

* Important : Please see notes overleaf before filling up the challan

Single Copy (to be sent to the ZAO)

CHALLAN NO./ ITNS 280	Tax Applicable (Tick One)* (0020) INCOME-TAX ON COMPANIES <input type="checkbox"/> (CORPORATION TAX) (0021) INCOME TAX (OTHER THAN COMPANIES) <input type="checkbox"/>	Assessment Year <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px;"></div> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px;"></div>																																
Permanent Account Number <div style="border: 1px solid black; width: 100%; height: 20px;"></div>																																		
Full Name <div style="border: 1px solid black; width: 100%; height: 20px;"></div>																																		
Complete Address with City & State <div style="border: 1px solid black; width: 100%; height: 20px;"></div>																																		
Tel. No. <div style="border: 1px solid black; width: 100%; height: 20px;"></div> Pin <div style="border: 1px solid black; width: 100%; height: 20px;"></div>																																		
Type of Payment (Tick One) <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">Advance Tax (100)</td> <td style="width:33%;"><input type="checkbox"/></td> <td style="width:33%;">Surtax (102)</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Self Assessment Tax (300)</td> <td><input type="checkbox"/></td> <td>Tax on Distributed Profits of Domestic Companies (106)</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Tax on Regular Assessment (400)</td> <td><input type="checkbox"/></td> <td>Tax on Distributed Income to Unit Holders (107)</td> <td><input type="checkbox"/></td> </tr> </table>			Advance Tax (100)	<input type="checkbox"/>	Surtax (102)	<input type="checkbox"/>	Self Assessment Tax (300)	<input type="checkbox"/>	Tax on Distributed Profits of Domestic Companies (106)	<input type="checkbox"/>	Tax on Regular Assessment (400)	<input type="checkbox"/>	Tax on Distributed Income to Unit Holders (107)	<input type="checkbox"/>																				
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DETAILS OF PAYMENTS		FOR USE IN RECEIVING BANK																																
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Signature of person making payment		Rs.																																
Taxpayers Counterfoil (To be filled up by tax payer)		SPACE FOR BANK SEAL																																
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on account of Companies/Other than Companies/Tax Income Tax on (Strike out whichever is not applicable) Type of Payment (To be filled up by person making the payment) for the Assessment Year <div style="border: 1px solid black; width: 100%; height: 20px;"></div>																																		
		Rs.																																

*NOTES

1. **Please use a separate challan for each type of payment.**
2. Please note that quoting your Permanent Account Number (PAN) is mandatory.
3. Please note that quoting false PAN may attract a penalty of Rs. 10,000/- as per section 272B of I.T. Act, 1961.
4. Please note that to deposit Appeal Fees either **Major Head 020 or 021** (depending upon the tax payer's status) has to be ticked under 'Tax Applicable'. Followed by this; **Minor Head: Self Assessment Tax (300)** has to be ticked under 'Type of Payment' and the amount is to filled under **Others** in 'Details of Payments'.
5. To deposit taxes, appeal fees, etc. in respect of block period cases, enter the first Assessment Year of the block period followed by the last Assessment Year of the period. For example, if the block period is 1/04/85 to 5/3/96, it would be entered as 1986-97 in the space indicated for Assessment Year. If taxes are being deposited, tick the box Self Assessment (300) under Type of Payment and fill up amount under 'Tax' while in respect of appeal fees, enter amount under 'Others'.
6. Tax payers may please draw/issue Cheque/DDs towards payment of income-tax as under:
Pay _____ (Name of the bank where the Challan in being deposited)
A/c Income-tax

PLEASE USE THIS CHALLAN FOR DEPOSITING TAXES (TYPES OF PAYMENT) MENTIONED OVERLEAF.
KINDLY DO NOT USE THIS CHALLAN FOR DEPOSITING TAX DEDUCTION AT SOURCE (TDS)

KINDLY ENSURE THAT THE BANK'S ACKNOWLEDGEMENT CONTAINS THE FOLLOWING:

1. 7 DIGIT BSR CODE OF THE BANK BRANCH
2. DATE OF DEPOSIT OF CHALLAN (DD MM YY)
3. CHALLAN SERIAL NUMBER

THESE WILL HAVE TO BE QUOTED IN YOUR RETURN OF INCOME.