Electronic Lodgment Declaration (SMSF)

This declaration is to be completed where the tax return is to be lodged via an approved ATO electronic channel. It is the responsibility of the taxpayer to retain this declaration for a period of five years after the declaration is made, penalties may

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 However, you cannot lodge your tax return electronically if you do not quote your TFN.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

Tax File Number

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.

Provided Provided		Name of Fund			
		Robinson Superannuation Fund	Year		
I authorise my	tax agent to electroni	cally transmit this tax return via an approved ATO electronic channel.	2018		
		se check to ensure that all income has been disclosed and the tax return is doubt about any aspect of the tax return, place all the facts before the Tax C s for false or misleading statements on tax returns.	true and Office.		
Declaration: I declare that: All the information provided to the agent for the preparation of this tax return, including any applicable so is true and correct; and I authorise the agent to lodge this tax return.					
Signature of Partner, Trustee, or Director		Date Date	; / /		

ELECTRONIC FUNDS TRANSFER CONSENT

This declaration is to be completed when an electronic funds transfer (EFT) of a refund is requested and the tax return is being lodged through an approved ATO electronic channel.

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 Robinson Superannuation Fund Account Number 064430 10783566 Client Reference ROBI0003 I authorise the refund to be deposited directly to the specified account Signature Date

Tax Agent's Declaration

I declare that:

- I have prepared this tax return in accordance with the information supplied by the partner, trustee, director or public officer
- I have received a declaration made by the entity that the information provided to me for the preparation of this tax return
- I am authorised by the partner, trustee, director or public officer to lodge this tax return, including any applicable schedules.

	······································	and officer to loage this tax return, including any a	pplicable sci	hedules.	
Agent's signature		Date	1	1	
Contact name	Taneile White	Client Reference	ROB1000	3	
Agent's Phone Nur	mber 0732529477	Tax Agent Number	25454874	4	

Self-managed superannuation fund annual return

Or thi ind	inly self-managed superannuation fur is annual return. All other funds must come tax return 2018 (NAT 71287). The Self-managed superannuation instructions 2018 (NAT 71606) (the assist you to complete this annual complete this annual complete.)	nds (SMSFs) can complete to complete the Fund	■ Print clearly, us ■ Use BLOCK LE	his annual return ing a BLACK pen only. TTERS and print one char # \$ 7 \$ 7	acter per box.
S	ection A: Fund inforr	nation	····		
1	Tax file number (TFN)	Provided		To assist processing,	write the fund's
	_	to request your TEN A	 !	TFN at the top of pa	ages 3, 5 and 7.
	The ATO is authorised by law the chance of delay or error in	processing your annual ret	urn. See the Privacy r	e your TFN but not quoting note in the Declaration.	g it could increase
2	Name of self-managed supe	erannuation fund (SMC)	-,		
R	binson Superannuation Fund	ACTIVICATION TOTAL (SIVIS)	7		
3	Australian business number	(ABN) (if applicable) 371	25864023		
1	Current postal address		· · · · · · · · · · · · · · · · · · ·		·····
PC) Box 750				
					·
Sub	urb/town				
Su	rfers Paradise			State/territory	Postcode
				QLD	4217
5	Annual return status is this an amendment to the SMSF	's 2018 return?	A No X Yes		
	Is this the first required return for a	newly registered SMSF?	B No X Yes	Ī	

6 SMSF auditor	
Auditor's name	
Title: Mr X Mrs Miss Ms Other	
Family name	
Boys	
First given name Other given names	
Anthony	
SMSF Auditor Number Auditor's phone number	
100014140 0410 712 708	
Postal address	
PO Box 3376	
Suburb/town	
	stcode
SA	5000
Date quidit was completed.	
/ 62_ / 2015	
Nas Part B of the audit report qualified? B No X Yes	
the audit report was qualified, have the reported	
compliance issues been rectified? C No Yes	
Electronic funds transfer (EFT)	
We need your self-managed super fund's financial institution details to pay any super payments and tax refunds owing	(O VOL)
A Financial institution details for super payments and tax refunds	
You must provide the financial institution details of your funds particular	
tax refunds paid to a different account, you can provide additional financial institution details at B .	und's
Fund RSR number (must be at the control of the cont	
Fund account name (for example, J&Q Citizen ATF J&Q Family SF)	
Robinson Superannuation Fund	
Tep-termedictri dila	
B Financial institution details for tax refunds only	
If you would like your fund's tay refunds paid to a different and a sufferent and the sufferent and th	
Tax refunds cannot be paid to a trustee's personal account, (See relevant instructions.)	
PSR sumbor /	
Account number Account name (for example, J&Q Citizen ATF J&Q Family SF)	
Jacobs and Order Will and Lathin 25)	<u>-</u>
C Electronic service address alias	
We will use your electronic service address alias to communicate with your fund about ATO super payments.	
AUSPOSTSMSF	

	Toy File No.
	Tax File Number Provided
8	Status of SMSF Australian superannuation fund A No Yes X Does the fund trust deed allow acceptance of the Government's Super Co-contribution and Low Income Super Contribution?
9	Was the fund wound up during the income year?
	No X Yes Have all tax lodgment and payment which the fund was wound up
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 Go to Section B: Income.
	Yes X Exempt current pension income amount A \$ 106,669
	Which method did you use to calculate your exempt current pension income?
	Segregated assets method B
	Unsegregated assets method CX Was an actuarial certificate obtained? D Yes X
	Did the fund have any other income that was assessable?
	E Yes X Go 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.

Fund's	tax file number (TFN)	
	Provided	

Se	ection E	3: Inc	come		***		
_	Do not cor	mplete	this section if all superar	nnuation interests in ere was no other ind rax offsets, you car	record 1	SF were supporting superannuation inco it was assessable, and you have not re these at Section D: Income tax calculat	alised a deferred tion statement.
••		Did you	have a capital gains tax () event during the year?	_ =	s X) \$1 th at	the total capital loss or total capital gain 10,000 or you elected to use the CGT re te deferred notional gain has been realis tach a Capital gains tax (CGT) schedule	is greater than elief in 2017 and
			Have you applied an exemption or rollover?	M No X Yes		Code	
				Net capital ga	in A \$		7
		(Gross rent and other leas	sing and hiring incon	ne B \$	98,819	_ -
				Gross intere	st C \$	21,01	
			Forestry	managed investme scheme incon	nt X\$		-
		Gross fo	reign income				
D	1 \$		8,958	Net foreign incom	ne D \$	8,958	Loss
	Aus	stralian f	ranking credits from a N	ew Zealand compar	ıy E \$]
				Transfers from	is F5		Number 0
r				ross payments where ABN not quote	е н \$		1
	alculation Assessa	of asse able emp	ssable contributions ployer contributions	Gross distributio	n .a.		Loss
R	ı \$		4,537	from partnership *Unfranked dividen	.d		
plus R2	Assessa S	able per	sonal contributions	amour *Franked dividen	ոլ 11 Մֆ	21,170	
plus		FN-auo	45,462 ted contributions	amour	it IN S	107,046	
RS	3\$		o	*Dividend frankin cred		45,877]
less	Transfer of	of liabilit	e included even if it is zero) / to life insurance	*Gross trus distribution:	t M \$	5,798	P
		compan	y or PST	Assessable		_	
R6	* \$ <u></u>			contributions (R1 plus R2 plus R3 less R6	2 H 3	49,999	
*Not	alculation o	of non-a	ırm's length income				
U1		ength ph	vate company dividends	*Other income	s \$[Code
plus	*Net non-ar	m's leng	th trust distributions	*Assessable income due to changed tax	T\$[
U2	<u> </u>	-		status of func			
plus U3		r non-ar	m's length income	Net non-arm's length income subject to 45% tax rate (U1 plus U2 plus U3)	່ ປ \$ໂ		
label	•	itory	(S	GROSS INCOME	wſ	358,653	J _oss
ente	amount is red at this la	ibel,		ent pension income	Y\$[106,669	
to en	k the instructions	rrect	TOTAL ASSESSABLE	INCOME - F	Sindaniikase		Loss
	eatment ha: applied.	s	Constitution of the Consti	(W less Y) V \$		251,984	

Tax File Number	Provided
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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).

Train addadable expenses columni,	-			
NON-DEDUCTIBLE EXPENSES	NC	EDUCTIONS	D	lesson as
	A2 \$	12	A1 \$	Interest expenses within Australia
0	B2 \$		நடி	Interest expenses overseas
	D2 \$		D1 \$	Capital works expenditure
	E2 \$		E1\$[Decline in value of depreciating assets
	F2 \$	81,970	F1 \$	Insurance premiums – members
			G1 \$	Death benefit increase
171	H2 \$	323	H1 \$	SMSF auditor fee
	12 \$		I1 \$	Investment expenses
1,995	J2 \$	4,037	J1 \$[Management and administration expenses
1,333	U2 \$		U1 \$_	Forestry managed investment scheme expense
	L2\$		L1 \$	Other amounts
			M1 \$ <u></u>	Tax losses deducted
NON-DEDUCTIBLE EXPENSES 2,172	TOTAL NO.	EDUCTIONS 86,342 (Total A1 to M1)	TOTAL (Commonwealth Second
SMSF EXPENSES 88,514	COSS TOTAL SM	E INCOME OR LOSS 165,642 L ASSESSABLE INCOME (ess TOTAL DEDUCTIONS)	O \$	This is a mandatory label.

Tax File Number	Provided
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Section D: Income tax calculation statemen	ıt	Ŀ
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*Important: Section B lab

is biank,

you wi	n B label R3 , Section C label Il have specified a zero amou	O and Section D nt.	labels A,T1,	, ${\sf J},$ ${\sf T5}$ and ${\sf I}$ are mandatory. If you leave these labels
	alculation statement		Santa Se Santa de Santa de Carre	
Pleas	e refer to the	*Taxable inco	ome A \$	165,642
Self-r	nanaged superannuation	•Tavas •		(an amount must be included even if it is zero)
2018	annual return instructions on how to complete the	*Tax on taxa inco	ome T1 \$	24,846,30
calcu	ation statement.	*Tax	con ,	(an amount must be included even if it is zero)
		no-TFN-quo contributi		0.00
	Innove		0110	(an amount must be included even if it is zero)
		Gross	tax B\$	24,846.30
				(T1 plus J)
	Foreign income tax offset		·	
C1\$	<u> </u>			
<u>.</u>	Rebates and tax offsets		Non-re	fundable non-carry forward tax offsets
C2\$			c \$	
			· L	(C1 plus C2)
			SUBTO	TAL 1
			T2 \$	24 040 00
				(B less C – cannot be less than zero)
	Early stage venture capital lin	nited]	
D1\$	partnership tax offset			
,	<u> </u>	0.00		
	Early stage venture capital lim tax offset carried forward fron	nited partnership	Non vot	
D2\$		0.00	D\$	undable carry forward tax offsets
	Early stage investor tax offset		Pφ	(D1 plus D2 plus D3 plus D4)
D3\$		0.00	r	(D 1 plus D2 plus D3 plus D4)
'	Early stage investor tax offset			
	carried forward from previous	year	SUBTO	TAL 2
D4\$		0.00	ТЗ\$	24,846.30
			1	(T2 less D - cannot be less than zero)
(Complying fund's franking cred	dita tou effect		
E1\$	· · · · · · · · · · · · · · · · · · ·			
	No-TFN tax offset	46,736.83		ł
E2\$		·		ļ
ו	National rental affordability scher	me tay offeet		
E3\$[and described the second	The tax onset		
Ē	xploration credit tax offset	———	Pofundo	blo to come of
E4\$[0.00	E\$	ble tax offsets
			- Ψ L_	46,736.83
			***************************************	(E1 plus E2 plus E3 plus E4)
		"TAX PAYABLE	€ T5 \$ 🗀	200
	-reclamance.	Annual Control of the		(T3 less E - cannot be less than zero)
		ASSESSED	Section 1	02AAM interest charge
			G\$	

Fund's tax file number (TFN) Provided

-	
	363.82 1 plus H2 plus H3 plus H5 plus H6 plus H8)
PAYG ins	(unused amount from label E – an amount must be included even if it is zero) talments raised
К\$	
_	ory levy
· <u></u>	259.00
Superviso	ory levy adjustment for wound up funds
· <u></u>	ory levy adjustment for new funds
N S	ny levy adjustment for new funds
<u></u>	
E S\$	-21,995.35
J. (T	5 plus Gless Hiless Liess Kiplus Liess Miplus N)
υ	5 plus Gless Hiess Tiess K plus Liess M plus N)
<u>'</u>	5 plus G less H less I less K plus L less M plus N)
<u>'</u>	5 plus G less H less I less K plus L less M plus N)
<u>M</u>	
ax losses car	
6	PAYG inst K \$ Supervisor L \$ Supervisor M \$ Supervisor N \$ Compared to the compared t

Continue 5 5 5 5			Tax File Number Prov	ided
Section F: Mem	ber informa	tion		
MEMBER 1 Title: Mr Mrs Miss				
Title: Mr Mrs Miss Family name	Ms Other Dr			
Robinson				
First given name Paul		Other given names		
Member's TFN			Day Monit	
See the Privacy note in the [Declaration. Provide	ed	Date of birth 23 / 10	¬ , , , , , , , , , , , , , , , , , , ,
Contributions	OPENING ACCO	DUNT BALANCE \$	5,248,987	36
Refer to instructions for completing	Emplo	yer contributions A\$	4,537.	
these labels.	ABN of principa	i employer A1		=
	Perso	nal contributions B\$	20,462.	27
CG1	smail business retire	ement exemption C\$	20,402.	
CGT small	l business 15-year ex	emption amount D \$		=
	Persor	nal injury election E\$		
	Spouse and ch	nild contributions F\$		<u>_</u>
	Other third pa	rty contributions G \$		=
Assessable	foreign superannuati	on fund amount \$		=
Non-assessable	foreign superannuati	L.		=
Trans	sfer from reserve: ass	essable amount K\$		
Transfer fi	rom reserve: non-ass	essable amount L\$		-
	ntributions from non-c and previously non-c	COMPlying funde		
Any other contributio a	ns (including Super C nd Low Income Supe	`o contributions		_
		Ayataharyattayan magayayan magayay		
	contraction and contraction an	NTRIBUTIONS N \$	25,000.0	이
ther transactions	Alic	ocated earnings os [1,075,822.2	
Accumulation phase a	socount balance	Inward rollovers and P\$		기 ([년))
61 \$	3,107,728.85	transfers		
Retirement phase accing Non CDBIS	ount balance	Outward rollovers and transfers		7
2 \$	1,781,381.88	Lump Sum	4000 05-	T Code
Retirement phase according	ount balance	payment	1,380,698.8	المستقرين المستقرين
3 \$	0.00	Income stream R2 \$ payment	80,000.00	Code M
0 TRIS Count	L CLOSING ACCOL	JNT BALANCE SS	4,889,110.73 (S1 plus S2 plus S3)	
,	Accumulation	on phase value X1 \$! 7
		nt phase value X2 \$		<u> </u>
ge 8	_			

Fund's tax file number (TFN) Provided

MEMBER 2 Title: Mr Mrs X Miss	Ms Other	" 			
Family name					
Robinson First given name					
Patricia		Other given r	names		
Member's TFN See the Privacy note in the De	eclaration. Provide	ed		Date of birth 04	Month Your 1945
Contributions	OPENING ACCC	OUNT BALANCE	\$	3,	886,754.96
Refer to instructions for completing		yer contributions	A \$ [
these labels.	ABN of principal	employer A1			
	Person	nal contributions	В\$[25,000.00
CGT	smail business retire	ment exemption	C\$		
CGT small I	business 15-year exe	emption amount	D S		
	Person	al injury election	E\$		
	Spouse and ch	ild contributions	F\$		
		ty contributions	G \$ □		
Assessable f	oreign superannuati		18		
	oreign superannuation		J\$		
Transfer from reserve: assessable amount					
	essable amount	K\$_ L\$			
	omplying funds omplying funds	T\$			
Any other contribution and	s (including Super C d Low Income Supe	omplying tunas o-contributions r Contributions)	M \$ [
	168.000/8822/1000/9814	NTRIBUTIONS	N \$ [25,000.00
Other transactions	Allo	cated earnings or losses	o \$ [8	Loss 57,483.02
Accumulation phase ac	count balance	inward rollovers and	P \$		
S1 \$	1,792,492.87	transfers	· • [
Retirement phase according Non CDBIS	unt balance	Outward rollovers and transfers	Q \$		
S2 \$	1,874,369.23	Lump Sum payment	1 \$	1.03	Code 22,375.88 A
Retirement phase accou - CDBIS	unt balance	Income	<u></u>	1,02	
S3 \$	0.00	stream R payment	2 \$	3	30,000.00 M
0 TRIS Count	CLOSING ACCOL	INT BALANCE	s \$ [3,66 (\$1 plus \$2 plus \$3)	96,862.10
	Accumulatio	n phase value X	1 \$		 _
		nt phase value 🗶			===

				lax File Number Provided	
Section 15 ASS	n H: Assets and liabilit ers	ies			
15a Aust	ralian managed investments	Listed trusts	A \$	176,728	
		Unlisted trusts	В\$		
		Insurance policy	С\$		
	Oth	er managed investments			
15b Aust	ralian direct investments	Cash and term deposits	E.S	1,282,297	
Lim Aus	ited recourse borrowing arrangements tralian residential real property			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
J1	·	Loans	G \$		
Aus J2	tralian non-residential real property	Listed shares	н \$[6,490,028	
1	rseas real property	Unlisted shares	1 \$[
J3 Aus		Limited recourse porrowing arrangements	J \$		
J4	\$	Non-residential	<u> </u>		
J5	seas shares	real property Residential			
Othe	· •	real property	L S[572,727	
J6	\$	Collectables and personal use assets	м \$[
		Other assets	o \$[29,640	
15c Overs	eas direct investments	Overseas shares	P \$[14,432	
	Overseas non-	residential real property	Q \$[
	Overseas	residential real property	R \$[
	Overseas	s managed investments	s \$		
		Other overseas assets	T s		
	TOTAL AUSTRALIAN AND (Sum of labels	OVERSEAS ASSETS	ບ \$[8,565,852	
5d In-hou	Did the fund have a loan to lease to	No X Yes)	\$[
If	financial institution?	No Yes			_
Dic	the members or related parties of the fund use personal guarantees or other security for the LRBA?	No Yes			

			Tax File Number	Provided
16 LIABILITIES				
Borrowings for limited recourse	7			
borrowing arrangements				
V1 \$				
Permissible temporary borrowings				
V2 \$				
Other borrowings				
V3 \$	Borrowings	V	\$	
Total member clositotal of all CLOSING ACCOUNT BALANCEs from	ng account balances	w	\$	8,555,970
	Reserve accounts	х	\$	3,000,070
	Other liabilities	Y	\$	9.882
	TOTAL LIABILITIES	7	\$	
	Comment Contractor Con		YL	8,565,852
Section : Taxation of financial 7 Taxation of financial arrangements (TOFA	N)	nts		
	Total TOFA gains H	\$[_		
	Total TOFA losses	\$[
				141. A
ection J: Other information				
amily trust election status If the trust or fund has made, or is making, a family specified of the election for ever	/ trust election, write th	ie fau	ır-digit income year	
specified of the election (for example for	ection print P for rough			` <u>L</u>
and complete and attach the Fa erposed entity election status	mily trust election, revo	catic	n or variation 2018. B	
If the trust or fund has an existing election, wr or fund is making one or more election specified and complete an <i>Interposed enti</i>				
If revoking an in	nterposed entity elections interposed entity elections	n nri	nt D. and commist-	П
	o, podou di ility elet	AUIT (ы төүссаноп 2018. 🦰	

	Tax File Number Provided
Section K: Declarations	
Penalties may be imposed for false or misleading information in a	addition to penalties relating to any tax shortfalls
Before making this declaration check to ensure that all income has been disclose any additional documents are true and correct in every detail. If you leave labels be label was not applicable to you. If you are in doubt about any aspect of the annual Privacy	al return, place all the facts before the ATO.
The ATO is authorised by the <i>Taxation Administration Act 1953</i> to request the pro identify the entity in our records. It is not an offence not to provide the TFN. Howe form may be delayed.	sver if you do not provide the TFN, the processing of this
Taxation law authorises the ATO to collect information and disclose it to other gov go to ato.gov.au/privacy	vernment agencies. For information about your privacy
TRUSTEE'S OR DIRECTOR'S DECLARATION: I declare that current trustees and directors have authorised this annual return I have received the audit report and I am aware of any matters raised. I declar any attached schedules and additional documentation is true and correct. I al nominated bank account (if applicable).	n and it is documented as such in the SMSF's records, re that the information on this annual return, including Iso authorise the ATO to make any tax refunds to the
Authorised trustee's, director's or public officer's signature	
	Don't Live II
al Olinson	Date 22 / 02 / 2019
Preferred trustee or director contact details:	2019
Title: Mr Mrs Miss Ms Other Dr	
amily name	
Robinson	
irst given name Other given names	
Paul	
Phone number 0755387859 mail address	
lon-individual trustee name (if applicable)	
Roan Industries Pty Ltd	
BN of pop individual 4	
BN of non-individual trustee	
	return Hrs
Time taken to prepare and complete this annual r The Commissioner of Taxation, as Registres of the April 1972.	
Time taken to prepare and complete this annual representation. The Commissioner of Taxation, as Registrar of the Australian Business Region provide on this annual return to maintain the integrity of the register.	
Time taken to prepare and complete this annual r The Commissioner of Taxation, as Registres of the April 1972.	egister, may use the ABN and business details which For further information, refer to the instructions.
Time taken to prepare and complete this annual r The Commissioner of Taxation, as Registrar of the Australian Business Region provide on this annual return to maintain the integrity of the register. F AX AGENT'S DECLARATION: Declare that the Self-managed superannuation fund annual return 2018 has been the trustees, that the trustees have given me a declaration stating that the infection of the trustees have authorised me to lodge this annual return.	egister, may use the ABN and business details which For further information, refer to the instructions. een prepared in accordance with information provided formation provided to me is true and correct, and that
Time taken to prepare and complete this annual relation of the Australian Business Registrar of the Australian Business Registers of the Australian Business Registers of the Australian Business Register of the	egister, may use the ABN and business details which For further information, refer to the instructions. een prepared in accordance with information provided formation provided to me is true and correct, and that
Time taken to prepare and complete this annual reaction. The Commissioner of Taxation, as Registrar of the Australian Business Region provide on this annual return to maintain the integrity of the register. For example, the self-managed superannuation fund annual return 2018 has been that the Self-managed superannuation fund annual return 2018 has been that the trustees have given me a declaration stating that the infection et authorised me to lodge this annual return. The example is signature The commissioner of Taxation, as Registrar of the Australian Business Region Region of the Australian Business Region	egister, may use the ABN and business details which For further information, refer to the instructions. een prepared in accordance with information provided formation provided to me is true and correct, and that
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Time taken to prepare and complete this annual reaction. The Commissioner of Taxation, as Registrar of the Australian Business Region provide on this annual return to maintain the integrity of the register. For the AX AGENT'S DECLARATION: declare that the Self-managed superannuation fund annual return 2018 has begin that the trustees, that the trustees have given me a declaration stating that the infect trustees have authorised me to lodge this annual return. Example: AX AGENT'S DECLARATION: declare that the Self-managed superannuation fund annual return 2018 has begin that the infect trustees, that the trustees have given me a declaration stating that the infect trustees have authorised me to lodge this annual return. Example: AX AGENT'S DECLARATION: declare that the Self-managed superannuation fund annual return 2018 has begin that the infect trustees have given me a declaration stating that the infect trustees have authorised me to lodge this annual return. Example: AX AGENT'S DECLARATION: declare that the Self-managed superannuation fund annual return 2018 has begin that the infect trustees have given me a declaration stating that the infect trustees have given me a declaration stating that the infect trustees have given me a declaration stating that the infect trustees have given me a declaration stating that the infect trustees have given me a declaration stating that the infect trustees have given me a declaration stating that the infect trustees have given me a declaration stating that the infect trustees have given me a declaration stating that the infect trustees have given me a declaration stating that the infect trustees have given me a declaration stating that the infect trustees have given me a declaration stating that the infect trustees have given me a declaration stating trustees have given me a declaration stating that the infect trustees have given me a declaration stating trustees have given me a declaration stating trustees have given me a declaration stating trustees have given m	egister, may use the ABN and business details which For further information, refer to the instructions. een prepared in accordance with information provided formation provided to me is true and correct, and that

Page 18

Sensitive (when completed)

Capital gains tax (CGT) schedule

■ Do not use correction	black on the black of the black	or dark blue pen only. print one character in each box.	income supera Refer to availabi instruct	e tax return on nnuation fun the <i>Guide</i> : ie on our we	with company, trust, fund or the self-managed d annual return. to capital gains tax 2018 bsite at ato.gov.au for to complete this schedule.	
Tax file number (Ti	FN) F	'rovided				
We are authorised However, if you do	l by law on't it co	r to request your TFN. You do not ould increase the chance of delay	have to quote	your TFN.	form	
		iber (ABN) 37125864023		oessing you	7	
Taxpayer's name						
Robinson Superani	nuatior	1 Fund				
1 Current year ca	apital (gains and capital losses				
Shares in companie listed on an Australia	S	Capital gain	<u>_</u>		Capital loss	
securities exchange	1 A S		410,445	K\$		286,583
Other share:	₿ \$			L S	· · · · · · · · · · · · · · · · · · ·	5,455
Units in unit trust: listed on an Australiar	6.4			· L		3,433
securities exchange	9			M\$		
Other units	D\$		2,599	N \$		232,082
Real estate situateo in Australia	E \$			0\$		
Other real estate	F \$			P \$		
Amount of capital gains from a trust (including a managed fund)	C \$1			F \$		
Collectables	н\$[Q\$		
Other CGT assets and any other CGT events	1 \$[R\$		
Amount of capital gain previously deferred under transitional CGT relief for superannuation funds	s \$[0	Add the ar	mounts at labels K to R and item 2 label A - Total currentses.	write nt year
Total current year capital gains	J \$[413,044			

_		Tax File Number	Provided
2	Capital losses		
	Total current year capital losses	Δ \$	
		~ V	524,120
	Total current year capital losses applied	в\$	413,044
	Total prior year net capital losses applied	c \$	
	Total capital losses transferred in applied (only for transfers involving a foreign bank branch or permanent establishment of a foreign financial entity)	D \$	
	Total capital losses applied	E \$	413,044
	A	Add amounts at B, C and	
3	Unapplied net capital losses carried forward		
	Net capital losses from collectables carried forward to later income years	A S	
	Other net capital losses carried forward to later income years		444.03
	A to	add amounts at A and B a	Ses carried forward
4	CGT discount	o later income years on	your tax return.
	Total CGT discount applied	\\$ <u> </u>	
5	CGT concessions for small business		
	Small business active asset reduction A	\$	1
	Small business retirement exemption B	\$\$	
	Small business rollover C	s	
	-		
	D D D D D D D D D D D D D D D D D D D	\$	
6	Net capital gain		
	Net capital gain	\$	
		less 2E less 4A less 5D l	Cannot he less than
	Zer	ro). Transfer the amount a pital gain on your tax ret	it A to label A Not

		Tax File Number	Provided
7	Earnout arrangements		
	Are you a party to an earmout arrangement? A Yes, as a buyer (Print X in the appropriate box.)	Yes, as a seller	No 🗌
	If you are a party to more than one earnout arrangement, copy and details requested here for each additional earnout arrangement.	attach a separate sheet to this	schedule providing the
	How many years does the earnout arrangement run for?	В	
	What year of that arrangement are you in?	c	
	If you are the seller, what is the total estimated capital proceeds from the earnout arrangement?	D\$	
	Amount of any capital gain or loss you made under your non-qualifying arrangement in the income year.	E \$	/
	Request for amendment		
	If you received or provided a financial benefit under a look-through earno to seek an amendment to that earlier income year, complete the following	out right created in an earlier inc g:	come year and you wish
	Income year earnout right created F		
	Amended net capital gain or capital losses carried forward G	G \$	Loss
8	Other CGT information required (if applicable)		
	Small business 15 year exemption – exempt capital gains 🛕	A \$	GODS /
	Capital gains disregarded by a foreign resident	3 \$	
	Capital gains disregarded as a result of a scrip for scrip rollover C	\$	
	Capital gains disregarded as a result of an inter-company asset rollover	\$	
	Capital gains disregarded by a demerging entity	\$	

Tax File Number	Provided
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Taxpayer's declaration

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

Important

Privacy

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.

laxation law authorises the ATO to collect information and disclose it to other governm information of the person authorised to sign the declaration. For information about your	ent agencies. This includes personal r privacy go to ato.gov.au/privacy
I declare that the information on this form is true and correct.	
Signature	
	Date
	Day Month Your
Contact name	L/
Paul Robinson	

Daytime contact number (include area code)

Losses schodul

	Losses schedule	•	ZU 1 0
	oin consolidated groups should complete and atta elete and attach this schedule to their 2018 tax ret h a black or blue ballpoint pen only. Print one lette		
Refer to Losses schedule instruct for instructions on how to comple	ions 2018, available on our website ato.gov.au te this schedule.]	
Tax file number (TFN)		1	
Provided			
Name of entity			
Robinson Superannuation Fu	ind		
Australian business number			
37125864023			
			
Dart A Lassa			
1 Tayloges candida	rried forward to the 2018-	-19	income year - excludes film losses
1 Tax losses carried forward	to later income years Year of loss		
	2017–18		
	2016–17	C	
	2015–16	D	
	2014–15	E	
	2013–14	F	
	2012–13 and earlier income years	G	
	Total	υl	
		- 1	
^	Transfer the amount at U to the Tax losses carried	forwa	ard to later income years label on your tax return.
2 Net capital losses carried for			
	Year of loss 2017–18	нί	
		"" [111,077
	2016~17	ΙĮ	
	2015–16	J	
	2014–15	κſ	
	2013–14	LĪ	
	2012–13 and earlier income years	M	
	income years	ļ.,	

Transfer the amount at V to the Net capital losses carried forward to later income years label on your tax return.

Total V

Dort D. C.	·		Tax File Number Provided		
Fart B – Ownership and I	ousiness continuit	ty t	est – company and listed widely held trust only		
satisfied in relation to that loss	carried forward to later income	years	s and the business continuity test has to be		
Do not complete items 1 or 2 of Part B if in	the 2017 19 in				
against a net capital gain or, in the case of c	ompanies, losses have not been	n trar	nsferred in or out.		
1 Whether continuity of majority					
ownership test passed	Year of los	•			
Note: If the entity has deducted, applied,	2017–18	A	Yes No No		
transferred in or transferred out (as applicable) in the 2017–18 income year a loss incurred in any of the listed years, print X in the Yes or No	2016–17	В	Yes No		
the continuity of majority ownership test in	2015–16	C	Yes No		
respect of that loss.	2014–15	D	Yes No		
	2013–14	E	Yes No		
	2012-13 and earlier income years	F	Yes No		
Amount of losses deducted/applied for business continuity test is satisfied – e	r which the continuity of maj	jority	y ownership test is not passed but the		
	Tax losses	G			
	Net capital losses	н			
3 Losses carried forward for which the business continuity test must be satisfied before they can be deducted/ applied in later years – excludes film losses					
	Tax losses	1			
	Net capital losses	J			
Do current year loss provisions apply? Is the company required to calculate its taxab the year under Subdivision 165-B or its net capifor the year under Subdivision 165-CB of the <i>Inc.</i> 1997 (ITAA 1997)?		K	Yes No		
art C - Unrealised losses - con	npany only	······································			
Note: These questions relate to the operation of Su	Jbdivision 165-CC of ITAA 1997				
Has a changeover time occurred in relation to the after 1.00pm by legal time in the Australian Capit 11 November 1999?	A COMPONI	F .	Yes No		
If you printed X in the No box at L, do not complete	M, N or O.				
At the changeover time did the company satisfy net asset value test under section 152-15 of ITAA	the maylesses	M Y	Yes No		
If you printed X in the No box at M , has the comp it had an unrealised net loss at the changeover tin	any dotominad	N V			
If you printed X in the Yes box at N , what was the unrealised net loss calculated under section 165-	amount of	~ <u>_</u>	Yes No		
165-	113E OF ITAA 1997?	οL			

		x File Number	Provided
Part D – Life insurance companies		****	<u> </u>
Complying superannuation class tax losses carried forward to later income years	P		·····
Complying superannuation net capital losses carried forward to later income years	Q		
Double 6			
Part E – Controlled foreign company losses			
Current year CFC losses	M		
CFC losses deducted	N		
CFC losses carried forward	0		
Part F – Tax losses reconciliation statement		Maritiment of the State of the	H1 11 11 11 11 11 11 11 11 11 11 11 11 1
Balance of tax losses brought forward from the prior income year	A		
ADD Uplift of tax losses of designated infrastructure project entities	в		
SUBTRACT Net forgiven amount of debt	c[
ADD Tax loss incurred (if any) during current year	D		
ADD Tax loss amount from conversion of excess franking offsets	E		
SUBTRACT Net exempt income	F		
SUBTRACT Tax losses forgone	G[
SUBTRACT Tax losses deducted	н[
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 forw	ard t	to later income years	s label on your tax return

	Tax File Number Provided
If the schedule is not lodged with the income tax return you are require	ed to sign and data the
Important Before making this declaration check to ensure that all the information requito this form, and that the information provided is true and correct in every deplace all the facts before the ATO. The income tax law imposes heavy penal.	red has been provided on this form and any attachments
Privacy Taxation law authorises the ATO to collect information and disclose it to othe information of the person authorised to sign the declaration. For information	
Taxpayer's declaration	y as ported ato.gov.au/privacy
I declare that the information on this form is true and correct,	
Signature	
la Klein	Date Day Month Your
Contact person	Daytime contact number (include area code)
Paul Robinson	OZESCOZOSO