Pantano & Kresjka Self Managed

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

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 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 However, you cannot lodge your tax return electronically if you do not quote your TFN.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.

954 088 550 2015 Tax file number Year Name of partnership. Pantano Kresjka Self Managed Superannuation Fund trust, fund or entity

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:

- · the information provided to the 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.

trustee or director



Date

12-08-2021

TFN: 954 088 550

#### 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.

Agent's referen numl				
Account Nan	ne Pantano & Kresjka SMSF			
authorise the refund to I	pe deposited directly to the specified account.			
Signature	Authory Doutour	Date	12-08-2021	

Sensitive (when completed)

Client Ref: PANT0003 Agent: 74856-004

# **Self-managed superannuation fund annual return**

2015

TFN: 954 088 550

#### 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 2015 (NAT 71287).

The Self-managed superannuation fund annual return instructions 2015 (NAT 71606) (the instructions) can assist you to complete this annual return.

Sed	ction A: <b>Fund information</b>				
1	Tax file number (TFN)	954 088 550			
	The Tax Office is authorised by law to requ chance of delay or error in processing your	est your TFN. You are not oblig annual return. See the Privacy	ed to quote your TFN but not note in the Declaration.	quoting it coul	d increase the
2	Name of self-managed superannuat	ion fund (SMSF)			
		Pantano & Kresjka	Self Managed		
		Superannuation Fun	d		
3	Australian business number (ABN)	95 394 296 221			
4	Current postal address	PO Box 354			
		ASPLEY		QLD	4034
6	Is this the first required return for a newly re SMSF auditor				
	Auditor's name Title	Mr			
	Family name	Boys			
	First given name	Anthony			
	Other given names				
	SMSF Auditor Number	100 014 140			
	Auditor's phone number	0410 712708			
	Use Agent address details?	PO Box 3376			
		Rundle Mall		SA	5000
		Date audit was completed	4		
		Was Part B of the audit report	qualified ?		
		If the audit report was qualified compliance issues been rectification.	, have the reported ed?	С	

VISF	Form 2015	Superannuation Fund	vianaged	IFN: 954 0	Trust Account?	age 2 or
	Electronic funds transfer We need your self-managed	<b>r (EFT)</b> super fund's financial institution detail	s to pay any super paym	· ·		
	You must provide the final	letails for super payments and t ncial institution details of your fund's n ent account, you can provide addition	ominated super account		und's	
	Fund BSB number (must be six digits)	Fund account r	umber 22129026			
	Fund account name (for e	xample, J&Q Citizen ATF J&Q Family	SF)			
	Pantano & Kresj	ka SMSF				
	<b>.</b>			Use Agent <sup>-</sup>	Trust Account?	<b>,</b>
	If you would like your fund	letails for tax refunds only i's tax refunds paid to a different accound id to a trustee's personal account. (Se		ancial institution details		
	Fund BSB number (must be six digits)	Account r	umber			
	Fund account name (for e	xample, J&Q Citizen ATF J&Q Family	SF)			

C Electronic service address alias

We will use your electronic service address alias to communicate with your fund about ATO super payments.

8 Status of SMSF Australian superannuation fund Fund benefit structure Code Does the fund trust deed allow acceptance of the

Low Income Super Contribution?

Was the fund wour	nd up during the income year?		
Print <b>Y</b> for yes or <b>N</b> for no.	If yes, provide the date on which fund was wound up	Have all tax lodgment and payment obligations been met?	

**Exempt current pension income** 

Did the fund pay an income stream to one or more members in the income year?  $|\mathbb{N}|$ Print Y for yes or N for no. 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

If No, Go to Section B: Income Exempt current pension income amount A If Yes

Did the fund have any other income that was assessable?

Government's Super Co-contribution and

Which method did you use to calculate your exempt current pension income?

Segregated assets method Unsegregated assets method Was an actuarial certificate obtained? Print Y for yes

П

Choosing 'No' means that you do not have any assessable income, including no-TFN quoted contributions. If No - Go to Section C: Deductions and non-deductible expenses. (Do not complete Section B: Income.)

If Yes, go to Section B: Income

Print Y for yes

or N for no.

1

TFN: 954 088 550

#### Section B: Income

Do not complete this section if your fund was in full pension phase for the entire year and there was no other income that was assessable. If you are entitled to claim any tax offsets, you can record these at Section D: Income tax calculation statement

Income	Did you have a capital gains ta (CGT) event during the year		for yes	greater t	al capital lo: han \$10,00 gains tax (C	0, complete	apital gain is and attach a lle 2015.	
	Have you applied a exemption or rollover		for yes r no.	Code		,		
				Net	capita <b>l</b> gain	Α		
		Gross rent and	d other <b>I</b>	leasing and hir	ing income	В	4,9	37
				Gro	oss interest	С	2,1	38
			Fore	stry managed sche	investment me income	X		
	oreign income							Loss
D1				Net fore	ign income	D		
	Aus	ralian franking cred	its from	a New Zealan	d company	E		Number
					nsfers from reign funds	F		Number
				Gross paym ABN	ents where	H		
	on of assessable contributions sable employer contributions			Gross	distribution artnerships			Loss
R1	0			·	ed dividend amount	J		
R2	ssable personal contributions			* Franke	ed dividend amount	K		
	N-quoted contributions			* Divide	nd franking credit			
(an amount m	nust be included even if it is zero)				Gross trust	М		Code
insurar	fer of liability to life nce company or PST			Assessable co				
R6	0			plus R2 plus f		R		0
Calculatio	on of non-arm's length income							
* Net no	n-arm's length private mpany dividends							<u>Code</u>
U1	mpany dividends			* Ot	her income	S		
plus * Net no	on-arm's length trust distributions			due to c	b <b>l</b> e income hanged tax atus of fund	T		
plus * Net otl	her non-arm's length income		Net n	on-arm's leng (subject to 47 (U1 plus U	th income % tax rate) J2 plus U3)	U		
* If an amoun instructions to	andatory label It is entered at this label, check the Densure the correct tax			GROS	S INCOME bels A to U)	w		Loss
treatment has	s been applied.		Exemp	ot current pens	ion income	Υ		
			TOTAL	ASSESSABL	E INCOME (W less Y)	V	7,1	25 Loss

# Superannuation Fund Section C: **Deductions and non-deductible expenses**

#### 12 Deductions and non-deductible expenses

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

	DEDUCTION	3	NON-DEDUCTIBLE EXPENSES
Interest expense within Austra <b>l</b>	s A1 7,	336	A2
Interest expense oversea	B1		B2
Capital work expenditui	ss <b>D1</b> 1,	592	D2
Decline in value depreciating asse	of <b>E1</b> 3,	391	E2
Insurance premiums membe	_s F1		F2
Death benefit increas	G1		
SMSF auditor fe	e H1	195	H2
Investment expense	es <b>[1</b> 4,	576	12
Management ar administration expense		338	J2
Forestry manage investment scheme expens	ed U1	Code	U2 Code
Other amoun	ts L1	653 0	<b>L2</b> 4,066 O
Tax losses deducte	<b>M1</b>		
	TOTAL DEDUCTION	s	TOTAL NON-DEDUCTIBLE EXPENSES
	N 20,	381	<b>Y</b> 4,066
	(Total A1 to M1)		(Total A2 to L2)
	#TAXABLE INCOME OR L  13,  (TOTAL ASSESSABLE INCOME OR L  TOTAL DEDUCTION	256 L  OME less	TOTAL SMSF EXPENSES 24,447 (N plus Y)
		,	

#This is a mandatory label.

### Section D: Income tax calculation statement

Section B label R3, Section C label O and Section D labels A,T1, J, T5 and I are mandatory.

#### 13 Calculation statement

Please refer to the Self-managed superannuation fund annual return instructions 2015 on how to complete the calculation statement.

#Taxable income A	0
(an amount mus	st be included even if it is zero)
#Tax on taxable income <b>T1</b>	0.00
(an amount mus	st be included even if it is zero)
#Tax on no-TFN- quoted contributions	0.00
(an amount mus	st be included even if it is zero)
Gross tax B	0.00
	(T1 plus J)

TFN: 954 088 550

# Section F / Section G: Member Information Fund

In Section F / G report all current members in the fund at 30 June.
Use Section F / G to report any former members or deceased members who held an interest in the fund at any time during the income year.

								=		
			See the Privac	y note in the [	Declaration.	Manahan Nunah		1		
Title	Mr		Member'sTFN	485 276	021	Member Numb				
Family name	Pantano		Account statu	ıs 🖰 🔾	ode					
First given name	Anthony	Anthony								
Other given names										
		Date of birth	29/06/19	59	If deceased, date of death					
Contributions								_		
Refer to instruction for completing these	-	OPENING	ACCOUNT B	ALANCE	82 <b>,</b>	232.53				
labels.		Emp	loyer contribut	tions A						
		ABN of princ	cipal employer							
		Per	rsona <b>l</b> contribu	tions B	2,	736.99				
	CGT sr	nall business ref	tirement exemp							
	CGT small be	usiness 15-year	exemption am							
		Pers	onal injury elec	ction						
		Spouse and	child contribut	tions						
		Other third	party contribut	tions <b>G</b>						
	Assessable fo	reign superannı	uation fund am	ount						
	Non-assessable fo	oreign superannı	uation fund am	ount J						
	Transfe	r from reserve: a								
		m reserve: non-a								
	а	ributions from no nd previous <b>l</b> y no	n-complying fu	unds <b>ELE</b>						
	Any other contributions and	s (including Supo d Low Income S	er Co-contribut uper Contributi	tions ions)						
		TOTAL	CONTRIBUTIO	ONS N	2,	736.99				
Other transaction	s	Allocated	earnings or los	sses O	15,	172.80 Loss				
		Inward rollo	vers and trans	fers P	17,	712.03				
		Outward rollo	vers and transf	fers Q		Code	ı			
		1	Lump Sum pay	ment R1						
		Inco	me stream pay	ment R2		Code	ı			
		CLOSING AC	COUNT BALA	ANCE S	87,	508.75				

SMSF Form 2015		& Kresjka Self Managed	TFN	I: 954 088 550	Page 8 of 1
15b Australian direct investments	Supera	nnuation Fund Cash and term dep	osits	5.3	3,745
		Debt secu	ırities		
Limited recourse borrowing arrangement	s	L	oans <b>C</b>	•	
Australian residential real property  J1 299, 500		Listed s			
Australian non-residential real property					
J2		Unlisted sl	nares		
Overseas real property		Limited recourse borrowing arrangen	nents J	299	9,500
Australian shares		Non-residential real pro	perty <b>K</b>	3	
Overseas shares		Residential real pro	perty	4.1	1,000
J5		Collectables and personal use a	ssets		
Other		Other a	ssets 0		2,228
J6					
15c Overseas direct investments		Overseas si	nares <b>P</b>		
		Overseas non-residential real pro	perty C	3	
		Overseas residential real pro	perty R	1	
		Overseas managed investr	nents S		
		Other overseas a	ssets		
		TOTAL AUSTRALIAN AND OVERSEAS ASS (Sum of labels A to T)	SETS U	396	6,473
	re <b>l</b> ated par	have a loan to, lease to or investment in, ties (known as in-house assets) f the income year	N		
16 LIABILITIES		Borrov	wings <b>V</b>	239	9,600
(total	of all CLOS	Total member closing account bala SING ACCOUNT BALANCEs from Sections F ar	nces M	150	6 <b>,</b> 873
· ·		Reserve acco			
		Other liab	ilities		
		TOTAL LIABILI	TIES	396	6,473
Section I: <b>Taxation of financial</b> 17 Taxation of financial arrangemen	_				
axadon or infanoial arrangemen	Did you m	/ lake a gain, loss or transitional balancing adjusti n a financial arrangement subject to the TOFA r		Print Y for yes	S
	1101	Total TOFA			
		Total TOFA lo	sses		
		TOFA transitional balancing adjust	ment J		Loss

#### Section J: Other information

#### Family trust election status

If the trust or fund has made, or is making, a family trust election, write the four-digit income year specified of the election (for example, for the 2014–15 income year, write 2015).	
If revoking or varying a family trust election, print R for revoke or print V for variation, and complete and attach the Family trust election, revocation or variation 2015.	В

#### Interposed entity election status

If the trust or fund has an existing election, write the earliest income year specified. If the trust or fund is making one or more elections this year, write the earliest income year being specified and complete an Interposed entity election or revocation 2015 for each election

<b>C</b>	
C	

TFN: 954 088 550

If revoking an interposed entity election, print R, and complete and attach the Interposed entity election or revocation 2015.

П	Γ	
ט		

#### Section K: Declarations

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

#### **Important**

Before making this declaration check to ensure that all income has been disclosed and the annual return, all attached schedules and any additional documents are true and correct in every detail. If you 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 about your privacy go to ato.gov.au/privacy.

#### TRUSTEE'S OR DIRECTOR'S DECLARATION:

I declare that 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).

Authorised trustee's, director's or public officer's significant	gnature		
			Day Month Year
		Date	/ /
Preferred trustee or director contact detail	ls:		
Title	Mr		
Family name	Pantano		
First given name	Anthony		
Other given names			
	Area code Number		
Phone number	0468 925866		
Email address			
Non-individual trustee name (if applicable)			
ABN of non-individual trustee			
	Time taken to prepare and complete this annual r	eturn	Hrs

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

32635200

74856004

TFN: 954 088 550

Reference number PANT0003

#### TAX AGENT'S DECLARATION:

Tax agent's phone number

Tax agent number

I,	SAM GRECO & CO			
by		erannuation fund annual return 2015 has been prepared in accordance witl ave given me a declaration stating that the information provided to me is true b lodge this annual return.	ue and	that
	Tax agent's signature	Date		
	Title	Mr		
	Family name	Greco		
	First given name	Sam		
	Other given names			
	Tax agent's practice	SAM GRECO & CO		

#### Superannuation Fund Losses schedule

Companies and trusts that do not join consolidated groups should complete and attach this schedule to their 2015 tax return.

2015

TFN: 954 088 550

Superannuation funds should complete and attach this schedule to their 2015 tax return.

Refer to Losses schedule instructions 2015, available on our website www.ato.gov.au for instructions on how to complete this schedule.

#### Tax file number (TFN)

954 088 550

#### Name of entity

Pantano & Kresjka Self Managed

Superannuation Fund

#### Australian business number (ABN)

95 394 296 221

### Part A Losses carried forward to the 2015-16 income year excludes film losses

I Tax losses carried forward to later income years

Year of loss 13,256 В 2014-15 7,707 C 2013-14 D 2012-13 П 2011-12 2010-11 G 2009-10 and earlier income years 20,963 U Total

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

#### Part F Tax losses reconciliation statement

Balance of tax losses brought forward from the prior income year	Α	7	7,	7 (	J
--	---	---	----	-----	---

ADD Uplift of tax losses of designated infrastructure project entities

SUBTRACT Net forgiven amount of debt

ADD Tax loss incurred (if any) during current year

ADD Tax loss amount from conversion of excess franking offsets

SUBTRACT Net exempt income

SUBTRACT Tax losses forgone G

SUBTRACT Tax losses deducted H

SUBTRACT Tax losses transferred out under Subdivision 170-A (only for transfers involving a foreign bank branch or a PE of a foreign financial entity)

Total tax losses carried forward to later income years J

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

#### Sensitive (when completed)

TFN: 954 088 550

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

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

#### Privacy

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

	TΑ	XPA	YER'	S DEC	CLARA'	TION
--	----	-----	------	-------	--------	------

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

Signature	Date
	Daytime contact number
Contact person	Daytime contact number Area code Number