

SACRED HEART COLLEGE (ATUONOMOUS), TIRUPATTUR, VELLORE DT – 635 601
Income Tax on Salaries and Other Income From 1st April 2017 to March 2018

Name: _____ Designation: _____ P.A.No. _____

1. Total Salary _____
2. Less : Allowances under Section 10(13A) _____
 - (a) Actual amount of rent paid _____
 - (b) 10 % of (Basic Pay + Grade Pay +DA) _____
 - (c) a – b _____
 - (d) 40% of (Basic Pay + Grade Pay +DA) _____
 - (e) Actual amount of HRA received _____

Note : (Actual amount of HRA or rent in excess of 1/10 salary or 40% of salary which ever is the least)(-)

3. Basic Salary (1-2) _____
4. Deductions : Professional Tax _____
5. Income Chargeable under salary (3 – 4) _____
6. Add : Income from any other source: _____
 - (a) Shift-II Remuneration _____
 - (b) Exam Remuneration _____
 - (c) _____

7 Aggregate of 6 (a to c) _____

8. LESS : Interest payable on housing loan (Loan taken after 01-04-1999) _____

9. Gross Total: (5 + 7-8) _____

10. Deduction under Chapter VIA

	Gross Amt. Rs.	Qualifying Amt. Rs	Deductible Amt.Rs.
U/S 80C (Total of form III Maximum Rs.150000)	_____	_____	_____
a) ACPF/CPS	_____	_____	_____
b) Group Insurance	_____	_____	_____
c) SPF	_____	_____	_____
d) Health Insurance	_____	_____	_____
e) Housing Loan	_____	_____	_____
f) Tuition Fees	_____	_____	_____
g) LIC	_____	_____	_____

11. Aggregate of deductible Amount (a+b+c+d+e+f+g) _____ (-)

12. Total Income (9 – 11) (Round off to Rs. 10) _____

13. TAX ON TOTAL INCOME (Round off to Re. 1/-) _____

14. Add : Educational cess @ 3% _____

15. Total Tax (13+14) _____

16. Tax deducted and remitted _____

17. Balance (15-16) (to be deducted in Jan.2018 Rs.....Feb.2018 Rs.....)

CERTIFICATE

1. Certified that the particulars furnished above are correct.
2. Certified that I am occupying rented house at (give address) _____ and I am paying a monthly rent of Rs. _____
3. Certified that I am paying a sum of Rs. _____ towards life Insurance Premia and the Policy/ Policies/ is/ are kept alive.

Dated : _____

Name : _____ Designation: _____ Signature of the Assessee

FORM - III

2017-2018

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1) N.S.Cs. (New)		
No.	Date	Amount
TOTAL		
2) N.S.Cs. (Old Certificates) VIII Issue		

The year for which Interest accrued	01-03-2001 to 28-02-2002	01-03-2002 to 28-02-2003	01-03-2003 to 30-11-2011	01-12-2011 to 31-03-2012	01-04-2012 to 31-03-2013	01-04-2013 onwards	Interest rate Rs. 1000 Per Year
I Year	97.20	92.00	81.60	85.80	87.80	86.80	
II Year	106.70	100.50	88.30	93.10	95.60	94.30	
III Year	117.10	109.70	95.50	101.10	104.00	102.50	
IV Year	128.50	119.80	103.30	109.80	113.10	111.40	
V Year	141.00	130.90	111.70	119.20	123.00	121.10	
VI Year	154.70	142.90	120.80	NA	NA	NA	
Total interest for Section 80C							

3) L.I.P. (Paid by individuals)		
Policy Number	Premium	Amount
Total		

4) Postal Insurance		
Policy Number	Premium	Amount
Total		

* Furnish only the year-wise total amount of all the certificates purchased. Certificate number not necessary

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5) Public Provident Fund		
No.	Date	Amount
Total		
6) Housing Loan (Capital repayment only)		
No.	Date	Amount
Total		
7) ULIP		
No.	Date	Amount
Total		
8) Post office CTD		
10/15 Years	No.	Amount
Total		
9) Any other items		
Total		
Total of 1 to 9 as per Form III (for Section 80C)		
Total Savings as per Form II		
Grand Total		

Certified that all the above entries are correct. (all the entries should be supported by documents).

Signature

Date:

Name : _____

FORM – 12C
(See Rule 26B)

(Form for sending particulars of income under Section 192(2B))

1. Name and address of the employee :
2. Permanent Account Number :
3. Residential Status :
4. Particulars of income under the head of Income :
other than “Salaries” (Not being a loss under any
such head other than the loss under the head
“Income from House Property”) received in the
financial year.
- i) Income from house property (In case :
of loss, enclose computation thereof)
 - ii) Profits and gains of business or :
profession.
 - iii) Capital Gains :
 - iv) Income from other Sources
(a) Dividends :
(b) Interest (including NSC) :
(c) Other incomes (Specify) :
- TOTAL** :
:
:
: _____
:
: _____
5. Aggregate of sub-items (i) to (vi) of item 4 :
6. Tax deducted at source (Enclose Certificate(s) :
issued under Section 203)

Place :

Dated :

Signature of the Employee

VERIFICATION

I, _____ do hereby declare
that what is stated above is true to the best of my knowledge and belief.

Verified today, the _____ day of _____ 2018 .

Place :

Dated :

Signature of the Employee

Extract from Form 3

Income From House Property

1. Address (es) of the Property (ies) _____

2. Self-occupied : Yes / No

3. Annual lettable value / Annual
rent received or receivable
(Whichever is higher) : Rs.

4. Less : Deduction claimed U/S 23

a) : Rs. _____

b) : Rs. _____

c) : Rs. _____

5. Total of 4 Rs . _____

6. Balance (3-5) Rs. _____

7. Less : Deduction claimed U/S 24

a) Repairs : Rs. _____

b) Interest on Loan : Rs. _____

c) : Rs. _____

d) : Rs. _____

8. Total of deductions of 7 Rs . _____

9. Income Chargeable under the
Head “ Income From House Property” (6-8) Rs . _____

Signature of the Employee