# IN THE HIGH COURT OF SINDH AT KARACHI

Present:

Muhammad Junaid Ghaffar, J. Agha Faisal, J.

## ITRA No. 276 of 2018

Dr. Zafar Sajjad vs.

Commissioner Inland Revenue Zone-I Regional Tax Office-III Karachi

For the AKUH : M/s. Hussain Ali Almani, Sami-ur-

Rehman Khan, Sameen Hayat, Mustafa Naqvi and Aitzaz Manzoor Memon, Advocates for the Petitioners/AKUH.

For the Respondents : Mr. Kafeel Ahmed Abbasi & Mr. Muhammad

Aqeel Qureshi, Advocate

Date of hearing : 19.04.2021

Date of announcement : 19.04.2021

# **JUDGMENT**

Muhammad Junaid Ghafar, J. The question in this Reference Application is identical in the connected ITRAs and Constitutional Petitions as mentioned in Annexure "A" to this opinion and by consent, Income Tax Reference Applications No.276 of 2018 has been taken as the lead ITRA. It has been filed in terms of section 133 of the Income Tax Ordinance, 2001, ("Ordinance") against a common order dated 05.11.2018 passed by the Appellate Tribunal Inland Revenue, Karachi, whereby, various Appeals of the tax-payers as well as the department have been decided for tax years 2010 and 2011. The proposed question of law is as follows:-

- (a) Whether the payments for clinical supplements and incentives received by the Applicant from its employer are "salary" as defined in Section 12 of the Income Tax Ordinance 2001?
- 2. Learned Counsel for the Applicants submits that the Applicants are permanent employees of Agha Khan University Hospital ("AKUH") pursuant to independent employment contracts and work as a Faculty Members in various departments; that the remuneration of the Applicants is outlined in the salary package which includes salary, clinical supplement and clinical incentive; that the Applicants are not permitted to undertake any non-institutional private practice; that they being full time employees are not permitted to be engaged

in any employment, business or services with another organizations or to have any financial/business interest with any other organization or entity even on a part-time or temporary basis; that they perform their assignment as teachers and professors at the AKUH and are also required to attend and work for the Consultation Clinics; that they are paid fixed salary along with clinical incentive and supplement which is though variable; but is paid on a monthly basis as agreed upon and at the end of the year, is either adjusted or paid in excess depending upon the total receipts earned thereof, but at all times such remuneration remains salary within the contemplation of section 12 of the Income Tax Ordinance 2001; that clause (1) sub clause (2) of Part III of the 2<sup>nd</sup> Schedule to the Ordinance, provides rebate or reduction of tax on the amount of salary so earned; that the respondents issued Show Cause Notices and amended the assessments orders by treating the clinical supplement and incentive as not being salary but other income and disallowed the rebate; that though in one tax year the Commissioner Appeals had decided the issue of clinical incentive partly in favour of the Applicants, but the Tribunal through the impugned, has overturned the same; that the Tribunal has erred in law and has not appreciated the provisions of the Ordinance as reliance has been placed on dictionary meaning of employee, whereas, it has been defined in Section 2 (20) of the Ordinance; that the Tribunal has completely ignored the provision of section 12<sup>1</sup> ibid which provides an exhaustive definition of salary;

<sup>12.</sup> Salary.—(1) Any salary received by an employee in a tax year, other than salary that is exempt from tax under this Ordinance, shall be chargeable to tax in

<sup>(2)</sup> Salary means any amount received by an employee from any employment, whether of a revenue or capital nature, including —

<sup>(</sup>a) any pay, wages or other remuneration provided to an employee, including leave pay, payment in lieu of leave, overtime payment, bonus, commission, fees, gratuity or work condition supplements (such as for unpleasant or dangerous working conditions)

<sup>(</sup>b) any perquisite, whether convertible to money or not;

<sup>(</sup>c) the amount of any allowance provided by an employer to an employee including a cost of living, subsistence, rent, utilities, education, entertainment or travel allowance, but shall not include any allowance solely expended in the performance of the employee's duties of employment;

<sup>(</sup>d) the amount of any expenditure incurred by an employee that is paid or reimbursed by the employer, other than expenditure incurred on behalf of the employer in the performance of the employee's duties of employment;
(e) the amount of any profits in lieu of, or in addition to, salary or wages, including any amount received —

<sup>(</sup>i) as consideration for a person's agreement to enter into an employment relationship;

<sup>(</sup>ii) as consideration for an employee's agreement to any conditions of employment or any changes to the employee's conditions of employment;

<sup>(</sup>iii) on termination of employment, whether paid voluntarily or under an agreement, including any compensation for redundancy or loss of employment and golden handshake payments; (iv) from a provident or other fund, to the extent to which the amount is not a repayment of contributions made by the

employee to the fund in respect of which the employee was not entitled to a deduction; and

<sup>(</sup>v) as consideration for an employee's agreement to a restrictive covenant in respect of any past, present or prospective employment;

<sup>(</sup>f) any pension or annuity, or any supplement to a pension or annuity: and

<sup>(</sup>g) any amount chargeable to tax as "Salary"under section 14. (3) Where an employer agrees to pay the tax chargeable on an employee's salary, the amount of the employee's income chargeable under the head "Salary" shall be grossed up by the amount of tax payable by the employer.

<sup>(4)</sup> No deduction shall be allowed for any expenditure incurred by an employee in deriving amounts chargeable to tax under the head "Salary". (5) For the purposes of this Ordinance, an amount or perquisite shall be treated as received by an employee from any employment regardless of whether the amount or perquisite is paid or provided

<sup>(</sup>a) by the employee's employer, an associate of the employer, or by a third party under an arrangement with the employer or an associate of the employer:

<sup>(</sup>b) by a past employer or a prospective employer; or

<sup>(</sup>c) to the employee or to an associate of the employee or to a third party under an agreement with the employee or an associate of the employee

<sup>(6) .....</sup> 

<sup>(7).....</sup> 

<sup>(8).....</sup> 

that the Tribunal has relied upon the case<sup>2</sup> which is entirely different on facts; that as per definition of salary even profit sharing and commission is also included; that through Finance Act, 2019, a proviso<sup>3</sup> has been introduced in clause (1) sub clause (2) of Part III of the 2<sup>nd</sup> Schedule to the Ordinance which in effect affirms the stance of the Applicants as now their income including that in dispute has been specifically excluded, and in that case it shows the intention of legislature that what was not taxable has now been made taxable; that in Indian jurisdiction (Punjab & Haryana High Court)<sup>4</sup> on identical facts it has been held that the fee earned by such Doctors is nothing but salary as defined in Section 17 of the Income Tax Act, 1962, which is pari-materia to our definition in section 12 ibid; that connected petitions were filed for subsequent tax years wherein show cause notice were issued in respect of the same issue and in view of the law settled<sup>5</sup>, these petitions are maintainable in the given facts and circumstances as the legal question is already before this Court in Reference Applications. By placing reliance on 6 he has prayed for answering the question in favour of the Applicants.

- the impugned Order as well as Show Cause Notice and submits that the entire income of the Applicants does not fall under salary; but is income from professional services/business; hence not entitled for rebate or reduction in terms of Clause (1) sub clause (2) of Part III of the 2<sup>nd</sup> Schedule to the Ordinance as claimed; that section 18 (b) of the Ordinance defines this Income and is to be taxed separately and independently; that section 11 of the Ordinance provides different heads of Income and the component of Income in question has to be dealt with separately and not under salary as a whole; that the proviso inserted in 2019 would not apply retrospectively; hence question be answered against the Applicants.
- **4.** We have heard both the learned Counsel and perused the record. It appears that all Applicants / Petitioners before us are Doctors and employed with AKUH, pursuant to independent employment contracts of similar nature. The relevant employment contract(s) in case of the Applicant in ITRA 276/2018 reads as under;

<sup>&</sup>lt;sup>2</sup> Dr. A. Razzak Kazi vs. Commissioner of Income Tax Hyderabad (1990 PTD 810)

<sup>&</sup>lt;sup>3</sup> Provided that this clause shall not apply to teachers of medical profession who derive income from private medical practice or who receive share of consideration received from patients.

<sup>&</sup>lt;sup>4</sup> Commissioner of Income Tax v Dr. Mrs. Usha Verma (2002) 254 ITR 404

<sup>&</sup>lt;sup>5</sup> Engro Vopak Terminal Ltd vs. Pakistan (2012 PTD 130) & Standard Chartered Bank (Pakistan) Ltd. vs. Pakistan (2017 PTD 1585).

<sup>&</sup>lt;sup>6</sup> Commissioner of Income Tax v I.B.M. SEMEA (2011 PTD 2275), Malik Muhammad Inam v Federation of Pakistan (2006 SCMR 1670), Qasim Ali v Commissioner of Income Tax (2000 PTD 1288).

#### APPOINTMENT AS A FACULTY MEMBER IN THE DEPARTMENT OF RADIOLOGY

Aga Khan Hospital and Medical College Foundation ("Foundation" is pleased to offer you appointment as a Faculty Member in the Department of Radiology, Faculty of Health Sciences. Your academic rank will be confirmed upon approval from the Appointment and Promotions Committee. The Charter of Aga Khan University assures you the privileges of a University Faculty member. Your appointment will be effective from July, 2005.

## 5. RESPONSITBILTIES AND REPORTING RELATIONSHIP.

You will report to the Chair, Department of Radiology, and/or such other person as may be designated by him. A clinician, if appointed to the active consultant staff of Aga Khan University will be responsible to its administration. Your responsibilities will include preparation for and completion of the teaching assigned to you by the Medical College and its curriculum committee.

You may be required to take an active part in the administration and development of the Faculty of Health Sciences and the University Hospital or associated health services. You will be expected to develop your own scholarly and research activities and are encouraged to pursue resources from extra-mural sources, subject to the provisions, rules and regulations of the University. You will not be permitted to undertake non-institutional private practice.

6......Full-time employees of the Institution are not permitted to be engaged in employment, business or service with another organization or have any financial/business interest with any other organization/entity even on a part-time or temporary basis. In this regard, please complete the attached "Conflict of Interest Disclosure Form". Please note that it would be your responsibility to disclose any such information in future also if a situation so develops.

#### Attachment to the salary contract

1. The clinical supplement component of your salary is based on your expected earnings/Gross Physicians Fee Revenue (GPFR) for the year. If this is not earne3d fully, it will need to be recovered against salary payments or any credit balance due to you with the Institution.

### Final Letter issued at the end of year for adjustment of clinical incentive and supplement payment

- 2. A lump sum payment of Rs.427,527 as a clinical incentive payment, which will be paid to you along with the payroll for the month of December 2010. Please note that this payment is based on the actual performance for the period January to November 2010 and estimates for December 2010. The actual amount will be worked out after the close of year, and any amount receivable or payable will be adjusted from your 2011 salary.
- 5. The Applicants filed their tax returns respectively and claimed rebate in terms of Clause (1) sub clause (2) of Part III of the 2<sup>nd</sup> Schedule to the Ordinance; but were issued show cause notice in terms of section 122(9) of the Ordinance for amending their deemed assessment orders issued to them in terms of s.120 ibid. It would be advantageous to refer to one of the Show Cause Notice(s) dated 08.03.2017 which would reflect the crux of the matter as well as the case of the department. The relevant portion of show cause notice in ITRA 276/2018 reads as under:-

FBR
Pakistan
Office of the
Additional Commissioner Inland Revenue
Range A & B Zone-I, RTO-III Karachi
No.AC-IR/A&B/Zone-I/RTO-III/401 dated 08.03.2017

Dr. Zafar Sajjad	
Chair & Assoc Prof. Radiology	
Agha Khan University Hospital	
Karachi	

# SUBJECT: SHOW CAUSE NOTICE U/S 122(9) TO AMEND ASSESSMENT 122 (5A) OF THE INCOME TAX ORDINANCE, 2001 FOR THE TAX YEAR 2011.

Please refer to Income Tax Return e-filed through FBR e-portal, declaring salary income Rs.3,023,056/- for the tax year 2011. The return was treated a deemed assessment order within the meanings of section 120(1) of the Income Tax Ordinance, 2001 (hereinafter is referred as "the Ordinance").

Perusal of the said return and record available with this office, however, reveals that the deemed assessment order [treated to have been issued u/s 120(1) of the Ordinance] is erroneous as well as prejudicial to the interest of revenue on account of the following discrepancies:

- That you have declared only salary income, the tax liability of which was reduced by 75% by claiming rebate under sub-clause (2) of clause (1) of Part-III of second schedule. Whereas, in reality, the receipts earned by you during the year consist of the following components:-
- i. Monthly Salary income, as per employment contract and
- ii. Clinical Supplement income (clinical income upon meeting target revenue of clinical receipts for M/s AKUH).
- iii. Clinical incentive income (by way of lump sum payments)
- iv. Other payments

It is therefore evident that you have:

- a. Unlawfully added the above professional incomes (at serial No's ii, iii and iv above) in your salary income.
- b. Unlawfully reduced your resultant tax liability (by 75% under sub-clause (2) of clause (1) of Part-III of second schedule, since, such a reduction in tax liability is only allowable on "salary" (computed u/s 12 of the ordinance earned by full time teachers/researchers employed by Non-profit organizations; and not on professional/business incomes.

Please explain as to why the deemed assessment order may not be amended u/s 122 (5A) of the ordinance in the manner shown below:

1.	Salary Income	3,023,056
2.	Income from business/profession	
	i. Clinical Supplement income	6,514,284
	ii. Lump sum clinical incentive payments (share from clinical revenue earned for M/s. AKUH)	791,797
3.	Any other payment	0
4.	Total income	10,329,137
5.	Tax liability as per rates applicable (in case of individuals, where salary component is less than 50% of total income	2,582,284
6.	Salary %age	Applicable
7.	Less: allowable tax rebate on salary portion (as provided by sub-clause (2) of clause (1) of Part-III of second schedule)	566823/-
8.	Net Tax liability	2,582,284
9.	Less: tax deducted at source u/s 149 of the ordinance	530,944
10.	Balance payable	1,484,517

6. It is the case of the department that clinical supplement income and clinical incentive income falls outside the definition of salary as contemplated in section 12 ibid; and it is only the amount of salary which is admissible for rebate as a consequence thereof, whereas, all other income falls under separate commercial revenue distribution/sharing arrangements between the Applicant and AKUH which is nothing but indirectly earned professional clinical receipts chargeable to tax under the head Income from business upon which

no rebate is available under clause (1) sub-clause (2) of Part-III of the 2<sup>nd</sup> schedule to the Ordinance<sup>7</sup>.

- 7. The Order of the assessing officer was impugned before the Commissioner Appeals who vide his order dated 15.9.2017 in ITRA No.276/2018 for tax year 2011 dismissed the Appeals and went on to hold that the lump sum payments to the Doctors does not constitute salary and that the lump sum payments made to the specialist doctors by AKU is indeed a colorable device to substantially lower the taxes payable by the doctor(s) and not sustainable in law and thus the facility of rebate under sub-clause (2) of clause (1) of Part-III of the Second Schedule to the Income Tax Ordinance 2001 available on the salary component only, is neither available nor admissible on the lump sum payments paid by way of clinical supplement or incentive to the doctors by the AKUH<sup>8</sup>.
- 8. Insofar as one set of Appeals, for Tax year 2010 is concerned one portion of such income in question Clinical Supplement Income was accepted as falling within salary by the Commissioner Appeals; however, before the Tribunal, the Appeals in respect of tax year 2010 and 2011 have been decided together, including the Appeals of the department against the aforesaid finding of the Commissioner Appeals in favor of the Applicants for tax year 2010. The impugned order has set-aside that finding and so also the Appeals of the Applicants. The Tribunal has passed a very lengthy order, which we believe was quite unnecessary as it has also reproduced the entire pleadings and objections in totality. It has in fact also discussed some irrelevant definitions of the employee and salary components as well; but insofar as undisputed facts are concerned they have been recorded in Para-22 & Para-23 of the impugned order and the same are reads as under:-

22. Before us, the Ld. AR and the Ld. DR repeated their respective positions regarding allowance of rebate on clinical supplement and clinical incentive incomes and other payments, as has been done before the two forums, however, after discussions during hearing both the parties converged to arrive at the following undisputed issues:

## A. Summary of undisputed issues

- i. That the appellant doctors are full-time employees of Aga Khan University and employment contract as Teacher/Researcher was awarded by the Aga Khan Hospital and Medical College Foundation (AKMCHF), which is a company bearing National Tax Number: 0709421-3 and established for the purpose of setting up, maintaining, administering and running teaching hospitals and other health care facilities and medical colleges under the overall umbrella of Aga Khan Development Network.
- ii. That both the entities i.e. M/s Aga Khan Hospital and Medical College Foundation (AKMCHF) are non-profit organizations.

<sup>&</sup>lt;sup>7</sup> Page 16 of the amended assessment order under section 122(5)A of the Ordinance.

Page 9 of the Order of Commissioner Appeals in ITRA 276-2018

- iii. That the appellant doctors are Teachers/Researchers, eligible for tax reduction on their "Salaries" earned as Teachers/Researchers in accordance with sub-clause (2) of clause (1) of Part-III of the 2<sup>nd</sup> Schedule.
- iv. That the appellant doctors have received all sums from their employer i.e. monthly salary, clinical supplement income, clinical incentive income and other payments.
- v. That the appellant doctors do not conduct independent professional clinical practice outside the Aga Khan Hospital.
- vi. That "definite information" regarding break-up of monthly salaries, clinical supplement income, clinical incentive income and other payments was provided by Aga Khan University through their AR M/s A.F. Ferguson and Company, in response to a notice u/s. 176 of the Ordinance. Therefore, all amounts mentioned in the impugned amended assessment orders regarding monthly salaries, clinical supplement income, clinical incentive income(lump sum payments) and other payments are correct.
- vii. That action taken by the Ld. ADCIRs did not suffer from any legal infirmity and remarks of the Ld. CIRs (Appeal) are conclusive and not pressed before this forum.
- 23. It was agreed by both the parties that the core issue involved in the appeal before us is: "whether clinical supplement income, clinical incentive income (lump sum payments) and other payments received by the employee doctors from their employer- Aga Khan University which were paid by the patients to Aga Khan Hospital for their treatment by the respective doctor, can be treated as "salary for the purpose of allowing rebate under sub-clause (2) of clause (1) of Part-III of the 2<sup>nd</sup> Schedule to the Ordinance".
- **9.** After going through the impugned order and the findings of fact as above which have not been challenged any further by the department, the precise question before us in this matter is only to the extent that whether the two separate heads of income (Clinical Supplement and Clinical Incentive) of the Applicants fall within the definition of salary as provided under Section 12 of the Ordinance or not. When section 12 is examined as a whole, it appears that the salary has been given a very exhaustive meaning and means / includes any amount received by an employee from any employment, whether of a revenue or capital nature, including any pay, wages or other remuneration provided to an employee, including leave pay, payment in lieu of leave, overtime payment, **bonus**, **commission**, **fees**, gratuity or work condition supplements such as for unpleasant or dangerous working conditions, any perquisite, whether convertible to money or not. In fact, it goes on to include all sorts of other heads of income which one can imagine.
- 10. Before us it has come on record and is also deciphered from the order of the Tribunal that there are certain issues which are not in dispute, whereas, it is only the Applicants who are before us by way of these ITRA's and not the department. It has been held by the Tribunal that Applicants are Teachers/Researchers, eligible for tax reduction on their "Salaries"; that they have received all sums from their employer i.e. monthly salary, clinical supplement income, clinical incentive income and other payments; that they do not conduct independent professional clinical practice outside the Aga

Khan Hospital; that it was agreed by both the parties that the core issue involved in the appeal before the Tribunal is "whether clinical supplement income, clinical incentive income (lump sum payments) and other payments received by the employee doctors from their employer- Aga Khan University which were paid by the patients to Aga Khan Hospital for their treatment by the respective doctor, can be treated as "salary for the purpose of allowing rebate under sub-clause (2) of clause (1) of Part-III of the 2<sup>nd</sup> Schedule to the Ordinance". This is the entire crux of the matter. And with respect we may observe that the learned Tribunal instead of dilating upon and giving its own interpretation to section 12 of the Ordinance in respect of the question framed by it, engaged itself into unnecessary and irrelevant observations which are not germane to the core issue in these matters. After having agreed on the facts of the case it was only left to decide that whether clinical supplement income and clinical incentive income would fall in "Salary" as defined in s.12 ibid or not. And for that it was only required to see that the Applicants were engaged in any other employment; or had any other source of income; or were engaged in any private practice. All these have already been addressed and answered in favor of the Applicants. The only issue then is that whether the income earned by the Applicants by way of performing their job in respect of consultation and other related matters, exclusively with AKUH could be termed as salary or and income on their own from rendering professional services. Once it has come on record that the Applicants are neither permitted nor are engaged in any other private practice, then the answer to this question was not that difficult. Nonetheless, on perusal of the record and without any specific finding to the contrary, according to us, the consultation which they are required to conduct within AKUH is not their independent practice as wrongly assessed by the forums below. It is within the control and administration of their employer; as neither the Applicants incur any expenditure; nor anybody is taken into employment by them for providing such services; nor do they pay any rent to AKUH for using any of the facilities required for performing this job. It is also not the case of the department that the fee charged to the patients is received by them directly in their names and is then shared with AKUH. In fact it is vice versa. And this sharing is not earned by them as independent professional service providers as they have surrendered and placed their professional expertise at the disposal of AKUH. They may have their own credibility which every professional including a doctor has; but at the same time for the present purposes, merely for the fact that this income is not certain and is paid in a manner which is not quantified until the entire year has passed, cannot be said to be an income which is other

than salary as defined in s.12 of the Ordinance. It has come on record that the entire operations of the Hospital is managed by AKUH, whereas, the amount of charges and fees is also fixed by them. The Applicants are only entitled for a portion of it which forms part of their salary, and is paid to them as an incentive for extending their professional expertise. It is nothing but salary; may be in un-quantified manner on a monthly basis. But for that the law is clear, it includes various types of such payments, like commission, fee and bonus payments to the employees under the head of salary. It appears that since rebate is admissible to the Applicants in respect of taxation to this kind of salary, the department has gone to this extent, whereby it has acted against the very definition of salary provided under the Ordinance. Merely for the reason that these two heads of income are variable and not fixed; it could not be treated as income from professional services. No doubt the Applicants are professionals; but for the present purpose, they are under exclusive employment and it is not in dispute, that whatever they earn is from their employment and is paid to them as a package in the form of salary. It seems that this incentive being variable has not been treated as salary by the authorities below, including the Tribunal, merely for this reason. This in our considered view was an incorrect approach and the authorities below including the Tribunal have seriously erred as the definition of salary does not require that it shall always be fixed in nature. It covers a host of different payments made to the employees including bonus, fees, commission etc etc. and mostly are not necessarily fixed; rather are variable. It also has nexus with the performance of the employee as it is paid either at the end of a particular period; or mostly at the end of the year. Merely for this reason that since this is variable in nature, it could not ipso-facto be treated as an income other than salary. The law does not support this stance of the department; howsoever, attractive it may be to increase burden of tax on the assessee.

11. Insofar as the judgment of learned Division Bench of this Court in the case of *Dr. A. Razzak Kazi* (Supra) is concerned, the same was premised on an entirely different set of facts. In fact, as we read it, it is in favour of the Applicants. In that case the exemption was available to income other than salary and the department was insisting that it was a salary. It was an agreement between the doctor and the company to the effect that fee would be paid to him for his services; that he will render service for treating the employees of the company free of charge; that he will employ people to assist on his own which may include doctors, assistants, technicians etc; that he will be responsible for their salaries; that no relationship of employee and

employer would exist between the doctor and the Company. These are very crucial facts which are lacking in the present case; hence, the ratio of this judgment has to be understood and applied keeping in mind these basic divergent facts. Despite this, as noted earlier, this judgment in fact supports this opinion of ours and the case of the Applicants. It has been held as under;

The question whether remuneration paid to person engaged to perform work is a salary or income from profession, vocation or business depends upon the facts of the case and the terms of employment. There is a thin line of distinction which can be visibly drawn by scanning the contract. Such difficulty arises in cases of professionals like lawyers, chartered accountants, doctors, engineers, artists, directors of a company and other categories of persons who lend their intellect, specialised knowledge and expertise. Where assessee's employment is temporary and incidental to or dependent on profession without any intention to he engaged permanently and further that he is free to lend his services to others as well the income so accrued will not fail under the head salary. When a person joins service and surrenders his profession or `exchanges it for service' thereby permitting the employer to control the manner in which he must work, the remuneration paid to him will be classified as salary. But where there is some doubt in determining such control then if the work performed by the assessee is an integral part of the business or vocation of the employer the relationship of master and servant will be created.

- 12. Application of the aforesaid ratio decides the issue in hand in favor of the Applicants. In the present case, it has not been disputed; rather admitted that the employment of the Applicants is under the control of the employer; whereas, in our considered view the Tribunal has seriously erred in holding that the element of control and supervision is missing between the University and the Applicants while conducting professional clinical services in hospital. This has come from nowhere; nor is supported by the record. The Tribunal has perhaps come to this conclusion pursuant to the variable nature of the said income of the Applicants which we are of the view is not only misconceived; but is based on a wrong presumption of law. We do not understand as to how the Tribunal has come to the conclusion that employer and employee relationship is absent when it has come on record that the Applicants are employees for a specific purpose pursuant to a contract and cannot engage in any other practice/business or service; nor hold consultation outside AKUH.
- 13. In somewhat identical facts in the Indian jurisdiction in the case of *Dr. Mrs. Usha Verma* (Supra) the learned Punjab and Haryana High Court has been pleased to hold that fee in the like manner is to be treated as salary within the mischief of section 17(1) (iv) of the Income Tax Act, 1962 which is almost similar to our section 12 of the Ordinance. The short question was *does the share of fees from paying clinic paid to the assessees fall within the mischief of Section 17(1)(iv) of the Act?* It has been held as under;

Admittedly, the assessees were serving in the Government Medical College. By virtue of their employment with the Government, they were permitted to work in the paying clinics run in the college. Those who chose to work were given a share in the fees. The permission to work in the paying clinic, the rate of fees, the share therein was given by the Government. This share as paid by the Government to its employees would fall within the expression "fees paid in addition to the salary". The doctors got this share by virtue of their being employed in the hospital. They used the facility and infrastructure provided by the employer. Their share of fees was determined by the employer. Thus, it is in addition to their salary for the services permitted to be rendered by the employer. It would fall within the mischief of Section 17(1)(iv) of the Act.20.

Mr. Amrit Paul contended that the payment is not made by the employer but by the patients. Thus, it should be treated as income from profession and not as a part of the salary. The contention is wholly misconceived. In one sense everyone draws salary out of the money paid by the citizen either in the form of tax or in some other form. However, in the present case, the share of fees is given to the doctors in accordance with the terms laid down by the employer. In the circumstances of the case, it cannot be treated as income from profession.

.......These paying clinics were run by the employer. The doctors were paid their share of the fees in accordance with the conditions laid down by the employer. These fees form a part of the salary as contemplated under Section 15 of the Act.

- **14.** A learned division Bench of this Court in the case of *Commissioner of Income Tax*<sup>9</sup> has dilated upon section 12 of the Ordinance and has been pleased to observe that it provides and extended and widest possible meaning. The Honorable Supreme Court in the case of *Malik Muhammad Inam*<sup>10</sup> has held that even an amount received in lieu of termination would cover under s.16 of the repealed Income Tax Ordinance. 1979.
- 15. Lastly as to maintainability of connected petitions we are satisfied that the petitions are maintainable in the circumstances of the present case. As correctly contended by learned Counsel for the petitioners, the impugned show cause notices for tax years 2010, 2011, 2013 & 2014 are based squarely on the same issue which is now before us by way of ITRA against the Tribunal's order and the Department obviously would be bound to follow this order in respect of that petitioner's other tax years, and in the case of other petitioners similarly placed. Resort to statutory remedies below the Tribunal level would therefore be a mere formality. Furthermore, the Tribunal's order is itself before this Court in Income Tax References. In these circumstances, the petitions cannot, and ought not, to be dismissed as not maintainable<sup>11</sup>.
- **16.** Finally, it appears that pending these proceedings before us, and after passing of the impugned order by the Tribunal, through Finance Act, 2019, a proviso has been inserted in sub-clause (2) of clause (1) of Part-III of the Second Schedule to the Ordinance which now provides that *this clause shall not apply to teachers of medical profession who derive income from private medical practice or who receive share of consideration received from patients*. On a

<sup>&</sup>lt;sup>9</sup> Commissioner of Income Tax v I.B.M SEMEA (2011 PTD 2275)

<sup>&</sup>lt;sup>10</sup> Malik Muhammad Inam v Federation of Pakistan (2006 SCMR 1670)

<sup>&</sup>lt;sup>11</sup> Engro Vopak Terminal Ltd vs. Pakistan (2012 PTD 130)

plain reading, it clearly shows that now the intention of the legislature is that from 2019 onwards such income of the Applicants has been excluded from the purview of admissible rebate; and further shows that the earlier it was not excluded. If it had not been admissible earlier, there would have been no need for inserting this proviso for exclusion of this particular income. The legislative intent by not giving retrospective effect to this proviso shows that what was not excluded earlier has now been excluded; however, with effect from Finance Act, 2019. A legislature is deemed to be aware of the previous state of the law and if knowing this it makes a change when repealing it and re-enacting some of its provisions the intention is clearly to effect a change<sup>12</sup>. The proviso therefore, (though not under consideration for the present purposes), clearly shows by the intent of the legislature itself that even otherwise, the benefit / rebate was admissible at least prior to Finance Act, 2019

17. In view of hereinabove facts and circumstances of the case, it appears that the authorities below have failed to appreciate the correct proposition of law and the Ordinance to conclude that the two heads of income as above do not fall within the definition of salary in terms of Section 12 of the Ordinance. Accordingly, the question is answered in the affirmative; in favour of the Applicants and against the respondents. All these Reference Applications are allowed, and as consequence thereof, the Petitions are also allowed to such extent. The notices impugned or pertinent constituents thereof are hereby quashed / set-aside.

**JUDGE** 

JUDGE

<sup>&</sup>lt;sup>12</sup> Pakistan Tobacco Co. Ltd v Karachi Municipal Corporation (PLD 1967 SC 241)

## Annexure "A"

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1.	ITRA 277 of	Dr. Zafar Sajjad vs. Commissioner Inland
	2018	Revenue
2.	ITRA 278 of	Dr. Shahid Pervaiz vs. Commissioner
	2018	Inland Revenue
3.	ITRA 279 of	Dr. Shahid Pervaiz vs. Commissioner
	2018	Inland Revenue
4.	ITRA 280 of	Dr. Khalid Maudood Siddiqui vs. The
	2018	Commissioner Inland Revenue
5.	ITRA 281 of	Dr. Shazia Masheer vs. Commissioner
	2018	Inland Revenue
6.	ITRA 282 of	Shazia Masheer vs. Commissioner Inland
	2018	Revenue
7.	ITRA 283 of	Dr. K.M. Inam Pal vs. Commissioner Inland
0	2018	Revenue
8.	ITRA 284 of	Dr. K.M. Inam Pal vs. Commissioner Inland
	2018	Revenue
9.	ITRA 285 of	Dr. Syed Raziuddin
	2018	Biyabani vs. Commissioner Inland
40	ITDA 200 of	Revenue
10.	ITRA 286 of	Dr. Syed Raziuddin
	2018	Biyabani vs. Commissioner Inland
44	ITD 4 007 of	Revenue
11.	ITRA 287 of	Dr. Muhammad Rizwan
12.	2018	Khan vs. Commissioner Inland Revenue
12.	ITRA 288 of 2018	Dr. Muhammad Rizwan Khan vs. Commissioner Inland Revenue
13.	ITRA 289 of	Dr. Nadeem F. Zubari vs. Commissioner
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14.	2018 ITRA 290 of	Inland Revenue  Dr. Nadeem F. Zubari vs. Commissioner
14.		Inland Revenue
15.	2018 ITRA 291 of	Dr. Muhammad Ataullah
15.	2018	
16.	ITRA 292 of	Khan vs. Commissioner Inland Revenue  Dr. Muhammad Ataullah
10.	2018	Khan vs. Commissioner Inland Revenue
17.	ITRA 293 of	Dr. Bushra Moiz vs. Commissioner Inland
17.	2018	Revenue
18.	ITRA 294 of	Dr. Bushra Moiz vs. Commissioner Inland
10.	2018	Revenue
19.	ITRA 295 of	Dr. Naila Nadeem vs. Commissioner Inland
10.	2018	Revenue
20.	ITRA 297 of	Dr. Muhammad
20.	2018	Khurshid vs. Commissioner Inland
	2010	Revenue
21.	ITRA 298 of	Dr. Naila Kayani vs. Commissioner Inland
	2018	Revenue
22.	ITRA 299 of	Dr. Muhammad Asghar
	2018	Ali vs. Commissioner Inland Revenue
23.	ITRA 300 of	Dr. Nida Najmi vs. Commissioner Inland
	2018	Revenue
24.	ITRA 301 of	Dr. Abdul Rehman vs. Commissioner
	2018	Inland Revenue
25.	ITRA 302 of	Dr. Iqtidar A. Khan vs. Commissioner
	2018	Inland Revenue
26.	ITRA 303 of	Dr. Iqtidar A. Khan vs. Commissioner
	2018	Inland Revenue
27.	ITRA 304 of	Ds. Abdul Monem vs. Commissioner Inland
	2018	Revenue
28.	ITRA 305 of	Dr. Abdul Monem vs. Commissioner Inland
	2018	Revenue
29.	ITRA 306 of	Dr. Muhammad Qamar UI
	2018	Hoda vs. Commissioner Inland Revenue
30.	ITRA 307 of	Dr. Muhammad Qamar Ul
	2018	Hoda vs. Commissioner Inland Revenue
31.	ITRA 308 of	Dr. Fauzia Nasim Minai vs. Commissioner
	2018	Inland Revenue
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32.	ITRA 309 of	Dr. Fauzia Nasim Minai vs. Commissioner
00	2018	Inland Revenue
33.	ITRA 310 of 2018	Dr. Hameedullah
	2018	Saleemullah vs. Commissioner Inland
34.	ITRA 311 of	Dr. Salman Naseem Adil vs. Commissioner
34.	2018	Inland Revenue
35.	ITRA 312 of	Dr. Waseem Ahmed
00.	2018	Memon vs. Commissioner Inland Revenue
36.	ITRA 313 of	Dr. Salman Naseem Adil vs. Commissioner
	2018	Inland Revenue
37.	ITRA 314 of	Dr. Bushra Afroze vs. Commissioner Inland
	2018	Revenue
38.	ITRA 315 of	Dr. Mohammad Asim
	2018	Beg vs. Commissioner Inland Revenue
39.	ITRA 316 of	Dr. Basit Salam vs. Commissioner Inland
40	2018	Revenue Dr. Zubair Ahmed vs. Commissioner Inland
40.	ITRA 317 of 2018	
41.	ITRA 318 of	Revenue Dr. Mohammad Asim
41.	2018	Beg vs. Commissioner Inland Revenue
42.	ITRA 319 of	Dr. Hasanat M. Sharif vs. Commissioner
12.	2018	Inland Revenue
43.	ITRA 320 of	Dr. Hasanat M. Sharif vs. Commissioner
	2018	Inland Revenue
44.	ITRA 321 of	Dr. Mohammad Usman
	2018	Shaikh vs. Commissioner Inland Revenue
45.	ITRA 322 of	Dr. Hameedullah
	2018	Saleemullah vs. Commissioner Inland
46.	ITDA 222 of	Revenue
46.	ITRA 323 of 2018	Dr. Mohammad Usman Shaikh vs. Commissioner Inland Revenue
47.	ITRA 324 of	Dr. Mubashir Ikram vs. Commissioner
.,,	2018	Inland Revenue
48.	ITRA 325 of	Dr. Syed Athar Enam vs. Commissioner
	2018	Inland Revenue
49.	ITRA 326 of	Dr. Raheela Mohsin
	2018	Rizvi vs. Commissioner Inland Revenue
50.	ITRA 327 of	Dr. Gauhar Afshan <b>vs.</b> Commissioner
<u> </u>	2018	Inland Revenue
51.	ITRA 328 of 2018	Dr. Gauhar Afshan <b>vs.</b> Commissioner Inland Revenue
52.	ITRA 329 of	Dr. Fateh Ali Tipoo
32.	2018	Sultan <b>vs.</b> Commissioner Inland Revenue
53.	ITRA 330 of	Dr. Rashida Ahmed <b>vs.</b> Commissioner
	2018	Inland Revenue
54.	ITRA 331 of	Dr. Tahira Yasmeen
	2018	Naru vs. Commissioner Inland Revenue
55.	ITRA 332 of	Dr. Tahira Yasmeen
	2018	Naru vs. Commissioner Inland Revenue
56.	ITRA 333 of	Dr. Mubashir Ikram <b>vs.</b> Commissioner
F-7	2018	Inland Revenue
57.	ITRA 334 of	Dr. Rumina Hasan <b>vs.</b> Commissioner
58.	2018 ITRA 335 of	Inland Revenue  Dr. Rumina Hasan <b>vs.</b> Commissioner
56.	2018	Inland Revenue
59.	ITRA 336 of	Dr. Farhat Abbas <b>vs.</b> Commissioner Inland
	2018	Revenue
60.	ITRA 337 of	Dr. Tabish Chawla vs. Commissioner
	2018	Inland Revenue
61.	ITRA 338 of	Dr. Rozila Sadia Khan vs. C.I.R
	2018	
62.	ITRA 339 of	Dr. Jamsheer J.Talati vs. Commissioner
	2018	Inland Revenue
63.	ITRA 340 of	Dr. Azam Ali <b>vs.</b> Commissioner Inland
64	2018	Pr. Khalid Samad vs. Commissioner Inland
64.	ITRA 341 of 2018	Revenue
	2010	IVEACIINE

65.	ITRA 342 of 2018	Dr.Azam Ali <b>vs.</b> Commissioner Inland Revenue
66.	ITRA 343 of 2018	Dr. Tariq Moatter <b>vs.</b> Commissioner Inland Revenue
67.	ITRA 344 of 2018	Dr. Shamma Munim <b>vs.</b> Commissioner Inland Revenue
68.	ITRA 345 of 2018	Dr. Haroon-ul-Rashid <b>vs.</b> Commissioner Inland Revenue
69.	ITRA 346 of 2018	Dr. Riaz Hussain Y.Lakda Wala vs. Commissioner Inland Revenue
70.	ITRA 347 of	Dr.Farooq Ghani vs. Commissioner Inland
71.	2018 ITRA 348 of	Revenue  Dr. Alliya Begum vs. Commissioner Inland
72.	2018 ITRA 349 of	Revenue  Dr. Fauzia Anis Khan <b>vs.</b> Commissioner
	2018	Inland Revenue
73.	ITRA 350 of 2018	Dr. Tariq Moatter <b>vs.</b> Commissioner Inland Revenue
74.	ITRA 351 of 2018	Dr. Muhammad Hamid <b>vs.</b> Commissioner Inland Revenue
75.	ITRA 352 of	Dr. Ahmeed Nadeem
	2018	Abbasi vs. Commissioner Inland Revenue
76.	ITRA 353of 2018	Dr. Rashid Jooma <b>vs.</b> Commissioner Inland Revenue
77.	ITRA 354 of	Dr. Tabish Chawala vs. Commissioner
70	2018	Inland Revenue
78.	ITRA 355 of 2018	Dr.Farooq Ghani <b>vs.</b> Commissioner Inland Revenue
79.	ITRA 356 of 2018	Dr.Alliya Begum <b>vs.</b> Commissioner Inland Revenue
80.	ITRA 357 of 2018	Dr. Neelofur Babar Khan <b>vs.</b> Commissioner Inland Revenue
81.	ITRA 358 of	Dr. Kausar Jabeen vs. Commissioner
	2018	Inland Revenue
82.	ITRA 359 of 2018	Dr. Robyna Irshad Khan <b>vs.</b> Commissioner Inland Revenue
83.	ITRA 360 of 2018	Dr. Faisal Shamim <b>vs.</b> Commissioner Inland Revenue
84.	ITRA 361 of 2018	Dr. Hasnain Zafar <b>vs.</b> Commissioner Inland Revenue
85.	ITRA 362 of 2018	Dr. Waseem Akhtar Mirza <b>vs.</b> Commissioner Inland Revenue
86.	ITRA 363 of	Dr. Fauzia Anis Khan vs. Commissioner
	2018	Inland Revenue
87.	ITRA 364 of 2018	Dr. Muhammad Sohail Salat <b>vs.</b> Commissioner Inland Revenue
88.	ITRA 365 of	Dr. Saad Shafqat <b>vs.</b> Commissioner Inland
00	2018	Revenue
89.	ITRA 366 of 2018	Dr. Yousuf <b>vs.</b> Commissioner Inland Revenue
90.	ITRA 367 of	Dr. Murtaza Mohammad
91.	2018 ITRA 368 of	Kazmi <b>vs.</b> Commissioner Inland Revenue  Dr. Iffat Ahmed <b>vs.</b> Commissioner Inland
91.	2018	Revenue
92.	ITRA 369 of 2018	Dr. Robyna Irshad Khan <b>vs.</b> Commissioner Inland Revenue
93.	ITRA 370 of 2018	Dr. Sara Sajid <b>vs.</b> Commissioner Inland Revenue
94.	ITRA 371 of 2018	Dr. Muhammad Sohail Salat vs.
95.	ITRA 372 of 2018	Dr. Fateh Ali Tipoo Sultan <b>vs.</b> Commissioner Inland Revenue
96.	ITRA 373 of	Dr. Shama Munim vs. Commissioner
07	2018 ITRA 374 of	Inland Revenue Dr. Mohammad Farhan Raza
97.	2018	Khan <b>vs.</b> Commissioner Inland Revenue
98.	ITRA 375 of 2018	Dr. Samina Ismail <b>vs.</b> Commissioner Inland Revenue

99.	ITRA 376 of 2018	Dr. Khalid Samad <b>vs.</b> Commissioner Inland Revenue
100.	ITRA 379 of 2018	Dr. Tashfeen Ahmad <b>vs.</b> Commissioner Inland Revenue
101.	ITRA 397 of	Dr. Aliya Ahmed vs. Commissioner Inland
102.	2018 ITRA 398 of	Revenue  Dr. Aliya Ahmed vs. Commissioner Inland
400	2018	Revenue
103.	ITRA 399 of 2018	Dr. Pervez M. Hashmi <b>vs.</b> Commissioner Inland Revenue
104.	ITRA 400 of 2018	Dr. Pervez M. Hashmi <b>vs.</b> Commissioner Inland Revenue
105.	ITRA 401 of	Dr. Aamir Hameed Khan <b>vs.</b> Commissioner
106.	2018 ITRA 402 of	Inland Revenue  Dr. Aamir Hameed Khan vs. Commissioner
	2018	Inland Revenue
107.	ITRA 403 of 2018	Dr. Tanveer Anjum Chaudhry <b>vs.</b> Commissioner Inland
400	ITDA 404 - f	Revenue
108.	ITRA 404 of 2018	Dr. Tanveer Anjum Chaudhry vs. Commissioner Inland
400	ITDA 405 (	Revenue
109.	ITRA 405 of 2018	Dr. Muhammad Muneer Amanullah <b>vs.</b> Commissioner Inland
		Revenue
110.	ITRA 406 of 2018	Dr. Muhammad Muneer Amanullah <b>vs.</b> Commissioner Inland
	2016	Revenue
111.	ITRA 407 of	Dr. M. Hammad Ather vs. Commissioner
112.	2018 ITRA 408 of	Inland Revenue  Dr. M. Hammad Ather <b>vs.</b> Commissioner
	2018	Inland Revenue
113.	ITRA 409 of	Dr. Mahnaz N. Shah vs. Commissioner
114.	2018 ITRA 410 of	Inland Revenue  Dr. Mahnaz N. Shah <b>vs.</b> Commissioner
	2018	Inland Revenue
115.	ITRA 411 of 2018	dr. Rustam Khan <b>vs.</b> Commissioner Inland Revenue
116.	ITRA 412 of 2018	dr. Rustam Khan vs. Commissioner Inland Revenue
117.	ITRA 413 of	Dr. Saulat Hasnain
110	2018	Fatimi vs. Commissioner Inland Revenue
118.	ITRA 414 of 2018	Dr. Saulat Hasnain Fatimi vs. Commissioner Inland Revenue
119.	ITRA 415 of	Dr. Mubassar Fida <b>vs.</b> Commissioner
120.	2018 ITRA 416 of	Inland Revenue Dr. Riaz Hussain Y.Lakda
120.	2018	Wala <b>vs.</b> Commissioner Inland Revenue
121.	ITRA 417 of	Dr. Masood Umar vs. Commissioner Inland
122.	2018 ITRA 418 of	Revenue  Dr, Afia Zafar vs. Commissioner Inland
	2018	Revenue
123.	ITRA 419 of 2018	Dr. Rashid Baig <b>vs.</b> Commissioner Inland Revenue
124.	ITRA 420 of	Dr. Imran Siddiqui vs. Commissioner
125.	2018 ITRA 421 of	Inland Revenue  Dr. Uzma Chishti vs. Commissioner Inland
400	2018	Revenue
126.	ITRA 422 of 2018	Dr. Muhammad Nadeem Ahmed vs. Commissioner Inland Revenue
127.	ITRA 423 of 2018	Dr. Shahryar Noordin <b>vs.</b> Commissioner Inland Revenue
128.	ITRA 424 of	Dr. Muhammad Irfan
100	2018	Akhtar vs. Commissioner Inland Revenue
129.	ITRA 425 of 2018	Dr. Muhammad Shehzad Shamim <b>vs.</b> Commissioner Inland
		Revenue

131. ITRA 427 of Dr. Aysha Almas vs. Commissioner Inland Revenue   132. ITRA 428 of Dr. Seema Irfan vs. Commissioner Inland Revenue   133. ITRA 429 of Dr. Muhammad Ehsan Bari vs. Commissioner Inland Revenue   134. ITRA 429 of Dr. Muhammad Ehsan Bari vs. Commissioner Inland Revenue   135. ITRA 431 of Dr. Aysha Habib Khan vs. Commissioner Inland Revenue   136. ITRA 432 of Dr. Shaista Afzal Saeed vs. Commissioner Inland Revenue   137. ITRA 432 of Dr. Shahid Javed Husain vs. Commissioner Inland Revenue   137. ITRA 434 of Dr. Shabib Akhtar vs. Commissioner Inland Revenue   138. ITRA 434 of Dr. Shabbir Akhtar vs. Commissioner Inland Revenue   139. ITRA 435 of Dr. Najmul Islam vs. Commissioner Inland Revenue   139. ITRA 436 of Dr. Najmul Islam vs. Commissioner Inland Revenue   140. ITRA 436 of Dr. Najmul Islam vs. Commissioner Inland Revenue   141. ITRA 10 of Dr. Mohammad Nasir Rehman vs. Commissioner Inland Revenue   142. ITRA 10 of Dr. Zahra Hassan vs. Commissioner Inland Revenue   143. ITRA 11 of Dr. Tanveer UI Haq vs. Commissioner Inland Revenue   144. ITRA 12 of Dr. Muhammad Arif Mateen   2019			
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