Acknowledgement Number:

Date of Filing:

INDIAN INCOME TAX RETURN

FORM ITR1 SAHAJ [For individuals being a RESIDENT (OTHER THAN NOT ORDINARILY RESIDENT) having total income up to Rs.50 lakh, having Income from Salaries, one house property, other sources (Interest etc.), long-term capital gains under section 112A upto Rs. 1.25 lakh, and agricultural income up to Rs.5 thousand]

Assessment Year 2025-26

under section 112A upto Rs. 1.25 lakh, and agricultural income up to 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 or has assets (including financial interest in any entity) located outside India] (Refer instructions for eligibility)

		interest	in any entity) lo	cated outside	· India] (Re	fer instructions	s for eligib	oility)			
PART A GE	NERAL INFO	ORMATION									
(A1) PAN DCCPA206	3N		(A2) First Name SANDHYA		(A2a)	Middle Name		(A3) La	st Name		
(A4) Date of 01/11/199			(A5) Aadhaar Nu 7xxx xxxx 5404		nber(12 digits)(if eligible for Aadhaar No.)				obile No 341155986	5	
(A7) Email A	Address ya025@gm	ail.com	(A8) Flat/Door/Bl			(A9) Name of Premises/Building/Village			(A10) Road/Street/Post Office, Area/Locality Bhavanipuram S.O, Vijayawada (Urban)		da
(A11) Town, KRISHNA	/City/District		(A12) State 02-Andhra Prac	desh		(A13) Country/Region (A14) PIN Code/ZIP Code 91-INDIA 520012				, Code	
(A15) Filing	Section				139(1	.)-On or before	due date				
(A16) Or File	ed in respons	se to notice u	/s								
(A17) Natur	e of employr	nent			Other	rs					
original retu	urn (DD/MM/ነ	YYY)	Receipt No. and D								
119(2)(b)- e		Number/ Doo	139(9)/142(1)/14 cument Identificat								
(A20) Do yo	ou wish to exc opting out , o	ercise the op	cion u/s 115BAC(6 oe exercised along				is "No")				
	ou filing retu	rn of income	under Seventh pr	oviso to section	139(1) but	otherwise not red	quired to fu	rnish retur	n of income	? - (Tick)	
			ation [Note: To be one or more cond						under sect	ion 139(1) but	:
foreign cour ☐ Yes ☐ No	ntry for yours	self or for any	an amount or agg other person?	X &		111					0
	luring the pre		amount or aggre	gate of amount o	exceeding F	Rs. 1 lakh on cons	sumption of				0
(iii) Are you relevant cor □ Yes □ No	ndition from	file a return a the drop dow	s per other condit n menu)	tions prescribed	under claus	se (iv) of seventh	proviso to	section 13	9(1) (If yes,	please select	the
10312 140			1 /0	04.		- ARE					
PART B GR	ROSS TOTAL	INCOME									
B1	i Gr	oss Salary (ia	a + ib + ic + id +	ie)	7. 5.75			i			0
	a Sa	alary as per s	ection 17(1)				ia		0		
	b Va	alue of perqui	sites as per sectio	on 17(2)			ib		0		
	c Pr	ofit in lieu of	salary as per sect	ion 17(3)			ic		0		
	d Inc	come from re A	tirement benefit a	account maintai	ined in a not	tified country u/s	id		0		
	S		Country			Amount					
		come from re otified country	tirement benefit a u/s 89A	account maintai	ined in a cou	untry other than	ie		0		
		ss allowance (1)/17(2)/17(s to the extent ex 3)]	empt u/s 10 [En	sure that it	is included in sal	ary income	u/s ii			0
								1	1		

	SI. No.	Nature of Exempt Allowance	Description (If 'Any Other' selected)				Amount			
	(1)	(2)		(3)					(4)	
	iia	Less : Income claimed for relief from taxa	ntion u/s 89 <i>F</i>	4				iia		0
	iii	Net Salary (i - ii - iia)						iii		0
	iv	Deductions u/s 16 (iva + ivb + ivc)						iv		0
	a	Standard deduction u/s 16(ia)				iva		0		
	b	Entertainment allowance u/s 16(ii)				ivb		0	-	
	С	Professional tax u/s 16(iii)				ivc		0	-	
	v	Income chargeable under the head 'Salar	ies' (iii - iv)					v		0
B2		Type Of House Property						B2		
	i	Gross rent received/ receivable/ letable v	alue during	the year				i		0
	ii	ii Tax paid to local authorities						ii		0
	iii	iii Annual Value (i - ii)						iii		0
	iv	iv 30% of Annual Value (30% * iii)						iv		0
	V							v		0
	vi						vi		0	
	vii	Income chargeable under the head 'House Property' (iii-iv-v)+vi Note: (If loss, put the figure in negative) Maximum Loss from House property that can be set-off in computing income of this year is INR 2,00,000. To avail the benefit of carry forward and set off of loss, please use ITR-2					vii		0	
В3		Income from Other Sources						В3		0
	SI. No.	Nature of Income	Description (If 'Any Other' selected)			d)	Amount			
	(1)	(2)		(3)				(4)		
		///	Y THE	MY	2.7					
		Quarterly breakup of Dividend Incom	e		maintaine	d in a		country	ent benefit u/s 89A	
	(i)	Up to 15-Jun-2024	0	(i)	Up to 15-Ju			•	0	
	(ii)	From 16-Jun-2024 to 15-Sep-2024	93/87:10	(ii)	From 16-Jui 15-Sep-202		ł to		0	
	(iii)	From 16-Sep-2024 to 15-Dec-2024	0	(iii)	From 16-Se 15-Dec-202		4 to	7	0	
	(iv)	From 16-Dec-2024 to 15-Mar-2025	7.4.0	(iv)	From 16-De 15-Mar-202		4 to		0	
	(v)	From 16-Mar-2025 to 31-Mar-2025	0 (v) From 16-Mar-2025 to 31-Mar-2025			5 to		0		
		Less: Income claimed for relief from taxat	tion u/s 89A				ı			0
		Less: Deduction u/s 57(iia) (in case of fam	nily pension	only)						0
B4		Gross Total Income (B1+B2+B3+B7a(iii)) the benefit of carry forward and set of los			n negative) N	Note: T	o avail	B4		0

Acknowledgement Number : Date of Filing :

PART C	PART C - DEDUCTIONS AND TAXABLE TOTAL INCOME									
SI.No.	Section	Amount	System Calculated							
C1	80C - Life insurance premium, deferred annuity, contributions to provident fund, subscription to certain equity shares or debentures, etc.	0	0							
C2	80CCC - Payment in respect Pension Fund, etc.	0	0							
С3	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 (Please fill schedule 80D. This field is auto-populated from schedule 80D)	0	0							
C7	80DD - Maintenance including medical treatment of a dependent who is a person with disability	0	0							
C8	80DDB - Medical treatment of specified disease	0	0							
C9	80E - Interest on loan taken for higher education	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	80GGA - Certain donations for scientific research or rural development (Please fill 80GGA Schedule. This field is autopopulated from schedule.)	0	0							
C16	80GGC - Donation to Political party	0	0							
C17	80TTA - Interest on savings bank account	0	0							
		TEN!								

^{*}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)."

Ackno	wledgement Number :				Dat	e of Filing :	
C18	80TTB- Interest on deposits	ME TAX DEP	RTM	0		0	
C19	80U - In case of a person with disability			0)		
C20	80CCH- Contribution to Agnipath Scheme			0	0		
C21	Total deductions (C1 to C20)					0	
Total Ir	ncome (B4-C21)					0	
FXFMI	PT INCOME: FOR REPORTING PURPOSE AN	ID INCOME ON WHICH NO TA	X IS PAYARI F				
SI. No.	Nature of Income	Description (If 'Any Ot	-		Amount		
(1)	(2)	(3)			(4)		
Total A	mount					0	
INCOM	IE ON WHICH NO TAX IS PAYABLE: LONG	TERM CAPITAL GAINS U/S 11	2A NOT CHARGE	ABLE TO	INCOME-TAX		
i	Total sale consideration				0		
ii	Total cost of acquisition					0	
iii	Long term capital gains as per sec 112A	ong term capital gains as per sec 112A				0	

PART D	- COMPUTATION OF TAX PAYABLE		
D1	Tax payable on total income	D1	0
D2	Rebate u/s 87A	D2	0
D3	Tax payable 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	Balance Tax After Relief (D5 - D6)	D7	0
D8	Interest u/s 234A	D8	0
D9	Interest u/s 234B	D9	0
D10	Interest u/s 234C	D10	0
D11	Fee u/s 234F	D11	0
D12	Total Interest and Fee Payable (D8 + D9 + D10 + D11)	D12	0
D13	Total Tax, Fee and Interest (D7 + D12)	D13	0

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D14	Total Advance Tax Paid	D14	0
D15	Total Self-Assessment Tax Paid	D15	0
D16	Total TDS Claimed	D16	0
D17	Total TCS Claimed	D17	0
D18	Total Taxes Paid (D14 + D15 + D16 + D17)	D18	0
D19	Amount payable (D13-D18) (if D13 > D18)	D19	0
D20	Refund (D18 - D13) (if D18 > D13)	D20	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	Select Account for Refund Credit	
(1)	(2)	(2)		(5)	(6)	
1	HDFC0000240	C0000240 HDFC BANK		Savings Account	V	

SECTION 24(B) - INTEREST ON BORROWED CAPITAL

SI. No.	Loan taken from	Name of the bank / Institution / Person from which the loan is taken	Loan Account number of the Bank/ Institution	Date of sanction of loan	Total amount of loan	Loan outstanding as on last date of financial year	Interest on Borrowed capital u/s 24(b)		
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)		
Total of	otal of Interest on Borrowed capital u/s 24(b)								

SCHEDULE-10(13A) HOUSE RENT ALLOWANCE(HRA)

Place of Work	Actual HRA received (A)	Actual Rent paid	Details of Salary as per section 17(1)	Basic Salary	Dearness Allowance	Actual rent paid-10% of salary (B) (3-10% of 4)	50% /40% of salary©	Eligible Exempt Allowance u/s 10(13A)
(1)	(2)	(3)	(4)	(4a)	(4b)	(5)	(6)	(7)
	0	0	0	0	0	0	0	0

SCHEDULE 80D

	T		П.				
1	Whethe	hether you or any of your family member (excluding parents) is a senior citizen?					
(a)	Self & F	amily)				
	(i)	Health Insurance)				

		Detail	s of Insurance		
		S. No.	Name of the Insurer (Insurance company)	Policy number	Health Insurance amount
		(1)	(2)	(3)	(4)
		Total o	of payments	A STATE OF THE STA	all the
	(ii)	Preve	ntive Health Checkup		M
0)	Self &	Family i	ncluding Senior Citizen	/ Yang (W
	(i)	Health	n Insurance	(H) (1) (1)	ith
		Detail	s of Insurance	हिम्मू सम्प्रमा वापते	as M
		S. No.	Name of the Insurer (Insurance company)	Policy number	Health Insurance amount
		(1)	(2)	(3)	(4)
		Total o	of payments	ME TAX DEP	ARTMI
	(ii)	Preve	ntive Health Checkup		
	(iii)	Medic not cla	al Expenditure (This deductio aimed at (i) above)	n can be claimed on which	health insurance is
	Wheth	er any o	one of your parents is a senior	citizen	'
a)	Parent	S			
	(i)	Health	n Insurance		
		Detail	s of Insurance		
		S. No.	Name of the Insurer (Insurance company)	Policy number	Health Insurance amount
		(1)	(2)	(3)	(4)
		Total o	of payments		
	(ii)	Preve	ntive Health Checkup		
)	Parent	s includ	ing Senior Citizen		
	(i)	Health	n Insurance		
		Detail	s of Insurance		
		S. No.	Name of the Insurer	Policy number	Health Insurance
		(1)	(Insurance company) (2)	(3)	(4)
			of payments		
	(ii)		ntive Health Checkup		
	(iii)	Medic	al Expenditure (This deductio aimed at (i) above)	n can be claimed on which	health insurance is
3		HOL CI	aimeu at (i) above)		

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SECTIO	SECTION 80U - DETAILS OF DEDUCTION IN CASE OF A PERSON WITH DISABILITY										
SI. Nature of Disability Type of Disability Amount of Deduction Ack. No. of Form 10IA filed UDID Number of Disability											
(1)	(2a)	(2b)	(3)	(4)	(5)						
1			0								

SECTION 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	Type of Disability	Amount of Deduction	Type of dependent	PAN of the dependent	Aadhaar of the dependent	Ack. No. of Form 10IA filed	UDID Number (If available)
(1)	(2a)	(2b)	(3)	(4)	(5)	(6)	(7)	(8)
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	ame of Address Town or State code Pin code				ount of dona	tion	Eligible Amount of		
No.	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)	(8)	(9)	(10)	(11)
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 code			PAN of	Am	ount of dona	tion	Eligible Amount of
No.	Donee	Address	District	State code	Pili Code	Donee	Donation in cash	Donation in other mode	Total donation	Donation
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(9)	(10)	(11)	(12)
Total B						0	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	Din codo	Pin code PAN of Amount of donation Elig		unt of donation		
No.	Donee	Address	District	State code	Pin Code	Donee	Donation in cash	Donation in other mode	Total donation	Amount of Donation
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(9)	(10)	(11)	(12)
Total C				N		B A	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			PAN of	ARN (Donation	Amount of donation		Eligible	
No.	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			7	W.Co.			-ME	0	0	0	0
E. Total Amount of Donations (A + B + C + D) 0 0										0	

SCHEDULE 80GGA DETAILS OF DONATIONS FOR SCIENTIFIC RESEARCH OR RURAL DEVELOPMENT

SI.	Relevant Clause	Name of		City or	State		PAN of	Amo	ount of Dona	ation	Eligible Amount
No.	under which deduction is claimed	Donee	Address	Town or District	Code	Pin code	Donee	Donation in Cash	Donation in other mode	Total Donation	of Donation
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
Total D	otal Donation								0	0	0

SCHEDULE 80GGC DETAILS OF CONTRIBUTION MADE TO POLITICAL PARTIES

No. Contribution in Contribution in Contribution Cash Contribution Contribution Contribution Contribution Contribution Contribution Contribution Contribution Almount of Amount	SI.	Data	Am	ount of Contributi	on	Eligible Amount of	Transaction Reference number for UPI transfer / Cheque number / IMPS	IFSC code of
	No.	Date				Contribution / NEFT / RTG	/ NEFT / RTGS reference	Bank

(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
Total Contribution		0	0	0	0		

SCHEDULE IT - I	DETAILS OF	ADVANCE TAX	AND SELF A	SSESSMENT 1	TAX PAYMENTS

SI. No.	BSR Code	Date of Deposit (DD/MM/YYYY)	Tax paid		
(1)	(2)	(3)	(4)	(5)	
Total				0	

SCHEDULE TDS1 - DETAILS OF TAX DEDUCTED AT SOURCE FROM SALARY [AS PER FORM 16 ISSUED BY EMPLOYER(S)]

SI. No.	TAN of the Deductor	Name of Deductor	Income chargeable under salaries	Total Tax Deducted
(1)	(2)	(3)	(4)	(5)
Total				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 Deductor	Section under which TDS deducted	Gross receipt which is subject to tax deduction	Year of tax deduction	Tax Deducted	TDS Credit out of (6)claimed this year
(1)	(2)	(3a)	(3b)	(4)	(5)	(6)	(7)
Total							0

SCHEDULE TDS3 - DETAILS OF TAX DEDUCTED AT SOURCE (AS PER FORM 16C FURNISHED BY PAYER(S))

SI. No.	PAN of the Tenant	Aadhaar No of the Tenant	Name of the Tenant	Section under which TDS deducted	Gross receipt which is subject to tax deduction	Year of tax deduction	Tax Deducted	TDS Credit out of (7) claimed this year
(1)	(2)	(3)	(4a)	(4b)	(5)	(6)	(7)	(8)
Total			Ω	982	in M			0

SCH TCS DETAILS OF TAX COLLECTED AT SOURCE [AS PER FORM 27D ISSUED BY THE COLLECTOR(S)]

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 (6) claimed this year
(1)	(2)	(3)	(4)	(5)	(6)	(7)
Total	_		108 8	325	()	0

VERIFICATION

I, **SANDHYA ALLU** son/ daughter of **LAKSHMANRAO ALLU** 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 **DCCPA2063N**

Place: VIJAYAWADA

Date: 13-Sep-2025

Acknowledgement Number : Date of Filing :

If the return has been prepared by a Tax Return Preparer (TRP)	e 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 to	0						