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).

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_	Superamination onlines form (14 th	0000/.	<u> </u>			
Se	ection A: Fund info	rmation		⋒ To	assist processing	. write the fund's
1	Tax file number (TFN)	905 352 731				
	7751 All to the form 0 F 7 o	it ration.				
2	Name of self-managed su	perannuation fund (SM	SF)			
Hi	Ilcrest Superannuation Fund					
3	Australian business numb	er (ABN) (if applicable)	41 308 993	431		
4	Current postal address					
C/	- The Rogers Group					
P	D Box A308					
Sub	urb/town				State/territory	Postcode
S	ONEY SOUTH				NSW	1235
5	Annual return status Is this an amendment to the SM Is this the first required return for		A No X Yes [B No X Yes [

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Taxpayer/entity name: Hillcrest Superannuation Fund

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6 SMSF auditor Auditor's name	
Title: Mr X Mrs Miss Ms Other	
Tariny fiamo	
First given name Other given names	
SMSF Auditor Number Auditor's phone number	
Postal address	
Suburb/town State/territory Pos	tcode
Day Month Year	
Date audit was completed A	
Was Part A of the audit report qualified? B No X Yes	
Was Part B of the audit report qualified? C No X Yes	
If the audit report was qualified, have the reported issues been rectified?	
	o you.
Date audit was completed A Was Part A of the audit report qualified? Was Part B of the audit report qualified? Was Part B of the audit report qualified? C No X Yes If the audit report was qualified, have the reported issues been rectified? D No X Yes Telectronic funds transfer (EFT) We need your self-managed super fund's financial institution details to pay any super payments and tax refunds owing to A Fund's financial institution account details	
Hillcrest Superannuation Fund	
I would like my tax refunds made to this account. Go to C.	
B Financial institution account details for tax refunds	
This account is used for tax refunds. You can provide a tax agent account here.	
BSB number Account number	
Account name	
C Electronic service address alias	
Provide the electronic service address alias (ESA) issued by your SMSF messaging provider. (For example, SMSFdataESAAlias). See instructions for more information	
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Taxpayer/entity name: Hillcrest Superannuation Fund

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	Fund's tax file number (TFN) 905 352 731								
8	Status of SMSF Australian superannuation fund A No Yes X Fund benefit structure B A	ode							
	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? Day Month Year Have all tax lodgment								
	No X Yes have all tax loughfeld 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 X Go to Section B: Income.								
	Yes Exempt current pension income amount A\$ -00								
	Which method did you use to calculate your exempt current pension income?								
	Segregated assets method B								
	Unsegregated assets method C Was an actuarial certificate obtained? D Yes								
	Did the fund have any other income that was assessable?								
	E Yes Oo 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.								

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Taxpayer/entity name: Hillcrest Superannuation Fund

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TFN

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Section B: Income

	the retirer	nent phase f	or the entire year	, ther	e was no other incom	e th	at was	were supporting superannuation assessable, and you have not e at Section D: Income tax calc	realis	sed a deferred
11	Income	Did you ha (CGT) e	eve a capital gains event during the y	s tax ear?	G No X Yes	_	or you e deferred	tal capital loss or total capital gain is g elected to use the transitional CGT reli d notional gain has been realised, com gains tax (CGT) schedule 2020.	ief in 2	017 and the
		e	Have you applie exemption or rollo		M No X Yes		Code			
					Net capital gain	A	\$		-00	
		Gro	ss rent and othe	r leas	sing and hiring income	В	\$		90	
					Gross interest	C	\$		90	
			For	estry	managed investment scheme income	X	\$	•	-00	
		Gross forei	gn income		Contente incente					Loss
D	1 \$			-00	Net foreign income	D	\$		90	
-	A	Australian fra	nking credits fron	naN	ew Zealand company	E	\$		90	Number
					Transfers from foreign funds	F	\$		90	Nullibei
				G	ross payments where ABN not quoted	Н	\$		00	
T			sable contributions		Gross distribution from partnerships	ı	\$		00	Loss
R				-00	*Unfranked dividend	J	\$	3	00	
plu		ssable perso	nal contributions	-	amount *Franked dividend	K			00	
plu	2 \$	n-TFN-quote	d contributions	-90	amount *Dividend franking				00	
l'	3 \$	J III quote		-00	credit *Gross trust		\$			Code
les			<i>included even if it is</i> to life insurance	zero)	distributions	M	\$	•	00	
	- T	company		00	Assessable		Φ.		98	
R	6 \$			-90	(R1 plus R2 plus R3 less R6)	R	\$	0	90	
			m's length inco		1					Code
1	et non-arm	's length priv	ate company divid	dends •00	*Other income	S	\$		00	
		n-arm's lengi	 :h trust distributio		*Assessable income due to changed tax	Т	\$		90	
U	2 \$			-00	status of fund					7
plu U:	s *Net c	ther non-arr	n's length income	•00	Net non-arm's length income (subject to 45% tax rate) (U1 plus U2 plus U3)	U	\$		90	
#Tr	nis is a ma el.	Indatory			GROSS INCOME (Sum of labels A to U)	w	\$	0	90	Loss
	an amoun tered at th		Exem	pt cu	rrent pension income	Υ	\$		90	— —— %
to tax	eck the ins ensure the treatmen	structions e correct t has	TOTAL ASSES	SAB	LE INCOME (W /ess Y)			Alle	90	Loss
_	en applied t complete	: 14/07/2020) : 18:09		Sensitive (when ca	omi	oleted)	1 that	1	Page 4

Taxpayer/entity name: Hillcrest Superannuation Fund

Fund's tax file number (TFN)

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Section C: Deductions and non-deductible expenses

12 Deductions and non-deductible expenses

Dunder '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 EXPENS	SES
Interest expenses within Australia	A1 \$	3	.00	A2 \$		-90
Interest expenses overseas	B1 \$	8	-00	B2 \$		-00
Capital works expenditure	D1 \$	8	-00	D2 \$		-90
Decline in value of depreciating assets	E1 \$	8	-00	E2 \$		-00
Insurance premiums – members	F1 \$	8	-00	F2 \$		-00
SMSF auditor fee	H1 \$	175	0 0.	H2 \$		-90
Investment expenses	I1 \$		-00	12\$		-90
Management and administration expenses	J1 \$	2789	-00	J2 \$		·00
Forestry managed investment scheme expense	U1 \$		-00	U2 \$		- 60
Other amounts	L1 \$		-00	L2 \$		00
Tax losses deducted	M1 \$		-90			
		AL DEDUCTIONS	84	1 1	AL NON-DEDUCTIBLE EXPENSE	:S - 00
	N \$	(Total A1 to M1)	יטע.	Y\$	(Total A2 to L2)	
	#TA>	(ABLE INCOME OR LOSS	-00	Loss TOTA	AL SMSF EXPENSES	-60
#This is a mandatory		TOTAL ASSESSABLE INCOME less	11 - 4		(N plus Y)	

label.

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TOTAL DEDUCTIONS)

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Taxpayer/entity name: Hillcrest Superannuation Fund

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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.

have specified a zero amount.			
13 Calculation statement	#Taxable income	A \$	0 -00
Please refer to the			(an amount must be included even if it is zero)
Self-managed superannuation fund annual return instructions	#Tax on taxable income	T1 \$	0.00
2020 on how to complete the	#Tax or		(an amount must be included even if it is zero)
calculation statement.	no-TFN-quoted	J \$	0.00
	contributions		(an amount must be included even if it is zero)
	Gross tax	В\$	0.00
		_ •	(T1 plus J)
Foreign income tax offset			
C1\$	0.00		
Rebates and tax offsets	0.00	Non-re	efundable non-carry forward tax offsets
C2\$		C \$	0.00
			(C1 plus C2)
		SUBTO	OTAL 1
v		T2 \$	0.00
Early stage venture capital	limited	å	(B less C – cannot be less than zero)
partnership tax offset			
D1\$			
Early stage venture capital l tax offset carried forward fro			
D2\$	on provided year	Non-re	efundable carry forward tax offsets
Early stage investor tax offs	et	D \$	
D3\$	_		(D1 plus D2 plus D3 plus D4)
Early stage investor tax offs	et		
carried forward from previo	us year	SUBTO	OTAL 2
D4\$		ТЗ \$	
			(T2 less D – cannot be less than zero)
Complying fund's franking o	redits tax offset		
E1\$			
No-TFN tax offset			
E2\$			
National rental affordability so	cheme tax offset		
E3\$	SHOTTIO LEX CITEDE		
Exploration credit tax offset		Refund	dable tax offsets
E4\$		E \$	
	4	Ĺ	(E1 plus E2 plus E3 plus E4)
1			
	#TAX PAYABLE	T5 \$	
Į			(T3 less E - cannot be less than zero)

Section 102AAM interest charge

G\$

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		Fund's tax file number (TFN)	905 352 731
	Credit for interest on early payments – amount of interest		
H1\$	Credit for tax withheld – foreign resident withholding (excluding capital gains)		
H2\$	Credit for tax withheld – where ABN		
нз\$	or TFN not quoted (non-individual)		
	Credit for TFN amounts withheld from payments from closely held trusts		
	Credit for interest on no-TFN tax offset		
	Credit for foreign resident capital gains withholding amounts	Eligible credits	
н8\$	With folding amounts	H \$ (H1 plus H2 plus H3 plus H5 plus	s H6 plus H8)
		(iii pad iii pad iii pad iii pad	, 115 plue 115,
	#Tax offset refunds (Remainder of refundable tax offsets)	(unused amount from an amount must be include	0.00 n label E – d even if it is zero)
	1	PAYG instalments raised	
		K \$Supervisory levy	
		L\$	259.00
		Supervisory levy adjustment for w	round up funds
		M \$	
		Supervisory levy adjustment for n	ew funds
		N \$	
	AMOUNT DUE OR REFUNDABLE A positive amount at \$ is what you owe, while a negative amount is refundable to you.	S\$ (T5 plus G less H less I less K p	259.00
#This is	a mandatory label.		
Sect	ion E: Losses		
14 Lo	ia ia	k losses carried forward to later income years	6451 -90
	otal loss is greater than \$100,000, te and attach a <i>Losses schedule</i>	et capital losses carried v \$	-60

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Taxpayer/entity name: Hillcrest Superannuation Fund

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TFN

905 352 731

Section F: Member information

MEMBER 1 Title: Mr X Mrs Miss	Ms Other					
Family name						
Rafael						
First given name		Other given na	mes			
Vangell		Michele				
		Micholo		-	Day Month	Yea
Member's TFN See the Privacy note in the Decla	ration.	114 248 458		Date of birth	03/07/19	53
Contributions	OPENING ACCOL	JNT BALANCE	\$		2918.00	
Refer to instructions		Proceed	s from prin	nary residence dispo	osal	
or completing these		H \$				
		. 1				
Employer contributions		Receipt	date Day	/ Month	Year	
A \$		H1			.,,	
ABN of principal employer		Assessal	ole foreign	superannuation fund	d amount	
A1 \$		I \$				
Personal contributions		Non-ass	essable fo	reign superannuatio	n fund amount	
B \$		J \$				
CGT small business retirement	exemption	Transfer	from reser	ve: assessable amo	unt	
C \$	oxomption		1011110001	70. a00000abio airio		
0 \$		K \$				
CGT small business 15-year ex	emption amount	Transfer	from reser	ve: non-assessable	amount	
D \$		L \$				
		Contribu	tions from	non-complying		
Personal injury election		funds ar	nd previous	sly non-complying f	unds	
E \$				- 7 - 1 - 1 - 1 - 1		
Spouse and child contributions		T \$				
		A				
F \$		Any otne	er contribut a Super Co	ขอกร o-contributions and		
Other third party contributions	- 10	Low Inco	ome Super	o-contributions and Amounts)		
G \$		M \$			500.00	
			_			
	TOTAL CO	NTRIBUTIONS	N \$		500.00	
	(Sum of	labels A to M)				Loss
Other transactions	Allo	cated earnings or losses	0\$		439.00	L
Accumulation phase acc	ount halance	Inward			1	
S1 \$		rollovers and transfers	P \$			
	2979.00	Outward				
Retirement phase acco - Non CDBIS	ount balance	rollovers and	Q \$			
S2\$	0.00	transfers				Code
		Lump Sum payment	R1 \$			
Retirement phase acco	unt balance	Income				Code
S3 \$	0.00	stream	R2 \$			
33 9	0.00	payments	T		#5	ı — i — i
1 TRIS Count	CLOSING ACCO	INT DALANCE	2.2		2070.00	
0 TRIS Count		S2 plus S3)	2 4		2979.00	
					1	15
	Accumulati	on phase value	X1 \$		2979.00	
		ent phase value	X2 \$		11/11	
	Outstanding li borrowing arrang	mited recourse gement amount	Y \$	1	HOH	1
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Taxpayer/entity name: Hillcrest Superannuation Fund

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,	Fund's tax file number (TFN)	905 352 731
MEMBER 2		
Title: Mr Mrs X Miss Ms Other		
Rafael		
First given name	Other given names	
Fabienne	Alana	Day Month Year
Member's TFN	325 999 635 Date of birth	0.110.111.000
See the Privacy note in the Declaration.		
Contributions	ACCOUNT BALANCE \$	18168.00
Refer to instructions		
for completing these labels.	Proceeds from primary residence d	isposai
		Year
Employer contributions A \$	neceipt date	real
ABN of principal employer	H1 Assessable foreign superannuation	fund amount
A1 \$		and arround
Ψ	\$	
Personal contributions	Non-assessable foreign superannu	ation fund amount
B \$	J \$	
CGT small business retirement exemption	Transfer from reserve: assessable a	amount
C \$	K \$	
CGT small business 15-year exemption an	nount Transfer from reserve: non-assessa	able amount
D \$	L \$	
,	Contributions from non-complying	
Personal injury election	funds and previously non-complying	ig funds
E \$	т \$	
Spouse and child contributions	A	
F \$	Any other contributions (including Super Co-contributions a Low Income Super Amounts)	and
Other third party contributions		
G \$	M \$	
тот	TAL CONTRIBUTIONS N \$	
	(Sum of labels A to M)	Loss
Other transactions	Allocated earnings or losses	2525.00 L
Accumulation phase account balance	Inward	
S1 \$ 1564	Tollovoio data P 4	
Retirement phase account balance	Outward	
– Non CDBÍS	transfers	Code
3	0.00 Lump Sum R1 \$	
Retirement phase account balance – CDBIS	e Income	Code
	stream R2 \$	
		45040.00
	ACCOUNT BALANCE \$\$ [S1 plus S2 plus S3]	15643.00
	cumulation phase value X1 \$	15643.00
	· · · · · · · · · · · · · · · · · · ·	10070.00
	Retirement phase value X2 \$	77/1//
Outsta borrowin	anding limited recourse g arrangement amount	1/1/1/1
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Taxpayer/entity name: Hillcrest Superannuation Fund

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ïrst given name		Other given nar	mes			
	202			·	Day Month	Year
Member's TFN See the Privacy note in the Decla	ration.			Date of birth		
Contributions	COENING ACCO	INT DALANCE	¢			1
Refer to instructions	OPENING ACCO		L			
or completing these			s from pri	mary residence dis	posal	
abels.		H \$		NA UI		
Employer contributions A \$		Receipt	date Da	ay Month	Year	
ABN of principal employer		H1	le foreign	superannuation fu	nd amount	
A1 \$			Jie toreigi	1 Superarinaation Tai	TO GITTOGIN	
Ψ		I \$				
Personal contributions			essable fo	oreign superannuat	ion fund amount	
B \$		J \$				
CGT small business retirement	exemption		from rese	erve: assessable an	nount	
C \$		K \$				
CGT small business 15-year ex	emption amount		from rese	erve: non-assessab	le amount	
D \$		L \$				
Personal injury election		Contribu	utions from	n non-complying usly non-complying	funds	
E \$			ia provios	2017 11011 0017110111111	, and s	
Spouse and child contributions	- 1	Т \$				
F \$		Any othe	er contribu	utions	d	
Other third party contributions		Low Inco	ome Supe	Co-contributions an er Amounts)		
G \$		M \$				
		NTRIBUTIONS f labels A to M)	N \$			Loss
Other transactions	Allo	ocated earnings	0\$			
		or losses Inward				<u> </u>
Accumulation phase acco	ount balance	rollovers and transfers	P \$			
Retirement phase acco	ount balance	Outward	Q\$			
- Non CDBIS		rollovers and transfers	_			Code
S2 \$		Lump Sum payment	R1 \$			
Retirement phase acco – CDBIS	unt balance	Income	_			Code
S3 \$		stream payments	R2 \$			
TRIS Count	CLOSING ACCO	UNT BALANCE	ss			
		S2 plus S3)			- James	
	Accumulat	ion phase value	X1 \$	>	~	
	Retirem	ent phase value	X2 \$		2 . 1	
	Outstanding i borrowing arran	imited recourse	Y \$	1	11/10	
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Taxpayer/entity name: Hillcrest Superannuation Fund

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TFN 905 352 731

EMBER 4	7 044						
le: Mr Mrs Miss Ms Ms mily name	Other						
Tilly Harrio							
t given name		Other given na	ames				
					Day	Month	Year
ember's TFN				Date of birth	Day	TPIO/INT	1000
e the Privacy note in the Declaration	1.						
OPE	NING ACCOL	JNT BALANCE	\$				
Refer to instructions		Proceed	ds from pri	mary residence disp	oosal		
els.		H \$					
mployer contributions		Receipt	date Da	y Month	Year	→ 3	
\$		H1					
BN of principal employer		Assessa	ıble foreign	superannuation fur	nd amount		
1 \$		I \$					
are and contributions		- +	sessable fr	oreign superannuat	ion fund an	 nount	
ersonal contributions		J \$					
1							
GT small business retirement exem	ption			rve: assessable am	iount		
		K \$	L				
GT small business 15-year exempt	ion amount			rve: non-assessabl	e amount		
\$		L \$					
ersonal injury election		Contrib funds a	utions fron Ind previou	n non-complying isly non-complying	funds		
\$		т \$					
oouse and child contributions		ι φ					
\$		Any oth	er contribu	itions Co-contributions and	d		
ther third party contributions		Low Inc	ome Supe	co-contributions and er Amounts)		_	
i \$		M \$					
	TOTAL 00	NTRIBUTIONS	N \$				
		f labels A to M)	ИФ				Loss
ther transactions	Allo	cated earnings	0 \$				
		or losses Inward	- 4				L
Accumulation phase account b	palance	rollovers and transfers	P \$				
Retirement phase account	halance	Outward	0.0			j	
- Non CDBIS	Dalatice	rollovers and transfers					Code
S2 \$		Lump Sum	R1 \$				
Retirement phase account b	alance	payment Income					Code
S3 \$		stream payments	R2 \$				
TRIS Count CLC		UNT BALANCE S2 plus S3)	S \$		<		
			V4 6		/_		
		ion phase value				~~	$\overline{}$
		ent phase value	1		11	1	(X
ho	Outstanding li	mited recourse gement amount	Y \$	Λ		11	7
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Taxpayer/entity name: Hillcrest Superannuation Fund

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MEMBER 5 Title: Mr	Section G: Suppleme	ntary m	ember information
Series per name Other given names If deceased, date of death by word war like the process of t	MEMBER 5	_	
Date of birth West	Title: Mr Mrs Miss Ms	Other	Account status
Member's TFN See the Privacy note in the Declaration. OPENING ACCOUNT BALANCE \$ Proceeds from primary residence disposal H \$ Employer contributions A \$ \$ ASN of principal employer A1 \$ \$ I \$ Personal contributions B \$ CGT small business retirement exemption C \$ CGT small business retirement exemption C \$ CGT small business retirement exemption amount D \$ Personal injury election E \$ Spouse and child contributions F \$ Characteristics Allocated earnings Other transactions Allocated earnings Cody and sibelia A to M) Children the party contributions Allocated earnings Other transactions Allocated earnings Cody and sibelia A to M) Children the party contributions F \$ Retirement phase account balance - Non CDSIS Retirement phase account balance - CDBIS TRIS Count CLOSING ACCOUNT BALANCE \$ If deceased, date of death Mathematics If deceased, date of death Mathematics F Proceeds from primary residence disposal H \$ H1 Assessable foreign superannuation fund amount I \$ Security appriment form reserve: assessable amount K \$ Contributions from reserve: non-assessable amount K \$ Contributions from reserve: non-assessable amount K \$ Contributions from non-complying funds T \$ Spouse and child contributions (including Super Co-contributions and Low income Super Amounts) M \$ Cody and whether the party contributions (including Super Co-contributions and Low income Super Amounts) N \$ Code Inverted P \$ Inverted Code Code Inverted Code Cod	Family name		
Member's TFN See the Privacy note in the Declaration. OPENING ACCOUNT BALANCE \$ Proceeds from primary residence disposal H \$ Employer contributions A \$ \$ ASN of principal employer A1 \$ \$ I \$ Personal contributions B \$ CGT small business retirement exemption C \$ CGT small business retirement exemption C \$ CGT small business retirement exemption amount D \$ Personal injury election E \$ Spouse and child contributions F \$ Characteristics Allocated earnings Other transactions Allocated earnings Cody and sibelia A to M) Children the party contributions Allocated earnings Other transactions Allocated earnings Cody and sibelia A to M) Children the party contributions F \$ Retirement phase account balance - Non CDSIS Retirement phase account balance - CDBIS TRIS Count CLOSING ACCOUNT BALANCE \$ If deceased, date of death Mathematics If deceased, date of death Mathematics F Proceeds from primary residence disposal H \$ H1 Assessable foreign superannuation fund amount I \$ Security appriment form reserve: assessable amount K \$ Contributions from reserve: non-assessable amount K \$ Contributions from reserve: non-assessable amount K \$ Contributions from non-complying funds T \$ Spouse and child contributions (including Super Co-contributions and Low income Super Amounts) M \$ Cody and whether the party contributions (including Super Co-contributions and Low income Super Amounts) N \$ Code Inverted P \$ Inverted Code Code Inverted Code Cod	First given name		Other given names
See the Privacy note in the Declaration. De	THO GIVEN HAINE		
Refer to instructions or completing these abels. Employer contributions A \$ H \$ Receipt date Day Morrith Year H1 Assessable foreign superannuation fund amount I \$ S S S S S S S S S	Member's TFN See the Privacy note in the Declaration		
Proceeds from primary residence disposal Proceeds from primary residence disposal H \$ Employer contributions A \$ H1 Assessable foreign superannuation fund amount A1 \$ I \$ Non-assessable foreign superannuation fund amount J \$ Non-assessable foreign superannuation fund amount K \$ CGT small business retirement exemption C \$ CGT small business 15-year exemption amount D \$ Personal injury election E \$ Spouse and child contributions F \$ Contributions from non-complying funds T \$ Spouse and child contributions M \$ TOTAL CONTRIBUTIONS M \$ TOTAL CONTRIBUTIONS N \$ CONTRIBUTIONS Accoumulation phase account balance Non CDBIS Proceeds from primary residence disposal H \$ Recelpt date Day Moreth Pass Non-assessable foreign superannuation fund amount K \$ Transfer from reserve: assessable amount K \$ Transfer from reserve: non-assessable amount L \$ Contributions from non-complying funds T \$ Contributions from non-complying fun	Contributions		LINIT DALANICE C
Proceeds from primary residence disposal abels. Employer contributions A \$		ENING ACCOU	
Employer contributions A \$	for completing these		
A \$			
ABN of principal employer A1 \$			necelpi date
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CGT small business 15-year exemption amount D\$ Contributions from non-complying funds and previously non-complying fund	CGT small business retirement exen	nption	Transfer from reserve: assessable amount
Personal injury election Contributions from non-complying funds E \$			K \$
Personal injury election Contributions from non-complying funds E \$	CGT small business 15-year exemp	tion amount	Transfer from reserve: non-assessable amount
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Spouse and child contributions F \$	E \$		
Other third party contributions G \$	Spouse and child contributions		\$
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TOTAL CONTRIBUTIONS (Sum of labels A to M) Other transactions Allocated earnings or losses or	Other third party contributions		(including Super Co-contributions and Low Income Super Amounts)
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TRIS Count CLOSING ACCOUNT BALANCE \$ \$ Code Closing Account balance	Retirement phase account	balance	Outward rollovers and O \$
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S3 \$ stream R2 \$ payments TRIS Count CLOSING ACCOUNT BALANCE S \$ (S1 plus S2 plus S3) Accumulation phase value X1 \$	Retirement phase account I - CDBIS	balance	Income
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Accumulation phase value X1 \$	TRIS Count CLC		

Outstanding limited recourse borrowing arrangement amount

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Self managed superannuation fund return 2020 Taxpayer/entity name: Hillcrest Superannuation Fund

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MEMBER 6 Title: Mr Mrs Miss Ms Ms	Other					Account status	Code s
Family name							
First given name		Other given na	ames				
Member's TFN See the Privacy note in the Declaration		of birth Month Year			If deceased, date	of death Year	
Dec the Frivacy Hote in the Boolardae	. Day	WORLD TO SEE]	55,		
	NING ACCO	JNT BALANCE	\$				
Refer to instructions for completing these		Proceed	ds from	primary	/ residence disposal		
labels.		H \$					
Employer contributions		Receipt	t date	Day	Month Year		
A \$		H1					
ABN of principal employer		Assessa	able fore	jgn sup	erannuation fund amou	unt	
A1 \$		I \$					
Personal contributions		Non-as	sessabl	e foreig	n superannuation fund	l amount	
В \$		J \$					
CGT small business retirement exem	ntion	·		eserve:	assessable amount		
C \$	ption	K \$	-		addeddable arriodin		
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	iori arrioarii	L \$	-	eserve.	HOH-assessable afficu	TIC	
				from no	n-complying		
Personal injury election		funds a	and prev	viously r	non-complying funds		
E \$		T \$					
Spouse and child contributions		·					
F \$		Any oth (includir	ner cont ng Supe	ribution: er Co-co	s ontributions and nounts)		
Other third party contributions			-	uper Am	nounts)		
G \$		М \$					
		NTRIBUTIONS f labels A to M)	N \$			Los	SS
Other transactions	Allo	ocated earnings or losses					
Accumulation phase account b	alance	Inward rollovers and					
S1 \$		transfers	. •				
Retirement phase account I	palance	Outward rollovers and	Q \$				
- Non CDBIS		transfers				Cod	de T
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TRIS Count CLO		UNT BALANCE	S \$				
		<u>\$2 <i>plus</i> \$3)</u> ion phase value	V4 ¢		-		=
		·	•				\ \
		ent phase value			1117	* A)
lod	Outstanding I rowing arrang	imited recourse gement amount	Y \$		4/1/	11	
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Taxpayer/entity name: Hillcrest Superannuation Fund

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Tries: Mr Mes Mes Mes Other Mes Other Mes Other Mes Mes Other Mes Mes Other Mes	MEMBER 7	Code
First given name Contributions	Title: Mr Mrs Miss Ms Other	Account status
Member's TFN See the Privacy note in the Declaration. Opening Account Balance or completing these abols. H See the Privacy note in the Declaration. Opening Account Balance or completing these abols. H See the Privacy note in the Declaration. Opening Account Balance or completing these abols. H See the Privacy note in the Declaration. Opening Account Balance or completing these abols. H See the Privacy note in the Declaration. Opening Account Balance or completing these abols. H See the Privacy note in the Declaration. Opening Account Balance or completing these abols. Proceeds from primary residence disposal H See the Privacy note of birth by twen twen primary residence disposal H See the Privacy note of birth by twen twen primary residence disposal H See the Privacy note of birth by twen twen primary residence disposal H See the Privacy note of birth by twen twen primary residence disposal H See the Privacy note of birth by twen twen primary residence disposal H See the Privacy note of bips and the seed that the seed tha	Family name	
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See the Privacy note in the Declaration. De	rirst given name	Other givermanies
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A \$	Employer contributions	
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CGT small business retirement exemption C \$		
CGT small business 15-year exemption amount D\$ Personal injury election E\$ Spouse and child contributions F\$ Any other contributions (Including Super Co-contributions and Low Income Super Amounts) M\$ TOTAL CONTRIBUTIONS (Sum of labels A to M) Other transactions Accumulation phase account balance Non CDBIS Retirement phase account balance - CDBIS S1 \$ Retirement phase account balance - CDBIS S2 \$ Long S2 plus S3) K \$ Transfer from reserve: non-assessable amount L \$ Contributions from non-complying funds T \$ Any other contributions and Low Income Super Amounts) N \$ Loss Other transactions Accumulation phase account balance - Non CDBIS S2 \$ Long S2 plus S3)	В	J \$
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Personal injury election Personal injury election E \$ Spouse and child contributions F \$ Any other contributions (including Super Co-contributions and Low Income Super Amounts) TOTAL CONTRIBUTIONS	1	
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Spouse and child contributions F \$	E \$	
Other third party contributions G \$	Spouse and child contributions	3
TOTAL CONTRIBUTIONS (Sum of labels A to M) Other transactions Allocated earnings or losses or losses Inward rollovers and transfers Retirement phase account balance - Non CDBIS Retirement phase account balance - CDBIS Retirement phase account balance - CDBIS Retirement phase account balance Stream payment Stream paymen	F \$	Any other contributions
TOTAL CONTRIBUTIONS N\$ (Sum of labels A to M) Accumulation phase account balance S1 \$ Retirement phase account balance - Non CDBIS Retirement phase account balance - Code -	Other third party contributions	Low Income Super Amounts)
(Sum of labels A to M) Other transactions Allocated earnings or losses or		M \$
(Sum of labels A to M) Other transactions Allocated earnings or losses or		21.0
Accumulation phase account balance S1 \$ Retirement phase account balance - Non CDBIS Retirement phase account balance - CDBIS Retirement phase account balance - CDBIS TRIS Count CLOSING ACCOUNT BALANCE S1 \$ Accumulation phase account balance Inward rollovers and transfers Outward rollovers and transfers Code Lump Sum payment Income stream payments TRIS Count CLOSING ACCOUNT BALANCE S1 plus S2 plus S3)		(Sum of labels A to M)
Accumulation phase account balance S1 \$ Retirement phase account balance - Non CDBIS Retirement phase account balance - CDBIS Retirement phase account balance - CDBIS TRIS Count CLOSING ACCOUNT BALANCE S1 plus S2 plus S3) Code Code Code Code Code Code S1 plus S2 plus S3)		Allocated earnings
Accumulation phase account balance Retirement phase account balance - Non CDBIS Retirement phase account balance - Non CDBIS Retirement phase account balance - CDBIS Retirement phase account balance - CDBIS TRIS Count CLOSING ACCOUNT BALANCE (S1 plus S2 plus S3)		01103363
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Retirement phase account balance - Non CDBIS Retirement phase account balance - CDBIS Retirement phase account balance - CDBIS TRIS Count CLOSING ACCOUNT BALANCE S1 plus S2 plus S3)		Outward
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S3 \$ Income stream payments R2 \$ payments Code Stream payments R2 \$ S1 plus S2 plus S3	S2 \$	Code
S3 \$ stream R2 \$ payments TRIS Count CLOSING ACCOUNT BALANCE S \$ (S1 plus S2 plus S3)	Retirement phase account balance	Codo
TRIS Count CLOSING ACCOUNT BALANCE \$\$ (S1 plus S2 plus S3)		stream R2 \$
(S1 plus S2 plus S3)		payments
Accumulation phase value X1 \$	-	
	Accu	imulation phase value X1 \$
Retirement phase value X2 \$	Re	etirement phase value X2 \$
Outstanding limited recourse borrowing arrangement amount	Outstan borrowing	arrangement amount Y \$
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Self managed superannuation fund return 2020 Taxpayer/entity name: Hillcrest Superannuation Fund

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MEMBER 8	Code
Title: Mr Mrs Miss Ms Other	Account status
Family name	
	Other ships nones
First given name	Other given names
Member's TFN	Date of birth If deceased, date of death
See the Privacy note in the Declaration.	y Month Year Day Month Year
Contributions OPENING A	CCOUNT BALANCE \$
Refer to instructions	
for completing these labels.	Proceeds from primary residence disposal H \$
Employer contributions	
A \$	Receipt date Day Month Year
ABN of principal employer	Assessable foreign superannuation fund amount
A1 \$	
-	
Personal contributions	Non-assessable foreign superannuation fund amount
В \$	J \$
CGT small business retirement exemption	Transfer from reserve: assessable amount
c \$	K \$
CGT small business 15-year exemption amo	
D \$	L \$
Personal injury election	Contributions from non-complying funds and previously non-complying funds
E \$	
Spouse and child contributions	т \$
F \$	Any other contributions
Other third party contributions	(including Super Co-contributions and Low Income Super Amounts)
G \$	M \$
	L CONTRIBUTIONS N \$
Other transactions	Allocated earnings or losses
	or losses
Accumulation phase account balance	rollovers and transfers
S1\$	Outward
Retirement phase account balance - Non CDBIS	rollovers and transfers Code
S2 \$	Lump Sum P1 &
Retirement phase account balance – CDBIS	payment D D Code
S3 \$	stream R2 \$
	The American
	CCOUNT BALANCE \$\$
	In plus S2 plus S3) Imulation phase value X1 \$
	etirement phase value X2 \$
Outstar borrowing	ding limited recourse arrangement amount
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Taxpayer/entity name: Hillcrest Superannuation Fund

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Section H: Assets and liabilities

15 ASSETS

15a	Australian managed investments	Listed trusts	A \$	
	_			

-00 Unlisted trusts **B**\$

	Insurance policy Other managed investments				-90	
						-90
b Australian direct investments	C	Cash and term deposits	Ε	\$	18622	-90
Limited recourse borrowing arrangem Australian residential real property	nents	Debt securities	F	\$		-90
J1 \$	-00	Loans	G	\$		-90
Australian non-residential real property	-	Listed shares	Н	\$		-90
J2 \$ Overseas real property	-90	Unlisted shares	I	\$		96-
J3 \$ Australian shares	.00	Limited recourse orrowing arrangements	J	\$]- 9 0
J4 \$	-00	Non-residential	K	\$		-00
Overseas shares		real property Residential				1
J5 \$	-00	real property	L	\$		-00
Other	86	Collectables and personal use assets	M	\$		-90
J6 \$ Property count	-90	Other assets	0	\$		-90
J7 \$	1					

15c Other investments		Crypto-Currency	N	\$	-00
15d Overseas direct investments		Overseas shares	P	\$	-00
		Overseas non-residential real property	Q	\$	-90
		Overseas residential real property	R	\$.60
		Overseas managed investments	s	\$] - 60
		Other overseas assets	Т	\$	-60
	TOTAL AUS	STRALIAN AND OVERSEAS ASSETS (Sum of labels A to T)	U	\$ 18622	-90

15e In-house assets

Did the fund have a loan to, lease to or investment in, related parties (known f Xas in-house assets) at the end of the income year?

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Taxpayer/entity name: Hillcrest Superannuation Fund

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	A borrowings om a licensed al institution?	A No Yes Yes				
16 LIABILITIES Borrowings for limited recourse						
borrowing arrangements V1 \$	-90					
Permissible temporary borrowing	ıs					
V2 \$Other borrowings	-90					
V3 \$	-90	Borrowings	٧	\$		-00
Total (total of all CLOSING ACCOUNT I		ng account balances om Sections F and G)	W	\$	18622	-90
		Reserve accounts	X	\$		-00
		Other liabilities	Y	\$		-90
		TOTAL LIABILITIES	Z	\$	18622	-90
Section I: Taxation of 1 17 Taxation of financial arrange			_	•		-00
		Total TOFA losses	\$			-90
If revoking or varying	making, a fam lection (for exa a family trust e	ly trust election, write the mple, for the 2019–20 in election, print R for revok family trust election, revo	ncor (e or	me year, write 202 r print V for variati	20. A	
Interposed entity election status If the trust or fund has an exis	ting election, v	rite the earliest income y	year rliest	specified. If the to t income year bei	rust	
	_	interposed entity election			. D	
		ne Interposed entity elec		1.	10.	Page 17
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Taxpayer/entity name: Hillcrest Superannuation Fund

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^{TFN} 905 352 731

Section K:	Dec	laratio	ns
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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.

Privacy

The ATO is authorised by the *Taxation Administration Act 1953* to request the provision of tax file numbers (TFNs). 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 scriedules and additional documentation is true and correct.

Authorised trustee's, director's	public officer's signatu	ure	χ.	
	1 Get 1		Date	Day Month Year (6 - 07 - 20 20)
Preferred trustee or direct	ctor contact details:		\wedge	/
Title: Mr X Mrs Miss	Ms other			
Family name				
Rafael				
First given name		Other given names		
Vangell				
Phone number 02 920 Email address	677655			
Non-individual trustee name (if	applicable)			
Hillcrest Nominees (NS	SW) Pty Limited			
ABN of non-individual trustee				
Т	ime taken to prepare and	d complete this annual return		Hrs
The Commissioner of Tax you provide on this annual reto	ation, as Registrar of the urn to maintain the integi	e Australian Business Register rity of the register. For further	r, may use th information,	e ABN and business details which refer to the instructions.
TAX AGENT'S DECLARAT I declare that the Self-mainformation provided by the tris true and correct, and that the Tax agent's signature	naged superannuation ustees, that the trustees	s have given me a declaration	on stating th	n prepared in accordance with nat the information provided to me
			Date	Suy morter
Tax agent's contact detai	ile			
Title: Mr Mrs Miss	Ms 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 02 9267 7655		ference number		Tax agent number
Postal address for annual	l returns: Australian Tax	ation Office, GPO Box 9845	i, iy oya c	Arita dity
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Form F
Hillcrest Superannuation Fund
File no 905 352 731

ABN

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Other Income 2020

Client ref

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Other	Other Income					
Code	Description	Amoun				
0	Other income received not listed					
Total						
TOtal						
Total						
	deductions					

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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	905 352 731	Year of return	2020
Name of Partnership, Trust, Fund or Entity	Hillcrest Superannuation Fund		
Total Income/Loss	Total Deductions 2964	Taxable I	ncome/Loss -2964

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 disclose it to other government agencies, including personal information about the person authorised to sign the declaration. For information about 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.

I authorise my tax agent to electronically transmit this tax return via an approved ATO electronic channel.

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:

* all the information I have provided to my registered tax agent for the preparation of this tax return, including any applicable schedules is true and correct, and

* I authorise the agent to give this document to the omn

Signature of Partner, Trustee or Director

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 an approved ATO electronic channel.

This declaration must be signed by the partner, trustee, director or public officer 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:

Hillcrest Superannuation Fund

I authorise the refund to be deposited girectly ed account

Signature

Not complete

14/07/2020: 18:09

PART D

Tax agent's certificate (shared facilities only)

We, The Rogers Group Ltd Partnership declare that:

- * We have prepared this tax return in accordance with the information supplied by the partner, trustee, director or public officer
- * We have received a declaration made by the entity that the information provided to us for the preparation of this tax return is true and correct, and
- * We are authorised by the partner, trustee, director or public officer to lodge this tax return, including any applicable schedules.

Agent's Signature				Date	
Agent's phone Agent's Contact Name Agent's reference number	02 9267 7655 Catriona Rogers 64941004	Cli	ent's reference	HIL	L70

Not complete 14/07/2020 : 18:09

Taxation Estimate For the year ended 30 June 2020

Tax File Number: 905 352 731 Return Code: HILL70 Date prepared: 14/07/2020 Hillcrest Superannuation Fund Description: \$ \$ **Summary of Taxable Income Business and Investment Income:** No-TFN contributions 2,964.00 **Less Deductions** -2,964.00 **Loss to Carry Forward** Tax on Taxable Income **Gross Tax SUBTOTAL T2** Add: 259.00 Supervisory levy 259.00 **TOTAL AMOUNT PAYABLE** 259.00

