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] [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)

Assessment Year 2025-26

PART A GENERAL INFORMATION (A1) PAN (A2) First Name (A3) Last Name (A2a) Middle Name BUIPS8804B SINGH GIRJA (A4) Date of Birth (A5) Aadhaar Number(12 digits)(if eligible for Aadhaar No.) (A6) Mobile No 07/07/1968 +91 9028876082 6xxx xxxx 3729 (A10) Road/Street/Post Office. (A7) Email Address (A8) Flat/Door/Block No. (A9) Name of Area/Locality shivmngl@gmail.com 682/10b Premises/Building/Village Vrinda Van Colony S.O, **TELIBAGH** (A14) PIN Code/ZIP Code (A11) Town/City/District (A12) State (A13) Country/Region LUCKNOW 31-Uttar Pradesh 91-INDIA 226029 (A15) Filing Section 139(1)-On or before due date (A16) Or Filed in response to notice u/s (A17) Nature of employment Others (A18) If revised/defective then enter Receipt No. and Date of filing of original return (DD/MM/YYYY) (A19) If filed in response to notice u/s 139(9)/142(1)/148/153C or order u/s 119(2)(b)- enter Unique Number/ Document Identification Number (DIN) & Date of such Notice or Order (A20) Do you wish to exercise the option u/s 115BAC(6) of Opting out of new tax regime ? (default is "No") Note: For opting out, option should be exercised along with return of income filed u/s 139(1) ☐ Yes 🗹 No (A21) Are you filing return of income under Seventh proviso to section 139(1) but otherwise not required to furnish return of income? - (Tick) ☐ Yes 🗹 No If yes, please furnish following information [Note: To be filled only if a person is not required to furnish a return of income under section 139(1) but filing return of income due to fulfilling one or more conditions mentioned in the seventh proviso to section 139(1)] (i) Have you incurred expenditure of an amount or aggregate of amount exceeding Rs. 2 lakhs for travel to a O foreign country for yourself or for any other person? Yes □ No

(ii) Have you incurred expenditure of amount or aggregate of amount exceeding Rs. 1 lakh on consumption of electricity during the previous year? 🗌 Yes 🖂 No

(iii) Are you required to file a return as per other conditions prescribed under clause (iv) of seventh proviso to section 139(1) (If yes, please select the relevant condition from the drop down menu)

□ Yes □ No

PART B	GROSS 1	TOTAL INCOME				
B1	i	Gross Salary (ia + ib + ic + id + ie)	7000		i	0
	a	Salary as per section 17(1)		ia	0	
	b	Value of perquisites as per section 17(2)		ib	0	
	С	Profit in lieu of salary as per section 17(3)		ic	0	
	d	Income from retirement benefit account m 89A	aintained in a notified country u/s	id	0	
	SI. Country		Amount			
	е	Income from retirement benefit account m notified country u/s 89A	aintained in a country other than	ie	0	
	ii	Less allowances to the extent exempt u/s 1 17(1)/17(2)/17(3)]	.0 [Ensure that it is included in sa	ary incom	e u/s ii	0

^{*}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).

	SI. No.	Nature of Exempt Allowance	Description (If 'Any Other' selected) (3)				4	Amount		
	(1)	(2)					(4)			
	iia	Less : Income claimed for relief from taxa	ition u/s 89	A				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)			I		v		0
B2		Type Of House Property						B2		
	i	Gross rent received/ receivable/ letable ve	alue during	the year				i		0
	ii	Tax paid to local authorities						ii		0
	iii	Annual Value (i - ii)						iii		
	iv	30% of Annual Value (30% * iii)	iii)				iv		0	
	v	Interest payable on borrowed capital Arrears/Unrealised rent received during the year less 30%					v		0	
	vi						vi		0	
	vii	Income chargeable under the head 'Hous Note : (If loss, put the figure in negative) set-off in computing income of this year is and set off of loss, please use ITR-2	Maximum I	oss from	House propert			vii		0
В3		Income from Other Sources						В3		467
	SI. No.	Nature of Income	Descri	ption (If	'Any Other' s	electe	d)	Amount		
	(1)	(2)			(3)				(4)	
	1	Interest from Saving Account			W					467
		Quarterly breakup of Dividend Incom	e		rly breakup o unt maintain (t	ed in a		country		
	(i)	Up to 15-Jun-2024	25/97:10	(i)	Up to 15-Ju	un-2024	1		0	
	(ii)	From 16-Jun-2024 to 15-Sep-2024	0	(ii)	From 16-Ju 15-Sep-20		1 to		0	
	(iii)	From 16-Sep-2024 to 15-Dec-2024	0	(iii)	From 16-S 15-Dec-20	ep-202 24	4 to		0	
	(iv)	From 16-Dec-2024 to 15-Mar-2025	0	(iv)	From 16-D 15-Mar-20		4 to		0	
	(v)	From 16 Mar 2025 to			From 16-M 31-Mar-20		5 to		0	
		Less: Income claimed for relief from taxat	tion u/s 89A	A						0
		Less: Deduction u/s 57(iia) (in case of fam	nily pensior	only)				1		0

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Acknowledge	ement Number :		Date of Filing
B4	Gross Total Income (B1+B2+B3+B7a(iii)) (If loss, put the figure in negative) Note: To avail the benefit of carry forward and set of loss, please use ITR -2	B4	
'			
	a s		
	M MM W		

PART C	- DEDUCTIONS AND TAXABLE TOTAL INCOME		a.
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
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 (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

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Acknowledgement Number : Date of Filing :

C18	80TTB- Interest on deposits		0 0
C19	80U - In case of a person with disability	संस्थाय वापते	0 0
C20	80CCH- Contribution to Agnipath Scheme	A STATE OF THE PARTY OF THE PAR	0 0
C21	Total deductions (C1 to C20)	OME TAX DEPARTME	0 0
Total In	come (B4-C21)		470

EXEMPT INCOME: FOR REPORTING PURPOSE AND INCOME ON WHICH NO TAX IS PAYABLE									
SI.	Nature of Income	Description (If 'Any Other' selected)	Amount						

(1) (2) (3) (4)

Total Amount 0

INCOME ON WHICH NO TAX IS PAYABLE: LONG TERM CAPITAL GAINS U/S 112A NOT CHARGEABLE TO INCOME-TAX i Total sale consideration 0 ii Total cost of acquisition 0 iii Long term capital gains as per sec 112A 0

PART D	- COMPUTATION OF TAX PAYABLE		
D1	Tax payable on total income	D1	
D2	Rebate u/s 87A	D2	
D3	Tax payable after Rebate	D3	
D4	Health and education Cess @4% on (D3)	D4	
D5	Total Tax and Cess	D5	
D6	Relief u/s 89 (Please ensure to submit Form 10E to claim this relief)	D6	
D7	Balance Tax After Relief (D5 - D6)	D7	
D8	Interest u/s 234A	D8	
D9	Interest u/s 234B	D9	
D10	Interest u/s 234C	D10	
D11	Fee u/s 234F	D11	
D12	Total Interest and Fee Payable (D8 + D9 + D10 + D11)	D12	
D13	Total Tax, Fee and Interest (D7 + D12)	D13	

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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)	(3)	(4)	(5)	(6)
1	UBIN0821527	UNION BANK OF INDIA	215212010001015	Savings Account	V

SECTION 24(B) - INTEREST ON BORROWED CAPITAL

SI. No.	Loan taken from		Loan Account number of the Bank/ Institution	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	Total 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

1	Whethe	r you or any of your family member (excluding parents) is a senior citizen?	1
(a)	Self & F	amily 0	
	(i)	Health Insurance 0	

			s of Insurance			
		S. No.	Name of the Insurer (Insurance company)	Policy number	Health Insura amount	nce
		(1)	(2)	(3)	(4)	
		Total c	of payments			(
	(ii)	Prevei	ntive Health Checkup			
(b)	Self &	Family i	ncluding Senior Citizen			
	(i)	Health	n Insurance			
		Detail	s of Insurance			
		S. No.	Name of the Insurer (Insurance company)	Policy number	Health Insura amount	nce
		(1)	(2)	(3)	(4)	
		Total c	of payments	TANK	W	(
	(ii)	Prevei	ntive Health Checkup	(=6)3	<i>}</i> }	
	(iii)	Medic not cla	al Expenditure (This deduction aimed at (i) above)	n can be claimed on which	health insurance is	,à
2	Wheth	er any o	ne of your parents is a senior	citizen	30	Λ
(a)	Parent	S	ZINA	76	The	
	(i)	Health	n Insurance	ME TAX DEP	ARTME	
		Detail	s of Insurance	1000	1	
		S. No.	Name of the Insurer (Insurance company)	Policy number	Health Insura amount	nce
		(1)	(2)	(3)	(4)	
		Total o	of payments			(
	(ii)	Prevei	ntive Health Checkup			
(b)	Parent	s includi	ing Senior Citizen			
	(i)	Health	n Insurance			
		Detail	s of Insurance			
		S. No.	Name of the Insurer (Insurance company)	Policy number	Health Insura amount	nce
		(1)	(2)	(3)	(4)	
		Total o	of payments			(
	(ii)	Preve	ntive Health Checkup		l	
	(iii)	Medic not cla	al Expenditure (This deduction aimed at (i) above)	n can be claimed on which	health insurance is	
3	Eligible		nt of Deduction			

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SECTIO	SECTION 80U - DETAILS OF DEDUCTION IN CASE OF A PERSON WITH DISABILITY											
SI. No.	Nature of Disability	Type of Disability	Amount of Deduction	Ack. No. of Form 10IA filed	UDID Number (If available)							
(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, (WH	HERE ANY ROW IS FILLED BY THE USER, ALL THE
FIELDS IN THAT ROW SHOULD BECOME MANDATORY)	

SI.	Name of Address Town or State code Pin code	Am	Eligible Amount of							
No.	Donee	Address	District	State code	Pin code	'in code	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	Amount of donation			Eligible Amount of			
No.	Donee	Address	Town or District	State code	Pin code	Donee 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	State code		Amount of donation			Eligible	
No.	Donee	Address	Town or District	State 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							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		ARN (Donation							
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				A			TIM.	0	0	0	0
E. Tota	Amount of D	onations (A	+ B + C + D)	W			14	0	0	0	0

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

SI.	Relevant Clause	Clause Name of City or State PAN of	PAN of	Amo	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	onation				- IAA	DELL		0	0	0	0

SCHEDULE 80GGC DETAILS OF CONTRIBUTION MADE TO POLITICAL PARTIES

SI.	I)ate	Am	nount of Contributi	ion	Eligible Amount of	Transaction Reference number for UPI transfer / Cheque number / IMPS	IFSC code of
No.		Contribution in Cash	Contribution in other mode	Total Contribution	Contribution	· · · · · · · · · · · · · · · · · · ·	Bank

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

SI. No.	BSR Code	Date of Deposit (DD/MM/YYYY)	Serial Number of Challan	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								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	etal						

VERIFICATION

I, **SINGH GIRJA** son/ daughter of **HALLU SINGH** 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 **BUIPS8804B**

Place: luckhnow

Date: 12-Sep-2025

Acknowledgement Number : Date of Filing :

If the return has been prepared by a Tax Return Preparer (TRP) give further details below:					
Identification No. of TRP	Counter Signature of TRP				
If TRP is entitled for any reimbursement from the Government, amount to	0				