

SMSF Tax Return

2019

1 Jul 2018—30 Jun 2019

TFN Recorded

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 the Tax Office's electronic lodgment service (ELS). 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.

Privacy

The ATO is authorised by the *Taxation Administration Act 1953* to request the provision of tax file numbers (TFNs). The ATO will use the TFNs to identify each partner or beneficiary or entity in our records. It is not an offence not to provide the TFNs. However, you cannot lodge your tax return electronically if you do not quote your TFN.

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

The Australian Business Register

The Commissioner of Taxation, as Registrar of the Australian Business Register, may use the ABN and business details which you provide on this tax return to maintain the integrity of the register.

Please refer to the privacy statement on the Australian Business Register (ABR) website (www.abr.gov.au) for further information – it outlines our commitment to safeguarding your details.

Electronic Funds Transfer – Direct Debit

Where you have requested an EFT direct debit some of your details will be provided to your financial institution and the Tax Office's sponsor bank to facilitate the payment of your taxation liability from your nominated account.

<u>Tax File Number</u>	<u>Name of partnership, trust, fund or entity</u>	<u>Year</u>
TFN Recorded	Hills Family Superannuation Fund	2019

I authorise my tax agent to electronically transmit this tax return via the electronic lodgment service.

Important

Before making this declaration please check to ensure that all income has been disclosed and the tax return 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 Tax Office. The tax law provides heavy penalties for false or misleading statements on tax returns.

Declaration - I declare that:

- the information provided to my registered tax agent for the preparation of this tax return, including any applicable schedules is true and correct, and
- the agent is authorised to lodge this tax return.

Signature of partner, trustee or director	Date
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PART B ELECTRONIC FUNDS TRANSFER CONSENT

This declaration is to be completed when an electronic funds transfer EFT of a refund is requested and the tax return is being lodged through the electronic lodgment service ELS.

This declaration must be signed by the taxpayer prior to the EFT details being transmitted to the Tax Office. If you elect for an EFT, all details below must be completed.

Important

Care should be taken when completing EFT details as the payment of any refund, including any family tax benefit, will be made to the account specified.

Agent Ref No.	Account Name
25367333	Hills Family Super Fund

I authorise the refund to be deposited directly to the account specified.

Signature	Date

PART D TAX AGENTS CERTIFICATE (SHARED FACILITIES USERS ONLY)

Client Ref	Agent Ref No.	Contact Name	Contact No.
HILL0004	25367333	Deborah Fletcher	0435059003

Declaration - I declare that:

- I have prepared this tax return and/or family tax benefit tax claim in accordance with the information supplied by the taxpayer
- I have received a declaration made by the taxpayer that the information provided to me for the preparation of this document is true and correct, and
- I am authorised by the taxpayer to lodge this tax return and any applicable schedules that are attached.

Agent's Signature	Date

Section A: Fund information

Period start				01/07/2018
Period end				30/06/2019
1 TAX FILE NUMBER				TFN Recorded
2 NAME OF SELF-MANAGED SUPERANNUATION FUND (SMSF)				Hills Family Superannuation Fund
4 CURRENT POSTAL ADDRESS				
Address	Town/City	State	Postcode	
PO Box 38436	Winnellie	NT	0821	
5 ANNUAL RETURN STATUS				
Is this the first required return for a newly registered SMSF?				No
6 SMSF AUDITOR				
Title				Mr
First name				Tony
Family name				Boys
SMSF auditor number				100014140
Contact number				04-10712708
Auditor Address	Town/City	State	Postcode	
PO Box 3376	Rundle Mall	SA	5000	
Was part A of the audit report qualified?				<input checked="" type="radio"/> B No
Was part B of the audit report qualified?				<input checked="" type="radio"/> C No
7 ELECTRONIC FUNDS TRANSFER (EFT)				
A. Fund's financial institution account details				
BSB number				015901
Account number				378322335
Account name				Hills Family Super Fund
I would like my tax refunds made to this account				Yes
C. Electronic service address alias				CLICKSUPER
8 STATUS OF SMSF				
Australian superannuation fund?				<input checked="" type="radio"/> A Yes
Fund benefit structure				<input checked="" type="radio"/> B A
Does the fund trust deed allow acceptance of the Government's Super Co-contribution and Low Income Super Contribution?				<input checked="" type="radio"/> C Yes

Section B: Income

11 INCOME

Prior year losses brought forward

Did you have a CGT event during the year?	G	Yes
Have you applied an exemption or rollover?	M	No
Net capital gain	A	\$0.00

Losses carried forward

Net Capital Losses from Collectables		\$0.00
Other Net Capital Losses		\$0.00
Gross rent and other leasing and hiring	B	\$4,198.00
Gross interest income	C	\$5,385.00
Unfranked dividends	J	\$20.00
Franked dividend income amount	K	\$6,747.00
Franking credit	L	\$2,889.00
Tax file number amounts withheld from dividends		\$0.00
Gross distribution from trusts income	M	\$108.00 P
Assessable contributions	(R1 + R2 + R3 less R6) R	\$0.00
No-TFN-quoted contributions	R3	\$0.00
Gross income	W	\$19,347.00
Total assessable income	V	\$19,347.00

Section C: Deductions and non-deductible expenses

12 DEDUCTIONS

		Deductions	Non-Deductible Expenses
SMSF auditor fee	H1	\$1,188.00	H2
Investment expenses	I1	\$1,771.00	I2
Management and administration expenses	J1	\$5,611.00	J2
Totals	N	\$8,570.00	Y
Total SMSF expenses		(N + Y)	Z \$8,570.00
Taxable income or loss		(TOTAL ASSESSABLE INCOME less TOTAL DEDUCTIONS)	O \$10,777.00

Section D: Income tax calculation statement

13 CALCULATION STATEMENT			
Taxable income		A	\$10,777.00
Tax on taxable income		T1	\$1,616.55
Tax on no-TFN-quoted contributions		J	\$0.00
Gross tax		B	\$1,616.55
Subtotal	(B less C - cannot be less than zero)	T2	\$1,616.55
Subtotal	(T2 less D - cannot be less than zero)	T3	\$1,616.55
REFUNDABLE TAX OFFSETS	(E1 + E2 + E3 + E4)	E	\$2,889.00
Complying fund's franking credits tax offset		E1	\$2,889.00
Tax Payable		T5	\$0.00
Eligible credits	(H1 + H2 + H3 + H5 + H6 + H8)	H	\$0.00
Credit for tax withheld - where ABN or TFN not quoted (non-individual)		H3	\$0.00
Tax offset refunds (Remainder of refundable tax offsets)		I	\$1,272.45
Supervisory levy		L	\$259.00
Supervisory levy adjustment for wound up funds		M	\$0.00
Supervisory levy adjustment for new funds		N	\$0.00
Amount refundable		S	\$1,013.45

Section E: Losses

14 LOSSES			
Net capital losses carried forward to later income years		V	\$8,042.00

Section H: Assets and liabilities

15 ASSETS			
15b Australian direct investments			
Cash and term deposits		E	\$440,662.00
Listed shares		H	\$90,328.00
Other assets		O	\$27,820.00
15d Overseas direct investments			
Total Australian and overseas assets		U	\$558,810.00

16 LIABILITIES

Total member closing account balances	W	\$555,751.00
Other liabilities	Y	\$3,059.00
Total liabilities	Z	\$558,810.00

Section K : Declarations**PREFERRED TRUSTEE OR DIRECTOR CONTACT DETAILS**

Title	Doctor
First name	Janice
Family name	Hills
Non-individual trustee name	Two Chimneys Pty. Limited
Contact number	08 89767006

TAX AGENT'S CONTACT DETAILS

Practice name	Fletcher Accounting Pty Ltd
Title	Ms
First name	Fletcher
Other name	Accounting Pty
Family name	Ltd
Contact number	04 35059003

Member 1 — Hills, Janice Leona (TFN Recorded)

Account status	Open
Tax File Number	TFN Recorded
INDIVIDUAL NAME	
Title	Doctor
Given name	Janice
Other given names	Leona
Family name	Hills
Suffix	
Date of birth	27 Mar 1940
Date of death	
CONTRIBUTIONS	
Opening account balance	\$569,613.00
Employer contributions	A
Principal Employer ABN	A1
Personal contributions	B
CGT small business retirement exemption	C
CGT small business 15 year exemption	D
Personal injury election	E
Spouse and child contributions	F
Other third party contributions	G
Proceeds from primary residence disposal	H
Receipt date	H1
Assessable foreign superannuation fund amount	I
Non-assessable foreign superannuation fund amount	J
Transfer from reserve: assessable amount	K
Transfer from reserve: non-assessable amount	L
Contributions from non-complying funds and previously non-complying funds	T
Any other contributions (including Super Co-contributions and Low Income Super Contributions)	M
Total Contributions	N

OTHER TRANSACTIONS

Allocated earnings or losses	O	\$9,557.00
Inward rollovers and transfers	P	
Outward rollovers and transfers	Q	
TRIS Count		
Accumulation phase account balance	S1	\$534,170.00
Retirement phase account balance - Non CDBIS	S2	
Retirement phase account balance - CDBIS	S3	
Accumulation phase value	X1	
Retirement phase value	X2	
Outstanding Limited recourse borrowing arrangement	Y	
Lump Sum payment	R1	\$45,000.00 A
Income stream payment	R2	
Closing account balance	S	\$534,170.00

Member 2 — Hills, Sarah Alexis (TFN Recorded)

Account status	Open
Tax File Number	TFN Recorded
INDIVIDUAL NAME	
Title	Ms
Given name	Sarah
Other given names	Alexis
Family name	Hills
Suffix	
Date of birth	28 Sep 1971
Date of death	
CONTRIBUTIONS	
Opening account balance	\$21,204.00
Employer contributions	A
Principal Employer ABN	A1
Personal contributions	B
CGT small business retirement exemption	C
CGT small business 15 year exemption	D
Personal injury election	E
Spouse and child contributions	F
Other third party contributions	G
Proceeds from primary residence disposal	H
Receipt date	H1
Assessable foreign superannuation fund amount	I
Non-assessable foreign superannuation fund amount	J
Transfer from reserve: assessable amount	K
Transfer from reserve: non-assessable amount	L
Contributions from non-complying funds and previously non-complying funds	T
Any other contributions (including Super Co-contributions and Low Income Super Contributions)	M
Total Contributions	N

OTHER TRANSACTIONS

Allocated earnings or losses	O	\$377.00
Inward rollovers and transfers	P	
Outward rollovers and transfers	Q	
TRIS Count		
Accumulation phase account balance	S1	\$21,581.00
Retirement phase account balance - Non CDBIS	S2	
Retirement phase account balance - CDBIS	S3	
Accumulation phase value	X1	
Retirement phase value	X2	
Outstanding Limited recourse borrowing arrangement	Y	
Lump Sum payment	R1	
Income stream payment	R2	
Closing account balance	S	\$21,581.00

Worksheets

11 INCOME

J Unfranked dividends

Description	TFN Withheld	Unfranked	Franked	Franking Credits
Various	\$0.00	\$20.00	\$6,747.00	\$2,889.00
Total	\$0.00	\$20.00	\$6,747.00	\$2,889.00