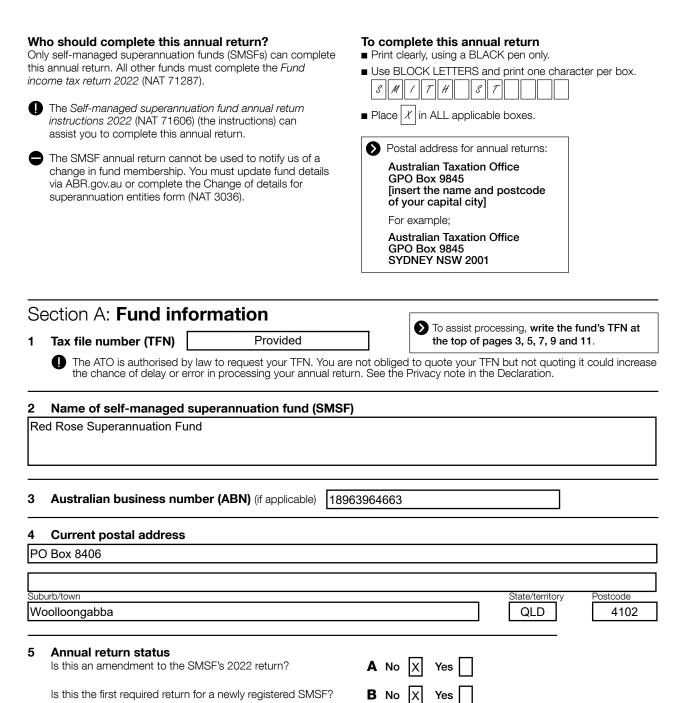
Self-managed superannuation **2022** fund annual return



Electronic Lodgment Declaration (SMSF)

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

Privacy

The ATO is authorised by the Taxation Administration Act 1953 to request the provision of tax file numbers (TFNs). The ATO will use the TFNs to identify 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 However, you cannot lodge your tax return electronically if you do not quote your TFN.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.

Tax File Number	Name of Fund	Year
Provided	Red Rose Superannuation Fund	2022

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 provided to the agent for the preparation of this tax return, including any applicable schedules is true and correct; and
 - I authorise the agent to lodge this tax return.

Signature of Partner, Trustee, or Director	Date	1	/

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.

5WWcibhïBUaY"	Rëd Rose Superannuation Fund		
Account Nümber	064170 10738125	Client Reference	HOL200

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

Signature	Date	/	/

Tax Agent's 8 YWUfUfjcb

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 is true and correct; and
- I am authorised by the partner, trustee, director or public officer to lodge this tax return, including any applicable schedules.

Agent's signature […]			Date	1	/
Contact name	Cameron Wilson		Client Reference	HOL200	
Agent's Phone Num	ber 107 33609600	Ή	UI [·] 5 [YbhBi a VYf	70868002	

SMSF auditor 6

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	61410712708		
Postal address			
PO Box 3376			
Suburb/town		State/territory	Postcode
Rundle Mall		SA	5000
Date audit was completed	Day Month Year		
Was Part A of the audit report q	ualified? B No X Yes		
Was Part B of the audit report q	qualified? C No X Yes		
If Part B of the audit report was of have the reported issues been re			

7 Electronic funds transfer (EFT)

We need your self-managed super fund's financial institution details to pay any super payments and tax refunds owing to you.

Fund's financial institution account details Α

This account is used for super contributions and rollovers. Do not provide a tax agent account here.

Fund BSB number	064170	Fund account number	10738125			
Fund account name						
Red Rose Superannuation Fund						

I would like my tax refunds made to this account. \mathbf{X} Go to C.

В 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 name Account number

С 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.

AUSPOSTSMSF

				Тах	File Number Provi	ded	
8	Status of SMSF	Australian superannuation fund	A No	Yes X	Fund benefit struct	ure B	A Code
		e fund trust deed allow acceptance of /ernment's Super Co-contribution and Low Income Super Amounts?	C No	Yes X			
9	Was the fund wo	ound up during the income year?	2				
		If yes, provide the date on / which the fund was wound up /	Month	Year	Have all tax lodgment and payment obligations been met?	No	Yes
10	Exempt current	pension income					
	Did the fund pay ret	irement phase superannuation income	stream benefit	s to one or	more members in the ind	come ye	ear?
		exemption for current pension income, pt current pension income at Label A .	you must pay	at least the	minimum benefit payme	ent unde	er the law.
	No X) Go to Sec	tion B: Income.					
	Yes D Exempt c	urrent pension income amount A \$					
	Which me	thod did you use to calculate your exer	npt current pe	nsion incom	ne?		
		Segregated assets method B					
		Unsegregated assets method C	Was an actua	arial certifica	te obtained? D Yes		
	Did the fund have a	ny other income that was assessable?					
	E Yes Go to	Section B: Income.					
	No Choose Go to	sing 'No' means that you do not have a Section C: Deductions and non-deduct	ny assessable tible expenses	income, inc . (Do not co	luding no-TFN quoted complete Section B: Incor	ontribut ne.)	tions.
		tled to claim any tax offsets, you can list on D: Income tax calculation statement					

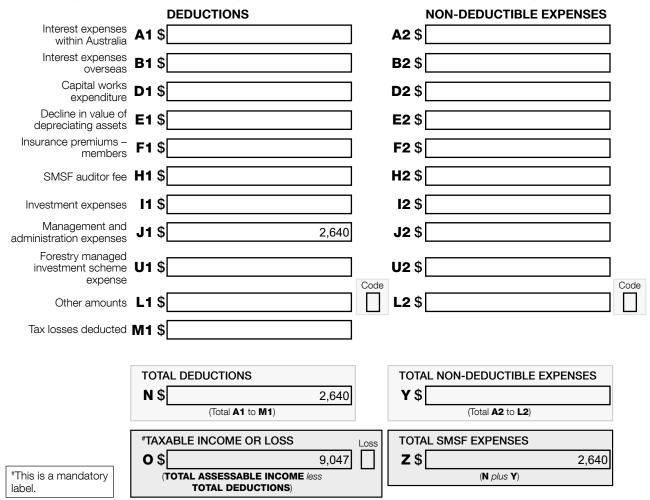
Section B: Inco	ome				
the retirement phase for the	entire year, there was n	o other incom	e that v	were supporting superannuation incom- vas assessable, and you have not realis ese at Section D: Income tax calculation	ed a deferred
11 Income Did you have a capit (CGT) event durin		Yes X)	\$10,00 2017 a	tal capital loss or total capital gain is grea 0 or you elected to use the transitional C nd the deferred notional gain has been re te and attach a <i>Capital gains tax (CGT)</i> s	GT relief in ealised,
	or rollover? M No	Yes	Code		
	Ne	et capital gain	A \$		
Gross rer	t and other leasing and	hiring income	в\$		
	(Gross interest	C \$		
	Forestry manage	ed investment neme income	X \$		
Gross foreign inc					Loss
D1 \$	Net fo	reign income	D \$		
Australian franking	credits from a New Zeal	and company	E \$		N. 1
		ransfers from foreign funds	F \$		Number 0
	Gross pay	ments where	Н\$		
Calculation of assessable of Assessable employer co	contributions	N not quoted as distribution	1\$		Loss
R1 \$		partnerships ked dividend	·		
plus Assessable personal co	ntributions	amount	J \$		
R2 \$		iked dividend amount	K \$		
plus **No-TFN-quoted con		dend franking credit	L \$		Queda
(an amount must be include	0 d even if it is zero)	*Gross trust distributions	М\$		Code
less Transfer of liability to life company or PS		Assessable			
R6 \$		(R1 plus R2 lus R3 less R6)	R \$	11,687	
Calculation of non-arm's le *Net non-arm's length private co	-		. 1		Code
U1 \$		Other income	S \$		
plus *Net non-arm's length trus	t distributions due to	sable income changed tax	Т\$		
U2 \$		status of fund			
plus *Net other non-arm's len	le le	ngth income to 45% tax rate) lus U2 plus U3)	U \$		
"This is a mandatory label.		SS INCOME labels A to U)	w \$	11,687	
*If an amount is entered at this label,	Exempt current pe	nsion income	Y \$		
check the instructions to ensure the correct tax treatment has been applied.	TOTAL ASSESSA INCOME (W le			11,687	
Page 4	OFFICIAI :	Sensitive (w	/hen co	ompleted)	

Page 4

Section C: Deductions and non-deductible expenses

12 Deductions and non-deductible expenses

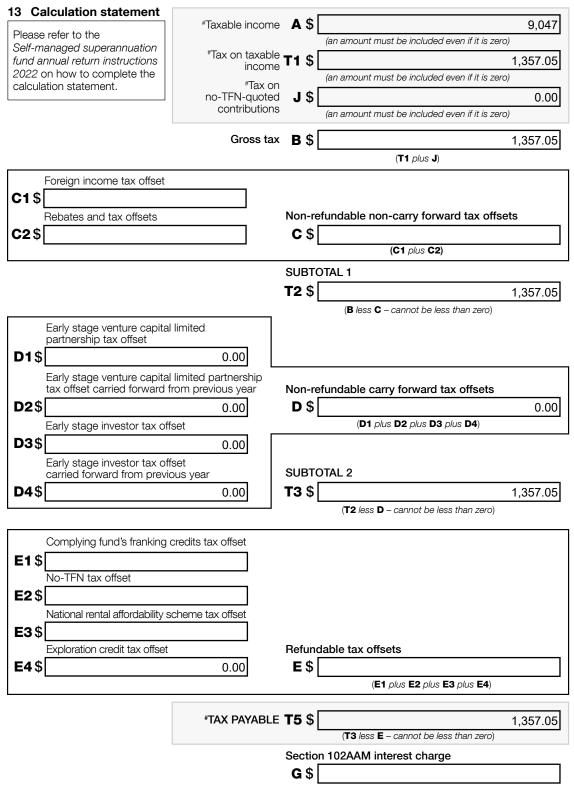
Under 'Deductions' list all expenses and allowances you are entitled to claim a deduction for. Under 'Non-deductible expenses', list all other expenses or normally allowable deductions that you cannot claim as a deduction (for example, all expenses related to exempt current pension income should be recorded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

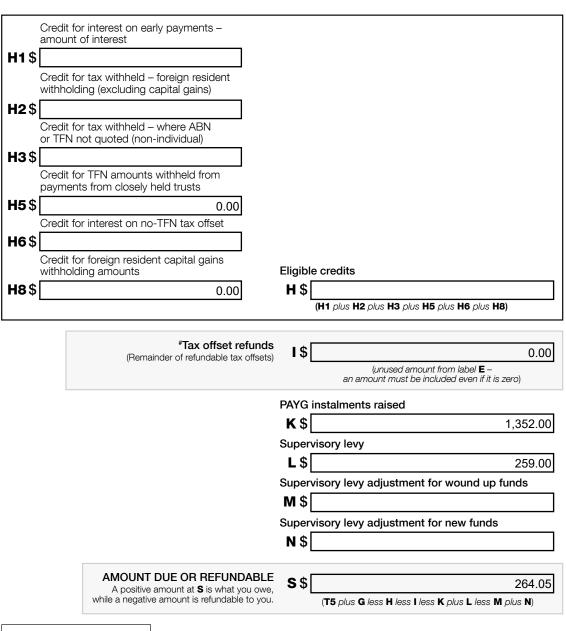


Section D: Income tax calculation statement

#Important:

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.





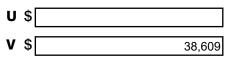
*This is a mandatory label.

Section E: Losses

14 Losses

If total loss is greater than \$100,000, complete and attach a Losses schedule 2022. Tax losses carried forward to later income years

Net capital losses carried forward to later income years



Section F: Member inform	ation	
Title: Mr Miss Ms Other Family name Mr Miss Ms Other		
Holland		
First given name	Other giver	names
Michael	John	
Member's TFN See the Privacy note in the Declaration. Provided		Day Month Year Date of birth Provided
Contributions OPENING ACCOUNT BAL	ANCE \$	9,266.46
Refer to instructions for completing these labels	3.	Proceeds from primary residence disposal
Employer contributions	. H	
A \$ 11,687.65	н	1 Receipt date / / / / Year
ABN of principal employer		Assessable foreign superannuation fund amount
A1	I	\$
Personal contributions		Non-assessable foreign superannuation fund amount
B \$	J	\$
CGT small business retirement exemption	V	Transfer from reserve: assessable amount
CGT small business 15-year exemption amo	K ount	Transfer from reserve: non-assessable amount
D \$		\$
Personal injury election		Contributions from non-complying funds
E \$	т	and previously non-complying funds
Spouse and child contributions	•	Any other contributions
F \$		(including Super Co-contributions and Low Income Super Amounts)
Other third party contributions G \$	М	
		+
TOTAL CONTRIBU	TIONS N	
		(Sum of labels A to M)
Other transactions	0	Allocated earnings or losses
	U	Inward rollovers and transfers
Accumulation phase account balance	Р	
S1 \$ 8,973.59	-	Outward rollovers and transfers
Retirement phase account balance – Non CDBIS	Q	\$
S2 \$ 0.00		Lump Sum payments Code
Retirement phase account balance	R1	\$
- CDBIS		Income stream payments Code
S3 \$ 0.00	R2	\$
0 TRIS Count CLOSING ACCOUNT BAL	ANCE S	\$ 8,973.59 (\$1 plus \$2 plus \$3)
Accumulation phase	e value $X1$	\$
Retirement phase		
Outstanding limited rec		
borrowing arrangement a	mount Y	\$

					Tax File N	lumber	Provided	
MEMBER 2								
	Miss Ms Other							
Family name								
Holland								
First given name		Other give	n na	mes				
Pamela		Anne						
Member's TFN						Day	Month	Year
See the Privacy note in	the Declaration. Provided				Date of birth		Provided	
Contributions	OPENING ACCOUNT BAL	ANCE \$						
		· •			,	P		
Refer to instructio	ns for completing these label	s.	I \$	Proceeds fi	rom primary reside	ence disp	osal	
Employer contr	ributions		ŢΦ		Day Mont	'n	Year	
A \$		ŀ	11	Receipt da		<u>,</u> / [loui	
ABN of princip	al employer				foreign superannu	Lation fur	id amount	
A1			۱\$					
Personal contri	ibutions			Non-asses	sable foreign supe	erannuatio	on fund amount	
В\$			J \$					
	iness retirement exemption			Transfer fro	m reserve: assess	sable am	ount	
C \$			\$					
	iness 15-year exemption amo			Transfer fro	m reserve: non-as	ssessable	e amount	
D \$	-1	L	. \$					
Personal injury	election			Contributio and previou	ns from non-comp usly non-complyin	olying fur a funds	nds	
	nild contributions	т	•\$			5		
F \$				Any other c	contributions			
	ty contributions			(including S and Low In	Super Co-contribu come Super Amo	tions unts)		
G \$,	Μ	\$			/		
	TOTAL CONTRIBU	TIONS N	I \$					
				(Sun	n of labels A to M)			
Other transations				Allocated e	arnings or losses		Loss	
Other transactions		0	\$					
Accumulation p	phase account balance	_		Inward rollo	overs and transfers	8		
S1 \$	0.00	P	•\$					
	ase account balance			Outward rc	llovers and transfe	ers		
– Non CDBIS		G	!\$					
S2 \$	0.00			Lump Sum r	payments		Code	
	ase account balance	R1	\$					
- CDBIS				Income stre	eam payments		Code	
S3 \$	0.00	R2	2\$					
0 TRIS Count	CLOSING ACCOUNT BAI	LANCE S	\$	(S'	1 plus S2 plus S3)			
				(5	i pius 32 pius 33)			
	Accumulation phas	e value X1	\$					
	Retirement phas	e value Y a	2					
	Outstanding limited re borrowing arrangement a		′\$					

	Section H: Assets and lia	bilities		
-	ASSETS Australian managed investments	Listed trusts	A \$	
		Unlisted trusts	B \$	
		Insurance policy		
	Ot	her managed investments	D \$	
15b	Australian direct investments	Cash and term deposits	E \$	6,788
	Limited recourse borrowing arrangement	s Debt securities	F \$	
	Australian residential real property J1 \$	Loans	G \$	
	Australian non-residential real property	Listed shares		
	J2 \$			
	Overseas real property	Unlisted shares	I \$	
	J3 \$	Limited recourse borrowing arrangements		
	Australian shares J4 \$	Non-residential		
	Overseas shares	real property	κφ	
	J5 \$	Residential real property		
	Other	Collectables and personal use assets	М \$	
	J6 \$	Other assets		6,181
	Property count	Other assets	0.0	0,101
	J7			
15c	Other investments	Crypto-Currency	N \$	
15d	Overseas direct investments	Overseas shares	P \$	
	Overseas no	on-residential real property	Q \$	
	Overse	as residential real property	R \$	
	Overs	eas managed investments	S \$	
		Other overseas assets	Т\$	
	TOTAL AUSTRALIAN AI (Sum of lab	ND OVERSEAS ASSETS bels A to T)	U \$	12,969
15e	In-house assets Did the fund have a loan to, lease to or investment in, related parties (known as in-house assets) at the end of the income year?		\$	

				Tax File Number	Provided	
15f	Limited recourse borrowing arrangements If the fund had an LRBA were the LRBA borrowings from a licensed financial institution? Did the members or related parties of the fund use personal guarantees or other security for the LRBA?	A No Yes B No Yes]			
16	LIABILITIES Borrowings for limited recourse borrowing arrangements V1 \$ Permissible temporary borrowings V2 \$ Other borrowings					
	V3 \$	Borrowings	V	\$		
	Total member clos (total of all CLOSING ACCOUNT BALANCE s fro	ing account balances om Sections F and G) Reserve accounts Other liabilities TOTAL LIABILITIES	X Y	\$ \$ \$ \$	8,972 3,997 12,969	

Section I: Taxation of financial arrangements 17 Taxation of financial arrangements (TOFA) Total TOFA gains H \$ Total TOFA losses I \$

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 2021–22 income year, write 2022).	A [
If revoking or varying a family trust election, print R for revoke or print V for variation, and complete and attach the <i>Family trust election, revocation or variation 2022.</i>	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 <i>Interposed entity election or revocation 2022</i> for each election.	c [

If revoking an interposed entity election, print R, and complete and attach the Interposed entity election or revocation 2022. $\hfill D$

Hrs

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 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 schedules and additional documentation is true and correct.

Authorised truste	e's, director's or public officer's	signature	
			Date
Preferred trus	tee or director contact de	etails:	
Title: Mr X Mr	s Miss Ms Other		
Family name			
Holland			
First given name		Other given names	
Michael		John	
Phone number	0733609600		

 Non-individual trustee name (if applicable)

 ABN of non-individual trustee

Time taken to prepare and complete this annual return

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.

TAX AGENT'S DECLARATION:

I declare that the Self-managed superannuation fund annual return 2022 has been prepared in accordance with information provided by the trustees, that the trustees have given me a declaration stating that the information provided to me is true and correct, and that the trustees have authorised me to lodge this annual return.

Tax	agent's	signature

Email address

	Day Month Year
Tax agent's contact details Title: Mr X Mrs Miss Ms Other	
Family name	
Wilson	
First given name Other given names	
Cameron	
Tax agent's practice	
Hw One Pty Ltd	
Tax agent's phone numberReference number0733609600HOL200	Tax agent number 70868002