

RETURN OF INCOME

FORM NO. 3

SARAL ITS-3

[See rule 12(1)(b)(iii) of Income-Tax Rules, 1962]

(FOR NON-CORPORATE ASSESSEES NOT CLAIMING EXEMPTION U/S 11 AND NOT HAVING INCOME FROM BUSINESS OR PROFESSION)

- PLEASE FOLLOW INSTRUCTIONS AND FILL IN RELEVANT SCHEDULES.
- PAN MUST BE QUOTED. ■ USE BLOCK LETTERS ONLY.

1. PERMANENT ACCOUNT NUMBER (If not applied for or not allotted, enclose Form 49A)

2. NAME (Last name/Surname, First name, Middle name, in that order)

3. ADDRESS FOR COMMUNICATION
 (A. RESIDENCE or B. OFFICE)
 Flat No./Door/House No., Premises, Road, Locality/village, Town/
 District, State/Union Territory, in that order)

 PIN Telephone
 Fax, if any 4. Sex (M/F)

5. Date of Birth -- 6. Status*

(DD-MM-YYYY)

7. Is there any change in Address ? Yes No
 If yes, whether A. Residence or B. Office

ACKNOWLEDGEMENT
 For Office use only

Receipt No. Date

Seal and Signature of Receiving Official

8. Ward/Circle/Special Range

9. If there is change in jurisdiction, state old Ward/Circle/Special Range

10. Assessment Year 11. Residential Status*

12. U/s 139/142/148

13. Whether Original or Revised Return?
 If revised, Receipt No. and
 date of filing original Return

14. Is this your first Return? Yes No

COMPUTATION OF TOTAL INCOME (in Rs.)

15. Salaries (SCH. F-1A)	701	<input type="text"/>
16. Income from house property (SCH. F-1B)	702	<input type="text"/>
17. Capital gains :		
a. Short term (SCH. F-1C(i))	704	<input type="text"/>
b. Long term (SCH. F-1C(ii))	705	<input type="text"/>
18. Income from other sources (SCH. F-1D)	706	<input type="text"/>
19. Brought forward loss set off (SCH. F-3)	715	<input type="text"/>
20. Gross total income (SCH. F-4)	746	<input type="text"/>
21. Deductions [Chapter-VIA] (SCH. F-5)	747	<input type="text"/>
22. TOTAL INCOME (SCH. F-7)	760	<input type="text"/>
in words <input type="text"/>		
23. Net agricultural income (SCH. F-8)	762	<input type="text"/>
24. Income claimed exempt (SCH. H-10)	125	<input type="text"/>

STATEMENT OF TAXES (in Rs.)

25. Tax on total income (SCH. G-2)	810	<input type="text"/>
26. Rebate u/s 88/88B/88C (SCH. G-3)	820	<input type="text"/>
27. Surcharge (SCH. G-6)	828	<input type="text"/>
28. Tax payable (SCH. G-7)	832	<input type="text"/>
29. Relief u/s 89/90/91 (SCH. G-8)	837	<input type="text"/>
30. Balance tax payable (SCH. G-9)	841	<input type="text"/>
31. Tax deducted/collected at source (SCH. G-13B)	873	<input type="text"/>
32. Advance tax paid (SCH. G-13A)	862	<input type="text"/>
33. Interest payable u/s 234A/234B/234C (SCH. G-10)	851	<input type="text"/>
34. Self assessment tax (SCH. G-13C)	875	<input type="text"/>
35. Tax and interest payable (SCH. G-15)	893	<input type="text"/>
36. Refund due, if any (SCH. G-16)	895	<input type="text"/>

37. DETAILS OF BANK ACCOUNT(S)/CREDIT CARD AND OTHER PARTICULARS AS PER SCHEDULE-H

38. NO. OF DOCUMENTS/STATEMENTS ATTACHED

	Description	In Figures	In words	Description	In Figures	In words
a.	Form 16	<input type="text"/>	<input type="text"/>	c.	Challans	<input type="text"/>
b.	TDS Certificates	<input type="text"/>	<input type="text"/>	d.	Others	<input type="text"/>

VERIFICATION**

I, (full name in block letters), son/daughter of solemnly declare that to the best of my knowledge and belief, the information given in this return and the schedules and statements accompanying it 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.....

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.

Date :
 Place :

Assessee's Signature :

* Fill in code as mentioned in instructions
 ** Any person making a false statement in the return or the accompanying schedules or statement shall be liable to be prosecuted under section 277 of the Income-tax Act, 1961 and on conviction be punishable under that section with rigorous imprisonment and with fine.

SCHEDULE-A. SALARIES

In case of more than one employment, please state the aggregate of salary etc. against the relevant Items.

Whether in the employment of Government? Yes No

Name of the Employer

Address of the Employer

	Amount	Code	Amount
1. Salary (including all allowances)		201	<table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"></table>
2. Less : Allowances exempt u/s10			
(a) House Rent Allowance as per Rules	<table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"></table>		
(b) _____	<table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"></table>		
(c) _____	<table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"></table>		
3. Total of 2 above		202	<table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"></table>
4. Balance (1-3)		203	<table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"></table>
5. Add value of perquisite(s), and/or profits in lieu of salary (See S.17)			
(a) Rent free accommodation as per Rules	<table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"></table>		
(b) Conveyance per Rules	<table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"></table>		
(c) _____	<table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"></table>		
(d) _____	<table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"></table>		
6. Total of 5 above		204	<table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"></table>
7. Total (4+6)		205	<table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"></table>
8. Less : Deductions claimed u/s 16			
(a) Standard deduction [S16(i)]	206		<table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"></table>
(b) _____			<table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"></table>
(c) _____			<table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"></table>
9. Total of 8 above		207	<table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"></table>
10. INCOME CHARGEABLE UNDER THE HEAD "SALARIES" (7-9)		220	<table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"></table>

SCHEDULE-C. CAPITAL GAINS

Separate sheet may be used and attached to the return in case of more than one short term/long term asset. The aggregate figure may be shown against item no. 14. Indexed cost of acquisition and improvement, wherever considered necessary may be shown against item no. 7.

A. Short Term Asset

B. Long term Asset

1. Number of sheets **601** (in case of more than one asset only)

Sheet No. **02**

2. Particulars of asset transferred **603** _____

653 _____

3. Date of Acquisition (DD-MM-YYYY) **604**

654

4. Date of transfer (DD-MM-YYYY) **605**

655

5. Mode of transfer **606** _____

656 _____

6. Full value of consideration **607**

657

7. Deductions u/s 48

(i) cost of acquisition **609**

659

(ii) cost of improvement **610**

660

(iii) expenditure on transfer **611**

661

8. Total of 7 above **615**

665

9. Balance (6-8) **616**

666

10. Exemption u/s

54 **621** 54B **622**

54 **667** 54B **668**

54D **623** 54G **624**

54D **669** 54EA **670**

54EB **671** 54EC **672**

54F **673** 54G **674**

11. Balance (9-10) **630**

680

12. Amount deemed to be Capital gains u/s

54 **631** 54B **632**

54 **681** 54B **682**

54D **633** 54G **634**

54D **683** 54F **684**

54G **685**

13. Total (11+12) **640**

690

14. Total of 13 (in case of more than one short/long term asset, give total of all sheets) **642**

692

15. Particulars of transfer claimed exempt u/s 47 :

Nature of asset	Date of transfer	Amount/Value	Relevant clause of section 47

16. Income chargeable under the head "CAPITAL GAINS"

A. Short term (14 + 15) **649**

B. Long Term (14) **699**

17. Information about accrual/receipt of capital

	upto 15/6	16/6 to 15/9	16/9 to 15/12	16/12 to 15/3	16/3 to 31/3
Short term	Rs. _____	Rs. _____	Rs. _____	Rs. _____	Rs. _____
Long term	Rs. _____	Rs. _____	Rs. _____	Rs. _____	Rs. _____

SCHEDULE-D. INCOME FROM OTHER SOURCES

	Code	Amount	Code	Amount
1. Income* other than from owning race horse(s) :				
(a) Dividends [other than those claimed exempt u/s 10(33)]	460	_ _ _ _ _ _ _ _ _		
(b) Interest	461	_ _ _ _ _ _ _ _ _		
(c) Rental income from machinery, plants, buildings etc.	462	_ _ _ _ _ _ _ _ _		
(d) Others	464	_ _ _ _ _ _ _ _ _		
2. Total of 1 above			470	_ _ _ _ _ _ _ _ _
3. Deductions u/s 57 :-				
(a) Depreciation		_ _ _ _ _ _ _ _ _		
(b) _____		_ _ _ _ _ _ _ _ _		
(c) _____		_ _ _ _ _ _ _ _ _		
4. Total of 3 above			471	_ _ _ _ _ _ _ _ _
5. Balance [2-4]			473	_ _ _ _ _ _ _ _ _
6. (a) Income from owning and maintaining race horses	474	_ _ _ _ _ _ _ _ _		
(b) Deductions u/s 57	475	_ _ _ _ _ _ _ _ _		
7. Balance income from owning and maintaining race horse(s) [6(a) – 6(b)]			476	_ _ _ _ _ _ _ _ _
8. Winnings from lotteries, cross word puzzles, races etc. (see sec. 115BB)			477	_ _ _ _ _ _ _ _ _
9. INCOME CHARGEABLE UNDER THE HEAD "INCOME FROM OTHER SOURCES" (5 + 7 + 8)			499	_ _ _ _ _ _ _ _ _

* Indicate the gross amount against sub items (a) to (d)

SCHEDULE-H. GENERAL INFORMATION

1. Is there any change in your name?

If yes, please furnish your Old Name

New name (Please attach documentary proof)

Shri Smt. Kumari

(Please expand initials)

Last Name/Surname

First Name

--	--

Middle Name

--

2. In case of change in address, please furnish new address (tick) : A. Residence or B. Office

Flat/Door/Block No.

--

Name of Premises/Building/Village

--

Road/Street/Lane/Post Office

--

Area/Locality/Taluka/Sub-Division

--

Town/City/District

--

State/Union Territory

--

PIN

--

3. Particulars of bank account(s) starting with the account to which refund if any, is to be credited

Name of the Bank	Address of Bank Branch	Branch Code	Account Number

4. Particulars of credit card, if any

Name of credit card held	Issued by

5. Investments, if any, in immovable properties during the year :

Details of property/investment	Date/Period of investment	Amount in Rs.	Source

6. Investments, if any, in excess of Rs.1,00,000 in movable assets during the year :

Nature of asset/investment	Date of Investment	Amount in Rs.	Source

7. Details of expenditure on education of children

S.No.	Name of the Child	Class and Institution where studying	Expenditure during the year
1.			
2.			
3.			

Contd.

SCHEDULE-H. GENERAL INFORMATION (CONTD.)

8. Expenditure on vehicles owned by self/dependent family members

S.No.	Name of the owner	Make & Model with registration No.	Year of purchase

9. Other expenditure/outgoings, if any, in excess of Rs.50,000 during the year :

Nature of expenditure/outgoings	Date of Expenditure	Amount in Rs.	Source

10. Income claimed exempt :

Nature of Income	Amount in Rs.	Reasons for claim

11. Foreign travel undertaken during the year by self/dependents

S. No.	Name	Relationship	Passport No.	Countries visited	Duration of tour	Expenditure incurred
1.						
2.						
3.						
4.						
5.						

12. Have you claimed any double taxation relief

(i) under agreement with any country Yes No

(ii) In respect of a country with which no agreement exists Yes No
 If yes, Name of the country _____

13. Are you assessed to Wealth tax Yes No
 (If yes, the wealth tax return should be filed along with this return.)

14. Are you an NRI in whose case any part of income is to be taxed under chapter-XIIA Yes No
 (If yes, please file the details on a separate sheet.)”.