

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                     |                                                                     |                                                    |                          |      |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------|----------------------------------------------------|--------------------------|------|
| <b>FORM ITR-V</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <b>INDIAN INCOME TAX RETURN VERIFICATION FORM</b><br>[Where the data of the Return of Income in Form ITR-1 (SAHAJ), ITR-2, 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) |                                                                     | Assessment Year<br><b>2014 - 15</b>                |                          |      |
| PERSONAL INFORMATION AND THE DATE OF ELECTRONIC TRANSMISSION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Name                                                                                                                                                                                                                                                                                |                                                                     | PAN                                                |                          |      |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | VRUNDAVAN BUILDCON                                                                                                                                                                                                                                                                  |                                                                     | AAJFV8293M                                         |                          |      |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Flat/Door/Block No                                                                                                                                                                                                                                                                  | Name Of Premises/Building/Village                                   | Form No. which has been electronically transmitted | ITR-5                    |      |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 3 KESAR RESIDENTY                                                                                                                                                                                                                                                                   |                                                                     |                                                    |                          |      |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Road/Street/Post Office                                                                                                                                                                                                                                                             | Area/Locality                                                       |                                                    |                          |      |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | NRL G CORNNER                                                                                                                                                                                                                                                                       | MANINAGAR                                                           |                                                    |                          |      |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Town/City/District                                                                                                                                                                                                                                                                  | State                                                               | Pin                                                | Status                   | Firm |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | AHMEDABAD                                                                                                                                                                                                                                                                           | GUJARAT                                                             | 380008                                             |                          |      |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Designation of AO (Ward / Circle)                                                                                                                                                                                                                                                   |                                                                     | Original or Revised                                |                          |      |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | ITO WD.1(1)(1) AHM (GUJ W 101 1)                                                                                                                                                                                                                                                    |                                                                     | ORIGINAL                                           |                          |      |
| E-filing Acknowledgement Number                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                     | Date(DD-MM-YYYY)                                                    |                                                    |                          |      |
| 986450670150316                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                     | 15-03-2016                                                          |                                                    |                          |      |
| COMPUTATION OF INCOME AND TAX THEREON                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 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                        |      |
| VERIFICATION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                     |                                                                     |                                                    |                          |      |
| I, <u>KALPESHBHAI M. KOTADIYA</u> son/ daughter of <u>MANUBHAI KOTADIYA</u> , holding Permanent Account Number <u>AGEPK5350R</u> 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 year relevant to the assessment year 2014-15. I further declare that I am making this return in my capacity as <u>MANAGING PARTNER</u> and I am also competent to make this return and verify it. |                                                                                                                                                                                                                                                                                     |                                                                     |                                                    |                          |      |
| Sign here                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                     | Date                                                                | Place                                              |                          |      |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                     | 15-03-2016                                                          | AHMEDABAD                                          |                          |      |
| If the return has been prepared by a Tax Return Preparer (TRP) give further details as below:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                     |                                                                     |                                                    |                          |      |
| Identification No. of TRP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                     | Name of TRP                                                         |                                                    | Counter Signature of TRP |      |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                     |                                                                     |                                                    |                          |      |
| For Office Use Only                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                     | Filed from IP address                                               |                                                    |                          |      |
| Receipt No                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                     | 110.172.25.116                                                      |                                                    |                          |      |
| Date                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                     |                                                                     |                                                    |                          |      |
| Seal and signature of receiving official                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                     |                                                                     |                                                    |                          |      |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                     |                                                                     |                                                    |                          |      |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                     | AAJFV8293M0598645067015031683799AE584851CF28AC40B9055ED532CF88989AF |                                                    |                          |      |

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 [aimco73@yahoo.com](mailto:aimco73@yahoo.com)

#

AHMEDABAD.

Assessee Name: **M/S VRUNDAVAN BUILDCON**  
 Address : 3 KESAR RESIDENTY  
 NR.L G CORNER  
 MANINAGAR  
 AHMEDABAD - 380008  
 Mobile Number: 9426687388  
 E-mail : aimco73@yahoo.com  
 PAN : **AAJFV8293M**  
 Incorp. Date : **01/09/2010**

Assessment Year : 2014-15 Residential Status : Resident  
 Previous Year : 01-04-2013 To 31-03-2014 Due Date of Return : 31/07/2014  
 Ward/Circle/Range: TIO WD.1(1)(1) AHM (GUJ W 101 1)  
 Status : 05 » Firms  
 Bank A/c Details : Current A/c# 202720110000442 Bank: BANK OF INDIA. IFSC: BKID0002027 MICR: 380013014

[58293]

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## COMPUTATION OF INCOME

Rs. Rs. Rs.

## PROFIT &amp; GAINS OF BUSINESS or PROFESSION

Net Profit/Loss as per Profit & Loss A/c NIL  
 --- NIL

## SUMMARY OF TOTAL INCOME

Profits & Gains of Business or Profession  
 Own Business or Profession NIL  
 ---  
 GROSS TOTAL INCOME NIL  
 ===

## CALCULATION OF TAX

Tax on Total Income NIL  
 Net Tax Payable NIL

## ALLOCATION BETWEEN PARTNERS

| Names of Partners     | Share % | Total Amount |
|-----------------------|---------|--------------|
| ANANTBHAI R PATEL     | 10.00   | NIL          |
| KALPESHBHAI M KOTADIA | 10.00   | NIL          |
| PRAKASHBHAI K PATEL   | 20.00   | NIL          |
| PARAGBHAI GANDHI      | 15.00   | NIL          |
| RUPESHBHAI P SHAH     | 20.00   | NIL          |
| YOGESHBHAI N PATEL    | 15.00   | NIL          |
| MILAPBHAI P SHAH      | 10.00   | NIL          |
| T O T A L ---->>>     | 100.00  | NIL          |

## LIST OF DOCUMENTS ATTACHED

(a) Computation of Income &amp; Tax

1

Rs.

Rs.

Rs.

12