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

PART A GI	ENERAL INF	ORMATION					
(A1) PAN BNQPV87	32E		(A2) First Name	(A2a) Middle Name		A3) Last N /AIBHAV	ame
(A4) Date o			(A5) Aadhaar Number(12 digits)/Aad eligible for Aadhaar No.) 8xxx xxxx 3989	digits)/Aadhaar Enrolment ld(28 digits) (if			e No 802522
(A7) Email vaibhavdu	Address urgad@gma	il.com	(A8) Flat/Door/Block No. 4/49	(A9) Name of Premises/Building/Villa	igo.	Area/Locali	/Street/Post Office, ty B.O Nimberga
(A11) Town	n/City/District A		(A12) State 15-Karnataka	(A13) Country/Region 91-INDIA		A14) PIN C 85213	Code/ZIP Code
(A17) Natu	re of employ	ment		Others			
(A15)(a) Fil	led u/s (Tick)	[Please see in	struction]	139(1)-On or before	due date		
(A16) Or Fi	led in respon	se to notice u	/s				
	vised/defectiv urn (DD/MM/		Receipt No. and Date of filing of				
119(2)(b)-		Number/ Doo	s 139(9)/142(1)/148/153C or order u/s cument Identification Number (DIN) &				
	ou wish to ex		tion u/s 115BAC(6) of Opting out of ne	ew tax regime ? (default	is "No")		
☐ Yes ☑ No If yes, pleas	o se furnish foll	owing inform	under Seventh proviso to section 139	on is not required to furr	· nish a return of i		, ,
(i) Have yo	u incurred ex intry for your	penditure of	one or more conditions mentioned in an amount or aggregate of amount ex or other person?)	
electricity o ☐ Yes ☑ No	during the pr	evious year?	amount or aggregate of amount exce				(16
	ndition from	the drop dow	s per other conditions prescribed und n menu)	ier clause (IV) of seventr	n proviso to sect	ion 139(1)	(If yes, please select the
SI No.			Nature		Amo	ount	
(1)			(2)		(:	3)	
			TE IAX	DEPAIN			
PART B GI	ROSS TOTAL	LINCOME					
B1	i G	ross Salary (ia	a + ib + ic + id + ie)			i	3,98,908
	a S	alary as per s	ection 17(1)		ia	3,98,908	
	b V	alue of perqui	sites as per section 17(2)		ib	0	
	c Pi	rofit in lieu of	salary as per section 17(3)		ic	0	
	d In	icome from re 9A	tirement benefit account maintained	in a notified country u/s	id	0	
		come from re otified country	tirement benefit account maintained y u/s 89A	in a country other than	ie	0	
		ess allowance 7(1)/17(2)/17(s to the extent exempt u/s 10 [Ensure 3)]	e that it is included in sa	lary income u/s	ii	0

	SI. No.	Nature of Exempt Allowances	Description (If Any	Other sel	ected)	Tota	al Amount	
	(1)	(2)	(3)	(3)			(4)	
	iia	Less : Income claimed for relief from tax	cation u/s 89A			iia	0	
	iii	Net Salary (i - ii - iia)				iii	3,98,908	
	iv	Deductions u/s 16 (iva + ivb + ivc)				iv	50,000	
	a	Standard deduction u/s 16(ia)			iva	50,000		
	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	aries' (iii - iv)			B1	3,48,908	
B2		Type Of House Property				B2		
	i	Gross rent received/ receivable/ lettable	e value during the year			i	0	
	ii	Tax paid to local authorities		ii		0		
	iii	Annual Value (i - ii)				iii	0	
	iv	30% of Annual Value		iv		0		
	v	Interest payable on borrowed capital		v		0		
	vi	Arrears/Unrealised rent received during	the year less 30%	vi		0		
	vii	Income chargeable under the head 'Hou negative)	ıse Property' (iii - iv - v) -	⊦ vi (If loss,	put the figure	in _{B2}	0	
В3		Income from Other Sources				В3	1,143	
	SI. No.	Nature of Income	Description (If Any	Any Other selected) Total Amount			al Amount	
	(1)	(2)	(3)			(4)		
	1	Dividend		M			267	
	2	Interest from Saving Account	MIN W			876		
		Quarterly breakup of Div	ridend Income		nt maintaine		m retirement benefit ed country u/s 89A on)	
		(i) Up to 15-Jun-2023	267	(i)	Up to 15-Jui	า-2023	0	
		(ii) From 16-Jun-2023 to 15-Sep-2023	8.0	(ii)	From 16-Jur Sep-2023	n-2023 to 15-	0	
		(iii) From 16-Sep-2023 to 15-Dec-2023	0	(iii)	From 16-Se 15-Dec-202		0	
		(iv) From 16-Dec-2023 to 15-Mar-2024	AX DET 70	(iv)	From 16-De 15-Mar-202		0	
		(v) From 16-Mar-2024 to 31-Mar-2024	0	(v)	From 16-Ma 31-Mar-202		0	
		Less: Income claimed for relief from tax	ation u/s 89A				0	
		Less: Deduction u/s 57(iia) (in case of fa	mily pension only)				0	

B4	Gross Total Income (B1+B2+B3) (If loss, put the figure in negative) Note: To avail the benef of carry forward and set off of loss, please use ITR-2	t B4	3,50,051
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PART C - DEDUCTIONS AND TAXABLE TOTAL INCOME **System Calculated** SI.No. Section **Amount** 80C - Life insurance premia, deferred annuity, contributions to provident 0 C1 0 fund, subscription to certain equity shares or debentures, etc. 0 C2 80CCC - Payment in respect Pension Fund 0 0 0 C3 80CCD(1) - Contribution to pension scheme of Central Government C4 80CCD(1B) -Contribution to pension scheme of Central Government 0 0 80CCD(2) - Contribution to pension scheme of Central Government by C5 0 0 employer 0 C6 0 80D - Deduction in respect of health insurance premia 80DD - Maintenance including medical treatment of a dependent who is a 0 C7 0 person with disability C8 80DDB - Medical treatment of specified disease -0 0 C9 80E - Interest on loan taken for higher education 0 0 0 C10 0 80EE - Interest on loan taken for residential house property 80EEA - Deduction in respect of interest on loan taken for certain house 0 C11 0 property 0 0 C12 80EEB - Deduction in respect of purchase of electric vehicle 80G - Donations to certain funds, charitable institutions, etc (Please fill C13 0 0 80G schedule. This field is auto-populated from schedule 80G.) C14 80GG - Rent paid (Please submit form 10BA to claim deduction) 0 0 80GGA - Certain donations for scientific research or rural development 0 C15 0 (Please fill 80GGA Schedule. This field is autopopulated from schedule.) 80GGC - Donation to Political party 0 C16 0

cknowledgement Number :	Date of Filing
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Ackno	wledgement Number :		Date of Filing :
C17	80TTA - Interest on deposits in saving bank Accounts	PARTIND	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

Total Income 3,50,050

EXEMPT INCOME	FOR REDORTING	DIIRDOSESI
EXEMP I INCOME	TON REPORTING	FUNFUSES

SI. No.	Nature of Income	Description (If Any Other selected)	Total Amount	
(1)	(2)	(3)	(4)	

Total 0

PART D - COMPUTATION OF TAX PAYABLE

D1	Tax payable on total income	D1	2,503
D2	Rebate u/s 87A	D2	2,503
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	Interest u/s 234B	D8	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	0
D13	Amount payable (D11-D12) (if D11>D12)	D13	0
D14	Refund (D12 - D11) (if D12 > D11)	D14	0

PART E - OTHER INFORMATION DETAILS OF ALL BANK ACCOUNTS HELD IN INDIA AT ANY TIME DURING THE PREVIOUS YEAR (EXCLUDING DORMANT ACCOUNTS)

SI. No.	IFS Code of the Bank Name of the Bank		Account Number	Type of account	
(1)	(2)	(3)	(4)	(5)	
1	SBIN0005982	STATE BANK OF INDIA	34088897812	Savings Account	

SCHEDULE 80D 1 Whether you or any of your family member (excluding parents) is a senior citizen? No claiming for Self/Family (a) Self & Family

⁰ Health Insurance 0 (i) (ii) Preventive Health Checkup 0

^{*}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)	Self &	Family including Senior Citizen	0
	(i)	Health Insurance	0
	(ii)	Preventive Health Checkup	C
	(iii)	Medical Expenditure (This deduction to be claimed on which health insurance is not claimed at (i) above)	0
2	Whet	her any one of your parents is a senior citizen	No claiming for Parents
(a)	Parer	its	0
	(i)	Health Insurance	C
	(ii)	Preventive Health Checkup	C
(b)	Parer	its including Senior Citizen	C
	(i)	Health Insurance	C
	(ii)	Preventive Health Checkup	C
	(iii)	Medical Expenditure (This deduction can be claimed on which health insurance is not claimed at (i) above)	(
3	Eligib	le Amount of Deduction	C

Sched	ule 80U	Details of deduction in case of a person with disability						
SI. 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						

Sch	Schedule 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	PAN of the dependent	Aadhaar of the 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						

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	Address	City or	ZAN OF THE		Am	ount of dona	tion	Eligible Amount of	
No.	the Donee	Address	District	State code	Pin code		Donation in cash	Donation in other mode	Total donation	Donation
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(9)	(10)	(11)	(12)
Total A							0	0	0	0

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	Address	City or Town or	State code	Pin codo	Pin code PAN of the		ount of dona	tion	Eligible Amount of
No.	the Donee	Address	District	State code			Donation in cash	Donation in other mode	Total donation	Donation
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(9)	(10)	(11)	(12)
Total B	Total B							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	Pin code PAN of the		Am	Amount of donat		Eligible Amount of
No.	the Donee	Address	District	State code	Pin code	Donee	Donation in cash	Donation in other mode	Total donation	Donation
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(9)	(10)	(11)	(12)
Total C				0		By 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			ARN PAN of the (Donation		Amo	ount of dona	ition	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			/ /	1ºcon	1		OTHE	0	0	0	0
E. Total Amount of Donations (A + B + C + D) 0 0										0	

SI.	Relevant Clause under	Name of		City or		Code Pin code PAN of the	Amount of Donation				
No.	which deduction is claimed	the Donee	Address	Town or District	State Code	Pin code	PAN of the 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)
otal	I	<u> </u>						0	0	0	

SCHED	ULE 80GGC DETA	AILS OF CONTRIBUT	TION MADE TO POL	ITICAL PARTIES			
SI.	Date	An	nount of Contributi	ion	Eligible Amount of	Transaction Reference number for UPI transfer / Cheque number / IMPS	
No.	Date	Contribution in Cash	Contribution in other mode	Total Contribution	Contribution	/ NEFT / RTGS reference number	
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
Total		0	0	0	0		

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

SCHED	ULE TDS1 - DETAILS OF TAX DE	DUCTED AT SOURCE FROM SALA	RY [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)
Total	h.	tient of the Miles	£550% A	0

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)
Total						0

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)
Total							0

SCHE	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				

Acknowledgement Number : Date of Filing :

(1)	(2)	(3)	(4)	(5)	(6)	(7)
Total						0

VERIFICATION

I, **VAIBHAV** son/ daughter of **SHARANABASAPPA SHIVAPUTRA DURGAD** 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 **BNQPV8732E**

Place: 114.143.155.86

Date: 16-Jul-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