

2021 TAX RETURN SUBSTANTIATION DECLARATION

Tax returns are assessed on a Self-Assessment basis. This means that the ATO may not check whether the information you have submitted is correct. We will make every endeavour to ensure that your return is prepared accurately and correctly, however we rely on you to ensure that all relevant information is disclosed to us.

I, Gail Jenkins, confirm that:

I have reviewed every page of the accompanying copy of the income tax return to which the attached Electronic Lodgment Declaration refers and confirm that all items are correct and that there are no omissions or misstatements.

Income:

If I am an Australian tax resident, you have advised me that I must declare income from all sources, in and out of Australia, including net capital gains received, for the year of income in my tax return.

Expenses:

You have advised me that to claim a work-related or other expense deduction I must demonstrate that I have incurred the expense for income producing purposes. In addition, you have advised me of the substantiation legislation that I must satisfy in relation to all deductible expenses, including car, travel, business, education and work-related expenses. You have informed me that I must OBTAIN ORIGINAL RECEIPTS and keep them for a minimum of five years from the date my return is lodged.

The receipts must contain the following details:

- name of supplier and amount of expense;
- nature of goods/services and date of the expenses (details I am able to personally record where not adequately noted by supplier);
- date of the document.

Apportionment:

Where items are used for both business/work-related and private purposes e.g. car, telephone, computer etc. I advise I have kept appropriate apportionment records to verify my business usage claim and that my employer will verify that it was necessary to incur such expenditure in earning my income. Further, I have instructed you to prepare the return based on my specific instructions on the understanding I will be able to produce such information to the satisfaction of the ATO in an audit situation.

Audits:

I further confirm that:

- I am aware that the procedures to follow if a document is lost or destroyed is to obtain a copy from the supplier;
- I may be required to substantiate or verify any income or expense item declared or claimed in my tax return in the event of an ATO audit;

I declare that:

- I have read and understood the tax return that has been prepared for me;
- I have disclosed and you have returned all my assessable income for the current income tax year;
- I have all receipts or documentation necessary to substantiate my work-related and other claims, and I will make them available if required by the Tax Office;
- All income declared, claims for deductions and tax offsets/rebates included in my return are based upon my specific instructions;
- You have explained what written income and expense evidence will typically be required during an audit and that penalties, interest and possible legal action may be applied if incorrect income or claims are identified by an audit.

Terms and Conditions:

- I acknowledge that an invoice will be issued for your services and I agree to pay this invoice in full.
- I acknowledge that further action may be taken to secure payment of overdue/outstanding accounts.

| | |
|------------------|------------------|
| Signature | Date |
| | |

Individual Tax Return

2021

1 Jul 2020—30 Jun 2021

TFN Recorded

PART A ELECTRONIC LODGMENT DECLARATION (FORM I)

This declaration is to be completed where a taxpayer elects to use the Electronic Lodgment Service. 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 your tax file number (TFN). We will use your TFN to identify you in our records. It is not an offence not to provide your TFN. However, you cannot lodge your income tax form 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

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.

Tax File Number

TFN Recorded

Name

Jenkins, Gail

Year

2021

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.

Important

The tax law imposes heavy penalties for giving false or misleading information.

| | |
|-----------|------|
| Signature | Date |
|-----------|------|

PART D TAX AGENTS CERTIFICATE (SHARED FACILITIES USERS ONLY)**Client Ref**

JENB02

Agent Ref No.

24805968

Contact Name

HFB Accounting Pty Ltd

Contact No.

0732861322

Declaration — I declare that:

- I have prepared this tax return 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 |
|-------------------|------|

Individual Tax Return

2021

1 Jul 2020—30 Jun 2021

TFN Recorded

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.

24805968

Account Name

BRETT AND GAIL JENKINS

Authorisation

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

| | |
|------------------|-------------|
| Signature | Date |
| | |

Individual Tax Return

2021

1 Jul 2020—30 Jun 2021

TFN Recorded

Taxable income

| | | |
|---|-------------|-------------|
| Total income | \$91,088.00 | |
| Less total deductions and applied losses (L1) | \$31,688.00 | |
| Taxable income | | \$59,400.00 |
| Tax on taxable income | | \$9,772.00 |

| | | |
|--|-------------------|-------------|
| Less non-refundable tax offsets | Calculated | Used |
|--|-------------------|-------------|

Non-refundable

| | | |
|----------------------------------|------------|------------|
| Low income tax offset | \$109.00 | \$109.00 |
| Low and middle income tax offset | \$1,080.00 | \$1,080.00 |
| Small business income tax offset | \$653.97 | \$653.97 |

Non-refundable carry forward

| | | |
|---|-------------------|-------------------|
| Total non-refundable tax offsets | \$1,842.97 | \$1,842.97 |
| Subtotal | | \$7,929.03 |

| | | |
|------------------------------------|-------------------|-------------|
| Less refundable tax offsets | Calculated | Used |
|------------------------------------|-------------------|-------------|

| | | |
|-----------------------------|--|-------------------|
| Assessed tax payable | | \$7,929.03 |
|-----------------------------|--|-------------------|

| | | |
|-------------------------------|-------------------|-------------|
| Plus Other Liabilities | Calculated | Used |
|-------------------------------|-------------------|-------------|

| | | |
|--|------------|-------------------|
| Medicare levy | \$1,188.00 | |
| Medicare Liability | | \$1,188.00 |
| Excess private health insurance entitlement | | \$236.75 |
| Total other liabilities | | \$1,424.75 |
| Assessed tax payable (includes other liabilities) | | \$9,353.78 |

Less PAYG credits and other entitlements

| | | |
|--|--|--------------------|
| PAYG instalments raised | | \$10,592.00 |
| PAYG withholding – total tax withheld | | \$16,096.00 |
| Total PAYG credits and other entitlements | | \$26,688.00 |

| | |
|--------------------------|--------------------|
| Amount refundable | \$17,334.22 |
|--------------------------|--------------------|

Disclaimer

This estimate is only a guide and should not be taken as taxation, financial or investment advice. Our calculation is based on the information you have supplied and current legislation, proposals and information provided by the Australian Tax Office.

There are numerous factors that may affect the accuracy of this assessment including but not limited to:

- changes in tax legislation and Australian Tax Office practices and rulings;
- any prior year tax assessments that may be applicable; and
- adjustments relating to other Government Departments eg the Department of Human Services.

Do not rely on this estimate to make any decisions until you have received a notice of assessment from the ATO and/or obtained professional advice.

Individual Tax Return

2021

1 Jul 2020—30 Jun 2021

TFN Recorded

YOUR NAME

| Title | Given Name | Family Name | Other Name |
|-------|------------|-------------|------------|
| MRS | Gail | Jenkins | Maree |

| Suffix | Date of Birth |
|--------|---------------|
| | 25/05/1971 |

| Are you an Australian Resident? | Australian residency start date | Australian residency end date |
|---------------------------------|---------------------------------|-------------------------------|
| Yes | | |

Has part of your name changed since completing your last tax return?

No

YOUR POSTAL ADDRESS

PO Box 24
Cleveland

| State | Postcode |
|-------|----------|
| QLD | 4163 |

Country — if not Australia

YOUR HOME ADDRESS

58 Boree Street
Barcaldine

| State | Postcode |
|-------|----------|
| QLD | 4725 |

Country — if not Australia

Has your postal address changed since completing your last tax return?

YOUR CONTACT DETAILS

| Mobile number | Day time contact number | Email address |
|---------------|-------------------------|---------------|
| | 07 32861322 | |

YOUR BANKING INFORMATION (EFT DETAILS)

Deduct fee from refund

No

| BSB Number | Account Number | Account Name | Financial Institution Name |
|------------|----------------|------------------------|----------------------------|
| 064175 | 10314898 | BRETT AND GAIL JENKINS | |

CONTACT NAME

Full Name

Jodi McKenna

TAX AGENT CONTACT DETAILS

| Tax Contact | Agent Ref Number | Contact Number |
|------------------------|------------------|----------------|
| HFB Accounting Pty Ltd | 24805968 | 0732861322 |

Income

1 SALARY OR WAGES

Your main salary and wage occupation Nurse - general

Occupation Code **X** 254499

| Payer's ABN | Name | Tax withheld | Income |
|----------------|--------------------------|----------------------|-------------|
| 66 329 169 412 | DEPARTMENT OF HEALTH QLD | \$16,096.00 C | \$55,248.00 |

TOTAL TAX WITHHELD **\$16,096.00**

10 GROSS INTEREST

Tax file number amounts withheld from gross interest **M** \$0.00 Gross interest **L** \$4.00

TOTAL SUPPLEMENT INCOME **\$35,836.00**

TOTAL INCOME **\$91,088.00**

Deductions

D3 WORK-RELATED CLOTHING, LAUNDRY AND DRY CLEANING EXPENSES **C** \$167.00

D5 OTHER WORK-RELATED EXPENSES **E** \$960.00

Other expenses \$960.00

D9 GIFTS OR DONATIONS **J** \$0.00

TOTAL SUPPLEMENT DEDUCTIONS Items D11 to D15 **\$30,561.00**

TOTAL DEDUCTIONS **\$31,688.00**

SUBTOTAL **TOTAL INCOME less TOTAL DEDUCTIONS** **\$59,400.00**

Taxable income **\$59,400.00**

Income tests

IT1 TOTAL REPORTABLE FRINGE BENEFITS

Employers exempt from FBT under section 57A of the FBTA 1986 **N** \$0.00

Employers not exempt from FBT under section 57A of the FBTA 1986 **W** \$0.00

IT2 REPORTABLE EMPLOYER SUPERANNUATION **T** \$0.00

IT3 TAX-FREE GOVERNMENT PENSIONS **U** \$0.00

IT4 TARGET FOREIGN INCOME **V** \$0.00

IT5 NET FINANCIAL INVESTMENT LOSS **X** \$0.00

IT6 NET RENTAL PROPERTY LOSS **Y** \$0.00

IT7 CHILD SUPPORT YOU PAID **Z** \$0.00

IT8 NUMBER OF DEPENDENT CHILDREN **D** 3

Medicare levy related items

| M1 MEDICARE LEVY REDUCTION OR EXEMPTION | | M2 MEDICARE LEVY SURCHARGE | |
|---|------------|---|--------------|
| Reduction based on family income | | For the whole period 1 July 2020 to 30 June 2021, were you and all your dependents including your spouse—if you had any—covered by private patient HOSPITAL cover? | |
| Number of dependent children and students | Y 3 | | E Yes |
| Exemption categories | | | |
| Full 2.0% levy exemption – number of days | V | Number of days NOT liable for surcharge | A 365 |
| Half 2.0% levy exemption – number of days | W | | |

Private health insurance policy details

PROVIDER INFORMATION 1

| | | | | | |
|--------------------------|----------|----------|--|----------|----------|
| Health insurer ID | B | HCF | Membership number | C | K74673 |
| Your rebatable component | J | \$732.00 | Your Australian Government rebate received | K | \$180.00 |
| Benefit code | L | 31 | Tax claim code | | C |

PROVIDER INFORMATION 2

| | | | | | |
|--------------------------|----------|------------|--|----------|----------|
| Health insurer ID | B | HCF | Membership number | C | K74673 |
| Your rebatable component | J | \$2,120.00 | Your Australian Government rebate received | K | \$531.00 |
| Benefit code | L | 30 | Tax claim code | | C |

Spouse details – married or de facto

YOUR SPOUSE'S NAME

| | | | |
|---------------------------|----------|-------------|--|
| First given name | Brett | | |
| Other given names | Thomas | | |
| Surname or family name | Jenkins | | |
| Date of birth | K | 14 Dec 1971 | |
| Your spouse's gender | Male | | |
| Your spouse has residency | | | |

PERIOD YOU HAD A SPOUSE – MARRIED OR DE FACTO

| | | |
|---|----------|-----|
| Did you have a spouse for the full year | L | Yes |
| Did your spouse die during the year? | | No |

THIS INFORMATION RELATES TO YOUR SPOUSE'S INCOME

| | | |
|---|----------|-------------|
| Your spouse's taxable income (excluding FHSS released amounts) | O | \$90,193.00 |
| Your spouse's taxable income | | \$90,193.00 |
| Your spouse's assessable FHSS released amounts | | |
| Your spouse's section 98 trust income – not included in spouse's taxable income | T | |
| Distributions to your spouse on which family trust distribution tax has been paid | U | |
| Your spouse's total reportable fringe benefits amount | | |

| | | |
|---|----------|---------------------|
| Employers exempt from FBT under section 57A of the FBTA 1986 | R | \$0.00 |
| Employers not exempt from FBT under section 57A of the FBTA 1986 | S | \$0.00 |
| Amount of any Australian Government pensions and allowances received by your spouse in the year of the return | P | |
| Amount of any exempt pension income received by your spouse in the year of the return | Q | |
| Spouse reportable superannuation contributions | A | \$32,767.00 |
| Spouse reportable employer superannuation contributions | | \$2,206.00 |
| Spouse deductible personal superannuation contributions | | \$30,561.00 |
| Your spouse's tax-free government pensions | B | \$0.00 |
| Your spouse's target foreign income | C | \$0.00 |
| Your spouse's foreign income | | |
| Your spouse's exempt foreign employment income | | \$0.00 |
| Your spouse's net investment loss | D | \$0.00 |
| Your spouse's net financial investment loss | | \$0.00 |
| Your spouse's net rental property loss | | \$0.00 |
| Child support your spouse paid | E | \$0.00 |
| Your spouse's taxed element of a SLS zero tax rate | F | |
| Your spouse's total ATI amount | | \$122,960.00 |
| Your spouse's rebate income | | \$122,960.00 |
| Your spouse's assessable income | | \$145,020.00 |

Supplementary section

13 PARTNERSHIPS AND TRUSTS

Non-primary production

| | | | |
|--|----------|--------------------|---|
| Share of net income from trusts less capital gains, foreign income and franked distributions | U | \$27,000.00 | T |
| Net non-primary production amount | | \$27,000.00 | |

| | | |
|---|----------|-------------|
| Trust share of net small business income less deductions attributable to that share | E | \$27,000.00 |
|---|----------|-------------|

15 NET INCOME OR LOSS FROM BUSINESS

| | | |
|---|----------|------------|
| Primary production – transferred from Y item P8 | B | |
| Non-primary production – transferred from Z item P8 | C | \$3,579.00 |
| Are you a small business entity? | | Yes |
| Net small business income | A | \$3,579.00 |
| Tax withheld – voluntary agreement | D | |
| Tax withheld where Australian business number not quoted | W | |
| Tax withheld – foreign resident withholding (excluding capital gains) | E | |
| Tax withheld – labour hire or other specified payments | F | |

18 CAPITAL GAINS

Did you have a capital gains tax event during the year? **G** No

Prior year losses brought forward

Net capital losses from collectables \$0.00

Other net capital losses \$4,016.00

Losses carried forward

Net capital losses from collectables \$0.00

Other net capital losses \$4,016.00

Net capital losses carried forward to later income years **V** \$4,016.00

19 FOREIGN ENTITIES

Did you have either a direct or indirect interest in a controlled foreign company CFC? **I** No

Have you **ever**, either directly or indirectly, caused the transfer of property—including money—or services to a non-resident trust estate? **W** No

20 FOREIGN SOURCE INCOME AND FOREIGN ASSETS OR PROPERTY

Exempt foreign employment income **N** \$0.00

During the year did you own, or have an interest in, assets located outside Australia which had a total value of AUD\$50,000 or more? **P** No

21 RENT

Gross rent **P** \$6,500.00

Interest deductions **Q** \$0.00

Capital works deductions **F** \$0.00

Other rental deductions **U** \$1,243.00

Net rent P less (Q + F + U) \$5,257.00

TOTAL SUPPLEMENT INCOME Items 13 to 24 **\$35,836.00**

Deductions**D12 PERSONAL SUPERANNUATION CONTRIBUTIONS**

Did you provide your fund (including a retirement savings account) with a notice of intent to claim a deduction for personal superannuation contributions, and receive an acknowledgement from your fund? Yes

Deductions claimed **H** \$30,561.00

TOTAL SUPPLEMENT DEDUCTIONS Items D11 to D15 **\$30,561.00**

Tax offsets

TOTAL SUPPLEMENT TAX OFFSETS Items T3, T4, T6, T7, T8 and T9

Business and professional items section

P1 PERSONAL SERVICES INCOME (PSI)

Did you receive any personal services income? Yes

Part A

Did you satisfy the results test? P Yes

P2 DESCRIPTION OF MAIN BUSINESS OR PROFESSIONAL ACTIVITY

Caretaking service Industry code A 77120

P3 NUMBER OF BUSINESS ACTIVITIES B 1

P4 STATUS OF YOUR BUSINESS C2 Commenced business

P5 BUSINESS NAME OF MAIN BUSINESS AND AUSTRALIAN BUSINESS NUMBER (ABN)

Gail Jenkins ABN: 73692176630

P6 BUSINESS ADDRESS OF MAIN BUSINESS

58 Boree Street

Suburb or Town: BARCALDINE State or Territory: QLD Postcode: 4725

P8 BUSINESS INCOME AND EXPENSES

| Income | PP | NPP | Totals |
|---|----|-------------------|-------------------|
| Other business income | | \$3,579.00 | \$3,579.00 |
| Total other business income I J | | \$3,579.00 | \$3,579.00 |
| Total business income | | \$3,579.00 | \$3,579.00 |
| Expenses | PP | NPP | Totals |
| All other expenses | | \$0.00 P | \$0.00 |
| Total expenses S T | | \$0.00 | \$0.00 |
| Net income or loss from business this year B C | | \$3,579.00 | \$3,579.00 |
| Net income or loss from business Y Z | | \$3,579.00 | \$3,579.00 |

Rental schedule — 117 Fir Street, Barcaline QLD 4725

| Address | Town/City | State | Postcode |
|----------------|-----------|-------|----------|
| 117 Fir Street | Barcaline | QLD | 4725 |

Name of property

Date property first earned rental income 22/09/2016

Number of weeks property was rented this year 52

The number of weeks the property was available for rent this year 52

Entity's % ownership 50

Has the loan for the property been renegotiated this year? No

| Acquisitions and Disposal | Date | Amount |
|---|------|--------|
| Acquisition | | |
| Disposal | | |
| Capital gain/loss on sale of this property | | |
| Value of capital allowances (depreciation on plant) recouped on the sale of the property | | |
| Value of capital works deductions (special building write-off) recouped on the sale of the property | | |

Owners

| Name | TFN | Percentage |
|----------------|--------------|------------|
| Jenkins, Gail | TFN Recorded | 50% |
| Jenkins, Brett | TFN Recorded | 50% |
| | | 100% |

Income / Expenses

| Income | | Gross | My share |
|-------------------|----------|--------------------|-------------------|
| Rental income | A | \$13,000.00 | \$6,500.00 |
| Gross rent | C | \$13,000.00 | \$6,500.00 |

Expenses

| | | | |
|--------------------------|----------|--------------------|-------------------|
| Council rates | H | \$2,289.50 | \$1,144.75 |
| Capital allowance assets | I | \$197.00 | \$98.50 |
| Total expenses | W | \$2,486.50 | \$1,243.25 |
| Total net rent | X | \$10,513.50 | \$5,256.75 |

Partnership and trust worksheet

Name of Trust Distributed from B & G Jenkins Family Trust

PRIMARY PRODUCTION

Share of net income from trusts **L**

Deductions relating to Distribution from partnerships and Share of net income from trusts **X**

Net primary production amount

NON-PRIMARY PRODUCTION

Share of net income from trusts less capital gains, foreign income and franked distributions –
Managed investment scheme income \$0.00

Share of net income from trusts less capital gains, foreign income and franked distributions – other
income \$27,000.00

Share of net income from trusts less capital gains, foreign income and franked distributions **U** \$27,000.00

Franked distributions from trusts relating to investments

Franked distributions from trusts – other

Franked distributions from trusts **C**

Managed investment scheme deductions relating to amounts shown at U and C

Other deductions relating to distributions shown at O, U and C

Other deductions relating to amounts shown at O, U and C **Y**

Net non-primary production amount \$27,000.00

Trust share of net small business income less deductions attributable to that share **E** \$27,000.00

SHARE OF CREDITS FROM INCOME AND TAX OFFSETS

Share of credit for tax withheld where Australian business number not quoted **P**

Share of franking credit from franked dividends **Q**

Share of credit for TFN amounts withheld from interest, dividends and unit trust distributions **R**

Credit for TFN amounts withheld from payments from closely held trusts **M**

Share of credit for tax paid by trustee **S**

Share of income from trusts

Share of credit for amounts withheld from foreign resident withholding **A**

Share of National rental affordability scheme tax offset **B**

Payment summary worksheet

PAYMENT SUMMARY WORKSHEET - AUSTRALIAN

Payer's name DEPARTMENT OF HEALTH QLD

Single Touch Payroll finalised Yes

ABN 66329169412

| | | Tax Withheld | Gross | Type |
|------------------|--------|--------------|-------------|------|
| Salary and wages | Item 1 | \$16,096.00 | \$55,248.00 | S |

Worksheets

10 GROSS INTEREST

| Financial Institution | No. of Account Holders | Percent | Gross Tax Withheld | Gross Interest | Shared Tax Withheld | Shared Interest |
|-----------------------------|------------------------|---------|--------------------|----------------|---------------------|-----------------|
| WESTPAC BANKING CORPORATION | 1 | 100% | \$0.00 | \$4.96 | \$0.00 | \$4.96 |
| Total | | | \$0.00 | \$4.96 | \$0.00 | \$4.96 |

15 NET SMALL BUSINESS INCOME DETAILS

| | |
|---|-------------------|
| Net income/loss from business - primary production (Item 15B) | |
| Net income/loss from business - non primary production (Item 15C) | \$3,579.00 |
| Withdrawals from farm management deposits (Items 17N, 17R) | |
| Adjustment to the withdrawals from farm management deposits (Items 17N, 17R) | |
| Foreign source business income (Items 19, 20) | |
| Business interest income (Item 10) | |
| Business dividend income (Item 11) | |
| Other business income | |
| Sub-total | \$3,579.00 |
| Less deductible deposits to farm management deposits (Item 17D) | |
| Less adjustment to the deductible deposits to farm management deposits (Item 17D) | |
| Less other business deductions | |
| Total | \$3,579.00 |

18 CAPITAL GAINS

| | |
|--------------------------------------|-------------------|
| Net capital losses from collectables | |
| Description | Amount |
| Prior year losses brought forward | \$0.00 |
| Prior year losses brought forward | \$0.00 |
| Total | \$0.00 |
| Other net capital losses | |
| Description | Amount |
| Prior year losses brought forward | \$0.00 |
| Prior year losses brought forward | \$4,016.00 |
| Total | \$4,016.00 |

D3 WORK-RELATED CLOTHING, LAUNDRY AND DRY CLEANING EXPENSES

| Description | Code | Amount |
|-------------------------|---------------------|-----------------|
| Laundry and Maintenance | Protective clothing | \$75.00 |
| Uniforms | Protective clothing | \$92.75 |
| Total | | \$167.00 |

D5 OTHER WORK-RELATED EXPENSES

| Description | Expense | Percentage | Claim Amount |
|--------------|-----------------|------------|-----------------|
| UNION FEES | \$580.80 | 100% | \$580.80 |
| Textbooks | \$151.25 | 100% | \$151.25 |
| Supplies | \$48.80 | 100% | \$48.80 |
| AHPRA | \$180.00 | 100% | \$180.00 |
| Total | \$960.85 | | \$960.85 |

D12 DEDUCTIONS CLAIMED

| Fund name | Account number | Deduction claimed | Fund ABN | Fund TFN |
|-------------------------------|----------------|--------------------|-------------|----------|
| Jenkins Dream Retirement Fund | | \$30,561.85 | 29468223825 | 0 |
| Total | | \$30,561.85 | | |

Asset Depreciation for period 1 Jul 2020 to 30 Jun 2021

Rental - 117 Fir Street, Barcaline QLD 4725

| | | | | | | Balancing adjustments | | | | | | | | |
|-----------------------------|--------------|------|--------------|------------|------------|-----------------------|----------------|------------|------------|-----------------|------------------|------------|------------------|------------|
| Date Purchased | Description | Type | Cost | Cost Limit | OWDV | Date | Disposal Value | Assessable | Deductible | Method / Rate % | Decline in value | Bus. Use % | Business Decline | CWDV |
| I CAPITAL ALLOWANCES | | | | | | | | | | | | | | |
| 15/08/2016 | Cooktop | OTH | 945 | | 398 | | | | | DV/20.00 | 80 | 100.00 | 80 | 318 |
| 15/08/2016 | Oven | OTH | 1,059 | | 446 | | | | | DV/20.00 | 89 | 100.00 | 89 | 357 |
| 15/08/2016 | Vacuum | OTH | 330 | | 139 | | | | | DV/20.00 | 28 | 100.00 | 28 | 111 |
| | Total | | 2,334 | | 983 | | | | | | 197 | | 197 | 786 |