Form No. 2C

[See rule 12(1)(d) of Income-tax Rules, 1962]

Return Of Income

For Persons

not liable to furnish a return of income u/s 139(1) and

residing in such areas as are specified in the enclosed instruction, and

who at any time during the previous year fulfil any one of the conditions specified in first proviso of section 139(1) as mentioned in B below :

A. GENERAL INFORMATION

ITS-2C

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| **1.** | PERMANENT ACCOUNT NUMBER | | | | | | | | | | | | | | | | | | | | ACKNOWLEDGEMENT | |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
|  | (If not applied for or not allotted, enclose Form 49A) | | | | | | | | | | | | | | | | | | | | For Office use only | |
| **2.** | NAME (LAST NAME/SURNAME, FIRST NAME, MIDDLE NAME IN THAT ORDER) | | | | | | | | | | | | | | | | | | | |  | |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | Receipt No. | Date |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | Seal and Signature of Receiving Official | |
| **3.** | ADDRESS FOR COMMUNICATION | | | | | | | | | | | | | | | | | | | |  | |

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|  | (A. RESIDENCE |  | or B. OFFICE |  | ) |  |

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|  | (Flat No./Door/House No., Premises, Road, Locality/Village, Town/District, State/Union Territory in that Order) | | | | | | | | | | | | | | | | | | | |  |
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|  | PIN |  |  |  |  |  |  | TELEPHONE |  |  |  |  |  |  |  |  |  |

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|  | FAX, IF ANY |  |  |  |  |  |  |  |  |  |  |  |

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| **4.** | SEX (M/F) |  |  |  |

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| **5.** | | DATE OF BIRTH (DD-MM-YYYY) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | |  | | | | | - | | |  | | | | | | |  | | | | | | | | | - | |  | | | | | | |  | | | |  | | | |  | | | **6.** | | | | | Status\* | | | | |
| **7.** | | IS THERE ANY CHANGE IN ADDRESS ? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Yes | | | | | | | | | | | | | | | | | | |  | | | | No | | | | | | | | | | | | | | | | | |
|  | | If yes, whether A. Residence | | | | | | | | | | | | | | | | | | | | | |  | | | | | | or B. Office | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **8.** | | WARD/CIRCLE/SPL. RANGE | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | |  | | | |  | | | | | | | | | |
| **9.** | | PREVIOUS YEAR | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | **10.** | | | | | | | | | ASSESSMENT YEAR | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **11.** | | RESIDENTIAL STATUS\* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **12.** | | IS THIS YOUR FIRST RETURN ? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Yes | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | No | | | | | | | | | | | | | | |
|  | | If no, furnish Receipt Number | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | |
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|  | Date of filing of last Return | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | |  | | | | | | | | | - | | | | | | |  | | | | | | | |  | | | | | | | - | | | | | | |  | | | | |  | | | | |  | | | | |  | | | | |  | | | | | | | | |
|  | and Ward/Circle/Special Range where filed | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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\* Fill in code as mentioned in instructions (See **Action Points**)

B. CONDITIONS APPLICABLE AS SPECIFIED IN FIRST PROVISO TO SECTION 139 (1)

Have you at any time during the previous year :—

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| (i) | been in occupation of an immovable property exceeding the | Yes |  | No |  |
|  | specified floor area, whether by way of ownership, tenancy or |  |  |  |  |
|  | otherwise ? |  |  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| (ii) | been the owner or the lessee of a motor vehicle other than a two- | Yes |  | No |  |
|  | wheeled motor vehicle ? |  |  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| (iii) | been a subscriber to a cellular telephone not being a wireless in local loop telephone ? | Yes |  | No |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| (iv) | incurred expenditure for yourself or for any other person on travel | Yes |  | No |  |
|  | to any foreign country ? |  |  |  |  |

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| --- | --- | --- | --- | --- | --- |
| (v) | been a holder of a credit card, not being an “add-on” card, issued | Yes |  | No |  |
|  | by any bank or institution ? |  |  |  |  |

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| --- | --- | --- | --- | --- | --- |
| (vi) | been a member of a club where entrance fee charged is twenty-five | Yes |  | No |  |
|  | thousand rupees or more ? |  |  |  |  |

C. INFORMATION IN RESPECT OF CONDITIONS SPECIFIED IN FIRST PROVISO TO SECTION 139(1)

**1.** Immovable Property : (furnish this information if you satisfy condition B(i) above)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Address of property | Nature of Occupancy (i.e., owner/tenant/ other) | Floor area (in Sq. m.) | If owner | | If tenant/lessee annual rent payable |
|  |  |  | Year of acquisition | Cost of  acquisition |  |
|  |  |  |  |  |  |

**2.** Motor vehicle : (furnish this information if you satisfy condition B(ii) above)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Make of vehicle | Whether owner/ | Registration No. | Year of | Purchase price, | Annual lease |
|  | lessee |  | acquisition | if owned | rent, if on lease |
|  |  |  |  |  |  |

**3.** Cellular telephone (furnish this if you satisfy condition B(iii) above):

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| --- | --- | --- | --- | --- |
| Cellular telephone number(s) (not being a wireless in local loop telephone) |  |  |  |  |

**4.** Expenditure on foreign travel : (furnish this information if you satisfy condition B(iv) above)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name(s) of person travelled (i.e., Self and other(s)) | Passport No. | Countries visited | Period of travel | Fare paid |
|  |  |  |  |  |

**5.** Credit Card : (furnish this information if you satisfy` condition B(v) above)

|  |  |
| --- | --- |
| *Name of credit card held* | Issued by |
|  |  |

**6.** Club membership : (furnish this information if you satisfy condition B(vi) above)

|  |  |  |
| --- | --- | --- |
| Name of club | Nature of Membership | Entrance fee paid |
|  |  |  |

D. STATEMENT OF TOTAL INCOME AND TAXES STATEMENT OF TOTAL INCOME (in Rs.)

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **1.** | Salaries | 101 |  |  |  |  |  |  |  |  |  |  |  |  |

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| **2.** | Income from house property | 102 |  |  |  |  |  |  |  |  |  |  |  |  |

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| **3.** | Profits and gains of business or profession | 103 |  |  |  |  |  |  |  |  |  |  |  |  |

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| **4.** | Capital gains |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  | a. | Short-term | 104 |  |  |  |  |  |  |  |  |  |  |  |  |

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|  | b. | Long-term | 105 |  |  |  |  |  |  |  |  |  |  |  |  |

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| **5.** | Income from other sources | 107 |  |  |  |  |  |  |  |  |  |  |  |  |

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| **6.** | Gross total income (total of 1 to 5) | 110 |  |  |  |  |  |  |  |  |  |  |  |  |

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| **7.** | Deductions under Ch-VIA | 111 |  |  |  |  |  |  |  |  |  |  |  |  |

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| **8.** | Total Income (6 – 7) in words | 123 |  |  |  |  |  |  |  |  |  |  |  |  |
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| **9.** | Net agricultural income for rate purposes | 124 |  |  |  |  |  |  |  |  |  |  |  |  |

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| **10.** | Income claimed exempt | 125 |  |  |  |  |  |  |  |  |  |  |  |  |

E. NO. OF DOCUMENTS/STATEMENTS ATTACHED

|  |  |  |
| --- | --- | --- |
| Description | In Figures | In words |
|  |  |  |

**Verification\***

I (Name in full in block letters), son/daughter/wife of Shri solemnly declare that to the best of my knowledge and belief, the information given in this return is correct, complete and truly stated and is in accordance with the provisions of Income-tax Act, 1961 in respect of the income on which I am chargeable to income-tax for the previous year ended………. relevant to 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 : |  |  | Signature |

\*Any person making a false statement in the return or accompanying schedules or statements 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.