

FORM

ITR-3

INDIAN INCOME TAX RETURN

[For Individuals/HUFs being partners in firms and not carrying out business or profession under any proprietorship]

(Please see rule 12 of the Income-tax Rules,1962)

(Also see attached instructions)

Assessment Year

2012 - 13**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"/> <input 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"/> <input type="checkbox"/> Male <input type="checkbox"/> Female
Residential/Office Phone Number with STD code		Mobile No.		Employer Category (if in employment) (Tick) <input checked="" type="checkbox"/> <input type="checkbox"/> Govt. <input type="checkbox"/> PSU <input type="checkbox"/> Others
Email Address				Income Tax Ward/Circle
FILING STATUS	Return filed (Tick) [Please see instruction number-7] <input type="checkbox"/> 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 <input checked="" type="checkbox"/> 139(9) <input type="checkbox"/> 142(1) <input type="checkbox"/> 148 <input type="checkbox"/> 153A/153C			
	If revised, then enter Receipt No and Date of filing original return (DD/MM/YYYY)		/ /	
	Residential Status (Tick) <input checked="" type="checkbox"/> <input 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**

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) (enter nil, if loss) (A5 of Schedule CG)	4ai	
	ii Short-term (others) (enter nil, if loss) (A6 of Schedule CG)	4a ii	
	iii Total short-term (4ai + 4a ii) (enter nil if loss) (A4 of Schedule CG)	4a iii	
	b Long-term		
	i Long-term with indexation (B 2e of Schedule CG) (enter nil if loss)	4bi	
	ii Long-term without indexation (B 3e of Schedule CG) (enter nil if loss)	4b ii	

	iii	Total Long-term (4bi+ 4bii)	4biii	
c	Total capital gains (4aiii + 4b) (enter nil if 4c is a loss)			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 (5a + 5b) (enter nil if 5c is a loss)		5c
6	Total (1+2+3+4c+5c)			6
7	Losses of current year set off against 6 (total of 2viii, 3viii and 4viii 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 (2viii of Schedule BFLA)			9
10	Gross Total income (8-9) (also 3ix of Schedule BFLA)			10
11	Deductions under Chapter VI-A (p of Schedule VIA)			11
12	Total income (10 – 11)			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	Education cess, including secondary and higher education cess on 1c			2
	3	Gross tax liability (1c+ 2)			3
	4	Tax relief			
		a	Section 89	4a	
		b	Section 90 or 90A (column 7 of Schedule TR)	4b	
		c	Section 91 (column 7 of Schedule TR)	4c	
	d	Total (4a + 4b+4c)		4d	
5	Net tax liability (3 – 4d)			5	
6	Interest payable				
	a	For default in furnishing the return (section 234A)	6a		
	b	For default in payment of advance tax (section 234B)	6b		
	c	For deferment of advance tax (section 234C)	6c		
	d	Total Interest Payable (6a+6b+6c)		6d	
7	Aggregate liability (5 + 6d)			7	
TAXES PAID	8	Taxes Paid			
		a	Advance Tax (from Schedule-IT)	8a	
		b	TDS (total of column 5 of Schedule-TDS1 and column 7 of Schedule-TDS2)	8b	
		c	Self Assessment Tax (from Schedule-IT)	8c	
		d	Total Taxes Paid (8a+8b+8c)		8d

REFUND	9	Amount payable (Enter if 7 is greater than 8d, else enter 0)	9	
	10	Refund (If 8d is greater than 7)	10	
	11	Enter your bank account number (mandatory in all cases)		
	12	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"/>)		
	13	Give additional details of your bank account		
	MICR Code		Type of Account (tick as applicable <input checked="" type="checkbox"/>)	<input type="checkbox"/> Savings <input type="checkbox"/> Current
14	Do you have,- (i) any asset (including financial interest in any entity) located outside India or (ii) signing authority in any account located outside India? <i>[applicable only in case of a resident] [Ensure Schedule FA is filled up if the answer is Yes]</i>		<input type="checkbox"/> Yes	<input type="checkbox"/> No

VERIFICATION

I, _____ son/ daughter of _____, holding permanent account number _____ 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 **2012-2013**.

Place _____

Date _____

Sign here → _____

14 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		15

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 exempt/ non-exempt allowances, perquisites & profit in lieu of salary as they are shown separately below)	1	
	2	Allowances exempt under section 10 (Not to be included in 6 below)	2	
	3	Allowances not exempt (refer Form 16 from employer)	3	
	4	Value of perquisites (refer Form 16 from employer)	4	
5	Profits in lieu of salary (refer Form 16 from employer)	5		
6	Income chargeable under the Head 'Salaries' (1+3+4+5)	6		

Schedule HP Details of Income from House Property (Please refer to instructions)

HOUSE PROPERTY	1	Address of property 1	Town/ City	State	PIN Code
		Is the property co-owned? <input type="checkbox"/> Yes <input type="checkbox"/> No (if "YES" please enter following details)			
		Your percentage of share in the property. <input type="text"/>			
	S.N	Name of Co-owner(s)	PAN of Co-owner(s) (optional)	Percentage Share in Property(optional)	
	o				

i			
ii			
	(Tick) <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
	Is the property co-owned? <input type="checkbox"/> Yes <input type="checkbox"/> No (if "YES" please enter following details)		
	Your percentage of share in the property. <input type="text"/>		
S.No	Name of Co-owner(s)	PAN of Co-owner(s) (optional)	Percentage Share in Property(optional)
i			
ii			
	(Tick) <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				
	Sl. No.	Name of the Firm	PAN of the firm	Percentage Share in the profit of the firm	Amount of share in the profit
					Capital balance on 31 st March in the firm
				i	ii
	1				
	2				
	3				
	4				
	5				
	6	Total			

Schedule BP Details of Income from Firms of which partner

INCOME FROM FIRMS	Sl. No.	Firm PAN (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						
	2						
	3						
	4						
	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

A Short-term capital gain		
1	From assets in case of non-resident to which first proviso to section 48 is applicable	1
2	From assets in the case of others	
	a Full value of consideration	2a
	b Deduction 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 (2a – biv)	2c
	d Loss, if any, to be ignored under section 94(7) or 94(8) (enter positive values only)	2d
	e Deduction under section 54B/54D	2e
	f Short-term capital gain (2c + 2d – 2e)	2f
3	Amount deemed to be short term capital gains under sections 54B/54D/54EC/ 54ED/54G/ 54GA	A3
4	Total short term capital gain (1 + 2f + A3)	A4
5	Short term capital gain under section 111A included in 4	A5
6	Short term capital gain other than referred to in section 111A (A4 – A5)	A6
B Long term capital gain		
1	Asset in case of non-resident to which first proviso to section 48 is applicable	1
2	Asset in the case of others where proviso under section 112(1) not exercised	
	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 54G/54GA	2d
	e Net balance (2c – 2d)	2e
3	Asset in the case of others where proviso under section 112(1) is exercised	
	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 54G/54GA	3d
	e Net balance (3c – 3d)	3e
4	Amount deemed to be long term capital gains under sections 54/54B/54D/54EC/54ED/54F	B4

	5	Total long term capital gain (1 + 2e [(enter 2e as nil if loss) + 3e (enter 3e as nil if loss) + 4])				B5	
C	Income chargeable under the head "CAPITAL GAINS" (A4 + B5) (enter B5 as nil, if loss)					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 where proviso under section 112(1) is exercised (Without Indexation)- Code in SI Schedule is 22, Tax Rate is 10% ; Enter only positive value from Item B3e of Schedule CG AFTER loss adjustment under this category in Schedule CYLA and BFLA, if any.					
	2	Long- term where proviso under section 112(1) is NOT exercised (With Indexation)- Code in SI Schedule is 21, Tax Rate is 20%; Enter only positive value from Item (B5-B3e) of Schedule CG AFTER loss adjustment under this category in Schedule CYLA and BFLA, if any.					
	3	Short-term under 111A- Code in SI Schedule is 1A, Tax Rate is 15% ; Enter only positive value from Item A7 of Schedule CG AFTER loss adjustment under this category in Schedule CYLA and BFLA, if any.					
	4	Short-term OTHERS- Taxed at normal rates; Enter only positive value from Item A8 of Schedule CG AFTER loss adjustment under this category in Schedule CYLA and BFLA, if any.					
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				
		a	Dividends, Gross	1a		
		b	Interest, Gross	1b		
		c	Rental income from machinery, plants, buildings,	1c		
		d	Others, Gross (excluding income from owning race horses)	1d		
		e	Total (1a + 1b + 1c + 1d)		1e	
		f	Deductions under section 57:-			
			i	Expenses / Deductions	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) (enter 1g as nil, if loss)				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" (3 + 4c) (enter 4c as nil if loss and take 4c loss figure to Schedule CYLA)				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
			Loss to be adjusted ->				
	i	Salaries					
ii	House property						

iii	Business or profession					
iv	Short-term capital gain					
v	Long term capital gain					
vi	Other sources (excluding profit from owning race horses and winnings from lottery)					
vii	Profit from owning and maintaining race horses					
viii	Total loss set off					
ix	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 (excluding profit from owning race horses and winnings from lottery)				
vii	Profit from owning and maintaining race horses				
viii	Total of brought forward loss set off				
ix	Current year's income remaining after set off	Total (i3 + ii3 + iii3 + iv3 + v3+vi3+vii3)			

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 (from owning race horses)
	i	2004-05						
	ii	2005-06						
iii	2006-07							
iv	2007-08							
v	2008-09							
vi	2009-10							
vii	2010-11							
viii	2011-12							
ix	Total of earlier year losses							
x	Adjustment of above losses in Schedule BFLA							
xi	2012-13 (Current year losses)							
xii	Total loss Carried Forward to future years							

Schedule VIA Deductions under Chapter VI-A (Section)

TOTAL DEDUCTIONS	a	80C	i	80G
	b	80CCC	j	80GG
	c	80CCD	k	80GGA
	d	80CCF	l	80GGC

e	80D		m	80QQB	
f	80DD		n	80RRB	
g	80DDB		o	80U	
h	80E				
p	Total deductions (total of a to o)				p

Schedule 80G | **Details of donations entitled for deduction under section 80G**

DETAILS OF DONATIONS	A	Donations entitled for 100% deduction without qualifying limit				
		Name and address of donee	PAN of Donee	Amount of donation	Eligible Amount of donation	
		i				
		ii				
		iii				
		iv				
		v				
		vi	Total			
	B	Donations entitled for 50% deduction without qualifying limit				
		Name and address of donee	PAN of Donee	Amount of donation	Eligible Amount of donation	
		i				
		ii				
		iii				
		iv				
		v				
		vi	Total			
	C	Donations entitled for 100% deduction subject to qualifying limit				
		Name and address of donee	PAN of Donee	Amount of donation	Eligible Amount of donation	
		i				
		ii				
		iii				
		iv				
		v				
		vi	Total			
D	Donations entitled for 50% deduction subject to qualifying limit					
	Name and address of donee	PAN of Donee	Amount of donation	Eligible Amount of donation		
	i					
	ii					
	iii					
	iv					
	v					
	vi	Total				
E	Total donations (Avi + Bvi + Cvi + Dvi)					

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

SI No	Name of person	PAN of person (optional)	Relationship	Nature of Income	Amount (Rs)
1					
2					
3					

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	SI No	Section code	<input checked="" type="checkbox"/> Special rate (%)	Income i	Tax thereon ii	SI No	Section code	<input checked="" type="checkbox"/> Special rate (%)	Income i	Tax thereon ii
	1	1A	<input type="checkbox"/>	15			6		<input type="checkbox"/>	
2	22	<input type="checkbox"/>	10			7		<input type="checkbox"/>		
3	21	<input type="checkbox"/>	20			8		<input type="checkbox"/>		
4	5BB	<input type="checkbox"/>	30			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	2
	Interest income	
Dividend income		2
Long-term capital gains on which Securities Transaction Tax is paid		3
Net Agriculture income /any other income for rate purpose		4
Share in the profit of firm/AOP etc.		5
Others		6
7 Total (1+2+3+4+5+6)		7

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

TAX PAYMENTS	SI No	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 SI No. 9a & 9c of Part B-TTI

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

TDS ON SALARY	SI No	Tax Deduction Account Number (TAN) of the Employer	Name of the Employer	Income chargeable under Salaries	Total tax deducted
	(1)	(2)	(3)	(4)	(5)
i					
ii					

NOTE Please enter total of column 5 of Schedule-TDS1 and column 7 of Schedule-TDS2 in 9(b) of Part B-TTI

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 of the Deductor	Unique TDS Certificate Number	Financial Year in which TDS is Deducted	Total Tax Deducted	Amount out of (6) claimed This Year
	(1)	(2)	(3)	(4)	(5)	(6)	(7)
	i						
ii							

NOTE Please enter total of column 5 of Schedule-TDS1 and column 7 of Schedule-TDS2 in 8(b) of Part B-TTI

Schedule TR**Details of Tax Relief claimed under section 90 or section 90A or section 91**

DETAILS OF TAX RELIEF	Sl No	Country Name	Country Code	Tax Identification number of the tax payer in respective country	Income (in rupees)	Tax Paid (in rupees)	Total Tax Relief Claimed (in rupees)
	(1)	(2)	(3)	(4)	(5)	(6)	(7)
	i						
ii							

NOTE Please enter the details of column (7) of Schedule TR in 4b or 4c of Part B – TTI

Schedule FA**Details of Foreign Assets**

A Details of Foreign Bank Accounts							
DETAILS OF FOREIGN ASSETS	Sl No	Country Name	Country Code	Name and Address of the Bank	Name mentioned in the account	Peak Balance During the Year (in rupees)	
	(1)	(2)	(3)	(4)	(5)	(6)	
	i						
ii							
B Details of Financial Interest in any Entity							
DETAILS OF FOREIGN ASSETS	Sl No	Country Name (1)	Country Code (2)	Nature of entity (3)	Name and Address of the Entity (4)	Total Investment (at cost) (in rupees) (5)	
	(i)						
	(ii)						
C Details of Immovable Property							
DETAILS OF FOREIGN ASSETS	Sl No (1)	Country Name (2)	Country Code (3)	Address of the Property (4)	Total Investment (at cost) (in rupees) (5)		
	(i)						

(ii)				
D Details of any other Asset				
Sl No (1)	Country Name (2)	Country Code (3)	Nature of Asset (4)	Total Investment (at cost) (in rupees) (5)
(i)				
(ii)				
E Details of account(s) in which you have signing authority and which has not been included in A to D above.				
Sl No (1)	Name of the Institution in which the account is held (2)	Address of the Institution (3)	Name mentioned in the account (4)	Peak Balance/Investment during the year (in rupees) (5)
(i)				
(ii)				