Acknowledgement Number: 414493710100624

INDIAN INCOME TAX UPDATED RETURN FORM [For persons to update income within twenty-four months from the end of the relevant assesment year] **Assessment Year** (Refer instructions for eligibility) 2023-24 ITR-U (Please see rule 12AC of the Income-tax Rules, 1962) PART A GENERAL INFORMATION - 139(8A) (A2) Name (A3) Aadhaar Number (Please enter Aadhaar (A1) PAN (A3a) Aadhaar Enrolment Id (28 digits) (If eligible SAJEEV PALLIKKALETHU Number. Applicable to Individual only) **ECUPD1055G** for Aadhaar No DANIEL 2xxx xxxx 1878 (A5) Whether return previously filed for this (A4) Assessment Year (A6) If Yes, Whether U/s 2023-24 assessment year? Date of Filing of Original Return (A7) If applicable, enter form filed Acknowledgement Number Are you eligible for filing an updated return as per the conditions laid out in first, second and third Yes No (A8) provisos to section 139(8A)? Please choose the ITR form for updating your income (ITRs 1-7 to be selected from drop-down and filled as per the details made available by e-filing utility- see instruction) (A9) (A10) Reasons for updating your income: SI No. **Reason for Updating Income** 1 2 1 Return previously not filed Up to 12 months from the end of (A11) Are you filing the updated return during the period Relevant Assessment Year (a) Are you filing the updated return to reduce carried forward loss or unabsorbed depreciation or (A12)☐ Yes ☐ No tax credit? (b) If Yes, please specify the assessment years where carried forward loss or unabsorbed depreciation or tax credit is being affected because of the updated return Whether updated return has been filed SI No. **Assesment Year** Return filed, if yes is selected after giving effect of SI. No. 12a above 1 2 3 4 PART B - ATI COMPUTATION OF TOTAL UPDATED INCOME AND TAX PAYABLE Head of Income under which additional income is being returned as per Updated Return Head of income (If yes, Please specify additional income) 0 Income from Salary а X DEPARTMEN а Income from house property 0 b b Income from Business or Profession 4,88,720 c c d d Income from Capital Gains 0 Income from Other Sources 0 e e Total additional Income (a + b + c + d + e) f 4,88,720 Total Income as per latest valid return (only in cases where the Income Tax Return has been В 0 previously filed) 4,88,720 2 Total income as per Part-BTI (Please see instruction) 2 Amount payable, if any (To be taken from the "Amount payable" of Part B-TTI of the updated ITR) 3 3 1,000 (Please see instruction) Amount refundable, if any (To be taken from "Refund" of Part B-TTI of the updated ITR) (Please see 4 4 0 instruction)

Date of Filing: 10-Jun-2024*

^{*}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)."

CKIIOWI	eugemei	nt Number : 4144937101006	,24		Dutt	of Filing: 10-Jun-2024
5	Amoui	nt payable on the basis of last v	valid return (only in applicable ca	ises)	5	0
5i	Refun	d claimed as per last valid retu	n, if any (Please see instruction)		6i	0
6ii		Refund issued as per last valid i ed) (Please see instruction)	return, if any (this amount shoul	d include interest u/s 244A	6ii	0
7	Fee fo	r default in furnishing return of	income u/s 234F		7	1,000
8	Regula	ar Assessment Tax, if any (in ap	pplicable cases)		8	0
9	Aggre	gate liability on additional incor				
	9i	In case refund has been issu	9i	0		
	9ii	In case refund has not been	issued [3 + 6i - (5 + 8 + 4)]		9ii	1,000
10	Additio	onal income-tax liability on upd	ated income [25% or 50% of (9-7	7)]	10	0
11	Net ar	nount payable (9+10)			11	1,000
12	Тах ра	aid u/s 140B			12	1,000
13	Tax du	ue (11-12)			13	0
14	Tax Pa	ayment details (ONLY as per Up	dated Return)			
	А	Details of Payments of tax on	updated return u/s 140B			
	SI. No.	BSR Code	Date of Deposit (DD/MM/YYYY)	Serial Number of Challa	n	Amount (Rs)
	1	2	3	4		5
	1	0002271	10/06/2024	32907		1,000
	Total					1,000
	В		e Tax / Self Assessment Tax / Re me is not to be allowed again un		r which h	nas not been claimed in the
	SI. No.	BSR Code	Date of Deposit (DD/MM/YYYY)	Serial Number of Challa	n	Amount (Rs)
	1	2	3	4		5
	Total		M MIN	1/3		0
	Poliof	u/s 89 which is not claimed in e	earlier return [relief for the same	is not to be allowed under	15	0

INDIAN INCOME TAX RETURN

FORM ITR4 SUGAM [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 incometax is deferred on ESOP or has agricultural income more than Rs.5000] (Please refer instructions for eligibility)

Assessment Year 2023-24

Date of Filing: 10-Jun-2024*

PART A GENERAL INFORMATION							
(A1) First Name SAJEEV	(A2) Middle Name PALLIKKALETHU	(A3) Last Nam DANIEL	ie		rmanent Account Number P1055G		
(A5) Date of Birth/Formation (DD/MM 06/05/1974	/YYYY)				at/Door/Block No. caleth House		
(A7) Name of Premises/Building/Villag	(A8) Road/Stre Kumily S.O	eet/Post Office	(A9) Area/Locality Kumily				
(A10) Town/City/District IDUKKI	(A11) State 16-Kerala	(A12) Country, 91- INDIA	/Region	(A13) P 68550	IN Code/ZIP Code 9		
(A14) Aadhaar Number(12 digits)/Aac 2xxx xxxx 1878	dhaar Enrolment Id(28 digits) (if eligib	le for Aadhaar N	No.)	(A15) S Individ			
(A16) Residential/Office Phone Numb / 91 9947959886	er with STD Code /Mobile No.1			(A17) M	Nobile No.2		
(A18) Email Address-1(Self) azeeztext30@gmail.com	Email Address-2	(A19) Nature o	of employment	Others	5		
(A20)(a) Filed u/s (Tick)[Please see in notice u/s"	nstruction] (b) Or Filed in response to	139(8A)					
(A21) If revised/defective then enter original return (DD/MM/YYYY)	Receipt No. and Date of filing of						
	s 139(9)/142(1)/148/153C or order u/s cument Identification Number (DIN) &						
(A23) (a) Have you ever opted for ne ☐ Yes ☑ No	w tax regime u/s 115BAC in earlier ye	ars ?					
If Yes is Selected, please furnish the is excercised along with the date of f acknowledgement number of Form 1	iling and						
(A23) (b) Have you ever opted out of ☐ Yes ☐ No	section 115BAC in earlier years?						
If Yes is Selected, please furnish the is opted out along with the date of fil acknowledgement number of Form 1	ing and						
(A23) (c) Option for current assessme for first time)	ent year (Select Opting in now only if	you are opting	Not opting				
For 'Opting in now' or 'Opt out', pleas number of Form 10IE	se furnish the date of filing and acknow	wledgement					
in case of firm) - (Tick) ☐ Yes ☐ No If yes, please furnish following inform filing return of income due to fulfilling	under Seventh proviso to section 139 ation [Note: To be filled only if a perso gone or more conditions mentioned in	on is not require the seventh pr	ed to furnish a return o oviso to section 139(1)	f income			
(i) Have you deposited amount or ag during the previous year?☐ Yes ☐ No	gregate of amounts exceeding Rs. 1 (Crore in one or n	nore current account	0			
(ii) Have you incurred expenditure of foreign country for yourself or for any ☐ Yes ☐ No	an amount or aggregate of amount e y other person?	xceeding Rs. 2	lakhs for travel to a	0			
(iii) Have you incurred expenditure o of electricity during the previous yea □ Yes □ No	f an amount or aggregate of amount or?	exceeding Rs. 1	lakh on consumption	0			
(iv) Are you required to file a return a relevant condition from the drop dow ☐ Yes ☐ No	as per other conditions prescribed und n menu)	ler clause (iv) of	f seventh proviso to se	ction 139	9(1) (If yes, please select the		
(A25) Whether this return is being file ☐ Yes ☑ No If yes, please furnish following inform	M\ #20)\\\				
	」 Yes M. No f yes, please furnish following information -						

(1)		Name of the representative							
(2)			Capacity of the represent						
(3)			Address of the representa	ative					
(4)		Permanent Account Number (PAN)/ Aadhaar No. of the representative							
PART R GE	ROSS TO	TAL INCOME							
B1			usiness & Profession					B1	4,87,200
B2	i	Gross Salary (i	a + ib + ic + id + ie)					i	0
	a	Salary as per s	ection 17(1)			ia		0	
	b	Value of perqu	isites as per section 17(2)			ib		0	
	С	Profit in lieu of	salary as per section 17(3	3)		ic		0	
	d	Income from re	etirement benefit account	maintained in a notified	country u/	s id		0	
	е	Income from re	etirement benefit account y u/s 89A	maintained in a country	other than	ie		0	
	ii		es to the extent exempt u/s	s 10 [Ensure that it is inc	cluded in sa	alary inc	ome u/s	ii	0
	SI. No.	Nature of	Exempt Allowance	Description (If Any	Other sel	ected)		Amount	
	(1) (2) (3)				(4)				
	\-/		(2)	(3)		come claimed for relief from taxation u/s 89A			
	iia	Less : Income of						iia	0
		Less : Income of Net Salary (i - i	claimed for relief from tax					iia iii	
	iia	Net Salary (i - i	claimed for relief from tax						0
	iia	Net Salary (i - i	claimed for relief from taxa			iva		iii	0
	iia iii iv	Net Salary (i - i Deductions u/s Standard dedu	claimed for relief from taxa i - iia) 16 (iva + ivb + ivc)			iva ivb		iii	0
	iia iii iv	Net Salary (i - i Deductions u/s Standard dedu	i - iia) 16 (iva + ivb + ivc) ction u/s 16(ia) allowance u/s 16(ii)					iii iv	0
	iia iii iv a b	Net Salary (i - i Deductions u/s Standard dedu Entertainment Professional ta	i - iia) 16 (iva + ivb + ivc) ction u/s 16(ia) allowance u/s 16(ii)	ation u/s 89A		ivb		iii iv 0	0
В3	iia iii iv a b	Net Salary (i - i Deductions u/s Standard dedu Entertainment Professional ta	claimed for relief from taxa i - iia) 16 (iva + ivb + ivc) ction u/s 16(ia) allowance u/s 16(ii) x u/s 16(iii) able under the head 'Salar	ation u/s 89A		ivb		iii iv 0 0	0
B3	iia iii iv a b	Net Salary (i - i Deductions u/s Standard dedu Entertainment Professional ta Income charge	claimed for relief from taxa i - iia) 16 (iva + ivb + ivc) ction u/s 16(ia) allowance u/s 16(ii) x u/s 16(iii) able under the head 'Salar	ries' (iii - iv)		ivb		iii iv 0 0 0 0 B2	0
B3	iia iii iv a b c	Net Salary (i - i Deductions u/s Standard dedu Entertainment Professional ta Income charge	claimed for relief from taxa i - iia) 16 (iva + ivb + ivc) ction u/s 16(ia) allowance u/s 16(ii) x u/s 16(iii) able under the head 'Salai Property	ries' (iii - iv)	ii	ivb		0 0 0 B2 B3	0
В3	iia iii iv a b c	Net Salary (i - i Deductions u/s Standard dedu Entertainment Professional ta Income charge Type Of House Gross rent rece	claimed for relief from taxa i - iia) 16 (iva + ivb + ivc) ction u/s 16(ia) allowance u/s 16(ii) x u/s 16(iii) able under the head 'Salat Property eived/ receivable/ lettable al authorities	ries' (iii - iv)		ivb		iii iv 0 0 0 82 B3 i	0
B3	iia iii iv a b c v	Net Salary (i - i Deductions u/s Standard dedu Entertainment Professional ta Income charge Type Of House Gross rent rece Tax paid to loc	claimed for relief from taxa i - iia) 16 (iva + ivb + ivc) ction u/s 16(ia) allowance u/s 16(ii) x u/s 16(iii) able under the head 'Salar Property eived/ receivable/ lettable al authorities i - ii)	ries' (iii - iv)		ivb		iii iii o	0
B3	iia iii iv a b c v	Net Salary (i - i Deductions u/s Standard dedu Entertainment Professional ta Income charge Type Of House Gross rent rece Tax paid to loc Annual Value (i 30% of Annual	claimed for relief from taxa i - iia) 16 (iva + ivb + ivc) ction u/s 16(ia) allowance u/s 16(ii) x u/s 16(iii) able under the head 'Salar Property eived/ receivable/ lettable al authorities i - ii)	ries' (iii - iv)	ii	ivb		iii iii o	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)."

	vi		Arrears/Un	realized Rent received during	the year Less 30%	vi		0	
	Income chargeable under the head 'House Property' (iii - iv - v) + vi (If loss, put negative) Note:- Maximum loss from house property that can be set-off in comp of this year is INR 2, 00,000. To avail the benefit of carry forward and set of loss ITR -3/5.				-off in computing income				
B4			Income fro	m Other Sources	Sty man E.	05%	~ A	B4	1,518
	SI. No.		N	ature of Income	Description (If Any	Other s	elected)	Tota	al Amount
	(1) (2)		(3)				(4)		
	1	Interest from Saving Account		Saving Account	IAX DEPA				1,518
	2 Dividend Quarterly breakup of Div			-			0		
			idend Income	Quart	erly breakup of In	come fro	m retirement benefit		
				Quarterly Broakup or 200	dena meome		ount maintained i		ed country u/s 89A
			(i)	Up to 15-Jun-2022	0	acco	ount maintained i	n a notific ble portic	ed country u/s 89A on)
			(i) (ii)		0	acco	ount maintained i (taxa	n a notific ble portic	ed country u/s 89A on)
			.,	Up to 15-Jun-2022 From 16-Jun-2022 to	0	(i) (ii)	Up to 15-Jun-2 From 16-Jun-2	n a notific ble portic 022 022 to 15-	ed country u/s 89A on) 0
			(ii)	Up to 15-Jun-2022 From 16-Jun-2022 to 15-Sep-2022 From 16-Sep-2022 to	0 0	(i) (ii)	Up to 15-Jun-2 From 16-Jun-2 Sep-2022 From 16-Sep-2	n a notification ble portion 022 022 to 15- 022 to	ed country u/s 89A on) 0 0
			(ii) (iii)	Up to 15-Jun-2022 From 16-Jun-2022 to 15-Sep-2022 From 16-Sep-2022 to 15-Dec-2022 From 16-Dec-2022 to	0 0 0	(i) (ii) (iii)	Up to 15-Jun-2 From 16-Jun-2 Sep-2022 From 16-Sep-2 15-Dec-2022 From 16-Dec-2	n a notific ble portion 022 022 to 15- 022 to	ed country u/s 89A on) 0 0 0
			(ii) (iii) (iv) (v)	Up to 15-Jun-2022 From 16-Jun-2022 to 15-Sep-2022 From 16-Sep-2022 to 15-Dec-2022 From 16-Dec-2022 to 15-Mar-2023 From 16-Mar-2023 to	0 0 0	(i) (ii) (iii) (iv)	Up to 15-Jun-2 From 16-Jun-2 Sep-2022 From 16-Sep-2 15-Dec-2022 From 16-Dec-2 15-Mar-2023 From 16-Mar-2	n a notific ble portion 022 022 to 15- 022 to	ed country u/s 89A on) 0 0 0 0
			(ii) (iii) (iv) (v) Less: Dedu	Up to 15-Jun-2022 From 16-Jun-2022 to 15-Sep-2022 From 16-Sep-2022 to 15-Dec-2022 From 16-Dec-2022 to 15-Mar-2023 From 16-Mar-2023 to 31-Mar-2023	0 0 0 0 0 mily pension only)	(i) (ii) (iii) (iv)	Up to 15-Jun-2 From 16-Jun-2 Sep-2022 From 16-Sep-2 15-Dec-2022 From 16-Dec-2 15-Mar-2023 From 16-Mar-2	n a notific ble portion 022 022 to 15- 022 to	ed country u/s 89A

PART C	ART 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	0	0					
C3	80CCD(1) - Contribution to pension scheme of Central Government	0	0					
C4	80CCD(1B) -Contribution to pension scheme of Central Government	3- //	0					
C5	80CCD(2) - Contribution to pension scheme of Central Government by employer	OTMENT 0	0					
C6	80D - Deduction in respect of health insurance premia	0	0					
C7	80DD - Maintenance including medical treatment of a dependent who is a person with disability	0	0					
	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	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					
		1						

^{*}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)."

C18	80U - In case of a person with disability		0	0
C19	80CCH - Contribution to Agnipath Schel	ne	0	0
C20	Total deductions (Add items C1 to C19)		0	0
C21	Taxable Total Income (B5 - C20)			4,88,720
	'			

PART D	- TAX COMPUTATIONS AND TAX STATUS		
D1	Tax payable on total income	D1	11,936
D2	Rebate on 87A	D2	11,936
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 claim this relief)	D6	0
D7	Balance Tax after Relief (D5 – D6)	D7	0
D8	Total Interest u/s 234A	D8	0
D9	Total Interest u/s 234B	D9	0
D10	Total Interest u/s 234C	D10	0
D11	Fee u/s 234F	D11	1,000
D12	Total Tax, Fee and Interest (D7 + D8 + D9 + D10 + D11)	D12	1,000
D13	Total Advance Tax Paid	D13	0
D14	Total Self-Assessment Tax Paid	D14	0
D15	Total TDS Claimed (total of column 4 of Schedule-TDS1 and column 6 of Schedule-TDS2)	D15	0
D16	Total TCS Collected (total of column (5) of Schedule-TCS)	D16	0
D17	Total Taxes Paid (D13 + D14 + D15 +D16)	D17	0
D18	Amount payable (D12 - D17, If D12 > D17)	D18	1,000
D19	Refund (D17 - D12, If D17 > D12)	D19	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	Select Account for Refund Credit
(1)	(2)	(3)	(4)	(5)

1 FDRL0001531 THE FEDERAL BANK LTD 15310100025473 **7** EXEMPT INCOME ONLY FOR REPORTING PURPOSES (IF AGRICULTURAL INCOME IS MORE THAN RS.5,000/-, USE ITR 3/5) SI. **Nature of Income** Description (If 'Any Other' is selected) **Amount** No. (1) (2) (3) (4) Λ Total SCHEDULE BP - DETAILS OF INCOME FROM BUSINESS OR PROFESSION **COMPUTATION OF PRESUMPTIVE BUSINESS INCOME UNDER SECTION 44AD** SI. Name of Business **Business code** Description No. (1) (2) (4) (3) 1 Jungle Safari Trucking Travel agencies and tour operators Jeep Trucking E1 Gross Turnover or Gross Receipts Through a/c payee cheque or a/c payee bank draft or bank electronic clearing n E1a system received or prescribed electronic modes received before specified date h F2h 16.32.500 Any other mode F2 Presumptive Income under section 44AD ii 6% of E1a or the amount claimed to have been earned, whichever is higher E2a 0 b 8% of E1b or the amount claimed to have been earned, whichever is higher E₂b 4,87,200 c Total (a + b)F2c 4.87.200 COMPUTATION OF PRESUMPTIVE INCOME FROM PROFESSIONS UNDER SECTION 44ADA SI. Name of Business **Business code** Description No. (4) (1) (2) (3) E3 **Gross Receipts** 0 Presumptive Income under section 44ADA (50% of E3) or the amount claimed to have been earned, whichever is higher NOTE- If Income is less than 50% of Gross Receipts, E4 0 it is mandatory to have a tax audit under 44AB & other ITR as applicable has to be filed COMPUTATION OF PRESUMPTIVE INCOME FROM GOODS CARRIAGES UNDER SECTION 44AE Name of Business Description **Business** code (1) (2) (3) (4) Presumptive income u /s 44AE for the goods carriage (Computed @ Rs.1000 per ton per Number of months for month in case which goods carriage SI. Registration No. of Whether owned/ Tonnage capacity of tonnage exceeds was owned No. goods carriage leased/hired goods carriage(in MT) 12MT, or else @ Rs. /leased/hired by 7500 per month) or assessee the amount claimed to have been actually earned, whichever is higher (1) (2) (3) (4) (5) (6)

Date of Filing: 10-Jun-2024*

SCHEL	SCHEDULE II - DETAILS OF ADVANCE TAX AND SELF ASSESSMENT TAX PATMENTS						
SI. No.	BSR Code	Date of Deposit (DD/MM/YYYY)	Challan No.	Tax paid			
Col (1)	Col (2)	Col (3)	Col (4)	Col (5)			

Total 0

SCHEDULE 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	Details of amount paid as mentioned in Form 26AS	Tax Collected	Amount out of (4) being claimed
------------	---------------------------------------------------	-----------------------	--------------------------------------------------------	---------------	---------------------------------

SI. No.	TAN	Name of the Employer	Income under Salary	Tax deducted
Col (1)	Col (2)	Col (3)	Col (4)	Col (5)
Total				0

SCHEDULE TDS2(I) - DETAILS OF TAX DEDUCTED AT SOURCE ON INCOME OTHER THAN SALARY [AS PER FORM 16 A ISSUED BY DEDUCTOR(S)]

SI.	Tax Deduction Account		TDS brought rd (b/f)	TDS of the current Fin. Year (TDS deducted during the FY	TDS credit being claimed this Year (only if corresponding receipt is being offered for tax this		ing Receipt / als offered	TDS credit
No.	Number (TAN) of the Deductor	Fin. Year in which TDS is deducted	TDS b/f	2022-23)	year not applicable if TDS is deducted u/s	Gross Amount	Head of Income	being carried forward
		deducted		TDS Deducted	194N) TDS Claimed		coc	
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
1	MRTW00038D		0	2,700	0	0	Not Applicable	2,700
Total					0			

SCH TDS 2(II) DETAILS OF TAX DEDUCTED AT SOURCE [AS PER FORM 16C / 16D FURNISHED BY PAYER(S)]

SI.	PAN of the	Aadhaar No		TDS brought d (b/f)	TDS of the current Financial Year	TDS credit being claimed this Year (only if correspondin g receipt is		ling Receipt ered	TDS Credit
No.	I Anant /	of the tenant / Deductor	Fin. Year in which deducted	TDS b/f	TDS Deducted	offered for tax this year)	Gross Amount	Head of Income	carried forward
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
Total			/	9		0			

SCHEDULE 80D

SCHEDULE	E 00D		
1	Wheth	er you or any of your family member (excluding parents) is a senior citizen? Not Claiming for Self/Family	
(a)	Self &	Family 0	
	(i)	Health Insurance	

wledgement	Number: 41	44937101000	524					Dat	e of Filing:	10-Jun-2024		
(ii) Preventive Health Checkup									0			
b) Self & Family including Senior Citizen												
(i)	Health Insuran	ce								0		
(ii)	Preventive Hea	alth Checkup								0		
(iii)			eduction to be o	claimed on wh	ich health insu	ırance is				0		
Whethe	r any one of yo	ur parents is a	senior citizen					Not Clain	ning for Paren	ts		
Parents										0		
(i)	Health Insuran	ce								0		
(ii)	Preventive Hea	alth Checkup						0				
Parents	including Senio	or Citizen				I			0			
(i)	Health Insuran	ce						0				
(ii)	Preventive Hea	alth Checkup						C				
(iii)			eduction can be	claimed on w	hich health in	surance is		0				
Eligible	Amount of Ded	uction								0		
						N 80G						
Name of		City or			DAN of	-	mou	nt of donat	tion	Eligible		
	Address	Town or District	State code	Pin code	Donee	Donation cash			Total donation	Amount of Donation		
(2)	(3)	(4)	(5)	(6)	(7)	(8)		(9)	(10)	(11)		
							0	0	0	(
NATIONS EN	TITLED FOR 5	0% DEDUCTION	ON WITHOUT	QUALIFYING	LIMIT					I		
	(ii) Self & F. (i) (iii) Whethe Parents (i) (iii) Parents (i) (iii) Eligible ULE 80G DE IATIONS EN Name of the Donee (2)	(ii) Preventive Heat Self & Family including (i) Health Insuran (ii) Preventive Heat (iii) Medical Expennot claimed at Whether any one of your Parents (i) Health Insuran (ii) Preventive Heat Parents including Senion (ii) Health Insuran (ii) Preventive Heat (iii) Preventive Heat (iii) Medical Expennot claimed at Eligible Amount of Ded ULE 80G DETAILS OF DON IATIONS ENTITLED FOR 16 Name of the Donee (2) (3)	(ii) Preventive Health Checkup Self & Family including Senior Citizen (i) Health Insurance (ii) Preventive Health Checkup (iii) Medical Expenditure (This denot claimed at (i) above) Whether any one of your parents is a Parents (i) Health Insurance (ii) Preventive Health Checkup Parents including Senior Citizen (i) Health Insurance (ii) Preventive Health Checkup (iii) Preventive Health Checkup (iii) Medical Expenditure (This denot claimed at (i) above) Eligible Amount of Deduction ULE 80G DETAILS OF DONATIONS ENTITATIONS ENTITLED FOR 100% DEDUCT Name of the Donee Address City or Town or District (2) (3) (4)	Self & Family including Senior Citizen (i) Health Insurance (ii) Preventive Health Checkup (iii) Medical Expenditure (This deduction to be on not claimed at (i) above) Whether any one of your parents is a senior citizen Parents (i) Health Insurance (ii) Preventive Health Checkup Parents including Senior Citizen (i) Health Insurance (ii) Preventive Health Checkup (iii) Preventive Health Checkup (iii) Medical Expenditure (This deduction can be not claimed at (i) above) Eligible Amount of Deduction ULE 80G DETAILS OF DONATIONS ENTITLED FOR DISTITURED FOR DISTITURED FOR 100% DEDUCTION WITHOUT Name of the Donee Address City or Town or District (2) (3) (4) (5)	(ii) Preventive Health Checkup Self & Family including Senior Citizen (i) Health Insurance (ii) Preventive Health Checkup (iii) Medical Expenditure (This deduction to be claimed on wh not claimed at (i) above) Whether any one of your parents is a senior citizen Parents (i) Health Insurance (ii) Preventive Health Checkup Parents including Senior Citizen (i) Health Insurance (ii) Preventive Health Checkup (iii) Preventive Health Checkup (iii) Medical Expenditure (This deduction can be claimed on w not claimed at (i) above) Eligible Amount of Deduction ULE 80G DETAILS OF DONATIONS ENTITLED FOR DEDUCTION UITATIONS ENTITLED FOR 100% DEDUCTION WITHOUT QUALIFYING Name of the Donee Address City or Town or District (2) (3) (4) (5) (6)	(ii) Preventive Health Checkup Self & Family including Senior Citizen (i) Health Insurance (ii) Preventive Health Checkup (iii) Medical Expenditure (This deduction to be claimed on which health insurance total claimed at (i) above) Whether any one of your parents is a senior citizen Parents (i) Health Insurance (ii) Preventive Health Checkup Parents including Senior Citizen (ii) Health Insurance (ii) Preventive Health Checkup (iii) Preventive Health Checkup (iii) Medical Expenditure (This deduction can be claimed on which health in not claimed at (i) above) Eligible Amount of Deduction ULE 80G DETAILS OF DONATIONS ENTITLED FOR DEDUCTION UNDER SECTIONATIONS ENTITLED FOR 100% DEDUCTION WITHOUT QUALIFYING LIMIT Name of the Donee Address City or Town or District State code Pin code PAN of Donee	(ii) Preventive Health Checkup Self & Family including Senior Citizen (i) Health Insurance (ii) Preventive Health Checkup (iii) Medical Expenditure (This deduction to be claimed on which health insurance is not claimed at (i) above) Whether any one of your parents is a senior citizen Parents (i) Health Insurance (ii) Preventive Health Checkup Parents including Senior Citizen (i) Health Insurance (ii) Preventive Health Checkup (iii) Preventive Health Checkup Eligible Amount of Deduction ULE 80G DETAILS OF DONATIONS ENTITLED FOR DEDUCTION UNDER SECTION 80G INTIONS ENTITLED FOR 100% DEDUCTION WITHOUT QUALIFYING LIMIT Name of the Donee Address City or Town or District State code Pin code Donee Donation cash (2) (3) (4) (5) (6) (7) (8)	(ii) Preventive Health Checkup Self & Family including Senior Citizen (i) Health Insurance (ii) Preventive Health Checkup (iii) Medical Expenditure (This deduction to be claimed on which health insurance is not claimed at (i) above) Whether any one of your parents is a senior citizen Parents (i) Health Insurance (ii) Preventive Health Checkup Parents including Senior Citizen (i) Health Insurance (ii) Preventive Health Checkup (iii) Preventive Health Checkup (iii) Medical Expenditure (This deduction can be claimed on which health insurance is not claimed at (i) above) Eligible Amount of Deduction ULE 80G DETAILS OF DONATIONS ENTITLED FOR DEDUCTION UNDER SECTION 80G INTIONS ENTITLED FOR 100% DEDUCTION WITHOUT QUALIFYING LIMIT Name of the Donee Address City or Town or District State code Pin code PAN of Donation in Donati	(ii) Preventive Health Checkup Self & Family including Senior Citizen (i) Health Insurance (ii) Preventive Health Checkup (iii) Medical Expenditure (This deduction to be claimed on which health insurance is not claimed at (i) above) Whether any one of your parents is a senior citizen Parents (i) Health Insurance (ii) Preventive Health Checkup Parents including Senior Citizen (ii) Health Insurance (iii) Preventive Health Checkup (iii) Preventive Health Checkup (iii) Medical Expenditure (This deduction can be claimed on which health insurance is not claimed at (i) above) Eligible Amount of Deduction ULE 80G DETAILS OF DONATIONS ENTITLED FOR DEDUCTION UNDER SECTION 80G IATIONS ENTITLED FOR 100% DEDUCTION WITHOUT QUALIFYING LIMIT Name of the Done Address City or Town or District State code Pin code Donation in Donation in other mode (2) (3) (4) (5) (6) (7) (8) (9)	(ii) Preventive Health Checkup Self & Family including Senior Citizen (i) Health Insurance (ii) Preventive Health Checkup (iii) Medical Expenditure (This deduction to be claimed on which health insurance is not claimed at (i) above) Whether any one of your parents is a senior citizen Not Claiming for Parents (i) Health Insurance (ii) Preventive Health Checkup Parents including Senior Citizen (ii) Health Insurance (iii) Preventive Health Checkup Eligible Amount of Deduction ULE 80G DETAILS OF DONATIONS ENTITLED FOR DEDUCTION UNDER SECTION 80G IATIONS ENTITLED FOR 100% DEDUCTION WITHOUT QUALIFYING LIMIT Name of the Donee Address City or Town or District State code Pin code Pan of Donee Donation in Donation in Other mode Total donation (2) (3) (4) (5) (6) (7) (8) (9) (10)		

B. DOI	. DONATIONS ENTITLED FOR 50% DEDUCTION WITHOUT QUALIFYING LIMIT												
SI.	Name of	Address	City or	State and Bin and PAN of		PAN of	PAN of		Amount of donation				
No.	the Donee	Address	Town or District	State code	Pin code	Donee	Donation in cash	Donation in other mode		Amount of Donation			
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)			
Total B						0	0	0	0				

C. DON	NATIONS ENT		City or	ION SUBJECT		NG LIMIT PAN of	Am	ount of dona	Eligible		
No.	the Donee	Address	Town or District	State code	Pin code	ode	Donation in cash	Donation in other mode	Total donation	Amount of Donation	
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	
Total C				14	3-3	A STEEL	0	0	0	0	

D. DONATIONS ENTITLED FOR 50% DEDUCTION SUBJECT TO QUALIFYING LIMIT

Address

(3)

City or

Town or District

(4)

State code

(5)

Pin code

(6)

Date of Filing: 10-Jun-2024*									
Amo	Eligible								
nation cash	Donation in other mode	Total donation	Amount of Donation						
(9)	(10)	(11)	(12)						

Total D	7	11/2	30	25	CMS	0	0	0	0	
E. Total Amount of Donations (A	A + B + C + D)	7.00	METER	TRACTIN	150	0	0	0	0	

PAN of

Donee

(7)

ARN

(Donation

Reference

Number)

(8)

Dona

VERIFICATION

I, **SAJEEV PALLIKKALETHU DANIEL** son/ daughter of **DANIEL** 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 **ECUPD1055G**

Place: KUMILY

SI.

No.

(1)

Name of

the Donee

(2)

Date: 10-Jun-2024

If the return has been prepared by a Tax Return Preparer (TRP) give further details below:

TRP PIN (10 digit)	Name of TRP	Counter Signature of TRP
Amount to be paid to TRP		0