

| FORM NO. 87 [See rule 154] | | | |
|--|--|---|---|
| Information to be furnished to the Income-tax authority under section 254 of the Income-tax Act, 2025 (30 of 2025) | | | |
| Part-A: Personal Information of Business/ Profession | | | |
| 1. | Name | | <i>(Refer Note 1)</i> |
| 2. | Address | | <i>(Refer Note 2)</i> |
| 3. | Permanent Account Number (PAN) | | |
| 4. | Contact details | | |
| | Mobile No. | Country Code | Number |
| | Email ID | | |
| Part-B: Nature of Business/Profession and Other Details | | | |
| 5. | Nature of Business or Profession | | |
| 6. | Year in which the business mentioned in row 5 was started | | |
| 7. | Status of Business or Profession | | <i>(Refer Note 3)</i> |
| 8. | Names and residential addresses of proprietor/partners/members of AOP or BOI/directors | | |
| | (A) | (i) | Name <i>(Refer Note 1)</i> |
| | | (ii) | Type <i>(Select One)</i> (i) Proprietor (ii) Partner (iii) Member of Association of persons (AOP) or Body of Individuals (BOI) (iv) Director |
| | | (iii) | Residential address <i>(Refer Note 2)</i> |
| | (B) | (Repeat, if required) | |
| Part-C: Details of Assessing Officer (AO) assessing the business/profession | | | |
| 9. | Name | | <i>(Refer Note 1)</i> |
| 10. | Designation | | |
| 11. | Place/Office Address | | <i>(Refer Note 2)</i> |
| Part-D: Other Details | | | |
| 12. | (i) | Latest tax year for which a return of income filed | |
| | (ii) | Income shown in the return mentioned in row 12(i) | |
| 13. | (i) | Year in which the premises acquired | |
| | (ii) | Whether the premise is <i>(Select One)</i> | (i) Rented (ii) Self-Owned |
| | (ii) | If answer to row 13(ii) is “rented”, then provide amount of rent paid | |
| | (iv) | If answer to row 13(ii) is “self-owned”, then | |

| | | | |
|------------------------------|---|--|---|
| | | provide amount of price paid | |
| 14. | Number of employees in the business/profession | | |
| 15. | List of the books of account maintained | | (Refer Note 4) |
| 16. | Bank Account Details | | |
| | (i) | Nature of Bank Account | |
| | (ii) | Bank Account Number | |
| | (iii) | Name of Bank | |
| | (iv) | Address of Bank | |
| (Repeat, if required) | | | |
| 17. | Gross sales/receipts details | | |
| | (A) | (i) | Gross sales/receipts for the preceding tax year |
| | | (ii) | Gross sales/receipts for the current tax year till date |
| | (B) | GST Registration Number | |
| 18. | Value of the stock (approximate): | | |
| | (i) | As on 31st March of the preceding tax year | |
| | (ii) | As on this date | |
| 19. | Particulars of cars and other vehicles, if any, owned by the business or profession | | (Refer Note 4) |
| 20. | Income from all sources for the immediately preceding tax year ending 31st March | | |

Verification

I, _____ [name in full and in block letters] *son/daughter/spouse of _____ having Permanent Account Number _____ of _____ in my capacity as (director/partner/proprietor/employee) _____ (specify the capacity as attending to or helping in such business or profession) declare that the information furnished above is true and correct to the best of my knowledge and belief.

***Delete whichever is not applicable.**

Place:.....

Date:.....

Signature of the person furnishing the above information

(Name: _____)

Designation: _____

Notes:

- In case of individual, the first, middle and last name shall be provided in full without any abbreviations. In any other case also, the name shall be provided in full.
- The address shall contain (i) Flat or Door or Block number, (ii) Name of the premises, (iii) Road or Street or Lane, (iv) Area or locality, (v) Town or City or District, (vi) State and (vii) PIN or ZIP Code.
- Fill status as:
 - Hindu undivided family
 - Company

- (iii) Firm
- (iv) Association of persons, whether incorporated or not
- (v) Body of individuals, whether incorporated or not
- (vi) Local Authority
- (vii) Artificial Juridical Person
- (viii) Government
- (ix) Trust
- (x) Limited Liability Partnership

4. Please provide following document as mentioned in row 15 and 19:

| Sl. No. | Annexure | Remarks |
|---------|----------|--|
| 1. | A-1 | Attach list of books of accounts mentioned in row 15. |
| 2. | A-2 | List of cars and other vehicles owned by business or profession in row 19. |

- 5. The assessee who has filed the return of income from the preceding tax year need not furnish information in row 13 to 20.
- 6. Amount to be filled in ₹ unless otherwise provided.
- 7. Some of the Information in the form would be pre-filled to the extent possible.