ITR-4 SUGAM PRESUMPTIVE BUSINESS OR PROFESSION INCOME TAX RETURN

For Individuals/HUF/Partnership Firm having income from presumptive business or profession (Please see rule 12 of the Income-tax Rules,1962)

| Personal Information | | | | | | | | |
|--|----------------------------------|-----------------------------------|------------|--|--|--|--|--|
| First Name | SWATI DHARMENDRA SHINDE | , | | | | | | |
| Permanent Account Number | EPQPS4105R | Income Tax Ward/Circle | | | | | | |
| Sex | Female | Date of Birth/Formation (DD/MM/ | 04/07/1987 | | | | | |
| | | YYYY) | | | | | | |
| Address | | | | | | | | |
| Flat/Door/Building | | FLAT NO 102 | | | | | | |
| Name of Premises/ Building/ Village | | | | | | | | |
| Road/Street | | RIDDHI APARTMENT | | | | | | |
| Area/locality | | SECTOR 9 PLOT NO 50 | | | | | | |
| Town/City/District | 1000 | KAMOTHE | | | | | | |
| State | W si | MAHARASHTRA | | | | | | |
| Country | M | INDIA | | | | | | |
| Pin code | M M | 410209 | | | | | | |
| Aadhaar Number | | 519709614961 | | | | | | |
| Status | 1645 SEASON | Individual | | | | | | |
| Mobile No.1 | X 18 | 9702364564 | A | | | | | |
| Residential/Office Phone Number with | n STD code | | / -7 | | | | | |
| Mobile No. 2 | ZINA | 22 | | | | | | |
| Email Address | OMETER | tusharmohite0@gmail.com | | | | | | |
| Filing Status | TIE IAX | UE PAI | | | | | | |
| Tax Status | | Nil Tax Balance | | | | | | |
| Residential Status | | Resident | | | | | | |
| Return filed under section | | 11 - On or Before Due Date 139(1) | | | | | | |
| Whether original or revised return? | | Original | | | | | | |
| Whether Person governed by Portugue | ese Civil Code under section 5A | No | | | | | | |
| If A23 is applicable, PAN of the Spou | se | | | | | | | |
| If under section: 139(5)- revised return | 1: | | | | | | | |
| Original Acknowledgement Number. | | | | | | | | |
| Date of filing of Original Return(DD/N | MM/YYYY) | | | | | | | |
| If under section: 139(9)- return in resp | onse to defective return notice: | | | | | | | |
| Original Acknowledgement Number. | | | | | | | | |
| Notice Number. | | | | | | | | |
| Date of filing of Original Return(DD/N | MM/YYYY) | | | | | | | |
| | Pa | ge 1 | | | | | | |

| If filed in | _ | e to notice u/s 139(9)/142(1)/148/153A/153C,enter the date of | | | | | | | |
|-------------|--|--|-------|------|-------------------|--|--|--|--|
| | | al Income | | | | | | | |
| (B1) | | from Business(E8 of Sch BP) | | | 298600 | | | | |
| (B2) | Income from Salary / Pension(Ensure to fill Sch TDS1) 0 | | | | | | | | |
| (B3) | Type of | House Property | | | | | | | |
| | Income | from One House Property | | | 0 | | | | |
| (B4) | Income | from Other Sources(Ensure to fill Sch TDS2) | | | 0 | | | | |
| (B5) | Gross T | Otal Income (B1 + B2 + B3 + B4) | | | 298600 | | | | |
| | Part C - | Deductions and Taxable Total Income | | | | | | | |
| | S.No. | Section | Am | ount | System Calculated | | | | |
| | C1. | 80C | | 0 | 0 | | | | |
| | C2. | 80CCC | | 0 | 0 | | | | |
| | C3. | 80CCD(1) | | 0 | 0 | | | | |
| | C4. | 80CCD(1B) | W. | 0 | 0 | | | | |
| | C5. | 80CCD(2) | 11/1/ | 0 | 0 | | | | |
| | C6. | 80CCG | 0 | | | | | | |
| | C7. | 80D | 73/5 | 0 | 0 | | | | |
| | C8. | 80DD (Maximum eligible amount is 75000. For Severe Disability, it is | X | 0 | 0 | | | | |
| | | 125000) | Shill | . A | | | | | |
| | C9. | 80DDB (Maximum eligible amount is 40000. For Senior Citizen, it is 60000 | | 0 | 0 | | | | |
| | | and 80,000 for Very Senior Citizen) | | | | | | | |
| | C10. | 80E | | 0 | 0 | | | | |
| | C11. | 80EE | | 0 | 0 | | | | |
| | C12. | 80G | | 0 | 0 | | | | |
| | C13. | 80GG | | 0 | 0 | | | | |
| | C14. | 80GGC | | 0 | 0 | | | | |
| | C15. | 80QQB | | 0 | 0 | | | | |
| | C16. | 80RRB | | 0 | 0 | | | | |
| | C17. | 80TTA | | 0 | 0 | | | | |
| | C18. | 80U(Maximum eligible amount 75000. For Severe Disability, it is 125000) | | 0 | 0 | | | | |
| C19. | Total D | eductions (Total of C1 to C18) | | 0 | 0 | | | | |
| Note:To | tal deducti | ions under chapter VI A cannot exceed GTI. | | | | | | | |
| C20. | | e Total Income (B5 - C19) | | | 298600 | | | | |
| | | OMPUTATIONS AND TAX STATUS | | | | | | | |
| D1. | | able on total income(C20) | | | 4860 | | | | |
| D2. | Rebate o | on 87A Page 2 | | | 4860 | | | | |

| D3. | Tax payable after Rebate (D1-D2) | | | | 0 | | | | | |
|---------------|---|---|---------------------------|--------------------------------------|---|--|--|--|--|--|
| D4. | Surcharge if C19 exceeds Rs. 1 Crore | | 0 | | | | | | | |
| D5. | Cess on (D3+D4) | | 0 | | | | | | | |
| D6. | Total Tax, Surcharge and Cess (D3+ | | | 0 | | | | | | |
| D7. | Relief u/s 89 | | | 0 | | | | | | |
| D8. | Balance Tax after Relief (D6-D7) | | | | 0 | | | | | |
| D9. | Total Interest u/s 234A | | | | | | | | | |
| D10. | Total Interest u/s 234B | | | | 0 | | | | | |
| D11. | Total Interest u/s 234C | | | | 0 | | | | | |
| | Total Interest Payable (D9+D10+D1 | 1) | | | 0 | | | | | |
| D12. | Total Tax and Interest(D8+D9+D1 | 0+D11) | | | 0 | | | | | |
| D13. | Total Advance Tax Paid | | | | 0 | | | | | |
| D14. | Total Self-Assessment Tax Paid | | - | | 0 | | | | | |
| D15. | Total TDS Claimed | 18 ⁹ | 430 | | 0 | | | | | |
| D16. | Total TCS Collected | | | | 0 | | | | | |
| D17. | Total Taxes Paid (D13+D14+D15+D16) | | | | | | | | | |
| D18. | Amount payable (D12 - D17, If D12 > D17) 0 | | | | | | | | | |
| D19. | Refund (D17 - D12, If D17 > D12) | | | | | | | | | |
| D20. | Exempt income only for reporting purposes (If agricultural income is more than Rs.5,000/-, use ITR 3/5) | | | | | | | | | |
| D21. | Do you have a bank account in India | (Non-residents claiming refund with no | bank account in India may | Yes | | | | | | |
| | select NO)? | 118 3 del | 004 | ソレ | -7 | | | | | |
| | a) Bank Account in which refund, | if any, shall be credited | 25 W | | | | | | | |
| S.No. | IFS Code of the bank | Name of the Bank | Account Number (the nu | mber (| Cash deposited during | | | | | |
| | | C'S TAX D | should be 9 digits or mo | more as 09.11.2016 to 30.12.2016 (if | | | | | | |
| | | | per CBS system of the b | ank) aggre | gate cash deposits during | | | | | |
| | | | | th | e period >= Rs.2 lakh) | | | | | |
| 1 | IDIB000K226 | Indian Bank | 605575097 | | | | | | | |
| | I . | | | | | | | | | |
| | b) Other Bank account details | 1 | | | | | | | | |
| S.No. | b) Other Bank account details IFS Code of the bank | Name of the Bank | Account Number (the nu | mber C | Cash deposited during | | | | | |
| S.No. | , | Name of the Bank | Account Number (the nu | | Cash deposited during | | | | | |
| S.No. | , | Name of the Bank | | re as 09.1 | | | | | | |
| S.No. | , | Name of the Bank | should be 9 digits or mo | re as 09.3 | 11.2016 to 30.12.2016 (if | | | | | |
| S.No. | , | Name of the Bank | should be 9 digits or mo | re as 09.3 | 11.2016 to 30.12.2016 (if | | | | | |
| 2 | IFS Code of the bank | Name of the Bank A refund and not having bank accoun | should be 9 digits or mo | re as 09.3 ank) aggre th | 11.2016 to 30.12.2016 (if egate cash deposits during e period >= Rs.2 lakh) | | | | | |
| 2 | IFS Code of the bank residents, who are claiming income-t | | should be 9 digits or mo | re as 09.3 ank) aggre th | 11.2016 to 30.12.2016 (if egate cash deposits during e period >= Rs.2 lakh) | | | | | |
| 2 c) Non-1 | IFS Code of the bank residents, who are claiming income-t | | should be 9 digits or mo | re as 09.3 ank) aggre th | 11.2016 to 30.12.2016 (if egate cash deposits during e period >= Rs.2 lakh) | | | | | |

| S.No. | Nature of Business | Tra | dename | Tradename | | Tradename | | |
|---------|--|------------------------|-------------------------|--------------------------------|--------------|--|--|--|
| 1 | 0501 - 0501-Civil Contractors | | | | | | | |
| Instruc | tions for correct calculation of Profits | and gains of Bus | siness of plying, hiri | ng or leasing goods carriages | s u/s 44AE | | | |
| Vehicle | s | | | | | | | |
| S No | o. Period of holding (in | months) | Income p | er Vehicle (Must | | Deemed Income | | |
| | | | be >= 7500 | p.m. per vehicle) | | | | |
| 1 | | | | | | 0 | | |
| Tota | al | | | | | 0 | | |
| SCHEE | DULE BP - DETAILS OF INCOME H | FROM BUSINES | S OR PROFESSION | N . | | | | |
| | COMPUTATION OF PRESUMPTIV | /E INCOME UNI | DER 44AD | | | | | |
| E1. | Gross Turnover or Gross Receipts | | | | | | | |
| | E1a. Through a/c payee cheque | or a/c payee bank | draft or bank electron | ic clearing system received | | 0 | | |
| | before specified date | | | | | | | |
| | E1b. Any other mode | | 30 | 40 | | 670815 | | |
| E2. | Presumptive income under section 44 | AD | | ATT B | | | | |
| | a. 6% of E1a | M | | 1/1/ | | 0 | | |
| | b. 8% of E1b | b. 8% of E1b 298600 | | | | | | |
| | c. Total (a + b) | 1.6 | | | | 298600 | | |
| | Note: If Income is less than the above | e percentage of G | ross Receipts, it is ma | ndatory to have a tax audit un | der 44AB | and regular ITR 3 or 5 has to be filled | | |
| | not this form | J.W. | 8 | 15 H | _ | A | | |
| | Presumptive income under 44ADA (I | Profession) | ि सुन | 3/3/ | \mathbf{V} | 1 | | |
| E3. | Gross Receipts | V. | 200 | 25 | ID | 0 | | |
| E4. | Presumptive income under section 44 | ADA (>=50% of | E3) | -DARTHE | | 0 | | |
| | Note: If income is less tha 50% of G | ross Receipts, it is | mandatory to have a | tax audit under 44AB and Reg | gular ITR 3 | 3 or ITR 5 form has to be filled and not | | |
| | this form | | | | | | | |
| | COMPUTATION OF PRESUMPTIV | /E INCOME UNI | DER 44AE | | | | | |
| E5. | Presumptive Income from Goods Car | riage under sectio | n 44AE | | | 0 | | |
| | Note: If the profits are lower than pro | escribed under S.4 | 4AE or the number of | f Vehicles owned at any time | exceed 10 | then the regular ITR 3 or ITR 5 form | | |
| | has to be filled and not this form | | | | | | | |
| E6. | Salary and interest paid to the partner | rs (This is to be fill | led up only by firms) | | | | | |
| E7. | Income Chargeable under Business u | nder section 44AE | E (E5 - E6) | | | 0 | | |
| E8. | Income chargeable under Business & | Profession (under | section 44AD, 44AD | OA and 44AE) (E2 + E4 + | | 298600 | | |
| | E7) | | | | | | | |
| | FINANCIAL PARTICULARS OF T | HE BUSINESS | | | | | | |
| | Note: For E9 to E12, furnish the info | ormation as on 31s | t day of March, 2017 | , | | | | |
| E9. | Amount of Total Sundry Debtors | | | | | 0 | | |
| E10. | Amount of Total Sundry Creditors 0 | | | | | | | |

| E11. | Amount | of Total St | tock-in- | trade | | | | | | | | 0 |
|----------|------------------------|---|--|--------------------------|----------------------------|------------------------------|---|------------|---|-------------------------------------|-----|---|
| E12. | Amount | of the Cas | h Baland | ce | | | | | | | | 0 |
| TDS1.D | etails of T | ax Deduc | ted at S | ource from | n Salary [As per Fo | orm 16 issued by E | mployer(s)] | , | | | | |
| S.No. | | TAN(1) Name of the Employer(2) Income under Salary(3) | | | | | | Ta | ax De | educted(4) | | |
| 1 | | | | | | | | | | | | |
| | | | | | TOT | CAL | | | | | | 0 |
| Sch TDS | S2 - Detail | ls of Tax I | Deducte | d at Source | e from Income OT | HER THAN SALA | ARY [As per Form | 16 A issue | ed by De | ductor(s)] | | |
| S.No. | TAN Deduc | | | me of the | Unique TDS Certificate No. | | Details of Receipt as mentioned in Form 26AS(5) | Tax Dedi | ucted(6) | Amount of of (6) claim this year(7) | ied | If A23 is applicable amount claimed in the hands of spouse(8) |
| 1 | | | | | | | | | | | | |
| | | | | | TOT | 'AL | | | | | | 0 |
| Schedul | e TCS De | tails of Ta | x Collec | cted at Sou | rce [As per Form 2 | 27D issued by the (| Collector(s)] | | | | | |
| S.No. | Account Number paid as | | etails of amount id as mentioned Form 26AS (3) | (4) being in the spouse, | | 4) being in the happense, if | g claimed clair | | med in the hands spouse, if section is applicable (6) | | | |
| 1 | | | | | 1111 | SERVERS SERV | 15 1 | # | | A | | |
| | | | N | | TOTAL | रें भेड़ी। | | | | 4 | | 0 |
| IT.Detai | ils of Adv | ance Tax a | and Self | f Assessmen | nt Tax Payments | - BE | 32 | - 1 | Q. | | 7 | |
| S.No. | | BSR Co | ode(1) | \ | Date of Deposit(D | D/MM/YYYY)(2) | Challan N | umber(3) | 丿 | | Tax | Paid(4) |
| 1 | | | | | | TAX DI | PART | | | | | |
| | | | | | ТОТ | `AL | | - | | | | 0 |
| Schedul | e AL Asse | et and Lia | bility at | the end of | the year (Applicat | ole in case where to | otal income exceeds | Rs. 50 la | kh) | | | |
| A | Do you | ı own any | immova | ble asset ? | | | | | | | | |
| | Details | s of immov | vable as | set | | | | | · | | | |
| | S No. | Descript | ion | | | Address | Address | | | mount (cost) in Rs. | | |
| | 1 | | | | | | | | | | | |
| В | Details | s of movab | ole asset | t | | | | | • | | | |
| | Sl No. | Descript | ion | | | | | Amount | (cost) in | ı Rs. | | |
| | (i) | Jewellery | , bullio | n etc. | | | | | | | | |
| | (ii) | Archaeol | ogical c | ollections, | drawings, painting, | sculpture or any wo | ork of art | | | | | |
| | (iii) | Vehicles | , yachts, | , boats and a | aircrafts | | | | | | | |
| | Financ | cial asset | | | | | | • | | | | |
| | (iv) | (iv) (a) Bank (including all deposits) | | | | | | | | | | |

Acknowledgement Number: 140785960050817

(b) Shares and securities

Assessment Year: 2017-18

| | | (b) | Shares and | securities | | | | | | | |
|-------------|----------|------------|----------------|----------------------------|---------------------|------------------|--------------|---------------|------------|--------------|------------------|
| | | (c) | Insurance p | policies | | | | | | | |
| | | (d) | Loans and | advances given | | | | | | | |
| | | (d) | Cash in har | nd | | | | | | | |
| С | Do yo | ou have a | ny Interest he | eld in the assets of a fir | m or association of | of persons (AOP) |) as a partr | ner or | | | |
| | meml | er thereo | of? | | | | | | | | |
| | Inter | est held i | n the assets | of a firm or association | on of persons (AC | OP) as a partner | or memb | er thereof | | | |
| | S No. | Nar | ne of the firi | m(s)/ AOP(s) (1) | Address of the | firm(s)/ AOP(s) | (2) PA | N of the fire | m/ AOP (3) | Assessees in | vestment in the |
| | | | | | | | | | | firm/ AOP o | n cost basis (4) |
| | 1 | | | | | | | | | | |
| D | Liabi | lity in re | lation to Ass | ets at (A+B+C) | | | | | | | |
| 80G | | | | | | | | | | | |
| Instruction | ns for | correct c | alculation of | f 80G | | _ | | | | | |
| A. Donati | ons en | titled for | 100% dedu | ction without qualifyi | ng limit | & | | | | | |
| S No. | 1 | Name of | the Donee | Address | City or Town | State Code | Pinco | de P. | AN of | Amount of | Eligible Amount |
| | | | | M | or District | | 1 | the | Donee | donation | of Donation |
| 1 | | | | Ж | | | | 14 | | | 0 |
| Total A | | | | 1,8 | 45 | 17.3 | | <i>,</i> ,,, | | C | 0 |
| B. Donati | ons ent | itled for | 50% deduct | ion without qualifyin | g limit | भावता भावता | | Ш | | | |
| S No. | 1 | Name of | the Donee | Address | City or Town | State Code | Pinco | de P. | AN of | Amount of | Eligible Amount |
| | | | | | or District | मूला 💆 | 3// | the | Donee | donation | of Donation |
| 1 | | 1 | | 7/// | 100 | -23 | | 100 | | | 0 |
| Total B | | | | CON | 10- | | mil. | | | 0 | 0 |
| C. Donati | ons en | titled for | 100% deduc | ction subject to qualif | ying limit | DEP | 11.5 | | | | |
| S No. | 1 | Name of | the Donee | Address | City or Town | State Code | Pinco | de P. | AN of | Amount of | Eligible Amount |
| | | | | | or District | | | the | Donee | donation | of Donation |
| 1 | | | | | | | | | | | 0 |
| Total C | | | , | | | ' | | | | 0 | 0 |
| D. Donati | ons en | titled for | 50% deduct | ion subject to qualify | ing limit | | | | | | |
| S No. | 1 | Name of | the Donee | Address | City or Town | State Code | Pinco | de P. | AN of | Amount of | Eligible Amount |
| | | | | | or District | | | the | Donee | donation | of Donation |
| 1 | | | | | | | | | | | 0 |
| Total D | | | | | | I | | ı | | 0 | 0 |
| E. Donatio | ons (A - | + B + C+ | D) | | | | | | | 0 | 0 |
| | | | | | VERI | FICATION | | | | | 1 |

I <u>SWATI SHINDE</u> son/daughter of <u>VITTHAL GAMBHIRE</u> solemnly declare that to the best of my knowledge and belief, the information given in the return is correctand 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 toIncome-tax for the previous year relevant to the Assessment Year 2017-18.

| Place | Date | PAN | | | | | | |
|---|------------|------------|--|--|--|--|--|--|
| KAMOTHE | 05/08/2017 | EPQPS4105R | | | | | | |
| If the return has been prepared by a Tax Return Preparer (TRP) give further details as below: | | | | | | | | |
| TRP PIN (10 Digit) | | | | | | | | |
| Name of TRP | | | | | | | | |
| Amount to be paid to TRP | | | | | | | | |

This form has been electronically verified by **SWATI DHARMENDRA SHINDE** having PAN **EPQPS4105R** on **05/08/2017** from IP address **103.51.24.100** using Electronic Verification Code **5GYXZ8X8KI** generated through **Aadhaar OTP** mode.

