Self-managed superannuation fund annual return 2021

To complete this annual return

■ Print clearly, using a BLACK pen only.

	annual return. All other funds must complete the Fund ome tax return 2021 (NAT 71287).	■ Use BLOCK LETTERS and print one character per box.
0	The Self-managed superannuation fund annual return instructions 2021 (NAT 71606) (the instructions) can assist you to complete this annual return.	■ Place in ALL applicable boxes.
•	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 entities form (NAT 3036).	Postal address for annual returns: Australian Taxation Office GPO Box 9845 [insert the name and postcode of your capital city] For example; Australian Taxation Office GPO Box 9845 SYDNEY NSW 2001
Se	ection A: Fund information	To assist processing, write the fund's TFN at
1	Tax file number (TFN) Provided	the top of pages 3, 5, 7 and 9.
	The ATO is authorised by law to request your TFN. Yo the chance of delay or error in processing your annual	ou are not obliged to quote your TFN but not quoting it could increase I return. See the Privacy note in the Declaration.
2	Name of self-managed superannuation fund (SM	MSF)
СН	HOW'S FAMILY SUPERANNUATION FUND	
3	Australian business number (ABN) (if applicable)	93316124170
4	Current postal address	
РО) Box 24	
Subi	urb/town	State/territory Postcode
Cle	eveland	QLD 4163
5	Annual return status	
	Is this an amendment to the SMSF's 2021 return?	A No X Yes
	Is this the first required return for a newly registered SMSF	? B No X Yes

Who should complete this annual return?

Only self-managed superannuation funds (SMSFs) can complete

OFFICIAL: Sensitive (when completed)

Page 1

	Tax File Number Provided
6 SMSF auditor	
Auditor's name Title: Mr X Mrs Miss Ms Other	
Family name	
Boys	
First given name Other given names	
Anthony William	
SMSF Auditor Number Auditor's phone number	
100014140 61410712708	
Postal address	
PO Box 3376	
L Suburb/town	State/territory Postcode
Rundle Mall	SA 5000
Day Month Year	
Date audit was completed A 11 / 03 / 2022	
Was Part A of the audit report qualified? B No X Yes	
Was Part B of the audit report qualified?	
If Part B of the audit report was qualified,	
have the reported issues been rectified? No Yes	
7 Electronic funds transfer (EFT) We need your self-managed super fund's financial institution details to pay	any super payments and tax refunds owing to you.
A Fund's financial institution account details	
This account is used for super contributions and rollovers. Do not p	provide a tax agent account here
	mber 120337142
Fund account name	12007112
CHOW'S FAMILY SUPERANNUATION FUND	
I would like my tax refunds made to this account. X Go to C.	
B Financial institution account details for tax refunds	
This account is used for tax refunds. You can provide a tax agent a	ccount here.
BSB number Account nu	mber
Account name	
C Electronic service address alias	
Provide the electronic service address alias (ESA) issued by your SMSF	
(For example, SMSFdataESAAlias). See instructions for more informatio BGLSF360	n.

	Tax File Number Provided
8	Status of SMSF Australian superannuation fund Does the fund trust deed allow acceptance of the Government's Super Co-contribution and Low Income Super Amounts? A No Yes X Fund benefit structure B A Code C No Yes X
9	Was the fund wound up during the income year? No X Yes If yes, provide the date on which the fund was wound up
10	Exempt current pension income Did the fund pay retirement phase superannuation income stream benefits to one or more members in the income year?
	To claim a tax exemption for current pension income, you must pay at least the minimum benefit payment under the law. Record exempt current pension income at Label A.
	No X Go to Section B: Income.
	Yes Exempt current pension income amount A\$
	Which method did you use to calculate your exempt current pension income?
	Segregated assets method B
	Unsegregated assets method C) Was an actuarial certificate obtained? D Yes
	Did the fund have any other income that was assessable?
	E Yes O Go to Section B: Income.
	No 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.)
	If you are entitled to claim any tax offsets, you can list these at Section D: Income tax calculation statement.

Page 3

Tax File Number Provided	Tax File Number	Provided
----------------------------	-----------------	----------

Section B: Income

Cootion D. Incomo				
Do not complete this section if all superanr the retirement phase for the entire year, ther notional gain. If you are entitled to claim any	e was no other incom	e that was assess	able, and you have not realise	ed a deferred
Did you have a capital gains tax (CGT) event during the year?	No X Yes	\$10,000 or you ele 2017 and the defe complete and atta	oss or total capital gain is grea ected to use the transitional Co rred notional gain has been re ch a Capital gains tax (CGT) so	GT relief in alised,
Have you applied an exemption or rollover?	I No X Yes ☐	Code		
	Net capital gain	A \$		
Gross rent and other least	ing and hiring income	В\$	17,000	
	Gross interest	C \$	592	
Forestry	managed investment scheme income	x \$		
Gross foreign income				Loss
D1 \$ 7	Net foreign income	D \$	7	
Australian franking credits from a No	ew Zealand company	E \$		Number
	Transfers from foreign funds	F \$		0
G	ross payments where ABN not quoted	н \$		
Calculation of assessable contributions Assessable employer contributions	Gross distribution	1\$		Loss
R1 \$	from partnerships *Unfranked dividend	J \$	22	
plus Assessable personal contributions	amount *Franked dividend			
R2 \$ 25,000	amount	K \$	15,448	
plus **No-TFN-quoted contributions 0	*Dividend franking credit	L \$	6,620	Code
(an amount must be included even if it is zero)	*Gross trust distributions	M \$	1,180	Р
less Iransfer of liability to life insurance company or PST	Assessable			\neg
R6 \$	contributions (R1 plus R2 plus R3 less R6)	R \$	25,000	
Calculation of non-arm's length income	7			Code
*Net non-arm's length private company dividends	*Other income	s \$		
plus*Net non-arm's length trust distributions	*Assessable income due to changed tax	т \$		
U2 \$	status of fund	ΙΨ[_
plus *Net other non-arm's length income	Net non-arm's length income	U \$		
U3 \$	(subject to 45% tax rate) (U1 plus U2 plus U3)	- + [
#This is a mandatory label.	GROSS INCOME	w \$	65,869	Loss
*If an amount is	(Sum of labels A to U)	Y \$	33,030	
check the instructions	rrent pension income	τ Φ [Loss
	SSESSABLE ME (W less Y) V \$		65,869	

Page 4 **OFFICIAL: Sensitive** (when completed)

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).

	DEDUCTIONS	NON-DEDUCTIBLE EXPENSES
Interest expenses within Australia	A1 \$	A2 \$
Interest expenses overseas	B1 \$	B2 \$
Capital works expenditure	D1 \$	D2 \$
Decline in value of depreciating assets	E1 \$	E2 \$
Insurance premiums – members	F1 \$	F2 \$
SMSF auditor fee	H1 \$ 770	H2 \$
Investment expenses	I1 \$ 7,277	12 \$
Management and administration expenses	J1 \$ 2,591	J2 \$
Forestry managed investment scheme expense	U1 \$	U2 \$ Code
Other amounts	L1 \$	L2 \$
Tax losses deducted	M1 \$	
	TOTAL DEDUCTIONS	TOTAL NON-DEDUCTIBLE EXPENSES
	N \$ 10,638	Y \$
	(Total A1 to M1)	(Total A2 to L2)
	*TAXABLE INCOME OR LOSS	Loss TOTAL SMSF EXPENSES
	O \$ 55,231	Z \$ 10,638
#This is a mandatory	(TOTAL ASSESSABLE INCOME less	(N plus Y)

Tax File Number Provided

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,

	have specified a zero amo				
	refer to the	#Taxable incom	A \$		55,231
	anaged superannuation	#Toy on toyob.	_	(an amount must be included even if it is zer	ro)
fund ar	nnual return instructions	#Tax on taxable income	T1 \$		8,284.65
	on how to complete the lation statement.	#Tax oi	า	(an amount must be included even if it is zer	ro)
	alori otatornoriti	no-TFN-quote	d J \$		0.00
		contribution	S	(an amount must be included even if it is zer	ro)
		Gross ta	х В\$		8,284.65
				(T1 plus J)	
	Foreign income tax offset				
C1\$		0.13			
İ	Rebates and tax offsets		Non-re	efundable non-carry forward tax offs	ets
C2\$			C \$		0.13
'				(C1 plus C2)	
			SUBT	OTAL 1	
			T2 \$		8,284.52
				(B less C – cannot be less than zero)	
	Early stage venture capital partnership tax offset	limited			
D1\$		0.00			
	Early stage venture capital				
	tax offset carried forward f		Non-re	efundable carry forward tax offsets	
D2\$		0.00	D \$		0.00
	Early stage investor tax off	set	'	(D1 plus D2 plus D3 plus D4)	
D3\$		0.00			
•	Early stage investor tax off	set	OUDT	2741.0	
	carried forward from previo			OTAL 2	
D4 \$		0.00	T3 \$		8,284.52
				(T2 less D – cannot be less than zero)	
	Complying fund's franking of	credits tax offset			
E1\$		6,626.33			
	No-TFN tax offset				
E2 \$					
	National rental affordability s	cheme tax offset			
E3\$,				
	Exploration credit tax offset		Refun	dable tax offsets	
E4 \$		0.00	E\$		6,626.33
•				(E1 plus E2 plus E3 plus E4)	
		#TAX PAYABLI	T5 \$		1,658.19
				(T3 less E – cannot be less than zero)	
				n 102AAM interest charge	
			G \$		

Page 6 **OFFICIAL: Sensitive** (when completed)

Tax File Number	Provided
I ax I lie liullinei	II IOVIGEG

	Credit for interest on early payments –	
H1\$	amount of interest	
піф	·	
	Credit for tax withheld – foreign resident withholding (excluding capital gains)	
H2\$	\$	
	Credit for tax withheld – where ABN or TFN not guoted (non-individual)	
Н3\$,	
	Credit for TFN amounts withheld from	
H5\$	payments from closely held trusts 0.00	
пээ	Credit for interest on no-TFN tax offset	
H6\$		
•	Credit for foreign resident capital gains	
4		ole credits
H8\$	\$ 0.00 H S	
		(H1 plus H2 plus H3 plus H5 plus H6 plus H8)
	*Tax offset refunds	
	(Remainder of refundable tax offsets)	
		(unused amount from label E − an amount must be included even if it is zero)
	PAYO	G instalments raised
	KS	185.00
	Supe	ervisory levy
	LS	259.00
	Supe	ervisory levy adjustment for wound up funds
	MS	
	Supe	ervisory levy adjustment for new funds
	N S	
	AMOUNT DUE OF PEEUNDARIE	
	AMOUNT DUE OR REFUNDABLE A positive amount at S is what you owe,	1,732.19
	while a negative amount is refundable to you.	(T5 plus G less H less I less K plus L less M plus N)
#Thin is	is a mandatory label.	
11115 13	is a manuatory label.	
Sect	etion E: Losses	
		es carried forward
● If t	f total loss is greater than \$100,000	later income years 0 5
co	complete and attach a Losses Net Cap	oital losses carried later income years V \$ 26,848

			Tax File N	umber Provided	
Section F: Member informat	ion				
MEMBER 1					
Title: Mr Mrs X Miss Ms Other					
Family name					
Chow					
First given name	Other given	names			
Chui Yi	J				
Member's TFN See the Privacy note in the Declaration. Provided			Date of birth	Provide	:d
Contributions OPENING ACCOL	JNT BALANCE	\$		1,181,202.37	
Refer to instructions for completing these lab	els.	Proceeds	from primary resider	nce disposal	
Employer contributions		Receipt c	late Day Mon'	th Year	
A \$		H1	Day Mon		
ABN of principal employer		Assessab	le foreign superannua	ation fund amount	
A1		I \$[
Personal contributions		Non-asse	essable foreign supera	annuation fund amoun	nt
	00.00	J \$[
CGT small business retirement exemption C \$		_	rom reserve: assessa	lble amount	
· ·		K \$[
CGT small business 15-year exemption am	lourit	_	rom reserve: non-ass	essable amount	
Personal injury election		L \$[: f	i dia ai fi in ala	
E \$			ions from non-compl ously non-complying		
Spouse and child contributions		T \$[
F \$		Any other	contributions Super Co-contribution	one and	
Other third party contributions		Low Inco	me Super Amounts)	JIIS allu	
G \$		M \$[
TOTAL CONTRIBUTIONS		of labels A t	25,000	0.00	
	(Gairr	or labolo A t	<i></i> ,		Loss
Other transactions Allo	ocated earnings or losses	_։ Ծ ֆ լ		163,861.31	
Accumulation phase account balance	Inward rollovers and	P\$			
S1 \$ 1,370,063.68	transfers				
Retirement phase account balance - Non CDBIS	Outward rollovers and transfers	Q \$			Code
S2 \$ 0.00	Lump Sum	R1 \$ [
Retirement phase account balance	payments	+ L			
- CDBIS	Income	R2 \$ [Code
S3 \$	payments				
0 TRIS Count CLOSING ACCO	OUNT BALANC	E S \$[(S1 plus S2 plus	1,370,063.68	
	. , .	V4 AF	. ,		I
Accumulat	ion phase value	* X1 \$ [
Retirem	ent phase value	∍ X2 \$ [
Outstanding borrowing arran	limited recourse gement amoun	Y \$[
Page 8 OFFI	CIAL: Sensitiv	ve (when	completed)		

				Tax File Number	Provided	
Section H: Assets and liabilities						
5a Australian managed investments	Listed trusts	A	\$[81,144	
,	Unlisted trusts	В	\$[
Ins	surance policy	С	\$[
Other manage	d investments	D	\$[
5b Australian direct investments Cash and	term deposits	E	\$[384,159	
Limited recourse borrowing arrangements	Debt securities					
Australian residential real property J1\$	Loans	G	\$[
Australian non-residential real property	Listed shares	Н	\$[561,606	
J2 \$	Inlisted shares		\$[
Overseas real property		_	Ψ			
	nited recourse arrangements	J	\$[
J4 \$	lon-residential	K	ا م			
Overseas shares	real property					
J5 \$	Residential real property	L	\$[342,000	
Other Co	llectables and lal use assets	М	\$[
J6 \$	Other assets	0	- آ ي		2,811	
Property count J7	Other addotto	•	ΨL		2,011	
5c Other investments Cn	ypto-Currency	NI NI	œ ſ			
oc Other investments	ypto-Currency	IA	Ψ			
5d Overseas direct investments Ov	erseas shares	P	\$[
Overseas non-residentia	l real property	Q	\$[
Overseas residentia	l real property	R	\$[
Overseas manage	d investments	S	\$[
Other ov	erseas assets	Т	\$[
TOTAL AUSTRALIAN AND OVERSE (Sum of labels A to T)	EAS ASSETS	U	\$[1,371,720	
Did the fund have a loan to, lease to or investment in, related parties (known as in-house assets) at the end of the income year?	Yes)		\$[

Page 16 **OFFICIAL: Sensitive** (when completed)

					Tax File Number	Provided
15f	Limited recourse borrowing arrangements If the fund had an LRBA were the LRBA borrowings from a licensed financial institution? Did the members or related parties of the fund use personal guarantees or other security for the LRBA?	A No	Yes			
16	LIABILITIES					
	Borrowings for limited recourse borrowing arrangements V1 \$					
	Permissible temporary borrowings V2 \$					
	Other borrowings V3 \$	Bor	rowings	V	\$	
	Total member clos (total of all CLOSING ACCOUNT BALANCE s fr			w	\$	1,370,062
		Reserve a	ccounts	X	\$	
		Other	liabilities	Y	\$	1,658
		TOTAL LIA	ABILITIES	Z	\$	1,371,720
	ction I: Taxation of financia Taxation of financial arrangements (TOF		gemer	nts	·	
		Total TOFA	gains H	\$[
		Total TOFA lo	osses I	\$[
 Se	ction J: Other information					
	illy trust election status If the trust or fund has made, or is making, a fan specified of the election (for ex					A
	If revoking or varying a family trust and complete and attach the <i>l</i>					в
Inter	rposed entity election status If the trust or fund has an existing election, or fund is making one or more elections specified and complete an Interposed e	write the earlie tions this year,	est income write the e	year earlie:	specified. If the trust st income year being	c
	If revoking ar	n interposed e	ntity electio	on, p	rint R , and complete	D []

Page 17

Tax File Number	Provided

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.

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	21 / 03 / 2022
Schow	Date Month Year
Preferred trustee or director contact details:	
Title: Mr Mrs X Miss Ms Other	
Family name	
Chow	
First given name Other given names	
Chui Yi	
Phone number 07 3286 1322 Email address	
Non-individual trustee name (if applicable)	
Chow's Family Super Pty Ltd	
Chow's Family Super Fty Ltu	
ABN of non-individual trustee	
Time taken to prepare and complete this annual retur	n Hrs
The Commissioner of Taxation, as Registrar of the Australian Business Register, n provide on this annual return to maintain the integrity of the register. For further infi	
TAX AGENT'S DECLARATION: I declare that the <i>Self-managed superannuation fund annual return 2021</i> has been provided by the trustees, that the trustees have given me a declaration stating that correct, and that the trustees have authorised me to lodge this annual return. Tax agent's signature	
	Date Month Year
Tax agent's contact details Title: Mr Mrs X Miss Ms Other	
Family name Sherman	
First given name Other given names	
Shona Lorraine	
Tax agent's practice	
HFB Super Pty Ltd	
	Toursel
Tax agent's phone number Reference number O7 3286 1322 CHOW	Tax agent number

Losses schedule

2021

Companies and trusts that do not join consolidated groups should complete and attach this schedule to their 2021 tax return. Superannuation funds should complete and attach this schedule to their 2021 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. Place χ in all applicable boxes. Refer to Losses schedule instructions 2021, available on our website ato.gov.au for instructions on how to complete this schedule. Tax file number (TFN) Provided Name of entity CHOW'S FAMILY SUPERANNUATION FUND Australian business number 93316124170 Part A - Losses carried forward to the 2021-22 income year - excludes film losses 1 Tax losses carried forward to later income years Year of loss 2020–21 **B** 2019-20 **C** 2018–19 **D** 2017-18 **E** 2016–17 **F** 2015-16 and earlier income years Total 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 2020-21 2019-20 2018-19 **J** 2017-18 **K** 26,848 2016–17 **L** 2015–16 and earlier income years

Transfer the amount at V to the Net capital losses carried forward to later income years label on your tax return.

Total **V**

OFFICIAL: Sensitive (when completed)

26,848

Tax File Number Provided

				Tax Tile Italiisei Tiotiaea
P	art B – Ownership and b	ousiness continuity	/ te	est – company and listed widely held trust only
Sa	complete item 3 of Part B if a loss is being of atis ied in relation to that loss. To not complete items 1 or 2 of Part B if, in gainst a net capital gain or, in the case of c	the 2020–21 income year, no los	s ha	as been claimed as a deduction, applied
1	Whether continuity of majority ownership test passed Note: If the entity has deducted, applied, transferred in or transferred out (as applicable) in the 2020–21 income year a loss incurred in any of the listed years, print X in the Yes or No box to indicate whether the entity has satisfied the continuity of majority ownership test in respect of that loss.	Year of loss 2020–21 2019–20 2018–19 2017–18	B C	Yes No Yes No Yes No
		2016–17 2015–16 and earlier income years	E F	Yes No
2	Amount of losses deducted/applied for business continuity test is satisfied - of		orit	y ownership test is not passed but the
		Net capital losses	Н	
3	Losses carried forward for which the applied in later years – excludes film losse		be	satisfied before they can be deducted/
		Tax losses Net capital losses	J	
4	Do current year loss provisions apply Is the company required to calculate its taxa the year under Subdivision 165-B or its net cap for the year under Subdivision 165-CB of the <i>In</i> 1997 (ITAA 1997)?	able income or tax loss for pital gain or net capital loss	K	Yes No
P	art C - Unrealised losses - c	Subdivision 165-CC of ITAA 1997.		
	Has a changeover time occurred in relation to after 1.00pm by legal time in the Australian Ca 11 November 1999?	pital Territory on	L	Yes No
	If you printed X in the No box at L , do not comp	lete M, N or O.		
	At the changeover time did the company satis net asset value test under section 152-15 of Π	ĀA 1997?	M	Yes No
	If you printed ${\bf X}$ in the ${\bf No}$ box at ${\bf M}$, has the co it had an unrealised net loss at the changeover		N	Yes No
	If you printed X in the Yes box at N , what was unrealised net loss calculated under section 10		0	

	Ta	x File Number Provided
Part D – Life insurance companies		
Complying superannuation class tax losses carried forward to later income years	P	
Complying superannuation net capital losses carried forward to later income years	Q	
Part E – Controlled foreign company losses		
Current year CFC losses	M	
CFC losses deducted	N	
CFC losses carried forward	0	
Part F – Tax losses reconciliation statement		
Balance of tax losses brought forward from the prior income year	A	
ADD Uplift of tax losses of designated infrastructure project entities	В	
SUBTRACT Net forgiven amount of debt	С	
ADD Tax loss incurred (if any) during current year	D	
ADD Tax loss amount from conversion of excess franking offsets	Ε	
SUBTRACT Net exempt income	F	
SUBTRACT Tax losses forgone	G	
SUBTRACT Tax losses deducted	Н	
SUBTRACT Tax losses transferred out under Subdivision 170-A (only for transfers involving a foreign bank branch or a PE of a foreign financial entity)	I	
Total tax losses carried forward to later income years	J	
Transfer the annual at the the Territories of the		d & - 1 - 4 - 1 - 5

Tax File Number	Provided

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

Taxpayer's declaration

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

Signature		21 / 03 / 2022			
		l .	Day	Month	Year
LHOW		Date	/		
Contact person	Dayti	me contact r	number (ir	nclude area	code)
Chui Yi Chow	07 3	3286 1322			

Electronic Lodgment Declaration (SMSF)

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.

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		Name of Fund	Year	
Provided CHOW'S FAMILY SUPERANNUATION FUND				
I authorise my	tax agent to electroni	cally transmit this tax return via an approved ATO electronic channel.		
correct in every	y detail. If you are in o	se check to ensure that all income has been disclosed and the tax return is doubt about any aspect of the tax return, place all the facts before the Tax is for false or misleading statements on tax returns.		
Declaration:	is true and correct	on provided to the agent for the preparation of this tax return, including ang ; and gent to lodge this tax return.	y applicable schedules	
Signature of P	artner, Trustee, or	Schow D	ate 21 / 03// 2022	

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 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.

Account Name	CHOW'S FAM	IILY SUPERANNUATION FUND					
Account Number	262786 12033	0337142 Client R		t Reference CHOW			
authorise the refund to be deposited directly to the specified account							
Signature				Date	/	1	

Tax Agent's Declaration

I declare that:

- I have prepared this tax return in accordance with the information supplied by the partner, trustee, director or public officer
- I have received a declaration made by the entity that the information provided to me for the preparation of this tax return is true and correct; and
- I am authorised by the partner, trustee, director or public officer to lodge this tax return, including any applicable schedules.

Agent's signature			Date	1	1
Contact name	Shona Sherman		Client Reference	снош	
Agent's Phone Num	nber 07 3286 1322	т	ax Agent Number	24805931	