** PLS Validation Report - CloudAuth **
ATO NATIONAL OFFICE SBR//01/12/2020 09:04:32AM//Page 1
VALIDATION REPORT NUMBER 001.1

MYOB PRACTICE SYSTEMS//99106 P O BOX 186 BLACKBURN VIC 3130

TRANS NO. 001 20/2 02 DATE/TIME 01/12/2020//09:04:32//AM YEAR 2020

SENT 1
RECEIVED 1
ACCEPTED 1
REJECTED 0

RETURNS ACCEPTED F0877652.67// //877652067//Gilmartin Superannuation Fund//2020//MS

E10 END OF VALIDATION REPORT



Self-managed superannuation fund annual return

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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Se	ection A: Fund information					
			TFN at the top of pages 3, 5, 7, and 9.			
1	Tax file number (TFN)		IFIN at t	ne top or pages o	, 0, 7, and 0.	
	The ATO is authorised by law to request your TFN. \ could increase the chance of delay or error in processing	You are not obliged to quote	e your TFN	I but not quoting i	it ation	
	could increase the chance of delay or error in processing	your armuarreturn. See the		Total III allo Dociari		
2	Name of self-managed superannuation fund (S	SMSF)				
Gi	ilmartin Superannuation Fund					
Ξ						
_	(APAD or H. III)	E4 675 024 (202			
3	Australian business number (ABN) (if applicable)	54 675 024 9	903			
4	Current postal address					
C/	- The Rogers Group					
PO	O Box A308					
	ourb/town			State/territory	Postcode	
S	YDNEY SOUTH			NSW	1235	
	Annual return status		_			
•	Is this an amendment to the SMSF's 2020 return?	A No X Yes				
	Is this the first required return for a newly registered SMS	SF? B No X Yes				

RN:100017882MS Self managed superannuation fund return 2020 TFN Taxpayer/entity name: Gilmartin Superannuation Fund **SMSF** auditor Auditor's name Mr X Mrs Miss Ms Other Family name Boys First given name Other given names Jane Anthony Auditor's phone number SMSF Auditor Number 100 014 140 04 10712708 Postal address Box 3376 Postcode State/territory Suburb/town 5000 SA Rundle Mall Year Day Month 05/11/2020 Date audit was completed Was Part A of the audit report qualified? **B** No Was Part B of the audit report qualified? If the audit report was qualified, have the **D** No reported issues been rectified? 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 This account is used for super contributions and rollovers. Do not provide a tax agent account here. Fund BSB number Fund account number Fund account name Go to C. I would like my tax refunds made to this account. Financial institution account details for tax refunds This account is used for tax refunds. You can provide a tax agent account here. Account number BSB number Account name 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: Gilmartin Superannuation Fund

	Fund's tax file number (TFN)						
8	Status of SMSF Australian superannuation fund A No Yes X Fund benefit structure B A Code						
	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?						
	No X Yes Have all tax lodgment and payment 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\$ -50						
	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 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.						

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TFN		
11-14		

Section	B:	In	CO	m	e
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notional gain. If you are entitled	itire year, there I to claim any	was no other incometax offsets, you can re	e that wa ecord the	as assessable, and you have no ese at Section D: Income tax cal	n income stream It realised a defe culation stateme
Did you have a cap (CGT) event duri	ital gains tax ng the year?	G No X Yes	or you defer	total capital loss or total capital gain is u elected to use the transitional CGT re red notional gain has been realised, co al gains tax (CGT) schedule 2020.	eliet in 2017 and the
Have yo exemptior	ou applied an n or rollover?	M No X Yes	Cod	de	
		Net capital gain	A \$		-90
Gross rent a	nd other leasi	ng and hiring income	в \$[-90
		Gross interest	c \$[481	-90
	Forestry	managed investment scheme income	x \$		-90
Gross foreign incom	10	CONCINO INCOMO			Loss
1 \$	-90	Net foreign income	D \$		-90
Australian franking cre	edits from a Ne	w Zealand company	E \$[-00
		Transfers from foreign funds	F \$		Number -00
	Gr	oss payments where	H \$		-00
Calculation of assessable cor		ABN not quoted Gross distribution	1\$		-60 Loss
Assessable employer contr	-60	from partnerships *Unfranked dividend	J \$		- 6 0
s Assessable personal contr		amount *Franked dividend			-90
2 \$	-90	amount *Dividend franking	K \$_		
**No-TFN-quoted contrib	0 -60	credit	L\$		- 60
(an amount must be included e		*Gross trust distributions	М \$_		-90
s Transfer of liability to life instance company or PST		Assessable contributions			00
6 \$	-60	(R1 plus R2 plus R3 less R6)	R \$	0	-90
Calculation of non-arm's leng		16			Code
et non-arm's length private comp	any dividends	*Other income	s \$		-90
■ Ψ vs *Net non-arm's length trust d		*Assessable income due to changed tax	т \$		-90
2 \$	-60	status of fund	· L		
s *Net other non-arm's length		Net non-arm's length income (subject to 45% tax rate) (U1 plus U2 plus U3)	U \$[-90
nis is a mandatory		GROSS INCOME (Sum of labels A to U)	w \$[481	-60 Loss
an amount is tered at this label,		rent pension income	Y \$		-90
eck the instructions ensure the correct					-60

Taxpayer/entity name: Gilmartin Superannuation Fund

Section C: Deductions and non-deductible expenses

TOTAL DEDUCTIONS)

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).

	DEDUCTIONS	NON	-DEDUCTIBLE EXPENSES
Interest expenses within Australia	A1 \$	-90 A2 \$	-00
Interest expenses overseas	B1 \$	-90 B2\$	-00
Capital works expenditure	D1 \$	-90 D2 \$	-90
Decline in value of depreciating assets		-90 E2\$	-90
Insurance premiums – members		-90 F2 \$.00
SMSF auditor fee	H1 \$ 275	·90 H2 \$	-90
Investment expenses	I1 \$	DQ 12 \$	-90
Management and dministration expenses	J1 \$ 3558	90 J2\$	-90
Forestry managed investment scheme expense	U1 \$	OQ U2\$	-90
Other amounts	L1 \$	00 L2\$	-90
Tax losses deducted	M1 \$	90	
	TOTAL DEDUCTIONS	TOTAL NO	N-DEDUCTIBLE EXPENSES
	N \$ 3833		-00
	(Total A1 to M1)		(Total A2 to L2)
	*TAXABLE INCOME OR LOSS	Loss TOTAL SMS	SF EXPENSES
	O \$ 3352	60 L Z\$	3833 -90
This is a mandatory	(TOTAL ASSESSABLE INCOME less		(N plus Y)

#This is a mandatory label.

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Taxpayer/entity name: Gilmartin Superannuation Fund

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TFN		

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.

13 Calculation statement	#Taxable income	A \$	0 -90
Please refer to the		L	(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	I IICOME		(an amount must be included even if it is zero)
calculation statement.	#Tax on no-TFN-quoted	J \$	0.00
	contributions	1,1	(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			fundable non-carry forward tax offsets
C2\$		C \$	0.00
			(C1 plus C2)
		SUBTO	
		T2 \$	0.00
Early stage venture capital	limited		(B less C – cannot be less than zero)
partnership tax offset			
D1\$			
Early stage venture capital tax offset carried forward fr			
	om previous year	Non-re	fundable carry forward tax offsets
D2\$	not.	D \$	
Early stage investor tax off	set		(D1 plus D2 plus D3 plus D4)
Early stage investor tax off	set		
carried forward from previo	ous year	SUBTO	OTAL 2
D4\$		T3 \$	
1,0			(T2 less D - cannot be less than zero)
Complying fund's franking	credits tax offset		
E1\$			
No-TFN tax offset			
E2\$			
National rental affordability s	cheme tax offset		
E3\$		Refund	dable tax offsets
Exploration credit tax offset		E\$	idolo tar ollocto
E4\$		= ⊅	(E1 plus E2 plus E3 plus E4)
			/
	#TAX PAYABLE	T5 ¢	
	IAA FATABLE	ι Ο Ψ	(T3 less E – cannot be less than zero)

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Taxpayer/entity name: Gilmartin Superannuation Fund

		Fund's tax file number (TFN)
H1\$	Credit for interest on early payments – amount of interest Credit for tax withheld – foreign resident withholding (excluding capital gains)	
H2\$	Credit for tax withheld – where ABN or TFN not quoted (non-individual)	
н3\$	Credit for TFN amounts withheld from payments from closely held trusts	
H5\$	Credit for interest on no-TFN tax offset	
	Credit for foreign resident capital gains withholding amounts	Eligible credits H \$
	*Tax offset refunds	
	(Remainder of refundable tax offsets)	(unused amount from label E – an amount must be included even if it is zero)
		PAYG instalments raised K \$ Supervisory levy
		L \$ 259.00 Supervisory levy adjustment for wound up funds
		M \$ Supervisory levy adjustment for new funds N \$
	AMOUNT DUE OR REFUNDABLE A positive amount at \$ is what you owe, while a negative amount is refundable to you.	200.00
#This is	a mandatory label.	
Sect	ion E: Losses sses Ta	Tax losses carried forward to later income years

If total loss is greater than \$100,000, complete and attach a Losses schedule 2020.

Net capital losses carried forward to later income years

-00

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TFN	

Section	F:	N	/lember	inform	ation
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mily name				
Silmartin				
st given name		Other given names		
<i>l</i> lelissa		Karen		
ember's TFN be the Privacy note in the Deck	eration.	75.1	Date of birth	Month Ye
ontributions				42442.00
Refer to instructions completing these pels.	OPENING ACCO	Proceeds from pr	rimary residence disposal	43442.00
Employer contributions		Receipt date	Day Month Year	
A \$		H1		
ABN of principal employer			n superannuation fund amou	int
A1 \$		ı \$		
Personal contributions		Non-assessable	foreign superannuation fund	amount
В \$	3833.00	J \$		
CGT small business retirement	exemption	Transfer from res	erve: assessable amount	
C \$		K \$		
CGT small business 15-year e	xemption amount		erve: non-assessable amou	nt
D \$		_ L \$		
Personal injury election		Contributions fro funds and previo	m non-complying ously non-complying funds	
E \$		Т \$		
Spouse and child contributions	5			
F \$		Any other contrib	outions Co-contributions and er Amounts)	
Other third party contributions		1	er Amounts)	
G \$		M \$		
		ONTRIBUTIONS N \$		3833.00 Loss
Other transactions	All	ocated earnings or losses		3073.00 L
Accumulation phase acc		Inward rollovers and transfers		
Retirement phase acc	44202.00 count balance	Outward rollovers and Q\$		
S2\$	0.00	transfers Lump Sum R1 \$		Code
Retirement phase acc - CDBIS	ount balance	Income		Code
S3 \$	0.00	stream R2 \$ payments		
0 TRIS Count		OUNT BALANCE \$ \$		44202.00
	Accumula	ition phase value X1 \$		
		1 ×0		
	Retirem	nent phase value X2 \$		

Taxpayer/entity name: Gilmartin Superarinuation Fund	Fund's tax file number (TFN)
MEMBER 2 Title: Mr X Mrs Miss Ms Other Family name	
Gilmartin First given name	Other given names
Darryl	James
	Day Month Year
Member's TFN See the Privacy note in the Declaration.	Date of birth
Contributions OPENING ACCOL	JNT BALANCE \$ 3943.00
Refer to instructions for completing these labels.	Proceeds from primary residence disposal H \$
Employer contributions	Receipt date Day Month Year
A \$	H1
ABN of principal employer	Assessable foreign superannuation fund amount
A1 \$	\$
Ť	
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 amount	Transfer from reserve: non-assessable amount
D \$	L \$
Personal injury election	Contributions from non-complying
	funds and previously non-complying funds
E \$	T \$
Spouse and child contributions F \$	Any other contributions
	(including Super Co-contributions and
Other third party contributions G \$	Low Income Super Amounts) M \$
G 5	141 3
The state of the s	NTRIBUTIONS N \$ Loss
Other transactions Allo	ocated earnings or losses O \$ 279.00 L
Accumulation phase account balance \$1 \$ 3664.00	rollovers and transfers
Retirement phase account balance - Non CDBIS	rollovers and transfers Outward rollovers and transfers Code
S2 \$ 0.00	Lump Sum R1 \$
Retirement phase account balance – CDBIS	payment Income Code
S3 \$ 0.00	stream R2 \$ payments
	UNT BALANCE \$ \$ 3664.00 S2 plus S3)
Accumulati	ion phase value X1 \$
Ratirama	ent phase value X2 \$
Outstanding li borrowing arrang	perment amount Sensitive (when completed)

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st given name		Other given names			
					V
ember's TFN			Date of birth	Day Month	Year
ee the Privacy note in the De	claration.		Date of birtin		
ontributions	OPENING ACCO	UNT BALANCE \$			
Refer to instructions		N 	imary residence disp	nosal	-11
completing these		H \$	irrary residence disp	losai	
Employer contributions			Day Month	Year	
A \$		Receipt date D	-,		
ABN of principal employer			n superannuation fun	d amount	
A1 \$					
Ψ		I \$. Constant	
Personal contributions			foreign superannuati	on tuna amount	
В \$		J \$			
CGT small business retireme	ent exemption	Transfer from rese	erve: assessable am	ount	
C \$		K \$			
CGT small business 15-yea	r exemption amount	Transfer from res	erve: non-assessabl	e amount	
D \$		L \$			
Personal injury election		Contributions from	m non-complying		
E \$			usly non-complying	tunas	
Spouse and child contribution	one	T \$			
F \$	J113	Any other contrib	outions		
	no.	(including Super C	Co-contributions and er Amounts)	d	
Other third party contribution G \$	115	M \$			
-					- -1
		NTRIBUTIONS N \$			
	· · · · · · · · · · · · · · · · · · ·	of labels A to M)			Loss
011					
Other transactions	All	ocated earnings or losses			
Other transactions Accumulation phase		or losses ♥♥☐			
1		or losses Inward rollovers and transfers			
Accumulation phase a \$1 \$ Retirement phase a	account balance	or losses Inward rollovers and transfers Outward rollovers and Q \$]
Accumulation phase a S1 \$ Retirement phase a - Non CDBIS	account balance	or losses Inward rollovers and transfers Outward rollovers and transfers Q \$			Code
Accumulation phase a \$1 \$ Retirement phase a - Non CDBIS \$2 \$	account balance	or losses Inward rollovers and transfers Outward rollovers and Q \$			
Accumulation phase a S1 \$ Retirement phase a - Non CDBIS S2 \$ Retirement phase a - CDBIS	account balance	or losses Inward rollovers and transfers Outward rollovers and transfers Lump Sum payment Income			Code
Accumulation phase a \$1 \$ Retirement phase a - Non CDBIS \$2 \$ Retirement phase a	account balance	rollovers and transfers Outward rollovers and transfers Lump Sum payment Or losses P \$ Q \$			
Accumulation phase a Retirement phase a Non CDBIS S2 \$ Retirement phase a CDBIS S3 \$	account balance account balance	or losses Inward rollovers and transfers Outward rollovers and transfers Lump Sum payment Income stream payments R2 \$			
Accumulation phase a S1 \$ Retirement phase a - Non CDBIS S2 \$ Retirement phase a - CDBIS	account balance account balance account balance account balance	or losses Inward rollovers and transfers Outward rollovers and transfers Lump Sum payment Income stream R2 \$			
Accumulation phase a Retirement phase a Non CDBIS S2 \$ Retirement phase a CDBIS S3 \$	account balance account balance account balance account balance CLOSING ACCO	or losses Inward rollovers and transfers Outward rollovers and transfers Lump Sum R1 \$ Income stream payments OUNT BALANCE \$\$			
Accumulation phase a Retirement phase a Non CDBIS S2 \$ Retirement phase a CDBIS S3 \$	account balance account balance account balance account balance CLOSING ACCO (S1 plus Accumula	or losses Inward rollovers and transfers Outward rollovers and transfers Lump Sum payment Income stream payments OUNT BALANCE \$\$ S2 plus S3)			

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TFN					

MEMBER 4								
Title: Mr Mrs Miss Ms C	Other							
Family name								
First siven name		Other given r	ames					
First given name		Other givern	iai ios					
						Day	Month	Year
Member's TFN See the Privacy note in the Declaration.					Date of birth			
Contributions								1
OPENIN	NG ACCOU	NT BALANCE	\$_					
Refer to instructions for completing these		Proces	ds fron	n prima	ary residence dis	sposal		-
labels.		H \$						
Employer contributions		Receip	t date	Day	Month	Year		
A \$		H1	• • • • • • • • • • • • • • • • • • • •					
ABN of principal employer			able for	reign s	uperannuation fu	ınd amoun	t	
A1 \$		1 9						
•				1 6		Alaus Alumad a		
Personal contributions			-	ole fore	eign superannua	ition tuna a	irriourit	
В \$		J	5					
CGT small business retirement exemption	on	Transfe	er from	reserv	e: assessable ar	mount		
C \$		K	\$					
CGT small business 15-year exemption	amount	Transf	er from	reserv	e: non-assessal	ole amount		
D \$			\$					
		Contri	hutions	from	non-complying			
Personal injury election		funds	and pre	eviousl	y non-complying	g funds		
E \$		Т 9	5					
Spouse and child contributions		•						
F \$		Any ot	her cor	ntributi	ons -contributions a	nd		
Other third party contributions		Low Ir	icome S	Super.	Amounts)			
G \$		M :	\$					
								1
т		TRIBUTION: abels A to M)	s N	\$				
Other transactions		ated earning	5	•				Loss
Other transactions	Alloc	or losse		\$				
Accumulation phase account bala	nce	Inward rollovers and		\$				
S1 \$		transfer	S	Ψ				
Retirement phase account bal	ance	Outwar rollovers an		\$				
– Non CDBIS		transfer	S					Code
S2 \$		Lump Sur paymer	n R1 :	\$				
Retirement phase account bala – CDBIS	ince	Incom	Э					Code
S3 \$		strean paymen	1 R2	\$				
								1
TRIS Count CLOSII		NT BALANC	E S	\$				
	(S1 plus S		. W.4	φ.				_
•	Accumulatio	n phase valu	∀ ⊼1 ∶	P				
	Retireme	nt phase valu	e X2 :	\$				_ [
Ou	tstanding lin	nited recours ement amour	e Y	\$				8.
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Taxpayer/entity name: Gilmartin Superannuation Fund

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Section G: Supplementary m	ember information	
MEMBER 5		Code
Title: Mr Mrs Miss Ms Other		Account status
Family name		
First given name	Other given names	
That given name		
		date of death
See the Privacy note in the Declaration.	Month Year Day Month	n Year
Contributions OPENING ACCO	UNT BALANCE \$	
Refer to instructions	Proceeds from primary residence dispo	sal
for completing these labels.	H \$	
Employer contributions	Receipt date Day Month	Year
A \$	H1	
ABN of principal employer	Assessable foreign superannuation fund	amount
A1 \$	1 \$	
	Non-assessable foreign superannuation	fund amount
Personal contributions		Taria arriodin
B \$	J \$	
CGT small business retirement exemption	Transfer from reserve: assessable amou	ınt ————
C \$	K \$	
CGT small business 15-year exemption amount	Transfer from reserve: non-assessable a	amount
D \$	L \$	
Personal injury election	Contributions from non-complying funds and previously non-complying fu	ınds
E \$		
Spouse and child contributions	T \$	
F \$	Any other contributions	
Other third party contributions	(including Super Co-contributions and Low Income Super Amounts)	
G \$	M \$	
	ONTRIBUTIONS N \$	
	ocated earnings	Loss
	or losses	
Accumulation phase account balance	Inward rollovers and P\$	
S1 \$	transfers Outward	
Retirement phase account balance – Non CDBIS	rollovers and transfers	0-4-
S2 \$	Lump Sum R1 \$	Code
Retirement phase account balance	payment	Code
- CDBIS	Income stream R2 \$	
	payments	
	DUNT BALANCE \$\$	
	s S2 plus S3)	
Accumula	ation phase value X1 \$	
Retiren	nent phase value X2 \$	
Outstanding horrowing array	limited recourse gement amount	
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Self managed superannuation fund return 2020 Taxpayer/entity name: Gilmartin Superannuation Fund

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TFN			

MEMBER 6		Code
Title: Mr Mrs Miss Ms Other	Account s	tatus
Family name		
First given name	Other given names	
Member's TFN Da	ate of birth If deceased, date of death	
See the Privacy note in the Declaration. Day	Month Year Day Month Year	
Contributions		
Refer to instructions	COUNT BALANCE \$	
for completing these	Proceeds from primary residence disposal	
labels.	H \$	
Employer contributions	Receipt date Day Month Year	
A \$	H1	
ABN of principal employer	Assessable foreign superannuation fund amount	
A1 \$	1 \$	
	Non-assessable foreign superannuation fund amount	
Personal contributions		
В \$	J \$	
CGT small business retirement exemption	Transfer from reserve: assessable amount	
C \$	K \$	
CGT small business 15-year exemption amoun	nt Transfer from reserve: non-assessable amount	
D \$	L \$	
	Contributions from non-complying	
Personal injury election	funds and previously non-complying funds	
E \$	т \$	
Spouse and child contributions		
F \$	Any other contributions (including Super Co-contributions and Low Income Super Amounts)	
Other third party contributions		
G \$	M \$	
TOTAL	CONTRIBUTIONS N \$	
1	um of labels A to M)	Loss
Other transactions	Allocated earnings	
	or losses	
Accumulation phase account balance	rollovers and P \$	
S1 \$	transfers Outward	
Retirement phase account balance - Non CDBIS	rollovers and Q \$	
S2 \$	transfers Lump Sum R1 \$	Code
Retirement phase account balance	payment R1 \$	Code
- CDBIS	Income stream R2 \$	
S3 \$	payments	ì
TRIS Count CLOSING AC	CCOUNT BALANCE \$\$	
	plus S2 plus S3)	
Accum	nulation phase value X1 \$	
	irement phase value X2 \$	1
Outstand borrowing ar	ting limited recourse rrangement amount	
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Self managed superannuation fund return 2020 Taxpayer/entity name: Gilmartin Superannuation Fund

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TFN	T				

e: Mr Mrs Miss Ms				
L L L	Other			Account status
nily name				
t given name		Other given names		
. givorria.no				
ember's TFN		of birth		, date of death
e the Privacy note in the Declaration	on, Day	Month Year	Day Mont	11 100
120.42				
	ENING ACCOU	INT BALANCE \$		
Refer to instructions completing these		Proceeds from	n primary residence dispo	sal
els.		Н \$		
mployer contributions		Receipt date	Day Month	Year
\$		H1		
BN of principal employer		Assessable fo	reign superannuation fund	amount
1 \$		I \$		
ersonal contributions		Non-assessa	ble foreign superannuation	n fund amount
3 \$		J \$		
GT small business retirement exer	mntion		reserve: assessable amou	unt
\$ \$	приот	K \$	1000,107,00000000000	
CGT small business 15-year exemp	ntion amount		reserve: non-assessable	amount
	ottori arrioarit	L \$	reserve. Non assessable	arrount
		,	s from non-complying	
Personal injury election		funds and pr	eviously non-complying fu	unds
\$		т \$		
Spouse and child contributions		A atha a . a a .	atribu stiana	
\$		Any other cor (including Su	per Co-contributions and Super Amounts)	
Other third party contributions \$ \$. 1:	Super Amounts)	
3 \$		М \$		
	TOTAL COI	NTRIBUTIONS N	\$	
	-	labels A to M)		Loss
ther transactions	Allo	cated earnings or losses	\$	
Accumulation phase account	: balance	Inward rollovers and P	¢	
S1 \$		transfers	Φ	
Retirement phase accoun	t balance	Outward rollovers and Q	\$	
- Non CDBIS		transfers		Code
	halanaa	Lump Sum R1	\$	
Retirement phase account - CDBIS	Dalarice	Income stream R2	•	Code
S3 \$		payments	Φ	
TRIS Count CL	OSING ACCO	JNT BALANCE S	\$	
	(S1 plus S	62 plus \$3)	p =	
	Accumulati	on phase value X1	\$	
	Retireme	ent phase value X2	\$	/
	Outstanding li			
	arrawina arranc	rement amount 🌁 🕆	Ψ	//

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

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TFN	

MEMBER 8								Code
Title: Mr Mrs Miss Ms	Other						Account statu	sı
Family name								
First given name		Other given na	ames .					
First given hame		Othor givon in	2,1100					
Member's TFN		of birth			If decea	sed, date		
See the Privacy note in the Declaration	T. Day	Month Yea	r	1	Day	Month	Year	
				_				
Contributions	NING ACCO	UNT BALANCE	\$					
Refer to instructions				primon	rasidanas	licnocal		
for completing these labels.		H \$	as irom	primary	residence c	iisposai		
		•	L	Dou	Month	Year		
Employer contributions A \$		Receip	t date	Day	MOILI	l eai	1	
ABN of principal employer		H1	abla for	oign gun	erannuation	fund amour	J.	
A1 \$				HUN SUP	erarinuation	iuna amoui		
ΑΙ Φ		I \$						
Personal contributions		Non-as	sessab	le foreig	n superannu	ation fund a	amount	
В \$		J \$	3					
CGT small business retirement exem	ption	Transfe	r from r	eserve:	assessable a	amount		
C \$		К \$						
CGT small business 15-year exempt	tion amount	ŧ.		reserve:	non-assessa	able amoun	t	
D \$		L S		000.701				
		Contrib	outions	from no	n-complying			
Personal injury election		funds a	and pre	viously r	non-complyii	ng funds		
E \$		т \$	3					
Spouse and child contributions		Ε					172	
F \$		Any oth (includi	ner cont ng Sup	tribution er Co-co	s ontributions : nounts)	and		
Other third party contributions		1	-	uper An	nounts)			
G \$		М \$	5					
	TOTAL CO	NTRIBUTIONS	N \$					
	1	of labels A to M)						oss
Other transactions	All	ocated earnings or losses		5				
A supplied in the control of the con	aalanaa] Inward	1					
Accumulation phase account to \$1.5	balance	rollovers and transfers		;				
Retirement phase account	balance	Outward						
- Non CDBIS		rollovers and transfers	3				Co	ode
S2 \$		Lump Sum	R1 \$	5				
Retirement phase account to - CDBIS	oalance	paymen	•					ode
S3 \$			R2 \$;				
TRIS Count CLC		OUNT BALANC	E S \$	i				
		S2 plus S3) tion phase value	y4 d					
		ent phase value		}			1	
ho	Outstanding	limited recourse gement amoun	Y \$;				/
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Taxpayer/entity name: Gilmartin Superannuation Fund

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TFN					

Australian managed investments		Listed trusts	A	\$		-00
		Unlisted trusts	В	\$[-00
		Insurance policy	C	\$[-00
	Other	managed investments	D	\$[-90
Australian direct investments	C	ash and term deposits	E	\$[47866	-00
Limited recourse borrowing arrangeme	ents	Debt securities	F	\$[-60
Australian residential real property J1\$.gg	Loans	G	\$		-00
Australian non-residential real property		Listed shares		1		-90
J2 \$	-00			\$		-00
Overseas real property		Unlisted shares		ΦĹ		-500
	- 90 -	Limited recourse	J	\$[.0Q
Australian shares J4 \$.00	Non-residential		φŤ		-00
Overseas shares		real property	K	\$[
J5 \$	-00	Residential real property		\$		-90
Other		Collectables and personal use assets	M	\$[-90
J6 \$	-00	Other assets		i in		-00
Property count						
J7 \$						
Other investments		Crypto-Currency	N	\$		-00
Overseas direct investments		Overseas shares	P	\$		-90
Overseas	s non-r	esidential real property	Q	\$		-90
Over	rseas r	esidential real property	R	\$		-00
Ove	erseas	managed investments	S	\$		-00
		Other overseas assets				-00
TOTAL ALISTRALIAN		OVERSEAS ASSETS	_	-	47866	
				7		
(Sum of						
				0		-Da

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Self managed superannuation fund refactors and self-managed superannuation fund	turn 2020			TEN	ozivi3
financial institution?	A No Yes B				
16 LIABILITIES					
Borrowings for limited recourse borrowing arrangements V1 \$.90 Permissible temporary borrowings V2 \$.90					
Other borrowings V3 \$	Borrowings	v \$			-90
(total of all CLOSING ACCOUNT BALANCEs fro	Reserve accounts Other liabilities TOTAL LIABILITIES		8	47866	-90 -90 -90
17 Taxation of financial arrangements (TOF					-00
		\$			-00
Section J: Other information					
Family trust election status If the trust or fund has made, or is making, a fam specified of the election (for exe If revoking or varying a family trust e	ample, for the 2019–20	incom	e year, write 2020.	A	
and complete and attach the Anterposed entity election status If the trust or fund has an existing election, wo fund is making one or more election specified and complete an Interposed entities.	vrite the earliest incomens	ə year s arliest i	pecified. If the trust ncome year being	в	
If revoking an	interposed entity elect	ion, prir	nt R , and complete		1
and attach t	he Interposed entity el	ection c	or revocation 2020.		
			Alt the		1

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

N. .40004700388

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Section K	· Dec	larations

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.

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 cop return, including any attached	y of the schedul	audit report ar les and addition	nd are aware of nal documentati	any matters raised ion is true and cor	d therein. Th rect.	ne informa	tion on th	is annual
Authorised trustee's, director's					1 /			
	1	///			7//	Day	Month	Year
	10				Date	09	11	2020
Preferred trustee or dire	ctor co	ntact detail	s:					
Title: Mr Mrs X Miss	Ms	Other						
Family name								
Gilmartin								
First given name			Other given na	mes				
Melissa								
Phone number 02 92	67765	55						
Email address								
Non-individual trustee name (i	f applica	able)						
Penrith Nominees (NS	SW) Pt	y Limited						
ABN of non-individual trustee		9712	29794298					
	ime tak	en to prepare	and complete th	nis annual return		Hrs		
The Commissioner of Tayou provide on this annual ref	xation, a turn to r	as Registrar of	the Australian B egrity of the regi	usiness Register, i ister. For further in	may use the	e ABN and refer to the	d busines: e instructio	s details which ons.
TAX AGENT'S DECLARA I declare that the Self-mainformation provided by the tis true and correct, and that the self-main formation provided by the tis true and correct, and that the self-main formation is true.	TION; anaged rustees.	superannuation that the trust	on fund annua	al return 2020 me a declaration	has been stating th	prepare	d in ac	cordance with
Tax agent's signature					_			
Mingen					Date	Day	Month 1/	2020
Tax agent's contact deta Title: Mr Mrs Miss Family name	ils Ms	Other						
Rogers								
First given name			Other given na	mes				
Catriona								
Tax agent's practice			,					
The Rogers Group Ltd	Partr	ership						
Tax agent's phone number		3	Reference numb	ber	7	Tax ag	ent numb	oer
02 9267 7655			GILM70			64	941004	
Postal address for annua	al return	s: Australian T	axation Office,	GPO Box 9845,	IN YOUR (APITAL (CITY	1/
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PART A

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

This declaration is to be complete the taxpayer to retain this declarate	d where the tax return is to b ion for a period of five years	e lodged via an approved ATO e after the declaration is made, po	electronic channel. It enalties may apply fo	is the responsibility of or failure to do so.
Tax File Number		Year of retur	n	2020
Name of Partnership, Trust, Fund or Entity	Gilmartin Superannua	tion Fund		
Total Income/Loss 481	Total De	eductions 3833	Taxable Income	e/Loss 352
Privacy The ATO is authorised by the Taxatic TFNs to identify each partner or bening to be sometimes of the second	eficiary or entity in our records.	equest the provision of tax file nur It is not an offence not to provide	nbers (TFNs). The A' the TFNs. However, y	TO will use the you cannot
Taxation law authorises the ATO to of the person authorised to sign the dec			including personal info	ormation about
The Australian Business Register The Commissioner of Taxation, as F tax return to maintain the integrity of		ness Register, may use the ABN a	nd business details w	hich you provide on this
Please refer to the privacy statement commitment to safeguarding your de		egister (ABR) website (www.abr.go	ov.au) for further inform	nation - it outlines our
Electronic funds transfer - direct of Where you have requested an EFT of to facilitate the payment of your taxal	direct debit some of your details		institution and the Tax	κ Office's sponsor bank
I authorise my tax agent to electronic	cally transmit this tax return via	an approved ATO electronic chan	nel.	
Important: Before making this declar every detail. If you are in doubt about for false or misleading statements or	t any aspect of the tax return, p	that all income has been disclosed lace all the facts before the Tax O	I and the tax return is ffice. The tax law prov	true and correct in vides heavy penalties
Declaration: I declare that: * all the information I have provided any applicable schedules is true * I authorise the agent to give this or the second	e and correct, and		including	
Signature of Partner, Truste or Director	e ##		Date	09/11/2020
PART D	Tax agent's certificate	shared facilities only)	h	
We, The Rogers Group Ltd Partners * We have prepared this tax return in * We have received a declaration mand correct, and	accordance with the information	on supplied by the partner, trustee lation provided to us for the prepare	director or public offication of this tax return	icer n is true
* We are authorised by the partner,	trustee, director or public office	To lodge this tax return, including	any applicable sched	ules.
Agent's Signature	Mary	mages	→ Date	26/11/2020
Agent's phone Agent's Contact Name Agent's reference number	02 9267 7655 Catriona Rogers 64941004	Client's refe	erence (GILM70

Taxation Estimate For the year ended 30 June 2020

Tax File Number: Return Code: GILM70 Date prepared: 05/11/2020 Description: Gilmartin Superannuation Fund \$ \$ **Summary of Taxable Income** Business and Investment Income: No-TFN contributions 481.00 Other Business income 481.00 3,833.00 **Less Deductions** -3,352.00 **Loss to Carry Forward** Tax on Taxable Income **Gross Tax SUBTOTAL T2** Add: 259.00 Supervisory levy 259.00 259.00 **TOTAL AMOUNT PAYABLE**

