1e	NIL	
f	Tax Payable on Total Income (1a + 1b+1c+1d - 1e)	1f	NIL	
2	Surcharge			
i	25% of of 115BBE col. (ii) of Schedule SI	2i	NIL	
ii	On [1f – (of 115BBE col. (ii) of Schedule SI)]	2ii	NIL	
iii	Total (i + ii)	2iii	NIL	
3	Health and Education cess @ 4% on (1f+ 2iii)	3	NIL	
4	Gross tax liability (1f+ 2iii + 3)	4	NIL	
5	Tax relief			
a	Section 90/90A (2 of Schedule TR)	5a	NIL	
b	Section 91 (3 of Schedule TR)	5b	NIL	
c	Total (5a + 5b)	5c	NIL	
6	Net tax liability (4– 5c)	6	NIL	
7	Interest and fee payable			
a	Interest for default in furnishing the return (section 234A)	7a	NIL	
b	Interest for default in payment of advance tax (section 234B)	7b	NIL	
c	Interest for deferment of advance tax (section 234C)	7c	NIL	
d	Fee for default in furnishing return of income (section 234F)	7d	NIL	
e	Total Interest and Fee Payable (7a+7b+7c+7d)	7e	NIL	
8	Aggregate liability (6+ 7e)	8	NIL	
9	Taxes Paid			
a	Advance Tax (from column 5 of 14A)	9a	NIL	
b	TDS (total of column 9 of 14B)	9b	NIL	
c	TCS (total of column 7 of 14C)	9c	NIL	
d	Self-Assessment Tax (from column 5 of 14A)	9d	NIL	
e	Total Taxes Paid (9a+9b+9c + 9d)	9e	NIL	
10	Amount payable (Enter if 8 is greater than 9e, else enter 0)	10	NIL	
11	Refund (If 9e is greater than 8) (refund, if any, will be directly credited into the bank account)	11	NIL	
12	Details of all Bank Accounts held in India at any time during the previous year (excluding dormant accounts)			
Sl.	IFS Code	Name of the Bank	Account Number	Indicate the account in which you prefer to get your refund credited, if any (tick one account <input checked="" type="checkbox"/>)
1	IDIB000A109	Indian Bank	6571988982	<input checked="" type="checkbox"/>
In case of non-residents, details of any one foreign Bank Account may be furnished for the purpose of credit of refund				
	SWIFT Code	Name of the Bank	IBAN	Country Name
13	Do you at any time during the previous year,- (i) hold, as beneficial owner, beneficiary or otherwise, any asset (including financial interest in any entity) located outside India; or (ii) have signing authority in any account located outside India; or (iii) have income from any source outside India? [applicable only in case of a resident] [Ensure Schedule FA is filled up if the answer is Yes]			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

14	TAX PAYMENTS			
A	Details of payments of Advance Tax and Self-Assessment Tax			
Sl No (1)	BSR Code (2)	Date of Deposit (DD/MM/YYYY) (3)	Serial Number of Challan (4)	Amount (Rs) (5)
	Advance Tax			
	Self Assessment Tax			

NOTE Enter the totals of Advance tax and Self-Assessment tax in Sl. No. 9a & 9d of Part B-TTI

B Details of Tax Deducted at Source (TDS) on Income [As per Form 16 A issued or Form 16B/16C furnished by Deductor(s)]															
SI No	TDS credit relating to self /other person [spouse as per section 5A/other person as per rule 37BA(2)]	PAN of Other Person (if TDS credit related to other person)	TAN of the Deductor/ PAN of Tenant/ Buyer	Unclaimed TDS brought forward (b/f)		TDS of the current Fin. Year		TDS credit being claimed this Year (only if corresponding income is being offered for tax this year)				Corresponding Income offered		TDS credit being carried forward	
				Fin. Year in which deducted	TDS b/f	Deducted in own hands	Deducted in the hands of spouse as per section 5A or any other person as per rule 37BA(2) (if applicable)		Claimed in own hands	Claimed in the hands of spouse as per section 5A or any other person as per rule 37BA(2) (if applicable)			Gross Amount	Head of Income	
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)		(9)	(10)			(11)	(12)	(13)
							Income	TDS		Income	TDS	PAN			
1	NIL				NIL	NIL	NIL	NIL	NIL	NIL	NIL		NIL		NIL
NOTE		Please enter total of column 9 in 9b of Part B-TTI													

C Details of Tax Collected at Source (TCS) [As per Form 27D issued by the Collector(s)]							
SI No	Tax Deduction and Tax Collection Account Number of the Collector	Name of the Collector	Unclaimed TCS brought forward (b/f)		TCS of the current fin. year	Amount out of (5) or (6) being claimed this Year (only if corresponding income is being offered for tax this year)	Amount out of (5) or (6) being carried forward
			Fin. Year in which TCS collected	Amount b/f			
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
NOTE		<i>Please enter total of column (7) in 9c of Part B-TTI</i>					

VERIFICATION

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

I further declare that I am making this return in my capacity as _____ and I am also competent to make this return and verify it. I am holding permanent account number _____ (if allotted).

Place **IRUSUMANDA**

Date **31-10-2019**

Sign here →