\*\* PLS Validation Report - CloudAuth \*\*
ATO NATIONAL OFFICE SBR//11/03/2021 04:28:39PM//Page 1
VALIDATION REPORT NUMBER 001.1

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

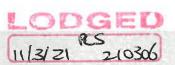
TRANS NO. 001 2/0306 DATE/TIME 11/03/2021//04:28:39//PM YEAR 2021

SENT 1
RECEIVED 1
ACCEPTED 1
REJECTED 0

**RETURNS ACCEPTED** 

F9349351.54// //349351454//Azzopardi Superannuation Fund//2019//MS

\*\*E10 END OF VALIDATION REPORT\*\*





RN:100017882MS

# Self-managed superannuation fund annual return

Name of self-managed superannuation fund (SMS Azzopardi Superannuation Fund  Australian business number (ABN) (if applicable)  Current postal address C/- The Rogers Group  PO Box A308	F) 43 514 812 668 State/terri	itory Postcode
Azzopardi Superannuation Fund  3 Australian business number (ABN) (if applicable)  4 Current postal address		
Azzopardi Superannuation Fund		
Azzopardi Superannuation Fund		
	F)	
	r)	
The ATO is authorised by law to request your TFN. You a could increase the chance of delay or error in processing you	re not obliged to quote your TFN but not q r annual return. See the Privacy note in the	uoting it Declaration.
Tax file number (TFN)	TFN at the top of p	pages 3, 5, 7, 9 and
Section A: Fund information	OT	essing, write the fund
The SMSF annual return cannot be used to notify us of a change in fund membership. You must update fund details via ABR.gov.au or complete the Change of details for superannuation entitles form (NAT 3036).		
The Self-managed superannuation fund annual return instructions 2019 (NAT 71606) (the instructions) can assist you to complete this annual return.		

30/46

Is this the first required return for a newly registered SMSF? **B** No X Yes

Not complete: 20/04/2020: 14:06

Taxpayer/entity name: Azzopardi Superannuation Fund

SMSF auditor  clitor's name  a		
weeker	SN	/ISF auditor
inly name  Notes Auditor Number  Auditor's phone number  30-188-144   20-30   20	litor's	
tenere RY AN Auditor Number Auditors phone number 204-58-404 [ON 30] [20		A Mis
t given name  Other given names  Other given names  Other given names  Auditor's phone number  20-168-104   20 30   20 02 4304444  stal address  e Box 1081   2 1 ALAAA	-	
Auditor's phone number 20-48-404   20 30   20 02-48-4444  state address  e Box 1964   2 1 A L A R R R  burbtown  rewms Nost  te audit was completed A O S O 3 2 Q I see audit report qualified?  B No X Yes  she audit report was qualified, have the D No X Yes  read our self-managed super funds financial institution details to pay any super payments and tax refunds owing to you and self-managed super funds financial institution account details  This account is used for super contributions and rollovers. Do not provide a tax agent account here.  Fund account number  Fund account number  I would like my tax refunds made to this account.  Go to C.  B Financial institution account details for tax refunds  This account is used for tax refunds. You can provide a tax agent account here.  BSB number  Account number  Account number  C Electronic service address alias  Finated the electronic service address alias		Other given names
Auditor's phone number    20		
stal address e Box 1961   2 TARAA ROAD  State ferritory Postcode rewins Nest   2 TARAA ROAD  State ferritory NSW   1585  1585  te audit was completed   A O S O 3 2 0 2   3		
stal address e Box 1964   2 7 A F A A A B A STATE   B A A STATE   B A A STATE   B A A STATE   B A A B A B A B A B A B A B A B A B A	11.7	
State/territory Fewns Nost  Ite audit was completed A O O 3 2021  Is Part A of the audit report qualified?  B No X Yes  In audit report was qualified, have the ported issues been rectified?  Electronic funds transfer (EFT)  We need your self-managed super fund's financial institution details to pay any super payments and tax refunds owing to you  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  Fund account name  I would like my tax refunds made to this account.  BSB number  Account number  Account number  Account number  C Electronic service address alias  Broaded the electronic service address alias		
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te audit was completed AOSOS 2001 s Part A of the audit report qualified? B No X Yes s Part B of the audit report qualified? C No X Yes he audit report was qualified, have the ported issues been rectified?  Electronic funds transfer (EFT) We need your self-managed super fund's financial institution details to pay any super payments and tax refunds owing to you  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 Fund account number  I would like my tax refunds made to this account. Go to C.  B Financial institution account details for tax refunds This account is used for tax refunds. You can provide a tax agent account here.  BSB number Account number  Account number  C Electronic service address alias  Details to plactronic service address alias		
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the audit was completed A S S S S S S S S S S S S S S S S S S	FOW	The rest 1200 Care Care Care Care Care Care Care Care
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Taxpayer/entity name: Azzopardi Superannuation Fund

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			Fund	i's tax file r	number (Ti	FN)	
	Status of SMSF	Australian superannua	tion fund	A No	Yes X	Fund benefit structure B	\ Co
	Does the the Gove	fund trust deed allow accep ernment's Super Co-contribu Low Income Super A	ition and	C No	Yes X	7.3	
	Was the fund wou	und up during the incor		Month	Yestr	Have all tax lodgment	
	No X Yes	yes, provide the date on hich the fund was wound up	Day	Morari	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	and noument	Yes [
)	Exempt current pe	ension income					
	Did the fund pay retire	ement phase superannuatio	n income s	stream benefi	ts to one or	more members in the income year?	
						more members in the income year?  minimum benefit payment under	
	To claim a tax e		n income,	you must pa			
	To claim a tax e the law. Record exe	exemption for current pensic	n income,	you must pa			
	To claim a tax e the law. Record exer	exemption for current pensicempt current pension income	n income, at Label	you must pa			¥.
	To claim a tax e the law. Record exer No X) Go to Section  Yes (1) Exempt current	exemption for current pensicempt current pension income ion B: Income.	n income, at Label	you must pa	y at least the	e minimum benefit payment under	
	To claim a tax e the law. Record exer No X) Go to Section  Yes (1) Exempt current	exemption for current pension empt current pension income ion B: Income.	n income, at Label / t A \$ your exem	you must pa	y at least the	e minimum benefit payment under	
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Taxpayer/entity name: Azzopardi Superannuation Fund

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Section	B:	Incom	e
COULCIL	,	11100111	•

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	entitied to claim any	tax official, you can re	If the total cenital is	oss or total capital gain is greater than \$10,0
Did you hav	ve a capital gains tax vent during the year?	G No X Yes	deferred notional g	ise the transitional ČGT relief in 2017 and the pain has been realised, complete and attact CGT) schedule 2019.
θ)	Have you applied an cemption or rollover?	M No X Yes	Code	
		Net capital gain	A\$	-90
Grot	ss rent and other leasi	ing and hiring income	B\$	33960 •90
		Gross interest	c\$	-00
	Forestry	managed investment	x \$	-90
Gross foreig				Loss
01 \$	-90	Net foreign income	D\$	-80
Australian fran	nking credits from a Ne	ew Zealand company	E\$	-60 Number
		Transfers from foreign funds	F\$	-90
	Gi	ross payments where ABN not quoted	н\$	-60 Loss
Calculation of assess Assessable emplo	able contributions	Gross distribution from partnerships	1\$	-96
11 \$	-00	*Unfranked dividend amount	J\$	-00
lus Assessable person	nal contributions	*Franked dividend amount	K\$	-00
R2 \$ lus		*Dividend franking	L\$	-90
R3 \$	0 ·60 included even if it is zero)	credit *Gross trust	M \$	-60 Code
ess Transfer of liability t	to life insurance	distributions		
company	• <b>60</b>	Assessable contributions (R1 plus R2 plus R3 less R6)	R \$	0 -90
Calculation of non-an	m's length income			Code
let non-arm's length priva		Carlot Microsite	s\$	-90
lus *Net non-arm's lengt	h trust distributions	*Assessable income due to changed tax status of fund	Т\$	-90
lus *Net other non-am	n's length income	Net non-arm's length income (subject to 45% tax rate) (U1 plus U2 plus U3)	<b>U</b> \$	-90
This is a mandatory		GROSS INCOME (Sum of labels A to U)	w \$	33960 <b>-90</b> Loss
if an amount is ntered at this label,	Exempt cu	rrent pension income	Y\$	-00
check the instructions o ensure the correct ex treatment has	TOTAL ASSESSAB	LE INCOME (W less Y)		33960 -90 Loss

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Taxpayer/entity name: Azzopardi Superannuation Fund

				I commented to the second	_
Fund's	tax file	number	(TFN)		

### 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).

		DED	UCTIONS			N	ON-DEDUCTIBLE EXPENS	SES
Interest expenses within Australia	A1	\$		-00	A	:\$		-00
Interest expenses overseas	B1	\$		-60	B2	\$		-00
Capital works expenditure	D1	\$		-00	D2	\$		-00
Decline in value of depreciating assets	E1	\$	1749	-00	E2	\$		-00
Insurance premiums – members	F1	\$		-60	F2	\$		-00
Death benefit increase	G1	\$		-60				
SMSF auditor fee	H1	\$	3300	-00	H2	\$		-60
Investment expenses	11	\$	47314	-00	12	\$		-00
Management and dministration expenses	J1	\$	1663	-00	J2	\$		-00
Forestry managed investment scheme expense	U1	\$		-90	U2 Code	\$		-00
Other amounts	L1	\$		-00	L2	\$		-00
Tax losses deducted	M1	\$		-00				
	то	TAL DE	DUCTIONS		T	OTAL I	NON-DEDUCTIBLE EXPENSE	S
	N	\$	54026 (Total A1 to M1)	-00	Y	\$	(Total A2 to L2)	-00
			(lotat wit to mil)				Vision has co	
	#TA	XABLE	INCOME OR LOSS	11.3	2000		SMSF EXPENSES	
	0	\$	20066	-00	L 2	\$	54026	-00
This is a mandatory abel.			ASSESSABLE INCOME less				(N plus Y)	

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Taxpayer/entity name: Azzopardi Superannuation Fund

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TFN		

### Section D: Income tax calculation statement

#### \*Important:

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

Calculation statement	*Taxable income	A\$	0 -00		
lease refer to the	- laxable income	7.4	(an amount must be included even if it is zero)		
elf-managed superannuation and annual return instructions	*Tax on taxable	T1 \$	0.00		
019 on how to complete the	income	ιιψ	(an amount must be included even if it is zero)		
alculation statement.	Tax on no-TFN-quoted	J\$	0.00		
	contributions	0.0	(an amount must be included even if it is zero)		
	Gross tax	B\$	0,00		
			(T1 plus J)		
Foreign income tax offset					
1\$	0.00				
Rebates and tax offsets		Non-re	fundable non-carry forward tax offsets		
2\$		C\$	0.00		
			(C1 plus C2)		
		SUBTO	OTAL 1		
		T2 \$	0.00		
	1. 11. 4	V	(B less C - cannot be less than zero)		
Early stage venture capital lipartnership tax offset	imited				
01\$					
Early stage venture capital	imited partnership	700			
tax offset carried forward fro		Manage	fundable carry forward tax offsets		
2\$		7	iumoable carry forward tax offsets		
Early stage investor tax offs	et	(D1 plus D2 plus D3 plus D4)			
3\$			(DT pius DZ pius DO pius D4)		
Early stage investor tax offs	et				
carried forward from previo	us year	SUBTO	MAL 2		
4\$		T3 \$			
			(T2 less D - cannot be less than zero)		
Complying fund's franking o	redits tax offset				
1\$					
No-TFN tax offset					
2\$					
National rental affordability so	heme tax offset				
3\$		Define	lable toy offeets		
Exploration credit tax offset		E\$	lable tax offsets		
4\$		E D	(E1 plus E2 plus E3 plus E4)		
			(E1 plus E2 plus E3 plus E4)		
	*TAX PAYABLE	TE O			
	'IAX PAYABLE	100	(T3 less E - cannot be less than zero)		
		100			
		Section	n 102AAM interest charge  men completed)		
		G\$			

Taxpayer/entity name: Azzopardi Superannuation Fund

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		Fund	s tax file num	ber (TFI	N)	
Credit fo	r interest on early payments -		A A			
	of interest					
11\$	At the last of the second second					V.
withhold	r tax withheld – foreign resident ing (excluding capital gains)					
12\$						
Credit fo	r tax withheld – where ABN ot guoted (non-individual)					
13\$						
	r TFN amounts withheld from s from closely held trusts					
15\$						
Credit fo	r interest on no-TFN tax offset					
16\$						
	r foreign resident capital gains	Elicible	e credits			
	ng amounts	H\$	e Greats			
18\$	-		(H1 plus H2 plus H	l3 plus H5	plus H6 plus H8)	
		- 4				
	*Tax offset refunds	1\$			0	.00
	(Remainder of refundable tax offsets)	101	(unus	sed amount	from label E -	
			an amount n	nust be Incl	uded even if it is zero)	
		PAYG	instalments rais	ed		
		K\$				
		Superv	visory levy			
		L\$			259	.00
		Supen	isory levy adjus	stment fo	r wound up funds	
		M\$				
		Supen	isory levy adjus	stment fo	r new funds	
		N\$				
	AMOUNT DUE OR REFUNDABLE	<b>s</b> \$			259	.00
	A positive amount at <b>S</b> is what you owe, while a negative amount is refundable to you.		(T5 plus G less H	less I less	K plus L less M plus N	0
his is a manda	atory label.					
	Losses					
Losses		x losses to let	carried forward er income years	U \$		90028 -00
= literate loca	s greater than \$100,000, tach a <i>Losses schedule</i>	et capita	al losses carried er income years	v \$		-00
mplete and at						
mplete and at						1 - 1
mplete and at						

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RN :1000	17882MS
TFN	
<b>BOTTON</b>	

Section	F:	Mem	ber	info	rma	tion
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MEMBER 1						
itie: Mr Mrs Miss	Ms X Other					
amily name Azzopardi						
rst given name		Other given nan	nes			
Joanne		Mary			Day Month	Year
tember's TFN ee the Privacy note in the Dec	laration.			Date of birth	Day Month	
ontributions	OPENING ACCOU	INT BALANCE	\$		194283.00	
Refer to instructions	OF LIVING AGGGG			primary residence disp		
or completing these		H \$	S II OIT	primary residence dier	70001	
bels.				Day Month	Year	
Employer contributions		Receipt	date	Day Month		
A \$		H1		-i au norman ention fur	and amount	
ABN of principal employer		Assessat	ole tori	eign superannuation fur	id amount	
A1 \$		1 \$				
		Non-ass	essab	ele foreign superannuati	ion fund amount	
Personal contributions  B \$	17731.00					
		J 3	-			
CGT small business retiremen	t exemption		from I	reserve: assessable am	ount	
C \$		K \$				
CGT small business 15-year	exemption amount	Transfer	from	reserve: non-assessabl	e amount	
D \$		L \$				
		Contribu	rtions	from non-complying		
Personal injury election		funds ar	nd pre	viously non-complying	funds	
E \$		T \$	15			
Spouse and child contribution	18		-			
F \$		/includin	a Sun	tributions er Co-contributions and	d	
Other third party contributions		Low Inco	ome S	Super Amounts)		
G \$		M \$				
		NTRIBUTIONS	NS		17731.00	
Other transactions	The state of the s	cated earnings	0 9		9066.00	Loss
		or losses	0.3		3000.00	
Accumulation phase ac	count balance	nward rollovers and	PS	3		
S1 \$[	202948.00	transfers				
Retirement phase ac	count balance	Outward rollovers and	QS			
- Non CDBIS	0.00	transfers				Code
		Lump Sum payment	R1 9	5		
Retirement phase ac- - CDBIS	COURT DAIANCE	Income	DC 4			Code
\$3 \$	0.00	stream payments	H2 3			
0 TRIS Count	CLOSING ACCO	UNT BALANCE 32 plus 83)	\$ \$		202948.00	
THE PROPERTY OF		ion phase value	X1 9	8	202948.00	
						N
	Retireme	ent phase value	X2 S	5		- //
	Outstanding li borrowing arrang	imited recourse gement amount	YS	3		] '
						D

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		Fund's tax file number (TFN)
EMBER 2		
e: Mr Mrs Miss	Ms Other	
nlly name		
t given name		Other given names
		Dev Month Year
ember's TFN e the Privacy note in the Dec	elaration.	Date of birth Vear
ontributions	ODENING ACCO	OUNT BALANCE \$
Refer to instructions	OPENING ACC	
completing these		Proceeds from primary residence disposal  H \$
imployer contributions		
1 \$		Receipt date Day Month Year
BN of principal employer		Assessable foreign superannuation fund amount
11 \$		
		1 \$
ersonal contributions		Non-assessable foreign superannuation fund amount
3 \$		J \$
GT small business retiremen	nt exemption	Transfer from reserve: assessable amount
\$		K \$
CGT small business 15-year	exemption amount	Transfer from reserve: non-assessable amount
\$		L \$
Personal injury election		Contributions from non-complying
<b>5</b> \$ '		funds and previously non-complying funds
Spouse and child contribution	18	Т \$
\$		Any other contributions
Other third party contributions		☐ (including Super Co-contributions and Low Income Super Amounts)
3 \$		M \$
	The state of the s	ONTRIBUTIONS N \$ of labels A to M)
ther transactions		llocated earnings
		or losses
Accumulation phase ac	ecount balance	rollovers and transfers
S1 \$	anust heleses	Outward
Retirement phase ac - Non CDBIS	COURT DAIANCE	rollovers and Q \$ transfers
\$2 \$		Lump Sum p4 ¢
Retirement phase acc	count balance	payment Code
S3 \$		stream R2 \$
TRIS Count		OUNT BALANCE S\$
		s \$2 pt/s \$3} ation phase value <b>X1</b> \$
		nent phase value X2 \$
	O	glimited recourse ngement amount Y\$

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TFN	
A ALL THREE	

st given name		Other given names		
			Day	Month Year
ember's TFN se the Privacy note in the De	claration.		Date of birth	
ontributions	OPENING ACCOL	NT BALANCE \$		
Refer to instructions completing these pels.			uy residence disposal	
Employer contributions		Receipt date Day	Month Year	
A \$		H1		
ABN of principal employer		Assessable foreign s	uperannuation fund amount	TES IN THE STATE OF THE
A1 \$		1 \$		
		Non-assessable fore	aign superannuation fund amo	ount
Personal contributions  B \$		J \$		
			e: assessable amount	
CGT small business retirem	ent exemption		o, assessable arrivant	
C \$			er non googsachie amount	
CGT small business 15-year	ar exemption amount	Transfer from reserv	e: non-assessable amount	
D \$				
Personal injury election		Contributions from funds and previous	non-complying y non-complying funds	
E \$		T &		
Spouse and child contributi	ons		rei realine e la	
F \$		Any other contributi	ons -contributions and	
Other third party contribution	ons	(including Super Co Low Income Super	Amounts)	
G \$		M \$		
		NTRIBUTIONS N \$		Loss
Other transactions	All	cated earnings or losses		
Accumulation phase	account balance	rollovers and transfers		
Retirement phase - Non CDBIS	account balance	rollovers and transfers		Code
\$2 \$ i		Lump Sum R1 \$		
Retirement phase a - CDBIS	account balance	Income		Code
S3 \$		stream R2 \$ payments		
TRIS Count		UNT BALANCE S\$		
		tion phase value X1 \$		
			SECRETARY TO SECURE	- // /
	D 11	ent phone value Va ¢		// 4
		ent phase value X2 \$		

Taxpayer/entity name: Azzopardi Superannuation Fund

Member's TFN See the Privacy note in the Declaration.

**MEMBER 4** Title: Mr Family name

First given name

Contributions

labels.

A \$

A1 \$

B \$

C \$

\$

\$

\$

Refer to instructions

Employer contributions

ABN of principal employer

Personal contributions

Personal injury election

Other transactions

Spouse and child contributions

Other third party contributions

CGT small business retirement exemption

CGT small business 15-year exemption amount

Accumulation phase account balance

for completing these

2019						RN		7882MS	
	-								
10.0	I	S							
r given n	ames						151132		
					D.	301	Month	Ye	ar
				Date of bi					978
LANCE	\$			-					
Proceed	ds fr	om p	orimary	residence	disposa	al			
<b>H</b> \$					11 - 4F A				
Receipt	t dat	е	Day	Month	1	/ear			
H1									
Assessa	able	forei	gn supe	erannuatio	n fund a	mount			
1 \$									
Non-as	SBS	able	foreigr	superan	nuation f	und an	nount		
J \$	-		H.						
NEW.	-	m ro	eenio.	assessable	amour	,			
K \$	-		JOI VO. 6	mocoodi)!	o amoun		7		
	LE			200 cons	anbla ca	aount	_		
L \$	-	m re	serve: r	non-asses	ssable ar	nount			
				n-complyir on-compl		ds			
T \$			7.14						
Any oth (including Low Inc	ner c	ontri upei e Su	ibutions r Co-co per Am	ntribution ounts)	s and				
M \$									
JTIONS to M)	N	\$		NIN T					
arnings r losses	C	\$							
Inward ers and ansfers	F	\$							
Outward ers and ransfers	G	\$						Code	
np Sum ayment		\$						Code	
lncome stream ayment	R2	Ф.							
Income stream	S								
Income stream ayment	: <b>S</b>	\$							1.1

Page 11

S1\$	transfers Outward	
Retirement phase account balance - Non CDBIS  \$2 \$	transfers	
Retirement phase account balance - CDBIS	Lump Sum R1 \$	
S3 \$	stream R2 \$	
	CCOUNT BALANCE \$\$	
Acot	mulation phase value X1 \$	
Re	etirement phase value X2 \$	
Outstar borrowing	ding limited recourse arrangement amount Y\$	
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Other given names

TOTAL CONTRIBUTIONS N \$ (Sum of labels A to M) Allocated earnings or losses

OPENING ACCOUNT BALANCE \$

FN	
FN	

e: Mr Mrs Miss Ms	Other				Accou	int status
mily name						
st given name		Other given nam	nes			
ember's TFN ee the Privacy note in the Declaration	Date of	birth Month Year			od, date of death	
ontributions	NING ACCOUN	IT BALANCE !	\$			
Refer to instructions	MING ACCOUN	THE STATE OF THE S				
r completing these			s from prin	nary residence dis	posai	
oels.		H \$		/ Month	Year	
Employer contributions  A \$		Receipt	date Day	/ Moditil	1000	
		H1 Appaceat	ale foreign	superannuation fu	nd amount	
ABN of principal employer	-		Jie toroigi i			
• •		1 \$				
Personal contributions		Non-ass	essable fo	reign superannuat	ion fund amount	
B \$		J \$				
CGT small business retirement exem	ption	Transfer	from reser	ve: assessable an	nount	
C \$		K \$	MIST			
CGT small business 15-year exempt	ion amount	Transfer	from rese	rve: non-assessab	le amount	
D \$		L \$				
Demonal injury election				non-complying		
Personal injury election		funds ar	nd previou	sly non-complying	funds	
E \$		T \$				
Spouse and child contributions  F \$		Any othe	er contribu	tions		
		(including	g Super C	o-contributions an r Amounts)	d	
Other third party contributions  G \$		M \$	это оаро	7 1110 (1110)		
		Ινι ψ				
	TOTAL CONT	TRIBUTIONS	N \$			
Other transactions		abels A to M)				Loss
Other transactions		ated earnings or losses	0\$			Loss
Accumulation phase account b	Alloca	ated earnings or losses Inward rollovers and	0 \$ P \$			Loss
	Alloca	ated earnings or losses Inward rollovers and transfers				Loss
Accumulation phase account to \$1 \$    Retirement phase account   - Non CDBIS	Alloca	ated earnings or losses Inward rollovers and transfers Outward rollovers and transfers	P\$ Q\$			Loss
Accumulation phase account to \$1 \$    Retirement phase account   - Non CDBIS	Alloca	ated earnings or losses Inward rollovers and transfers Outward rollovers and transfers Lump Sum	P\$			
Accumulation phase account to \$1 \$    Retirement phase account to Non CDBIS  \$2 \$    Retirement phase account to the second to t	Alloca	ated earnings or losses Inward rollovers and transfers Outward rollovers and transfers Lump Sum payment	P\$ Q\$ R1 \$			
Accumulation phase account to \$1 \$    Retirement phase account   - Non CDBIS	Alloca	ated earnings or losses Inward rollovers and transfers Outward rollovers and transfers Lump Sum payment	P\$ Q\$ R1 \$ R2 \$			Code
Accumulation phase account to \$1 \$    Retirement phase account to - Non CDBIS \$2 \$    Retirement phase account to - CDBIS \$3 \$	Alloca	ated earnings or losses Inward rollovers and transfers Outward rollovers and transfers Lump Sum payment Income stream payments	P \$			Code
Accumulation phase account to \$1 \$    Retirement phase account to - Non CDBIS \$2 \$    Retirement phase account to - CDBIS \$3 \$	balance palance palance palance palance palance	ated earnings or losses Inward rollovers and transfers Outward rollovers and transfers Lump Sum payment Income stream payments	P \$ Q \$ R1 \$ R2 \$ S\$			Code
Accumulation phase account to \$1 \$    Retirement phase account to - Non CDBIS \$2 \$    Retirement phase account to - CDBIS \$3 \$	Alloca  balance  balance  palance  SING ACCOUNT  (S1 plus S2  Accumulation	ated earnings or losses Inward rollovers and transfers Outward rollovers and transfers Lump Sum payment Income stream payments  NT BALANCE	P \$ Q \$ R1 \$ R2 \$ S\$ X1 \$			Code

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	Accoun	t status	Code
, date of	f death		
th \	/ear		
osal			
Year			
l amount			
n fund ar	nount		
 unt			
amount			
unds			
		1	
		Loss	
		Code	
		Code	
		AST	
			M

e: Mr Mrs Miss Ms	Other	Account sta	uu
st given name		Other given names	
dember's TFN ee the Privacy note in the Declarat		ate of birth  Month  Month  Year  Month  Mon	
ontributions	PENING ACC	COUNT BALANCE \$	
Refer to instructions r completing these pels.		Proceeds from primary residence disposal  H \$	
Employer contributions  A \$		Receipt date Day Month Year	
ABN of principal employer  A1 \$		Assessable foreign superannuation fund amount	
Personal contributions  B \$		Non-assessable foreign superannuation fund amount	
CGT small business retirement exe	emption	Transfer from reserve: assessable amount  K \$	
CGT small business 15-year exem	ption amount		
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	
Other third party contributions  G \$		Low Income Super Amounts)  M \$	
		CONTRIBUTIONS N \$	Loss
Other transactions	A	Allocated earnings or losses 0 \$	
Accumulation phase accounts 1 \$	t balance	rollovers and transfers	
Retirement phase account balance - Non CDBIS \$2\$		Outward rollovers and transfers  Lump Sum R1 \$	Code
Retirement phase account balance – CDBIS		payment	Code
TRIS Count CI		count balance \$\$	
		us S2 plus S3:  ulation phase value <b>X1</b> \$	/
	Retiren	ement phase value X2 \$	1
	Outstanding corrowing arrai	ng limited recourse angement amount	1

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#### Self

Self managed superar axpayer/entity name: Azzoparo	nnuation fund r	eturn 2019	TFN :10001/882MS
MEMBER 7			
IEMBEN /			Gode
ttle: Mr Mrs Miss amily name	Ms Other		Account status
rst given name		Other given names	
/lember's TFN	Date	of birth If dece	ased, date of death
see the Privacy note in the De		Month Year Day	Month Year
ontributions	OPENING ACCO	UNT BALANCE \$	
Refer to instructions		Proceeds from primary residence	disposal
completing these pels.		H \$	
Employer contributions		Receipt date Day Month	Year
A \$		H1	
ABN of principal employer		Assessable foreign superannuation	fund amount
A1 \$		1 \$	
		Non-assessable foreign superanni	uation fund amount
Personal contributions  B \$		J \$	
CGT small business retireme	ent exemption	Transfer from reserve: assessable	amount
C \$	sit exemption	K \$	
CGT small business 15-year	r exemption amount	Transfer from reserve: non-assess	able amount
	Otompton analis	L \$	
		Contributions from non-complying	
Personal injury election		funds and previously non-comply	ing funds
E \$		T \$	
Spouse and child contributed  F \$	ons	Any other contributions	
	20	(including Super Co-contributions Low Income Super Amounts)	and
Other third party contribution  G \$	115	M S	
		ONTRIBUTIONS N \$	Loss
Other transactions		located earnings	
		or losses	
Accumulation phase	account balance	rollovers and transfers	
S1\$	annunt halanca	Outward Oct	
Retirement phase a - Non CDBIS	account palatics	rollovers and Q \$ transfers	Code
\$2\$		Lump Sum R1 \$	
Retirement phase account balance - CDBIS		Income	Code
S3 \$		stream R2 \$	
TRIS Count	And the second s	DUNT BALANCE \$\$	
	CONTRACTOR OF THE PARTY OF THE	s S2 plus S3,	100
	Accumula	ation phase value X1 \$	104
	Retirer	nent phase value X2 \$	14
	Outstanding	limited recourse	

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Taxpayer/entity name: Azzopardi Superannuation Fund

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A	ccount	status	Code			
, date of de	eath			Section 1 Contract		
sal						
Year amount						
n fund amou	ınt					
amount						
ınds						
		Loss				
		Code Code				

**MEMBER 8** Family name First given name Other given names Date of birth Member's TFN If deceased See the Privacy note in the Declaration. Month Contributions OPENING ACCOUNT BALANCE \$ Refer to instructions Proceeds from primary residence dispo for completing these labels. \$ Employer contributions Receipt date A \$ ABN of principal employer Assessable foreign superannuation fund A1 \$ \$ Non-assessable foreign superannuation Personal contributions \$ \$ CGT small business retirement exemption Transfer from reserve: assessable amou \$ \$ CGT small business 15-year exemption amount Transfer from reserve: non-assessable \$ D \$ Contributions from non-complying Personal injury election funds and previously non-complying fu \$ Spouse and child contributions Any other contributions (including Super Co-contributions and Low Income Super Amounts) \$ Other third party contributions \$ M \$ TOTAL CONTRIBUTIONS (Sum of labels A to M) Allocated earnings or losses Other transactions 0\$ Inward Accumulation phase account balance rollovers and transfers P\$ \$1\$ Outward Retirement phase account balance - Non CDBIS Q \$ rollovers and transfers S2\$ Lump Sum R1 \$ Retirement phase account balance – CDBIS Income stream R2 \$ S3 \$ TRIS Count CLOSING ACCOUNT BALANCE \$\$ 'S1 plus S2 plus S3) Accumulation phase value X1 \$ Retirement phase value X2 \$ Outstanding limited recourse borrowing arrangement amount

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RN:100017882MS						
TEN	-		a to			
11.18						

Se	ction	H:	<b>Assets</b>	and	liabilities
40	ACCET	6			

-121	Australian managed investments		Listed trusts	A	\$		-90	
			Unlisted trusts	B	\$		-60	
							-90	
			Insurance policy					
		Other	managed investments	D	\$		-90	
5b	Australian direct investments	С	ash and term deposits	E	\$	2422	-90	
	Limited recourse borrowing arrangement	ents	Debt securities	F	\$		-00	
	Australian residential real property		Loans	G	•		-00	
	J1 \$	-00	Loans	u	Φ			
	Australian non-residential real property		Listed shares	H	\$		-90	
	J2 \$	-00	Unlisted shares	ı	\$		-00	
	Overseas real property		Office of the	3	<u> </u>			
	J3 \$	-00	Limited recourse orrowing arrangements	J	\$		-00	
	Australian shares							
	J4\$	-60	Non-residential real property	K	\$		-00	
	Overseas shares		Residential		•	681000	-00	
	J5 \$	-60	real property		<b>4</b>	001000		
	Other		Collectables and personal use assets	M	\$		-90	
	J6 \$	-00	Other assets	0	\$	3048	-60	
5c	Other investments		Crypto-Currency				-00	
				-	41		-00	
5d	Overseas direct investments		Overseas shares	۲	2			
	Oversea	as non-	residential real property	Q	\$		-00	
	Owe	erseas	residential real property	R	\$		-00	
			s managed investments				-00	
		ver seat					-00	
		II.	Other overseas assets	I	9		DQ.	
	TOTAL AUSTRALIAI	N AND	OVERSEAS ASSETS	U	\$	686470	-90	
15-	In house sesate							
100	In-house assets  Did the fund have a loan to, least or investment in, related parties (kn as in-house assets) at the end of income y	nown f of the	A No X Yes ]		\$		-DG	
15f If the	Limited recourse borrowing arrangeme fund had an LRBA were the LRBA borrow from a lice financial institut	vings ensed f tion?	A No Yes				1	
	Did the members or related parties of fund use personal guarantees or of security for the LF	other '	B No Yes				/ /\	

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Taxpayer/entity name: Azzopardi Superannuation Fund

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ΠFN						

Borrowings for limited recourse borrowing arrangements						
V1 \$	-06					
Permissible temporary borrowings						
V2\$	-pq					
Other borrowings						
V3 \$	-00	Borrowings	V	\$		-00
		ng account balances	w	\$	202948	-06
otal of all CLOSING ACCOUNT BA	LANCEs fro	m Sections F and G)				
		Reserve accounts	X	\$		-06
		Other liabilities	Y	\$	483522	-00
		TOTAL LIABILITIES	Z	\$	686470	-00
		the state of the s	nts			
		the state of the s				-06
otion I: <b>Taxation of fir</b> Faxation of financial arrangeme	ents (TOF/	<b>N</b>	\$			-00
	ents (TOF/	Total TOFA gains H	\$			
axation of financial arrangeme	ents (TOF/	Total TOFA gains H	\$			
axation of financial arrangement of ion J: <b>Other inform</b> of trust election status the trust or fund has made, or is ma	ation	Total TOFA gains H	<b>\$</b> [	ur-digit in		
tion J: <b>Other inform</b> trust election status the trust or fund has made, or is ma  specified of the election or varying a fa	ation  aking, a family  ation (for exa	Total TOFA gains H  Total TOFA losses I	\$ ane for inco	ur-digit ir me year, r print <b>V</b> f	write 2019). A	
tion J: Other information of funding a factor of funding a factor of the electron of the elect	ation  aking, a family  ation (for exa	Total TOFA gains H  Total TOFA losses I  y trust election, write th mple, for the 2018–19	\$ ane for inco	ur-digit ir me year, r print <b>V</b> f	write 2019). A	

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Taxpayer/entity name: Azzopardi Superannuation Fund

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Section	K:	Dec	larat	ions
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Penalties may be imposed for false or misleading information in addition to penalties relating to any tax shortfalls.

Before making this declaration check to ensure that all income has been disclosed and the annual return, all attached schedules and any additional documents are true and correct in every detail. If you leave labels blank, you will have specified a zero amount or the label was not applicable to you. If you are in doubt about any aspect of the annual return, place all the facts before the ATO.

The ATO is authorised by the Taxation Administration Act 1953 to request the provision of tax file numbers (TFNs). We will use the TFN to 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

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 dire records. I have received a copy of the audi	ctors have authorised this annual return t report (If required) and are aware of a	m and it is document any matters raised the true and correct.	prein. The information on this
records. I have received a copy of the audi annual return, including any attached sche Authorised trustee's, director's or public of	THES ALL ACCUMENTAL COOCUMENTAL		
Authorised trustee's, directors or public or	noo; o oigi azzaro	Dan	y Month Year
MARSolvery		Date 8	3 202
Preferred trustee or director conta	ct details:		
Title: Mr Mrs Miss Ms X O	ther		
Family name			
Azzopardi			
First given name	Other given names		
Joanne			
Phone number 02 92677655			
Email address			
(# applicable)		THE WELL	
Non-individual trustee name (If applicable)			
ABN of non-individual trustee		FRIDTED FEET	
Time taken t	o prepare and complete this annual re	turn Hrs	and the state of t
The Commissioner of Taxation, as 9	egistrar of the Australian Business Rec	gister, may use the AE	BN and business details which
The Commissioner of Taxation, as you provide on this annual return to main	The little distribution of the registers for the	a Communication, reser	to the medical to
TAX AGENT'S DECLARATION: I declare that the Self-managed superal provided by the trustees, that the truste correct, and that the trustees have author		as been prepared in ng that the information	accordance with information on provided to me is true and
Tax agent's signature			Months Year
1		Date C	NE 05 2021
managa		Date	
Tax agent's contact details			
	Other		
Family name			
Rogers			
First given name	Other given names		
Catriona			
Tax agent's practice			
The Rogers Group Ltd Partner	ship		
Tax agent's phone number	Reference number		Tax a ent number
02 9267 7655	AZZA70		64941004
	Author Toyotion Office CDO Pov	9845. IN YOUR CAF	PITAL CITY
	Australian Taxation Office, GPO Box		
Not complete: 20/04/2020: 14:06		M	20 0/ 46

# Taxation Estimate For the year ended 30 June 2019

Return Code: Description:	AZZA70 Azzopardi Superannuation Fund	Tax File Number: Date prepared: 20	0/04/2020
ELECTRIC SERVICE		\$	\$
Summary of Ta	xable Income		
Business ar	id Investment Income:		
No-TFN cor			
Other Busin	ess income	33,960.00	
			33,960.00
Less Dedu	ctions		54,026.00
Loss to Ca	rry Forward		-20,066.00
Fax on Taxable	Income		
	Gross Tax		
	SUBTOTAL T2		
Add:			
Supervisory	levy	259.00	
			259.00
	TOTAL AMOUNT PAYABLE		259.00

A

Please note that this is our estimate of your PAYG liability. Actual amounts payable will be determined by the Australian Taxation Office and may differ from this estimate.

The Rogers Group Ltd Partnership

219/46

#### PART A

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

the taxpayer to retain this declar	ration for a period of five years after	the declaration is made, per	alties may apply for f	allure to do so.
Tax File Number		Year of return		2019
Name of Partnership, Trust, Fund or Entity	Azzopardi Superannuation	n Fund		
T-4-15	Total Deduc	41	Faxable Income/L	
Total Income/Loss	Total Deduc	dions	axable income/c	
Privacy				
	ation Administration Act 1953 to reques eneficiary or entity in our records. It is n if you do not quote your TFN.			
	o collect information and disclose it to declaration. For information about private		cluding personal inform	ation about
The Australian Business Register The Commissioner of Taxation, as tax return to maintain the integrity of	Registrar of the Australian Business F	Register, may use the ABN and	business details which	you provide on this
Please refer to the privacy stateme commitment to safeguarding your	ent on the Australian Business Register details.	r (ABR) website (www.abr.gov.	au) for further informati	on - it outlines our
	t debit I direct debit some of your details will b action liability from your nominated accu		attution and the Tax Of	fice's sponsor bank
I authorise my tax agent to electron	nically transmit this tax return via an ap	proved ATO electronic channel	L	
	claration please check to ensure that all out any aspect of the tax return, place a on tax returns.			
Declaration: I declare that:				
* all the information I have provid any applicable schedules is tr	ed to my registered tax agent for the pa ue and correct, and a document to the Commissioner of Ta		luding	
Signature of Partner, Trust or Director		hardi	Date	8/3/21/1
PART D	Tax agent's certificate (sh	ared facilities only)	noe.	
We, The Rogers Group Ltd Partner		wood !	Jel	
	in accordance with the information sup nade by the entity that the information p			rue
	trustee, director or public officer to lod	lge this tax return, including an	y applicable schedules.	1
Agent's Signature	mages		Date (	01/03/2021

AZZA70

Client's reference

Agent's phone Agent's Contact Name Agent's reference number 02 926 7655 Catriona Rogers 64941004