

Tax estimate

Name: Retnest Superannuation Fund

TFN:

For the year ended: 30/06/2021

Taxable income

Income	\$6,454
Deductions	\$32

Taxable income	\$6,422
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Gross tax

Tax on taxable income	\$963.30
Income tax payable on no-TFN contributions income	\$0.00

Gross tax payable	\$963.30
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Less: Refundable tax offsets

Franking tax offset	\$13,334.06
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Total refundable tax offsets and credits	\$13,334.06
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Tax payable	\$0.00
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Add: Other taxes

Supervisory levy	\$259.00
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Total other taxes	\$259.00
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Less: Tax offset refunds (remainder of refundable tax offsets)	\$12,370.76
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Amount refundable	\$12,111.76
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Electronic Lodgment Declaration (SMSF)

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.

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 the entity in our records. It is not an offence not to provide the TFNs. However, lodgments cannot be accepted electronically if the TFN is not quoted.

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.

Name Year
 Total Income / Loss Total Deductions Taxable Income / Loss

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

Tax Agent

Declaration

I declare that:

- All of the information I have provided to the agent for the preparation of this document is true and correct
- I authorise the agent to give this document to the Commissioner of Taxation.

Signature Date

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 an approved ATO electronic channel.

The 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 will be made to the account specified.

Account name Agent's reference number
 BSB Account number

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

Signature Date

Tax Agent's Declaration

I declare that:

- I have prepared this Self Managed Superannuation Fund return and its related schedule(s) in accordance with the information supplied by the entity;
- I have received a declaration made by the entity that the information provided to me for the preparation of this return is true and correct, and
- I am authorised by the entity to give the information in this return to the Commissioner.

Agent's signature Date
 Contact name Agent reference
 Agent's phone number

2021 Self-Managed Superannuation Fund Annual Return

for the period 1 July 2020 to 30 June 2021

Section A: Fund information**1 Tax file number (TFN)****2 Name of fund**

Retnest Superannuation Fund

3 Australian business number (ABN)

43 149 427 673

4 Current postal address

17 Myall Avenue

Suburb KENSINGTON GARDENS State SA P/C 5068

5 Annual return status

First return?

B No**6 SMSF auditor**

Name

Mr

Boys

Anthony

William

SMSF Auditor No.

100 014 140

Phone number

61 0410712708

Address

Box 3376

Suburb Rundle Mall

State SA

P/C 5000

Was part A of the audit report qualified?

B No

Was part B of the audit report qualified?

C No**7 Electronic funds transfer (EFT)****A Fund's financial institution account details**

BSB number

083-088

Account number 799539110

Account name

Retnest Superannuation Fund

Yes

8 Status of SMSF

Australian superannuation fund?

A Yes

Fund benefit structure code

B A - Accumulation fund

Does the fund trust deed allow acceptance of the Government's Super Co-contributions?

C Yes**9 Was the fund wound up during the income year?**

No

10 Exempt current pension income

Did the fund pay an income stream (or super pension) to one or more members in the income year? Yes

Did the fund pay retirement phase superannuation income stream benefits to one or more members in the income year? Yes

Exempt current pension income amount **A**

Method used to calculate exempt current pension income **C - Unsegregated assets method**

Was an actuarial certificate obtained? **D** Yes

Did the fund have any other income that was assessable? **E** Yes

Section B: Income

11 Income

Did you have a capital gains tax (CGT) event during the year? **G** Yes

Gross interest **C**

Unfranked dividend amount **J**

Franked dividend amount **K**

Dividend franking credit **L**

Gross trust distribution **M** **P**

Calculation of assessable contributions

No-TFN quoted contributions **R3**

Assessable contributions **R**

Gross income **W**

Exempt current pension income **Y**

Total assessable income **V**

Section C: Deductions

12 Deductions and non-deductible expenses

	Deductions	Non-deductible
Other amounts	L1 <input type="text" value="\$32"/> O	L2 <input type="text" value="\$227"/> O
<u>Other deductions</u>	Amount	
From other sources	\$32	
Total	N <input type="text" value="\$32"/>	Y <input type="text" value="\$227"/>
	O <input type="text" value="\$6,422"/>	Z <input type="text" value="\$259"/>
	Taxable income or loss	Total SMSF expenses

Section D: Income tax calculation statement

13 Income tax calculation statement

Taxable income **A**

Tax on taxable income **T1**

Income tax payable on no-TFN contributions income **J**

Gross tax **B**

Subtotal 1 **T2**

Complying fund's franking credits tax offset **E1**

Refundable tax offsets **E**

Tax payable **T5**

Tax offset refunds (remainder of refundable tax offsets) **I**

Supervisory levy **L**

Total amount refundable **S**

Section F: Member information

Member 1

Mr		
Angove		
Richard	Clare	
Member's TFN	Date of birth	10/07/1953

Opening balance		\$1,138,337.23
Allocated earnings or losses	O	\$342,123.33
Income stream payment	R2	\$27,520.00 M
Accumulation phase account balance	S1	\$101,123.18
Retirement phase account balance - non-capped defined benefit income stream	S2	\$1,351,817.38
Retirement phase account balance - capped defined benefit income stream	S3	\$0.00
TRIS count	0	
Closing balance	S	\$1,452,940.56

Member 2

Mrs		
Angove		
Ann	Lindsay	
Member's TFN	Date of birth	04/08/1957

Opening balance		\$69,700.10
Allocated earnings or losses	O	\$20,980.09
Accumulation phase account balance	S1	\$90,680.19
Retirement phase account balance - non-capped defined benefit income stream	S2	\$0.00
Retirement phase account balance - capped defined benefit income stream	S3	\$0.00
TRIS count	0	
Closing balance	S	\$90,680.19

Section H: Assets and liabilities

15 Assets

15a Australian managed investments

Listed trusts **A** \$146,458

15b Australian direct investments

Cash and term deposits **E** \$75,176
 Listed shares **H** \$1,292,510
 Other assets **O** \$33,096

Total Australian and overseas assets **U** \$1,547,240

16 Liabilities

Member closing account balances **W** \$1,543,621
 Other liabilities **Y** \$3,619

Total liabilities **Z** \$1,547,240

Name Retnest Superannuation Fund

TFN

Signature _____

Section L: Declarations

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 the audit report and I am aware of any matters raised. I declare that the information on this annual return, including any attached schedules and additional documentation is true and correct. I also authorise the ATO to make any tax refunds to the nominated bank account (if applicable).

Signature	<input type="text" value="This form is not valid. Do not sign."/>	Date	<input type="text"/>
Name	<input type="text" value="Mr Richard Clare Angove"/>	Phone number	<input type="text" value="08 83646568"/>

Tax agent's declaration

We declare that the Self-managed superannuation fund annual return has been prepared in accordance with information provided by the trustees, that the trustees have given us a declaration stating that the information provided to us is true and correct, and that the trustees have authorised us to lodge this annual return.

Agent's signature	<input type="text" value="This form is not valid. Do not sign."/>	Date	<input type="text"/>
Tax agent's practice	<input type="text" value="Nicholls & Moore Pty Ltd"/>		
Contact name	<input type="text" value="Mr Warwick Nicholls"/>	Client reference	<input type="text" value="150"/>
Agent's phone number	<input type="text" value="08 82955408"/>	Agent reference	<input type="text" value="67389 005"/>