

| <b>ITR-4 SUGAM PRESUMPTIVE BUSINESS OR PROFESSION INCOME TAX RETURN</b>                    |  |                                      |            |
|--|--|--------------------------------------|------------|
| For Individuals/HUF/Partnership Firm having income from presumptive business or profession |  |                                      |            |
| (Please see rule 12 of the Income-tax Rules,1962)  |  |                                      |            |
| <b>Personal Information</b>  |  |                                      |            |
| First Name   | MOTIAR RAHAMAN MONDAL                                    |                                      |            |
| Permanent Account Number   | AYFPM5223J   | Income Tax Ward/Circle               |            |
| Sex  | Male   | Date of Birth/Formation (DD/MM/YYYY) | 08/09/1965 |
| <b>Address</b>   |  |                                      |            |
| Flat/Door/Building   | 0  |                                      |            |
| Name of Premises/ Building/ Village  | ATGHARA  |                                      |            |
| Road/Street  |  |                                      |            |
| Area/locality  | RAJARHAT GOPALPUR  |                                      |            |
| Town/City/District   | KOLKATA  |                                      |            |
| State  | WEST BENGAL  |                                      |            |
| Country  | INDIA  |                                      |            |
| Pin code   | 700136   |                                      |            |
| Aadhaar Number   | 375417356249   |                                      |            |
| Status   | Individual   |                                      |            |
| Mobile No.1  | 8820659141   |                                      |            |
| Residential/Office Phone Number with STD code  |  |                                      |            |
| Mobile No. 2   |  |                                      |            |
| Email Address  | monarabibi76@gmail.com                                   |                                      |            |
| <b>Filing Status</b>   |  |                                      |            |
| Tax Status   | Nil Tax Balance  |                                      |            |
| Residential Status   | Resident   |                                      |            |
| Return filed under section   | 12 - Voluntarily after the due date under section 139(4) |                                      |            |
| Whether original or revised return?  | Original   |                                      |            |
| Whether Person governed by Portuguese Civil Code under section 5A                          | No   |                                      |            |
| If A23 is applicable, PAN of the Spouse  |  |                                      |            |
| 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 Acknowledgement Number.   |  |                                      |            |
| Notice Number.   |  |                                      |            |
| Date of filing of Original Return(DD/MM/YYYY)  |  |                                      |            |

|   |   |  |               |                          |
|---|---|--|---------------|--------------------------|
| If filed in response to notice u/s 139(9)/142(1)/148/153A/153C, enter the date of such notice |   |  |               |                          |
| <b>Part B Gross Total Income</b>  |   |  |               |                          |
| (B1)  | Income from Business(E8 of Sch BP)                    |  |               | 304162                   |
| (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)    |  |               | 343                      |
| (B5)  | <b>Gross Total Income (B1 + B2 + B3 + B4)</b>         |  |               | <b>304505</b>            |
| <b>Part C - Deductions and Taxable Total Income</b>   |   |  |               |                          |
|   | <b>S.No.</b>  | <b>Section</b>   | <b>Amount</b> | <b>System Calculated</b> |
|   | C1.   | 80C  | 2860          | 2860                     |
|   | C2.   | 80CCC  | 12000         | 12000                    |
|   | C3.   | 80CCD(1)   | 0             | 0                        |
|   | C4.   | 80CCD(1B)  | 0             | 0                        |
|   | C5.   | 80CCD(2)   | 0             | 0                        |
|   | C6.   | 80CCG  | 0             | 0                        |
|   | C7.   | 80D -  | 0             | 0                        |
|   | C8.   | 80DD (Maximum eligible amount is 75000. For Severe Disability, it is 125000)                                 | 0             | 0                        |
|   | C9.   | 80DDB (Maximum eligible amount is 40000. For Senior Citizen, it is 60000 and 80,000 for Very Senior Citizen) | 0             | 0                        |
|   | 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  | 343           | 343                      |
|   | C18.  | 80U(Maximum eligible amount 75000. For Severe Disability, it is 125000)                                      | 0             | 0                        |
| C19.  | <b>Total Deductions (Total of C1 to C18)</b>          |  | <b>15203</b>  | <b>15203</b>             |
| Note: Total deductions under chapter VI A cannot exceed GTI.                                  |   |  |               |                          |
| C20.  | <b>Taxable Total Income (B5 - C19)</b>                |  |               | <b>289300</b>            |
| <b>PART D TAX COMPUTATIONS AND TAX STATUS</b>   |   |  |               |                          |
| D1.   | Tax payable on total income(C20)                      |  |               | 3930                     |
| D2.   | Rebate on 87A   |  |               | 3930                     |

|  |  |                           |  |  |
|--|--|---------------------------|--|--|
| 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+D4+D5)  |                           |  | 0  |
| D7.  | Relief u/s 89  |                           |  | 0  |
| D8.  | Balance Tax after Relief (D6-D7)   |                           |  | 0  |
| D9.  | Total Interest u/s 234A  |                           |  | 0  |
| D10.   | Total Interest u/s 234B  |                           |  | 0  |
| D11.   | Total Interest u/s 234C  |                           |  | 0  |
|  | Total Interest Payable (D9+D10+D11)  |                           |  | 0  |
| D12.   | <b>Total Tax and Interest(D8+D9+D10+D11)</b>   |                           |  | <b>0</b>   |
| D13.   | Total Advance Tax Paid   |                           |  | 0  |
| D14.   | Total Self-Assessment Tax Paid   |                           |  | 0  |
| D15.   | Total TDS Claimed  |                           |  | 0  |
| D16.   | Total TCS Collected  |                           |  | 0  |
| D17.   | Total Taxes Paid (D13+D14+D15+D16)   |                           |  | 0  |
| D18.   | Amount payable (D12 - D17, If D12 > D17)   |                           |  | 0  |
| D19.   | Refund (D17 - D12, If D17 > D12)   |                           |  | 0  |
| 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 select NO)? |                           |  | Yes  |
| <b>a) Bank Account in which refund, if any, shall be credited</b>  |  |                           |  |  |
| 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  | ORBC0101235  | Oriental Bank of Commerce | 12352011000360   |  |
| <b>b) Other Bank account details</b>   |  |                           |  |  |
| 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) |
| 2  | SBIN0011542  | State Bank of India       | 20031758425  |  |
| <b>c) Non-residents, who are claiming income-tax refund and not having bank account in India may, at their option, furnish the details of one foreign bank account</b> |  |                           |  |  |
| S.No.  | IBAN/SWIFT code  | Name of the bank          | Country of Location  | Account Number   |
| Nature of business, if more than one business indicate the three main activities/ products   |  |                           |  |  |

| S.No.  | Nature of Business  | Tradename  | Tradename     | Tradename |
|--|---|--|---------------|-----------|
| 1  | 0204-Trading-Others   | M.R. ELECTRIC  |               |           |
| <b>Instructions for correct calculation of Profits and gains of Business of plying, hiring or leasing goods carriages u/s 44AE</b>   |   |  |               |           |
| <b>Vehicles</b>  |   |  |               |           |
| S No.  | Period of holding (in months)   | Income per Vehicle (Must be $\geq 7500$ p.m. per vehicle)  | Deemed Income |           |
| 1  |   |  | 0             |           |
| <b>Total</b>   |   |  | 0             |           |
| <b>SCHEDULE BP - DETAILS OF INCOME FROM BUSINESS OR PROFESSION</b>   |   |  |               |           |
| COMPUTATION OF PRESUMPTIVE INCOME UNDER 44AD   |   |  |               |           |
| E1.  | Gross Turnover or Gross Receipts  |  |               |           |
|  | E1a.  | Through a/c payee cheque or a/c payee bank draft or bank electronic clearing system received before specified date |               | 0         |
|  | E1b.  | Any other mode   |               | 2084735   |
| E2.  | Presumptive income under section 44AD   |  |               |           |
|  | a.  | 6% of E1a  |               | 0         |
|  | b.  | 8% of E1b  |               | 304162    |
|  | c.  | Total (a + b)  |               | 304162    |
| Note : If Income is less than the above percentage of Gross Receipts, it is mandatory to have a tax audit under 44AB and regular ITR 3 or 5 has to be filled not this form                 |   |  |               |           |
| Presumptive income under 44ADA (Profession)  |   |  |               |           |
| E3.  | Gross Receipts  |  |               | 0         |
| E4.  | Presumptive income under section 44ADA ( $\geq 50\%$ of E3)                                       |  |               | 0         |
| Note : If income is less than 50% of Gross Receipts, it is mandatory to have a tax audit under 44AB and Regular ITR 3 or ITR 5 form has to be filled and not this form                     |   |  |               |           |
| COMPUTATION OF PRESUMPTIVE INCOME UNDER 44AE   |   |  |               |           |
| E5.  | Presumptive Income from Goods Carriage under section 44AE   |  |               | 0         |
| Note : If the profits are lower than prescribed under S.44AE or the number of 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 partners (This is to be filled up only by firms)                  |  |               |           |
| E7.  | Income Chargeable under Business under section 44AE (E5 - E6)                                     |  |               | 0         |
| E8.  | Income chargeable under Business & Profession (under section 44AD, 44ADA and 44AE) (E2 + E4 + E7) |  |               | 304162    |
| FINANCIAL PARTICULARS OF THE BUSINESS  |   |  |               |           |
| Note : For E9 to E12, furnish the information as on 31st day of March, 2017  |   |  |               |           |
| E9.  | Amount of Total Sundry Debtors  |  |               | 178342    |
| E10.   | Amount of Total Sundry Creditors  |  |               | 32500     |

|      |                                |        |
|------|--------------------------------|--------|
| E11. | Amount of Total Stock-in-trade | 290325 |
| E12. | Amount of the Cash Balance     | 34186  |

**TDS1.Details of Tax Deducted at Source from Salary [As per Form 16 issued by Employer(s)]**

| S.No. | TAN(1) | Name of the Employer(2) | Income under Salary(3) | Tax Deducted(4) |
|-------|--------|-------------------------|------------------------|-----------------|
| 1     |        |                         |                        |                 |
| TOTAL |        |                         |                        | 0               |

**Sch TDS2 - Details of Tax Deducted at Source from Income OTHER THAN SALARY [As per Form 16 A issued by Deductor(s)]**

| S.No. | TAN of the Deductor(1) | Name of the Deductor(2) | Unique TDS Certificate No.(3) | Deducted Year(4) | Details of Receipt as mentioned in Form 26AS(5) | Tax Deducted(6) | Amount out of (6) claimed this year(7) | If A23 is applicable, amount claimed in the hands of spouse(8) |
|-------|------------------------|-------------------------|-------------------------------|------------------|---|-----------------|--|--|
| 1     |                        |                         |                               |                  |   |                 |  |  |
| TOTAL |                        |                         |                               |                  |   |                 | 0                                      |  |

**Schedule TCS Details of Tax Collected at Source [As per Form 27D issued by the Collector(s)]**

| S.No. | Tax Collection Account Number of the Collector (1) | Name of Collector(2) | Details of amount paid as mentioned in Form 26AS (3) | Tax Collected (4) | Amount out of (4) being claimed in the hands of spouse, if section 5A is applicable (5) | Amount out of (4) being claimed in the hands of spouse, if section 5A is applicable (6) |
|-------|--|----------------------|--|-------------------|---|---|
| 1     |  |                      |  |                   |   |   |
| TOTAL |  |                      |  |                   | 0   |   |

**IT.Details of Advance Tax and Self Assessment Tax Payments**

| S.No. | BSR Code(1) | Date of Deposit(DD/MM/YYYY)(2) | Challan Number(3) | Tax Paid(4) |
|-------|-------------|--------------------------------|-------------------|-------------|
| 1     |             |                                |                   |             |
| TOTAL |             |                                |                   | 0           |

**Schedule AL Asset and Liability at the end of the year (Applicable in case where total income exceeds Rs. 50 lakh)**

|                                   |                                  |  |                             |
|-----------------------------------|----------------------------------|--|-----------------------------|
| <b>A</b>                          | Do you own any immovable asset ? |  |                             |
| <b>Details of immovable asset</b> |                                  |  |                             |
|                                   | <b>S No.</b>                     | <b>Description</b>   | <b>Address</b>              |
|                                   | 1                                |  |                             |
| <b>B</b>                          | <b>Details of movable asset</b>  |  |                             |
|                                   | <b>SI No.</b>                    | <b>Description</b>   | <b>Amount (cost) in Rs.</b> |
|                                   | (i)                              | Jewellery, bullion etc.  |                             |
|                                   | (ii)                             | Archaeological collections, drawings, painting, sculpture or any work of art |                             |
|                                   | (iii)                            | Vehicles, yachts, boats and aircrafts  |                             |
| <b>Financial asset</b>            |                                  |  |                             |
|                                   | (iv)                             | (a) Bank (including all deposits)  |                             |

|   |  |  |   |                                 |   |                         |                           |                                    |
|---|--|--|---|---------------------------------|---|-------------------------|---------------------------|------------------------------------|
|   | (b)  | Shares and securities                  |   |                                 |   |                         |                           |                                    |
|   | (c)  | Insurance policies                     |   |                                 |   |                         |                           |                                    |
|   | (d)  | Loans and advances given               |   |                                 |   |                         |                           |                                    |
|   | (d)  | Cash in hand                           |   |                                 |   |                         |                           |                                    |
| <b>C</b>  | Do you have any Interest held in the assets of a firm or association of persons (AOP) as a partner or member thereof ? |  |   |                                 |   |                         |                           |                                    |
| <b>Interest held in the assets of a firm or association of persons (AOP) as a partner or member thereof</b> |  |  |   |                                 |   |                         |                           |                                    |
|   | <b>S No.</b>   | <b>Name of the firm(s)/ AOP(s) (1)</b> | <b>Address of the firm(s)/ AOP(s) (2)</b> | <b>PAN of the firm/ AOP (3)</b> | <b>Assessee's investment in the firm/ AOP on cost basis (4)</b> |                         |                           |                                    |
|   | 1  |  |   |                                 |   |                         |                           |                                    |
| <b>D</b>  | Liability in relation to Assets at (A+B+C)   |  |   |                                 |   |                         |                           |                                    |
| <b>80G</b>  |  |  |   |                                 |   |                         |                           |                                    |
| <b>Instructions for correct calculation of 80G</b>  |  |  |   |                                 |   |                         |                           |                                    |
| <b>A. Donations entitled for 100% deduction without qualifying limit</b>                                    |  |  |   |                                 |   |                         |                           |                                    |
| <b>S No.</b>  | <b>Name of the Donee</b>   | <b>Address</b>                         | <b>City or Town or District</b>           | <b>State Code</b>               | <b>Pincode</b>  | <b>PAN of the Donee</b> | <b>Amount of donation</b> | <b>Eligible Amount of Donation</b> |
| 1   |  |  |   |                                 |   |                         |                           | 0                                  |
| <b>Total A</b>  |  |  |   |                                 |   |                         | 0                         | 0                                  |
| <b>B. Donations entitled for 50% deduction without qualifying limit</b>                                     |  |  |   |                                 |   |                         |                           |                                    |
| <b>S No.</b>  | <b>Name of the Donee</b>   | <b>Address</b>                         | <b>City or Town or District</b>           | <b>State Code</b>               | <b>Pincode</b>  | <b>PAN of the Donee</b> | <b>Amount of donation</b> | <b>Eligible Amount of Donation</b> |
| 1   |  |  |   |                                 |   |                         |                           | 0                                  |
| <b>Total B</b>  |  |  |   |                                 |   |                         | 0                         | 0                                  |
| <b>C. Donations entitled for 100% deduction subject to qualifying limit</b>                                 |  |  |   |                                 |   |                         |                           |                                    |
| <b>S No.</b>  | <b>Name of the Donee</b>   | <b>Address</b>                         | <b>City or Town or District</b>           | <b>State Code</b>               | <b>Pincode</b>  | <b>PAN of the Donee</b> | <b>Amount of donation</b> | <b>Eligible Amount of Donation</b> |
| 1   |  |  |   |                                 |   |                         |                           | 0                                  |
| <b>Total C</b>  |  |  |   |                                 |   |                         | 0                         | 0                                  |
| <b>D. Donations entitled for 50% deduction subject to qualifying limit</b>                                  |  |  |   |                                 |   |                         |                           |                                    |
| <b>S No.</b>  | <b>Name of the Donee</b>   | <b>Address</b>                         | <b>City or Town or District</b>           | <b>State Code</b>               | <b>Pincode</b>  | <b>PAN of the Donee</b> | <b>Amount of donation</b> | <b>Eligible Amount of Donation</b> |
| 1   |  |  |   |                                 |   |                         |                           | 0                                  |
| <b>Total D</b>  |  |  |   |                                 |   |                         | 0                         | 0                                  |
| <b>E. Donations (A + B + C + D)</b>   |  |  |   |                                 |   |                         | 0                         | 0                                  |
| <b>VERIFICATION</b>   |  |  |   |                                 |   |                         |                           |                                    |

I **MOTIAR RAHAMAN MONDAL** son/daughter of **MADARBAKSH MONDAL** solemnly declare that to the best of my knowledge and belief, the information given in the return 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 2017-18.

| Place   | Date       | PAN        |
|---|------------|------------|
| KOLKATA   | 17/03/2018 | AYFPM5223J |
| 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  |            |            |

