



**Government of the People's Republic of Bangladesh**

**National Board of Revenue**

**Taxpayer's Identification Number (TIN) Certificate**

**TIN : 427088774085**

This is to Certify that **SHAH MD. AL-AMIN** is a Registered Taxpayer of National Board of Revenue under the jurisdiction of **Taxes Circle-017 (Madhobpur) Taxes Zone Sylhet**.

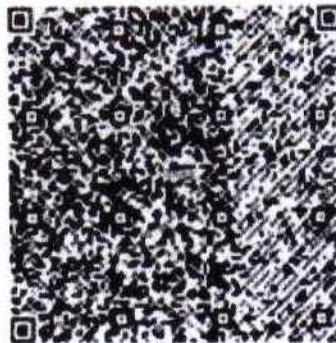
**Taxpayer's Particulars :**

- 1) Name: **SHAH MD. AL-AMIN**
- 2) Father's Name: **RUSTAM ALI**
- 3) Mother's Name: **REJIA BEGUM**
- 4 a) Current Address: **AULIABAD, AULIABAD, Madhabpur, Habiganj, PO - 3331**
- 4 b) Permanent Address: **AULIABAD, AULIABAD, Madhabpur, Habiganj, PO 3331, Bangladesh**
- 5) Previous TIN: **Not Applicable**
- 6) Status: **Individual**

Date: May 01, 2024

**Please Note:**

1. It is prepared in pursuance of the provisions of section 100 of the Income Tax Act, 2023.
2. It shall be the property of the taxpayer and shall be valid only if it is signed by the taxpayer under section 100 of the Income Tax Act, 2023.
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Deputy Commissioner of Taxes  
Taxes Circle-017 (Madhobpur)  
Taxes Zone Sylhet  
Address: Madhabpur, Habiganj, Madhobpur, Habiganj, PO 3331, Bangladesh

For Office Use	
Serial No. of Return Register	10911370230
Volume No. of Return Register	
Date of Return Submission	12/26/2025

FORM OF RETURN OF INCOME FOR  
INDIVIDUAL PERSON

1. Name of the Taxpayer: SHAH MD. AL-AMIN

2. National ID No. / Passport No. (if No NID): 6867215326

3. TIN: 4 2 7 0 8 8 7 7 4 0 8 5

4. (a) Circle: Circle-017 (Madhobpur) (b) Taxes Zone: Sylhet

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

7. Taxpayer's Status: Individual Firm Hindu Undivided Family Others

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

A gazette war-wounded freedom fighter  Female  Third Gender  Disable Person

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

9. Date of Birth (DD MM YYYY): 1 5 0 9 1 9 9 4

10. Wife/Husband's Name: AKLIMA  
TIN (if spouse is a Taxpayer):

11. Address: AULIABAD, AULIABAD, Madhabpur, Habiganj  
Telephone: 01330948874 Mobile: 01330948874 e-mail:

12. If employed, employer's name (latest employer's name in case of multiple employment):

13. (a) Name of Organization:  
(b) Business Identification number (BIN):

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

**Statement of Income and Tax during the Income Year ended on 30/6/2025**

Name of the Taxpayer: SHAH MD. AL-AMIN

TIN: 4 2 7 0 8 8 7 7 4 0 8 5

<b>Particulars of Income</b>		<b>Amount in Taka</b>
1.	Income from Employment (annex Schedule 1)	0
2.	Income from Rent (annex Schedule 2)	0
3.	Income from Agriculture (annex Schedule 3)	0
4.	Income from Business (annex Schedule 4)	2,00,000
5.	Income from Capital Gain	0
6.	Income from Financial Assets (Bank Interest, Dividend, Securities Profit etc)	0
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.	<b>Total Income (Aggregate of Serial 1 to 10)</b>	<b>2,00,000</b>

<b>Tax Computation</b>		<b>Amount in Taka</b>
12.	Gross Tax on Taxable Income	0
13.	Tax Rebate (annex Schedule 5)	0
14.	Net Tax after Rebate (12 - 13)	0
15.	Minimum Tax	0
16.	Tax Payable (Higher of 14 and 15)	0
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.	<b>Total Amount Payable (16 + 17 + 18)</b>	<b>0</b>

Particulars of Tax Payment		Amount in Taka
20.	Tax Deducted or Collected at Source (attach proof)	0
21.	Advance Tax paid (attach proof)	0
22.	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)	0
25.	Excess Payment (24 - 19)	0
26.	Tax Exempted / Tax Free Income (attach proof)	0

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

**Verification**

I **SHAH MD. AL-AMIN** father / husband: **RUSTAM ALI** TIN 

4	2	7	0	8	8	7	7	4	0	8	5
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 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: 12/26/2025

SHAH MD. AL-AMIN

.....  
Signature  
(Name in Block Letters)

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**Schedule-4**  
**(Particulars of Income from Business)**

Name of the Taxpayer: SHAH MD. AL-AMIN

TIN: 4 2 7 0 8 8 7 7 4 0 8 5

Name of Business: Frelance Vendor

Nature of Business: Regular Business Income

Address of Business: Anywhere in Bangladesh

Serial No	Summary of Income	Amount in Taka
1.	Sales / Turnover / Receipt	3,00,000
2.	Gross Profit	2,40,000
3.	General, Administrative, Selling and Other Expenses	40,000
4.	Bad Debt Expense	
5.	Net Profit ( 2 - 3)	2,00,000

Serial No	Summary of Balance Sheet	Amount in Taka
6.	Cash and Bank Balance	50,000
7.	Inventory	5,000
8.	Fixed Assets	0
9.	Other Assets	24
10.	Total Assets ( 6 + 7 + 8 + 9)	55,024
11.	Opening Capital	40,000
12.	Net Profit	2,00,000
13.	Drawing during the Income Year	2,40,000
14.	Closing Capital (11 + 12 - 13)	0
15.	Liabilities	0
16.	Total Capital & Liabilities (14 + 15)	0

**Schedule-5**  
**(Particulars of Investment Tax Credit)**

Name of the Taxpayer: SHAH MD. AL-AMIN

TIN: 4 2 7 0 8 8 7 7 4 0 8 5

**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)

Name of the Taxpayer: SHAH MD. AL-AMIN

TIN 4 2 7 0 8 8 7 7 4 0 8 5

Serial No.	Particulars of Expenditure	Amount of Taka	Comments
1.	Personal and family fooding, clothing and other essentials	1,00,000	
2.	Housing Expense	0	
3.	Personal Transport Expense	0	
4.	Utility Expense (Electricity, Gas, Water, Telephone, Mobile, Internet etc. Bills)	0	
5.	Education Expense	20,000	
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 Sanchaypatra) and Tax & Surcharge Paid based on Tax Return of Last Year	0	
9.	Interest Paid on Personal Loan Received from Institution & Other Source	0	
	<b>Total:</b>	1,20,000	

**Verification**

I solemnly declare that to the best of my knowledge and belief the information given in this IT-103B (2023) is correct and complete.

SHAH MD. AL-AMIN

Name &amp; signature of the Taxpayer

Date: 12/26/2025

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## 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 or 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: SHAH MD. AL-AMIN

TIN 4 2 7 0 8 8 7 7 4 0 8 5

	Amount (Tk.)	Amount (Tk.)
1. Sources of Fund:		
(a) Total Income Shown in Return (Sl. No. 11 of Statement of Total Income)	2,00,000	
(b) Tax Exempted Income (Please see Instruction Page)		
(c) Receipt of Gift and Others		
Total Source of Fund:		2,00,000
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)		2,00,000
4.		
(a) Expense relating to Lifestyle (as per IT-10BB)	1,20,000	
(b) Gift / Expenses / Loss Not Mentioned in IT-10BB	0	
Total Expense and Loss:		1,20,000
5. Net Wealth at the Last Date of this Financial Year (3 - 4)		80,000
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)		80,000
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)	0	
(e) Agricultural Property (Acquisition / Cost Value with Legal Expense) Location and Description of Agricultural Property (use separate sheet if needed)		
(f) Financial Assets:		
(i) Share / Debenture / Bond / Securities / Unit Certificate etc.		
(ii) Sanchaypatra / Deposit Pension Scheme	0	
(iii) Loan Given (Mention Name & NID of Loan Receiver)		
(iv) Savings Deposit / Term Deposit		
(v) Provident Fund or Other Fund (if any)		
(vi) Other Investment		
Total Financial Assets:	0	
(g) Motor Vehicle(s) (Cost Value including Registration Expense) (Mention Type and Registration Number of Motor Vehicle)		
(h) Ornaments (Mention Quantity)		
(i) Furniture and Electronic Items		
(j) Other Assets (Except Assets Mentioned in Sl. k)		
(k) Cash in Hand and Fund Outside Business		
(l) Bank Balance		

(ii) Cash in Hand		
(iii) Others		
Total Cash in Hand and Fund Outside Business:	0	
Total Assets inside Bangladesh		0
9. Assets Outside Bangladesh		
10. Total Assets in Bangladesh and Outside Bangladesh (8 + 9)		0

**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.

SHAH MD. AL-AMIN  
Name & Signature of the Taxpayer  
Date: 12/26/2025

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Instructions to fill up the Return Form

**Instructions:**

- (1) This Return of Income shall be Signed and Verified by the Taxpayer or his Authorized Representative as prescribed in the Income Tax Act, 2023
- (2) Enclose where applicable:
  - (a) Salary statement for salary; Bank statement for interest; Certificate for interest on savings instruments; Rent agreement, receipts of municipal tax & land revenue, statement of house property loan interest, insurance premium for house property income; Statement of Professional income as per IT Rule-8; Copy of assessment/income statement & balance sheet for partnership income; Documents of capital gain; Dividend warrant for dividend income; Statement of other income; Documents in support of investments in savings certificates, LIP, DPS, Zakat, stock/share etc.
  - (b) Depreciation Chart claiming depreciation as per the Income Tax Act, 2023;
  - (c) Computation of Income according to the Income Tax Act, 2023.
- (3) Enclose Separate Statement for:
  - (a) any income of the spouse of the Taxpayer (if she/he is not an Taxpayer), minor children and dependent;
  - (b) Tax exempted / Tax free Income.
  - (c) Income Exempted from Tax declared under Part 1 of the Sixth Schedule of the Income Tax Act, 2023.
- (4) Documents furnished to support the declaration should be signed by the Taxpayer or his/her authorized representative.
- (5) Furnish the following information:
  - (a) Name, address & TIN of the partners if the Taxpayer is a firm;
  - (b) Name of firm, address & TIN if the Taxpayer is a partner;
  - (c) Name of the company, address & TIN if the Taxpayer is a director.
- (6) Assets and liabilities of self, spouse (if she/he is not a Taxpayer), minor children and dependant(s) to be shown in the IT-10B (2023).
- (7) Signature is mandatory for all Taxpayer or his / her authorized representative.
- (8) For Individual Person, signature is also mandatory in IT-10B (2023) & IT-10BB (2023).
- (9) If needed, please use separate sheet.

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

**Taxpayer Name:** SHAH MD. AL-AMIN

**Assessment Year:** 2025-2026

**TIN** 4 2 7 0 8 8 7 7 4 0 8 5

**Sources of Fund**

Sources	Particulars	Amount
Taxable Income	-	2,00,000
Tax Exempted Income	-	0
Receipt of Gift and Others	-	0

 Print



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: SHAH MD. AL-AMIN

NID / Passport No (if No NID): 6867215326

TIN: 4 2 7 0 8 8 7 7 4 0 8 5

Circle: Circle-017 (Madhobpur)

Taxes Zone: Sylhet

Total Income Shown: 2,00,000 Taka

Total Tax Paid: 0 Taka

Serial No. of Return Register	10911370230
Volume No. of Return Register	
Date of Return Submission	26/12/2025

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