ITR 4 - INDIAN INCOME TAX RETURN									
(FOR PRESUMPTIVE INCOME FROM BUSINESS & PROFESSION)									
(Please see rule 12 of the Income-tax Rules, 1962)									
(Also see attached instructions)									
Personal Information									
Name	Jame JAYESH BAVCHANDBHAI RAMANI								
Permanent Account Number	Permanent Account Number AWDPR1926K Income Tax Ward/Circle								
Date of Birth/Formation (DD/MM/	04/11/1989								
YYYY)									
Address									
Flat/Door/Building		C-503,KALASH RESIDENCY,							
Name of Premises/ Building/ Village									
Road/Street		B/H MEGH MALHAR,							
Area/locality	- BP -	NR SATYAGRAH BUNGLOWS,NIKOL,							
Town/City/District	A G	AHMEDABAD							
State	M W	GUJARAT							
Country		INDIA							
Pin code		382350							
Aadhaar Number (Please enter the Aadl	haar Number which is linked with your	496184030914							
PAN in e-Filing portal. Applicable to In	ndividual only)	So the A							
Status	V 16 4 4	Individual							
Mobile No.1	INC	91 - 9016461274							
Std Code	COMETRY	- ABTME							
Landline Phone number (Residence/Off	fice)	DEPAN							
Mobile No. 2									
Email Address		kirtiraiyani@gmail.com							
Filing Status									
Tax Status (Fill Only one)		Nil Tax Balance							
Residential Status		Resident							
Return filed under section		17 - Revised return under section 139(5)							
Whether Person governed by Portugues	e Civil Code under section 5A	No							
If A22 is applicable, PAN of the Spouse	2								
Whether original or revised return?		Revised							
If under section: 139(5)- revised return:									
Original Acknowledgement Number.		257459190310818							
Date of filing of Original Return(DD/M	IM/YYYY)	31/08/2018							
If under Sec 139(9)- Defective return									

Acknow	ledgemer	nt number of the original return(Defective return)							
Date of	the origin	al Return (Where the original return filed was Defective and a							
notice w	as issued	to the assessee to file a fresh return Sec139(9))							
Notice n	number (V	Vhere the original return filed was Defective and a notice was							
issued to	o the asse	ssee to file a fresh return Sec139(9))							
If filed i	in respons	e to notice u/s 139(9)/142(1)/148/153A/153C,enter the date of							
such not	tice								
Part B (Gross To	tal Income							
B1	Income	from Business & Profession			1562				
	Note- E	Enter value from E8 of Sch BP							
B2	(i)	Salary (excluding all allowances, perquisites and profit in lieu of salary)			28121				
	(ii)	Allowances not exempt							
sion	(iii)	Value of perquisites							
/ Pen	(iv)	Profits in lieu of salary							
Salary / Pension	(v)	Deduction u/s 16	Ø						
ů	(vi)	Income chargeable under the Head 'Salaries' (i+ii+iii+iv-v)	-WA		28121				
	(NOTE- Ensure to Fill 'Sch TDS1'given in Page 5)								
B3	Type of	f House Property	- XX						
	(i)	Gross rent received/ receivable/ letable value	XII						
erty	(ii)	Tax paid to local authorities	AD						
Prop	(iii)	Annual Value (i-ii)	97	~ 1					
House Property	(iv)	30% of Annual Value		177	1				
Т	(v)	Interest payable on borrowed capital	TIME	//					
	(vi)	Income chargeable under the head 'House Property' (iii-iv-v)							
B4	Income	from Other Sources							
	NOTE-	Ensure to Fill 'Sch TDS2' given in Page 5							
B5	Gross	Fotal Income (B1 + B2 + B3 + B4)			29683				
Part C -	- Deducti	ons and Taxable Total Income (Refer to instructions for limits on Amount of	Deductions as p	er 'Income Tax A	Act'				
S.No.		Section	Ame	ount	System Calculated				
C1.	80C - L	ife insurance premia, deferred annuity, contributions to provident fund,		13029	1302				
	subscrij	ption to certain equity shares or debentures, etc.							
C2.	80CCC	- Payment in respect Pension Fund	0						
С3.	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.	80CCG	- Investment made under an equity savings scheme		0					
		Health Insurance Premium	1						

		· · · · · ·			
Instruc		and gains of Business of plying, hiring or lo	easing goods carriage	s u/s 44AE	
1	06010 - Other constr uction activity n.e.c.	PEST CONTROL TREATME NT			
S.No.	Nature of Business	Tradename	Tradename		Tradename
Nature	of business or profession, if more that	n one business indicate the three main activ	ities/ products		
D13.	Total Tax, Fee and Interest (D8+D9	+D10+D11+D12)			
D12.	Fees u/s 234F				
D11.	Total Interest u/s 234C				
D10.	Total Interest u/s 234B				
D9.	Total Interest u/s 234A				
D8.	Balance Tax after Relief (D6-D7)				
D7.	Relief u/s 89				
D6.	Total Tax, Surcharge and Cess (D3+)	D4+D5)	An		
D5.	Cess on (D3+D4)	COMP	or ME		/
D4.	Surcharge, if applicable			\sim	1
D3.	Tax payable after Rebate (D1-D2)	क मूलों क	80 I		
D2.	Rebate u/s 87A	the de	55 A.D		16
D1.	Tax payable on total income(C20)	स्वयमेश अपने	kli		16
PART I	D TAX COMPUTATIONS AND TAX	STATUS			
C20.	Taxable Total Income (B5 - C19)		- 10		2838
C19.	Total deductions (Add items C1 to)		13029	130	
C18.	80U - In case of a person with disabil	A		0	
C17.	80TTA - Income from Interest on sav	ing bank Accounts	36.	0	
C16.	80RRB - Royalty on patents			0	
C15.	80QQB - Royalty income of authors of	of certain books.		0	
C14.	80GGC - Donation to Political party			0	
C13.	80GG - Rent paid			0	
C12.	80G - Donations to certain funds, cha			0	
C10.	80EE - Interest on Ioan taken for resid			0	
C9.	80DDB - Medical treatment of specifier 80E - Interest on loan taken for higher 80E - Interest on loan taken for higher 100 - 1		0		
<u> </u>	disability -				
C8.	80DD - Maintenance including medic	al treatment of a dependent who is a person w	ith	0	
	(C) Preventive health check-up -				
	(B) Medical expenditure -				

JAYESH BAVCHANDBHAI RMAANI

C-503,KALASH RESIDENCY B/H MEGH MALHAR NR SATYAGRAH BUNGLOWS NIKOL <u>AHMEDABAD</u>

Profit & Loss A/c

1-Apr-2017 to 31-Mar-2018

Particulars	1-Apr-2017 to 31-Mar-2018	Particulars	1-Apr-2017 to	1-Apr-2017 to 31-Mar-2018		
Direct Expenses		Sales Accounts		15,620.00		
		SALE A/C	15,620.00			
Gross Profit c/o	2,96,830.00	•				
		Direct Incomes		2,81,210.00		
		SALARY INCOME	2,81,210.00			
	2,96,830.00	-		2,96,830.00		
Indirect Expenses		Gross Profit b/f		2,96,830.00		
BANK CHARGES	124.00					
PETROL EXPS	5,625.00	Indirect Incomes				
Nett Profit	2,91,081.00					
Total	2,96,830.00	Total		2,96,830.00		

JAYESH BAVCHANDBHAI RMAANI

C-503,KALASH RESIDENCY B/H MEGH MALHAR NR SATYAGRAH BUNGLOWS NIKOL <u>AHMEDABAD</u>

Balance Sheet

1-Apr-2017 to 31-Mar-2018

Liabilities	Liabilities as at 31-M		Assets	as at 31-Mar-2018		
Capital Account		11,43,565.00	Fixed Assets		1,56,946.00	
CAPITAL A/C	12,56,454.00		ELECTRICAL INSTALLTION	8,478.00		
L.I.C. A/C	(-)13,029.00		FURNITURE	25,141.00		
Withdrow A/c	(-)99,860.00		MACHINERY	54,780.00		
			MOBILE PHONE	15,000.00		
Loans (Liability)			VEHICALE EXP.A/C	53,547.00		
Current Liabilities			Investments			
Suspense A/c			Current Assets		9,86,619.00	
Profit & Loss A/c			Closing Stock	9,35,000.00		
Opening Balance			Loans & Advances (Asset) Cash-in-hand	9,33,000.00 27.419.00		
Current Period	2,91,081.00		Bank Accounts	24,200.00		
Less: Transferred	2,91,081.00		Darik Accounts	24,200.00		
Total		11,43,565.00	Total		11,43,565.00	

S No).	Period of holding (in months)	Income per Vehicle (Must	Deemed Income						
Total										
SCHED	ULE BI	• - DETAILS OF INCOME FROM BUSINES	S OR PROFESSION							
	COMP	UTATION OF PRESUMPTIVE INCOME UNI	DER 44AD							
E1.	Gross '	Turnover or Gross Receipts								
	E1a. Through a/c payee cheque or a/c payee bank draft or bank electronic clearing system received									
	before specified date									
	E1b.	Any other mode		90000						
E2.	Presum	nptive income under section 44AD								
	a.	6% of E1a		0						
	b.	8% of E1b		15620						
	c.	Total (a + b)	_	15620						
	Note :	If Income is less than the above percentage of G	oss Receipts, it is mandatory to have a tax audit un	nder 44AB and regular ITR 3 or 5 has to be filled						
	not this	s form								
	Compu	tation of Presumptive Income Under 44ADA (P	rofession)							
E3.	Gross	Receipts		0						
E4.	Presum	nptive Income under section 44ADA (50% of E3		0						
	NOTE	—If Income is less than 50% of Gross Receipts,	it is mandatory to have a tax audit under 44AB $\&$							
	regular	ITR 3 or 5 has to be filled not this form	Share 55 M	A						
	COMP	UTATION OF PRESUMPTIVE INCOME UNI	DER 44AE							
E5.	Presum	nptive Income from Goods Carriage under section	n 44AE							
			.44AE or the number of Vehicles owned at any							
	time ex	sceed 10 then the regular ITR 3/5 form has to be	filled and not this form							
E6.	Salary	and interest paid to the partners								
	NOTE	This is to be filled up only by firms	-							
E7.	Presun	nptive Income u/s 44AE (E5-E6)								
E8.	Income	e chargeable under Business or Profession (under	section 44AD, 44ADA and 44AE) (E2c+ E4+	15620						
	E7)									
E9.	INFOR	RMATION REGARDING TURNOVER/GROSS	RECEIPT REPORTED FOR GST	1						
E10.	Amour	nt of total turnover/Gross receipt as per the GST	return filed							
		ICIAL PARTICULARS OF THE BUSINESS								
		For E11 to E25 furnish the information as on 31s	t day of March,2018							
E11.		rs/Members own capital		0						
E12.	Secure			0						
E13.	Unsecu	ured loans		0						
E14.	Advan	ces		0						

P 4														~	
E15		y creditors									0				
E16		liabilities								0					
E17	7. Total o	capital and li	abilities (E1	1+E12+E13-	+E14+E15+E	216)									
E18	3. Fixed	assets								0					
E19	9. Invent	ories												0	
E20). Sundr	y debtors												37500	
E21	I. Balano	Balance with banks												C	
E22	2. Cash-i	Cash-in-hand 2568										25680			
E23	3. Loans	Loans and advances									0				
E24	4. Other	Assets												0	
E25	5. Total a	assets (E18+1	E19+E20+E	21+E22+E23	3+E24)									63180	
Note	e: Please refe	er to instructi	ons for fillin	g out this sc	hedule (E15,	E19, E20, E	22 are mand	atory and o	others if av	vailable)					
SCH	IEDULE T	DS1 DETAI	LS OF TAX	DEDUCTI	ED AT SOU	RCE FROM	I SALARY	[As per Fo	orm 16 iss	sued by E	mployer(s)]				
S.N	0.	TA	N		Name of th	he Employe	. Š	Incom	e under S	Salary		Tax	Deducted		
		Col	(1)		Co	ol (2)		R	Col (3)			C	col (4)		
	ТОТА	L							H.						
Sch	TDS2(i) - D	etails of Tay	x Deducted	at Source fr	om Income	OTHER TH	IAN SALAT	RV [As ner	· Form 16	A issued	by Deduct	or(s)]			
.No.	TDS	Tax	Name	Unique	Year	Details of		Tax Ded			-	redit out o	f (6) or (7) heing	
	Credit	Deduction	of the	TDs	of Tax	Receipt as		Tax Deu	ucieu			d this Yea		_	
					Deduction	(E.)	C-TH YENKE	Ale.	M						
	in the	Account	Deductor		105	2º78	in own	1. J	hands of s				_		
	name of	Number	(Col (2))	number	(Col (4))	in Form	hands	きつ	section 5						
		(TAN)		(Col (3))		26AS	[Col (6)]		er person				(2) Col (9)		
		of the		~~~	UNE	(Col (5))	net	MAK	7BA(2) C					1	
		Deductor						Income	TDS	PAN of		Income	TDS	PAN of	
		(Col (1))			-					spouse/				spouse/	
										other				other	
										person				person	
					TOTAI	-									
Sch	TDS2(ii) - l	Details of Ta	x Deducted	at Source [.	As per Form	a 26QC furn	ished by De	ductor(s)]			i				
l.No	TDS	PAN of	Name of	Unique	Year of tax	Details of		Tax De	ducted		TDS	credit out	of (6) or ((7) being	
	Credit	the Tenant	the Tenant	TDs	deduction	Receipt as					claim	ed this Yea	ar- (as ap	plicable)	
	in the	[Col (1)]	[Col (2)]	certificate	[Col (4)]	mentioned	in own	in the	hands of	spouse	in own	in the	e hands o	f spouse	
	name of			number		in Form	hands		er section	_	hands		er sectior	_	
				(Col (3))		26AS	[Col (6)]		her perso		[Col (8)]			on as per	
						[Col (5)]	[- 01 (0)]		37BA(2)	_			37BA(2)	_	
						[-0.(0)]		Income	TDS	PAN of	,		TDS	PAN of	
								income	108	rAN 01		Income	102		
										spouse/				spouse/	

Assessment Year : 2018-19

									other person			other persor
				TOT	AL		I			I		
Sche	dule TCS	Details of T	ax Collected at S	ource [As per	Form 27D	issued by the	Collector(s)]				1
S.N	D. Tax Collection Account Name of Number of the Collector		of Collector Details of amount Tax Collect paid as mentioned in Form 26AS			Collected		nt out of g claimed	hands of spouse, if			
		Col (1)		Col (2)	(Col (3)	С	ol (4)	Co	l (5)	(5) Col (6)	
	TOTA	AL										
Sch	IT - Detail	s of Advanc	e Tax and Self As	ssessment Ta	x Payments							
S.N		BSR	Code	Date of D	eposit(DD/I	MM/YYYY)		Challan N	0.		Tax paid	
		Col	l (1)		Col (2)			Col (3)			Col (4)	
TOTAL												
Sche	dule AL A	sset and Li	ability at the end	of the year (A	Applicable in	n case where	total income	exceeds Rs.	50 lakh)			
A	Do you o	wn any imn	novable asset ?		/			<u> </u>		_		
	Details o	of immovabl	le asset	M				<u> </u>				
	S No.	S No. Description Ad		Name of	Road/	Area/	Town/	State	State Country Pin code			code (cost) in
			Door/ Block No.	18 .	Street/Post	Locality	City/ District	B		1	-	Rs.
			+ Z	Village			-25					
В	Details o	of movable a	isset	50	10-		-nAi	M_{1}				
	Sl No.	Descripti				AX D	Ern	Aı	nount (cost)	in Rs.		
	(i)		, bullion etc.									
	(ii)		ogical collections,		nting, sculpt	ure or any wo	rk of art					
	(iii)		yachts, boats and	aircrafts								
	Financia							Aı	nount (cost)	in Rs.		
	(iv)		Bank (including a									
			Shares and securi									
			Insurance policies									
			Loans and advance	ces given								
~			Cash in hand									
С	Do you ł	ave any Inte	erest held in the ass	sets of a firm o	or association	n of persons (A	AOP) as a pa	rtner or mem	ber thereof ?			

	S No.	Name of				Address of	the firm(s)/	AOP(s) (2))			PAN of	Assessees's
		the firm(s)/	Flat/	Name of	Road/	Area/	Town/	State	Country	Pin code	Zip code	the firm	/ investment
		AOP(s) (1)	Door/	Premises /	Street	/ Locality	City/					AOP (3)	in the
			Block No.	Building /	Post		District						firm/ AOP
				Village	office								on cost
				_									basis (4)
D	Liability	in relation to	Assets at (A	A+B+C)									
Note	: Please ref	fer to instruc	tions for fill	ing out this	schedul	e							
80G													
Instr	uctions for	correct calc	ulation of 8	ØG									
A. De	onations er	ntitled for 100)% deduction	on without q	ualifyir	ng limit, (where	any row is fi	lled by the	user, all th	e fields in th	at row shou	ld become	mandatory)
	No.	Name of the		Address		City or Town	State Cod		code	PAN of	Amount		gible Amount
						or District				the Donee	donatio	on o	of Donation
Total						60	\$	200					
		ntitled for 50°	% deduction	n without au	alifving	g limit (where a	ny row is fill	d by the r	ser, all the	fields in that	row should	become n	nandatory)
	No.	Name of the		Address		City or Town	State Cod	_	code	PAN of	Amount		gible Amount
5	110.	tance of the Donee		Autress	N	or District	State Cou		leoue	the Donee donat			
Total						of District			M				
					110			en 11 41	- M	1. (* 11. * . 4)			
		illied for 100	J% deducu	on subject to	quanty	ying limit (wher	e any row is		ie user, all i	ine fields in t	nat row sno	ula becon	le
	latory)				A.	200		SS D	<u>4</u> –	DUN: A	A		
8	No.	Name of the	Donee	Address		City or Town	State Cod		code	PAN of	Amount		gible Amount
			<u> </u>	IN-		or District				the Donee	donatio	on o	of Donation
Total				9	ЭM	10-2-1		AR ¹	112				
D. Do	onations er	ntitled for 50°	% deduction	n subject to o	lualifyi	ng limit (where	any row is f	lled by the	e user, all th	e fields in th	at row shou	ld become	e mandatory)
S	No.	Name of the	Donee	Address		City or Town	State Cod	e Pin	code	PAN of	Amount	t of Elig	gible Amount
						or District				the Donee	donatio	on d	of Donation
Total	I D												
E. Do	onations (A	+ B + C+ D)											
Taxe													
D14.	s Paid												
D14		Advance Tax	Paid										0
D14.	. Total A	Advance Tax Self-Assessme											0
	. Total A	Self-Assessme	ent Tax Paid		edule-T	DS1 and column	n 7 of Schedu	le-TDS2)					
D15.	. Total 2 . Total 5 . Total 7	Self-Assessme	ent Tax Paid (total of col	umn 4 of Sch			n 7 of Schedu	le-TDS2)					0
D15.	. Total A . Total S . Total S . Total S	Self-Assessmo	ent Tax Paid (total of col d (total of co	umn 4 of Sch lumn (5) of S			n 7 of Schedu	le-TDS2)					0
D15. D16. D17.	 Total A Total S Total 7 Total 7 Total 7 	Self-Assessme TDS Claimed TCS Collected	ent Tax Paid (total of col d (total of co 14+D15+D	umn 4 of Sch lumn (5) of S 16+D17)			n 7 of Schedu	le-TDS2)					0 0 0
D15. D16. D17. D18.	 Total A Total S Total 7 Total 7 Total 7 Amou 	Self-Assessmo TDS Claimed TCS Collected Taxes Paid (D	ent Tax Paid (total of col d (total of co 14+D15+D 13 - D18, If	umn 4 of Sch lumn (5) of S 16+D17) D13 > D18)			n 7 of Schedu	le-TDS2)					0 0 0 0 0 0

	(If agricultural income is more than Rs.5,000/-, use ITR 3/5)										
	Agric	culture In	acome								
	Other	rs									
	Sl. No. Nature of Income Description (If 'Any Other' is selected							Amount			
	Total										
D22.	Detai	ls of all l	Bank Accounts held in India	at any time during	the previous year (exo	cluding dormant	Yes				
	accounts) (In case of non-residents, details of any one foreign Bank Account may be furnished for the										
	purpo	ose of cre	edit of refund)								
		a) Ban	k Account in which refund,	if any, shall be c	redited						
S.N	0.	IFS Code of the bank			Name of th	e Bank		Account Number			
1		SBIN0011749			STATE BANK INDIA			00000031297104329			
	b) Other Bank account details										
S.N	0.	IFS Code of the bank			Name of th	e Bank		Account Number			
		c) In ca	ase of non-residents, details	of any one foreig	gn Bank Account may	y be furnished for the	purpose of cre	dit of refund			
S.No	0.		SWIFT Code	Name of	Name of the Bank Country of Loc			IBAN			
				M	VERIFICATION	W					
inform	ation g	iven in tl		lete and is in acco	ordance with the provi	sions of the Income-ta	x Act, 1961. I f	of my knowledge and belief, the Further declare that I am making r AWDPR1926K			
			Place	au .	Date	BU V		Sign here			
AHMEI	DABAE		- Y/1	13/09/2018		5	I				
If the ret	turn has	s been pr	epared by a Tax Return Prep	arer (TRP) give fu	rther details as below:	THING					
	T	RP PIN	(10 Digit)	11/2	TAX DEP	An					
		Name o	of TRP			-					
	Amou	int to be	paid to TRP								