

For Charitable Institutions

DEPARTMENT OF INLAND REVENUE
(Declaration in terms of Section 133 of the Inland Revenue Act)

To:.....
.....
.....
.....
(Name & Address of the Bank/Financial Institution)

Account No./s :-
.....

YEAR OF ASSESSMENT

DECLARATION (by Charitable Institutions)

I(full Name), on behalf of the
.....(Name of the Charitable Institution) hereby declare that :

1. The Assessable income (total income including interest but excluding exempt income) of
..... (Name of the Charitable Institution)
 - (i) does not exceed **Rs. 500,000/-** for the above year of assessment, * or
 - (ii) exceed **Rs. 500,000/-** for the above year of assessment. *
2. Income Tax File No of the Institution (if any):
- 3 (other, if any)

I hereby further declare that the above declaration made by me is true and correct.

Date

Signature of the declarant
(Trustee/Principal Officer)

(* Please strike off the statements not relevant)