

| FORM ITR-V                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                 | INDIAN INCOME TAX RETURN VERIFICATION FORM                                                                                                                                                                                             |                                                   |                        |                                                                                                                       | Assessment Year<br><b>2016-17</b>                                           |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------|------------------------|-----------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------|--|
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                 | [Where the data of the Return of Income in Form ITR-1 (SAHAJ), ITR-2, ITR-2A, ITR-3, ITR-4S (SUGAM), ITR-4, ITR-5, ITR-7 transmitted electronically without digital signature] .<br>(Please see Rule 12 of the Income-tax Rules, 1962) |                                                   |                        |                                                                                                                       |                                                                             |  |
| PERSONAL INFORMATION AND THE DATE OF ELECTRONIC TRANSMISSION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Name<br><b>SUNRISE DEVELOPERS</b>                               |                                                                                                                                                                                                                                        |                                                   |                        |                                                                                                                       | PAN<br><div style="border: 1px solid black; padding: 2px;">ABJFS5662G</div> |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Flat/Door/Block No<br><b>PLOT 108</b>                           |                                                                                                                                                                                                                                        | Name Of Premises/Building/Village<br><b>ANJUM</b> |                        | Form No. which has been electronically transmitted<br><div style="border: 1px solid black; padding: 2px;">ITR-5</div> |                                                                             |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Road/Street/Post Office<br><b>SECTOR 28</b>                     |                                                                                                                                                                                                                                        | Area/Locality<br><b>GANDHINAGAR</b>               |                        |                                                                                                                       |                                                                             |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Town/City/District<br><b>GANDHINAGAR</b>                        |                                                                                                                                                                                                                                        | State<br><b>GUJARAT</b>                           | Pin<br><b>382028</b>   | Status <b>Firm</b>                                                                                                    |                                                                             |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Designation of AO (Ward / Circle)<br><b>WARD 1, GANDHINAGAR</b> |                                                                                                                                                                                                                                        |                                                   |                        | Original or Revised <b>ORIGINAL</b>                                                                                   |                                                                             |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | E-filing Acknowledgement Number<br><b>486096280071016</b>       |                                                                                                                                                                                                                                        | Date(DD-MM-YYYY)<br><b>07-10-2016</b>             |                        |                                                                                                                       |                                                                             |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 1 Gross Total Income                                            |                                                                                                                                                                                                                                        | 1                                                 |                        | 0                                                                                                                     |                                                                             |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 2 Deductions under Chapter-VI-A                                 |                                                                                                                                                                                                                                        | 2                                                 |                        | 0                                                                                                                     |                                                                             |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 3 Total Income                                                  |                                                                                                                                                                                                                                        | 3                                                 |                        | 0                                                                                                                     |                                                                             |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | a Current Year loss, if any                                     |                                                                                                                                                                                                                                        | 3a                                                |                        | 0                                                                                                                     |                                                                             |  |
| 4 Net Tax Payable                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                 | 4                                                                                                                                                                                                                                      |                                                   | 0                      |                                                                                                                       |                                                                             |  |
| 5 Interest Payable                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                 | 5                                                                                                                                                                                                                                      |                                                   | 0                      |                                                                                                                       |                                                                             |  |
| 6 Total Tax and Interest Payable                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                 | 6                                                                                                                                                                                                                                      |                                                   | 0                      |                                                                                                                       |                                                                             |  |
| 7 Taxes Paid                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                 |                                                                                                                                                                                                                                        |                                                   |                        |                                                                                                                       |                                                                             |  |
| a Advance Tax                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                 | 7a                                                                                                                                                                                                                                     | 0                                                 |                        |                                                                                                                       |                                                                             |  |
| b TDS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                 | 7b                                                                                                                                                                                                                                     | 0                                                 |                        |                                                                                                                       |                                                                             |  |
| c TCS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                 | 7c                                                                                                                                                                                                                                     | 0                                                 |                        |                                                                                                                       |                                                                             |  |
| d Self Assessment Tax                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                 | 7d                                                                                                                                                                                                                                     | 0                                                 |                        |                                                                                                                       |                                                                             |  |
| e Total Taxes Paid (7a+7b+7c +7d)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                 | 7e                                                                                                                                                                                                                                     | 0                                                 |                        |                                                                                                                       |                                                                             |  |
| 8 Tax Payable (6-7e)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                 | 8                                                                                                                                                                                                                                      | 0                                                 |                        |                                                                                                                       |                                                                             |  |
| 9 Refund (7e-6)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                 | 9                                                                                                                                                                                                                                      | 0                                                 |                        |                                                                                                                       |                                                                             |  |
| 10 Exempt Income                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                 | Agriculture<br>Others                                                                                                                                                                                                                  |                                                   | 10                     |                                                                                                                       |                                                                             |  |
| VERIFICATION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                 |                                                                                                                                                                                                                                        |                                                   |                        |                                                                                                                       |                                                                             |  |
| <p>I, <b>GANIBHAI ADAMBHAI VADIA</b> son/ daughter of <b>ADAMBHAI VADIA</b>, holding Permanent Account Number <b>ACTPV8157A</b> solemnly declare to the best of my knowledge and belief, the information given in the return and the schedules thereto which have been transmitted electronically by me vide acknowledgement number mentioned above is correct and complete and that the amount of total income and other particulars shown therein are truly stated and are in accordance with the provisions of the Income-tax Act, 1961, in respect of income chargeable to income-tax for the previous year relevant to the assessment year 2016-17. I further declare that I am making this return in my capacity as <b>PARTNER</b> and I am also competent to make this return and verify it.</p> |                                                                 |                                                                                                                                                                                                                                        |                                                   |                        |                                                                                                                       |                                                                             |  |
| Sign here                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                 |                                                                                                                                                                                                                                        |                                                   | Date <b>07-10-2016</b> |                                                                                                                       | Place <b>GANDHINAGAR</b>                                                    |  |
| <p>If the return has been prepared by a Tax Return Preparer (TRP) give further details as below:</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                 |                                                                                                                                                                                                                                        |                                                   |                        |                                                                                                                       |                                                                             |  |
| Identification No. of TRP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                 | Name of TRP                                                                                                                                                                                                                            |                                                   |                        |                                                                                                                       | Counter Signature of TRP                                                    |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                 |                                                                                                                                                                                                                                        |                                                   |                        |                                                                                                                       |                                                                             |  |
| For Office Use Only                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                 | Filed from IP address <b>103.240.168.54</b>                                                                                                                                                                                            |                                                   |                        |                                                                                                                       |                                                                             |  |
| Receipt No                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                 |                                                                                                                                                                                                                                        |                                                   |                        |                                                                                                                       |                                                                             |  |
| Date                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                 |                                                                                                                                                                                                                                        |                                                   |                        |                                                                                                                       |                                                                             |  |
| Seal and signature of receiving official                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                 | <b>ABJFS5662G054860962800710168909297753A7E522FABBC24EE57F4ADF29BB5FB1</b>                                                                                                                                                             |                                                   |                        |                                                                                                                       |                                                                             |  |
| <p>Please send the duly signed Form ITR-V to "Income Tax Department - CPC, Post Bag No - 1, Electronic City Post Office, Bengaluru - 560100, Karnataka", by ORDINARY POST OR SPEED POST ONLY, within 120 days from date of transmitting the data electronically. Form ITR-V shall not be received in any other office of the Income-tax Department or in any other manner. The confirmation of receipt of this Form ITR-V at ITD-CPC will be sent to the e-mail address <a href="mailto:vaghelasureshsinh27@gmail.com">vaghelasureshsinh27@gmail.com</a></p>                                                                                                                                                                                                                                            |                                                                 |                                                                                                                                                                                                                                        |                                                   |                        |                                                                                                                       |                                                                             |  |