

FORM

ITR-2

INDIAN INCOME TAX RETURN
[For Individuals and HUFs not having Income from Business or Profession]
 (Please see Rule 12 of the Income-tax Rules, 1962)
 (Also see attached instructions)

Assessment Year

2	0	1	3	-	1	4
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Part A-GEN GENERAL

PERSONAL INFORMATION	First name	Middle name	Last name	PAN
	Flat/Door/Block No	Name Of Premises/Building/Village		Status (Tick) <input checked="" type="checkbox"/> Individual <input type="checkbox"/> HUF
	Road/Street/Post Office	Area/locality		Date of Birth (DD/MM/YYYY) (in case of individual) / /
	Town/City/District	State	Pin code	Sex (in case of individual) (Tick) <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female
		Country		
	Residential/Office Phone Number with STD code/ Mobile No. 1	Mobile No. 2		Employer Category (if in employment) (Tick) <input checked="" type="checkbox"/> Govt. <input type="checkbox"/> PSU <input type="checkbox"/> Others
	Email Address-1 (self)	Income Tax Ward/Circle		
Email Address-2				
FILING STATUS	Return filed (Tick) [Please see instruction number-7] <input 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 <input type="checkbox"/> In response to notice <input type="checkbox"/> 139(9)-Defective <input type="checkbox"/> 142(1) <input type="checkbox"/> 148 <input type="checkbox"/> 153A/153C			
	If revised/defective, then enter Receipt No and Date of filing original return (DD/MM/YYYY) / /			
	Residential Status (Tick) <input checked="" type="checkbox"/> Resident <input type="checkbox"/> Non-Resident <input type="checkbox"/> Resident but Not Ordinarily Resident			
	Are you governed by Portuguese Civil Code? Tick) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If "YES" please fill Schedule 5A)			
	Whether this return is being filed by a representative assessee? (Tick) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
	If yes, please furnish following information -			
	(a)	Name of the representative		
(b)	Address of the representative			
(c)	Permanent Account Number (PAN) of the representative			

PART-B

Part B - TI Computation of total income

TOTAL INCOME	1	Salaries (7 of Schedule S)	1
	2	Income from house property (3c of Schedule HP) (enter nil if loss)	2
	3	Capital gains	
	a	Short term	
	i	Short-term (u/s 111A) (enter nil, if loss) (A1a + A 2e of Schedule CG)	3ai
	ii	Short-term (others) (enter nil if loss) ((A5 - A1a - A 2e) of Schedule CG)	3aii
	iii	Total short-term (3ai + 3aii) (A5 of Schedule CG)	3aiii
	b	Long-term (B6 - B3c - B4 of Schedule CG) (enter nil if loss)	3bi
	ii	Long-term without indexation (B3e + B4 of Schedule CG) (enter nil if loss)	3bii
	iii	Total Long-Term (3bi + 3bii)	3biii
c	Total capital gains (3aiii + 3biii) (enter nil if 3c is a loss)	3c	

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