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 2024-25

PART A GENERAL INFORMATION			
(A1) First Name SAJEEV	(A2) Middle Name PALLIKKALETHU	(A3) Last Name DANIEL	(A4) Permanent Account Number ECUPD1055G
(A5) Date of Birth/Formation (DD/MM 06/05/1974	/YYYY)		(A6) Flat/Door/Block No. Pallikkaleth House
(A7) Name of Premises/Building/Village	ge	(A8) Road/Street/Post Office Kumily S.O	(A9) Area/Locality Kumily
(A10) Town/City/District IDUKKI	(A11) State 16-Kerala	(A12) Country/Region 91- INDIA	(A13) PIN Code/ZIP Code 685509
(A14) Aadhaar Number(12 digits)/Aac 2xxx xxxx 1878	dhaar Enrolment Id(28 digits) (if eligibl	e for Aadhaar No.)	(A15) Status Individual
(A16) Residential/Office Phone Numb / 91 9947959886	er with STD Code /Mobile No.1		(A17) Mobile No.2
(A18) Email Address-1(Self) azeeztext30@gmail.com	Email Address-2	(A19) Nature of employment	Others
(A20)(a) Filed u/s (Tick)[Please see in notice u/s"	struction] (b) Or Filed in response to	139(1)-On or before due date	
(A21) If revised/defective then enter original return (DD/MM/YYYY)			
	s 139(9)/142(1)/148/153C or order u/s cument Identification Number (DIN) &		
beyond the due date (If option other Opting out, option should be exercise № No ☐ Yes, within due date ☐ Yes, If option other than 'No' is selected, number of form 10-IEA Note-For Opti due date for filing return u/s 139(1) (A24) Are you filing return of income in case of firm) - (Tick) ☐ Yes № No If yes, please furnish following inform filing return of income due to fulfilling (i) Have you deposited amount or againing the previous year? ☐ Yes № No (ii) Have you incurred expenditure of foreign country for yourself or for any ☐ Yes № No	please furnish date of filing and Acknong out, option should be exercised on under Seventh proviso to section 1390 ation [Note: To be filled only if a person one or more conditions mentioned in gregate of amounts exceeding Rs. 1 Color and amount or aggregate of amount expression?	late of filing and Acknowledgement nureturn u/s 139(1) wledgement or before the (1) but otherwise not required to furnion is not required to furnish a return of the seventh proviso to section 139(1) rore in one or more current account exceeding Rs. 2 lakhs for travel to a	sh return of income? (Not applicable fincome under section 139(1) but
	as per other conditions prescribed und n menu)	er clause (iv) of seventh proviso to se	ction 139(1) (If yes, please select the
(A25) Whether this return is being file ☐ Yes ☑ No If yes, please furnish following inform	•		
(1)	Name of the representative		
(2)	Capacity of the representative		
(3)	Address of the representative		
(4)	Permanent Account Number (PAN)/ A No. of the representative	adhaar	
PART B GROSS TOTAL INCOME			

B1		Income from Business & Profession			B1	5,85,600
B2	i	Gross Salary (ia + ib + ic + id + ie)			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	
	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 117(1)/17(2)/17(3)]	.0 [Ensure that it is included in sal	ary income u/s	ii	0
	SI. No.	Nature of Exempt Allowance	Description (If Any Other sele	ected)		Amount
	(1)	(2)	(3)			(4)
	iia	Less : Income claimed for relief from taxati	on u/s 89A		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 'Salarie	s' (iii - iv)	1	B2	0
В3		Type Of House Property	6996		В3	
	i	Gross rent received/ receivable/ lettable va	lue during the year		i	0
	ii	Tax paid to local authorities	ii		0	
	iii	Annual Value (i - ii)			iii	0
	iv	30% of Annual Value	के मुला हुए iv	1	0	
	v	Interest payable on borrowed capital	v	(1)	0	
	vi	Arrears/Unrealized Rent received during th	e year Less 30% vi		0	
	vii	Income chargeable under the head 'House negative) Note:- Maximum loss from house of this year is INR 2, 00,000. To avail the bITR -3/5.	property that can be set-off in co	mputing income	В ВЗ	0
					B4	0

	SI. No.	N	ature of Income	Description (If Any	Other s	elected)	Tota	al Amount
	(1)		(2)	(3)				(4)
			Quarterly breakup of Div	ridend Income		ount maintaine		m retirement benefit ed country u/s 89A on)
		(i)	Up to 15-Jun-2023	0	(i)	Up to 15-Jur	1-2023	0
		(ii)	From 16-Jun-2023 to 15-Sep-2023	0	(ii)	From 16-Jur Sep-2023	-2023 to 15-	0
		(iii)	From 16-Sep-2023 to 15-Dec-2023	0	(iii)	From 16-Se 15-Dec-202		C
		(iv)	From 16-Dec-2023 to 15-Mar-2024	0	(iv)	From 16-De 15-Mar-202		C
		(v)	From 16-Mar-2024 to 31-Mar-2024	0	(v)	From 16-Ma 31-Mar-202		C
		Less: Dedu	ction u/s 57(iia) (in case of fa	mily pension only)				C
		Less: Incon	ne claimed for relief from tax	ation u/s 89A				0
5		Gross Total	I Income (B1+B2+B3+B4) To ITR-3/5.	avail the benefit of carry	forward	and set off of los	ss, B5	5,85,600

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	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	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	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

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0

0

0

0

0

0

0

0

C18	80U - In case of a person with disability	C	0
C19	80CCH - Contribution to Agnipath Scheme	St. All	0
C20	Total deductions (Add items C1 to C19)	c	0
C21	Taxable Total Income (B5 - C20)	PARTME	5,85,600
PART	D - TAX COMPUTATIONS AND TAX STATUS		
D1	Tax payable on total income	D1	14,280
D2	Rebate on 87A	D2	14,280
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

D13 Total Advance Tax Paid

Total Self-Assessment Tax Paid

Total Tax, Fee and Interest (D7 + D8 + D9 + D10 + D11)

Total Interest u/s 234B

Total Interest u/s 234C

Fee u/s 234F

D9

D10

D11

D12

D14

D15

D16

Total TDS Claimed (total of column 4 of Schedule-TDS1 and column 6 of Schedule-TDS2)

Total TCS Collected (total of column (5) of Schedule-TCS)

D16

D9

D10

D11

D12

D13

D14

 D17
 Total Taxes Paid (D13 + D14 + D15 +D16)
 D17
 0

 D18
 Amount payable (D12 - D17, If D12 > D17)
 D18
 0

 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	Type of account
(1)	(2)	(3)	(4)	(5)

1	FDRL00015	531	THE FEDERAL BANK	(LTD	153101	.00025473	Savings Account
EVEN	DT INCOME	ONLY FOR REPORTING	C DUDDOCEC (15.4	CDICIU TUDAI	INCOME IS MORE THA	N DC E 00	0/ USE ITD 3/E)
SI.	PI INCOME	ONLY FOR REPORTING				N RS.5,00	
No.		Nature of Income	Desc	ription (If 'Any	Other' is selected)		Amount
(1)		(2)		(3	3)		(4)
Total			M		a, ///		0
			A.K	FARRET	7,7		
SCHE	-	DETAILS OF INCOME FE			SECTION 44AD		
	SI.	PUTATION OF PRESUM					
	No.	Name of Bu	usiness	В	usiness code		Description
	(1)	(2)			(3)		(4)
	1	Jungle Safari Trucking	(Non	Travel agencies	and tour operators	Jeep Tru	ucking
E1	Gross than c	Turnover or Gross Receipor equal to 5% of E1 then	pts (E1 limited to Rs the limit under E1 i	.2 Crores, however s extended to Rs	ver if E1b is less s.3 Crores.)		16,25,000
	а	Through a/c payee che system received or pre	eque or a/c payee ba escribed electronic r	ank draft or bank modes received	c electronic clearing before specified date	E1a	0
	b	Receipts in Cash				E1b	16,25,000
	С	Any mode other than a	a and b			E1c	0
E2	Presui	mptive Income under sec	tion 44AD		ii		
	a	6% of E1a or the amou	unt claimed to have	been earned, wl	nichever is higher	E2a	0
	b	8% of (E1b+E1c) or th	e amount claimed to	o have been ear	ned, whichever is higher	E2b	5,85,600
	С	Total (a + b)				E2c	5,85,600
	СОМ	PUTATION OF PRESUM	PTIVE INCOME FR	OM PROFESSIO	ONS UNDER SECTION 4	I4ADA	
	SI. No.	Name of Bu	usiness	Ві	usiness code		Description
	(1)	(2)			(3)		(4)
E3	Gross E3 the	Receipts (E3 limited to Ren limit under E3 is exten	s.50 Lakhs, howeve ded to Rs.75 Lakhs.	r if E3b is less th)	ian or equal to 5% of E3		0
	a	Through a/c payee che system or prescribed e				E3a	0
	b	Receipts in Cash				E3b	0
	С	Any mode other than a				E3c	0
E4	been (mptive Income under sec earned, whichever is high andatory to have a tax a	ner NOTE- If Income	is less than 50%	of Gross Receipts,		0
	СОМ	PUTATION OF PRESUM	PTIVE INCOME FR	OM GOODS CA	RRIAGES UNDER SECT	ION 44AE	
	SI. No.	Name of Bu	usiness	В	usiness code		Description
	(1)	(2)			(3)		(4)

	SI. No.	Registration No. of goods carriage	Whether owned/ leased/hired		capacity of iage(in MT)	Number of n which good: was ov /leased/h asses	s carriage vned ired by	Presumptive income u /s 44AE for the goods carriage (Computed @ Rs.1000 per ton per month in case tonnage exceeds 12MT, or else @ Rs. 7500 per month) or the amount claimed to have been actually earned, whichever is higher
	(1)	(2)	(3)	(4	4)	(5))	(6)
E5	NOTE-	If the profits are lower tha	Carriage under section 44 can prescribed under S.44Al en other ITR, as applicable	E or the numb	er of Vehicles	s E5		0
E6	Salary	and interest paid to the p	artners NOTE - This is to be	e filled up onl	y by firms	E6		0
E7	Presur	mptive Income u/s 44AE (E	5-E6)	- 8		E7		0
E8	Incom	e chargeable under the he	ad 'Business or Profession	(E2c+E4+E7)	E8		5,85,600
E 9	Inforr	nation regarding turnov	ver/gross receipt report	ed for GST	110			
	SI. No.		GSTIN No.(s)		Annual Val	ue of Outwar	d Supplies Filed	as per the GST Return
	(1)		(2)				(3)	
E10	Total	of value of Outward Suppli	es as per the GST return fil	led	934 1	E10		0
FINANC	IAL PART	ICULARS OF THE BUSIN	ESS NOTE- FOR E11 TO	E25 FURNISI	H THE INFOR	MATION AS	ON 31ST D	AY OF MARCH, 2024
			COME -		PINIP			
E11	Partne	ers/ Members own capital	TIE IA	(DEP)	4111	E11		5,000
E12	Secure	ed loans				E12		0
E13	Unsec	ured loans				E13		0
E14	Advan	ices				E14		0
E15	Sundr	y creditors				E15		15,000
E16	Other	liabilities				E16		0
E17	Total	capital and liabilities (E11+	-E12+E13+E14+E15+E16)		E17		20,000
E17	Fixed		-E12+E13+E14+E15+E16)		E17		20,000
		assets	-E12+E13+E14+E15+E16)				
E18	Fixed	assets	-E12+E13+E14+E15+E16)		E18		0
E18 E19	Fixed Invent Sundr	assets	-E12+E13+E14+E15+E16)		E18 E19		5,000
E18 E19 E20	Fixed Invent Sundr	assets cories y debtors	-E12+E13+E14+E15+E16)		E18 E19 E20		0 5,000 10,000
E18 E19 E20 E21	Fixed Invent Sundr Balanc Cash-i	assets cories y debtors ce with banks	-E12+E13+E14+E15+E16)		E18 E19 E20 E21		0 5,000 10,000 0
E18 E19 E20 E21 E22	Fixed Invent Sundr Baland Cash-i	assets cories y debtors ce with banks	-E12+E13+E14+E15+E16)		E18 E19 E20 E21 E22		0 5,000 10,000 0 5,000

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SCHEDULE TDS1 - DETAILS OF TAX DEDUCTED AT SOURCE FROM SALARY

SCHEE	OULE IT - DETAILS OF ADVANCE	TAX AND SELF ASSESSMENT TAX	PAYMENTS	
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

SCHEE	DULE TCS - DETAILS OF TA	X COLLECTED AT SOURCE	[AS PER FORM 27D ISSUE	D BY THE COLLECTOR(S)	l
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
Col (1)	Col (2)	Col (3)	Col (4)	Col (5)	Col (6)
Total					0

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

No. Deductor / Deduct	r Fin. Year in			g receipt is being			being carried
	which deducted	TDS b/f	TDS	offered for tax this year)	Gross Amount	Head of Income	forward
			Deducted	TDS Claimed			
(1) (2) (3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)

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SCHEE	OULE 80D											
1	Whethe	r you or any o	of your family n	nember (exc	uding pare	ents) is	a senior citiz	en?				
(a)	Self & F	amily										
	(i)	Health Insura										
	(ii)	Preventive H	ealth Checkup									
(b)	Self & F	Self & Family including Senior Citizen										
	(i) Health Insurance											
	(ii)	Preventive H	ealth Checkup									
	(iii)		enditure (This o	eduction to	oe claimed	d on wh	ich health ins	urance is				
2		not claimed a	our parents is	a senior citiz	en							
(a)	Parents		,									
	(i)	Health Insura	ance									
	(ii)	Preventive H	ealth Checkup									
(b)		including Ser										
()	(i)	Health Insura										
	(ii)		ealth Checkup									
	(iii)		enditure (This o	eduction car	n be claime	ed on w	hich health ir	nsurance is		0		
3		not claimed a										
3	Eligible	Amount of De	eduction		a		En.					
Sched	ule 80U		Details of	deduction		a pers	on with dis	ability				
SI. No.	Nature o	of Disability	Amount	of Deducti	on D		filing of For	m Ack.		Form 101/ ed	A UI	DID Number (If available)
(1)		(2)		(3)		(4)			(5)			(6)
1				W	0)	///)				
				144		व्यमेत्र लगर	Bur 1	749				
	ule 80DD						with disab	ility.				who is a perso
SI. No.	Nature of Amount of Type of Disability Deduction dependent			N of the pendent		naar of the pendent	Date of fili Form 10	ng of NA	Acknowledgeme nt number		UDID Number (available)	
(1)	(2) (3) (4) (5)					(6) (7)			(8))	(9)	
1			0		IA	1 5/1						
SCHEE	OULE 80G DE	TAILS OF DO	ONATIONS EN	TITLED FOR	DEDUCT	ION UI	NDER SECTION	ON 80G				
			100% DEDUC									
SI. No.	Name of the Donee	Address	City or Town or District	State co	de Pin	code	PAN of Donee		in Do	nt of donat onation in her mode	tion Tota donati	

Dat	e of	Filing	: (04-Jun-2024*	

(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

SI.	Name of	Address	City or Town or	State code	Pin code	PAN of	Am	ount of dona	tion	Eligible Amount of
No.	the Donee		District	State code	Fill Code	Donee	Donation in cash	Donation in other mode	Total donation	Donation
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)
Total B							0	0	0	0

C. DONATIONS ENTITLED FOR 100% DEDUCTION SUBJECT TO QUALIFYING LIMIT

SI.	Name of	Address	Address	Address	Address	City or Town or	State code	Pin code	PAN of	Am	Eligible Amount of
No.	the Donee		District	State code	riii coue	Donee	Donation in cash	Donation in other mode	Total donation	Donation	
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	
Total C							0	0	0	0	

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

SI.	Name of the Donee	Address				City or			PAN of	ARN (Donation	Amo	Eligible
No.			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	l				0	0	0	0				
E. Tota	l Amount of D	onations (A -	+ B + C + D)		0	0	0	0				

SCHEDULE 80GGC DETAILS OF DEDUCTION IN RESPECT OF CONTRIBUTIONS GIVEN BY ANY PERSON TO POLITICAL PARTIES

SI.	Date	An	nount of Contribut	ion	Eligible Amount of	Transaction Reference number for UPI transfer / Cheque number / IMPS	IFSC code of	
No.	Date	Contribution in Cash	Contribution in other mode	Total Contribution	Contribution		Bank	
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	
Total		0	0	0	0			

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: 49.47.194.145

Date: 04-Jun-2024

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

Acknowledgement Number: 393762720040624

TRP PIN (10 digit)

Name of TRP

Counter Signature of TRP

Amount to be paid to TRP

0