



Government of the People's Republic of Bangladesh
National Board of Revenue
Income Tax Department

Income Tax Certificate
Assessment Year: 2025-2026

Taxpayer's Name : MOHAMMED ABUL HASAN
Taxpayer's Identification Number (TIN) : 167858907768
Father's Name : MOHAMMED ABDUL LATIF
Mother's Name : MUSAMMAT ASARUN BIBI
Current Address : MAJOR GRAM, SEBULBAG, Zakiganj,
Sylhet
Permanent Address : MAJOR GRAM, SEBULBAG, Zakiganj,
Sylhet
Status : Individual -> Bangladeshi -> Having
NID

This is to certify that MOHAMMED ABUL HASAN is a registered taxpayer of Taxes Circle-011 (Golapgonj), Taxes Zone-Sylhet. The taxpayer has filed the return of income for the Assessment Year 2025-2026. Shown Total Income 3,84,346 BDT, Net Wealth 41,81,501 BDT and Paid Tax 6,931 BDT.



This is a system generated certificate, and requires no signature.

Dr. Khaled Ahmed
MBBS, BCS (Health) Code 125025
Medical Officer
Upazila Health Complex, Zakiganj, Sylhet



Government of the People's Republic of Bangladesh
National Board of Revenue
(Income Tax Office)

Acknowledgement Receipt/Certificate of Return of Income

Assessment Year: 2025-2026

Name of the Taxpayer: MOHAMMED ABUL HASAN

NID / Passport No (if No NID): 2391932734

TIN: 1 6 7 8 5 8 9 0 7 7 6 8

Circle: Circle-011 (Golapgonj)

Taxes Zone: Sylhet

Total Income Shown: 3,84,346 Taka

Total Tax Paid: 6,931 Taka

| | |
|-------------------------------|------------|
| Serial No. of Return Register | 2066666732 |
| Volume No. of Return Register | |
| Date of Return Submission | 24/12/2025 |

Seal of Tax Office

Signature and Seal of the Official Receiving the
Return



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Please Visit: "<https://etaxnbr.gov.bd>" website to get Income Tax Certificate in Online

Dr. Khaled Ahmed
MBBS, BCS (Health) Code: 12502
Medical Officer
Unazia Health Complex, Zakarganj, Sylhet

| Office Use | |
|---------------------------|------------|
| Return Register | 2066666732 |
| No. of Return | |
| Date of Return Submission | 12/24/2025 |

FORM OF RETURN OF INCOME FOR
INDIVIDUAL PERSON



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টাকা

বাংলাদেশ
কার্ট ফি

Name of the Taxpayer: MOHAMMED ABUL HASAN

National ID No. / Passport No. (If No ID): 2391932734

TIN: 1 6 7 8 5 8 9 0 7 7 6 8

(a) Circle Circle-011 (Golapgonj) (b) Taxes Zone: Sylhet

Assessment Year: 2025-2026 6. Residential Status: Resident Non-resident

Taxpayer's Status: Individual Firm Hindu Undivided Family Others

Tick (✓) on the box for getting special benefit:

gazette war-wounded Female Third Gender Disable Person

aged 65 years or more A parent of a person with disability

Date of Birth (DD MM YYYY): 1 5 1 0 1 9 6 6

10. Wife/Husband's Name:

TIN (if spouse is a Taxpayer):

11. Address: MAJOR GRAM, SEBULBAG, Zakiganj, Sylhet

Telephone: 01819599397 Mobile: 01819599397 e-mail:

12. If employed, employer's name (latest employer's name in case of multiple employment): JAMIA ISLAMIA DARUSSUNNAH MUHAMMADIA, LAMARGRAM, ZAKIGANJ, SYLHET

13. (a) Name of Organization:

(b) Business Identification number (BIN):

14. Name and TIN of Partners / Members in case of firm / Association of Persons:

Date of Copy Ready... 24/12/2024
Date of Issued Copy... 24/12/2024

মোহাম্মদ আব্দুল শহীদ
উচ্চমান সহকারী
সার্কেল ১১ কর অফিস, সিলেট

MD. ARIFUR RAHMAN
Steno- Typist
Circle..... 11.....
Taxes Zone, Sylhet.

(মোঃ আব্দুল মোমিন চৌধুরী)
অতিরিক্ত সহকারী কম. ইঞ্জিনিয়ার
সার্কেল ১১ (সেকারিয়ার), সিলেট

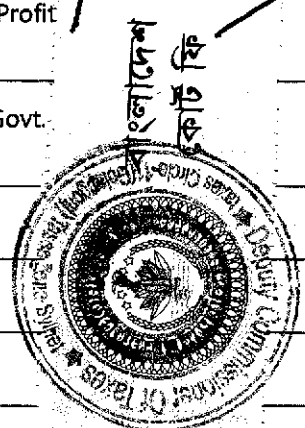
Dr. Khaled Ahmed
MBBS, BCS (Health) Code 125029
Medical Officer
Zakiganj Health Complex, Zakiganj, Sylhet.

Statement of Income and Tax during the Income Year ended on 30/6/2023

Name of the Taxpayer: MOHAMMED ABUL HASAN

TIN: 1 6 7 8 5 8 9

| Particulars of Income | | Amount |
|-----------------------|---|----------|
| 1. | Income from Employment (annex Schedule 1) | 3,26,600 |
| 2. | Income from Rent (annex Schedule 2) | 0 |
| 3. | Income from Agriculture (annex Schedule 3) | 11,480 |
| 4. | Income from Business (annex Schedule 4) | 0 |
| 5. | Income from Capital Gain | 0 |
| 6. | Income from Financial Assets (Bank Interest, Dividend, Securities Profit etc) | 46,199 |
| 7. | Income from Other Sources (Royalty, License Fees, Honorarium, Govt. Incentive etc.) | 0 |
| 8. | Share of Income from Firm or AoP | 0 |
| 9. | Income of Minor or Spouse (if not Taxpayer) | 0 |
| 10. | Taxable Income from Abroad | 0 |
| 11. | Total Income (Aggregate of Serial 1 to 10) | 3,84,346 |



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| Tax Computation | | Amount in Taka |
|-----------------|---|----------------|
| 12. | Gross Tax on Taxable Income | 6,931 |
| 13. | Tax Rebate (annex Schedule 5) | 0 |
| 14. | Net Tax after Rebate (12 - 13) | 6,931 |
| 15. | Minimum Tax | 6,931 |
| 16. | Tax Payable (Higher of 14 and 15) | 6,931 |
| 17. | (a) Net Wealth Surcharge (if applicable) | 0 |
| | (b) Tobacco Surcharge (if applicable) | 0 |
| | (c) Environmental Surcharge (if applicable) | 0 |
| 18. | Delay Interest, Penalty or any other amount Under Income Tax Act (if any) | 0 |
| 19. | Total Amount Payable (16 + 17 + 18) | 6,931 |

| | | | |
|-----|---|-----------------------|----------|
| | deducted or Collected at Source (attach proof) | Certified Copy | 6,931 |
| | Advance Tax paid (attach proof) | | 0 |
| | Adjustment of Tax Refund (mention assessment year(s) of refund) | | 0 |
| 23. | Tax Paid with this Return (attach proof) | | 0 |
| 24. | Total Tax Paid and Adjusted (20 + 21 + 22 + 23) | | 6,931 |
| 25. | Excess Payment (24 - 19) | | 0 |
| 26. | Tax Exempted / Tax Free Income (attach proof) | | 1,63,333 |

List of Documents Furnished with this Return
(Online submission requires no attachment)

Verification

I **MOHAMMED ABUL HASAN** father / husband: **MOHAMMED ABDUL LATIF**

TIN

| | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | 6 | 7 | 8 | 5 | 8 | 9 | 0 | 7 | 7 | 6 | 8 |
|---|---|---|---|---|---|---|---|---|---|---|---|

 solemnly declare that to the best of my knowledge and belief the information given in this return and statements and documents annexed herewith is correct and complete.

Place:
Date: 12/24/2025

MOHAMMED ABUL HASAN

.....
Signature

(Name in Block Letters)

System generated document, it requires no signature

(Signature)
MOHAMMED ABUL HASAN
Medical Officer
Medical Complex, Zakirganj, Sylhet

Schedule 1

Particulars of Income from Employment

a. This part is applicable for employees receiving salary under government pay scale.

Name of the Taxpayer: MOHAMMED ABUL HASAN

TIN:

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| 1 | 6 | 7 | 8 | 5 | 8 | 9 | 0 |
|---|---|---|---|---|---|---|---|

| Particulars | Total Amount (Taka) | Exempted Amount (Taka) | Taxable Amount (Taka) |
|---|------------------------|------------------------|--------------------------|
| 1. Basic pay | | | |
| 2. Arrear Pay (if not included in taxable income earlier) | | | |
| 3. Special allowance | | | |
| 4. House Rent allowance | | | |
| 5. Medical allowance | | | |
| 6. Conveyance allowance | | | |
| 7. Festival allowance | | | |
| 8. Support Staff allowance | | | |
| 9. Leave allowance | | | |
| 10. Honorarium / Reward | | | |
| 11. Overtime allowances | | | |
| 12. Bangla Noboborsho allowances | | | |
| 13. Interest accrued on Provident Fund | | | |
| 14. Lump Grant | | | |
| 15. Gratuity | | | |
| 16. Others, if any (provide detail) | | | |
| 17. Total | | | |

| Particulars | Income (Taka) | Income (Taka) |
|--|---------------|---------------|
| | 2,40,000 | |
| | 2,50,000 | |
| Advance / Arrear Salary | 0 | |
| 4. Gratuity, Annuity, Pension or similar benefit | 0 | |
| 5. Perquisites | | |
| 6. Receipt in lieu of or in addition to Salary or Wages | | |
| 7. Income from Employee's Share Scheme | 0 | |
| 8. Accommodation Facility | 0 | |
| 9. Transport Facility | 0 | |
| 10. Any other Facility provided by Employer | 0 | |
| 11. Employer's Contribution to Recognized Provident Fund | 0 | |
| 12. Others, if any (provide detail) | 0 | |
| 13. Total Salary Received (aggregate of 1 to 12) | | 4,90,000 |
| 14. Exempted Amount (as per Part 1 of 6th Schedule) | | 1,63,333 |
| 15. Total Income from Salary (13 - 14) | | 3,26,667 |

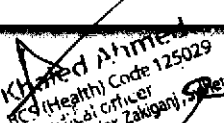
Schedule-3
(Particulars of Income from Agriculture)

Name of the Taxpayer: MOHAMMED ABUL HASAN

TIN: 1 6 7 8 5 8 9 0 7 7 6 8

Nature of Agriculture: Cultivation

| Serial | Summary of Income | Amount in Taka |
|--------|--|----------------|
| 1. | Sales / Turnover / Receipt | 28,700 |
| 2. | Gross Profit | 11,480 |
| 3. | General Expenses, Selling Expenses, Land Revenue, Rates, Loan Interest, Insurance Premium and Other Expenses | 0 |
| 4. | Net Profit (2 - 3) | 11,480 |


 Dr. Khairul Ahmed
 MBBS, BCS (Health) Code 125029
 Medical Officer
 Upazila Health Complex, Zakiganj, Sylhet

Schedule-5
(Particulars of Investment Tax Credit)

Name of the Taxpayer: MOHAMMED ABUL HASAN

TIN: 1 6 7 8 5 8 9 0

Particulars of Rebatable Investment:

| Serial No. | Summary of Income | Amount in Taka |
|------------|---|----------------|
| 1. | Life Insurance Premium or Contractual Deferred Annuity Paid in Bangladesh | |
| 2. | Contribution to Deposit Pension Scheme | |
| 3. | Investment in Government Securities, Unit Certificate, Mutual Fund, ETF or Joint Investment Scheme Unit Certificate | 0 |
| 4. | Investment in Securities listed with Approved Stock Exchange | |
| 5. | Contribution to Provident Fund to which Provident Fund Act, 1925 applies | |
| 6. | Self & Employer's Contribution to Recognized Provident Fund | |
| 7. | Contribution to Super Annuation Fund | |
| 8. | Contribution to Benevolent Fund / Group Insurance Premium | |
| 9. | Contribution to Zakat Fund | |
| 10. | Others, if any (provide detail) | 0 |
| 11. | Total Investment (aggregate of 1 to 10) | 0 |
| 12. | Amount of Tax Rebate | 0 |

Statement of Expenses Relating to Lifestyle
(For Individual Person)

the Taxpayer: MOHAMMED ABUL HASAN

TIN: 1 6 7 8 5 8 9 0 7 7 6 8

| Serial No. | Particulars of Expenditure | Amount of Taka | Comments |
|------------|--|----------------|--------------|
| 1. | Personal and family fooding, clothing and other essentials | 0 | JOINT FAMILY |
| 2. | Housing Expense | 0 | |
| 3. | Personal Transport Expense | 0 | |
| 4. | Utility Expense (Electricity, Gas, Water, Telephone, Mobile, Internet) | 0 | |
| 5. | Education Expense | 0 | |
| 6. | Personal Expense for Local and Foreign Travel, Vacation etc. | 0 | |
| 7. | Festival and Other Special Expense | 0 | |
| 8. | Tax Deducted / Collected at Source (with TS on Profit of Sanchayp. & Surcharge Paid based on Tax Return of Last Year | 0 | |
| 9. | Interest Paid on Personal Loan Received from Institution & Other Source | 0 | |
| Total: | | 2,80,000 | JOINT FAMILY |

Verification

I solemnly declare that to the best of my knowledge and belief the information given in this IT-10BB (2023) is correct and complete.

MOHAMMED ABUL HASAN
Name & signature of the Taxpayer
Date: 12/24/2025

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Date of Application for Copy..... 24/12/20
Date of Copy Ready..... 26/12/20
Date of Issued Copy..... 26/12/20

মোহাম্মদ আব্দুস শহীদ
উচ্চমান সহকারী
সার্কেল ১১ কক্সবাজার, সিলেট

MD. ARIFUR RAHMAN
Steno- Typist
Circle..... 11.....
Taxes Zone, Sylhet

(মোঃ আব্দুল মেমিন চৌধুরী)
অতিরিক্ত সহকারী কক্স কফিলদার
সার্কেল-১১ (সোলায়মানপুর), কক্সবাজার-সিলেট

Dr. Khaled Ahmed
MBBS, BCS (Health) Code 125029
Medical Officer
Mazla Health Complex, Zakuganj, Sylhet

Statement of Assets, Liabilities and Expenses (as on 30/6/2025)

To Whom It May Concern

- All Public Servants.
- If the amount of Total Asset at home and abroad exceeds Taka 50,00,000
- The amount of Total Asset does not exceed Tk. 50,00,000 but owns a Motor Car in any time or Invested in any House Property Apartment within the City Corporation area or Owns Assets outside Bangladesh or being a Shareholder Director of a Company.
- Every Non-Bangladeshi and Non-Resident Bangladesh Natural Person shall submit the statement only in respect of Assets Located in Bangladesh.

Name of the Taxpayer: MOHAMMED ABUL HASAN

TIN

| | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | 6 | 7 | 8 | 5 | 8 | 9 | 0 | 7 | 7 | 6 | 8 |
|---|---|---|---|---|---|---|---|---|---|---|---|

| 1. Sources of Fund: | Amount (Tk.) | Amount (Tk.) |
|---|--------------|--------------|
| (a) Total Income Shown in Return (Sl. No. 11 of Statement of Total Income) | 3,84,346 | |
| (b) Tax Exempted Income (Please see Instruction Page) | 1,63,333 | |
| (c) Receipt of Gift and Others | 39,13,822 | |
| Total Source of Fund: | | 44,61,501 |
| 2. Net Wealth as on Last Date of Previous Income Year | | 0 |
| 3. Sum of Source of Fund and Previous Year's Net Wealth (1 + 2) | | 44,61,501 |
| 4. | | |
| (a) Expense relating to Lifestyle (as per IT-10BB) | 2,80,000 | |
| (b) Gift / Expenses / Loss Not Mentioned in IT-10BB | 0 | |
| Total Expense and Loss: | | 2,80,000 |
| 5. Net Wealth at the Last Date of this Financial Year (3 - 4) | | 41,81,501 |
| 6. Personal Liabilities Outside Business | | |
| (a) Institutional Liabilities | | |
| (b) Non-Institutional Liabilities | | |
| (c) Other Liabilities | | |
| Total Liabilities Outside Business: | | 0 |
| 7. Gross Wealth (5 + 6) | | 41,81,501 |
| 8. Particulars of Assets (if needed attach separate sheet) | | |
| (a) Total Asset of Business | | |
| Less: Business Liabilities (Institutional & Non-Institutional) | | |
| (b) Director's Shareholdings in the Companies | | |
| (c) Business Capital of Partnership Firm | | |
| (d) Non-Agricultural Property / land / House Property (Acquisition / Cost Value with Legal Expense / Acquired Price / Building Cost / Investment) Location and Description of Non-Agricultural Property (use separate sheet if needed) | 21,45,000 | |

of Agricultural Property (use separate sheet if needed)

Certified Copy

| | | |
|--|------------------|------------------|
| (i) Sanchaypatra / Deposit Pension Scheme | 0 | |
| (ii) Loan Given (Mention Name & NID of Loan Receiver) | | |
| (iii) Savings Deposit / Term Deposit | 3,28,795 | |
| (iv) Provident Fund or Other Fund (if any) | | |
| (v) Other Investment | | |
| Total Financial Assets: | 3,28,795 | |
| (g) Motor Vehicle(s) (Cost Value including Registration Expense) | | |
| (Mention Type and Registration Number of Motor Vehicle) | | |
| (h) Ornaments (Mention Quantity) (Gold 5 Bhori) | 0 | |
| (i) Furniture and Electronic Items | 2,80,000 | |
| (j) Other Assets (Except Assets Mentioned in Sl. k) | | |
| (k) Cash in Hand and Fund Outside Business | | |
| (i) Bank Balance | 4,48,306 | |
| (ii) Cash in Hand | 7,00,000 | |
| (iii) Others | | |
| Total Cash in Hand and Fund Outside Business: | 11,48,306 | |
| Total Assests inside Bangladesh | | 41,81,501 |
| 9. Assets Outside Bangladesh | | |
| 10. Total Assets in Bangladesh and Outside Bangladesh (8 + 9) | | 41,81,501 |

Verification

I solemnly declare that to the best of my knowledge and belief the information given in this IT-10B (2023) is correct and complete.

MOHAMMED ABUL HASAN
Name & Signature of the Taxpayer

Date: 12/24/2025

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Dr. Khan M. Ahmed
MBBS, BCS (Health) Code 125029
Medical Officer
Upazila Health Complex, Zabangari, Sylhet

PARTICULARS OF SOURCES OF FUND
[Attachment for serial no 1 of IT-10B (2023)]

Certified Copy

Name: MOHAMMED ABUL HASAN

Assessment Year: 2025-2026

| | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | 6 | 7 | 8 | 5 | 8 | 9 | 0 | 7 | 7 | 6 | 8 |
|---|---|---|---|---|---|---|---|---|---|---|---|

Sources of Fund

| Sources | Particulars | Amount |
|----------------------------|---|-----------|
| Taxable Income | - | 3,84,346 |
| Tax Exempted Income | Salary | 1,63,333 |
| Receipt of Gift and Others | Accumulated amount of honorarium from past savings and mahfil of long service life. | 39,13,822 |


Dr. Khaled Ahmed
MBBS, BCS (Health) Code: 125029
Medical Officer
Mazra Health Complex, Zakigari, Sukher

PARTICULARS OF NON-AGRICULTURAL & AGRICULTURAL PROPERTIES

[Attachment for serial no 8(d) & 8(e) of IT-10B (2023)]

Taxpayer Name: MOHAMMED ABUL HASAN

Assessee

TIN

1 6 7 8 5 8 9 0 7 7 6 8

Non-agricultural Properties

| | Non-agricultural property at cost value or any advance made for such property (description, location and size) | Value at the start of income year | Increased/ decreased during the income year | Value at the last date of income year |
|---|---|-----------------------------------|---|---------------------------------------|
| 1 | Deed No- 1668, ZAKIGANJ POURUSHOVA, SYLHET, HOUSE LAND, Price including reg. cost (Past Savings) (14.5 Decimal) | 21,45,000 | 0 | 21,45,000 |

Agricultural Properties

| | Agricultural property at cost value (description, location and size) | Value at the start of income year | Increased/ decreased during the income year | Value at the last date of income year |
|---|---|-----------------------------------|---|---------------------------------------|
| 1 | Deed No- 1072, ZAKIGANJ POURUSHOVA, SYLHET, SHAIL LAND, Price including reg. cost (Past Savings) (9.23 Decimal) | 2,22,200 | 0 | 2,22,200 |
| 2 | Deed No- 1996, NIDONPUR, ZAKIGANJ, SYLHET, AMON LAND, Price including reg. cost (Past Savings) (32 Decimal) | 57,200 | 0 | 57,200 |

PARTICULARS OF FINANCIAL ASSETS AND BANK/FI ACCOUNT/CARDS
[Attachment for serial no 8(f) of IT-10B (2023)]

Certified Copy

MOHAMMED ABUL HASAN

Assessment Year: 2025-2026

1 6 7 8 5 8 9 0 7 7 6 8

Fixed/Term Deposits

| Particulars | Name of Bank/FI | Account No. | Year end balance |
|---------------------|--------------------------------|-----------------|------------------|
| 1 FDR/ Term Deposit | First Security Islami Bank PLC | 017524300002396 | 3,28,795 |

Bank account/Card/Electronic Cash

| Type | Name of Bank/FI | Account No. | Year end balance |
|----------------|--------------------------------|-------------------|------------------|
| 1 Bank Account | First Security Islami Bank PLC | 017512200000144 | 1,225 |
| 2 Bank Account | Islami Bank Bangladesh PLC | 20508450200000308 | 3,75,309 |
| 3 Bank Account | Janata Bank PLC | 0100039039219 | 71,772 |

Date of Application for Copy 26/2/20
Date of Copy Ready 26/2/20
Date of Issued Copy 26/2/20

মোহাম্মদ আব্দুল শহীদ
উপস্থাপন সহকারী
সার্কেল-১১ কক্সবাজার, সিলেট

MD. ARIFUR RAHMAN
Steno- Typist
Circle..... 11.....
Taxes Zone, Sylhet

(মোঃ আব্দুল মোমিন জেহুরী)
অতিরিক্ত সহকারী কক্সবাজার
সার্কেল-১১ (কক্সবাজার), কক্সবাজার-সিলেট

Dr. Khaled Ahmed
MBBS, BCS (Health) Code: 125025
Medical Officer
Upazila Health Complex, Zakiganj, Sylhet

Source Tax, AIT and Regular Tax Claim
[Attachment for serial no 20, 21, 22, 23 of IT-11GA(2023)]

Taxpayer Name: MOHAMMED ABUL HASAN

Assessment Year:

TIN

| | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | 6 | 7 | 8 | 5 | 8 | 9 | 0 | 7 | 7 | 6 | 8 |
|---|---|---|---|---|---|---|---|---|---|---|---|

Total Claimed Amount:

Bank TDS

| Name | Branch | Account No | Interest Amount | TDS |
|--------------------------------|------------|-------------------|-----------------|-------|
| First Security Islami Bank PLC | BEANIBAZAR | 017512200000144 | 49 | 7 |
| First Security Islami Bank PLC | BEANIBAZAR | 017524300002396 | 25,228 | 3,784 |
| Islami Bank Bangladesh PLC | ZAKIGANJ | 20508450200000308 | 20,937 | 3,140 |

[Attachment for section 163 (8)]

Taxpayer Name: MOHAMMED ABUL HASAN

Assessment Year: 2025-2026

TIN

| | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | 6 | 7 | 8 | 5 | 8 | 9 | 0 | 7 | 7 | 6 | 8 |
|---|---|---|---|---|---|---|---|---|---|---|---|

| | |
|--|-------|
| Amount of tax carried forward U/S 163(8) | 3,931 |
|--|-------|