RN:100017882MS

Self-managed superannuation fund annual return

2020

WHO SHOULD COMPLETE THIS ANNUAL RETURN?

Only self-managed superannuation funds (SMSFs) can complete this annual return. All other funds must complete the *Fund income tax return 2020* (NAT 71287).

The Self-managed superannuation fund annual return instructions 2020 (NAT 71606) (the instructions) can assist you to complete this annual return.

The SMSF annual return cannot be used to notify us of a change in fund membership. You must update fund details via ABR.gov.au or complete the Change of details for superannuation entities form (NAT 3036).

S	ection A: Fund information		0-	
1	Tax file number (TFN)		To assist processi	
	The ATO is authorised by law to request your TFN. Yo could increase the chance of delay or error in processing y	ou are not obliged to quot your annual return. See th	te your TFN but not quot ne Privacy note in the De	ing it claration.
2	Name of self-managed superannuation fund (SI	 ИSF)		
R	C Lloyd Superannuation Fund			
		-		
3	Australian business number (ABN) (if applicable)	41 299 088	308	
4	Current postal address			
C/	- The Rogers Group			
Sub	O Box A308 ourb/town /DNEY SOUTH		State/territory	Postcode 1235
_	TOTAL		14044	1200
5	Annual return status Is this an amendment to the SMSF's 2020 return?	A No X Yes		
	Is this the first required return for a newly registered SMSF	? B No X Yes		



	ver/entity name: R C Lloyd S						
	MSF auditor						
itle:	r's name Mr X Mrs Miss N	As Other					
amily r		VIS OTHER		=======================================			
Boys							
	en name		Other given names			Ü	
٩nth	ony William						
MSF	Auditor Number	Auditor's phon	e number				
100 (014 140	0410 7127	08				
	address	6-					
20 E	3376						
uburb/	town				Stat	e/territory	Postcode
Runc	lle Mall				S	Ą	5000
ate a	udit was completed A	Day Month	Year 2020				
as Pa	rt A of the audit report quali	fied? B No	X Yes				
	rt D of the overlit was and asset						
as Pa	rt B of the audit report qual	ified? C No	X Yes				
			X Yes				
the ai	udit report was qualified, ha		X Yes X				
the a		ve the					
the au	udit report was qualified, ha d issues been rectified?	ve the D No					
the au porte	udit report was qualified, ha	ve the D No	X Yes	ny super paym	nents and ta	x refunds o	wing to you.
the au porte	udit report was qualified, ha d issues been rectified? ectronic funds transfe	ve the D No r (EFT) uper fund's financia	X Yes I	ny super paym	ents and ta	x refunds o	wing to you.
the au porte	udit report was qualified, had issues been rectified? ectronic funds transfe a need your self-managed s Fund's financial insti	ve the D No r (EFT) uper fund's financia	X Yes IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII				wing to you.
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the au porte	ectronic funds transferenced your self-managed self-manag	ve the D No r (EFT) uper fund's financia	X Yes IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	vide a tax agei			wing to you.
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Taxpayer/entity name: R C Lloyd Superannuation Fund

	Fund's tax file number (TFN)
8	Status of SMSF Australian superannuation fund A No Yes X Fund benefit structure B A Code
	Does the fund trust deed allow acceptance of the Government's Super Co-contribution and Low Income Super Amounts?
9	Was the fund wound up during the income year?
	No X Yes Have all tax lodgment and payment which the fund was wound up obligations been met?
10	Exempt current pension income
	Did the fund pay retirement phase superannuation income stream benefits to one or more members in the income year?
	To claim a tax exemption for current pension income, you must pay at least the minimum benefit payment under the law. Record exempt current pension income at Label A.
	No Go to Section B: Income.
	Yes X Exempt current pension income amount A \$ 87746
	Which method did you use to calculate your exempt current pension income?
	Segregated assets method B X
	Unsegregated assets method C Was an actuarial certificate obtained? D Yes
	Did the fund have any other income that was assessable?
	E Yes O Go to Section B: Income.
	No Choosing 'No' means that you do not have any assessable income, including no-TFN quoted contributions. Go to Section C: Deductions and non-deductible expenses. (Do not complete Section B: Income.)
	If you are entitled to claim any tax offsets, you can list these at Section D: Income tax calculation statement



Taxpayer/entity name: R C Lloyd Superannuation Fund

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Section B: Income

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				e, and you have not realised a deferred n D: Income tax calculation statement.
11 Income Did you h (CGT)	ave a capital gains tax event during the year?	G No X Yes	or you elected to use	s or total capital gain is greater than\$10,000 the transitional CGT relief in 2017 and the n has been realised, complete and attach a iT) schedule 2020.
	Have you applied an exemption or rollover?	M No X Yes	Code	
		Net capital gain	A \$	-90
Gr	oss rent and other leasi	ng and hiring income	В\$	-90
		Gross interest	C \$	-90
	Forestry	managed investment scheme income		-90
Gross fore	ign income			Loss
D1 \$	-90	Net foreign income	D \$	-90
Australian fra	anking credits from a Ne	ew Zealand company	E \$	-60 Number
		Transfers from foreign funds	F \$	-90
	Gr	oss payments where ABN not quoted	н \$	-00
Calculation of asses Assessable emplo	sable contributions oyer contributions	Gross distribution from partnerships	I \$	-DQ
R1 \$	-00	*Unfranked dividend amount	J\$	-00
plus Assessable perso	onal contributions	*Franked dividend amount	K \$	-00
	ed contributions	*Dividend franking credit	L\$	-90
(an amount must be	included even if it is zero)	*Gross trust distributions	м \$	Code -90
less Transfer of liability company		Assessable		
R6 \$	-90	contributions (R1 plus R2 plus R3 less R6)	R \$	0 .00
Calculation of non-ar*Net non-arm's length priv	vate company dividends	*Other income	s \$	Code
plus *Net non-arm's leng	th trust distributions	*Assessable income due to changed tax status of fund	т \$	-90
plus *Net other non-arr		Net non-arm's length income subject to 45% tax rate) (U1 plus U2 plus U3)	U \$	-90
#This is a mandatory label.	(;	GROSS INCOME Sum of labels A to U)	w \$	0 -00 Loss
*If an amount is entered at this label,	Exempt cur	rent pension income	Y \$	-00
check the instructions to ensure the correct tax treatment has	TOTAL ASSESSABL	E INCOME (W less Y)		0 -90 Loss

Do not complete this section if all superannuation interests in the SMSF were supporting superannuation income streams in

Taxpayer/entity name: R C Lloyd Superannuation Fund

Section C: Deductions and non-deductible expenses

12 Deductions and non-deductible expenses

Under 'Deductions' list all expenses and allowances you are entitled to claim a deduction for. Under 'Non-deductible expenses', list all other expenses or normally allowable deductions that you cannot claim as a deduction (for example, all expenses related to exempt current pension income should be recorded in the 'Non-deductible expenses' column).

		DEDUCTIONS			NON-DEDUCTIBLE EXPEN	SES
Interest expenses within Australia	A1 9	S	-00	A2 \$		-00
Interest expenses overseas	B1 \$	S	-00	B2 \$		-00
Capital works expenditure	D1 \$	6	-00	D2 \$		-00
Decline in value of depreciating assets		8	-00	E2 \$		-90
Insurance premiums – members		8	-00	F2\$		-00
SMSF auditor fee	H1 \$		OQ.	H2 \$	275	-90
Investment expenses	I1 \$		-00	12\$		-90
Management and dministration expenses	J1 \$		-00	J2 \$	4517	-00
Forestry managed investment scheme expense	U1 \$		-00	U2 \$		-00
Other amounts	L1 \$		-00	L2 \$		-00
Tax losses deducted	M1 \$		-00			
	TOT	AL DEDUCTIONS				
	N S	AL DEDUCTIONS	-00	Y \$	AL NON-DEDUCTIBLE EXPENSE	
	IΨΦ	(Total A1 to M1)	יטעי	1 5	(Total A2 to L2)	-00
	#TAX	ABLE INCOME OR LOSS		Loss TOTA	L SMSF EXPENSES	\equiv
	 o \$	0	-00	z\$	4792	-00
This is a mandatory	(TOTAL ASSESSABLE INCOME less TOTAL DEDUCTIONS)	111		(N plus Y)	

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Section D: Income tax calculation statement

#Important:

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Section B label R3, Section C label O and Section D labels A,T1, J, T5 and I are mandatory. If you leave these labels blank, you will have specified a zero amount.

13 Calculation statement			
	#Taxable incom	e A \$	0 -90
Please refer to the Self-managed superannuation		134	(an amount must be included even if it is zero)
fund annual return instructions	#Tax on taxable income		0.00
2020 on how to complete the	#Tax o	100	(an amount must be included even if it is zero)
calculation statement.	no-TFN-quote		0.00
	contribution	s ·	(an amount must be included even if it is zero)
	Gross ta	× В\$	0.00
	GIOSS IA	, ва	(T1 plus J)
Familian Inc. 1 66 1			(11 pius 9)
Foreign income tax offset	0.00		
· -	0.00	Nonva	fundable was a sure formand by a ffeet
Rebates and tax offsets C2\$		1	fundable non-carry forward tax offsets
023		C \$	0.00
			(C1 plus C2)
		SUBTO	
		T2 \$	0.00
Early stage venture capita partnership tax offset	l limited		(B less C – cannot be less than zero)
D1\$			
Early stage venture capital	limited partnership		
tax offset carried forward f			
D2\$		100	fundable carry forward tax offsets
Early stage investor tax off	set	D \$	
D3\$	_		(D1 plus D2 plus D3 plus D4)
Early stage investor tax off	set		
carried forward from previo		SUBTO	OTAL 2
D4\$		T3 \$	
			(T2 less D - cannot be less than zero)
Complying fund's franking	cradite tay affect		
E1\$	credits tax onset		
No-TFN tax offset			
E2\$			
National rental affordability s	cheme tax offset		
E3\$		D. C I	
Exploration credit tax offset		-	able tax offsets
ΕΤΦ		E \$	(F4 plus F0 plus F0 plus F4)
			(E1 plus E2 plus E3 plus E4)
	#TAV DAVAD! E	TE O	
	#TAX PAYABLE	122	(T3 less E – cannot be less than zero)
		Section	102AAM interest charge



G\$

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							-			
	or interest on early pa t of interest									
H1\$										
Credit f withhol	or tax withheld – forei	gn resident I gains)								
12\$									1	
	or tax withheld – whe not quoted (non-indiv									
13\$										
	or TFN amounts withh									
15\$										
	or interest on no-TFN	tax offset								
H6\$										
Credit f	or foreign resident cap ding amounts	oital gains	Eligible	e credits					1	
H8\$			H \$	o orouno					$\neg \bot$	
			1.0	(H1 plus H2 plus I	H3 plu	s H5 plus	s H6 plus F	18)		
		*Tax offset refunds	10					~ ~	I	
		#Tax offset refunds of refundable tax offsets		lunu	ne hae	ount from	a lahel E	0.0	00	
				(unu: an amount i	sed an must b	ount fron e include	n label E – d even if it is		00	
			15	(unu: an amount i instalments rais	must b	nount fron e include	n label E – d even if it is		00	
			15	an amount i	must b	nount fron e include	n label E – d even if it is		00	
			PAYG	an amount i	must b	nount fron e include	n label E – d even if it is		00	
			PAYG	an amount i	must b	oount from	n label E – d even if it is			
			PAYG i K \$ [Superv	an amount i	sed	e include	d even if it is	s zero) 259.0		
			PAYG i K \$ [Superv	an amount instalments rais	sed	e include	d even if it is	s zero) 259.0		
			PAYG i K \$ [Superv L \$ [Superv M \$ [an amount instalments rais	sed sed	e included	ound up	259.0		
			PAYG i K \$ [Superv L \$ [Superv M \$ [an amount instalments rais	sed sed	e included	ound up	259.0		
	(Remainder o	of refundable tax offsets	PAYG i K \$ [Superv L \$ [Superv M \$ [an amount instalments rais	sed sed	e included	ound up	259.0		
	(Remainder o	of refundable tax offsets	PAYG i K \$ [Superv L \$ [Superv M \$ [an amount instalments rais	sed sed	e included	ound up	259.0		
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ection E	AMOUNT DUE A positive amoun while a negative amoun atory label.	OR REFUNDABLE t at \$ is what you owe, int is refundable to you.	PAYGINK \$ [Superv L \$ [Superv M \$ [Superv N \$ [Superv	an amount of instalments raise visory levy adjustisory le	stme	nt for w	ound up	259.0 funds	0	-00
ection E Losses If total loss	AMOUNT DUE (A positive amoun while a negative amoun atory label.	OR REFUNDABLE t at \$ is what you owe, int is refundable to you.	PAYG i K \$ [Superv M \$ [Superv N \$ [Superv N \$ [an amount instalments rais	stme	nt for w	ound up	259.0 funds 259.0 1 plus N)]-96

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Taxpayer/entity name: R C Lloyd Superannuation Fund

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Time will be will be a be a beginning or some complying funds and previously non-complying funds and previously non-compl	MEMBER 1				T		
Loop		Other					
ROBIN CRAGO	"						
Member's TFN See the Privacy note in the Declaration. Contributions PENING ACCOUNT BALANCE \$ 792964.00 PENING ACCOUNT BALANCE \$ 792964.00 Proceeds from primary residence disposal isobels. Employer contributions A \$ H \$ Receipt date Day Month You H1 ABN of principal employer Assessable foreign superannuation fund amount I \$ S Personal contributions J \$ Personal contributions J \$ Personal contributions J \$ Personal injury election Transfer from reserve: assessable amount L \$ S Personal injury election Transfer from reserve: non-assessable amount L \$ S Spouse and child contributions Transfer from reserve: non-assessable amount L \$ S Spouse and child contributions Transfer from reserve: non-assessable amount L \$ S Spouse and child contributions Transfer from reserve: non-assessable amount L \$ S Spouse and child contributions Transfer from reserve: non-assessable amount L \$ S Spouse and child contributions Transfer from reserve: non-assessable amount L \$ S Spouse and child contributions Total contributions from non-complying funds T \$ S Spouse and child contributions Total contributions Transfer from reserve: non-assessable amount L \$ S Spouse and child contributions Total contributions Transfer from reserve: non-assessable amount L \$ S Spouse and child contributions Total contributions Transfer from reserve: non-assessable amount L \$ S Spouse and child contributions Total contributions Transfer from reserve: non-assessable amount L \$ S Spouse and child contributions Total contributions Transfer from reserve: non-assessable amount L \$ S Spouse and child contributions Transfer from reserve: non-assessable amount L \$ S Spouse and child contributions Transfer from reserve: non-assessable amount L \$ S Spouse and child contributions Transfer from reserve: non-assessable amount L \$ S Spouse and child contributions Spouse Spouse Spouse Spouse			Other given name	3		i	
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Personal contributions A \$	See the Privacy note in the Declaration	n.			Date of birth	Day Month	Year
Proceeds from primary residence disposal labels. Employer contributions Employer contributions A \$	Contributions	ENING ACCO	UNT BALANCE \$			792964 00	
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A \$	Employer contributions			to Day	y Month	Year	
ASSESSABLE foreign superannuation fund amount A1 \$				le			
Personal contributions B \$	ABN of principal employer			foreign	superannuation fun	d amount	
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Other third party contributions G \$			1 4				
TOTAL CONTRIBUTIONS (Sum of labels A to M) Other transactions Allocated earnings or losses or losses or losses Accumulation phase account balance rollovers and transfers Retirement phase account balance - Non CDBIS S2 \$ 855918.00 Retirement phase account balance Lump Sum R1 \$ Code S3 \$ 0.00 TRIS Count CLOSING ACCOUNT BALANCE S5918.00 C1 plus S2 plus S3) Accumulation phase value X1 \$ Retirement phase value X2 \$	F \$		Any other o	ontribu	tions	1	
TOTAL CONTRIBUTIONS N\$ (Sum of labels A to M) Allocated earnings or losses O\$ Accumulation phase account balance - Non CDBIS Retirement phase account balance - CDBIS S3 \$ O.00 Retirement phase account balance - CDBIS Retirement phase account balance - CDBIS S2 \$ Retirement phase account balance - CDBIS S3 \$ O.00 Code Stream P2 \$ Code Stream P2 \$ Code M Accumulation phase value X1 \$ Retirement phase value X2 \$			Low Incom	e Super	uper Amounts)		
Other transactions Allocated earnings or losses O \$ 82954.00 Accumulation phase account balance Inward rollovers and transfers Outward rollovers and transfers Outward rollovers and transfers S2 \$ 855918.00 Retirement phase account balance - Non CDBIS Retirement phase account balance - CDBIS S3 \$ 0.00 TRIS Count CLOSING ACCOUNT BALANCE S\$ 855918.00 (S1 plus \$2 plus \$3) Accumulation phase value X1 \$ Retirement phase value X2 \$	G \$		M \$				
Other transactions Allocated earnings or losses or loss		1		1\$			
Accumulation phase account balance S1 \$ 0.00 Retirement phase account balance - Non CDBIS S2 \$ 855918.00 Retirement phase account balance - CDBIS Retirement phase account balance - CDBIS S3 \$ 0.00 Retirement phase account balance - CDBIS S1 \$ 0.00 Retirement phase account balance - CDBIS S2 \$ 855918.00 Retirement phase account balance - CDBIS S3 \$ 0.00 Retirement phase account balance - Code - Code - Code - Code - Stream - R2 \$ 20000.00 M Retirement phase value X1 \$ Retirement phase value X2 \$	Other transactions		poetod carpingo				Loss
Retirement phase account balance - Non CDBIS S2 \$ 855918.00 Retirement phase account balance - CDBIS Retirement phase account balance - CDBIS S3 \$ 0.00 Retirement phase account balance - CDBIS S1 \$ 0.00 Retirement phase account balance - CDBIS S2 \$ 855918.00 Retirement phase account balance - CDBIS S3 \$ 0.00 CLOSING ACCOUNT BALANCE S \$ 855918.00 Retirement phase value X1 \$ Retirement phase value X2 \$		Alic	or losses	\$		82954.00	
Retirement phase account balance - Non CDBIS S2 \$ 855918.00 Retirement phase account balance - CDBIS S3 \$ 0.00 TRIS Count CLOSING ACCOUNT BALANCE \$ 855918.00 S1 plus S2 plus S3) Accumulation phase value X1 \$ Retirement phase value X2 \$		balance		\$			
S2 \$ 855918.00 Retirement phase account balance - CDBIS S3 \$ 0.00 TRIS Count CLOSING ACCOUNT BALANCE \$ \$ 855918.00 S1 plus S2 plus S3) Accumulation phase value X1 \$ Retirement phase account balance transfers Lump Sum payment R1 \$ Income stream R2 \$ 20000.00 M Accumulation phase value X1 \$ Retirement phase value X2 \$	S1 \$	0.00	transfers	Ψ			
Retirement phase account balance - CDBIS S3 \$ 0.00 Lump Sum payment R1 \$ Code Income stream R2 \$ 20000.00 M O TRIS Count CLOSING ACCOUNT BALANCE S \$ 855918.00 (S1 plus S2 plus S3) Accumulation phase value X1 \$ Retirement phase value X2 \$	- Non CDBIS		rollovers and transfers	1			Code
S3 \$ 0.00 Income stream R2 \$ 20000.00 M O TRIS Count CLOSING ACCOUNT BALANCE S \$ 855918.00 (S1 plus S2 plus S3) Accumulation phase value X1 \$ Retirement phase value X2 \$	S2 \$	355918.00	Lump Sum R1	\$			
O TRIS Count CLOSING ACCOUNT BALANCE \$\$ 855918.00 (S1 plus S2 plus S3) Accumulation phase value X1 \$ Retirement phase value X2 \$	Retirement phase account I - CDBIS	oalance	Income				Code
O TRIS Count CLOSING ACCOUNT BALANCE \$\$ 855918.00 (S1 plus S2 plus S3) Accumulation phase value X1 \$ Retirement phase value X2 \$	S3 \$	0.00	stream R2 payments	\$		20000.00	M
Accumulation phase value X1 \$ Retirement phase value X2 \$	0 TRIS Count CLC			\$		855918.00	
Retirement phase value X2 \$		144		\$			ŧ.
				Ť			
Outstanding limited recourse borrowing arrangement amount	ho						a

Taxpayer/entity name: R C Lloyd Superannuation Fund

MEMBER 2	¬	
Title: Mr Mrs Miss E Family name	Ms Other	
First given name		Other given names
		Day Month Yea
Member's TFN See the Privacy note in the D	eclaration.	Date of birth
Contributions		
•	OPENING ACC	OUNT BALANCE \$
Refer to instructions for completing these		Proceeds from primary residence disposal
abels.		H \$
Employer contributions		Receipt date Day Month Year
A \$		H1
ABN of principal employer		Assessable foreign superannuation fund amount
A1 \$		I \$
Personal contributions		Non-assessable foreign superannuation fund amount
B \$		J \$
CGT small business retireme	ent exemption	Transfer from reserve: assessable amount
C \$		K \$
CGT small business 15-yea	r exemption amount	
D \$		Transfer from reserve: non-assessable amount L \$
Personal injury election		Contributions from non-complying
		funds and previously non-complying funds
E \$ Spouse and child contribution		T \$
F \$	OTIS	Any other contributions
·		── (including Super Co-contributions and
Other third party contribution G \$	TIS	Low Income Super Amounts) M \$
		ONTRIBUTIONS N \$
Other transactions		of labels A to M) Loss Illocated earnings
		or losses • \$
Accumulation phase a	account balance	Inward rollovers and P \$
S1 \$		transfers
Retirement phase a - Non CDBIS	ccount balance	rollovers and Q \$
S2 \$		transfers Lump Sum R1 \$
Retirement phase ac	count balance	раугнен
S3\$		Income Stream R2 \$
		payments
TRIS Count		OUNT BALANCE \$\$
		s S2 plus S3) ation phase value X1 \$
		nent phase value X2 \$
	, Outștanding	limited recourse ngement amount

Taxpayer/entity name: R C Lloyd Superannuation Fund

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MEMBER 3	
Title: Mr Mrs Miss Ms Other	
Family name	
First given name	Other given names
That given harrie	Other giver frames
Member's TFN	Day Month Year
See the Privacy note in the Declaration.	Date of birth
Contributions	NINT DALANOS C
Refer to instructions	DUNT BALANCE \$
for completing these	Proceeds from primary residence disposal
labels.	H \$
Employer contributions	Receipt date Day Month Year
A \$	H1
ABN of principal employer	Assessable foreign superannuation fund amount
A1 \$	I \$
Personal contributions	Non-assessable foreign superannuation fund amount
В \$	J \$
CGT small business retirement exemption	
C \$	Transfer from reserve: assessable amount K \$
CGT small business 15-year exemption amount	*
	Transfer from reserve: non-assessable amount L \$
Personal injury election	Contributions from non-complying funds
E \$	T \$
Spouse and child contributions	. Ψ
F \$	Any other contributions
Other third party contributions	(including Super Co-contributions and Low Income Super Amounts)
G \$	M \$
TOTAL OO	ALTERIAL ALCOHOLOGICAL ALCOHOLOGICA ALCOHOLOGICAL ALCOHOLOGICA ALCOHOLOGIC
	NTRIBUTIONS N \$ fabels A to M)
Other transactions Allo	ocated earnings
	or losses O\$
Accumulation phase account balance	rollovers and P\$
	transfers Outward
Retirement phase account balance - Non CDBIS	rollovers and transfers
S2 \$	Lump Sum R1 \$
Retirement phase account balance	
- CDBIS	Income Stream R2 \$
	payments
	UNT BALANCE S\$
	S2 plus S3)
Accumulat	ion phase value X1 \$
Retireme	ent phase value X2 \$
Outstanding li borrowing arrang	mited recourse gement amount

Taxpayer/entity name: R C Lloyd Superannuation Fund

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Day Month Year Day Month Year
Date of birth Signature of special sp
Date of birth Signature of special sp
ds from primary residence disposal of date Day Month Year able foreign superannuation fund amount sees sessable foreign superannuation fund amount or from reserve: assessable amount or from reserve: non-assessable amount outions from non-complying and previously non-complying funds
ds from primary residence disposal at date Day Month Year able foreign superannuation fund amount sees sessable foreign superannuation fund amount for from reserve: assessable amount for from reserve: non-assessable amount cutions from non-complying and previously non-complying funds
able foreign superannuation fund amount seesessable foreign superannuation fund amount for from reserve: assessable amount for from reserve: non-assessable amount for from reserve: non-assessable amount for from reserve: non-complying funds
able foreign superannuation fund amount seesessable foreign superannuation fund amount for from reserve: assessable amount for from reserve: non-assessable amount for from reserve: non-assessable amount for from reserve: non-complying funds
able foreign superannuation fund amount sees sable foreign superannuation fund amount from reserve: assessable amount for from reserve: non-assessable amount outions from non-complying and previously non-complying funds
able foreign superannuation fund amount sees sessable foreign superannuation fund amount or from reserve: assessable amount or from reserve: non-assessable amount outions from non-complying and previously non-complying funds
ssessable foreign superannuation fund amount for from reserve: assessable amount for from reserve: non-assessable amount for from reserve: non-assessable amount for from reserve: non-assessable amount for from reserve: non-complying funds
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er from reserve: assessable amount for from reserve: non-assessable amount cutions from non-complying and previously non-complying funds
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er from reserve: non-assessable amount Dutions from non-complying and previously non-complying funds
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butions from non-complying and previously non-complying funds
outions from non-complying and previously non-complying funds
and previously non-complying funds
ner contributions
ng Super Co-contributions and come Super Amounts)
O \$ Loss
P \$
Ο Φ
Q \$
Code
ΠΙΦ
Code
Code
Code
R2\$ Code Code S
R2\$
R2\$ Code Code S
ne m nt:

Taxpayer/entity name: R C Lloyd Superannuation Fund

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Section G: Suppleme	ntary m	ember in	forma	tion		
MEMBER 5						Co
Title: Mr Mrs Miss Ms	Other				Account status	
Family name						_
Flust shap name		O+h				
First given name		Other given na	ames			
Member's TFN	Date	of birth		If deceased, da	ate of death	
See the Privacy note in the Declaration		Month Year		Day Month	Year	
Contributions						
Refer to instructions	ENING ACCOL	JNT BALANCE	\$			
for completing these		Proceed	ds from prim	ary residence disposal		
labels.		H \$				
Employer contributions		Receipt	date Day	Month Ye	ar	
A \$		H1				
ABN of principal employer			ıble foreign s	superannuation fund am	I nount	
A1 \$						
		I \$				
Personal contributions		Non-ass	sessable for	eign superannuation fu	nd amount	
B \$		J \$				
CGT small business retirement exem	notion	Transfer	from reserv	e: assessable amount		
C \$		K \$		or acceptable arrivant		
CGT small business 15-year exempt	tion amount	·				
	lion amount	Iransfer L \$		e: non-assessable am	ount	
D \$						
Personal injury election		Contrib funds a	utions from I	non-complying y non-complying fund	6	
E \$			Tid providuoi	y horr complying lund	5	
Spouse and child contributions		Т \$				
F \$		Any oth	er contributi	ons		
Other third party contributions		(includin	ng Super Co come Super A	-contributions and		
G \$		M \$	orne daper /	-Amounts)		
		Ψ Ψ				
	TOTAL CON	NTRIBUTIONS	N \$			
	(Sum of	labels A to M)			Loss	
Other transactions	Allo	cated earnings or losses	0\$			
		Inward				
Accumulation phase account b	palance	rollovers and transfers	P \$			
		Outward				
Retirement phase account I - Non CDBIS	balance	rollovers and	Q \$			
S2 \$		transfers			Code	
Retirement phase account b	alance	Lump Sum payment	R1 \$			
- CDBIS		Income	DO C		Code	
S3 \$		stream payments	H2 5			
TRIS Count CLO	SING ACCOL	INT BALANCE	S\$			
CEO	S1 plus S		3 \$			
		on phase value	V1 ¢			
		nt phase value)	X2 \$			
bor	Outstanding lir rowing arrange	mited recourse ement amount	Y \$			

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Self managed superannuation fund return 2020 Taxpayer/entity name: R C Lloyd Superannuation Fund

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MEMBER 6	_	Coc
Title: Mr Mrs Miss Ms	Other	Account status
Family name		
First given name		Other given names
Member's TFN		of birth If deceased, date of death
See the Privacy note in the Declaration	n. Day	Month Year Day Month Year
Contributions		
OPE	ENING ACCO	OUNT BALANCE \$
Refer to instructions for completing these		Proceeds from primary residence disposal
abels.		H \$
Employer contributions		Receipt date Day Month Year
A \$		H1 .
ABN of principal employer		Assessable foreign superannuation fund amount
A1 \$		I \$
Personal contributions		Non-assessable foreign superannuation fund amount
B \$		J \$
CGT small business retirement exem	ention	Transfer from reserve: assessable amount
C \$	Iption	K \$
CGT small business 15-year exempt	tion amount	
D \$	tion amount	Transfer from reserve: non-assessable amount L \$
		Contributions from non-complying
Personal injury election		funds and previously non-complying funds
E \$		т \$
Spouse and child contributions		
F \$		Any other contributions (including Super Co-contributions and Low Income Super Amounts)
Other third party contributions G \$		
9		M \$
	TOTAL CO	INTRIBUTIONS N \$
	(Sum o	of labels A to M)
Other transactions	Allo	ocated earnings or losses
Accumulation phase account b	palance	Inward
S1 \$	School 100	rollovers and transfers P\$
Retirement phase account to	balance	Outward rollovers and Q \$
- Non CDBÍS		transfers
		Lump Sum R1 \$
Retirement phase account be - CDBIS	alance	Income Code
S3 \$		stream R2 \$ payments
TRIS Count CLO	SING ACCO	UNT BALANCE \$\$
OLO.		S2 plus S3)
		ion phase value X1 \$
		ent phase value X2 \$
(
bori	rowing arrang	imited recourse gement amount

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Taxpayer/entity name: R C Lloyd Superannuation Fund

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MEMBER 7						Code
Title: Mr Mrs Miss Ms Family name	Other				Account status	S Code
Fixet diven name		Otto an aris and a second				
First given name		Other given names				
Member's TFN		of birth		If deceased,	date of death	
See the Privacy note in the Declaration	on. Day	Month Year		Day Month	Year	
Contributions	ENING ACCO	UNT BALANCE \$				
Refer to instructions		1	m priman	residence disposa		
for completing these labels.		H \$	m primary	/ residerice disposi	al	
Employer contributions			Day	Month	Year	
A \$		Receipt date H1	,,		1.00	
ABN of principal employer			oreign sup	erannuation fund a	mount	
A1 \$		ı s				
Davis and a satisfaction		T 0	able fereig	n oungraphy otion f	i and amount	
Personal contributions B \$		_	able loreig	n superannuation f	und amount	
		J \$				
CGT small business retirement exem	nption		1 reserve:	assessable amoun	t	
		K \$				
CGT small business 15-year exemp D \$	tion amount		reserve:	non-assessable an	nount	
1						
Personal injury election		Contribution funds and p	s from noi 'eviously r	n-complying Ion-complying fund	ds	
E \$		т \$				
Spouse and child contributions		- 4				
F \$		Any other co (including Su	per Co-co	ontributions and		
Other third party contributions		Low Income	Super Am	nounts)		
G \$		M \$				
	ı	NTRIBUTIONS N	\$		YI .	
Other transactions		labels A to M)			Loss	
- Tansactions	Alio	cated earnings or losses	\$			
Accumulation phase account b	palance	Inward rollovers and P	\$			
S1 \$		transfers	Ψ[
Retirement phase account I - Non CDBIS	balance	Outward rollovers and Q	\$			
S2 \$		transfers			Code	
Retirement phase account b	alance	раутпепт	\$			
- CDBIS		Income stream R2	\$		Code	
		payments	T			
TRIS Count CLO		INT BALANCE S	\$			
	(S1 plus S		2			
	Accumulation	on phase value X1	\$			
	Retireme	nt phase value X2	\$			
(bor	Outstanding lir rowing arrang	mited recourse ement amount	\$		Ja Va	2

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Taxpayer/entity name: R C Lloyd Superannuation Fund

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MEMBER 8					Code
Title: Mr Mrs Miss Ms	Other				Account status
Family name	li i				
First given name		Other given na	ames		
Member's TFN	Date	of birth		If deceased	d, date of death
See the Privacy note in the Declaration.	Day	Month Year		Day Mor	
Contributions			•		
Refer to instructions	IING ACCOU	JNT BALANCE	\$		
for completing these			ds from	primary residence dispo	osal
labels.		H \$			
Employer contributions		Receipt	date	Day Month	Year
A \$		H1			
ABN of principal employer		Assessa	ble fore	eign superannuation fund	d amount
A1 \$		1 \$			
Personal contributions		Non-ass	sessabl	le foreign superannuatio	n fund amount
B \$		J \$	_		
CGT small business retirement exempt	ion	•	-		
C \$	ion			eserve: assessable amo	unt
		K \$	-		
CGT small business 15-year exemption	n amount			eserve: non-assessable	amount
D \$		L \$			
Personal injury election		Contrib funds a	utions f nd prev	from non-complying viously non-complying fi	unds
E \$		т \$	r i		
Spouse and child contributions		ıφ	L		
F \$		Any other	er conti	ributions	
Other third party contributions		(includin Low Inc	ig Supe ome Si	er Co-contributions and uper Amounts)	
G \$		M \$			
		NTRIBUTIONS labels A to M)	N \$		
Other transactions		cated earnings			Loss
r		or losses	0\$		
Accumulation phase account bala	ance	Inward rollovers and	P \$		
S1 \$		transfers	- •		
Retirement phase account ba - Non CDBIS	lance	Outward rollovers and	Q \$		
S2 \$		transfers			Code
Retirement phase account bala	ance	Lump Sum payment	R1 \$		
- CDBIS		Income stream	Do ¢		Code
S3 \$		payments	ne þ		
TRIS Count CLOSI	NG ACCOL	INT BALANCE	S\$		
	(S1 plus S		- 4		
	Accumulation	on phase value)	X1 \$		
	Retireme	nt phase value)	x2 ¢)	
Ou		nited recourse			A
borro	wing arrange	ement amount	Y \$		76

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Taxpayer/entity name: R C Lloyd Superannuation Fund

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4-			1 (-4144	A	ф.		60
15a	Australian managed investments Listed trus Unlisted trus		Listed trusts	A	7.9		-00
			В	\$\$		-00	
			Insurance policy	C\$	\$		-90
		Othe	r managed investments	D	\$		-90
15b	Australian direct investments	C	Cash and term deposits	E	\$	35918	-90
	Limited recourse borrowing arrangent Australian residential real property	nents	Debt securities	F	\$		-90
	Australian non-residential real property J2 \$ Overseas real property J3 \$ Australian shares J4 \$ Overseas shares J5 \$ Other J6 \$	-00	Loans	G	\$	820000	-00
			Listed shares	Н	\$		-00
		-90	Unlisted shares	1	\$		-90
		-00	1. 9. 1				, , ,
		1	Limited recourse orrowing arrangements	J	\$		-00
		-00	Non-residential	K	\$		-00
		,	real property Residential				i ·
		real property	L			-90	
		-00	Collectables and personal use assets	M	\$		-00
		Other assets	0	\$		-00	
	Property count J7 \$]				-	l.
15c	Other investments		Crypto-Currency	N	\$		-00
5d	Overseas direct investments		Overseas shares				- 9 0
	Overseas non-residential real property Overseas residential real property						Ţ
				Q	\$		-00
				R	\$		-90
	Ov	erseas	managed investments	s	\$		-90
	Other overseas assets			_	\$		-90

15e In-house assets

Did the fund have a loan to, lease to or investment in, related parties (known f A No f Xas in-house assets) at the end of the income year?

TOTAL AUSTRALIAN AND OVERSEAS ASSETS U\$

(Sum of labels A to T)

-DQ

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	f managed superannuation fund re payer/entity name: R C Lloyd Superannuation Fund	RN: 100017 3	RN:100017882MS		
	Limited recourse borrowing arrangements e fund had an LRBA were the LRBA borrowings from a licensed financial institution?	A No Yes B			
16	LIABILITIES				
	Borrowings for limited recourse				
	borrowing arrangements				
	V1 \$ Permissible temporary borrowings				
	V2 \$ -90				
	Other borrowings				
	V3 \$	Borrowings V	\$		-90
	Total member closi	ng account balances	آ ۾		
	(total of all CLOSING ACCOUNT BALANCEs fro	om Sections F and G)	\$	855918	-90
		Reserve accounts X	\$		-00
		Other liabilities Y	\$		-00
		TOTAL LIABILITIES Z	\$	855918	-00
					1
— Se 17	ction I: Taxation of financia Taxation of financial arrangements (TOF)	I arrangements A) Total TOFA gains H \$ Total TOFA losses I \$	3		-00 -00
Se	ction J: Other information				
	ly trust election status f the trust or fund has made, or is making, a famil specified of the election (for example) If revoking or varying a family trust e	mple, for the 2019–20 inco	me y	year, write 2020. A	
ntor	and complete and attach the Fa			_	
iii.	If the trust or fund has an existing election, w or fund is making one or more election specified and complete an Interposed enti	s this year, write the earlies	t inc	come vear being 🕝	
	If revoking an i	nterposed entity election, p	rint I	R, and complete	
	and attach th	e Interposed entity election	or r	revocation 2020. D	1

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Taxpaver/entity name: R C Llovd Superannuation Fund

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Section K: Declarations

Penalties may be imposed for false or misleading information in addition to penalties relating to any tax shortfalls.

Important

Before making this declaration check to ensure that all income has been disclosed and the annual return, all attached schedules and any additional documents are true and correct in every detail. If you leave labels blank, you will have specified a zero amount or the label was not applicable to you. If you are in doubt about any aspect of the annual return, place all the facts before the ATO.

The ATO is authorised by the Taxation Administration Act 1953 to request the provision of tax file numbers (TENs). We will use the TFN to identify the entity in our records. It is not an offence not to provide the TFN. However if you do not provide the TFN, the processing of this form may be delayed.

Taxation law authorises the ATO to collect information and disclose it to other government agencies. For information about your privacy go to ato.gov.au/privacy

TRUSTEE'S OR DIRECTOR'S DECLARATION:

I declare that, the current trustees and directors have authorised this annual return and it is documented as such in the SMSF's records. I have received a copy of the audit report and are aware of any matters raised therein. The information on this annual return, including any attached schedules and additional documentation is true and correct.

Authorised trustee's, director's or public officer's signature Month Year 10 2020 Preferred trustee or director contact details: Title: Mr Ms Family name LLOYD First given name Other given names **ROBIN CRAGO** Phone number 02 94872333 Email address Non-individual trustee name (if applicable) R C LLOYD PTY LIMITED ABN of non-individual trustee Time taken to prepare and complete this annual return Hrs The Commissioner of Taxation, as Registrar of the Australian Business Register, may use the ABN and business details which you provide on this annual return to maintain the integrity of the register. For further information, refer to the instructions. TAX AGENT'S DECLARATION: I declare that the Self-managed superannuation fund annual return 2020 has been prepared in accordance with information provided by the trustees, that the trustees have given me a declaration stating that the information provided to me is true and correct, and that the trustees have authorised me to lodge this annual return. Tax agent's signature Tax agent's contact details Title: Other Family name Rogers First given name Other given names Catriona Tax agent's practice The Rogers Group Ltd Partnership Tax agent's phone number Reference number Tax agent number 02 9267 7655 LLOY70

Postal address for annual returns: Australian Taxation Office, GPO Box 9845, IN YOUR CAPITAL CITY

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Losses schedule

Companies and trusts that do not join consolidated groups should complete and attach this schedule to their 2020 tax return. Superannuation funds should complete and attach this schedule to their 2020 tax return.

Tax file number (TFN)	Refer to Losses schedule instructions 2020, available on our website ato.gov.au for instructions on how to complete this schedule.
Name of entity	
R C Lloyd Superannuation Fund	
Australian business number (ABN)	
41 299 088 308	

Part A Losses carried forward to the 2020–21 income year - excludes film losses

1 Tax losses carried forward to later income years

	Year of loss
B .9	2019–20
.D	2018–19
.90	2017–18
E .04	2016–17
F .De	2015–16
G 1329 - pa	2014–15 and earlier income years
1329 - 1329	Total
orward to later income years label on your tax return	Fransfer the amount at U to the Tax losses carried fo

ount at **U** to the **Tax losses carried forward to later income years** label on your tax return.

2 Net capital losses carried forward to later income years

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Year of loss		
2019–20	Н	-00
2018–19	I	-00
2017–18	J	-00
2016–17	К	-00
2015–16		. DQ
2014–15 and earlier income years	M 110877	-00
Total	110877	-DQ

Transfer the amount at V to the Net capital losses carried forward to later income years label on your tax return.



RN	:100017882BP
TENI	

Taxpayer/entity name:	R C Lloyd	Superannuation	Fund
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LIN	.100017002DI
TFN	

Part B Ownership and business continuity test - compar	v and listed widely	held trust only
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Complete item 3 of Part B if a loss is being carried forward to later income years and the business continuity test has to be satisfied in relation to that loss.

Do not complete items 1 or 2 of Part B if, in the 2019-20 income year, no loss has been claimed as a deduction, applied against a net capital gain or, in the case of companies, losses have not been transferred in or out.

1 Whether continuity of majority ownership test passed

Note: If the entity has deducted, applied, transferred in or transferred out (as applicable) in the 2019-20 income year a loss incurred in any of the listed years, print X in the Yes or No box to indicate whether the entity has satisfied the continuity of majority ownership test in respect of that loss.

Year	of	loss

2019–20	A Yes	No	Print X in the appropriate box.
201819	B Yes	No	Print X in the appropriate box.
2017–18	C Yes	No	Print X in the appropriate box.
2016–17	D Yes	No	Print X in the appropriate box.
2015–16	E Yes	No	Print X in the appropriate box.
and earlier	F Yes	No	Print X in the appropriate box.

2 Amount of losses deducted/applied for which the continuity of majority ownership test is not passed but the business continuity test is satisfied - excludes film losses

2014-15

Tax losses	G	-96
Vet capital losses	Н	-00

Losses carried forward for which the business continuity test must be satisfied before they can be deducted/ applied in later years - excludes film losses

Tax losses		.00
Net capital losses	J	-96

Do current year loss provisions apply?

Is the company required to calculate its taxable income or tax loss for the year under Subdivision 165-B or its net capital gain or net capital loss for the year under Subdivision 165-CB of the Income Tax Assessment Act 1997 (ITAA 1997)?

K Yes	No	Print X in the appropriate box
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Part C Unrealised losses - company only

Note: These questions relate to the operation of Subdivision 165-CC of ITAA 1997.

Has a changeover time occurred in relation to the company after 1.00pm by legal time in the Australian Capital Territory on 11 November 1999?

If you printed X in the No box at ___, do not complete M, N or O.

At the changeover time did the company satisfy the maximum net asset value test under section 152-15 of ITAA 1997?

If you printed X in the No box at M, has the company determined it had an unrealised net loss at the changeover time?

If you printed ${\bf X}$ in the ${\bf Yes}$ box at ${\bf N}$, what was the amount of unrealised net loss calculated under section 165-115E of ITAA 1997?

L Yes	No	Print X in the appropriate box
-------	----	--------------------------------

Print X in the Yes No appropriate box.

Print X in the No appropriate box.

00

Part D Life insurance companies

Complying superannuation class tax losses carried forward

Complying superannuation net capital losses carried forward

to later income years

to later income years 00

00

RN	:1	000	17	882	BF
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Taxpayer/entity name: R C Lloyd Superannuation Fund

TFN			

Part E	Controlled foreign company losses		
		Current year CFC losses M	-06
		CFC losses deducted N	.96
		CFC losses carried forward	.DK

er was	TIMES OF THE TRANSPORTER	Tax losses reconciliation statement	art F
329 -00	A 132	Balance of tax losses brought forward from the prior income year	
-00	В	ADD Uplift of tax losses of designated infrastructure project entities	
-00	С	SUBTRACT Net forgiven amount of debt	
-00	D	ADD Tax loss incurred (if any) during current year	
-00	Е	ADD Tax loss amount from conversion of excess franking offsets	
-00	F	SUBTRACT Net exempt income	
-00	G	SUBTRACT Tax losses forgone	
.00	Н	SUBTRACT Tax losses deducted	
-00	0	SUBTRACT Tax losses transferred out under Subdivision 170-A only for transfers involving a foreign bank branch or a PE of a foreign financial entity)	(0
29 -00	J 1329	Total tax losses carried forward to later income years	

Transfer the amount at **U** to the **Tax losses carried forward to later income years** label on your tax return.



TEN
ILLIN

Taxpayer/entity name: R C Lloyd Superannuation Fund

If the schedule is not lodged with the income tax return you are required to sign and date the schedule.

Important

Before making this declaration check to ensure that all the information required has been provided on this form and any attachments to this form, and that the information provided is true and correct in every detail. If you are in doubt about any aspect of the tax return, place all the facts before the ATO. The income tax law imposes heavy penalties for false or misleading statements.

Privacy

Taxation law authorises the ATO to collect information and disclose it to other government agencies. This includes personal information of the person authorised to sign the declaration. For information about your privacy go to ato.gov.au/privacy

TAXPAYER'S DECLARATION

I declare that the information on this form is true and correct.

Signature	Ţ.				
Allan	Date	Day 12	Month /	Year 2020	
Contact person	Daytime contact	Daytime contact number (include area code)			
Catriona Rogers	02	02 9267 7655			

Client ref

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ABN 41 299 088 308

Part A - Losses carried forward to the 2020-2021 income year -excludes film losses

1 Tax losses carried forward to later income years

Year of loss

2014-2015 and earlier income years

Total

1329 1 1329

Transfer the amount at label U to the corresponding label on your tax return

2 Net capital losses carried forward to later income years

Year of loss

2014-2015 and earlier income years

Total

M 110877 V 110877

Transfer the amount at label V to the corresponding label on your tax return

Part F - Tax losses reconciliation statement

Balance of tax losses brought forward from the

prior income years

1329

Total Tax losses carried forward to later income years

J 1329

Transfer the amount at J to the Tax losses carried forward to later income years label on your tax return

NOTE: THIS PRINT-OUT IS NOT TO BE LODGED WITH THE ATO.

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Other Deductions 2020

Client ref

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ABN 41 299 088 308

Other deductions						
Code	Description	Deduct. Amt ¢ode	Non-dedn. Am			
	Description Accountancy Fee	Ь				
	Other deductions not listed	φ				
Total						



PART A

Electronic lodgment declaration (Form P, T, F, SMSF or EX)

This declaration is to be completed where the tax return is to be lodged via an approved ATO electronic channel. It is the responsibility of the taxpayer to retain this declaration for a period of five years after the declaration is made, penalties may apply for failure to do so.								
Tax File Number		Year of return	2020					
Name of Partnership, Trust, Fund or Entity	R C Lloyd Superannuation	Fund						
Total Income/Loss	Total Deduct	ions Taxab	ole Income/Loss					
TFNs to identify each partner or be lodge your tax return electronically		ot an offence not to provide the TFNs	s. However, you cannot					
	o collect information and disclose it to ot leclaration. For information about privac		personal information about					
The Australian Business Register The Commissioner of Taxation, as tax return to maintain the integrity of	Registrar of the Australian Business Re	gister, may use the ABN and busine	ss details which you provide on this					
Please refer to the privacy stateme commitment to safeguarding your	nt on the Australian Business Register (details.	ABR) website (www.abr.gov.au) for	further information - it outlines our					
Electronic funds transfer - direct Where you have requested an EFT to facilitate the payment of your tax	debit direct debit some of your details will be ation liability from your nominated account.	provided to your financial institution int.	and the Tax Office's sponsor bank					
I authorise my tax agent to electron	ically transmit this tax return via an appr	roved ATO electronic channel.						
Important: Before making this dec every detail. If you are in doubt abo for false or misleading statements of	laration please check to ensure that all i ut any aspect of the tax return, place all on tax returns.	ncome has been disclosed and the t the facts before the Tax Office. The	ax return is true and correct in tax law provides heavy penalties					
any applicable schedules is tru	document to the Commissioner of Taxa	ition.	Date 12-10.2020					
PART D	Tax agent's certificate (sha	red facilities only)						
 We have received a declaration m and correct, and 	ship declare that: n accordance with the information suppled ade by the entity that the information protrustee, director or public officer to lodge	ovided to us for the preparation of thi	s tax return is true					
Agent's Signature	Miney		Date /3/10/202					

Client's reference

LLOY70

Not complete 22/09/2020 : 17:02

02 9267 7655

Catriona Rogers 64941004

Agent's phone

Agent's Contact Name Agent's reference number

Taxation Estimate For the year ended 30 June 2020

Return Code: LLOY70 Tax File Number: Description: R C Lloyd Superannuation Fund Date prepared: 22/09/2020 \$ **Summary of Taxable Income** Business and Investment Income: No-TFN contributions **Taxable Income** Tax on Taxable Income **Gross Tax SUBTOTAL T2** Add: Supervisory levy 259.00 259.00 **TOTAL AMOUNT PAYABLE** 259.00

