

Government of India/State
Department of -----

GSTR-9

[See Rule....]

ANNUAL RETURN

[To be furnished by the 31st December of the next Financial Year]

1. **GSTIN**
2. **Name of the Taxable Person**
- (S. No. 1 and 2 will be auto-populated on logging)
- 2C. **Whether liable to Statutory Audit** Yes No
3. **Date of statutory Audit**
4. **Auditors**

5. Details of expenditure:

- (a) Total value of purchases on which ITC availed (inter-State)

Services

S.No	Description	SAC	Taxable Value	Tax Rate		Tax Credit	
				CGST	SGST	CGST	SGST

C) Total value of purchases on which ITC availed (Imports)

Goods

S.No.	Description	HSN Code	UQC	Quantity	Tax Rate	CIF Value	IGST	CustomDuty paid

Services

S.No.	Description	SAC	Tax Rate	Taxable Value	IGST

(d) Other Purchases on which no ITC availed

(c) Total value of supplies on which GST Paid (Exports)

Goods

S.No	Goods	HSN Code	UQC	Quantity	Tax Rate	FOB Value	IGST	Custom Duty

Services

S.No	Services	SAC	Tax Rate	FOB Value	IGST

(d) Total value of supplies on which no GST Paid (Exports)

Goods

Sl.No	Goods	HSN Code	UQC	Quantity	Tax Rate	FOB Value

Services

Sl.No	Services	SAC	Tax Rate	FOB Value

(e) Value of Other Supplies on which no GST paid

Sl. No.	Goods/Services	Value

(f) Purchase Returns

Goods

Sl. No	Goods	HSN Code	Taxable Value	IGST	CGST	SGST

Services

Sl. No	Services	SAC	Taxable Value	IGST	CGST	SGST

(g) Other Income (Income other than from supplies)

Sl. No.	Specify Head	Amount

7 Return reconciliation Statement

A IGST

Sl. No	Month	Tax Paid	Tax Payable (As per audited a/c)**	Difference	Interest	Penalty
	Total					

B CGST

Sl. No	Month	Tax Paid	Tax Payable (As per audited a/c)**	Difference	Interest	Penalty
	Total					

C SGST

Sl. No.	Month	Tax Paid	Tax Payable (As per audited a/c)	Difference	Interest	Penalty
	Total					

8. OOther Amounts@@**A** Arrears (Audit/Assessment etc.)

Sl. No.	Details of Order	Tax Payable	Interest	Penalty	Current Status of the Order
	Total				

B Refunds

Sl. No.	Details of Claim	Date of Filing	Amount of Refund	Current Status of the claim

This may be divided into parts:-

- i) amount already paid / refund already received during the year,
- ii) amount payable / refund pending.

9. Profit as Per the Profit and Loss**Statement Gross Profit****Profit after****Tax Net Profit**

I _____ hereby declare that the information given in this return is true, correct and complete in every respect. I further declare that I have the legal authority to submit this return.

Place:

Date:

(Signature of Authorized Person)