JODESA SUPERANNUATION FUND

FINANCIAL STATEMENTS

AND REPORTS

FOR THE PERIOD 8 APRIL 2010 TO 30 JUNE 2010

Superannuation Professionals PO Box 2045 Broadbeach QLD 4218

JODESA SUPERANNUATION FUND FINANCIAL STATEMENTS INDEX

Statement of Financial Position Operating Statement Detailed Operating Statement Notes to the Financial Statements Trustees Declaration Statement of Taxable Income Investment Summary Report (with yields) Investment Summary Report Investment Change Report Investment Movement Report Investment Income Report

JODESA SUPERANNUATION FUND STATEMENT OF FINANCIAL POSITION AS AT 30 JUNE 2010

	June	
	2010	
	\$	
Other Assets		
Cash at Bank	29,003	
Formation Expenses	1,180	
	\$30,183	
Total Assets	\$30,183	
Represented by:		
Liability for Accrued Benefits (Notes 2, 3)		
Sawyer, John Edward	15,092	
Sawyer, Deborah Lexly	15,091	
	\$30,183	

JODESA SUPERANNUATION FUND OPERATING STATEMENT FOR THE YEAR ENDED 30 JUNE 2010

	June	
	2010	
	\$	
Income		
Interest Received	4	
Member/Personal Contributions - Non Concessional (Undeducted)	30,180	
-	30,184	
Benefits Accrued as a Result of Operations before Income Tax	30,184	
Income Tax (Note 4)		
Income Tax Expense	1	
-	1	
Benefits Accrued as a Result of Operations	\$30,183	

JODESA SUPERANNUATION FUND DETAILED OPERATING STATEMENT FOR THE YEAR ENDED 30 JUNE 2010

	June
	2010
	\$
Income	
Interest Received	
Cash at Bank	4
	4
Member/Personal Contributions - Non Concessional (Undeducted)	
Sawyer, Deborah Lexly	15,090
Sawyer, John Edward	15,090
	30,180
	30,184
Benefits Accrued as a Result of Operations before Income Tax	30,184
Income Tax (Note 4)	
Income Tax Expense	1
	1
Benefits Accrued as a Result of Operations	\$30,183

JODESA SUPERANNUATION FUND NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2010

June 2010 \$

1. Statement of Significant Accounting Policies

The trustees have prepared the financial statements on the basis that the fund is a non-reporting entity because there are no users dependent on general purpose financial reports. This financial report is therefore a special purpose financial report that has been prepared in order to meet the needs of members.

The financial report has been prepared in accordance with the significant accounting policies disclosed below, which the directors have determined are appropriate to meet the needs of members. Such accounting policies are consistent with the previous period unless stated otherwise.

The financial statements have been prepared on an accruals basis. The accounting policies that have been adopted in the preparation of this report are as follows:

a. Measurement of Investments

Investments of the fund have been measured at net market values after allowing for costs of realisation. Changes in the net market value of assets are brought to account in the operating statement in the periods in which they occur.

Net market values have been determined as follows:

i. shares and other securities listed on the Australian Stock Exchange by reference to the relevant market quotations at the reporting date;

- ii. units in managed funds by reference to the unit redemption price at the reporting date;
- iii. insurance policies by reference to the surrender value of the policy; and
- iv. investments properties at trustees' assessment of their realisable value.

b. Liability for Accrued Benefits

The liability for accrued benefits represents the fund's present obligation to pay benefits to members and beneficiaries and has been calculated as the difference between the carrying amount of the assets and the carrying amount of the sundry liabilities and income tax liabilities as at reporting date.

2. Liability for Accrued Benefits

Changes in the Liability for Accrued Benefits are as follows:

Liability for Accrued Benefits at beginning of period

Add:							
- Increase in Accrued Benefits	30,183						
- Adjustment of Deferred Tax Liability /Deferred Tax Asset							
Liability for Accrued Benefits at end of period	30,183						

3. Guaranteed Benefits

No guarantees have been given in respect of any part of the liability for accrued benefits.

JODESA SUPERANNUATION FUND NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2010

	June
	2010
	\$
 4. Income Tax Income Tax is payable by the superannuation fund at the rate of 15% on the contributions received and the income of the fund. There has been no change in the Income Tax rate during the year. The Income Tax payable by the superannuation fund has been calculated as follows: 	
Benefits accrued as a result of operations before income tax	30,184
Prima facie income tax on accrued benefits Add/(Less) Permanent/Timing Differences	4,528
Member/Personal Contributions - Non Concessional (Undeducted) Other	(4,527)
	(4,527)
Income Tax Expense	1
Income tax expense comprises:	
Income Tax Payable	
TFN Credits	1
	1

JODESA SUPERANNUATION FUND TRUSTEES DECLARATION

The trustees have determined that the fund is not a reporting entity and that this special purpose financial report should be prepared in accordance with the accounting policies described in Note 1 to these financial statements.

In the opinion of the trustees:

- (i) the financial statements and notes to the financial statements for the year ended 30 June 2010 present fairly the financial position of the superannuation fund at 30 June 2010 and the results of its operations for the year then ended in accordance with the accounting policies described in Note 1 to the financial statements; and
- (ii) the financial statements and notes to the financial statements have been prepared in accordance with the requirements of the trust deed; and
- (iii) the operation of the superannuation fund has been carried out in accordance with its trust deed and in compliance with the requirements of the SuperannuationIndustry (Supervision)Act 1993 during the year ended 30 June 2010.

Signed in accordance with a resolution of the trustees by:

John Edward Sawyer Trustee

Deborah Lexly Sawyer Trustee

DATED: / /

JODESA SUPERANNUATION FUND STATEMENT OF TAXABLE INCOME FOR THE YEAR ENDED 30 JUNE 2010

	2010
	\$
Benefits Accrued as a Result of Operations before Income Tax	30,184.00
Less:	
Member/Personal Contributions - Non Concessional (Undeducted)	(15,090.00)
Member/Personal Contributions - Non Concessional (Undeducted)	(15,090.00)
	(30,180.00)
	4.00
Taxable Income	4.00
Tax Payable on Taxable Income	0.60
Less:	
TFN Credits	1.00
	1.00
Income Tax Payable/(Refund)	(0.40)
Add:	150.00
Supervisory levy	150.00
Total Amount Due or Refundable	149.60

JODESA SUPERANNUATION FUND INVESTMENT SUMMARY REPORT (WITH YIELDS) AT 30 JUNE 2010

Investment	Units	Cost		Market		Income	Yield	
		Per unit	Total	Per unit	Total		Cost	Market
Cash/Bank Accounts								
Cash at Bank			29,003		29,003	3	0.01%	0.01%
			29,003		29,003	3		
			29,003		29,003	3		

JODESA SUPERANNUATION FUND INVESTMENT SUMMARY REPORT AT 30 JUNE 2010

Investment	Units	Ave Cost	Mkt Price	Cost	Market	Unrealised Gain/(Loss)	Percent Gain/(Loss)	Percent Total
Cash/Bank Accounts Cash at Bank		29,003.00	29,003.00	29,003	29,003			100.00%
			-	29,003	29,003			100.00%
			-	29,003	29,003			100.00%

JODESA SUPERANNUATION FUND INVESTMENT CHANGE REPORT AT 30 JUNE 2010

Investment		This Year			Last Year			Market Change	
	Units	Cost	Market	Units	Cost	Market	Change	Percent	
Cash/Bank Accounts									
Cash at Bank		29,003	29,003				29,003	100.00%	
		29,003	29,003				29,003		
		29,003	29,003				29,003		

JODESA SUPERANNUATION FUND INVESTMENT MOVEMENT REPORT AT 30 JUNE 2010

Investment	Opening	Opening Balance		Additions		Disposals			Closing Balance		
	Units	Cost	Units	Cost	Units	Cost	Prof/(Loss)	Units	Cost	Market	
Cash/Bank Accounts											
Cash at Bank				29,003					29,003	29,003	
				29,003					29,003	29,003	
				29,003					29,003	29,003	

JODESA SUPERANNUATION FUND INVESTMENT INCOME REPORT AT 30 JUNE 2010

Investment	ment Add			Less					Taxable	Indexed	Discounted	Other	Taxable		
	Total Income	Franking Credits	Foreign Credits	TFN Credits	Tax Free	Tax Exempt	Tax Deferred	Expenses	Capital Gains Discount*	GST	Income (incl Cap Gains)		Capital Gains*	Capital Gains	
Cash/Bank Accou Cash at Bank		3		1							4				
	:	3		1							4				
	:	3		1							4				

* Includes Foreign Capital Gains

Member's Statement JODESA SUPERANNUATION FUND

MR JOHN EDWARD SAWYER PO BOX 82 THORNLIE WA 6988

The Trustee of the above named fund wishes to advise you of the circumstances of your entitlement in the Fund at 30 June 2010 and for the reporting period 8 April 2010 to 30 June 2010.

Your Details		Your Balance	
Date of Birth	11 September 1954	Total Benefits	\$15,091
Tax File Number	Provided	Comprising:	
Date Joined Fund	8 April 2010	- Preserved	\$15,091
Service Period Start Date	1 July 1980	- Restricted Non Preserved	
Date Left Fund		- Unrestricted Non Preserved	
Member Mode	Accumulation	Including:	
Account Description		- Tax Free Component	\$15,090
Current Salary		- Taxable Component	\$1
Vested Amount	\$15,091		
Insured Death Benefit			
Total Death Benefit	\$15,091		
Disability Benefit			
Nominated Beneficiaries			

Your Detailed Account	Preserved	Restricted Non Preserved	Unrestricted Non Preserved	Total
Opening Balance at 8 April 2010 Add: Increases to Member's Account During the Period Concessional Contributions Non-Concessional Contributions Other Contributions Govt Co-Contributions Employer Contributions - No TFN Proceeds of Insurance Policies	15,090			15,090
Share of Net Income/(Loss) for period Transfers in and transfers from reserves	2			2
	15,092			15,092
Less: Decreases to Member's Account During the Period Benefits/Pensions Paid Contributions Tax Income Tax No TFN Excess Contributions Tax Excess Contributions Tax Insurance Policy Premiums Paid Management Fees Share of fund expenses Superannuation Surcharge Tax Transfers out and transfers to reserves	15,092			15,092
Member's Account Balance at 30/06/2010	15,092			15,092

Reference: JODSSF / 501

Availability of Other Fund Information

Other information about the Fund is available at your request from the Trustee. If you would like any further information, please contact the Trustee.

Trustee's Disclaimer

This statement has been prepared by the Trustee for the member whose name appears at the top of this statement. Every effort has been made by the Trustee to ensure the accuracy and completeness of this Statement. The Trustee does not accept any liability for any error, omission or misprint. All amounts shown in relation to benefits do not take into account any amounts which may be withheld to satisfy the requirements imposed by the Income Tax Assessment Act 1936.

Signed by all the trustees of the fund

John Edward Sawyer Trustee

Deborah Lexly Sawyer Trustee

Statement Date: / /

Member's Statement JODESA SUPERANNUATION FUND

MRS DEBORAH LEXLY SAWYER PO BOX 82 THORNLIE WA 6988

The Trustee of the above named fund wishes to advise you of the circumstances of your entitlement in the Fund at 30 June 2010 and for the reporting period 8 April 2010 to 30 June 2010.

Your Details		Your Balance	
Date of Birth	27 January 1956	Total Benefits	\$15,091
Tax File Number	Provided	Comprising:	
Date Joined Fund	8 April 2010	- Preserved	\$15,091
Service Period Start Date	1 May 1992	- Restricted Non Preserved	
Date Left Fund		- Unrestricted Non Preserved	
Member Mode	Accumulation	Including:	
Account Description		- Tax Free Component	\$15,090
Current Salary		- Taxable Component	\$1
Vested Amount	\$15,091		
Insured Death Benefit			
Total Death Benefit	\$15,091		
Disability Benefit			
Nominated Beneficiaries			

Your Detailed Account	Preserved	Restricted Non Preserved	Unrestricted Non Preserved	Total
Opening Balance at 8 April 2010 Add: Increases to Member's Account During the Period Concessional Contributions Non-Concessional Contributions Other Contributions Govt Co-Contributions Employer Contributions - No TFN	15,090			15,090
Proceeds of Insurance Policies Share of Net Income/(Loss) for period Transfers in and transfers from reserves	2			2
	15,092			15,092
Less: Decreases to Member's Account During the Period Benefits/Pensions Paid Contributions Tax Income Tax No TFN Excess Contributions Tax Excess Contributions Tax Insurance Policy Premiums Paid Management Fees Share of fund expenses Superannuation Surcharge Tax Transfers out and transfers to reserves	15,092			15,092
Member's Account Balance at 30/06/2010	15,092			15,092

Reference: JODSSF / 502

Availability of Other Fund Information

Other information about the Fund is available at your request from the Trustee. If you would like any further information, please contact the Trustee.

Trustee's Disclaimer

This statement has been prepared by the Trustee for the member whose name appears at the top of this statement. Every effort has been made by the Trustee to ensure the accuracy and completeness of this Statement. The Trustee does not accept any liability for any error, omission or misprint. All amounts shown in relation to benefits do not take into account any amounts which may be withheld to satisfy the requirements imposed by the Income Tax Assessment Act 1936.

Signed by all the trustees of the fund

John Edward Sawyer Trustee

Deborah Lexly Sawyer Trustee

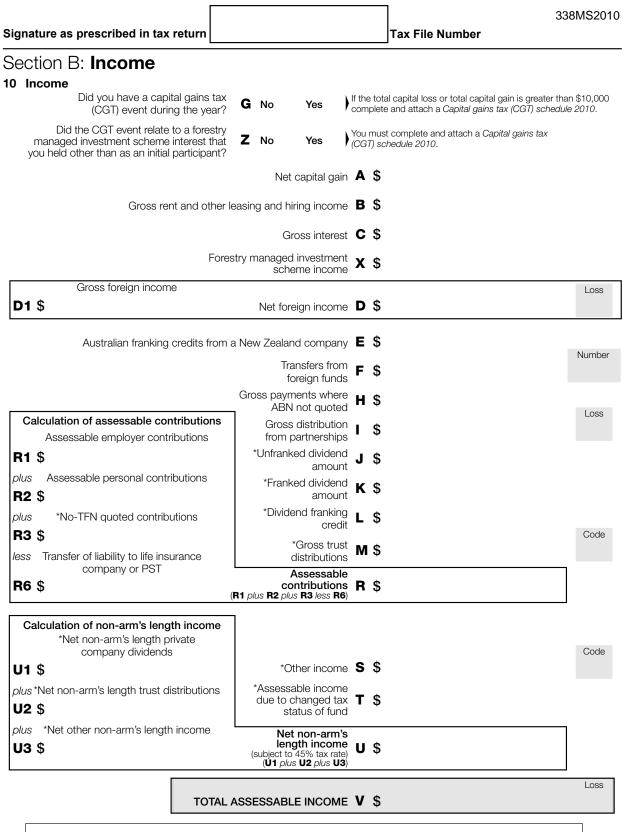
Statement Date: / /

Signature	as	prescribed	in	tax	return
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Self-managed superannuation fund annual return



On cor Fur	 bo should complete this annual return? Iy self-managed superannuation funds (SMSFs) can mplete this annual return. All other funds must complete the <i>nd income tax return 2010</i> (NAT 71287). The Self-managed superannuation fund annual return structions 2010 (NAT 71606) (the instructions) can assist ou to complete this annual return. 	■ Print ■ Use	clearly, usin BLOCK LE	THIS ANNUAL RETURN g a BLACK pen only. TTERS applicable boxes.	
Se	ection A: Fund information			processing, write the fund's	
1	Tax file number (TFN) The Tax Office is authorised by law to request your TFN. You could increase the chance of delay or error in processing your a	u are not o	bliged to quo	p of pages 3 and 5. ote your TFN but not quoting it	
2	Name of self-managed superannuation fund (SM	SF)			
3	Australian business number (ABN) (if applicable)				
4	Current postal address				
Sub	burb/town			State/territory	Postcode
5	Annual return status Is this an amendment to the SMSF's 2010 annual return?	No	Yes		
Title	Fund auditor ditor's name e: Mr Mrs Miss Ms Other nily name				
Firs	t given name Other given	n names			
	ofessional body Membership number Code stal address			Auditor's phone nur	nber
Sub	burb/town			State/territory	Postcode
Dat	te audit was completed A / / /		Was the a	udit report qualified? B No	Yes
8	Status of SMSF Australian superannuation fund	A No	Yes	Fund benefit structure	B Code
	Does the fund trust deed allow acceptance of the Government's Super Co-contributions?	C No	Yes		
9	Was the fund wound up during the income year? No Yes If yes, provide the date on which the fund was wound up Day	Month	Year	Have all tax lodgment and payment No obligations been met?	Yes



*If an amount is entered at this label, check the instructions to ensure the correct tax treatment has been applied.

				338MS2010
Signature as prescribed in tax ret	urn		Tax File Number	
Place your attachments here	e.			
Section C: Deductions	Exempt current pension income	κ	\$	
Intere	st expenses within Australia	A	\$	
	Interest expenses overseas	В	\$	
	Capital works deductions	D	\$	
Deduction for decline in	value of depreciating assets	Е	\$	
Small business and	l general business tax break	Ρ	\$	
[Death or disability premiums	F	\$	
	Death benefit increase	G	\$	
	Approved auditor fee	Н	\$	
	Investment expenses	I	\$	
Management a	nd administration expenses	J	\$	
Forestry managed inv	estment scheme deduction	U	\$	Quela
	Other deductions	L	\$	Code
	Tax losses deducted	Μ	\$	
	TOTAL DEDUCTIONS	Ν	\$	
	KABLE INCOME OR LOSS	0	\$	Loss

Section D: Income tax calculation statement

2 Inco	me tax calculation statement	Taxable income	Α	\$
C1 \$	Credit: foreign income tax offset	Gross tax	В	\$
plus C2 \$	Credit: rebates and tax offsets	Rebates and offsets (C1 plus C2)	С	\$
F1 \$	Credit: interest on early payments	SUBTOTAL (B less C)	D	\$ (Cannot be less than zero)
plus F2 \$	Credit: foreign resident withholding	Section 102AAM interest charge	Е	\$ (,
plus Cri F3 \$ plus	edit: ABN/TFN not quoted (non-individual) Credit: refundable franking credits	Eligible credits (F1 plus F2 plus F3 plus F4 plus F5 plus F6 plus F7)	F	\$
F4 \$ plus	Credit: no-TFN tax offset	PAYG instalments raised	G	\$
F5 \$ _{plus} F6 \$	Credit: interest on no-TFN tax offset	Supervisory levy	Η	\$
plus F7 \$	Credit: refundable National rental affordability scheme tax offset			

(D plus E less F less G plus H)

						338MS2010
Signature as prescribed in tax	return				Tax File Number	
Section E: Losses		T . 1				
If total loss is greater than a	\$100,000,	Tax losses carrie to later inco			\$	
or there is a foreign loss, comp attach a <i>Losses schedule 2010</i>		Net capital loss forward to later inco			\$	
Section F: Member i	nformat	tion				
Report current members at 30 rollover) during the financial year. Inclu						
MEMBER 1						
Title: Mr Mrs Miss Ms Family name	Other					
First given name		Other given names				
				Day	Month Year	
Member's TFN		Date of	birth		/ /	
Contributions	OPENING A	ACCOUNT BALANCE	\$			
Include contributions L reported to you on a	Er	mployer contributions	A \$;]
Rollover benefits statement (RBS) (NAT 70944).		mployer A1	•			
		Personal contributions	в\$;		
CGT sr	mall business	retirement exemption	с\$	5		
CGT small bu	usiness 15-ye	ar exemption amount	D \$	5		
	P	ersonal injury election	Е\$	5		
	Spouse a	nd child contributions	F \$	5		
0	ther family an	d friend contributions	G\$;		
Directed terminat	ion (taxable c	omponent) payments	Н\$	5		
Assessable fo	oreign superar	nnuation fund amount	I\$	5		
Non-assessable fo	oreign superar	nnuation fund amount	J\$	5		
Transfe	er from reserve	e: assessable amount	К\$	5		
Transfer from	m reserve: noi	n-assessable amount	L \$	5		
Any other contributions	(including Su	per Co-contributions)	М\$	5		
	ΤΟΤΑ	L CONTRIBUTIONS	N \$	5		
Other transactions	Allocated e	earnings or losses O	\$			Loss
Exclude any rollover components reported at N		d rollover amounts P	\$			
from amounts reported at P . If P is negative, transfer the loss to O .	Outward	d rollover amounts	\$			
1035 10 U .	Benefit pa	ayments and code R	\$			Code
CL	OSING ACC		\$			

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Signature of procesibed in t		338MS2010
Signature as prescribed in t		
	at 30 June 2010 and former members who were paid a benefit (lump sum or income strea r. Include members for whom no contributions were received. Report deceased members	
MEMBER 2		
Title: Mr Mrs Miss Family name	Ms Other	
First given name	Other given names	
Member's TFN	Day Month Year Date of birth / /	
Contributions	OPENING ACCOUNT BALANCE \$	
Include contributions reported to you on a Rollover benefits statement	Employer contributions A \$	
<i>(RBS)</i> (NAT 70944).	ABN of principal employer A1	
	Personal contributions B \$	
CC	GT small business retirement exemption C \$	
CGT sm	all business 15-year exemption amount D \$	
	Personal injury election E\$	
	Spouse and child contributions F \$	
	Other family and friend contributions G \$	
Directed terr	mination (taxable component) payments H \$	
Assessat	ble foreign superannuation fund amount 📔 \$	
Non-assessat	ble foreign superannuation fund amount J \$	
Tra	ansfer from reserve: assessable amount K\$	
Transfe	er from reserve: non-assessable amount L\$	
Any other contribu	tions (including Super Co-contributions) M \$	
	TOTAL CONTRIBUTIONS N \$	
Other transactions	Allocated earnings or losses O \$	Loss
Exclude any rollover components reported at N	Inward rollover amounts P \$	
from amounts reported at P . If P is negative, transfer the	Outward rollover amounts Q \$	
loss to O .	Benefit payments and code R \$	Code
	CLOSING ACCOUNT BALANCE S \$	

Signature as prescribed in t	tax return Tax File Number	338MS2010
	at 30 June 2010 and former members who were paid a benefit (lump sum or income s ar. Include members for whom no contributions were received. Report deceased memb	
MEMBER 3 Title: Mr Mrs Miss Family name	Ms Other	
First given name	Other given names	
Member's TFN	Day Month Year Date of birth	
Contributions	OPENING ACCOUNT BALANCE \$	7
Include contributions reported to you on a <i>Rollover benefits statement</i>	Employer contributions A \$	
(RBS) (NAT 70944).	ABN of principal employer A1	
	Personal contributions B \$	
CC	GT small business retirement exemption C \$	
CGT sm	nall business 15-year exemption amount D \$	
	Personal injury election E\$	
	Spouse and child contributions F \$	
	Other family and friend contributions G \$	
Directed terr	mination (taxable component) payments H\$	
Assessat	ble foreign superannuation fund amount 📔 💲	
Non-assessab	ble foreign superannuation fund amount $ extbf{J}$	
Tra	ansfer from reserve: assessable amount K\$	
Transfe	er from reserve: non-assessable amount L\$	
Any other contribut	itions (including Super Co-contributions) M \$	
	TOTAL CONTRIBUTIONS N \$	
Other transactions	Allocated earnings or losses O \$	Loss
components reported at N from amounts reported at P .	Inward rollover amounts P\$	
If P is negative, transfer the loss to O .	Outward rollover amounts Q\$	Code
	Benefit payments and code R \$	
	CLOSING ACCOUNT BALANCE S \$	7

Signature as prescribed in t	ax return Tax File Number	338MS2010
	at 30 June 2010 and former members who were paid a benefit (lump sum or r. Include members for whom no contributions were received. Report deceas	
MEMBER 4 Title: Mr Mrs Miss Family name	Ms Other	
First given name	Other given names	
Member's TFN	Day Month Date of birth /	Year
Contributions	OPENING ACCOUNT BALANCE \$	
Include contributions reported to you on a Rollover benefits statement	Employer contributions A \$]
(RBS) (NAT 70944).	ABN of principal employer A1	
	Personal contributions B \$	
C	GT small business retirement exemption C	
CGT sm	all business 15-year exemption amount D \$	
	Personal injury election E \$	
	Spouse and child contributions F \$	
	Other family and friend contributions G \$	
Directed terr	nination (taxable component) payments H\$	
Assessa	ole foreign superannuation fund amount	
Non-assessa	ble foreign superannuation fund amount $ extbf{J}$	
Tr	ansfer from reserve: assessable amount K\$	
Transfe	er from reserve: non-assessable amount	
Any other contribu	tions (including Super Co-contributions) M\$	
	TOTAL CONTRIBUTIONS N \$	
Other transactions	Allocated earnings or losses O \$	Loss
Exclude any rollover components reported at N	Inward rollover amounts P \$	
from amounts reported at P . If P is negative, transfer the	Outward rollover amounts Q \$	
loss to O .	Benefit payments and code R \$	Code
	CLOSING ACCOUNT BALANCE S \$	

		338MS2010
Signature as prescribed in	tax return Tax File Number	
Section G: Supple	ementary member information	
 Use this section for: deceased members any other members who car 	annot be included at pages 4 to 7.	
MEMBER 5		
Title: Mr Mrs Miss Family name	Ms Other	
First given name	Other given names	
Member's TFN	Day Month Yei Date of birth / / Day Month Yei Day Month Yei	
• • • •	If deceased, date of death / /	
	OPENING ACCOUNT BALANCE \$	
Include contributions reported to you on a Rollover benefits statement (RBS) (NAT 70944).	Employer contributions A \$	
(100) (1141 70044).	ABN of principal employer A1	
	Personal contributions B \$	
C	GT small business retirement exemption C \$	
CGT sm	nall business 15-year exemption amount D \$	
	Personal injury election E \$	
	Spouse and child contributions F \$	
	Other family and friend contributions G \$	
Directed ten	mination (taxable component) payments $$ H $$ $$	
	ble foreign superannuation fund amount	
	ble foreign superannuation fund amount J \$	
	ransfer from reserve: assessable amount K \$	
	er from reserve: non-assessable amount	
Any other contribu	utions (including Super Co-contributions) M \$	
	TOTAL CONTRIBUTIONS N \$	
Other transactions	Allocated earnings or losses O \$	Loss
Exclude any rollover components reported at N	Inward rollover amounts P \$	
from amounts reported at P . If P is negative, transfer the	- ·	
loss to O .	Outward rollover amounts Q \$	Code
	Benefit payments and code R \$	
	CLOSING ACCOUNT BALANCE S \$	

IN-CONFIDENCE – when completed

Signaturo as prosprihod i	tax ratura				Tax Eila Number	338MS2010
Signature as prescribed in	i tax return				Tax File Number	
 Use this section for: deceased members 			7			
■ any other members who c	annot be incil	Jded at pages 4 to	7.			
MEMBER 6						
Title: Mr Mrs Miss Family name	Ms Oth	er				
First given name		Other giv	en names			
					Day Month Year	
Member's TFN			Date of	birth	Day Month Year	
		If deceased,	date of o	death	/ /	
Contributions	OPEN	IING ACCOUNT BA	ALANCE	\$		
Include contributions reported to you on a <i>Rollover benefits statement</i>		Employer contr	ibutions	A \$		
(RBS) (NAT 70944).	ABN of princ	cipal employer A1				
		Personal contr	ibutions	в\$		
C	GT small bus	iness retirement exe	emption	c \$		
CGT sr	mall business	15-year exemption	amount	D \$		
		Personal injury	election	Е\$		
	Spo	use and child contr	ibutions	F\$		
	Other fan	nily and friend contr	ibutions	G \$		
Directed te	rmination (taxa	able component) pa	ayments	Н\$		
Assessa	able foreign su	perannuation fund	amount	I\$		
Non-assessa	able foreign su	perannuation fund	amount	J\$		
Т	ransfer from r	eserve: assessable	amount	К\$		
Trans	fer from reserv	ve: non-assessable	amount	L \$		
Any other contrib	utions (includi	ng Super Co-contri	butions)	м\$		
		TOTAL CONTRIBL	JTIONS	N \$		
Other transactions		ated earnings or lo	sses O	\$		Loss
Exclude any rollover components reported at N		nward rollover amo		\$		
from amounts reported at P . If P is negative, transfer the	0ı	utward rollover amo	unts Q	\$		
loss to O .] Ben	efit payments and c	code R	\$		Code
	CLOSING	ACCOUNT BALA	NCE S	\$		
If additional memb	ers need to be	e reported in Sectio	on G: Sur	opleme	entary member information co	ppy this page

					338M	IS2010
Signature as prescribed in tax retui	m		1	Γax File Number		
Section H: Assets and li	abilities					
14 ASSETS 14a Australian managed investments	Listed trusts	A	\$			
	Unlisted trusts	в	\$			
	Insurance policy	С	\$			
	Other managed investments	D	\$			
14b Australian direct investments	Cash and term deposits	Е	\$			
	Debt securities	F	\$			
	Loans	G	\$			
	Listed shares	н	\$			
	Unlisted shares	I	\$			
D	erivatives and instalment warrants	J	\$			
	Non-residential real property	K	\$			
	Residential real property	L	\$			
Ari	twork, collectibles, metal or jewels	Μ	\$			
	Other assets	0	\$			
14c Overseas direct investments	Overseas shares	Ρ	\$			
Ove	rseas non-residential real property	Q	\$			
	Overseas residential real property	R	\$			
	Overseas managed investments	S	\$			
	Other overseas assets	Т	\$			
TOTAL AUSTRA	LIAN AND OVERSEAS ASSETS	U	\$			
15 LIABILITIES	Borrowings	V	\$			
Total r (total of all CLOSING ACCOUNT B	nember closing account balances ALANCEs from Sections F and G)	W	\$			
	Reserve accounts	X	\$			
	Other liabilities	Y	\$			
	TOTAL LIABILITIES	Z	\$			
Section I: Taxation of fin	ancial arrangemer	nts	\$			
16 Taxation of financial arrangeme Did you make a gain, loss or tra from a financial arrangeme	nsitional balancing adjustment	No		Yes		
	Total TOFA gains	\$				
	Total TOFA losses	\$				1.00-
TOFA tran	sitional balancing adjustment $ { m J} $	\$				Loss
2aga 10						

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Section J: Regulatory information

The following questions indicate the operational status of the SMSF. Penalties will apply for false or misleading information. You must answer either **No** or **Yes** for all questions listed and provide dollar amounts if applicable.

In-house and related party assets

			in-nouse and related party assets
\$ Yes	No	A	Did the SMSF loan, lease to or invest in related parties (known as in-house assets)?
Yes	No	В	Did the SMSF hold in-house assets at any time during the year that exceeded 5% of total assets?
\$ Yes	No	С	Did the SMSF hold an investment in a related party at any time during the year (excluding in-house assets)?
\$ Yes	No	D	Did the SMSF acquire any assets (other than exempt assets) from related parties?
			Other regulatory questions
Yes	No	Е	Did the SMSF lend money or provide financial assistance to a member or relative of a member of the fund?
\$ Yes	No	F	Did the SMSF receive in specie contributions during the year?
Yes	No	G	Did the SMSF make and maintain all investments on an arm's length basis?
Yes	No	н	Did the SMSF borrow for purposes that are not permissible?
Yes	No	I	Did members have the personal use of the SMSF's assets before retirement?
Yes	No	J	Did the SMSF provide money to members without a condition of release being met?
Yes	No	Κ	Did trustees of the fund receive any remuneration for their services as a trustee?
Yes	No	L	Are any trustees or directors currently disqualified persons as defined by SISA?
Yes	No	Μ	Are all SMSF assets appropriately documented as owned by the fund?
Yes	No	Ν	Did the SMSF carry on a business of selling goods or services?
Yes	No	0	Does the auditor provide services to the SMSF as either a tax agent, accountant or financial advisor or administrator?

Section K: Other information

Forestry managed investment schemes		Code		Year		Number
Product or private ruling information	G		н		/ I	

Family trust election status

If the trust or fund has made, or is making, a family trust election, write the four-digit income year specified of the election (for example, for the 2009–10 income year, write 2010).	A
If revoking or varying a family trust election, print R for revoke or print V for variation, and complete and attach the <i>Family trust election, revocation or variation 2010.</i>	В
Interposed entity election status	
If the trust or fund has an existing election, write the earliest income year specified. If the trust or fund is making one or more elections this year, write the earliest income year being	

specified and complete an Interposed entity election or revocation 2010 for each election.

If revoking an interposed entity election, print **R**, and complete and attach the *Interposed entity election or revocation 2010*.

Tax File Number

		าร									
Section L: Decl	aration										
Penalties may be im	oosed for fa	alse or misl	leading infor	rmation in add	dition to penal	ties relating	g to ar	ny tax	k short	falls.	
TRUSTEE'S OR DIREC I declare that current truste I have received the audit re nominated bank account (i Authorised trustee's or dire	es and dire port and I a f applicable)	ctors have m aware c).	authorised								
						Date	Day	/	Month	/	Year
Preferred trustee or d	rector co	ntact de	tails:								
Title: Mr Mrs Miss Family name	s Ms	Other									
First given name			Other	r given names							
Phone number											
Email address											
Non-individual trustee nam											
	e (if applica	ble)									
ABN of non-individual trust		ble)									
		ble)				Hrs]			
	ee	·	are and con	nplete this anr	nual return	Hrs					
	ee Time take	en to prepa	of the Aust	ralian Busines	s Register, ma	ay use the					
ABN of non-individual trust The Commissioner of you provide on this annua TAX AGENT'S DECLAN I declare that the Self-mana by the trustees, that the tru	ee Time take Taxation, as al return to r RATION: nged supera stees have	en to prepa s Registrar naintain th unnuation fi given me a	of the Aust ie integrity o und annual i	ralian Busines f the register. return 2010 h	ss Register, ma For further inf as been prepa	ay use the ormation,	refer to	o the	instrue	ctions.	n provided
ABN of non-individual trust The Commissioner of you provide on this annua TAX AGENT'S DECLAN I declare that the <i>Self-mana</i> by the trustees, that the tru the trustees have authorise	ee Time take Taxation, as al return to r RATION: nged supera stees have	en to prepa s Registrar naintain th unnuation fi given me a	of the Aust ie integrity o und annual i	ralian Busines f the register. return 2010 h	ss Register, ma For further inf as been prepa	ay use the ormation,	refer to	o the	instrue	ctions.	n provided
ABN of non-individual trust The Commissioner of you provide on this annua TAX AGENT'S DECLAN I declare that the <i>Self-mana</i> by the trustees, that the tru the trustees have authorise	ee Time take Taxation, as al return to r RATION: nged supera stees have	en to prepa s Registrar naintain th unnuation fi given me a	of the Aust ie integrity o und annual i	ralian Busines f the register. return 2010 h	ss Register, ma For further inf as been prepa	ay use the ormation,	refer to	o the	instrue	ctions.	n provided
ABN of non-individual trust The Commissioner of you provide on this annua TAX AGENT'S DECLAI I declare that the Self-mana by the trustees, that the tru the trustees have authorise Tax agent's signature	ee Time take Taxation, as al return to r RATION: aged supera stees have d me to lode	en to prepa s Registrar naintain th unnuation fi given me a	of the Aust ie integrity o und annual i	ralian Busines f the register. return 2010 h	ss Register, ma For further inf as been prepa	ay use the ormation, ared in acc provided	ordane to me	o the	instru	ctions.	n provided st, and that
ABN of non-individual trust The Commissioner of you provide on this annual TAX AGENT'S DECLAN I declare that the Self-mana by the trustees, that the tru the trustees have authorise Tax agent's signature Tax agent's contact de Title: Mr Mrs Miss	ee Time take Taxation, as al return to r RATION: ged supera stees have d me to lode	en to prepa s Registrar naintain th unnuation fi given me a	of the Aust ie integrity o und annual i	ralian Busines f the register. return 2010 h	ss Register, ma For further inf as been prepa	ay use the ormation, ared in acc provided	ordane to me	o the	instru	ctions.	n provided st, and that
ABN of non-individual trust The Commissioner of you provide on this annua TAX AGENT'S DECLAN I declare that the Self-mana by the trustees, that the tru the trustees have authorise Tax agent's signature Tax agent's contact de Title: Mr Mrs Miss Family name	ee Time take Taxation, as al return to r RATION: ged supera stees have d me to lode	en to prepa s Registrar maintain th <i>innuation fi</i> given me a ge this anr	of the Aust integrity o	ralian Busines f the register. return 2010 h	ss Register, ma For further inf as been prepa	ay use the ormation, ared in acc provided	ordane to me	o the	instru	ctions.	n provided st, and that
ABN of non-individual trust The Commissioner of you provide on this annual TAX AGENT'S DECLAI I declare that the <i>Self-mana</i> by the trustees, that the tru the trustees have authorise Tax agent's signature Tax agent's contact de	ee Time take Taxation, as al return to r RATION: ged supera stees have d me to lode	en to prepa s Registrar maintain th <i>innuation fi</i> given me a ge this anr	of the Aust integrity o	ralian Busines f the register. return 2010 h n stating that t	ss Register, ma For further inf as been prepa	ay use the ormation, ared in acc provided	ordane to me	o the	instru	ctions.	n provided st, and that

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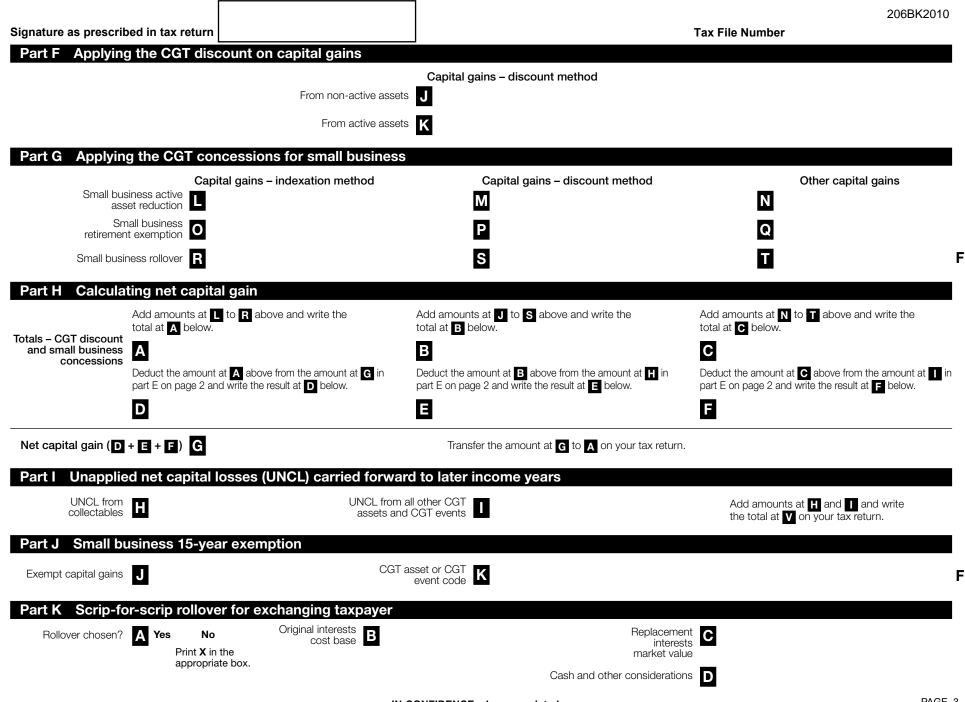


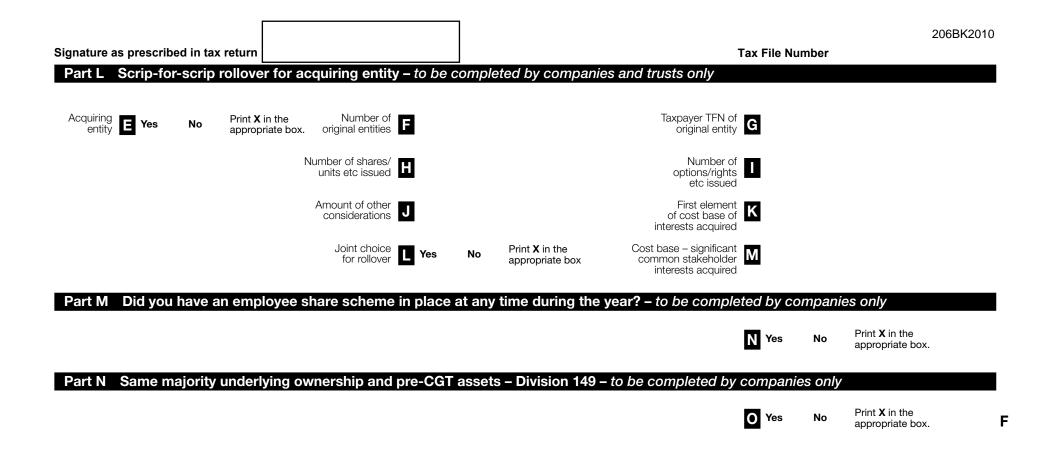
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	on our website www . complete this schedu Print neatly in BLOCk	ces schedule instructions 201 .ato.gov.au for instructions or	n how to only. Print one		2	2010 533BL2010
ax file	e number (TFN) See Privacy not		Australian b	usiness ni	umber (A	BN)
lame	of entity			Signati	ure	
Ass To t Ass	tal cost of depreciating as sets each costing less than \$1, tal cost of depreciating as sets each costing \$1,000 or mo	,000 S ets (excluding motor vehicl e	es)	A B		
-	tal cost of motor vehicles	Have you s effective life of any	self-assessed the	C D Yes	No	Print X in the
		enective life of any			as approp	appropriate box. riate. If no , go to part B.
	cost of assets for which fective life self-assessed	Depreciating assets (excluding motor vehicles)		F	Motor ve	ehicles
Part	B For all depreciating	assets				
	ormation from depreciatir sets worksheet		ssable balancing stment amounts	G		
a5:			uctible balancing stment amounts	H		
		Total deduction for – pri	r decline in value me cost method			
		Total deduction for – diminishir	r decline in value ng value method	J		
			djustable values d of income year	К		
	ormation from low-value		pool balance for ous income year			
ро	ol worksheet	Total	cost of low-cost allocated to pool	Μ		
		Total opening adju low-value assets a	ustable values of	Ν		
		Total second	l element of cost allocated to pool	0		
		Closi	ing pool balance this income year	P		
		Total termination values of for which balancing adjustment	of pooled assets	Q		
-	calculation of ective life	Did you recalculate any of your assets th		R Yes	No	Print X in the appropriate box.
CII		Denvesisting	If yes , complete	S and T	as approp	riate. If no , go to part C.
	opening adjustable values sets for which effective life recalculated	Depreciating assets (excluding motor vehicles)		T	Motor v	ehicles
	, occirculatou	IN-CONFIDENCE-w	hen completed			PA

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Part C Project pools			
1 Project pools			
	Number of p	project pools	
	Total closing for previous	pool values income year	
	Total closing for this	pool values income year	
2 Amounts allocated this income	•		
	Total amounts environmental a		
	Total mining capital expend transport capital		
	Total of other proj	ect amounts Z	F
Part D Entities engaged in ex	ploration or prospectin	q	
	for decline in value of intangible assets used in exploration or	depreciating	
Total deduc	ction for decline in value of other assets used in exploration or		
Part E Taxation of financial a	rrangements		
Total gains	from relevant hedging financial ar	rangements C	
Total losses	from relevant hedging financial ar	rrangements D	
Is your Capital allowances sched Make sure you have completed you schedule may be ineffective and will	r Capital allowances sched		here are any errors your

Before you sign the Capital allowances schedule 2010, check that:

- you have included your tax file number (TFN) at the top of page 1 of the schedule
- you have included your Australian business number (ABN) at the top of page 1 of the schedule
- your name is printed on page 1 of the schedule
- you have completed the appropriate parts of the schedule.

Ensure your Capital allowances schedule 2010 is attached to your tax return.

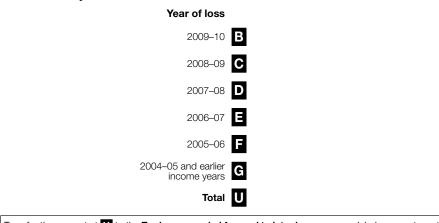
Privacy: The Tax Office is authorised by the *Taxation Administration Act 1953* to request you to quote your TFN. It is not an offence not to quote your TFN. However, your assessment will be delayed if you do not quote your TFN. The Tax Office is authorised by the *Income Tax Assessment Act 1936* and the *Income Tax Assessment Act 1997* to ask for information on this schedule. We need this information to help us to administer the taxation laws. We may give this information to other government agencies as authorised in taxation law – for example, benefit payment agencies such as Centrelink and the Department of Education, Employment and Workplace Relations; law enforcement agencies such as state and federal police; and other agencies such as the Child Support Agency and the Australian Bureau of Statistics.

Losses schedule	2010
Companies and trusts that do not join consolidated groups should complete and attach this schedule to their 2010 tax return.	836BP2010
Superannuation funds should complete and attach this schedule to their 2010 tax return.	
Print neatly in BLOCK LETTERS with a black or blue ballpoint pen only. Print one letter or number in each box. Do not use correction fluid or tape.	
Refer to Losses schedule instructions 2010, available on our website www.ato.gov.au for instructions on how to complete this schedule.	
ax file number (TFN)	
lame of entity	

Australian business number (ABN)

Part A Losses carried forward to the 2010-11 income year - excludes film losses

1 Tax losses carried forward to later income years



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Transfer the amount at **U** to the **Tax losses carried forward to later income years** label on your tax return.

2 Net capital losses carried forward to later income years

Year of loss	
2009–10	
2008–09	
2007–08 J	
2006–07 K	
2005–06	
2004–05 and earlier M	
Total V	F
Transfer the amount at V to the Net capital losses carried forward to later income years label on your tax return.]

					836BP2010
Si	gnature as prescribed in tax return		Tax File I	Number	
	Part B Ownership and same bu	siness test – company and listed wid	ely held trus	t only	
s: D	omplete item 3 of Part B if a loss is beir atisfied in relation to that loss. o not complete items 1 , 2 or 4 of Part B ase of companies, losses have not been	if, in the 2009–10 income year, no lo			
1	Whether continuity of majority ownership test passed	Year of loss	_		Print X in the
	Note: If the entity has deducted, transferred]	A Yes B Yes	No No	appropriate box. Print X in the
	in or transferred out (as applicable) in the 2009–10 income year a loss incurred in any of the listed years, print X in the Yes		C Yes	No	appropriate box. Print X in the
	or No box to indicate whether the entity has satisfied the continuity of majority		D Yes	No	appropriate box. Print X in the appropriate box.
	ownership test in respect of that loss.	2005–06	E Yes	No	Print X in the appropriate box.
		2004–05 and earlier income years		No	Print X in the appropriate box.
2	Amount of losses deducted for whi business test is satisfied – excludes fi		nership te	st is not	passed but the same
		Tax losses	G		
		Net capital losses	H		
3	Losses carried forward for which the years – excludes film losses	ne same business test must be s Tax losses	-	efore th	ey can be deducted in later
		Net capital losses	J		
4	Do current year loss provisions app Is the company required to calculate its to the year under Subdivision 165-B or its net for the year under Subdivision 165-CB of the 1997 (ITAA 1997)?	axable income or tax loss for capital gain or net capital loss	K Yes	No	Print X in the appropriate box.
	Part C Unrealised losses - compa	ny only			
	Note: These questions relate to the operation				
	Has a changeover time occurred in relation after 1.00pm by legal time in the Australian 11 November 1999?		Yes	No	Print X in the appropriate box.
	If you printed X in the No box at I , do not c	omplete M, N or O.			
	At the changeover time did the company sanet asset value test under section 152-15 c	,	M Yes	No	Print X in the appropriate box.
	If you printed X in the No box at M , has the determined it had an unrealised net loss at		N Yes	No	Print X in the appropriate box.
	If you printed X in the Yes box at N , what unrealised net loss calculated under section		0		
	Part D Life insurance companie	s			
		erannuation/FHSA class tax losses carriec forward to later income years			
	Complying super	rannuation/FHSA net capital losses carried forward to later income years			F

		836BP2010
gnature as prescribed in tax return	ז	ax File Number
Part E Foreign source losses		
substituted accounting period.	nt forward from earlier income years that we	lete this item only if the entity uses an early re incurred for the 1999–2000 to 2008–09 income
Note: Complete this item only if this is your first income year starting after 1 July 2008. Do not complete this item if you completed		ə A
it in the 2008–09 income year.	Modified passive incom	e B
	Offshore banking incom	e C
All other foreign source income		
Less – Loss amount attributable to non-assessable non-exempt income – Companies only		
	Subtract E from D	
	Total of A + B + C + F	G
Include at 🖪	50% of losses at G that were incurred for th 1999–2000 to 2001–2002 income year	es H
	unt of convertible foreign losses reduced wher hoice made to limit the starting total to \$10,00	e 1
St	arting total for convertible foreign losses equal label G less labels H and	J
Foreign loss component of a tax I	OSS – excludes losses of CFCs	
Foreign loss comp	conent of tax losses deducted – included at th Tax losses deducted label on your tax retur	e K
	t of tax losses carried forward – included at th I to later income years label on your tax retur	
Controlled foreign company losse	es	_
	Convertible CFC losse	s M
	CFC losses deducte	
	CFC losses carried forwar	

