INCOME TAX RETURN

For Individuals having business of only Nepalese Source with Turnover up to 12 Lakhs and Profit up to 1.2 Lakh

Fiscal Year _____ IRO Name _____

☐ Tax Assessment Return ☐ Jeopardy Assessment Return as per Income Tax Act 2002, Section 96.5

☐ Partial without De-registration ☐ Partial with De-registration Effective Date (up to) _____

☐ Full without De-registration ☐ Full with De-registration Effective Date (up to) _____

1 TAXPAYER DETAILS

PAN					
Name					
Address	House/ Block No	Ward No.	Village / Area, Street	☐ Metropolitan ☐ Municipality ☐ Sub-Metropolitan ☐ VDC	District

2 FIRM DETAILS

Name					
Address	House/ Block No	Ward No.	Village / Area, Street	☐ Metropolitan / Sub-Metropolitan ☐ Municipality ☐ Others	District

3 CALCULATION OF TAX

		NPR
1	Turnover	
2	Expenses	
3	Income / Loss rows 1–2	
4	Income Tax	
5	Late Filing Charge (as per Income Tax Act 2002, Section 117)	
6	Interests (as per Income Tax Act 2002, Section 119)	
7	TOTAL TAX LIABILITY rows 4+5+6	

4 PAN CLUBBING / REMOTE AREA ALLOWANCE / PENSIONS ALLOWANCE DETAILS

☐ Single ☐ Couple

If Couple, does your Spouse have PAN: ☐ Yes ☐ No

If Yes, PAN of Spouse:

The person who has submitted this return is my wife/husband and shall be responsible for all my tax liabilities.

Name of wife/husband to be included _____ Signature _____

Remote Area Allowance (NPR) _____

Pension Allowance (NPR) _____

Insurance Premium Allowance (NPR) _____

5 TAXPAYER CERTIFICATION

I/we declare I am Nepalese citizen and that my income is of Nepalese source only and that my turnover is below 10 lakhs annually and my profit is below 1 lakhs annually. I/we have elected to apply Section 4.4 of the Income Tax Act 2002. I/we further declare that this income tax return is correct, true, and complete. If any documents submitted along with this income tax return proofs to be false or misleading, I/we are liable to be penalised according to the law.

Signature of Taxpayer or Representative	
Name of Taxpayer or Representative	
Date	
Filing Extension Date (if extended)	

6 OFFICIAL USE ONLY

Return Registration No	
Return Filing Date	
Receiving Officer Name	
Receiving Officer Signature	

For Instructions, read Brochure "Income Tax Forms Instructions"

7 TAX CREDITS DETAILS

	1	2	3	4	5	6	7	8	9
S.No.	Fiscal Year	Revenue Account Heading	Payment Mode	No.	Bank Name	Bank Branch Name	IRO Name	Date	Claim Amount
1									
2									
3									
4									
5									