FORM NO. 121

Declaration under section 393(6) for receipt of certain incomes without deduction of tax

PART A

[To be filled by the person for receipt of certain incomes without deduction of tax] **Cust. ID :**

Details of Declarant

1. Name (refer Note 1)		2. Address (refer Note 2)	
3. Permanent Account Number			
4. Status (refer Note 3)			
5. Residential Status Resident (refer Note 4)			
5. (a) If resident individual, whether age is 60 years or more	Yes / No	6. E-mail id	
7. Contact Number	Country Code +91	Number	
8. Tax Year (for which declaration is made)			

Details of Income

9. Nature of Income : (refer Note 5)	10. Estimated income for which declaration is made ₹
11. Details of Form No. 121 other than this form filed during the tax year, if any	Yes / No
11. (a) Total number of Form No.121 filed earlier	
11. (b) Aggregate amount of income for which Form No.121 were filed	
12. Aggregate amount of income for which declaration is made during the tax year [sum of column 10 and 11(b)]	
13. Estimated total income of the tax year including the income mention in colunm 12	

14. Details of last of the ITR filed for previous two tax years

Sl. No.	Tax Year	Acknowledgement Number	Return Income
1			
2			

Declaration

I, ... having Permanent Account Number ..... do hereby declare that

(i) to the best of my knowledge and belief what is stated above is correct, complete and is truly stated.

(ii) the incomes referred to in this form are not includible in the total income of any other person under sections 96 to 99 of the Act.

(iii) tax on my estimated total income as referred to in column 13 of Part A (including the income referred to in column 12 of Part A) for tax year..... will be nil.

(iv) my income as referred to in column 12 of Part A does not exceed the maximum amount not chargeable to tax for tax year..... *(not to be applicable in case of resident individual of age of sixty years or more)*

(v) in case this declaration is found to be false, I shall be liable to prosecution/penalty under the Act.

Place : Date : Name Signature of the Declarant

PART B

[Verification by the person who has received declaration(s) in Part-A from the declarant(s) and responsible for paying the income in respect of which this declaration is made]

Details of person responsible for paying the income

1. Name **KUMBAKONAM MUTUAL BENEFIT FUND NIDHI LIMITED** (refer Note 1)		2. Address **23 & 24, Dr. Besant Road, Kumbakonam - 612 001.** (refer Note 2)	
3. Tax Deduction and Collection Account Number **CHEK03328D**			
4. Permanent Account Number **AADCT2538C**		5. Email id **kmbf@kmbf.co**	
6. Contact Number	Country Code +91	Number	7. Tax Year

Details of the declarant and the declarations received

8. Name of the declarant (refer Note 1)		9. Permanent Account Number	
10. Unique Identification Number		11. Date of Birth dd/mm/yyyy	
12. Address			
13. Email id			
14. Contact Number	Country Code +91	Number	
15. Estimated income for which declaration is made ₹		(as per column 10 of Part A)	
16. Estimated total income of the tax year of the declarant ₹		(as per column 13 of Part A)	
17. Aggregate amount of income for which declaration is made during the tax year ₹		(as per column 12 of Part A)	
18. Date on which declaration is received		dd/mm/yyyy	

Declaration

I, ..., having Permanent Account Number ..... hereby certify that the information pertaining to the declarant(s) above has been duly furnished as received in Part-A from the declarant(s) and is accurately reported to the best of my knowledge and belief.

Place : Date : Name Signature of the person responsible for paying the income

Notes:

1. In case of individual, the first, middle and last name shall be provided in full without any abbreviations. In any other case also, name shall be provided in full.
2. The address shall contain i. Country/Region, ii. Flat/Door/Building, iii. Road/Street/Block/Sector, iv. PIN/ZIP Code, v. Post Office, vi. Area/locality, vii. District, viii. State.
3. Fill 'person' status as (i) Individual (ii) Hindu undivided family (iii) Company (iv) Firm(v) Association of persons, whether incorporated or not (vi) Body of individuals, whether incorporated or not (vii) Local Authority (viii) Artificial Juridical Person (ix) Government (x) Trust
4. Fill 'residential status' as (i) Resident (ii) Non-resident (iii) Resident but not ordinarily resident.
5. This application is applicable for following incomes, please fill as applicable:
   (a) payment of accumulated balance due to an employee participating in recognized provident fund
   (b) insurance commission for soliciting or procuring insurance business including business related to continuance, renewal, or revival of the insurance policies.
   (c) rent from a specified person
   (d) income in respect of (i) units of a mutual fund, or (ii) units from the Administrator of the specified undertaking, or (iii) units from the specified company
   (e) interest on securities, interest other than interest on securities by a banking company or a co-operative society carrying on the business of banking or interest by a post office for a deposit made under a scheme notified by the Central Government or by Specified person
   (f) payment in respect of life insurance policy including the sum allocated as bonus on such policy
   (g) dividend (including dividend on preference shares) declared by domestic company Refer Section 393(6) for more details.
6. Before signing the verification, the declarant should satisfy himself that the information furnished in the declaration is true, correct and complete in all respects. Any person making a false statement in the declaration shall be liable to prosecution under section 482 of the Act.
7. Some of the information in the form would be pre-filled to the extent possible.
8. Amounts to be filled in ₹ unless otherwise provided.