

SMSF Tax Return

2017

1 Jul 2016—30 Jun 2017

931 880 791

PART A ELECTRONIC LODGMENT DECLARATION (FORM P, T, F, SMSF OR EX)

This declaration is to be completed where the tax return is to be lodged via the Tax Office's electronic lodgment service (ELS). 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 However, you cannot lodge your tax return electronically if you do not quote your TFN.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 to disclose it to other government agencies. For information about your 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 partnership, trust, fund or entity	Year
931 880 791	Shadow Superannuation Fund	2017

I authorise my tax agent to electronically transmit this tax return via the electronic lodgment service.

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 my registered tax agent for the preparation of this tax return, including any applicable schedules is true and correct, and
- the agent is authorised to lodge this tax return.

Signature of partner, trustee or director	Date
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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 the electronic lodgment service ELS.

This declaration must be signed by the taxpayer 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, including any family tax benefit, will be made to the account specified.

Agent Ref No.	Account Name
25578668	Shadow Superannuation Fund

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

Signature	Date

PART D TAX AGENTS CERTIFICATE (SHARED FACILITIES USERS ONLY)

Client Ref	Agent Ref No.	Contact Name	Contact No.
SHAD4001	25578668	Trident Financial Group Pty Ltd	0398994036

Declaration - I declare that:

- I have prepared this tax return and/or family tax benefit tax claim in accordance with the information supplied by the taxpayer
- I have received a declaration made by the taxpayer that the information provided to me for the preparation of this document is true and correct, and
- I am authorised by the taxpayer to lodge this tax return and any applicable schedules that are attached.

Agent's Signature	Date

Section A: Fund information

Period start				01/07/2016
Period end				30/06/2017
1 TAX FILE NUMBER				931 880 791
2 NAME OF SELF-MANAGED SUPERANNUATION FUND (SMSF)				Shadow Superannuation Fund
3 AUSTRALIAN BUSINESS NUMBER				96 156 155 631
4 CURRENT POSTAL ADDRESS				
Address	Town/City	State	Postcode	
80 Karawarra Cct	CRANBOURNE NORTH	VIC	3977	
5 ANNUAL RETURN STATUS				
Is this the first required return for a newly registered SMSF?				No
6 SMSF AUDITOR				
Title				Mr
First name				ANTHONY
Other name				WILLIAM
Family name				BOYS
SMSF auditor number				100014140
Contact number				04-10712708
Auditor Address	Town/City	State	Postcode	
PO BOX 3376	Rundle Mall	SA	5000	
Date audit was completed				A 10/03/2021
Was part B of the audit report qualified?				B No
7 ELECTRONIC FUNDS TRANSFER (EFT)				
A. Financial institution details for super payments and tax refunds				
Type				Client Account
BSB number				182512
Account number				961781143
Account name				Shadow Superannuation Fund
B. Financial institution details for tax refunds only				
Type				Client Account
BSB number				182512
Account number				961781143
Account name				Shadow Superannuation Fund

8 STATUS OF SMSF

Australian superannuation fund?	A	Yes
Fund benefit structure	B	A
Does the fund trust deed allow acceptance of the Government's Super Co-contribution and Low Income Super Contribution?	C	Yes

Section B: Income**11 INCOME**

Prior year losses brought forward		
Did you have a CGT event during the year?	G	No
Losses carried forward		
Net Capital Losses from Collectables		\$0.00
Other Net Capital Losses		\$0.00
Gross interest income	C	\$4,774.00
Assessable contributions	(R1 + R2 + R3 less R6) R	\$314.00
Assessable employer contributions	R1	\$314.00
No-TFN-quoted contributions	R3	\$0.00
Gross income	W	\$5,088.00
Total assessable income	V	\$5,088.00

Section C: Deductions and non-deductible expenses**12 DEDUCTIONS**

		Deductions		Non-Deductible Expenses
Insurance premiums – members	F1	\$2,613.00	F2	
Management and administration expenses	J1	\$264.00	J2	
Totals	N	\$2,877.00	Y	
Total SMSF expenses		(N + Y)	Z	\$2,877.00
Taxable income or loss		(TOTAL ASSESSABLE INCOME less TOTAL DEDUCTIONS)	O	\$2,211.00

Section D: Income tax calculation statement

13 CALCULATION STATEMENT		
Taxable income		A \$2,211.00
Tax on taxable income		T1 \$331.65
Tax on no-TFN-quoted contributions		J \$0.00
Gross tax		B \$331.65
Subtotal	(B less C - cannot be less than zero)	T2 \$331.65
Subtotal	(T2 less D - cannot be less than zero)	T3 \$331.65
REFUNDABLE TAX OFFSETS		(E1 + E2 + E3 + E4) E \$0.00
Complying fund's franking credits tax offset		E1 \$0.00
Tax Payable		T5 \$331.65
Tax offset refunds (Remainder of refundable tax offsets)		I \$0.00
Supervisory levy		L \$259.00
Supervisory levy adjustment for wound up funds		M \$0.00
Supervisory levy adjustment for new funds		N \$0.00
Amount payable		S \$590.65

Section H: Assets and liabilities

15 ASSETS		
15b Australian direct investments		
Cash and term deposits		E \$67,214.00
Loans		G \$30,419.00
Other assets		O \$560.00
15c Overseas direct investments		
Total Australian and overseas assets		U \$98,193.00
16 LIABILITIES		
Total member closing account balances		W \$97,447.00
Other liabilities		Y \$744.00
Total liabilities		Z \$98,191.00

Section K: Declarations

PREFERRED TRUSTEE OR DIRECTOR CONTACT DETAILS

Title	Mr
First name	Gurpreet
Family name	Chadha
Contact number	03 98994036

TAX AGENT'S CONTACT DETAILS

Practice name	Trident Financial Group
First name	Trident
Other name	Financial Group Pty
Family name	Ltd
Contact number	03 98994036

Member 1 — CHADHA, GURPREET (206971868)Account status OpenTax File Number 206971868**INDIVIDUAL NAME**Title MrGiven name GURPREET

Other given names

Family name CHADHA

Suffix

Date of birth 24 Mar 1973

Date of death

CONTRIBUTIONSOpening account balance \$63,703.00Employer contributions **A** \$314.00Principal Employer ABN **A1**Personal contributions **B**CGT small business retirement exemption **C**CGT small business 15 year exemption **D**Personal injury election **E**Spouse and child contributions **F**Other third party contributions **G**Assessable foreign superannuation fund amount **I**Non-assessable foreign superannuation fund amount **J**Transfer from reserve: assessable amount **K**Transfer from reserve: non-assessable amount **L**Contributions from non-complying funds and previously non-complying funds **T**Any other contributions (including Super Co-contributions and Low Income Super Contributions) **M****Total Contributions** **N** **\$314.00****OTHER TRANSACTIONS**Allocated earnings or losses **O** \$99.00Inward rollovers and transfers **P**Outward rollovers and transfers **Q**Lump Sum payment **R1**Income stream payment **R2****Closing account balance** **S** **\$64,116.00**

Member 2 — CHADHA, KAMALPREET KAUR (344385725)

Account status		Open
Tax File Number		344385725
INDIVIDUAL NAME		
Title		Mrs
Given name		KAMALPREET
Other given names		KAUR
Family name		CHADHA
Suffix		
Date of birth		10 Feb 1976
Date of death		
CONTRIBUTIONS		
Opening account balance		\$31,623.00
Employer contributions	A	
Principal Employer ABN	A1	
Personal contributions	B	
CGT small business retirement exemption	C	
CGT small business 15 year exemption	D	
Personal injury election	E	
Spouse and child contributions	F	
Other third party contributions	G	
Assessable foreign superannuation fund amount	I	
Non-assessable foreign superannuation fund amount	J	
Transfer from reserve: assessable amount	K	
Transfer from reserve: non-assessable amount	L	
Contributions from non-complying funds and previously non-complying funds	T	
Any other contributions (including Super Co-contributions and Low Income Super Contributions)	M	\$500.00
Total Contributions	N	\$500.00

OTHER TRANSACTIONS

Allocated earnings or losses	O	\$1,208.00
Inward rollovers and transfers	P	
Outward rollovers and transfers	Q	
Lump Sum payment	R1	
Income stream payment	R2	
Closing account balance	S	\$33,331.00