FORM ITR1 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 2024-25

Date of Filing: 20-Jun-2024\*

			instructions for	eligibility)		
PART A	A GENERAL II	NFORMATION				
(A1) PA	N <b>4757K</b>		(A2) First Name <b>AKANSHA</b>	(A2a) Middle Name	(A3) Last N GOYAL	lame
(A4) Da	ite of Birth 1996		(A5) Aadhaar Number(12 digits)/Aadh eligible for Aadhaar No.) <b>6xxx xxxx 0557</b>	naar Enrolment Id(28 digits) (if	(A6) Mobile + <b>91 8107</b>	
	nail Address nagoyal13@g	ımail.com	(A8) Flat/Door/Block No. <b>7/154 KALYAN BHAWAN</b>	(A9) Name of Premises/Building/Village NAHAR MOHALLA	(A10) Road Area/Locali <b>Ajmer</b>	l/Street/Post Office, ity
(A11) T AJMER	own/City/Distr	ict	(A12) State <b>27-Rajasthan</b>	(A13) Country/Region <b>91-INDIA</b>	(A14) PIN C <b>305001</b>	Code/ZIP Code
(A17) N	lature of empl	oyment		State Government		
(A15)(a	) Filed u/s (Tic	k)[Please see in	struction]	139(1)-On or before due date		
(A16) C	r Filed in resp	onse to notice ι	/s			
	revised/defectors return (DD/M		Receipt No. and Date of filing of			
119(2)(		ue Number/ Do	s 139(9)/142(1)/148/153C or order u/s cument Identification Number (DIN) &			
(A20) □ □ Yes <b>□</b>		exercise the op	tion u/s 115BAC(6) of Opting out of ne	w tax regime ? (default is "No")		
✓ Yes ☐ If yes, p filing re (i) Have foreign ☐ Yes ☐ (ii) Hav	No lease furnish furn of income you incurred country for yo No e you incurred ity during the	following inform due to fulfilling expenditure of ourself or for any	under Seventh proviso to section 1390 ation [Note: To be filled only if a perso one or more conditions mentioned in an amount or aggregate of amount ex other person?  amount or aggregate of amount exce	on is not required to furnish a return o the seventh proviso to section 139(1 sceeding Rs. 2 lakhs for travel to a	f income und	
(iv) Are relevan ☑ Yes ☐	t condition fro	to file a return a om the drop dow	s per other conditions prescribed und n menu)	er clause (iv) of seventh proviso to se	ction 139(1)	(If yes, please select the
SI No.			Nature	A	mount	
(1)			(2)		(3)	
1	during the pre	evious year, in t	d at source and tax collected at source he case of the person, is twenty-five v thousand for resident senior citizen)	e) PAI		28,311
PART E	GROSS TOT	AL INCOME				
B1	i	Gross Salary (i	a + ib + ic + id + ie)		i	1,46,280
						1

	a	Salary as per section 17(1)		ia	1,46,280	
	b	Value of perquisites as per section 17(2)		ib	0	
	С	Profit in lieu of salary as per section 17(3	3)	ic	0	
	d	Income from retirement benefit account 89A	maintained in a notified country u	id	0	
	е	Income from retirement benefit account notified country u/s 89A	maintained in a country other than	ie	0	-
	ii	Less allowances to the extent exempt u/17(1)/17(2)/17(3)]	s 10 [Ensure that it is included in s	alary inc	ome u/s	1,46,280
	SI. No.	Nature of Exempt Allowances	Description ( If Any Other se	lected)	Tot	al Amount
	(1)	(2)	(3)			(4)
	1	Any Other	section 10(16)			146280
	iia	Less : Income claimed for relief from tax	ation u/s 89A		iia	0
	iii	Net Salary (i - ii - iia)	iii	0		
	iv	Deductions u/s 16 (iva + ivb + ivc)			iv	0
	a	Standard deduction u/s 16(ia)		iva	0	
	b	Entertainment allowance u/s 16(ii)		ivb	0	
	С	Professional tax u/s 16(iii)		ivc	0	
	v	Income chargeable under the head 'Sala	ries' (iii - iv)		B1	0
B2		Type Of House Property	a .		B2	
	i	Gross rent received/ receivable/ lettable	value during the year		i	0
	ii	Tax paid to local authorities	ii		0	
	iii	Annual Value (i - ii)	JUNE W		iii	0
	iv	30% of Annual Value	iv		0	
	v	Interest payable on borrowed capital	Shan Stry VIII		0	
	vi	Arrears/Unrealised rent received during	the year less 30% vi	2	0	
	vii	Income chargeable under the head 'Hournegative)	se Property' (iii - iv - v) + vi (If loss	put the	figure in B2	0
В3		Income from Other Sources	TAX DEPART		В3	1,91,843

	SI. No.		Na	ature of Income	Description ( If Any	Other s	selected)		Tota	l Amount	
	(1)			(2)	(3)				(4)		
	1	Intere	st from I	ncome Tax Refund						3,665	
	2			Deposit(Bank/Post ative Society)					1,87,43		
	3	Intere	st from S	Saving Account						745	
				Quarterly breakup of Div	idend Income			ained i		m retirement benefit ed country u/s 89A on)	
		(	(i)	Up to 15-Jun-2023	0	(i)	Up to	15-Jun-2	023	0	
		(	(ii) From 16-Jun-2023 to 15-Sep-2023		0	(ii)	From 16-Jun-2 Sep-2023		n 16-Jun-2023 to 15- 2023		
		(	(iii)	From 16-Sep-2023 to 15-Dec-2023	0	15-Dec-2023			023 to	0	
		(	(iv)	From 16-Dec-2023 to 15-Mar-2024	0			n 16-Dec-2023 to lar-2024		0	
		(	(v)	From 16-Mar-2024 to 31-Mar-2024	0	(v)		L6-Mar-2 r-2024	024 to	0	
		Less	Less: Income claimed for relief from taxa		ation u/s 89A					0	
		Less: Deduction u/s 57(iia) (in case of fa			mily pension only)					0	
34		Gros of c	ss Total arry forv	Income (B1+B2+B3) (If loss, vard and set off of loss, pleas	, put the figure in negativ se use ITR-2	e) Note:	To avail the	e benefit	B4	1,91,843	

### PART C - DEDUCTIONS AND TAXABLE TOTAL INCOME

SI.No.	Section	Amount	System Calculated
C1	80C - Life insurance premia, deferred annuity, contributions to provident fund, subscription to certain equity shares or debentures, etc.	0	0
C2	80CCC - Payment in respect Pension Fund	0	0
С3	80CCD(1) - Contribution to pension scheme of Central Government	0	0
C4	80CCD(1B) -Contribution to pension scheme of Central Government	0	0
C5	80CCD(2) - Contribution to pension scheme of Central Government by employer	0	0
C6	80D - Deduction in respect of health insurance premia	0	0
C7	80DD - Maintenance including medical treatment of a dependent who is a person with disability	5 M	0
		35/1/	7

C8	80DDB - Medical treatment of specified disease -	ARTMIL 0	0
С9	80E - Interest on loan taken for higher education	0	0
C10	80EE - Interest on loan taken for residential house property	0	0
C11	80EEA - Deduction in respect of interest on loan taken for certain house property	0	0
C12	80EEB - Deduction in respect of purchase of electric vehicle	0	0
C13	80G - Donations to certain funds, charitable institutions, etc (Please fill 80G schedule.This field is auto-populated from schedule 80G.)	0	0
C14	80GG - Rent paid (Please submit form 10BA to claim deduction)	0	0
C15	80GGA - Certain donations for scientific research or rural development (Please fill 80GGA Schedule. This field is autopopulated from schedule.)	0	0
C16	80GGC - Donation to Political party	0	0
C17	80TTA - Interest on deposits in saving bank Accounts	0	0
C18	80TTB- Interest on deposits in case of senior citizens.	0	0
C19	80U - In case of a person with disability	0	0
C20	80CCH- Contribution to Agnipath Scheme	0	0
C21	Total deductions (Add items C1 to C18)	0	0

(i)

Health Insurance

Date of Filing: 20-Jun-2024\*

0

Total Income 1,91,840 **EXEMPT INCOME (FOR REPORTING PURPOSES)** SI. **Total Amount Nature of Income Description (If Any Other selected)** No. (1) (2) (3) (4) 0 Total **PART D - COMPUTATION OF TAX PAYABLE** D1 D1 0 Tax payable on total income D2 Rebate u/s 87A D2 0 D3 Tax after rebate D3 0 D4 Health and education Cess @4% on D3 D4 0 D5 Total Tax and Cess D5 0 D6 Relief u/s 89 (Please ensure to submit Form 10E to claim this relief) D6 0 D7 Interest u/s 234A D7 0 D8 D8 Interest u/s 234B 0 D9 Interest u/s 234C D9 0 D10 Fee u/s 234F D10 0 D11 Total Tax, Fee and Interest (D5 + D7 + D8 + D9 + D10 - D6) D11 0 D12 **Total Taxes Paid** D12 28,311 D13 Amount payable (D11-D12) (if D11>D12) D13 0 D14 Refund (D12 - D11) (if D12 > D11) D14 28,310 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** Type of account No. (1) (2) (3) (4) (5) 83102210011234 | Savings Account 1 SYNB0008310 SYNDICATE BANK 2 SBIN0000603 STATE BANK OF INDIA 00000038069669266 Savings Account **SCHEDULE 80D** Whether you or any of your family member (excluding parents) is a senior citizen? Yes Self & Family 0 (a)

<sup>\*</sup>If the return is verified after 30 days of transmission of return data electronically, then date of verification will be considered as date of filing the return (Notification No.05 of 2022 dated 29-07-2022 issued by the DGIT (Systems), CBDT)."

Eligible Amount of Deduction

3

Acknow	vledgemer	nt Number : 464661360200624	Date of Filing: 20-Jun-2024*
	(ii)	Preventive Health Checkup	0
(b)	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
2	Wheth	er any one of your parents is a senior citizen	Yes
(a)	Parent	S	0
	(i)	Health Insurance	0
	(ii)	Preventive Health Checkup	0
(b)	Parent	s including Senior Citizen	0
	(i)	Health Insurance	0
	(ii)	Preventive Health Checkup	0
	(iii)	Medical Expenditure (This deduction can be claimed on which health insurance is not claimed at (i) above)	0

Schedule 80U Details of deduction in case of a person with disability						
SI. No.	Nature of Disability	Amount of Deduction	Date of filing of Form 10IA	Ack. No. of Form 10IA filed	UDID Number (If available)	
(1)	(2)	(3)	(4)	(5)	(6)	
1		0				

0

Sch	edule 80DD	Details of deduction in respect of maintenance including medical treatment of a dependent who is a person with disability.										
SI. No.	Nature of Disability	Amount of Deduction	Type of dependent	Date of filing of Form 10IA	Ack. No. of Form 10IA filed	UDID Number (If available)						
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)				
1		0	o o									

### SCHEDULE 80G DETAILS OF DONATIONS ENTITLED FOR DEDUCTION UNDER SECTION 80G

A. DONATIONS ENTITLED FOR 100% DEDUCTION WITHOUT QUALIFYING LIMIT, (WHERE ANY ROW IS FILLED BY THE USER, ALL THE FIELDS IN THAT ROW SHOULD BECOME MANDATORY)

SI.	. Name of Addison City or PAN of	PAN of the	Am	Eligible						
No.	the Donee	Address	Town or District	State code	Pin code	Donee	Donation in cash	Donation in other mode	Total donation	Amount of Donation
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(9)	(10)	(11)	(12)
Total A							0	0	0	0

<sup>\*</sup>If the return is verified after 30 days of transmission of return data electronically, then date of verification will be considered as date of filing the return (Notification No.05 of 2022 dated 29-07-2022 issued by the DGIT (Systems), CBDT)."

# B. DONATIONS ENTITLED FOR 50% DEDUCTION WITHOUT QUALIFYING LIMIT (WHERE ANY ROW IS FILLED BY THE USER, ALL THE FIELDS IN THAT ROW SHOULD BECOME MANDATORY)

SI.	Name of	lame of Address	City or Town or	State code	Pin code	PAN of the	Am	ount of dona	Eligible Amount of	
No.	the Donee	Address	District	State code	Pili Code	Donee	Donation in cash	Donation in other mode	Total donation	Donation
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(9)	(10)	(11)	(12)
Total B							0	0	0	0

## C. DONATIONS ENTITLED FOR 100% DEDUCTION SUBJECT TO QUALIFYING LIMIT (WHERE ANY ROW IS FILLED BY THE USER, ALL THE FIELDS IN THAT ROW SHOULD BECOME MANDATORY)

SI.	Name of	Address	City or Town or	State code	Din sada	PAN of the	Am	ount of donat	tion	Eligible Amount of
No.	the Donee	Address	District	State code	Pin code	in code		Donation in other mode	Total donation	Donation
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(9)	(10)	(11)	(12)
Total C				N		B M	0	0	0	0

## D. DONATIONS ENTITLED FOR 50% DEDUCTION SUBJECT TO QUALIFYING LIMIT (WHERE ANY ROW IS FILLED BY THE USER, ALL THE FIELDS IN THAT ROW SHOULD BECOME MANDATORY)

SI.	Name of		City or					Amo	Eligible		
No.	the Donee	Address	Town or District	State code	Pin code	Donee	Reference Number)	Donation in cash	Donation in other mode	Total donation	Amount of Donation
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
Total D			/ /	VCO!	1		OTHE	0	0	0	0
E. Tota	l Amount of D	onations (A -	+ B + C + D)		(E TA)	(DEPA		0	0	0	0

SCHE	SCHEDULE 80GGA DETAILS OF DONATIONS FOR SCIENTIFIC RESEARCH OR RURAL DEVELOPMENT										
SI.	Relevant Clause under	Name of		City or			PAN of the	Amount of Donation		Eligible	
No.	which deduction is claimed	the Donee	Address	Town or District	State Code	Pin code	Donee	Donation in Cash	Donation in other mode	Total Donation	Amount of Donation
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
Total								0	0	0	0

SCHED	SCHEDULE 80GGC DETAILS OF CONTRIBUTION MADE TO POLITICAL PARTIES						
SI.	Date	An	nount of Contribut	ion	Eligible Amount of	Transaction Reference number for UPI transfer / Cheque number / IMPS	IFSC code of
No.	Date	Contribution in Cash	Contribution in other mode	Total Contribution	Contribution	/ NEFT / RTGS reference number	Bank
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
Total		0	0	0	0		

TAX PAYMENTS						
SI. No.	BSR Code	Date of Deposit (DD/MM/YYYY)	Serial Number of Challan	Tax paid		
(1)	(2)	(3)	(4)	(5)		
Total		0				

SCHEDULE TDS1 - DETAILS OF TAX DEDUCTED AT SOURCE FROM SALARY [AS PER FORM 16 ISSUED BY EMPLOYER(S)]						
SI. No.	TAN of the Deductor	Name of the Deductor	Income chargeable under salaries	Total Tax Deducted		
(1)	(2)	(3)	(4)	(5)		
1	JPRP01415B	PRINCIPAL GOVERNMENT DENTAL COLLEGE AND HOSPITAL	1,46,280	16,000		
Total		1180	329	16,000		

# SCHEDULE TDS2 - DETAILS OF TAX DEDUCTED AT SOURCE FROM INCOME OTHER THAN SALARY [AS PER FORM 16A ISSUED BY DEDUCTOR(S)]

SI. No.	TAN of the Deductor	Name of the Deductor	Gross receipt which is subject to tax deduction	Year of tax deduction	Tax Deducted	TDS Credit out of (5)claimed this year
(1)	(2)	(3)	(4)	(5)	(6)	(7)
1	MUMH03189E	HDFC BANK LIMITED	29,191	2023	2,919	2,919
2	MUMS86180D	STATE BANK OF INDIA	91,898	2023	9,392	9,392
Total						12,311

### SCHEDULE TDS3 DETAILS OF TAX DEDUCTED AT SOURCE (AS PER FORM 16C FURNISHED BY THE PAYER(S))

SI. No.	PAN of the Tenant	Aadhaar Number of the Tenant	Name of the Tenant	Gross receipt which is subject to tax deduction	Year of tax deduction	Tax Deducted	TDS Credit out of (6) claimed this year
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)

Date of Filing: 20-Jun-2024\*

Tabal	0	
Total	U	
		1

### SCHEDULE TCS

SI. No.	Tax Collection Account Number of the Collector	Name of the Collector	Gross payment which is subject to tax collection	Year of tax collection	Tax Collected	TCS Credit out of (5) claimed this year
(1)	(2)	(3)	(4)	(5)	(6)	(7)
Total						0

#### **VERIFICATION**

I, **AKANSHA GOYAL** son/ daughter of **RAJESH GOYAL** 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 Income-tax 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 **BPPPG4757K** 

Place: 136.226.250.102

Date: 20-Jun-2024

#### If the return has been prepared by a Tax Return Preparer (TRP) give further details below:

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