

PERSONAL INFORMATION AND THE  
DATE OF ELECTRONIC  
TRANSMISSION

Name		HRITHIK SANTOSH VICHARE	
Form No. which has been electronically transmitted	I TR-4		
Status	Individual		
Flat/Door/Block No	RM NO 410 BLD NO 01NEW		
Name Of Premises/Building/Village	SHIVNERI CHS LTD		
Road/Street/Post Office	W.T.PATIL MARG AMAR CINEMA		
Town/City/District	MUMBAI		
State	MAHARASHTRA		
Pin/Zip Code	400088		
Aadhaar Number/ Enrollment ID	XXXX XXXX 8613		
Designation of AO (Ward / Circle)	WARD 27(3)(5), MUMBAI		
E-filing Acknowledgement Number	428930750040319		
Date (DD-MM-YYYY)	04-03-2019		
Original or Revised	ORIGINAL		

COMPUTATION OF INCOME  
AND TAX THEREON

1	Gross Total Income	289732	1	0
2	Deductions under Chapter-VI-A	0	2	0
3	Total Income	289732	3	0
	a	Current Year loss, if any	3a	0
4	Net Tax Payable	0	4	0
5	Interest and Fee Payable	1000	5	0
6	Total Tax, Interest and Fee Payable	1000	6	0
7	Taxes Paid	0	7a	0
	a	Advance Tax	7a	0
	b	TDS	7b	0
	c	TCS	7c	0
	d	Self Assessment Tax	7d	1000
	e	Total Taxes Paid (7a+7b+7c+7d)	7e	1000
8	Tax Payable (6-7e)	0	8	0
9	Refund (7e-6)	0	9	0
10	Exempt Income	0	10	0
		Agriculture		0
		Others		0

## VERIFICATION

I, **HRITHIK SANTOSH VICHARE** son/daughter of **SANTOSH BALWANT VICH**, holding Permanent Account Number **BLPPV1574B** solemnly declare to the best of my knowledge and belief, the information given in the return and the schedules thereto which have been transmitted electronically by me vide acknowledgement number mentioned above is correct and complete and that the amount of total income and other particulars shown therein are truly stated and are in accordance with the provisions of the Income-tax Act, 1961, in respect of income chargeable to income-tax for the previous year relevant to the assessment year 2018-19. 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.

Sign here

Date 04-03-2019

Place MUMBAI

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

Identification No. of TRP	Name of TRP	Counter Signature of TRP
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For Office Use Only  
Receipt No

Filed from IP address 103.251.190.22

Date

Seal and signature of  
receiving official

BLPPV1574B04428930750040319E3C0A95D8A4C8CEFFB050EBB5F051DD37C30EAD



Please send the duly signed Form ITR-V to "Centralized Processing Centre, Income Tax Department, Bengaluru 560500", by ORDINARY POST OR SPEED POST ONLY, within 120 days from date of transmitting the data electronically. Form ITR-V shall not be received in any other Office of the Income-tax Department or in any other manner. The confirmation of receipt of this Form ITR-V at ITD-CPC will be sent to the e-mail [hrithikvichare@gmail.com](mailto:hrithikvichare@gmail.com)