Cain	Superannuation	Fund
------	----------------	------

# 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 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 However, you cannot lodge your tax return electronically if you do not quote your TFN.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	XXX XXX XXX	Year	2023	
Name of partnership, trust, fund or entity	Cain Superannuat:	ion 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	tax	return.	
---	--------------	------------	----	-------	------	-----	---------	--

Signature of partner, trustee or director	Date	

# 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 number	67076007	
Account Name	Cain Superannuation	Fund
e the refund to be	deposited directly to the specified acco	pount.

Signature

I authoris

Date

		Self-mana fund annu	ged superannua al return	ation	2023
Wh	o should complete this annual return?			Return yea	2023
con	y self-managed superannuation funds (SMSI pplete this annual return. All other funds must id income tax return 2023 (NAT 71287).				
in	ne Self-managed superannuation fund ann structions 2023 (NAT 71606) (the instruction ou to complete this annual return.				
ch vi	ne SMSF annual return cannot be used to r hange in fund membership. You must upda a ABR.gov.au or complete the Change of c uperannuation entities form (NAT3036).	te fund details			
Se	ction A: Fund information				
1	Tax file number (TFN)	XXX XXX XXX			
	The ATO is authorised by law to request you chance of delay or error in processing you			oting it could increa	se the
2	Name of self-managed superannuat	ion fund (SMSF)			
		Cain Superann	uation Fund		
3	Australian business number (ABN) (if applicable)	36 546 678 67	4		
4	Current postal address				
4	Current postal address		unting Services		
		Shop 3/245 Mi	lne Road		
		Modbury North		SA	5092
5	Annual return status Is this an amendment to the SMSF's 2023 i		N		
	Is this the first required return for a newly	registered SMSF?	N		
6	SMSF auditor				
	Auditor's name Title				
	Familyname				
	First given name				
	Other given names				
	SMSF Auditor Number				
	Auditor's phone number				
	Use Agent Postal address address				
		Date audit was comple	ted A		
		Was Part A of the aud	t report qualified ?		
		Was Part B of the audi	t report qualified ?		
		If Part B of the audit re have the reported issue	port was qualified, Des been rectified?		

### SMSF Return 2023

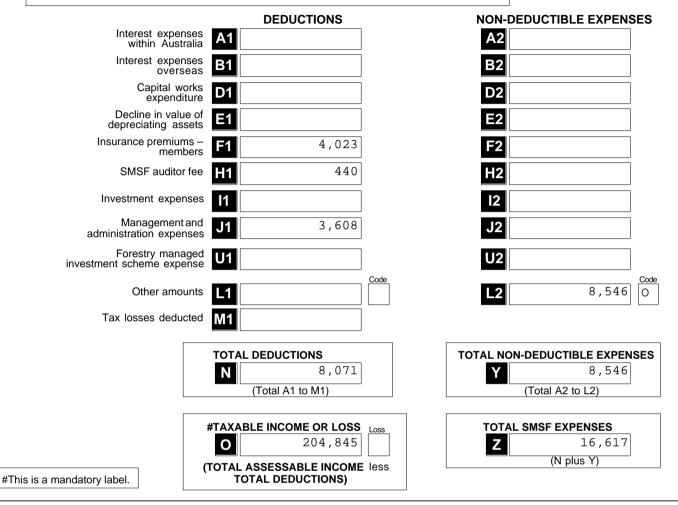
7	E W	lectronic funds tran	<b>sfer (EFT)</b> ged super fund's financial institution details to pay any super payments and tax refunds owing to you.
	Α		stitution account details for super contributions and rollovers. Do not provide a tax agent account here.
		Fund BSB number	065000   Fund account number   11026821
		Fund account name	
		Cain Superann	uation Fund
		I would like my tax re	funds made to this account. Y Print Y for yes or N for no. If Yes, Go to C.
	в		on account details for tax refunds Use Agent Trust Account?  for tax refunds. You can provide a tax agent account here.
		BSB number Account name	Account number
	С	Electronic service	address alias
		(For example, SMSF	s service address alias(ESA) issued by your SMSF messaging provider. IataESAAlias). See instructions for more information.
		BGLSF360	
			XXXXXX XXX XXXX XXXXX XXXXXX XXXXXX XXXX
8	S	tatus of SMSF	Australian superannuation fund A Y Fund benefit structure B A Code
			ust deed allow acceptance of the ment's Super Co-contribution and Low Income Super Amounts?
9	w	as the fund wound	up during the income year?
	N	Print <b>Y</b> for yes or <b>N</b> for no.	If yes, provide the date on which the fund was wound up Have all tax lodgment obligations been met?
10	Di	xempt current pens id the fund pay retirement the income year?	ion income ent phase superannuation income stream benefits to one or more members or N for no.
			n for current pension income, you must pay at least the minimum benefit payment under current pension income at Label A.
	li	f No, Go to Section B: I	icome
	li	f Yes Exempt current	pension income amount A
		Which method d	d you use to calculate your exempt current pension income?
		Seg	egated assets method B
		Unseg	regated assets method <b>C</b> Was an actuarial certificate obtained? <b>D</b> Print <b>Y</b> for yes
		Did the fund have any	other income that was assessable?
			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.)
			m any tax offsets, you can list me tax calculation statement.

Section B: Income				
Do not complete this section if all superannur retirement phase for the entire year, there y notional gain. If you are entitled to claim any	was no other income	that was assessable, and you have	not realised a deferred	•
1 Income Did you have a capital (CGT) event during		Print Y for yes and the defendence of the second se	pital loss or total capital gain ou elected to use the transitio red notional gain has been re Capital gains tax (CGT) scher	nal CGT relief in 2017 alised, complete
Have you a exemption or		Print Y for yes		
		Net capital ga	ain A 5	8,411
	Gross re	ent and other leasing and hiring incor	me	
		Gross intere		256
		Forestry managed investme scheme incor		
Gross foreign income		Net foreign incor	me <b>D</b> 12	Loss 4,478
D1 124,478				<u> </u>
	Australian franking	credits from a New Zealand compa	iny E	Number
		Transfers fro foreign fun		
	]	Gross payments whe ABN not quot		Loss
Calculation of assessable contribution Assessable employer contributions		Gross distributi from partnershi		
29,771 plus Assessable personal contribution		* Unfranked divide amou		
R2 0	s	* Franked divide amou		
plus #*No-TFN-quoted contributions		* Dividend franki cre		
(an amount must be included even if it is	zero)	* Gross tru	ust M	Code
less Transfer of liability to life insurance company or PST		distributio		
<b>R6</b> 0		Assessable contributio (R1 plus R2 plus R3 less R		9,771
Calculation of non-arm's length incom	e			
* Net non-arm's length private company dividends				Code
U1		* Other incor	me S	
plus * Net non-arm's length trust distribu	itions	*Assessable incor due to changed t status of fu	tax T	
plus * Net other non-arm's length incom	e	Net non-arm's length income (subject to 45% tax rat (U1 plus U2 plus U	te) U	
#This is a mandatory label. * If an amount is entered at this label, ch instructions to ensure the correct tax treatment has been applied.	eck the	GROSS INCO (Sum of labels A to	ME W	Loss
		Exempt current pension incor	me Y	
		TOTAL ASSESSABLE INCO (W less		2,916

## 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).



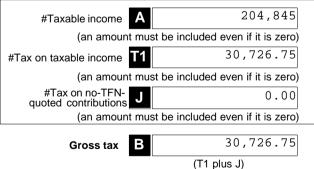
# Section D: Income tax calculation statement

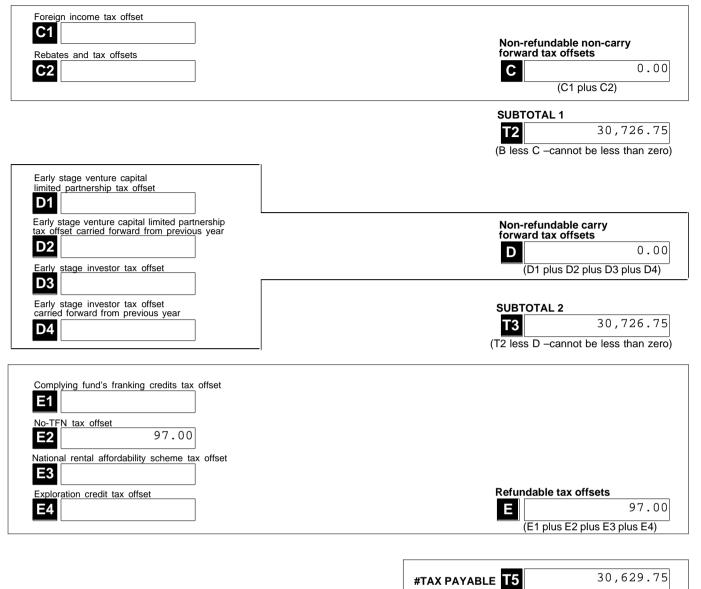
#Important:

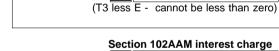
Section B label R3, Section C label O and Section D labels A,T1, J, T5 and I are mandatory. If you leave these labels blank, you will have specified a zero amount.

## 13 Calculation statement

Please refer to the Self-managed superannuation fund annual return instructions 2023 on how to complete the calculation statement.







G

Fund's tax file number (TFN) XXX XXX XXX

Credit for tax withheld – foreign resident withholding (excluding capital gains)	
H2	
Credit for tax withheld – where ABN or TFN not quoted (non-individual)	
НЗ	
Credit for TFN amounts withheld from payments from closely held trusts	
H5	
Credit for interest on no-TFN tax offset	
Н6	
Credit for foreign resident capital gains withholding amounts	Eligible credits
H8	.00
	(H2 plus H3 plus H5 plus H6 plus H8)

<b>#Tax offset refunds</b> (Remainder of refundable tax offsets) an am	0.00 (unused amount from label E- ount must be included even if it is zero)
	PAYG instalments raised
	K Supervisory levy
	<b>L</b> 259.00
	Supervisory levy adjustment for wound up funds
	Μ
	Supervisory levy adjustment for new funds
	Ν
Total amount of tax payable	S 30,888.75
(T5 plus G les	s H less I less K plus L less M plus N)

#This is a mandatory label.

Sec 14	tion E: <b>Losse</b> Losses	S			
	If total loss is greater than \$100,000, complete and attach a Losses schedule 2023.		Tax losses carried forward to later income years		
			Net capital losses carried forward to later income years		
	Net capital lo	osses brought forward	Net capital losses carried forward		
		from prior years	to later income years		
	Non-Collectables				
	Collectables				

SMSF Return 2023	Cain	Superannuation	Fund
Section F / Section G: Member I	nforn	nation	

S2

**S**3

Retirement phase account balance -CDBIS

0 TRISCount

0.00

Code

Code

435,794.88

SMSF Return 2023 Section F / Sec	Cain ction G: <b>Member Inforr</b>	Superannuation Fund nation	ХХ	XX XXX XXX XXX
	[	See the Privacy note i		Member
Title	Mr	Member'sTFN XXX		
Familyname	Cain			Account status
First given name	Daniel			O Code
Other given names	Stephen			
	Date of birth 08/06/197	7 If deceased, date of death		
Contributions		OPENING ACCOUNT BALAN	ICE 62	24,979.78
Refer to instruction	ons for completing these labels	.]	Proceeds from prima	ry residence disposal
Employer contrib	utions		Receipt date	
ABN of principal	employer		Assessable foreign s fund amount	superannuation
Personal contribu	utions 25,000.00		Non-assessable fore fund amount	ign superannuation
CGT small busine	ess retirement exemption		J Transfer from reserv assessable amount	/e:
CGT small busir exemption amou	ness 15-year int		K Transfer from reserv	
D			non-assessable amo	bunt
Personal injury e	lection		Contributions from no and previously non-co	on-complying funds omplying funds
Spouse and child	d contributions		Any other contribution	ns (including
Other third party G	contributions		Super Co-contribution Income Super Amoun	· · · · ·
	TOTAL CONTRIBU	JTIONS N 25,00	00.00	
		(Sum of labels A to	) M)	
Other transaction	ns		Allocated earnings o	
	hase account balance		<b>O</b> 21	L4,184.90 L
S1 Retirement phas	435,794.88 se account balance		Inward rollovers and	I transfers
- Non CDBIS	0.00		Outward rollovers an	nd transfers

Sensitive (when completed)

Outstanding limited recourse borrowing arrangement amount

CLOSING ACCOUNT BALANCE S

Accumulation phase value

Retirement phase value

Q

**R1** 

R2

X1

X2

Y

Lump Sum payments

Income stream payments

(S1 plus S2 plus S3)

Fund's tax file number (TFN)	Fund's	tax	file	number	(TFN)
------------------------------	--------	-----	------	--------	-------

			See the Privacy note in the	e Declaration.	Member	
Title	Mrs		Member'sTFN XXX X	XX XXX	2	XXX XXX XX
Familyname	Cain				Account	status
First given name	Tracey				O <sub>Code</sub>	
Other given names	Deanne					
	Date of birth 18/01/	1982	If deceased,			
Contributions		OPENING A	ACCOUNT BALANCE	45,	224.47	
Refer to instructio	ns for completing these la	abels.	Pr	oceeds from primary r	esidence d	isposal
Employer contribu				eceipt date		
A	4,771.51		Ē			
ABN of principal e	employer		As	sessable foreign supe	rannuation	
A1			fui	nd amount		
Personal contribu	itions		No	on-assessable foreign	superannu	ation
В				nd amount		
	ess retirement exemption		Tr	ansfer from reserve:		
С			as K	sessable amount		
CGT small busin exemption amour	ess 15-year nt			ansfer from reserve:		
D				on-assessable amount	]	
Personal injury el	ection					
Е			and	ntributions from non-comp	lying funds	inds
Spouse and child	contributions		T			
F			An Su	y other contributions (i per Co-contributions a	ncluding nd low	
Other third party	contributions		Inc	come Super Amounts)		
	TOTAL CONT	RIBUTIONS N	4,771.			
			(Sum of labels A to M)			
Other transaction	IS	1		located earnings or los		Loss
	ase account balance		C	18,	254.17	L
S1 Retirement phas	31,741.81 e account balance			ward rollovers and tra	nsfers	
- Non CDBIS			i			
S2	0.00			utward rollovers and t	ransfers	
Retirement phase	e account balance		G			
<b>S</b> 3	0.00		R	mp Sum payments		Code
						Cada
			R	come stream payments 2	;	Code
						- -
0 TR	ISCount	CLOSING AC		31,	741.81	
				(S1 plus S2 plus S3	)	
		Accumu	Ilation phase value	1		
		Reti	rement phase value	2		
		Outstandi	ng limited recourse	7		
0 TR	ISCount	Accumu Retii Outstandi	Ilation phase value X rement phase value X	(S1 plus S2 plus S3 1 2		

SMSF Return 2023	Cain Su	perannuation Fund	XXXX XXXXXXXXXX Page 9 of 13			
Section H: Assets and liabi	lities					
<ul><li><b>15</b> ASSETS</li><li>15a Australian managed investi</li></ul>	ments					
		Listed trusts				
		Unlisted trusts				
		Insurance policy	C			
		Other managed investments	D			
15b Australian direct investment	S	Cash and term deposits	E	1,765		
		Debt securities				
Limited recourse borrowing arrang	ements	Loans				
Australian residential real property				6,400		
Australian non-residential real prop		Listed shares		0,400		
J2		Unlisted shares				
Overseas real property J3		Limited recourse borrowing arrangements	J	0		
Australian shares		Non-residential real property	K			
J4		Residential real property				
Overseas shares		Collectables and personal use assets	M			
Other		Other assets				
J6 Property count						
J7						
15c Other investments		Crypto-Currency	N			
15d Overseas direct investment	s	Overseas shares	P			
		Overseas non-residential real property	Q			
		Overseas residential real property	R			
		Overseas managed investments				
		Other overseas assets				
		TOTAL AUSTRALIAN AND OVERSEAS ASSET (Sum of labels A to T)	s U 49	8,165		
15e In-house assets						
Did the fund rela	ated parties (know	wn as in-house assets) A Print Y for yes end of the income year?				
15f Limited recourse borrowing	arrangements					
-	If the fund had a	n LRBA were the LRBA owings from a licensed financial institution?				
	fund use perso	or related parties of the nal guarantees or other security for the LRBA?				

## SMSF Return 2023

## 16 LIABILITIES

Borrowings for limited recourse borrowing arrangements		
V1 Permissible temporary borrowings V2		
Other borrowings	Borrowings	0
(total of all	Total member closing account balances CLOSING ACCOUNT BALANCEs from Sections F and G)	
	Reserve accounts Other liabilities	X Y 30,629
	TOTAL LIABILITIES	<b>Z</b> 498,165

# Section I: Taxation of financial arrangements

17 Taxation of financial arrangements (TOFA)

Total TOFA gains H
Total TOFA losses
ection J: <b>Other information</b> amily 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 2022–23 income year, write 2023).
If revoking or varying a family trust election, print R for revoke or print V for variation, and complete and attach the Family trust election, revocation or variation 2023.
terposed 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 Interposed entity election or revocation 2023 for each election.

If revoking an interposed entity election, print R, and complete and attach the Interposed entity election or revocation 2023.

#### 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.

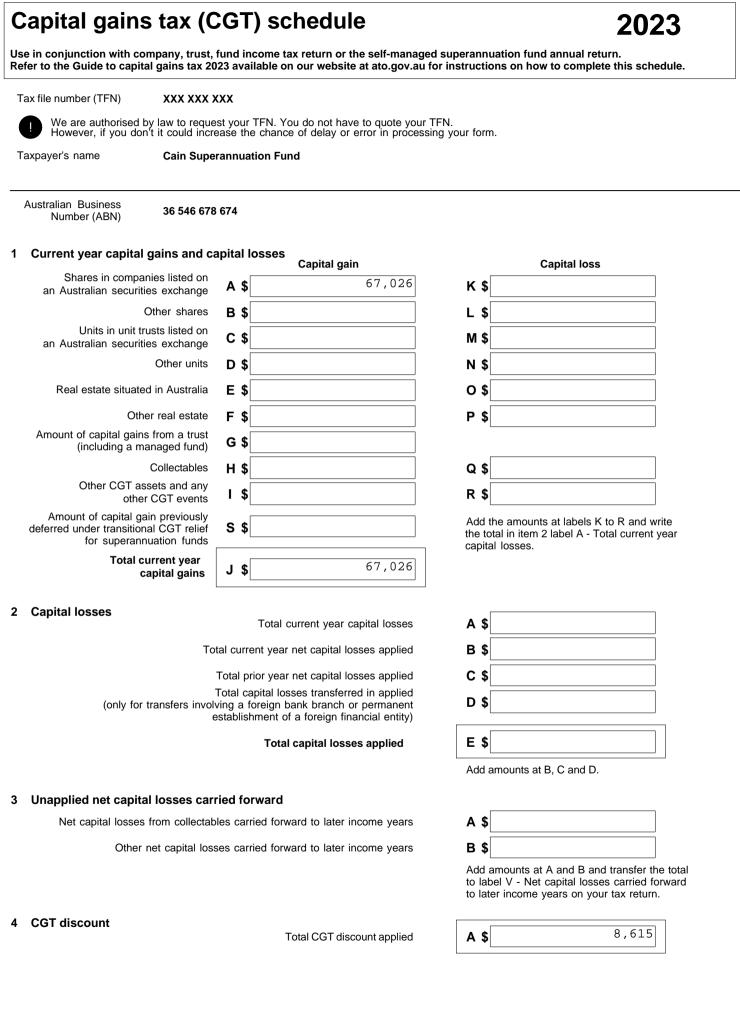
Taxation law authorises the ATO to collect information and disclose it to other government agencies. For information about your privacy go to ato.gov.au/privacy.

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

							]	Day Month	1 Year
							Date		
Preferred trustee or director contact details:									
	Mr								
Fa	Cain								
First g	iven name	Daniel							
Other given names		Stephen	1						
		Area code		mber					
Phone number		08	83	962020					
Ema	ail address								
Non-individual trustee name (if a	Cain Su	uper N	ominee	es Pty I	Jtd				
ABN of non-individu									
								Hrs	
	Time taker	n to prep	are and co	omplete this	annual retur	n [		]	
The Commissioner of Taxation, as F	Registrar of	he Australia	n Busine	ss Regist	er, may use	the ABN and	d business	details which	
provide on this annual return to main	-			-	•				
TAX AGENT'S DECLARATION:									
I, NORTHERN ACCOUNTING	G SERVIC	ES PTY	LTD						
declare that the Self-managed sup									
by the trustees, that the trustees h the trustees have authorised me to				ng that the	e informatior	n provided to			
Tax agent's signature							Date	Day Month	Year
							Date		
Tax agent's contact details									
Title	Mr								
Familyname	Fantasi	.a							
First given name	Giovanr	ıi							
Other given names									
Tax agent's practice	NORTHEF	N ACCOU	NTING	SERVI	CES PTY	LTD			
_	Area code	Number							]
Tax agent's phone number	08	8396	2020			_			
Tax agent number	6707600	)7			Reference	e number	COUTAA	3	



6 Net capital gain

Net capital gain

A \$ 58,411

1J less 2E less 4A less 5D (cannot be less than zero). Transfer the amount at A to label A - Net capital gain on your tax return.

## Taxpayer's declaration

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

# Important

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.

## Privacy

Taxation law authorises the ATO to collect information and disclose it to other government agencies. This includes personal information of the person authorised to sign the declaration. For information about your privacy go to ato.gov.au/privacy

I declare that the information on this form is true and correct.

#### Signature

Date

Contact person

Daytime contact number (include area code)