

ITR-1 SAHAJ INDIVIDUAL INCOME TAX RETURN

(For Individuals having Income from Salaries, One house property,
Other sources (Interest etc.) and having taxable income upto Rs.50 lakh.)

PERSONAL INFORMATION

| | | | |
|--|------------------------------|----------------------|--------------|
| PAN | DGCPS1557P | First Name | RAVICHANDRAN |
| Middle Name | | Last Name | SUJITHKUMAR |
| Aadhaar Number (Please enter the Aadhaar Number which is linked for your PAN in e-Filing portal) | 849147308405 | Aadhaar Enrolment Id | |
| Date of Birth (DD/MM/YYYY) | 23/04/1988 | Mobile no | 9789512514 |
| Email Address | sujithravichandran@gmail.com | | |

Address

| | | | |
|------------------------|--|---------------------------------------|-----------------|
| Flat / Door / Block No | Flat No T9, Fourth F loor, Prabhavathy Pl asma, | Name of Premises / Building / Village | |
| Road/ Street | Ramaiyah Layout, Honga sandra Road | Area/ Locality | Garvebhavipalya |
| Town/ City/ District | Bengaluru | State | KARNATAKA |
| Country | INDIA | PIN Code | 560068 |

Filing Status

| | |
|-------------------------------------|-----------------------------------|
| Employer Category | Others |
| Residential Status | RES - Resident |
| Return filed | 11 - On or Before Due Date 139(1) |
| Whether original or revised return? | Original |

If under section: 139(5) - revised return:

| | |
|---|--|
| Original Acknowledgement Number | |
| Date of filing of Original Return(DD/MM/YYYY) | |

If under section: 139(9) - return in response to defective return notice:

| | |
|--|----|
| Original Acknowledgment Number | |
| Date of filing of Original Return (DD/MM/YYYY) | |
| Notice Number | |
| If filed in response to notice u/s 139(9)/142(1)/148/153A/153C,enter the date of such notice | |
| Are you governed by Portuguese Civil Code as per section 5A ? | No |
| If Yes,Fill PAN of the Spouse | |

Part B Gross Total Income

| | | |
|----|--|--------|
| B1 | Income from Salary /Pension (Ensure to fill Sch TDS1) | 154684 |
| B2 | Type of House Property | |

| | | |
|----|---|--------|
| | Income from one house property(If loss, put the figure in negative) | 0 |
| B3 | Income from other Sources (Ensure to fill Sch TDS2) | 0 |
| B4 | Gross Total Income (B1+B2+B3)(If loss, put the figure in negative) | 154684 |

Part C – Deductions and Taxable Total Income

| S.No. | Section | Amount | System Calculated |
|-------|---|--------|-------------------|
| | 80C | 24334 | 24334 |
| | 80CCC | 0 | 0 |
| | 80CCD(1) | 0 | 0 |
| | 80CCD(1B) | 0 | 0 |
| | 80CCD(2) | 0 | 0 |
| | 80CCG | 0 | 0 |
| | 80D(Maximum eligible amount is 25000. For Senior Citizen, it is 30000) | 153 | 153 |
| | 80DD(Maximum eligible amount is 75000. For Severe Disability, it is 125000) | 0 | 0 |
| | 80DDB(Maximum eligible amount is 40000. For Senior Citizen, it is 60000 and Rs. 80,000 for Very Senior Citizen) | 0 | 0 |
| | 80E | 0 | 0 |
| | 80EE | 0 | 0 |
| | 80G | 0 | 0 |
| | 80GG | 0 | 0 |
| | 80GGA | 0 | 0 |
| | 80GGC | 0 | 0 |
| | 80RRB | 0 | 0 |
| | 80QQB | 0 | 0 |
| | 80TTA | 0 | 0 |
| | 80U(Maximum eligible amount 75000. For Severe Disability, it is 125000) | 0 | 0 |
| C1 | Total Deductions | 24487 | 24487 |

Note:Total deductions under chapter VI A cannot exceed GTI.

| | | |
|----|--------------------------------|--------|
| C2 | Taxable Total Income (B4 - C1) | 130200 |
|----|--------------------------------|--------|

Part D - Computation of Tax Payable

| | | |
|----|---------------------------------|---|
| D1 | Tax Payable on Total Income(C2) | 0 |
| D2 | Rebate u/s 87A | 0 |
| D3 | Tax after Rebate (D1-D2) | 0 |
| D4 | Cess on (D3) | 0 |
| D5 | Total Tax and Cess (D3+D4) | 0 |
| D6 | Relief u/s 89(1) | 0 |

| | | |
|----------|---|---|
| | Balance Tax After Relief (D5-D6) | 0 |
| D7 | Interest u/s 234A | 0 |
| D8 | Interest u/s 234B | 0 |
| D9 | Interest u/s 234C | 0 |
| | Total Interest Payable (D7 + D8 + D9) | 0 |
| D10 | Total Tax and Interest (D5 + D7 + D8 + D9 - D6) | 0 |
| D11(i) | Total Advance Tax Paid | 0 |
| D11(ii) | Total Self Assessment Tax Paid | 0 |
| D11(iii) | Total TDS Claimed | 0 |
| D11(iv) | Total TCS Collected | 0 |
| D11(v) | Total Taxes Paid(D11[(i) + (ii) + (iii) + (iv)]) | 0 |
| D12 | Amount payable (D10 -D11)(if D10 > D11) | 0 |
| D13 | Refund(D11 - D10)(if D11 > D10) | 0 |

Exempt income (For reporting Purposes)

| | | |
|-------|---------------------------------|---|
| (i) | Sec.10(38) | 0 |
| (ii) | Sec.10(34) | 0 |
| (iii) | Agriculture Income (<= Rs.5000) | 0 |

(iv) Others

| S.No. | Nature of Income | Amount |
|-------|------------------|--------|
| 1 | | |

Part E – Other Information

| | |
|--|-----|
| D14. Do you have any Bank Account in India? | Yes |
|--|-----|

a) Bank Account in which refund, if any, shall be credited

| | | | | |
|-------|----------------------|------------------|--|--|
| S.No. | IFS Code of the bank | Name of the bank | Account Number (the number should be 9 digits or more as per CBS system of the bank) | Cash deposited during 09.11.2016 to 30.12.2016 (if aggregate cash deposits during the period >= Rs.2 lakh) |
| 1 | HDFC0000031 | HDFC Bank Ltd | 00311050209787 | |

b) Other Bank account details

| | | | | |
|-------|----------------------|------------------|--|--|
| S.No. | IFS Code of the bank | Name of the bank | Account Number (the number should be 9 digits or more as per CBS system of the bank) | Cash deposited during 09.11.2016 to 30.12.2016 (if aggregate cash deposits during the period >= Rs.2 lakh) |
| 1 | | | | |

c) Details of Bank Account held outside India by Non-Resident (excluding dormant accounts)

| S.No. | IBAN/SWIFT code | Name of the bank | Country of Location | Account Number |
|-------|-----------------|------------------|---------------------|----------------|
| 1 | | | | |

TAX DETAILS

| TDS1 | | Details of Tax Deducted at Source from Salary [As per Form 16 issued by Employer(s)] | | | | | | | | | | | | | | | | | |
|--|---|---|---|---|------------------------------------|---|--|--------------------------------|--|--|--|--|--|--|--|--|--|--|--|
| S.No. | Tax Deduction Account Number (TAN) of the Deductor [Col (1)] | Name of Employer [Col (2)] | | Income chargeable under Salaries [Col (3)] | | Total Tax Deducted [Col (4)] | | | | | | | | | | | | | |
| 1 | BLRM05685B | OMEGA HEALTHCARE MANAGEMENT SERVICES PRIVATE LIMITED | | | 196129 | 0 | | | | | | | | | | | | | |
| TOTAL | | | | | | | | 0 | | | | | | | | | | | |
| TDS2 | | Details of Tax Deducted at Source other than salary | | | | | | | | | | | | | | | | | |
| S.No. | Tax Deduction Account Number (TAN) of the Deductor [Col (1)] | Name of the Deductor [Col (2)] | Amount which is subject to tax deduction [Col (3)] | Deduction year [Col (4)] | Tax Deducted [Col (5)] | Amount out of (5) claimed for this year [Col (6)] | Amount claimed in the hands of spouse if section 5A is applicable [Col (7)] | | | | | | | | | | | | |
| 1 | | | | | | | | | | | | | | | | | | | |
| TOTAL | | | | | | | | 0 | | | | | | | | | | | |
| TCS | | Details of Tax Collected at Source | | | | | | | | | | | | | | | | | |
| S.No. | Tax Collection Account Number of the Collector [Col (1)] | Name of the Collector [Col (2)] | Amount which is subject to tax collection [Col (3)] | Collection year [Col (4)] | Tax Collected [Col (5)] | Amount out of (5) claimed this year [Col (6)] | Amount claimed in the hands of spouse if section 5A is applicable [Col (7)] | | | | | | | | | | | | |
| 1 | | | | | | | | | | | | | | | | | | | |
| TOTAL | | | | | | | | 0 | | | | | | | | | | | |
| IT | | IT Details of Advance Tax and Self Assessment Tax Payments | | | | | | | | | | | | | | | | | |
| S.No. | BSR Code [Col (1)] | | Date of deposit (DD/ MM/YYYY) [Col (2)] | | Serial Number of Challan [Col (3)] | | Tax paid [Col (4)] | | | | | | | | | | | | |
| 1 | | | | | | | | | | | | | | | | | | | |
| TOTAL | | | | | | | | 0 | | | | | | | | | | | |
| Instructions for correct calculation of 80G | | | | | | | | | | | | | | | | | | | |
| A. Donations entitled for 100% deduction without qualifying limit | | | | | | | | | | | | | | | | | | | |
| S No. | Name of the Donee | Address | City or Town or District | State Code | Pincode | PAN of the Donee | Amount of donation | Eligible Amount of Donation | | | | | | | | | | | |
| 1 | | | | | | | | 0 | | | | | | | | | | | |
| Total A | | | | | | | 0 | 0 | | | | | | | | | | | |
| B. Donations entitled for 50% deduction without qualifying limit | | | | | | | | | | | | | | | | | | | |
| S No. | Name of the Donee | Address | City or Town or District | State Code | Pincode | PAN of the Donee | Amount of donation | Eligible Amount of Donation | | | | | | | | | | | |
| 1 | | | | | | | | 0 | | | | | | | | | | | |

| Total B | | | | | | | 0 | 0 |
|---|-------------------|---------|--------------------------|------------|-----------|------------------|--------------------|-----------------------------|
| C. Donations entitled for 100% deduction subject to qualifying limit | | | | | | | | |
| S No. | Name of the Donee | Address | City or Town or District | State Code | Pincode | PAN of the Donee | Amount of donation | Eligible Amount of Donation |
| 1 | | | | | | | | 0 |
| Total C | | | | | | | 0 | 0 |
| D. Donations entitled for 50% deduction subject to qualifying limit | | | | | | | | |
| S No. | Name of the Donee | Address | City or Town or District | State Code | Pincode | PAN of the Donee | Amount of donation | Eligible Amount of Donation |
| 1 | | | | | | | | 0 |
| Total D | | | | | | | 0 | 0 |
| E. Donations (A + B + C+ D) | | | | | | | 0 | 0 |
| VERIFICATION | | | | | | | | |
| <p>I, <u>RAVICHANDRAN SUJITHKUMAR</u> son/daughter of, <u>RAVICHANDRAN</u> , solemnly declare that to the best of my knowledge and belief, the information given in the return is correct and complete and are in accordance with the provisions of the Income- tax Act 1961.</p> | | | | | | | | |
| Place | BENGALURU | Date | 25/07/2017 | PAN | DGCP1557P | | | |