Acknowledgement Number: 214915080140524 Date of Filing: 14-May-2024*

FORM ITR-U	[For	persons	INDIAN INCOME TAX UPDATED RETURN rsons to update income within twenty-four months from the end of the rele (Refer instructions for eligibility) (Please see rule 12AC of the Income-tax Rules, 1962)					elevant ass	esment yea	ır]	Assessment Year 2023-24	
PART A	GENE	RAL INFO	DRMATIO	N - 139(8A)								
(A1) PAI GTCPS0			(A2) Nar BIJI SHA	ne N	Numbe		ber (Please ent e to Individual ((A3a) Aadha for Aadhaar		nt Id	(28 digits) (If eligible
(A4) Ass 2023-24		ent Year			. ,	Vhether retur sment year?	rn previously fil	ed for this	(A6) If Yes,	Whether U/s		
(A7) If a	pplical	ble, enter	form filed	A	Ackno	wledgement	Number		Date of Filin	g of Original	Ret	urn
(A8)			igible for f section 1	iling an updated re .39(8A)?	return	as per the c	onditions laid o	ut in first, seco	nd and third	✓ Yes 🗆 No	0	
(A9)				R form for updatinals made available					p-down and	ITR4		
(A10)	F	Reasons fo	or updatin	g your income:								
SI No.						Reaso	n for Updatin	g Income				
1							2					
1	Return	previousl	y not filed									
(A11)	,	Are you fil	ing the up	dated return durin	ng the	e period				Up to 12 mo		from the end of ment Year
(A12)	 (a) Are you filing the updated return to reduce carried forward loss or unabsorbed depreciation or tax credit? (b) If Yes , please specify the assessment years where carried forward loss or unabsorbed 						□ Yes □ No)				
				credit is being affe					beu			
SI No.		A	ssesment	Year				has been filed No. 12a above		leturn filed, if yes is selected		
1			2		1151		3	1711		4		
					13.7	,		1/1/				
PART B	- ATI	СОМРИТ	ATION O	F TOTAL UPDATE	ED IN	ICOME AND	TAX PAYABLE	7 1. 8			1	
1	А			ome under which a ome (If yes, Please				ed as per Updat	ed Return	-7		
		а	Inc	come from Salary		7-1-7-7		ac N		а		1,48,000
		b	Inc	ome from house p	prope	erty	X DEP	RTIM		b		0
		С	Inc	come from Busines	ss or F	Profession				С		3,14,000
		d	Inc	ome from Capital	l Gains	S				d		0
	e Income from Other		ome from Other S	Source	es				е		10,617	
	f Total additional Income (a + b + c		a + b + c + d	d + e)			f		4,72,617			
	В		otal Income eviously fi	e as per latest vali led)	lid retu	curn (only in c	cases where the	e Income Tax Re	eturn has bee	en B		0
2	Т	otal incom	ie as per P	art-BTI (Please see	e inst	truction)				2		4,72,620
3			yable, if ar instructio	ny (To be taken fro n)	om th	ne "Amount p	ayable" of Part	B-TTI of the up	dated ITR)	3		1,000
4		Amount refundable, if any (To be taken from "Refund" of Part B-TTI of the updated ITR) (Please see instruction) 4										

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Details of payments of Advance Tax / Self Assessment Tax / Regular Assessment Tax, credit for which has not been claimed in the

	SI. No. BSR Code		Date of Deposit (DD/MM/YYYY)	Serial Number of Challan	Amount (Rs)	
	1	2	3	4		5
	Total		M AIL	M		0
15		l/s 89 which is not claimed in ea 140B(2)]	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: 14-May-2024*

PART A GENERAL INFORMATION					,				
(A1) First Name BIJI	(A2) Middle Name	(A3) Last Nam SHAJI	ne	(A4) Permanent A GTCPS0177M	Account Number				
(A5) Date of Birth/Formation (DD/MM 22/03/1977	I/YYYY)			(A6) Flat/Door/Blo Thandassery Ho					
(A7) Name of Premises/Building/Villa SOUTH CHITTOOR	ge	(A8) Road/Stre Chittoor-ekn	eet/Post Office n S.O	(A9) Area/Locality Cheranallur					
(A10) Town/City/District ERNAKULAM	(A11) State 16-Kerala	(A12) Country 91- INDIA	/Region	(A13) PIN Code/ZIP Code 682027					
(A14) Aadhaar Number(12 digits)/Aa 2xxx xxxx 3763	dhaar Enrolment Id(28 digits) (if eligib	le for Aadhaar I	No.)	(A15) Status Individual					
(A16) Residential/Office Phone Numb / 91 9633686466	per with STD Code /Mobile No.1			(A17) Mobile No.2	2				
(A18) Email Address-1(Self) bijishaji304@gmail.Com	Email Address-2	(A19) Nature of employment		Others					
(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)	· -								
	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	ears ?							
If Yes is Selected, please furnish the is excercised along with the date of f acknowledgement number of Form 1	filing 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	ling and								
(A23) (c) Option for current assessment 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 ackno	wledgement							
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 ag during the previous year?	under Seventh proviso to section 139 nation [Note: To be filled only if a personation or more conditions mentioned in gregate of amounts exceeding Rs. 1 0	on is not require n the seventh pr	ed to furnish a return o oviso to section 139(1	f income under sec					
 ☐ Yes ☐ No (ii) Have you incurred expenditure of foreign country for yourself or for an ☐ Yes ☐ No 	f an amount or aggregate of amount e y other person?	exceeding 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					
	as per other conditions prescribed und vn menu)	der clause (iv) o	f seventh proviso to se	ction 139(1) (If yes	s, please select the				
(A25) Whether this return is being fil ☐ Yes ☑ No	W1 459		<i>}}</i> }						
	Yes No yes, please furnish following information -								

Income from Business & Profession

Salary as per section 17(1)

PART B GROSS TOTAL INCOME

а

b

(1)

(2)

(3)

(4)

В1

В2

	D	value of perquisites as per section 17(2)		<u>'</u>	Ю				
	С	Profit in lieu of salary as per section 17(3)	i	ic		0		
	d	Income from retirement benefit account 89A	maintained in a notified cou	untry u/s i	id		0		
	е	Income from retirement benefit account notified country u/s 89A	maintained in a country oth	ner than i	ie		0		
	ii	Less allowances to the extent exempt up 17(1)/17(2)/17(3)]	's 10 [Ensure that it is includ	ded in sala	ry income	u/s ii	i	0	
	SI. No.	Nature of Exempt Allowance	Description (If Any Ot	her selec	cted)		A	Amount	
	(1)	(2)	(3)					(4)	
	iia	Less : Income claimed for relief from tax	ation u/s 89A			ii	ia	0	
	iii	Net Salary (i - ii - iia)				ii	ii	1,98,000	
	iv	Deductions u/s 16 (iva + ivb + ivc)				i	v	50,000	
	а	Standard deduction u/s 16(ia)		i	iva	50,000			
	b	Entertainment allowance u/s 16(ii)		i	ivb		0		
	С	Professional tax u/s 16(iii)		i	ivc		0		
	V	Income chargeable under the head 'Salaries' (iii - iv)						1,48,000	
В3		Type Of House Property				Е	33		
	i	Gross rent received/ receivable/ lettable	value during the year			i		0	
	ii	Tax paid to local authorities	ii				0		
	iii	Annual Value (i - ii)				ii	ii	0	
	iv	30% of Annual Value	iv				0		
	V	Interest payable on borrowed capital	v				0		

	vi	Arr	ears/Unre	ealized Rent received during	the year Less 30%	vi		0			
	vii	neg of t	gative) No	geable under the head 'Hou hte:- Maximum loss from hou s INR 2, 00,000. To avail the	ise property that can be	set-off in	computing incor	ne pa	0		
B4		Inc	ome from	Other Sources	Sha man Elis	055	Λ	B4	10,617		
	SI. No.		Na	ture of Income	Description (If Any	Other se	elected)	Tota	al Amount		
	(1)			(2)	(3)				(4)		
	1	Intere	est from S	aving Account	TAX DEPA	-			177		
	2			Deposit(Bank/Post tive Society)		1		10,440			
	3	Divid	end						0		
			(Quarterly breakup of Div	idend Income		unt maintaine		m retirement benefit ed country u/s 89A on)		
			(i)	Up to 15-Jun-2022	0	(i)	Up to 15-Jur		0		
		-	(ii)	From 16-Jun-2022 to 15-Sep-2022	0	(ii)	From 16-Jur Sep-2022	1-2022 to 15-	0		
		-	(iii)	From 16-Sep-2022 to 15-Dec-2022	0	(iii)	From 16-Se 15-Dec-202		0		
		-	(iv)	From 16-Dec-2022 to 15-Mar-2023	0	(iv)	From 16-De 15-Mar-202		0		
			(v)	From 16-Mar-2023 to 31-Mar-2023	0	(v)	From 16-Ma 31-Mar-202		0		
						ı					
		Les	ss: Deduct	tion u/s 57(iia) (in case of fa	mily pension only)	'			0		
				tion u/s 57(iia) (in case of fa e claimed for relief from taxa					0		

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	
C2	80CCC - Payment in respect Pension Fund	0	
C3	80CCD(1) - Contribution to pension scheme of Central Government	0	
C4	80CCD(1B) -Contribution to pension scheme of Central Government	0	
C5	80CCD(2) - Contribution to pension scheme of Central Government by employer	0	
C6	80D - Deduction in respect of health insurance premia	0	
27	80DD - Maintenance including medical treatment of a dependent who is a person with disability	0	
28	80DDB - Medical treatment of specified disease	0	
C9	80E - Interest on loan taken for higher education	0	
C10	80EE - Interest on loan taken for residential house property	0	
C11	80EEA - Deduction in respect of interest on loan taken for certain house property	0	
C12	80EEB - Deduction in respect of purchase of electric vehicle	0	
C13	80G - Donations to certain funds, charitable institutions	0	
C14	80GG - Rent paid	0	
C15	80GGC - Donation to Political party	0	
C16	80TTA - Interest on deposits in saving bank Accounts	0	
C17	80TTB- Interest on deposits in case of senior citizens.	0	

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C18	80U - In case of a person with disability	0	0
C19	80CCH - Contribution to Agnipath Scheme	0	0
C20	Total deductions (Add items C1 to C19)	0	0
C21	Taxable Total Income (B5 - C20)		4,72,620

PART D	- TAX COMPUTATIONS AND TAX STATUS		
D1	Tax payable on total income	D1	11,131
D2	Rebate on 87A	D2	11,131
D3	Tax payable after Rebate (D1-D2)	D3	C
D4	Health and Education Cess @ 4% on (D3)	D4	C
D5	Total Tax, and Cess (D3 + D4)	D5	C
D6	Relief u/s 89 (Please ensure to submit Form 10E to claim this relief)	D6	C
D7	Balance Tax after Relief (D5 - D6)	D7	C
D8	Total Interest u/s 2348	D8	C
D9	Total Interest u/s 234B	D9	C
D10	Total Interest u/s 234C	D10	C
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	C
D14	Total Self-Assessment Tax Paid	D14	C
D15	Total TDS Claimed (total of column 4 of Schedule-TDS1 and column 6 of Schedule-TDS2)	D15	C
D16	Total TCS Collected (total of column (5) of Schedule-TCS)	D16	C
D17	Total Taxes Paid (D13 + D14 + D15 +D16)	D17	C
D18	Amount payable (D12 - D17, If D12 > D17)	D18	1,000
D19	Refund (D17 - D12, If D17 > D12)	D19	(

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)

(2)

1 FDRL0001380 FEDERAL BANK 13800100409737 **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 Tailoring Other services n.e.c. 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 5.61.280 Any other mode F2 Presumptive Income under section 44AD 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 3,14,000 c Total (a + b)F2c 3.14.000 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

Date of Filing: 14-May-2024*

(4)

(5)

(6)

(3)

Tax Collection Account

Number of the Collector

No.

Name of the Collector

Details of amount paid

as mentioned in Form

26AS

Tax Collected

Amount out of (4) being

claimed

Date of Filing: 14-May-2024*

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

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

SI.	Tax Deduction Account	t		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	Correspondi	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 194N)	Gross Amount	Head of Income	being carried forward
				TDS Deducted	TDS Claimed			
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
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	forwar	FDS brought d (b/f)	TDS of the current Financial Year	Year (only if correspondin g receipt is being offered for tax this	Correspond offe	TDS Credit	
No.	Tenant / Deductor	of the tenant / Deductor	Fin. Year in which deducted	TDS b/f	TDS Deducted		Gross Amount	Head of Income	being carried forward
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
Total	1			All s	Sally Colored	0			

SCHED	OLE SOD	
1	Whet	her 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 0
	(ii)	Preventive Health Checkup

Self &	Family including Senior Citizen		0
(i)	Health Insurance		0
(ii)	Preventive Health Checkup		0
(iii)	Medical Expenditure (This deduction to be claimed on which health insurance is not claimed at (i) above)		0
Wheth	er any one of your parents is a senior citizen		Not Claiming for Parents
Parent	S		0
(i)	Health Insurance		0
(ii)	Preventive Health Checkup		0
Parent	s including Senior Citizen		0
(i)	Health Insurance		0
(ii)	Preventive Health Checkup		0
(iii)	Medical Expenditure (This deduction can be claimed on which health insurance is not claimed at (i) above)		0
Eligible	e Amount of Deduction		0
	(i) (ii) (iii) Wheth Parent (i) (ii) Parent (i) (ii) (iii)	(ii) Health Insurance (iii) 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 (ii) Preventive Health Checkup Medical Expenditure (This deduction can be claimed on which health insurance is	(ii) Health Insurance (iii) 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)

SCHEDULE 80G DETAILS OF DONATIONS ENTITLED FOR DEDUCTION UNDER SECTION 80G

A. DONATIONS ENTITLED FOR 100% DEDUCTION WITHOUT QUALIFYING LIMIT

SI.	Name of	me of City or PAN of		PAN of	Am	ount of donat	tion	Eligible		
No.	the Donee	Address	Town or 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)	(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 Donee D	Din codo PA	Din sada	Din code PAN of	Am	Eligible Amount of Donation
No.	the Donee	Address	District	State code		Donee	Donation in cash	Donation in other mode	Total 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	City or	Chata and	PAN of		Am	ount of dona	tion	Eligible
No.	the Donee	Address	Town or 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)	(8)	(9)	(10)	(11)
Total C				0	0	0	0			

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

Acknowledgement Number: 214915080140524

SI.	Name of	City or DAN of		PAN of	ARN (Donation	Amo	ount of dona	ntion	Eligible Amount of		
No.	the Donee	Address	Town or District	State code	Pin code	Donee	Reference Number)	Donation in cash	Donation in other mode	Total donation	Donation
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
Total D				100	ETAS	nep/	RIM	0	0	0	0
E. Tota	E. Total Amount of Donations (A + B + C + D) 0 0 0										

Date of Filing: 14-May-2024*

VERIFICATION

I, **BIJI SHAJI** son/ daughter of **ANTONY** 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 **GTCPS0177M**

Place: ERNAKULAM

Date: 14-May-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