

INCOME-TAX RULES, 1962

FORM NO. 10A

(See rule 17A)

Application for registration of charitable or religious trust or institution under clause (aa) or clause (ab) of sub-section (1) of section 12A of the Income-tax Act, 1961

Basic Information	PAN A B C D E 1 2 3 4 F	Name (Auto populated)		
	Flat / Door / Block No.	Name of Premises / Building / Village	Road / Street / Post Office	
	Area / Locality	Town/City/District	State(Select)	Country(Select)

	Pin Code	Type of Trust/ Institution (Select) Charitable <input type="checkbox"/> Religious <input type="checkbox"/> Religious-cum-Charitable <input type="checkbox"/>					
	Mobile No. of the Managing Trustee/Chairman/Managing Director/Any authorized person by whatever name called	*E-Mail of the Managing Trustee/Chairman/Managing Director/Any authorized person by whatever name called					
Legal Status	Please specify whether the Trust/Institution is (Select any one) <input type="radio"/> constituted as Public Trust under _____ (please specify name of Act under which constituted as a Public Trust) <input type="radio"/> registered under the Societies Registration Act, 1860 (21 of 1860) or under any law corresponding to that Act in force in any part of India (please specify name of law under which the trust/institution is registered) <input type="radio"/> registered under section 8 of the Companies Act, 2013 (18 of 2013) or under section 25 of the Companies Act, 1956 (1 of 1956) <input type="radio"/> others (please specify) _____						
In case of a Trust	Details of Author(s)/Founder(s)						
	2.	S. No.	Name	PAN	Aadhaar No. (if allotted)	Address	
In case of a Trust/ Society/Company/ Other Institutions	Details of Trustees/Office Bearers/Directors as on the date of filing of application						
	3.	S. No.	Name	Designation	PAN	Aadhaar No. (if allotted)	Address
Purpose	In case of Charitable and Religious cum Charitable trusts, please specify the objects of the Trust/Institution (Selection of at least one object is mandatory.):						
	4.	<input type="checkbox"/> Religious		<input type="checkbox"/> Education			
		<input type="checkbox"/> Relief of the Poor		<input type="checkbox"/> Medical Relief			
		<input type="checkbox"/> Yoga		<input type="checkbox"/> Preservation of Monuments or Places or Objects of Artistic or Historic interest			
		<input type="checkbox"/> Preservation of Environment (including watersheds, forests and wildlife)					
<input type="checkbox"/> Advancement of other objects of general public utility (Please specify)							
In case of application under section 12A(1)(ab)	5.	Is this a case of registration under clause (ab) of sub-section (1) of section 12A :				Yes/No	
	5a.	If Yes, Please provide details of Existing Registration (attach a certified copy of relevant order):					
		Date of Registration	Effective Date	Registration No.	Designation of Registering Authority and Station		

		D	D	M	M	Y	Y	Y	Y									
	5b.	<i>Date of Modification of Objects</i>								D	D	M	M	Y	Y	Y	Y	
MISCELLANEOUS	6.	<i>Whether the trust deed contains clause that the trust is irrevocable?</i>								<i>Yes/ No/ Not Applicable (in case of applicants other than trusts)</i>								
	7.	<i>Whether any application for registration made by the applicant in the past has been rejected?</i>								<i>Yes/No</i>								
	7a.	<i>If yes, then please furnish the following details:</i>																
		<i>Order No.</i>				<i>Order date</i>				<i>Authority which passed the order</i>								
	8.	<i>Whether the applicant is registered under the FCRA, 2010?</i>												<i>Yes/No</i>				
	8a.	<i>If Yes, then please furnish the following details:</i>				<i>Registration No.</i>				<i>Date of Registration</i>								

I _____, son/daughter of _____, hereby declare that the details given in the application are true and correct to the best of my knowledge and belief.

I undertake to communicate forthwith any alteration in the terms of the trust/society/non-profit company, or in the rules governing the Institution, made at any time hereafter. I further declare that I am making this application in my capacity as _____(designation) and that I am competent to make this application and verify it.

Place:

Date:

Signature

Designation

Address

Attachments	<ol style="list-style-type: none">1. <i>Certified copy of the instrument under which the trust/institution was created/established, if applicable</i>2. <i>Certified copy of the document evidencing the creation of the trust or the establishment of the institution, if applicable</i>3. <i>Certified copy of registration with RoC/Registrar of Firms & Societies/Registrar of Public Trusts, whichever applicable</i>4. <i>Certified copy of the documents evidencing adoption or modification of the objects, if any</i>5. <i>Certified copy of the annual reports of the trust/institution for a maximum three immediately preceding financial years, if applicable</i>6. <i>Note on activities</i>7. <i>Certified copy of existing order granting registration under section 12A or section 12AA, if any.</i>	<ol style="list-style-type: none">8. <i>Certified copy of order of rejection of application for grant of registration under section 12A or section 12AA, if any.</i>9. <i>Any other (Please Specify)".</i>
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