FORM	ITR-V
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INDIAN INCOME TAX RETURN VERIFICATION FORM

[Where the data of the Return of Income/Fringe Benefits in Form ITR-1, ITR-2, ITR-3, ITR-4, ITR-5, ITR-6 & ITR -8 transmitted electronically without digital signature] (Please see rule 12 of the Income-tax Rules,1962) (Also see attached instructions) Assessment Year
2 0 0 9 - 1 0

	NT								DA	NT					
NO	Nan	le							PA			1			
IHI															
INS	Flat	Door/Block No	Name Of Premises	/Buildir	g/Villa	ige				rm No.	wh	ich			
COMPUTATION OF INCOME PERSONALINFORMATION AND THE AND TAX THEREON DATE OF ELECTRONIC TRANSMISSION										s been ctronic					
IIO TIO										nsmitt			Г	ТТ	
MA'	Roa	l/Street/Post Office	Area/Locality							l the co					
FORM TRON															
EC	Tow	n/City/District	State						Ste	atus (fil	1 the				
NAI 7 EL		·			1	Î	1		cod	•	i ine				
SOF OF															
PEH		nation of Assessing Officer (Wa	ard/ Circle)					-		r Revis					
D	E-fili	ng Acknowledgement Number						Date(I	DD/M	M/YYY	YY)		/	/	
	1	Gross total income								1					
	2	Deductions under Chapter-VI-	A							2					
	3	Total Income								3					
INCOME EON	3a	Current Year loss (if any)													
NON	4	Net tax payable													
F INC	5	Interest payable													
I OF	6	Total tax and interest payable													
IOL VOL	7	Taxes Paid													
TAT O TA		a Advance Tax		7a											
IPU		b TDS		7b											
MOX		c TCS		7c											
0		d Self Assessment Tax		7d											
		e Total Taxes Paid (7a+7b	+7c +7d)						'	7e					
	8	Tax Payable (6-7e)								8					
	9	Refund (7e-6)								9					
	10	Value of Fringe Benefits							1	10					
EOI	11	Total fringe benefit tax liability	7						1	11					
IER	12	Total interest payable							1	12					
JF H AX 7	13	Total tax and interest payable							1	13					
NO 17/	14	Taxes Paid		_											
NTI		a Advance Tax		14a											
COMPUTATION OF FRINGE BENEFITS AND TAX TEREON		b Self Assessment Tax		14b											
MP		c Total Taxes Paid (14a+1	4b)							4c					
CO BE	15	Tax Payable (13-14c)								15					
	16	Refund (14c – 13)	VEDIFICA	TION					1	16					
			VERIEI('A'												

I,

son/ daughter of

, holding permanent account number _

Place

solemnly declare that to the best of my knowledge and belief, the information given in the return and the schedules thereto which have been transmitted electronically by me vide acknowledgement number mentioned above is correct and complete and that the amount of total income/ fringe benefits 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 and fringe benefits chargeable to income tax for the previous year relevant to the assessment year 2009-10. 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.

Sign here→

Date

If the return has been prepared by a Tax Return Preparer (TRP) give further details as below:

Identification No. of TRP							Name of TRP		Counter Signature of TRP
For Office Use Only							Seal and Signature of receiving	official	
Re	eipt .	No							
Da	te								

[Notification No. 32/2009 / F.No.142/02/2009 - TPL]

(Vijay K. Jaiswal) Under Secretary to the Government of India

lote.- The principal rules were published vide Notification No.S.O.969(E), dated the 26th March, 1962 and last imended by Income -tax (8th Amendment) Rules, 2009 vide Notification S.O. No. 858 dated 25.03.2009.

Instructions for filling up FORM ITR-V

- . Rule 12(3)(iii) of the Income-tax Rules, 1962 provides that any assessee can file a return of income electronically without the use of a digital signature. In such cases only an acknowledgement needs to be filed with the Department physically by the assessee.
- . Once a return of income is filed electronically on successful transmission of the data, Form ITR-V duly filled shall be generated by the Income-tax Department's server to the assessee. This ITR-V will also contain the acknowledgement number of electronic transmission and the date of the transmission as an evidence of filing for the benefit of the assessee. Please down load a copy of such duly filled Form and verify under your signature in the space provided. In case the return was prepared by a Tax Return Preparer (TRP), the particulars of TRP be also filled and this verification form be countersigned by the TRP.
- . This acknowledgement in Form ITR-V duly signed by the assessee needs to be filed physically (in duplicate) with the concerned Assessing Officer. One copy of this acknowledgement would be returned back to the assessee for his record.
- . The codes for the form number and the status of the assessee shall be generated electronically by the Department's server.
- . The details in item 1 to 16 of this form are to be filled (by the Incometax Department's server) on the basis of relevant entry of concerned ITR form in which the return was transmitted electronically. These are as under-

S1.	Item	Item of the relevant form to be filled against the item in column (i) for the items of this form ITR-V										
No.	No. of	Item No.	Item No. of	Item No. of	Item No. of	Item No. of	Item No. of	Item No. of				
	this	of Form	Form ITR-2	Form ITR-3	Form ITR-4	Form ITR-5	Form ITR-6	Form ITR-8				
	Form	ITR-1										
	i	ii	iii	iv	v	vi	vii	viii				
1	1	3	9 of Part B-	10 of Part B-	10 of Part B-	9 of Part B-	9 of Part B-	Not				
			TI	TI	TI	TI	TI	applicable				
2	2	4m	10 of Part B-	11 of Part B-	11 of Part B-	10 of Part B-	10 of Part B -					
			TI	TI	ΤI	TI	TI					
3	3	5	11 of Part B-	12 of Part B-	12 of Part B-	11 of Part B-	11 of Part B -					
			TI	TI	ΤI	ΤI	TI					
3a	3a	Not	14 of Part B-	15 of Part B-	15 of Part B-	14 of Part B-	14 of Part B -					
		applicable	TI	TI	TI	TI	TI					
4	4	12	6 of Part B-	6 of Part B-	7 of Part B-	7 of Part B-	11 of Part B -					
			TTI	TTI	TTI	TTI	TTI					
5	5	13d	7d of Part B-	7d of Part B-	8d of Part B-	8d of Part B-	12d of Part					
			TTI	TTI	TTI	TTI	B- TTI					
6	6	14	8 of Part B-	8 of Part B-	9 of Part B-	9 of Part B-	13 of Part B -					
	_		TTI	TTI	TTI	TTI	TTI					
7	7a	15a	9a of Part B-	9a of Part B-	10a of Part B -	10a of Part B-	14a of Part					
			TTI	TTI	TTI	TTI	B- TTI					
8	7b	15b	9b of Part B-	9b of Part B-	10b of Part	10b of Part	14b of Part					
	_		TTI	TTI	B- TTI	B- TTI	B- TTI					
9	7c	15c	9c Part B-	9c Part B-	10c Part B-	10c Part B-	14c of Part					
10		NT .	TTI	TTI	TTI	TTI	B- TTI					
10	7d	Not	Not	Not	10d of Part	10d of Part	14d of Part					
11	7	applicable	applicable	applicable	B- TTI	B- TTI	B- TTI					
11	7e	15d	9d of Part B- TTI	9d of Part B- TTI	10e of Part B - TTI	10e of Part B-	14e of Part					
10	8	16	10 of Part B-	10 of Part B-	111 11 of Part B-	TTI 11 of Part B-	B- TTI 15 of Part B -					
12	0	10	TTI	TTI	TTI OF Part B-	TTI OF Part B-	TTI					
13	9	17	11 of Part B-	11 of Part B-	12 of Part B-	12 of Part B-	16 of Part B -					
15	9	17	TTI	TTI	TTI	TTI	TTI					
14	10	Not	Not	Not	Not	111 1e of Part-C	111 le of Part-C	1e of Part-C				
14	10	applicable	applicable	applicable	applicable	5 of Part-C	5 of Part-C	5 of Part-C				
15	11 12	applicable	applicable	applicable	applicable	6c of Part-C	6c of Part-C	6c of Part-C				
17	12					7 of Part-C	7 of Part-C	7 of Part-C				
17	13 14a					8a of Part-C	8a of Part-C	8a of Part-C				
10	14a 14b					8b of Part -C	8b of Part-C	8b of Part-C				
20	140 14c					8c of Part-C	8c of Part-C	8c of Part-C				
20	140					9 of Part-C	9 of Part-C	9 of Part-C				
21	15					10 of Part -C	10 of Part-C	10 of Part-C				

		Governmen	t o	f India							
		INCOME-TAX DI ACKNOWLEI			Г						
Received	l wit	h thanks from						a retu	rn of	inco	me
		of fringe benefits in Form No. ITR for assessm	ent	year 2009-10), having the	fol				meo	/IIIC
	Nan					PA	NT				
	INAL					ra					I
NOL	Flat	/Door/Block No	I	Name Of Pren	nises/Building	/Vil	lage				
LAMA											
NFOI	Roa	d/Street/Post Office	1	Area/Locality							
NALI											
PERSONALINFORMATION	Tow	n/City/District	5	State		Status (fill the code)					
	Des	ignation of Assessing Officer (Ward/ Circle)			Original or	Rev	ised				
	1	Gross total income					1				
	2	Deductions under Chapter-VI-A					2				
	3	Total Income					3				
ME	3a	Current Year loss (if any)				3	la				
ON [C	4	Net tax payable					4				
F IN	5	Interest payable					5				
3a Current Year loss (if any) 3a 4 Net tax payable 4 5 Interest payable 5 6 Total tax and interest payable 6											
TIO IAX	7	Taxes Paid		1							
COMPUTATIO AND TAX			7a 								
AM A			7b			-					
8			7c 7d			-					
	8	Tax Payable (6-7e)				_	7e 8				
	9	Refund (7e-6)					9				
ь <u>н</u> .		Value of Fringe Benefits				_	10				
FRUNG E BENEF ITS AND	11	Total fringe benefit tax liability					1				
12 Total interest payable							2				

	13	Total (tax and interest payable				13	
	14	Taxes	Paid					
		a	Advance Tax		1 4 a			
		b	Self Assessment Tax		14b			
		c	Total Taxes Paid (14a+14b)				14c	
	15	Tax Pa	ayable (13-14c)				15	
	16	Refun	d (14c - 13)				16	
Receipt No		-		Seal a	nd Signat	ure of receiving official		
Dat e								