PRICE SUPERANNUATION FUND

#### PART A

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

TFN: 891 919 374

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 However, you cannot lodge your tax return electronically if you do not quote your TFN.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	891 919 374	Year	2020
Name of partnership, trust, fund or entity	PRICE SUPERANNUATION FUND		

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

#### Important

Before making this declaration please check to ensure that all income has been disclosed and the tax return is true and correct in every detail. If you are in doubt about any aspect of the tax return, place all the facts before the Tax Office. The tax law provides heavy penalties for false or misleading statements on tax returns

#### Declaration: I declare that:

- the information provided to the agent for the preparation of this tax return, including any applicable schedules is true and correct, and

the agent is authorised to lodge this	s tax return.		
Signature of partner, trustee or director	Rie 1	Date	23-6-2021

# PART B

#### Electronic funds transfer consent

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

This declaration must be signed by the partner, trustee, director or public officer prior to the EFT details being transmitted to the Tax Office. If you elect for an EFT, all details below must be completed.

Important: Care should be taken when completing EFT details as the payment of any refund will be made to the account specified.

Agent's reference numb	56089001				
Account Nam	e TRUSTEE FOR THE PR	ICE SUPER FUN	)		
I authorise the refund to b	ne deposited directly to the specified acc	count.	Date	23-6-2021	

Client Ref: PRICESUP Agent: 56089-001

2020

# **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

2020 Return year

TFN: 891 919 374

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.

ch via	e SMSF annual return cannot be used to r ange in fund membership. You must upda r ABR.gov.au or complete the Change of c perannuation entities form (NAT3036).	te fund details		
Sed 1	tion A: Fund information Tax file number (TFN)	891 919 374		
	The Tax Office is authorised by law to requ	est your TFN. You are not obliged to quote your TFN bu	t not quoting it co	uld increase the
		annual return. See the Privacy note in the Declaration.		
2				
		PRICE SUPERANNUATION FUND		
3	Australian business number (ABN)	51 183 505 905		
4	Current postal address P O BOX 910			
		ATHERTON	QLD	4883
	Is this the first required return for a newly re	egistered SMSF? B N		
6	SMSF auditor			
	Auditor's name Title	MR		
	Family name	BOYS ANTHONY		
	First given name Other given names	WILLIAM		
	SMSF Auditor Number	100 014 140		
	Auditor's phone number  Use Agent  N  Postal address	04   10712708		
	address details? N Postal address	PO Box 3376		
		RUNDLE MALL	SA	5000
		Date audit was completed A		
		Was Part A of the audit report qualified ?	В	
		Was Part B of the audit report qualified ?	C	
		If Part B of the audit report was qualified, have the reported issues been rectified?	D	

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.				
A 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 (must be six digits) Fund account number 135328144			
		Fund account name (for example, J&Q Citizen ATF J&Q Family SF)			
		TRUSTEE FOR THE PRICE SUPER FUND			
		I would like my tax refunds made to this account.   N Print Y for yes or N for no.  If Yes, Go to C.			
	_	Use Agent Trust Account?			
	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   633000   Account number   136010154			
		DOD HAMILON			
		Fund account name (for example, J&Q Citizen ATF J&Q Family SF)			
		TRUSTEE FOR THE PRICE SUPER FUND			
	С	Electronic service address alias			
		Provide the electronic service address (ESA) issued by your SMSF messaging provider			
		(For example, SMSFdataESAAlias). See instructions for more information.			
		Fund's tax file number (TFN) 891 919 374			
8	St	atus of SMSF Australian superannuation fund A Y Fund benefit structure B A Code			
		Does the fund trust deed allow acceptance of the Government's Super Co-contribution and Low Income Super Contribution?			
9	W	as the fund wound up during the income year?			
	N	Print Y for yes If yes, provide the date on And payment			
	LA	or N for no. which fund was wound up obligations been met?			
10	Dic	tempt current pension income If the fund pay retirement phase superannuation income stream benefits to one or more members or N for no.			
	To th	o claim a tax exemption for current pension income, you must pay at least the minimum benefit payment under e law. Record exempt current pension income at Label A			
	If	No, Go to Section B: Income			
	If	Yes Exempt current pension income amount A			
		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 Print Y for yes			
	ı	Did the fund have any other income that was assessable? E Print Y for yes or N for no. If Yes, go to Section B: Income			
		Choosing 'No' means that you do not have any assessable income, including no-TFN quoted contributions. If No - Go to Section C: Deductions and non-deductible expenses. (Do not complete Section B: Income.)			
		you are entitled to claim any tax offsets, you can list ese at Section D: Income tax calculation statement			

1

TFN: 891 919 374

# Section B: Income

Do not complete this section if all superannuation interests in the SMSF were supporting superannuation income streams in the retirement phase for the entire year, there was no other income that was assessable, and you have not realised a deferred notional gain. If you are entitled to claim any tax offsets, you can record these at Section D: Income tax calculation statement.

Income	Did you have a capital gains to (CGT) event during the yea	If the total capital loss or total capital gain is greater than \$10,000 or you elected to use the CGT relief in 2017 and the deferred notional gain has been realised, complete and attach a Capital Gains Tax (CGT) schedule 2020
	Have you applied a exemption or rollove	an Print Y for yes
		Net capital gain A
		Gross rent and other leasing and hiring income B
		Gross interest C
		Forestry managed investment scheme income
	foreign income	
D1		Net foreign income D
	Aus	stralian franking credits from a New Zealand company
		Transfers from foreign funds
		Gross payments where ABN not quoted
	on of assessable contributions sable employer contributions	Gross distribution from partnerships
R1	0	* Unfranked dividend
plus Asses	ssable personal contributions	* Franked dividend
	N-quoted contributions	* Dividend franking
R3	O O	credit C
less Trans	nust be included even if it is zero) fer of liability to life nce company or PST	* Gross trust distributions
R6	0	Assessable contributions (R1 plus R2 plus R3 less R6)
Calculatio	on of non-arm's length income	
* Net no	n-arm's length private	
U1	mpany dividends	* Other income S
plus * Net no	on-arm's length trust distributions	*Assessable income due to changed tax
	her non-arm's length income	status of fund
U3	ner non-ann s length meome	Net non-arm's length income (subject to 45% tax rate) (U1 plus U2 plus U3)
instructions to	andatory label it is entered at this label, check the o ensure the correct tax is been applied.	GROSS INCOME (Sum of labels A to U)
		Exempt current pension income Y
		TOTAL ASSESSABLE INCOME (Wiless V)  5,500

Fund's tax file number (TFN)

TFN: 891 919 374

891 919 374

# Section C: Deductions and non-deductible expenses

# 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 expen within Austr	ases A1	A2
Interest expen	nses eas B1	B2
Capital wo expendi	orks ture D1	D2
Decline in valu depreciating as:	e of sets E1	E2
Insurance premiun memb	ns – pers F1	F2
SMSF auditor	fee H1	H2
Investment exper	ases [1] 3,473	12
Management administration exper	and J1 259	J2
Forestry mana investment scheme expe	ense U1	U2
Other amou	unts L1	L2 Code
Tax losses deduc	1,768	
	TOTAL DEDUCTIONS  N 5,500  (Total A1 to M1)	TOTAL NON-DEDUCTIBLE EXPENSES  (Total A2 to L2)
#This is a mandatory label.	#TAXABLE INCOME OR LOSS O (TOTAL ASSESSABLE INCOME TOTAL DEDUCTIONS)	Z 5,500

### 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

Please refer to the Self-managed superannuation fund annual return instructions 2020 on how to complete the calculation statement.

#Taxable income A	0
(an amount must be included	even if it is zero)
#Tax on taxable income T1	0.00
(an amount must be included	even if it is zero)
#Tax on no-TFN- quoted contributions	0.00
(an amount must be included	even if it is zero)
Gross tax B	0.00

(T1 plus J)

Foreign income tax offset	
	Non-refundable non-carry
Rebates and tax offsets	forward tax offsets
C2	
	(C1 plus C2)
	SUBTOTAL 1
	<b>T2</b>
	(B less C -cannot be less than zero)
Early stage venture capital limited partnership tax offset	
D1	
Early stage venture capital limited partnership tax offset carried forward from previous year	Non-refundable carry forward tax offsets
D2	
Early stage investor tax offset	(D1 plus D2 plus D3 plus D4)
Early stage investor tax offset carried forward from previous year	SUBTOTAL 2  13 0.00
D4	
	(T2 less D –cannot be less than zero)
Complying fund's franking credits tax offset	
E1	
No-TFN tax offset	
E2	
National rental affordability scheme tax offset	
E3	
Exploration credit tax offset	Refundable tax offsets
E4	E 0.00
	(E1 plus E2 plus E3 plus E4)

#TAX PAYABLE T5	0.00
(T3 less E - c	cannot be less than zero)

Section 102AAM interest charge

891 919 374

Fund's tax file number (TFN)

TFN: 891 919 374

r ago o or r

Credit for interest on early payments amount of interest H1 Credit for tax withheld – foreign resident withholding (excluding capital gains) H<sub>2</sub> Credit for tax withheld – where ABN or TFN not quoted (non-individual) **H3** Credit for TFN amounts withheld from payments from closely held trusts **H5** Credit for interest on no-TFN tax offset **H6** Credit for foreign resident capital gains withholding amounts Eligible credits 0.00 H8 H (H1 plus H2 plus H3 plus H5 plus H6 plus H8) #Tax offset refunds 0.00 (Remainder of refundable tax offsets). (unused amount from label E-an amount must be included even if it is zero) PAYG instalments raised 860.00 Supervisory levy 259.00 Supervisory levy adjustment for wound up funds M Supervisory levy adjustment for new funds N Total amount of tax refundable 601.00 S (T5 plus G less H less I less K plus L less M plus N) #This is a mandatory label. Section E: Losses Losses Tax losses carried forward 405 U If total loss is greater than \$100,000, to later income years complete and attach a Losses Net capital losses carried schedule 2020. forward to later income years Net capital losses brought forward Net capital losses carried forward from prior years to later income years Non-Collectables 0 0 Collectables 0 0

TFN: 891 919 374

# Section F / Section G: Member Information

In Section F / G report all current members in the fund at 30 June.

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

			See the Privacy note in	the Declaration	Member Number
Title	MR		Member'sTFN 483		
Family name	PRICE				Account status
First given name	RUSSELL				Code
ther given names	FRANCIS				
	Date of birth 10/03/19	58	If deceased, date of death		
Contributions		OPEN	NG ACCOUNT BALAN	NCE 20	00,790.91
Refer to instructio	ns for completing these labe	ls		Proceeds from prima	ry residence disposal
Employer contrib	utions			Receipt date	
<u>A</u>				Н	
ABN of principal	employer			Assessable foreign s fund amount	superannuation
Personal contribu	utions			Non-assessable fore	ign superannuation
В				fund amount	
Section 2000	ess retirement exemption			Transfer from reserve	ə:
C CGT small busin	2000 15 vees			K assessable amount	
exemption amou				Transfer from reserve	
D				non-assessable amo	unt
Personal injury el	lection			Contributions from no	on-complying funds
Spouse and child	1 contributions			and previously non-c	complying funds
F	Contributions			Any other contribution Super Co-contribution	ns (including
Other third party	contributions			Super Co-contribution Income Super Contribution	ns ànd low outions)
G				M	
	TOTAL CONTRI	BUTIONS	J	0.00	
			(Sum of labels A to	o M)	
ther transaction	าร				
Accumulation ph	ase account balance	Allo	cated earnings or losses	0	1,644.33 Loss
	e account balance	Inward	rollovers and transfers	Р	
- Non CDBIS	0.00	Outward	rollovers and transfers	Q	
Retirement phase	e account balance		Lump Sum payment	R1	Code
S3	0.00		Income stream payment	R2	Code
1 TR	RIS Count	CLOSIN	G ACCOUNT BALANCE	S 20	02,435.24
		Ac	ccumulation phase value	X1	
		,	Retirement phase value	V.	
		Outs	tanding limited recourse		
		borrow	ing arrangement amount	Y	

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SMSF Return 2020 PRICE SUPERANNUATION FUND TFN: 891 919 374 Fund's tax file number (TFN) 891 919 374 See the Privacy note in the Declaration. Member Number MRS Member'sTFN 547 692 542 Title Family name PRICE Account status SHARON First given name Code MAREE Other given names If deceased 12/02/1965 Date of birth date of death 15,309.55 Contributions **OPENING ACCOUNT BALANCE** Proceeds from primary residence disposal Refer to instructions for completing these labels Employer contributions Receipt date A H Assessable foreign superannuation ABN of principal employer fund amount A1 Personal contributions Non-assessable foreign superannuation fund amount В J CGT small business retirement exemption Transfer from reserve: assessable amount C K CGT small business 15-year exemption amount Transfer from reserve: non-assessable amount D Personal injury election Contributions from non-complying funds and previously non-complying funds E Spouse and child contributions F Any other contributions (including Super Co-contributions and low Other third party contributions Income Super Contributions) G M 0.00 **TOTAL CONTRIBUTIONS** (Sum of labels A to M) Other transactions Accumulation phase account balance 123.77 Allocated earnings or losses 0 15,433.32 Inward rollovers and transfers Retirement phase account balance - Non CDBIS Q Outward rollovers and transfers 0.00 **S2** Code Lump Sum payment R1 Retirement phase account balance - CDBIS Code **S3** 0.00 Income stream payment R2 1 TRIS Count 15,433.32 CLOSING ACCOUNT BALANCE S S1 plus S2 plus S3 **X1** Accumulation phase value

Retirement phase value Outstanding limited recourse borrowing arrangement amount

**X2** 

15e In-house assets

Limited recourse borrowing arrangements

15f

# TFN: 891 919 374 Section H: Assets and liabilities **ASSETS** 15a Australian managed investments Listed trusts A Unlisted trusts В Insurance policy Other managed investments D 15b Australian direct investments 3,794 Cash and term deposits Debt securities Limited recourse borrowing arrangements G Loans Australian residential real property Listed shares **J1** Australian non-residential real property Unlisted shares J2 0 Overseas real property Limited recourse borrowing arrangements **J3** Australian shares Non-residential real property **J4** 214,074 Residential real property Overseas shares **J5** Collectables and personal use assets Other Other assets **J6** Property count J7 15c Other investments Crypto-Currency 15d Overseas direct investments Overseas shares Overseas non-residential real property Overseas residential real property Overseas managed investments Other overseas assets TOTAL AUSTRALIAN AND OVERSEAS ASSETS 217,868 (Sum of labels A to T)

Did the fund have a loan to, lease to or investment in,

related parties (known as in-house assets)

If the fund had an LRBA were the LRBA borrowings from a licensed

Did the members or related parties of the fund use personal guarantees or other security for the LRBA?

at the end of the income year

financial institution?

Print Y for yes or N for no.

Print Y for yes

or N for no.

B

TFN: 891 919 374

# 16 LIABILITIES

Borrowings for limited recourse borrowing arrangements		
V1		
Permissible temporary borrowings  V2		
Other borrowings V3	Borrowings	V
(total of all C	Total member closing account balances LOSING ACCOUNT BALANCEs from Sections F and G)	W 217,868
	Reserve accounts	X
	Other liabilities	Y
	TOTAL LIABILITIES	Z 217,868
Section I: <b>Taxation of financial arrar</b> 17 Taxation of financial arrangements (TO		
	Total TOFA gains	Н
	Total TOFA losses	1
Section J: Other information		
Family trust election status		
specified of the election	g, a family trust election, write the four-digit income year (for example, for the 2019–20 income year, write 2020).	A
If revoking or varying a famil and complete and attac	y trust election, print R for revoke or print V for variation, ch the Family trust election, revocation or variation 2020.	В
or fund is making one or more	ction, write the earliest income year specified. If the trust e elections this year, write the earliest income year being posed entity election or revocation 2020 for each election	· ·
	oking an interposed entity election, print R, and complete attach the Interposed entity election or revocation 2020.	

TFN: 891 919 374

# 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:

Authorised trustee's, director's or public officer's signature

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 (if required) 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.

	(	218			Date	Day Month Year 22/06/2021
Preferred trustee or director contact details:						
Title		MR				
Family name		PRICE				
First given name		RUSSELL				
_						
Other given names		FRANCIS				
Phone number		Area code         Number           07         40958828				
Email address						
Non-individual trustee name (if applicable)						
ABN of non-individual trustee						
						Hrs
		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:						
IMPACT ACCOUNTING N	1Q					
declare that the Self-managed sup	erannuation	fund annual retur	n 2020 has bee	en prepared in accord	ance with ir	nformation 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.						
					Day Month Year	
Tax agent's signature				Date	22/06/2021	
Tax agent's contact details						
Title	MS					
Family name	FLOREANCIG					
First given name	TANIA					
Other given names						
<b>C</b>	TMDACE ACCOUNTING NO					
Tax agent's practice	IMPACT ACCOUNTING NQ					
Tax agent's phone number	Area code	Number 4243340	0			
Tax agent number	5608900		J	Reference number	PRICES	IIP
Tax agent number	2000300	/ _		reletetice tiuttibet	LIVICED	01