FORM	ITR-4 <b>SUGAM</b>	INDIAN INCOME TAX RETURN [For Individuals, HUFs and Firms (other than LLP) being a resident having total income upto Rs.50 lakh and having income from business and profession which is computed under sections 44AD, 44ADA or 44AE] [Not for an individual who is either Director in a company or has invested in unlisted equity shares or if income-tax is deferred on ESOP or has agricultural income more than Rs.5000]  (Please refer instructions for eligibility)	Assessment Year 2022 - 23	
------	-----------------------	---	---------------------------------	--

(A1) First Name <b>DEEPAK</b>	(A2) Middle Name KANAYALAL	(A3) Last Name GIANANI	(A4) Permanent Account Number AADPG0540J
(A5) Date of Birth/Formation 21-Jan-1961	n (DD/MM/YYYY)	A DEDICTOR H	(A6) Flat/Door/Block No. BUNGLOW NO 18ATUR PARK
(A7) Name of Premises/Bui	ilding/Village	(A8) Road/Street/Post Office Chembur H.O	(A9) Area/Locality Mumbai
(A10) Town/City/District	(A11) State 19-Maharashtra	(A12) Country/Region <b>91-India</b>	(A13) PIN Code/ZIP Code 400071
(A14) Aadhaar Number(12 Aadhaar No.) <b>2xxx xxxx 0354</b>	digits)/Aadhaar Enrolment I	d(28 digits) (if eligible for	(A15) Status Individual HUF Firm (other than LLP)
(A16) Residential/Office Ph /Mobile No.1 / <b>91 7977203659</b>	one Number with STD Code	e (A17) Mobile No.2 93	(A18) Email Address-1 (Self) ks120788@gmail.com
			Email Address-2
(A19) Nature of employmer - Pensioners PSU - Pens			taking CG - Pensioners SG e.g. Family Pension etc.)
(A20)(a) Filed u/s (Tick) [Please see instruction]	139(1)- On or before de 139(5)- Revised Return	` '	
(b) Or Filed in response to notice u/s	139(9) 142(1) 148		
(A21) If revised/defective th Date of filing of original retu			
	notice u/s 139(9)/142(1)/14 r Unique Number/ Documer & Date of such Notice or		
(A23) Have you opted for n	ew tax regime u/s 115BAC	and filed Form 10IE in AY 20	021-22 ? Yes No
	ent year ng Continue to opt Opt lease furnish date of filing o		,

return If yes [Note	of ind , plea : To b	come? se furr e filled	ng return of income under Seventh progression of the control of th	ck) Yes rnish a ret	No urn of	income under s	ection 1	39(1) I	out fil		
			osited amount or aggregate of amour account during the previous year?	nts exceed Yes	ling Rs No	s. 1 Crore in one					0
	lakhs	for tra	urred expenditure of an amount or agavel to a foreign country for yourself of								0
			urred expenditure of amount or aggrenption of electricity during the previou			exceeding Rs. Yes No					0
			ired to file a return as per other condi yes, please select the relevant cond				•		rovis No	o to	
S.No			,	Amount							
			is return is being filed by a represent nish following information -	ative asse	ssee?	(Tick) Yes	No				
(1)	Name	e of th	e representative								
(2)	Capa	city of	the representative								
(3)	Addre	ess of	the representative								
(4)	Perm	anent	Account Number (PAN)/ Aadhaar No	o. of the re	prese	ntative					
PART	B GR	OSS TO	OTAL INCOME					W	hole -	- Rupee o	only
B1	Ir	ncome	from Business & Profession (NOTE-	-Enter valu	ue fron	n E8 of Schedul	e BP)		B1	4,48,3	331
B2	i	Gross	s Salary (ia + ib + ic + id + ie)					i			0
SION		а	Salary as per section 17(1)		ia		0				
PENS		b	Value of perquisites as per section 1	17(2)	ib		0				
		С	Profit in lieu of salary as per section	17(3)	ic		0				
SALARY /		d	Income from retirement benefit accomaintained in a notified country u/s		id		0				
S		е	Income from retirement benefit accomaintained in a country other than no country u/s 89A		ie		0				
	ii		allowances to the extent exempt u/s ure that it is included in salary income		/17(2).	/17(3)]		ii			0
		SL. No	Nature of Exempt Allowance	Description selected)	on ( If A	any Other	Amount				
	iia	Less 89A	: Income claimed for relief from taxat	ion u/s	iia		0				
	iii	Net S	Salary (i - ii - iia)					iii			0
	iv	Dedu	uctions u/s 16 (iva + ivb + ivc)					iv			0
		а	Standard deduction u/s 16(ia)		iva		0				
		h	Entertainment allowance u/s 16(ii)		ivh		0				

		С	Professional tax u/s 1	6(iii)	iv	vc			0		
	V		me chargeable under the TDS1")	ne head 'Salaries' (	iii - iv)	(NC	TE- Ensur	e to Fill	B2		(
В3	Tick	applic	cable option Self-Occ	upied Let Out	Deeme	d Let	t Out				
HOUSE PROPERTY	i		ss rent received/ receivang the year	able/ lettable value	i		A)	(	0		
ROP	ii	Tax	paid to local authorities	VIV	ii V	i	N/I		0		
Е	iii	Annı	ual Value (i - ii)		ii	ii	N/		0		
SNO	iv	30%	of Annual Value		i	V	W		0		
I	v	Inter	est payable on borrowe	ed capital	न जयते <sub>v</sub>	,	107		0		
	vi		ars/Unrealized Rent red	ceived during the ye	ear v	/i			0		
	vii	the f	me chargeable under the igure in negative) Note off in computing income of forward and set of los	<ul> <li>Maximum loss fro of this year is INR</li> </ul>	om hous 2, 00,0	se pro	operty that	can be	В3		(
B4			om Other Sources I "Sch TDS2" if applicat	ole.					B4		(
S.No	·							Total Amount			
-											(
Quar	terly b	reakup	of Dividend Income				eakup of Inc				efit account portion)
į		Up to	15-Jun-2021	0	i	ι	Jp to 15-Ju	n-2021			
ii			16-Jun-2021 to ep-2021	0	ii		rom 16-Ju  5-Sep-202				(
iii			16-Sep-2021 to ec-2021	0	iii		rom 16-Se 5-Dec-202				(
iv			16-Dec-2021 to ar-2022	0	iv		From 16-De 5-Mar-202				(
V			16-Mar-2022 to ar-2022	0	V		- From 16-Ma 31-Mar-202				(
	Less	s: Ded	uction u/s 57(iia) <i>(in cas</i>	se of family pension	n only)						(
	Less	s: Inco	me claimed for relief fro	m taxation u/s 89A	4						(
В5			tal Income (B1+B2+B3 e benefit of carry forwa		ss, pleas	se us	se ITR-3/5.			В5	4,48,33
Part	C - Dec	duction	ns and Taxable Total Inco	me							
	Sect	tion						Amount		Syste	m Calculate
S. No.											

C2	80CCC - Payment in respect Pension Fund		0 0
C3	80CCD(1) - Contribution to pension scheme of Central Government		0 0
C4	80CCD(1B) -Contribution to pension scheme of Central Government		0 0
C5	80CCD(2) - Contribution to pension scheme of Central Government by employer		0 0
C6	80D - Deduction in respect of health insurance premia Note: 1. Total of 80D in system calculated value should not exceed Rs 1,00,000. 2. Total of 80D in system calculated value should not exceed Rs 50,000 in case of HUF.	जयते	0 0
C7	80DD - Maintenance including medical treatment of a dependent who is a person with disability	25	0 0
C8	80DDB - Medical treatment of specified disease		0 0
C9	80E - Interest on loan taken for higher education	FPIK!	0 0
C10	80EE - Interest on loan taken for residential house property		0 0
C11	80EEA - Deduction in respect of interest on loan taken for certain house property		0 0
C12	80EEB - Deduction in respect of purchase of electric vehicle		0 0
C13	80G - Donations to certain funds, charitable institutions, etc (Please fill 80G schedule. This field is auto-populated from schedule 80G.)		0 0
C14	80GG - Rent paid		0 0
C15	80GGC - Donation to Political party		0 0
C16	80TTA - Interest on deposits in saving bank Accounts		0 0
C17	80TTB- Interest on deposits in case of senior citizens.		0 0
C18	80U - In case of a person with disability.		0
C19	Total deductions (Add items C1 to C18)		0
C20	Taxable Total Income (B5 - C19)		4,48,330
PART	D - TAX COMPUTATIONS AND TAX STATUS		
D1	Tax payable on total income	D1	7,417
D2	Rebate on 87A	D2	7,417
D3	Tax payable after Rebate (D1-D2)	D3	0
D4	Health and Education Cess @ 4% on (D3)	D4	0
D5	Total Tax, and Cess (D3 + D4)	D5	0
D6	Relief u/s 89 (Please ensure to submit Form 10E to c relief)	laim this D6	0

<b>D</b> -		( D   ( /D =	• •			<b>n</b> -	_
D7		ax after Relief (D5 – D6	5)			D7	0
D8	Total Intere	est u/s 234A				D8	0
D9	Total Intere	est u/s 234B				D9	0
D10	Total Intere	est u/s 234C	1/2			D10	0
D11	Fee u/s 234	4F				D11	1,000
D12	Total Tax, I	Fee and Interest (D7 +	D8 + D	9 + D10 + D11)		D12	1,000
D13	Total Adva	nce Tax Paid				D13	0
D14	Total Self-A	Assessment Tax Paid				D14	1,000
D15		Claimed ( total of colur f Schedule-TDS2 )	nn 4 of	Schedule-TDS1 and	4	D15	0
D16	Total TCS	Collected ( total of colu	ımn (5)		D16	0	
D17	Total Taxes	s Paid (D13 + D14 + D	15 +D1		D17	1,000	
D18	Amount payable (D12 - D17, If D12 > D17)					D18	0
D19	Refund (D1	7 - D12, If D17 > D12)		VAX DEPE	Dr.	D19	0
D20	Exempt inc	ome only for reporting	purpos	es (If agricultural inc	ome is	more th	an Rs.5,000/-, use ITR 3/5)
	SI. No. Nature of Income						
	SI. No.	Nature of Income			Descrip (If 'Any Other' selecte	is	Amount
	SI. No.	Nature of Income			(If 'Any Other'	is	Amount 0
D21	Total  Details of a	Nature of Income  III Bank Accounts held ear (excluding dormant		-	(If 'Any Other' selecte	is	
D21	Total  Details of a	III Bank Accounts held ear (excluding dormant		-	(If 'Any Other' selecte	is	
	Total  Details of a previous ye	all Bank Accounts held ear (excluding dormant the Bank	Name of the	nts)	(If 'Any Other' selecte	is	0

- 1. Minimum one account should be selected for refund credit.
- 2. In case of Refund, multiple accounts are selected for refund credit, then refund will be credited to one of the account decided by CPC after processing the return

## SCHEDULE BP - DETAILS OF INCOME FROM BUSINESS OR PROFESSION

## COMPUTATION OF PRESUMPTIVE BUSINESS INCOME UNDER SECTION 44AD

S. No.	Name of Business	Business code	Description
1	NEHA FEBRICS	09028-Retail sale of other	

			prod	lucts n.e.c			
E1	Gros	ss Turnover or G	oss Receipts		i		
	а	electronic clear		ayee bank draft or bank or prescribed electronic te	E1a		18,87,826
	b	Any other mode			E1b		8,27,65
E2	Pres	sumptive Income	under section 44AD	No. of	W		
	а	6% of E1a or the whichever is high	e amount claimed to gher	have been earned,	E2a		3,33,76
	b	8% of E1b or the whichever is high	e amount claimed to gher	have been earned,	E2b		1,14,56
	С	Total (a + b)			E2c		4,48,33
	Rec			ercentage of Gross dit under 44AB & other	MEN		~
COM	PUTA <sup>·</sup>	TION OF PRESUM	PTIVE INCOME FROM I	PROFESSIONS UNDER SE	ECTION 44AD	A	
S. No.	Nam	e of Business		Business code		Descrip	otion
E3	Gros	ss Receipts		<u>'</u>	E3	'	(
E4	amo NOT man has	ount claimed to ha FE- If Income is lead adatory to have a to be filed		ichever is higher ss Receipts, it is 3 & other ITR as applica			
S. No.	PUIA		Business	GOODS CARRIAGES UND  Business c		4446	Description
SI. No	_	stration No. of ds carriage	Whether owned/ leased/hired	Tonnage capacity of goods carriage(in MT)	Number of for which g carriage wa /leased/hire assessee	oods as owned	Presumptive income of a 44AE for the goods carriage (Computed @ Rs.1000 per tor per month in case tonnage exceeds 12MT, or else @ Rs.7500 per month) or the amount claimed to have been actually earned, whichever is highe
(i)	(1)		(2)	(3)	(4)		nigne
Add	row o	ptions as necess	ary (At any time duri	ng the year the number	of vehicles s	should not	exceed 10 vehicles)
E5		sumptive Income olumn (5)]	from Goods Carriage	e under section 44AE [to	otal E5		(

		ehicles owned at any time exceed as to be filed	ed 10 then other ITR, a	as	
E6		nterest paid to the partners is to be filled up only by firms		E6	(
E7	Presumptive	Income u/s 44AE (E5-E6)		E7	(
E8	Income char (E2c+E4+E7	geable under the head 'Busines: )	s or Profession'	E8	4,48,331
E9		ON REGARDING TURNOVER/GE furnish the information below			GST
S. No.	GSTIN No.(s)		An	nual Value of Ou	tward Supplies as per the GST Returns Filed
E10	Total of valu	e of Outward Supplies as per th	e GST returns filed		(
		ULARS OF THE BUSINESS 25 furnish the information as on 31	st day of March, 2022		
E11	Partners/ Me	embers own capital	AK DEPAKI	E11	C
E12	Secured loa	ns		E12	(
E13	Unsecured I	oans		E13	33,81,699
E14	Advances			E14	(
E15	Sundry cred	itors		E15	81,300
E16	Other liabiliti	es		E16	(
E17	Total capital	and liabilities (E11+E12+E13+E	E14+E15+E16)	E17	34,62,999
E18	Fixed assets	3		E18	(
E19	Inventories			E19	19,73,765
E20	Sundry debt	ors		E20	14,37,889
E21	Balance with	n banks		E21	(
E22	Cash-in-han	d		E22	51,345
E23	Loans and a	dvances		E23	(
E24	Other assets	3		E24	(
E25	Total assets	(E18+E19+E20+E21+E22+E23	+E24)	E25	34,62,999
		to instructions for filling out this datory and others if available)	schedule (E15, E19,		
SCHE	DULE IT - DET	AILS OF ADVANCE TAX AND SELF	ASSESSMENT TAX PA	YMENTS	
E	BSR Code	Date of Deposit (DD/MM/YYYY)	Challan No	0.	Tax paid
C	Col (1)	Col (2)	Col (3)		Col (4
1 (	0004329	30-Aug-2022	36230		1,000
Total					1,000

No (	Collection Account Number of the	Name of Collecto			Details of amount paid as mentioned	Tax (	Collected		ount out of (4) being claimed
(	Collector				in Form 26AS				
(	Col (1)	Col (2)			Col (3)		Col (4)		Col (5)
Total				(7)	<i>Y. A.</i> . Y				0
Note:	Please en	nter total	of column	(5) of Sche	edule-TCS in I	016			
			LS OF TAX [ Employer(s		AT SOURCE FF	ROM SALARY			
TA	N	Name of	f the Employ	ver .		Income	under Salary		Tax deducted
Co	ol (1)	Col (2)					Col (3)		Col (4)
Total			< 4//	Ban			N L		0
Note:	Enter the	total of	column 4 o	f Schedule-	TDS1 and co	lumn 6 of Schedule	e-TDS2 in D1:	5	
					AT SOURCE OI D furnished by	N INCOME OTHER TH	HAN SALARY		
SI. No.	TAN of De / PAN / Aa No.of Tena	dhaar	dhaar brought		TDS of the current Fin. Year	TDS credit being claimed this Year (only if corresponding receipt is being offered for tax this year , not applicable if TDS is deducted u/s	Correspondir withdra offer	awals red	TDS credit being carried forward
			Fin. Year in which deducted	TDS b/f	TDS Deducted	TDS Claimed	Gross Amount	Head of Income	
(1)	(2)		(3)	(4)	(5)	(6)	(7)	(8)	(9)
1				0	0	0	0		0
Total						0			
Note:	Enter the	total of	column 6 o	f Schedule	TDS2 and co	lumn 4 of Schedule	-TDS1 in D1	5	
Detail	s of Tax Ded	ducted at	Source [TD	S 2(ii)] [as p	er form 16C fu	rnished by the payer	(s)]		
SI.No	PAN/Aadh of Tenant		Unclaim brou forwai	ught	TDS of the current Financial Year	Year (only if	-	Corresponding Receipt offered	
			Financial Year in which	TDS b/f	TDS Deducted	TDS Claimed	Gross Amount	Head of Income	

			TDS is deducted	ed						
1	2		3	4		5	6		7 8	9
Tota	al					anna ,	0			
Note	e: Ente	r the total o	of column (	6 of Schedule T	DS2 and	columr	n 4 of Schedul	e-TDS1 in D	15	
Sche	edule 80	D								
1	Whet		any of you	r family membe	er (excludi	ng par	ents) is a seni	or		Yes
(a)	Self 8	Family		<u>V</u>			P			
	(i)	Health Ins	urance	$\mathcal{A}$	सत्यमे	व जयते	1 10	7		(
	(ii)	Preventive	e Health Cl	neckup	कीव म	लो द	· §.			
(b)	Self 8	k Family in	cluding Se	nior Citizen	70					
	(i)	Health Ins	urance	VBn.						
	(ii)	Preventive	e Health Cl	neckup	TAN	nei	DARIN			(
	(iii)			(This deduction med at (i) above		claimed	d on which hea	alth		(
2	Whet	her any on	e of your p	arents is a sen	ior citizen				Not claimin	g for parent
(a)	Parer	nts								
	(i)	Health Ins	urance							
	(ii)	Preventive	e Health Cl	neckup						(
(b)	Parer	nts includin	g Senior C	Citizen						
	(i)	Health Ins	urance							
	(ii)	Preventive	e Health Cl	neckup						
	(iii)			(This deduction ned at (i) above		claimed	d on which hea	alth		(
3	Eligib	le Amount	of Deducti	on						
SCHE	OULE 80G - I	DETAILS OF DON	IATIONS ENTITLE	ED FOR DEDUCTION UND	DER SECTION 8	0G				
A. D	onations	entitled for 1	100% deduc	tion without qualify	ying limit					
SL.	Name of	Address	City or	State Code	Pin code	PAN of		Amount of donation	n	Eligible Amoun
No.	Donee		Town or District			Donee	Donation in cash	Donation in other	Total Donation	of Donation
-							0	(	0	
Tota	al A						0	(	0	
B. D	onations	entitled for 5	50% deduction	on without qualifyi	ng limit					
SL.	Name of	Address	City or	State Code	Pin code	PAN of		Amount of donation	n	Eligible Amour
No.	Donee		Town or District			Donee	Donation in cash	Donation in other	Total Donation	of Donation
							0		0	

Tota	al B						0	0	0	0	
C. D	onations e	entitled for	100% ded	uction subject to	o qualifying limit	•					
SL. Name of Address City or State Code Pin code PAN of Amount of donation Eligible Am											
No.	Donee		Town or District			Donee	Donation in cash	Donation in other mode	Total Donation	of Donation	
-				.05			0	0	0	0	
Tota	al C		·	07	7.1		0	0	0	0	
D. D	onations e	entitled for	50% dedu	ction subject to	qualifying limit			<b>Y</b> 1			
SL.	Name of	Address	City or	State Code	Pin code	PAN of		Amount of donation		Eligible Amount	
No.	Donee		Town or District			Donee	Donation in cash	Donation in other	Total Donation	of Donation	
								mode			
-					010		0	0	0	0	
Tota	al D			W.Co.			0	0	0	0	
E. T	otal Amo	ount of Do	onations	(A + B + C +	D)		0	0	0	0	

## **VERIFICATION**

I, **DEEPAK KANAYALAL GIANANI** son/ daughter of **KANAYALAL MATLARAM GIANANI** 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 **AADPG0540J**.

Place: **49.36.187.190**Date: **30-Aug-2022** 

If the return has been prepared by a Tax Return Preparer (TRP) give further details as below:		
TRP PIN (10 Digit)	Name of TRP	Counter Signature of TRP
Amount to be paid to TRP 0		