Date of filing:29-07-2022

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S.No

PART B GROSS TOTAL INCOME

ITR-1 SAHAJ

INDIAN INCOME TAX RETURN

[For individuals being a resident (other than not ordinarily resident) having total income upto Rs.50 lakh, having Income from Salaries, one house property, other sources (Interest etc.), and agricultural income upto Rs.5 thousand]
[Not for an individual who is either Director in a company or has invested in unlisted equity shares or in cases where TDS has been deducted u/s 194N or if income-tax is deferred on ESOP]

(Refer instructions for eligibility)

Assessment Year 2022 - 23

PART A GENERAL INFORMATION (A2) First Name (A2a) Middle (A3) Last Name (A4) Date of Birth (A5) Aadhaar Number (12 digits) (A1) PAN AWFPT0714K MANOJ Name THAKARE 26-Jun-1996 /Aadhaar Enrolment Id (28 digits) (If **RAJENDRA** eligible for Aadhaar No.) 5xxx xxxx 7635 (A6) Mobile No. (A7) Email Address (A8) Flat/Door/Block (A9) Name of Premises (A10) Road/Street + 91 8446228562 manojthakare26051996@gmail. No. /Building/Village /Post Office, Area Plot area Suraj nagar /Locality com Vardi, **JALGAON** (A11) Town/City/District (A12) State (A13) Country (A14) PIN Code/ZIP Vardi B.O 19-Maharashtra 91-India Code 425107 (A16) Nature of employment-(A15) Filed u/s 139(1)-On or before due date **Public Sector** (Tick) [Please see 139(4)-Belated 139(5)-Revised Central Govt. State Govt. instruction] 119(2)(b)- After Condonation of delay Undertaking CG - Pensioners SG -Pensioners PSU - Pensioners Other (A17) Or Filed in 139(9) 142(1) 148 Pensioners Others Not Applicable (e.g. response to notice Family Pension etc.) (A18) If revised/defective, then enter Receipt No. and Date of filing original return (DD/MM/YYYY) (A19) If filed in response to notice u/s 139(9)/142(1)/148 or order u/s 119(2)(b)- enter Unique Number/Document Identification Number (DIN) & Date of such Notice or Order (A20) Are you opting for new tax regime u/s 115BAC? Yes No (A21) Are you filing return of income under Seventh proviso to section 139(1) but otherwise not required to furnish return of income? -(Tick) Yes Nο If yes, please furnish following information [Note: To be filled only if a person is not required to furnish a return of income under section 139(1) but filing return of income due to fulfilling one or more conditions mentioned in the seventh proviso to section 139(1)] 0 (i) Have you deposited amount or aggregate of amounts exceeding Rs. 1 Crore in one or more current account during the previous year? Yes (ii) Have you incurred expenditure of an amount or aggregate of amount exceeding Rs. 2 lakhs 0 for travel to a foreign country for yourself or for any other person? Yes (iii) Have you incurred expenditure of amount or aggregate of amount exceeding Rs. 1 lakh on 0 consumption of electricity during the previous year? Yes No (iv) Are you required to file a return as per other conditions prescribed under clause (iv) of seventh proviso to section 139(1)) (If yes, please select the relevant condition from the drop down menu) Yes

Amount

Whole - Rupee only

B1	i	Gros	s Salary (ia	a + ib + ic + id + ie)						i		7,10,438
		а	Salary as	s per section 17(1)	ia				7,10,438			
		b	Value of section 1	perquisites as per 7(2)	ib				0			
		С	Profit in I section 1	ieu of salary as per 7(3)	ic				0			
NOI		d	benefit a	rom retirement ccount maintained in d country u/s 89A	id				0			
SALARY / PENSION		е	benefit a	rom retirement ccount maintained in y other than notified u/s 89A	ie				0			
SALA	ii			s to the extent exempt s included in salary inc		17(1)/17((2)/17	(3))		ii		19,710
		á	a	Sec 10(10AA)-Earne encashment on Retir		- Fill	31	0	1	19,710		
	iia	Less	: Income c	laimed for relief from t	axation ι	u/s 89A		13		iia		0
	iii	Net S	Salary (i - ii	- iia)	7				10	iii		6,90,728
	iv	Dedu	uctions u/s	16 (iva + ivb + ivc)				ÿ.		iv		0
		а	Standard	d deduction u/s 16(ia)	iva		W		0	M		
		b	Entertair 16(ii)	nment allowance u/s	ivb				0	K		
		С	Profession	onal tax u/s 16(iii)	ivc		V#7 17	AW TO	0	V		
	V	Inco	me chargea	able under the head 'S	alaries' (i	iii - iv)	जय	ति		B1		6,90,728
B2		applica	ible option upied L	et Out Deemed Le	t Out	वि सल	ो ट	US:	10			
	i	Gros	s rent rece	ived/ receivable/ lettab	ole value	during th	e year	7/2		i		0
	ii	Tax	paid to loca	l authorities	ii		F		0		4	
	iii	Annı	ual Value (i	- ii)						iii		0
≥	iv	30%	of Annual	Value	iv	W F		nΑ	0			
Ä	V	Inter	est payable	e on borrowed capital	V			İK	0			
PROPERTY	vi	Arrea	• •	sed rent received	vi				0			
HOUSE	vii	the fi Note incor	igure in neg : - Maximui me of this y	able under the head 'H gative) m Loss from House pre ear is INR 2,00,000. T lease use ITR-2	operty th	at can be	set-o	off in com	nputing	B2		0
В3	Inco	me fron	n Other Sou	urces						В3		9,810
S.No		Natur	e of Incom	е				Descri	ption (If A ed)	ny Othe	er	Total Amount
1		Intere	st from Sav	ing Bank Account								9,810
Quart	terly k	oreakup	o of Divide	nd Income				-	_			rement benefit account 9A (taxable portion)
i		Up to	15-Jun-202	21		0	i		Up to 15-Jı			0
ii			16-Jun-202			0	ii		- From 16-Ju Sep-2021		to 15-	0

B4	Gross Total Income (B1+B2+B3) (If los Note: To avail the benefit of carry forward	B4	7,00,538			
	Less: Income claimed for relief from taxa		0			
	Less: Deduction u/s 57(iia) (in case of fa	mily pension only)				0
V	From 16-Mar-2022 to 31- Mar-2022 to 31- Mar-2022					0
iv	From 16-Dec-2021 to 15- Mar-2022	0	iv	From 16-Dec-2021 to 15- Mar-2022		0
iii	From 16-Sep-2021 to 15- Dec-2021	0	iii	From 16-Sep-2021 to 15- Dec-2021		0

Part C - Deductions and Taxable Total Income	
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S. No.	Section		Amount	System Calculated
а	80C - Life insurance premia, deferred annuity, contributions to provident fund, subscription to certain equity shares or debentures, etc.	5a	0	C
b	80CCC - Payment in respect Pension Fund,etc.	5b	0	C
С	80CCD(1) - Contribution to pension scheme of Central Government	5c	0	C
d	80CCD(1B) - Contribution to pension scheme of Central Government	5d	0	C
е	80CCD(2) - Contribution to pension scheme of Central Government by employer	5e	0	C
f	80D Deduction in respect of Health Insurance premia (Please fill 80D Schedule. This field is auto-populated from schedule 80D.)	5f	0	C
g	80DD - Maintenance including medical treatment of a dependent who is a person with disability	5g	0	C
h	80DDB - Medical treatment of specified disease	5h	0	(
i	80E - Interest on loan taken for higher education	5i	0	(
j	80EE - Interest on loan taken for residential house property	5j	0	(
k	80EEA - Deduction in respect of interest on loan taken for certain house property	5k	0	C
l	80EEB - Deduction in respect of purchase of electric vehicle	51	0	(
m	80G - Donations to certain funds, charitable institutions, etc. (Please fill 80G Schedule. This field is auto-populated from schedule 80G)	5m	0	(
n	80GG - Rent paid (Please submit form 10BA to claim deduction)	5n	0	C
0	80GGA - Certain donations for scientific research or rural development (Please fill 80GGA Schedule. This field is autopopulated from schedule.)	50	0	C
р	80GGC - Donation to Political party	5р	0	C
q	80TTA - Interest on deposits in savings Accounts	5q	0	(
r	80TTB- Interest on deposits in case of senior citizens	5r	0	(
s	80U-In case of a person with disability	5s	0	(
Total	Deductions (Add items 5a to 5s)		0	(

Date of filing:29-07-2022

Total	Income							7,00,540
Exen	npt incom	e (For reporting Purposes)						
S.No		Nature of Income		Des	scription (If Any Other se	lected)		Total Amount
Total	Exempt In	come		'				0
PAR	TD-CON	PUTATION OF TAX PAYABI	LE					
D1	Tax payable on total income	32,554	D2	Rebate u /s 87A	0	D3	Tax after rebate	32,554
D4	Health and education Cess @4% or D3		D5	Total Tax and Cess	33,856	D6	Relief u/s 89 (Please ensure to submit Form 10 to claim this relie	o E
D7	Interest /s 234A	0	D8	Interest u /s 234B	1,352	D9	Interest of /s 234C	u 1,703
D10	Fee u/s 234F	0	D11	Total Tax, F D6)	ee and Interest (D5 + D7 +	D8 + E	09 + D10 -	36,911
D12	Total Taxes Paid	36,911	D13	Amount payable (D11- D12) (if D11>D12)	0 मेव जयते	D14	Refund (D12- D11) (if D12>D1	0

PART E - OTHER INFORMATION

Details of all Bank Accounts held in India at any time during the previous year (excluding dormant accounts)

SI.	IFS Code of the Bank	Name of the Bank	Account Number	Select Account for Refund Credit
1	HDFC0000007	HDFC BANK	50100256397861	
2	SBIN0002136	STATE BANK OF INDIA	34015025891	

- 1. Minimum one account should be selected for refund credit.
- 2. In case of Refund, multiple accounts are selected for refund credit, then refund will be credited to one of the account decided by CPC after processing the return.

Sc	hed	lule	80 D)
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Whe	ther you or any of your family member (excluding parents) is a senior citizen?	Not claiming for Self/Family
Self	& Family	0
(i)	Health Insurance	0
(ii)	Preventive Health Checkup	0
Self	& Family including Senior Citizen	0
(i)	Health Insurance	0
(ii)	Preventive Health Checkup	0
(iii)	Medical Expenditure (This deduction to be claimed on which health insurance is not claimed at (i) above)	0
	Self (i) (ii) Self (ii) (ii)	Self & Family (i) Health Insurance (ii) Preventive Health Checkup Self & Family including Senior Citizen (i) Health Insurance (ii) Preventive Health Checkup (iii) Preventive Health Checkup (iii) Medical Expenditure (This deduction to be claimed on which health insurance is not

2	Whether	any one of	your paren	ts is a se	nior citizen				Not clai	ming for parents
(a)	Parents									C
	(i) He	alth Insura	nce							C
	(ii) Pr	eventive He	ealth Checl	кир						C
(b)	Parents in	cluding Se	nior Citize	า						(
	(i) He	alth Insura	nce						(
	(ii) Pr	eventive He	ealth Checl	кир						(
		edical Expe imed at (i)	-	is deduc	tion can be	claimed or	n which health ins	urance is not		(
3	Eligible A	mount of D	eduction							(
Sche	dule 80G:	Details of (donations	entitled	for deduct	ion under	section 80G			
	nations ent me mandate		0% deducti	on witho	ut qualifyin	g limit, (who	ere any row is fille	d by the user, all	the fields in that ro	w should
S No.	Name of the	Address	City or	State	Pin code	PAN of		Amount of donation		Eligible Amount of
	Donee		Town or District	Code		the Donee	Donation in cash	Donation in other mode	Total Donation	Donation
-						In	0	0	0	(
Total A			V			L.A.A.	0	0	0	(
		itled for 50°	% deduction	n withou	t qualifying	limit (wher	e any row is filled	by the user, all th	e fields in that row	should become
	onations ent datory) Name of the Donee	Address	City or Town or District	State Code	t qualifying Pin code	PAN of the Donee	e any row is filled Donation in cash	Amount of donation Donation in other	e fields in that row Total Donation	should become Eligible Amount of Donation
mano	Name of the		City or Town or	State		PAN of the		Amount of donation		Eligible Amount of
mano s No.	Name of the		City or Town or	State		PAN of the	Donation in cash	Amount of donation Donation in other	Total Donation	Eligible Amount of
S No.	Name of the Donee	Address	City or Town or District	State Code	Pin code	PAN of the Donee	Donation in cash 0	Amount of donation Donation in other mode 0	Total Donation 0	Eligible Amount of Donation
s No. Total B C. Do	Name of the Donee	Address	City or Town or District	State Code	Pin code	PAN of the Donee	Donation in cash 0	Amount of donation Donation in other mode 0	Total Donation	Eligible Amount of Donation
s No. Total B C. Do	Name of the Donee	Address	City or Town or District	State Code	Pin code	PAN of the Donee	Donation in cash 0	Amount of donation Donation in other mode 0	Total Donation 0	Eligible Amount of Donation ((row should
s No.	Name of the Donee	Address itled for 10	City or Town or District	State Code	Pin code	PAN of the Donee	Donation in cash 0	Amount of donation Donation in other mode 0 0 Illed by the user, a	Total Donation 0	Eligible Amount of Donation () () () () () () () () () (
s No.	Name of the Donee	Address itled for 10	City or Town or District O% deduct City or Town or	State Code	Pin code	PAN of the Donee	Donation in cash 0 0 vhere any row is fi	Amount of donation Donation in other mode 0 0 Illed by the user, a Amount of donation Donation in other	Total Donation 0 0 Ill the fields in that	Eligible Amount of Donation () () () () () () () () () (
s No.	Name of the Donee	Address itled for 10	City or Town or District O% deduct City or Town or	State Code	Pin code	PAN of the Donee	Donation in cash 0 0 where any row is fi	Amount of donation Donation in other mode 0 0 Med by the user, a Amount of donation Donation in other mode	Total Donation 0 0 Ill the fields in that Total Donation	Eligible Amount of Donation () () () () () () () () () () () () ()
Total B C. Do becon S No.	Name of the Donee Donations entered me mandate Name of the Donee	Address itled for 10 ory) Address	City or Town or District O% deduct City or Town or District	State Code	Pin code Pin code	PAN of the Donee Ving limit (W	Donation in cash 0 0 where any row is fi Donation in cash 0	Amount of donation Donation in other mode 0 0 Illed by the user, a Amount of donation Donation in other mode 0 0	Total Donation 0 0 Ill the fields in that Total Donation	Eligible Amount of Donation () () () () () () () () () (
mano s No. Total B C. Do beco s No. Total C D. Do	Name of the Donee Donations end me mandate Name of the Donee	Address itled for 10 ory) Address	City or Town or District O% deduct City or Town or District	State Code	Pin code Pin code	PAN of the Donee Ving limit (W	Donation in cash 0 0 where any row is fi Donation in cash 0	Amount of donation Donation in other mode 0 0 Illed by the user, a Amount of donation Donation in other mode 0 0	Total Donation 0 0 Ill the fields in that Total Donation 0 0	Eligible Amount of Donation Control of Cont
Total B C. Do beco s No. Total C D. Do beco	Name of the Donee Name of the Donee Name of the Donee	Address itled for 10 ory) Address itled for 50 ory)	City or Town or District O% deduct City or Town or District	State Code State Code	Pin code Pin code	PAN of the Donee PAN of the Donee	Donation in cash 0 0 where any row is fi Donation in cash 0	Amount of donation Donation in other mode 0 0 Illed by the user, a Amount of donation Donation in other mode 0 0 ed by the user, all	Total Donation 0 0 Ill the fields in that Total Donation 0 0	Eligible Amount of Donation TOW Should Eligible Amount of Donation Ow Should Eligible Amount of Country Should
Total B C. Do beco s No. Total C D. Do beco	Name of the Donee Donations entime mandate Name of the Donee Donations entime mandate Name of the Donee	Address itled for 10 ory) Address itled for 50 ory)	City or Town or District O% deduct City or Town or District % deduction	State Code State Code State State State State State	Pin code Pin code	PAN of the Donee PAN of the Donee The Donee PAN of the Donee	Donation in cash 0 0 where any row is fi Donation in cash 0 0 ere any row is fill	Amount of donation Donation in other mode 0 0 Illed by the user, a Amount of donation Donation in other mode 0 0 Amount of donation Donation in other mode Donation in other mode	Total Donation 0 0 Ill the fields in that Total Donation 0 0 the fields in that ro	Eligible Amount of Donation TOW Should Eligible Amount of Donation OW Should Eligible Amount of Donation
Total B C. Do beco s No. Total C D. Do beco	Name of the Donee Donations entime mandate Name of the Donee Donations entime mandate Name of the Donee	Address itled for 10 ory) Address itled for 50 ory)	City or Town or District O% deduct City or Town or District % deduction	State Code State Code State State State State State	Pin code Pin code	PAN of the Donee PAN of the Donee The Donee PAN of the Donee	Donation in cash O O there any row is fi Donation in cash O O Donation in cash	Amount of donation Donation in other mode 0 0 Illed by the user, a Amount of donation Donation in other mode 0 0 Amount of donation Donation in other mode Donation in other mode	Total Donation 0 0 Ill the fields in that Total Donation 0 0 the fields in that ro	Eligible Amount of Donation Tow should Eligible Amount of Donation Owner Should

			ociano 0				search or rural d	<u> </u>				
S No	Releva Clause		Name of the	Address	City or Town or	State Code	Pin code	PAN of the	Am	ount of donat	ion	Eligible Amount o
	under deduct claime	tion is	Donee		District	Code		Donee	Donation in cash	Donation in other mode	Total Donation	Donatio
-									0	0	0	
Total D	onation						'	'	0	0	0	
Sche	dule-IT De	tails of	Advance -	Tax and Self	-Assessme	nt Tax pay	ments					
	BSR Code	!			Date of D	eposit (DD	/MM/YYYY)	Serial Nun	nber of Challan			Tax pai
	Col (1)				Col (2)			Col (3)				Col (
1	0510308				29-Jul-202	22		70354				36,9
Total												36,91
Sche	dule TDS1	- Detai	ls of Tax D	Deducted at	Source from	Salary [A	s per form 16 issue	d by Employ	er(s)]			
SI.No). T	AN of tl	he Deducto	or	Name	of the Dec	luctor		Income charge	eable under salaries	Total ⁻	Fax Deducte
	1				2					3		
Total												
Sche	dule TDS2	- Detai	ils of Tax [Deducted at	Source from	n Income (Other than Salary [A	s per form 16	6A issued by Dec	ductor(s)]		
SI. No.	TAN of the Deductor	Ded	ne of the uctor				receipt which is to tax deduction	Year of tax deduction	Та	x Deducted		edit out of (med this ye
	1	2					3	4		5		
Total						M.	गप मूला द					
Sche	dule TDS3	- Detai	ls of Tax D	Deducted at	Source [As	per Form	16C furnished by th	e Payer(s)]				
SI. No.	PAN of the Tenant	Aadha Numbe of the Tenan	er Tena	e of the		Gross	•	Year of tax deduction	Та	x Deducted		edit out of (
	1	2 3				4	5		6			
Total												
Sche	dule TCS -	- Details	s of Tax Co	ollected at S	ource [As p	er form 27	'D issued by the Co	llector(s)]				
SI. No.	Tax Collection Account Number of the Collector	n Col	me of the			Gross	payment which is subject to tax collection	Year of tax collection	Та	x Collected		edit out of (med this ye
	1	2					3	4		5		
Total												

I, MANOJ RAJENDRA THAKARE son/ daughter of RAJENDRA PUNDALIK THAKARE solemnly declare that to the best of my knowledge and belief, the information given in the return is correct and complete and is in accordance with the provisions of the Incometax Act, 1961. I further declare that I am making this return in my capacity as Self and I am also competent to make this return and verify it. I am holding permanent account number AWFPT0714K

Place: 117.99.241.80 Date: 29-07-2022

Identification No. of TRP	Name of TRP	Counter Signature of TRP
If TRP is entitled for any reimbursement from the Gove	rnment, amount thereof 0	

