To the trustee of the BIRDSVILLE BULLWHIP & SADDLE COMPANY SUPERANNUATION FUND 29 Kaija Street, Mt Gravatt East Queensland 4122

Dear Trustees

Audit Engagement Letter

Objectives and Scope of the Audit

You have requested that we audit the financial statements of the BIRDSVILLE BULLWHIP & SADDLE COMPANY SUPERANNUATION FUND for the year ended 30/06/2021. We are pleased to confirm our acceptance and understanding of this engagement by means of this letter.

Our audit will be performed in accordance with Australian Auditing Standards, the Superannuation Industry (Supervision) Act 1993 (SISA) and the Superannuation Industry (Supervision) Regulations (SISR) with the objective of expressing an opinion on the financial report and the fund's compliance with the specified requirements of the SISA and the SISR.

Our Responsibilities

We will conduct our audit in accordance with Australian Auditing Standards. Those Auditing Standards require that we comply with relevant ethical requirements relating to audit engagements and plan and perform the audit to obtain reasonable assurance as to whether the financial report is free from material misstatement.

An audit involves performing audit procedures to obtain audit evidence about the amounts and disclosures in the financial report. The procedures selected depend on the auditor's judgement, including the assessment of the risks of material misstatement of the financial report, whether due to fraud or error. An audit also includes evaluating the appropriateness of the financial reporting framework, accounting policies used and the implementation and operation of accounting and internal control systems that are designed to prevent and detect fraud and error, as well as evaluating the overall presentation of the financial report.

Because of the inherent limitations of an audit, together with the inherent limitations of internal control, there is an unavoidable risk that some material misstatement may not be detected, even though the audit is properly planned and performed in accordance with Australian Auditing Standards.

In making our risk assessments, we consider internal control relevant to the entity's preparation of the financial report in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. We will, however, communicate to you in writing any significant deficiencies in internal control relevant to the audit of the financial report that we have identified during the audit.

Trustees' Responsibilities

Our audit will be conducted on the basis that the Trustee(s) acknowledge and understand that they have responsibilities:

- For the preparation of the financial report that gives a true and fair view in accordance with the Australian Auditing Standards, other mandatory reporting requirements and the SIS Act and SIS Regulations is that of the Trustee(s);
- For such internal control as the Trustee(s) determine is necessary to enable the preparation of the financial report that is free from material misstatement, whether due to fraud or error; and

- To provide us with:
 - Access to all information of which the Trustees are aware that is relevant to the preparation of the financial report such as records, documentation and other matters;
 - Additional information that we may request from the Trustees for the purpose of the audit; and
 - Unrestricted access to persons within the entity from whom we determine it necessary to obtain audit evidence.

As part of our audit process, we will request from Trustees written confirmation concerning representations made to us in connection with the audit.

Australian Auditing Standards require that we determine whether the financial reporting framework applied in the preparation of this special purpose of financial report is acceptable. If we determine the financial reporting framework to be unacceptable, we will not be able to undertake the audit engagement unless the framework is amended and then determined to be acceptable.

If a qualified audit report is to be issued following the completion of our audit, we will advise the details to you in a timely manner and prior to the issue of our report.

Audit of SIS Compliance

For the year ended 30/06/2021, we are required to form an opinion in respect of compliance with certain aspects of SIS. Our report must refer to the following sections and regulations:

Sections: 17A, 35AE, 35B, 35C(2), 52, 62, 65, 66, 67, 67A, 67B, 82-85, 103, 104, 104A, 105, 109, 126K

Regulations: 1.06(9A), 4.09, 4.09A, 5.03, 5.08, 6.17, 7.04, 8.02B, 13.12, 13.13, 13.14, 13.18AA, 13.22C

Report on Significant Matters

Under section 129 of the SISA we are required to report to you in writing if during the course of, or in connection with, our audit, we become aware of any contravention of the Act or Regulations which we believe has occurred, is occurring or may occur.

We are also required to report to the ATO, as regulator, any contravention of the SISA and the SISR, where we believe the contravention may affect the interests of the members of beneficiaries of the fund.

In addition, we are also required under section 130 to report to you if we believe the superannuation fund may be, or may be about to become, in an unsatisfactory financial position. If we are not satisfied with your response as Trustee(s) as to the action taken to rectify the situation or we receive no response, we are obliged to report the matter to the ATO.

A failure on the part of the Trustee to rectify these breaches to the satisfaction of the ATO may result in significant penalties to the Trustee and the fund itself.

In addition to our report on the financial statements, we will also report to you any material weaknesses in the fund's system of accounting and internal control which come to our notice during the course of our audit.

Quality Control

The conduct of our audit in accordance Australian Auditing Standards means that information acquired by us in the course of our audit is subject to strict confidentiality requirements. Information will not be disclosed by us to other parties except as required or allowed for by law or professional standards, or with your expressed consent.

Our audit files may, however, be subject to review as part of the quality control review program of Regulators and or Professional Bodies which monitors compliance with professional standards by its members.

We advise you that by signing this letter you acknowledge that, if requested, our audit files relating to this audit will be made available under this program. Should this occur, we will advise you. The same strict confidentiality requirements apply under this program as apply to us as your auditor.

Independence/Conflict of Interest

We have established policies and procedures designed to ensure our independence, including policies on holding financial interests in the superannuation fund and other related parties, rotation of audit partners, business relationships, employment relationships, and the provision of non-audit services in accordance with professional statement APES 110 – Code of Ethics for Professional Accountants.

Outsourced Services

We do not use any outsourced services in overseas locations when conducting client assignments.

Data Storage

We use data storage located in the office but it may be replicated to other locations.

Accepting our services as part of this engagement agreement indicates your acceptance of the use of outsourced services, cloud hosted software and outsourced data storage under the conditions outlined above.

Limitation of Liability

Our firm's liability to you or any other user of the audit report is limited by a Scheme approved under Professional Standards Legislation.

Other

We would appreciate acknowledgement of terms and conditions set out in this letter. Please note that this letter will be effective for future years unless the terms of the engagement are altered by future correspondence.

Please sign and return the attached copy of this letter to indicate that it is in accordance with your understanding of the arrangements for our audit of the financial report.

If you have any queries in relation to this please contact me.

Yours sincerely

ANTHONY BOYS - REGISTERED COMPANY AUDITOR

To: MR ANTHONY BOYS

I/We hereby confirm your appointment as Auditor under the above terms of engagement.

For and on behalf of the Trustee(s) of the BIRDSVILLE BULLWHIP & SADDLE COMPANY SUPERANNUATION FUND

SIGNED:

John Egan

Bernadette Egan

DATED: 21 / 05 / 2022

Mr Anthony Boys PO Box 3376 Rundle Mall SA 5000

Dear Anthony,

BIRDSVILLE BULLWHIP & SADDLE COMPANY SUPERANNUATION FUND Superannuation Fund Trustee Representation Letter

In connection with your audit examination of the financial report of **BIRDSVILLE BULLWHIP & SADDLE COMPANY SUPERANNUATION FUND** ('the Fund') for the year ended 30/06/2021, we hereby confirm, at your request that to best of our knowledge and belief, the following representation relating to the accounts are correct.

Financial Report

We have fulfilled our responsibilities, as set out in the terms of the audit engagement letter, for the preparation of the financial report.

The Trustees have determined that the Fund is not a reporting entity for the year ended 30/06/2021 and that the requirement to apply Australian Accounting Standards and other mandatory reporting requirements do not apply to the fund. Accordingly, the financial report prepared is a special purpose financial report, which is for distribution to members of the fund and to satisfy the requirement of the SISA and the SISR, and to confirm that the financial report is free of material misstatements, including omissions.

We confirm, to the best of our knowledge and belief, the following representations are made to you during your audit.

Sole Purpose

The fund has been maintained for the sole purpose of providing superannuation benefits to its members and their dependents.

Superannuation Fund Books/Records/Minutes

- (a) We have made available to you all financial records and related data, other information, explanations and assistance necessary for the conduct of the audit.
- (b) We have made available to you Minutes of all Trustee(s)' meetings and the Trust Deed.
- (c) We have established and maintained an adequate internal control structure to facilitate the preparation of reliable financial statements, and adequate financial records have been maintained. There are no material transactions that have not been properly recorded in the accounting records underlying the financial statements.
- (d) We have no plans or intentions that may materially affect the carrying values, or classification, of assets and liabilities.
- (e) Records maintained during the period were in accordance with the Australian Taxation Office requirements.

Asset Form

The assets of the superannuation fund are being held in a form suitable for the benefit of the members of the fund, and have been held in accordance with the fund's investment strategy.

Ownership and Pledging of Assets

The superannuation fund has satisfactory title to all assets disclosed in the Statement of Financial Position. Investments are registered in the name of the Trustee(s).

No assets of the superannuation fund have been pledged to secure liabilities of the superannuation fund or of others.

Investments

- (a) We have considered the requirement of generally accepted accounting standards in regards to impairment of assets when assessing the impairment of assets and in ensuring that no assets are stated in excess of their recoverable amount.
- (b) There are no commitments, fixed or contingent, for the purchase or sale of long-term investments that have not been disclosed in the financial statements.

- (c) The investment strategy has been determined with due regard to risk, return, liquidity, diversity and the insurance needs of fund members, and the assets of the fund are in line with this strategy.
- (d) All investments are acquired, maintained and disposed of on an arm's length basis.

Trust Deed

The superannuation fund is being conducted in accordance with its Trust Deed.

The superannuation fund has satisfactory title to all assets disclosed in the Statement of Financial Position. Investments are registered in the name of the Trustee(s).

No assets of the superannuation fund have been pledged to secure liabilities of the superannuation fund or of others.

Superannuation Industry (Supervision) Act and Regulations

- (a) The fund meets the definition of a self-managed superannuation fund under the SISA.
- (b) The fund has been conducted in accordance with the SISA, the SISR and its governing rules at all times during the year. Also there were no amendments to the governing rules during the year, except as notified to you.
- (c) The fund is being conducted in accordance with the SISA and the SISR, in particular the relevant requirements of the following provisions:
 - Sections: 17A, 35AE, 35B, 35C(2), 62, 65, 66, 67,67A, 67B, 82-85, 103, 104, 104A, 105, 109, 126K Regulations: 1.06(9A), 4.09, 4.09A, 5.03, 5.08, 6.17, 7.04, 8.02B, 13.12, 13.13, 13.14, 13.18AA
- (d) The Trustee(s) have been nominated and may only be removed in such manner and circumstances as are allowed in the Trust Deed.
- (e) The Trustees are not disqualified persons under s126K of the SISA.
- (f) Any vacancy among the Trustee(s) is filled in accordance with the Trust Deed.
- (g) The Trustee(s) have complied with all Trustee standards set out in SISR and the covenant prescribed by section 52 of the SISA.
- (h) The Trustee(s) have complied with all investment standards set out in the SISA and the SISA.
- (i) Information retention obligations have been complied with.
- (j) All contributions accepted and benefits paid have been in accordance with the governing rules of the fund and relevant provisions of the SISA and the SISR.

There are no breaches or possible breaches of the SIS legislation whose effects should be considered for disclosure in the financial report or to the Australian Taxation Office.

Commitments

- (a) There are no material commitments for construction or acquisition of property, plant and equipment to acquire other non-current assets, such as investments or intangibles, other than those disclosed in the financial report.
- (b) There were no commitments for purchase or sale of securities or assets or any options given by the fund including options over share capital.

Taxation

- (a) We have calculated income tax expense, current tax liability, deferred tax liability and deferred tax asset according to the definitions of taxable income and allowable deductions. We have calculated and recognised all other applicable taxes according to the relevant tax legislation.
- (b) There are no activities that invoke the anti-avoidance provisions of any applicable tax legislation.

Borrowings

The Trustees have not borrowed money on behalf of the superannuation fund with the exception of borrowings which were allowable under the SIS Act and the SIS Regulations.

Related Parties

- (a) The fund has not made any loans to, or provided financial assistance to members of the fund or their relatives.
- (b) No asset has been acquired from a member or related party other than as permitted under the SISA and the SISR.

(c) Related party transactions and related amounts receivable or payable have been properly disclosed in the financial statements.

Accounting Misstatement Detected by Audit

There has been no misstatement noted by audit during the course of the current year audit.

Insurance

The superannuation fund has an established procedure whereby an officer reviews at least annually the adequacy of insurance cover on all assets and insurable risks where relevant. This review has been performed and where it is considered appropriate, assets and insurable risks of the superannuation fund are adequately covered by insurance.

Accounting Estimates

We confirm the significant assumptions used in making accounting estimates are reasonable.

Fair Value Measurements and Disclosures

We confirm that significant assumptions used in fair value measurements and disclosures are reasonable and appropriately reflect our intent and ability to carry out specific courses of action on behalf of the fund.

Going Concern

In the opinion of the Trustees there are reasonable grounds to believe that the superannuation fund will be able to:

- Pay its debts as and when they fall due.
- Continue as a going concern for the foreseeable future.

We, therefore, confirm that the going concern basis is appropriate for the financial report.

Events after Balance Sheet Date

We are not aware of any events that have occurred between the financial reporting date to the date of this letter that we need to disclose or recognise in the financial report.

Comparative Information

We confirm that there have been no restatements made to correct a material misstatement in the prior period financial report that affects the comparative information.

Fraud and Error

- (a) There has been no:
 - (i) Fraud, error, or non-compliance with laws and regulations involving management or employees who have a significant role in the internal control structure.
 - (ii) Fraud, error, or non-compliance with laws and regulations that could have a material effect on the financial report.
 - (iii) Communication from regulatory agencies concerning non-compliance with, or deficiencies in, financial reporting practices that could have a material effect on the financial report.
- (b) The superannuation fund has disclosed to the auditor all significant facts relating to any frauds or suspected frauds known to management that may have affected the superannuation fund.
- (c) The superannuation fund has disclosed to the auditor the results of its assessment of the risk that the financial report may be materially misstated as a result of fraud.

Legal Matters

We confirm that all matters that may result in legal action against the fund or the Trustees in respect of the fund, have been discussed with a solicitor and brought to the attention of the auditor so that a solicitor's representation letter may be obtained.

General

- (a) Neither the superannuation fund nor any Trustees have any plans or intentions that may materially affect the book value or classification of assets and liabilities at balance sheet date.
- (b) The superannuation fund accepts responsibility for the implementation and operations of accounting and internal control systems that are designed to prevent and detect fraud and error. We have established and maintained adequate internal control to facilitate the preparation of a reliable financial report, and adequate financial records have been maintained. There are no material transactions that have not been properly recorded in the accounting records underlying the financial report.

- (c) There are no violations or possible violations of laws or regulations whose effects should be considered for disclosure in the financial report or as a basis for recording an expense.
- (d) The superannuation fund has complied with all aspects of contractual agreements that would have a material effect on the financial report in the event of non-compliance.

We understand that your examination was made in accordance with the Australian Auditing Standards and was, therefore, designed primarily for the purpose of expressing an opinion on the financial report of the fund taken as a whole, and that your tests of the financial records and other auditing procedures were limited to those which you considered necessary for that purpose.

Additional Matters

There are no additional matters.

Signed by the Trustee(s) of the BIRDSVILLE BULLWHIP & SADDLE COMPANY SUPERANNUATION FUND

John Egan

Trustee

Bernadette Egan

Trustee

Self-managed superannuation fund annual return 2021

To complete this annual return

■ Print clearly, using a BLACK pen only.

	s annual return. All other funds must complete the Fund come 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 detail 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
S	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. You the chance of delay or error in processing your annual.	ou are not obliged to quote your TFN but not quoting it could increase al return. See the Privacy note in the Declaration.
2	Name of self-managed superannuation fund (S	SMSF)
BI	IRDSVILLE BULLWHIP & SADDLE COMPANY SUPE	RANNUATION FUND
_		
3	Australian business number (ABN) (if applicable)	13208340129
4	Current postal address	
P	O Box 24	
Suk	burb/town	State/territory Postcode
CI	leveland	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	F? B No X Yes

Who should complete this annual return?

Only self-managed superannuation funds (SMSFs) can complete

	Tax File Number Provided
	SF auditor
Auditor's	
Title: Mr	
Family nam	le ·
Boys First given	name Other given names
Anthony	
	Iditor Number Auditor's phone number
100014	
Postal ad	
PO Box	
FO BOX	3370
Suburb/tov	
Rundle	
Date aud	it was completed A 09 / 05 / 2022
Was Part	A of the audit report qualified? B No X Yes
	B of the audit report qualified? C No X Yes
	of the audit report was qualified, reported issues been rectified? D No Yes
	ctronic funds transfer (EFT) need your self-managed super fund's financial institution details to pay any super payments and tax refunds owing to you.
Α	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 014272 Fund account number 354909991
	Fund account name
	BIRDSVILLE BULLWHIP AND SADDLE COMPANY SUPER FUND
	I would like my tax refunds made to this account. X Go to C.
В	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 name
С	Electronic service address alias
	Provide the electronic service address alias (ESA) issued by your SMSF messaging provider.
	(For example, SMSFdataESAAlias). See instructions for more information.
	AUSPOSTSMSF

	Tax File Number Provided
8	Status of SMSF Australian superannuation fund A No Yes X Does the fund trust deed allow acceptance of the Government's Super Co-contribution and Low Income Super Amounts? C No Yes X Fund benefit structure B A Code
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 Go to Section B: Income.
	Yes X Exempt current pension income amount A \$ 26,053
	Which method did you use to calculate your exempt current pension income?
	Segregated assets method B
	Unsegregated assets method C X) Was an actuarial certificate obtained? D Yes X
	Did the fund have any other income that was assessable?
	E Yes X) 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.

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Section	\square .	Inco	ma
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Occion D. Income				
Do not complete this section if all superann the retirement phase for the entire year, there notional gain. If you are entitled to claim any t	e was no other incom	e that was ass	essable, and you have not realise	ed a deferred
11 Income Did you have a capital gains tax (CGT) event during the year?	No Yes X	\$10,000 or you 2017 and the c	tal loss or total capital gain is great a elected to use the transitional CG deferred notional gain has been rea attach a <i>Capital gains tax (CGT)</i> so	aT relief in alised,
Have you applied an exemption or rollover?	No X Yes	Code		
	Net capital gain	A \$		
Gross rent and other leasi	ng and hiring income	в\$	23,146	
	Gross interest	c \$	101	
Forestry	managed investment scheme income	x \$		
Gross foreign income				Loss
D1 \$	Net foreign income	D \$		
Australian franking credits from a Ne	ew Zealand company	E \$		
	Transfers from foreign funds	F \$		Number 0
Gr	oss payments where ABN not quoted	н \$		
Calculation of assessable contributions Assessable employer contributions	Gross distribution	I \$		Loss
R1 \$ 23,000	from partnerships *Unfranked dividend	J \$	992	
plus Assessable personal contributions	amount *Franked dividend			
R2 \$ 25,000 plus **No-TFN-quoted contributions	amount	K \$	5,208	
R3 \$ 0	*Dividend franking credit	L \$	2,232	Code
(an amount must be included even if it is zero) less Transfer of liability to life insurance	*Gross trust distributions	M \$		
company or PST	Assessable			7
R6 \$	contributions (R1 plus R2 plus R3 less R6)	R \$	48,000	
Calculation of non-arm's length income			i	Cada
*Net non-arm's length private company dividends	*Other income	s \$		Code
U1 \$	*Assessable income due to changed tax	т \$		
U2 \$	status of fund	ι φ[_
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 (Sum of labels A to U)	w \$	79,679	Loss
*If an amount is entered at this label, Exempt cur	rent pension income	Y \$	26,053	
check the instructions to ensure the correct TOTAL AS	SESSABLE V \$		53,626	Loss
tax treatment has been applied.	ſΕ (W less Y) V ⊅ L		53,020	

Tax File Number Provided	
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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 \$ 1,173	B D2 \$ 5,431
Decline in value of depreciating assets	E1 \$ 1,828	8 E2 \$ 8,467
Insurance premiums – members	F1 \$	F2 \$
SMSF auditor fee	H1 \$ 407	H2 \$ 197
Investment expenses	I1 \$ 1,911	12 \$ 8,851
Management and administration expenses	J1 \$ 2,047	J2 \$ 869
Forestry managed investment scheme expense	U1 \$	U2 \$ Code Code
Other amounts	L1 \$] L2 \$ 3,012 O
Tax losses deducted	M1 \$]
	TOTAL DEDUCTIONS	TOTAL NON-DEDUCTIBLE EXPENSES
	N \$ 7,366	
	(Total A1 to M1)	(Total A2 to L2)
	*TAXABLE INCOME OR LOSS	Loss TOTAL SMSF EXPENSES
	O \$ 46,260	
*This is a mandatory	(TOTAL ASSESSABLE INCOME less	(N plus Y)

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Section D: Income tax calculation statement

#Important:

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

	have specified a zero amo	unt.		
	Ilculation statement	#Taxable income	e A \$	46,260
Please refer to the			• 1	(an amount must be included even if it is zero)
	anaged superannuation nnual return instructions	#Tax on taxable	e T1 \$	6,939.00
	on how to complete the	income	₽ '	(an amount must be included even if it is zero)
calcula	ition statement.	#Tax or no-TFN-quoted		0.00
		contributions	s • • •	(an amount must be included even if it is zero)
		Gross tax	х В\$	6,939.00
			*	(T1 plus J)
	Foreign income tax offset			
C1\$				
	Rebates and tax offsets		Non-re	efundable non-carry forward tax offsets
C2 \$			C \$	
'			'	(C1 plus C2)
			SUBT	OTAL 1
			T2 \$	6,939.00
			+	(B less C – cannot be less than zero)
	Early stage venture capital	limited		,
	partnership tax offset			
D1 \$		0.00		
	Early stage venture capital			
	tax offset carried forward f			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	SUBT	OTAL 2
	carried forward from previo			
D4 \$		0.00	T3 \$,
		_		(T2 less D – cannot be less than zero)
	Complying fund's franking	credits tax offset		
E1\$		2,232.06		
	No-TFN tax offset			
E2 \$				
,	National rental affordability s	cheme tax offset		
E3 \$				
'	Exploration credit tax offset		Refund	dable tax offsets
E4 \$		0.00	E\$	2,232.06
'			!	(E1 plus E2 plus E3 plus E4)
		#TAX PAYABLE	= T5 \$	4,706.94
				(T3 less E – cannot be less than zero)
				n 102AAM interest charge
			G \$	

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	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 quoted (non-individual)			
H3 \$	465.00			
σφ	Credit for TFN amounts withheld from			
4	payments from closely held trusts			
H5\$	0.00			
H6 \$	Credit for interest on no-TFN tax offset			
поф	Credit for foreign resident capital gains			
	withholding amounts	_	le credits	
H8 \$	0.00	Н\$		
			(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)	
		PAYG	instalments raised	
		K \$	753.00	
		Super	rvisory levy	
		L\$	259.00	
		Super	visory levy adjustment for wound up funds	
		М\$		
			visory levy adjustment for new funds	
		N \$		
	AMOUNT DUE OF REFUNDABLE	,		
	AMOUNT DUE OR REFUNDABLE A positive amount at S is what you owe,		3,747.94	
	while a negative amount is refundable to you.		(T5 plus G less H less I less K plus L less M plus N)	
#This is	a mandatory label.			
11113 1	, a mandatory labor.			
Sect	ion E: Losses			
4 Lo	sses Ta		s carried forward U \$	
() If t	otal loss is greater than \$100,000	to la	ater income years 0 5	
CC	molete and attach a Lesses		ital losses carried ter income years V \$	10,504

			Tax File N	umber Provided	
Section F: Member inform	nation				
MEMBER 1					
Title: Mr X Mrs Miss Ms Other					
Family name					
Egan	Othor a	luan namaa			
John		trong			
	Armst	uong			
Member's TFN See the Privacy note in the Declaration.	rided		Date of birth	Provide	ed .
Contributions OPENING AG	CCOUNT BALAN	ICE \$		520,362.83	
Refer to instructions for completing thes	se labels.	Proceeds	from primary residen	ice disposal	
Employer contributions		Receipt da	ate _{Day} Monti	th Year	
A \$		H1	Day Monti	1 / Fear	
ABN of principal employer			e foreign superannua	ition fund amount	
A1		ı s⊏			
Personal contributions		Non-asses		annuation fund amour	nt
В \$	25,000.00	J \$□			
CGT small business retirement exemp	otion	Transfer fro	om reserve: assessa	ble amount	
C \$		K \$			
CGT small business 15-year exemption	on amount	Transfer from	om reserve: non-ass	essable amount	
D \$		L \$			
Personal injury election			ons from non-comply		
E \$		and previo	ously non-complying	tunas	
Spouse and child contributions		· <u> </u>	contributions		
F \$ L		(including	Super Co-contribution	ons and	
Other third party contributions G \$		M \$	ne Super Amounts)		
4		ω Ψ_			
TOTAL CONTRIBUT	· L		25,000	0.00	
	(S	um of labels A to	M)		
Other transactions	Allocated earn	ings os		20.440.07	Loss
	or los	sses U a L		32,448.67	
Accumulation phase account balance		vard and P \$			
S1 \$ 22,397	trans				
	— Outv	vard			
Retirement phase account balance – Non CDBIS	rollovers trans				
S2 \$ 542,404	Lump S	Sum R1 \$			Code
	payme	ents niaL			
Retirement phase account balance – CDBIS	Inco	ome . –			Code
S3 \$	0.00 stre	eam R2 \$		13,010.00	M
	payme	7116			
0 TRIS Count CLOSING A	CCOUNT BALA	NCE & & C		564,801.50	
OLOGINA A	OOOONI BALA	οL 3 Ψ_	(S1 plus S2 plus		
			(JI plus JZ plus	.]
Accui	mulation phase v	alue X1 \$			
Re	tirement phase v	alue X2 \$ _			
Outstan	ding limited reco	urse Y \$			
•	arrangement am	ount · L			
Page 8	FFICIAL: Sens	sitive (when d	:ompleted)		

	Tax File Number	Provided
MEMBER 2		
Title: Mr Mrs X Miss Ms Other Family name		
Egan		
First given name	Other given names	
Bernadette	Eileen	
Member's TFN See the Privacy note in the Declaration Provided	Date of birth	Provided
See the Privacy note in the Declaration.	Bute of birth	1 Tovided
Contributions OPENING ACCO	UNT BALANCE \$ 8	3,540.78
Refer to instructions for completing these lab	pels. Proceeds from primary residence disposal	\neg
Employer contributions	Receipt date Day Month Year	
A \$ 23,000.00	¬	
ABN of principal employer	Assessable foreign superannuation fund amour	nt
A1 [I \$	
Personal contributions B \$	Non-assessable foreign superannuation fund a	amount
CGT small business retirement exemption	J \$ Transfer from reserve: assessable amount	
C \$	K \$	\neg
CGT small business 15-year exemption amount	Transfer from reserve: non-assessable amount	t
D \$	L \$	
Personal injury election E \$	Contributions from non-complying funds and previously non-complying funds	
Spouse and child contributions	T \$	\neg
F \$	Any other contributions	—
Other third party contributions	(including Super Co-contributions and Low Income Super Amounts)	<u></u>
G \$	M \$	
TOTAL CONTRIBUTIONS N	\$ 23,000.00 (Sum of labels A to M)	
Other transactions All		Loss
Other transactions	ocated earnings or losses	3,153.04
Accumulation phase account balance	Inward rollovers and P \$	
S1 \$ 109,693.82	transfers	
Retirement phase account balance	Outward rollovers and Q \$	
– Non CDBIS	transfers	Code
S2 \$ 0.00	Lump Sum payments R1 \$	
Retirement phase account balance		Code
- CDBIS 0.00	Income stream R2 \$	
S3 \$	payments	
0 TRIS Count CLOSING ACCO	DUNT BALANCE S \$ 10	9,693.82
	(S1 plus S2 plus S3)	
Accumula	tion phase value X1 \$	
Retirem	nent phase value X2 \$	

Outstanding limited recourse borrowing arrangement amount **OFFICIAL: Sensitive** (when completed)

Y \$

			Tax File Number Provided
Section H: Assets and lial	oilities		
5a Australian managed investments	Listed trusts	A \$[2,620
	Unlisted trusts	в\$[
	Insurance policy	c \$[
	Other managed investments	,	
5b Australian direct investments	Cash and term deposits	E \$[2,241
Limited recourse borrowing arrange	ments Debt securities	F \$	
Australian residential real property J1 \$	Loans	G \$	
Australian non-residential real property J2 \$			159,727
Overseas real property	Unlisted shares	I \$[
J3 \$ Australian shares	Limited recourse borrowing arrangements	J \$[0
J4 \$	Non-residential	K \$	
Overseas shares	Desidential		
J5 \$	real property	L \$	512,312
Other J6 \$	Collectables and personal use assets	М \$	
Property count	Other assets	o \$[2,223
5c Other investments	Crypto-Currency	N ¢	
Out of investments		Ψ.	
5d Overseas direct investments	Overseas shares	P \$	
Overse	eas non-residential real property	Q \$[
0	verseas residential real property	R \$[
	Overseas managed investments	s \$[
	Other overseas assets	T \$[
	AN AND OVERSEAS ASSETS of labels A to T)	U \$[679,123
5e In-house assets Did the fund have a loan to, lea or investment in, related p (known as in-house a at the end of the income	parties A NO A res/ ssets)	\$[

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

				T	ax 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 B No	Yes Yes				
16	LIABILITIES						
	Borrowings for limited recourse borrowing arrangements V1 \$ Permissible temporary borrowings V2 \$ Other borrowings						
	V3 \$	Boi	rowings	v \$[
	Total member clos (total of all CLOSING ACCOUNT BALANCE s fr	om Sections I Reserve a	and G)	w \$[x \$[y \$[674,495 4,628	
	ction I: Taxation of financia Taxation of financial arrangements (TOF	ıl arranç	gemen			679,123	
17	Taxation of financial arrangements (FOr	Total TOFA	gains H 🤄	s —			
		Total TOFA lo					
 Se	ction J: Other information						
Fam	ily trust election status If the trust or fund has made, or is making, a fam specified of the election (for ex	,	,	,	, ,	A	
	If revoking or varying a family trust and complete and attach the <i>l</i>					3 🗌	
Inte	rposed entity election status If the trust or fund has an existing election, or fund is making one or more elect specified and complete an Interposed e	write the earlie	est income y write the ea	ear spec	cified. If the trust come year being		
					R, and complete evocation 2021.		

OFFICIAL: Sensitive (when completed)

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 objector or public office	er's signature	21 / 05 / 2022
		Day Month Year
7		
Preferred trustee or director contact	details:	
Title: Mr X Mrs Miss Ms Othe	ər	
Family name		
Egan		
First given name	Other given names	
John	Armstrong	
Phone number 07 3286 1322		
Phone number 07 3286 1322 Email address		
Non-individual trustee name (if applicable)		
The intervious is detected in the first deposition		
ABN of non-individual trustee		
Time taken take		
Time taken to p	orepare and complete this annual retur	m Hrs
The Commissioner of Taxation, as Registri provide on this annual return to maintain t		nay use the ABN and business details which you formation, refer to the instructions.
TAX AGENT'S DECLARATION: I declare that the Self-managed superannuation is a superannuation of the self-managed superannuation is a superannuation of the self-managed superannuation of the se		
provided by the trustees, that the trustees ha correct, and that the trustees have authorised		the information provided to me is true and
Tax agent's signature	<u> </u>	
		Day Month Year
		Date / / / /
Tax agent's contact details		
Title: Mr Mrs X Miss Ms Othe	er	
Family name		
Sherman		
First given name	Other given names	
Shona	Lorraine	
Tax agent's practice		
HFB Super Pty Ltd		
Tax agent's phone number	Reference number	Tax agent number
07 3286 1322	EGAJ	24805931

Capital gains tax (CGT) schedule

2021

When completing this form ■ Print clearly, using a black or dark blue pen only. ■ Use BLOCK LETTERS and print one character in each box. ■ M / T # S T		 Use in conjunction with company, trust, fund income tax return or the self-managed superannuation fund annual return. Refer to the <i>Guide to capital gains tax 2021</i> available on our website at ato.gov.au for instructions on how to complete this schedule. 				
Tax file number (TFN		Provided v to request your TFN. You do not h		vo. w TEN		
		ould increase the chance of delay o			rm.	
Australian business	num	nber (ABN) 13208340129				
Taxpayer's name						
BIRDSVILLE BULLV	VHIP	& SADDLE COMPANY SUPE	RANNUATI	ON FUND		
1 Current year ca	pital (gains and capital losses				
Shares in companies		Capital gain	4 274	K &	Capital loss	0.400
listed on an Australian securities exchange	A \$	<u> </u>	4,371	K \$		9,488
Other shares	В\$;		L \$		
Units in unit trusts listed on an Australian securities exchange		3		М\$		
Other units	D \$	3		N \$		
Real estate situated in Australia		3		o \$		
Other real estate	F \$;		P \$		
Amount of capital gains from a trust (including a managed fund)	G \$	3				
Collectables	Н\$;		Q \$		
Other CGT assets and any other CGT events	ı \$; <u> </u>		R \$		
Amount of capital gain previously deferred under transitional CGT relief for superannuation funds	·	3	0		nounts at labels K to R and v item 2 label A – Total currer ses .	
Total current year capital gains	J \$	3	4,371			

			Т	ax File Number Provided
2	Capital losses			
	Total current year capital losses	A	\$	9,488
	Total current year capital losses applied	В	\$	4,371
	Total prior year net capital losses applied	С	\$	
	Total capital losses transferred in applied (only for transfers involving a foreign bank branch or permanent establishment of a foreign financial entity)	D	\$	
	Total capital losses applied	E	\$	4,371
		Ac	dd	amounts at B, C and D.
3	Unapplied net capital losses carried forward			
	Net capital losses from collectables carried forward to later income years	A	\$	
	Other net capital losses carried forward to later income years	В	\$	10,504
		to	lat	amounts at A and B and transfer the total bel V – Net capital losses carried forward ter income years on your tax return.
4	CGT discount			
	Total CGT discount applied	A	\$	
5	CGT concessions for small business			
	Small business active asset reduction	A	\$	
	Small business retirement exemption	В	\$	
	Small business rollover	С	\$	
	Total small business concessions applied	D	\$	
6	Net capital gain			
-	Net capital gain	A	\$	
	Net suprial gain	1J ze	l le	ss 2E less 4A less 5D (cannot be less than . Transfer the amount at A to label A – Net tal gain on your tax return.

		Tax File Number	Provided
7	Earnout arrangements		
	Are you a party to an earnout arrangement? A Yes, as a buyer (Print $\overline{\mathcal{X}}$ in the appropriate box.)	Yes, as a seller	No 🗌
	If you are a party to more than one earnout arrangement, copy ar details requested here for each additional earnout arrangement.	nd attach a separate sheet to th	nis schedule providing the
	How many years does the earnout arrangement run for?	В	
	What year of that arrangement are you in?	c	
	If you are the seller, what is the total estimated capital proceeds from the earnout arrangement?		
	Amount of any capital gain or loss you made under your non-qualifying arrangement in the income year.		/ [1088
	Request for amendment If you received or provided a financial benefit under a look-through ear to seek an amendment to that earlier income year, complete the follow		ncome year and you wish
	Income year earnout right created	F	
	Amended net capital gain or capital losses carried forward	G \$	Loss /
8	Other CGT information required (if applicable)		CODE
	Small business 15 year exemption – exempt capital gains	A \$	/
	Capital gains disregarded by a foreign resident	В\$	
	Capital gains disregarded as a result of a scrip for scrip rollover	C \$	
	Capital gains disregarded as a result of an inter-company asset rollover	D\$	
	Capital gains disregarded by a demerging entity	E \$	

Tax File Number	Provided

Taxpayer's declaration

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

Important

Before making this declaration check to ensure that all the information required has been provided on this form and any attachments to this form, and that the information provided is true and correct in every detail. If you are in doubt about any aspect of the tax return, place all the facts before the ATO. The income tax law imposes heavy penalties for false or misleading statements.

Privacy

Taxation law authorises the ATO to collect information and disclose it to other government agencies. This includes personal

illiornation of the person authorised to sign the declaration. For illiornation about your	privacy go to ato.gov.au/privacy
I declare that the information on this form is true and correct.	
Signature	
Je Z	Date 21 / 05 / 2022 Day / Month / Year
Contact name	
John Armstrong Egan	
Daytime contact number (include area code)	
07 3286 1322	

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 BIRDSVILLE BULLWHIP & SADDLE COMPANY SUPERANNUATION FUND Australian business number 13208340129 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 5,117 2019-20 3,413 2018-19 **J** 1,974 2017-18 **K** 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)

10,504

Tax File Number Provided

P	art B – Ownership and b	ousiness continuity	/ t	est - company and listed widely held trust only
s	atis ied in relation to that loss. o not complete items 1 or 2 of Part B if, in	the 2020–21 income year, no los	ss ha	
а	gainst a net capital gain or, in the case of c	ompanies, losses have not been	trar	sferred in or out.
1	Whether continuity of majority ownership test passed	Year of loss	_	Yes No
	Note: If the entity has deducted, applied, transferred in or transferred out (as applicable)	2020–21 2019–20	_	
	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	2018–19	С	Yes No
	respect of that loss.	2017–18	D	Yes No
		2016–17	E	Yes No
		2015–16 and earlier income years	F	Yes No
2	Amount of losses deducted/applied for		orit	y ownership test is not passed but the
	business continuity test is satisfied -	excludes film losses	_	
		Tax losses	G	
		Net capital losses	Н	
3	Losses carried forward for which the applied in later years – excludes film losses		t be	satisfied before they can be deducted/
		Tax losses	1	
		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 - o	ompany only		
	Note: These questions relate to the operation of	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?		L	Yes No
	If you printed X in the No box at L , do not complete	lete M, N or O.		
	At the changeover time did the company satis net asset value test under section 152-15 of IT	=	M	Yes No
	If you printed ${\bf X}$ in the ${\bf No}$ box at ${\bf M}$, has the colit 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	

	Tax 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	E		
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)			
Total tax losses carried forward to later income years	J		
Transfer the amount at .I to the Tay losses carried for	rwan	d to later income ve	ars label on your tax return

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	
Je Z	21 / 05 / 2022 Day Month Year
	Date / /
Contact person	Daytime contact number (include area code)
John Armstrong Egan	07 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.

Privacy

The ATO is authorised by the Taxation Administration Act 1953 to request the provision of tax file numbers (TFNs). The ATO will use the TFNs to identify each partner or beneficiary or entity in our records. It is not an offence not to provide the TFNs. However, you cannot lodge your tax return electronically if you do not quote your TFN.

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

The Australian Business Register

The Commissioner of Taxation, as Registrar of the Australian Business Register, may use the ABN and business details which you provide on this tax return to maintain the integrity of the register.

Please refer to the privacy statement on the Australian Business Register (ABR) website (www.abr.gov.au) for further information - it outlines our commitment to safeguarding your details.

Electronic funds transfer - direct debit

Where you have requested an EFT direct debit some of your details will be provided to your financial institution and the Tax Office's sponsor bank to facilitate the payment of your taxation liability from your nominated account.

Tax File Number	Name of Fund	Year
Provided	BIRDSVILLE BULLWHIP & SADDLE COMPANY SUPERANNUATION FUND	2021

I authorise my tax agent to electronically transmit this tax return via an approved ATO electronic channel.

Important

Before making this declaration please check to ensure that all income has been disclosed and the tax return is true and correct in every detail. If you are in doubt about any aspect of the tax return, place all the facts before the Tax Office. The tax law provides heavy penalties for false or misleading statements on tax returns.

Declaration: I declare that:

- All the information provided to the agent for the preparation of this tax return, including any applicable schedules is true and correct; and
- I authorise the agent to lodge this tax return.

Signature of Partner, Trustee, or Director



Date

21 / 05 / 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	BIRDSVILLE BULLWHIP AND SADDLE COMPANY SUPER FUND						
Account Number	014272 354909991 Client		Reference EGAJ				
I authorise the refund to be deposited directly to the specified account							
Signature				Date	/	/	

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	EGAJ	
Agent's Phone Num	ber 07 3286 1322	T	ax Agent Number	24805931	

BIRDSVILLE BULLWHIP & SADDLE COMPANY SUPERANNUATION FUND

Trustees Declaration

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

The trustees declare that:

- (i) the financial statements and notes to the financial statements for the year ended 30 June 2021 present fairly, in all material respects, the financial position of the superannuation fund at 30 June 2021 and the results of its operations for the year ended on that date in accordance with the accounting policies described in Note 1 to the financial statements;
- (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 Superannuation Industry (Supervision) Act 1993 and associated Regulations during the year ended 30 June 2021.

Signed in accordance with a resolution of the trustees by:

Jez
John Egan
Trustee R. L. Gaw
Bernadette Egan
Trustee
21 / 05 / 2022

Dated this day of

BIRDSVILLE BULLWHIP & SADDLE COMPANY SUPERANNUATION FUND Contributions Summary Report

For The Period 01 July 2020 - 30 June 2021

Bernadette Egan

Date of Birth: Provided
Age: 64 (at year end)
Member Code: EGABER00001A
Total Super Balance*1 as at 30/06/2020: 83,540.78

Contributions Summary Concessional Contribution	2021	2020
Concoolinate Contribution		
Employer	23,000.00	2,500.00
Personal - Concessional	0.00	10,000.00
	23,000.00	12,500.00
Total Contributions	23,000.00	12,500.00

I, BERNADETTE EGAN, confirm that the amounts reported above are the total contributions deposited to the fund with respect of my member balance for the period 01/07/2020 to 30/06/2021.

BERNADETTE EGAN

^{*1} TSB can include information external to current fund's transaction records. The amount is per individual across all funds.

BIRDSVILLE BULLWHIP & SADDLE COMPANY SUPERANNUATION FUND

Contributions Summary Report

For The Period 01 July 2020 - 30 June 2021

John Egan

Date of Birth: Provided
Age: 67 (at year end)
Member Code: EGAJOH00002A
Total Super Balance*1 as at 30/06/2020: 520,362.83

Contributions Summary Concessional Contribution	2021	2020
Personal - Concessional	25,000.00	0.00
Employer	0.00	25,000.00
	25,000.00	25,000.00
Total Contributions	25,000.00	25,000.00

I, JOHN EGAN, confirm that the amounts reported above are the total contributions deposited to the fund with respect of my member balance for the period 01/07/2020 to 30/06/2021.

JOHN EGAN

^{*1} TSB can include information external to current fund's transaction records. The amount is per individual across all funds.

PENSION APPLICATION FORM

1. MEMBER DETAILS				
Write the full name that you wish to appear on your statements and other correspondence that we send you.				
Title:	Mr X Mrs □ Miss □ Ms □ Other			
Surname:	Egan			
Given Name(s):	John			
Date of Birth:	24/07/1953	Gender: Male X	Female \Box	
Mailing Address:	29 Kaija Street MT GRAVATT EAST QLD 4122			
2. TAX FILE N	UMBER (TFN) DETAILS			
TFN, your pre-retireme	quired to provide us with your TFN. However, if yent contributions and pension payments may be taxed will not be able to accept any pre-retirement not	ed at the top margina	al tax rate plus	
TFN:	475 559 760			
3. NON-COMM	IUTABLE PENSION			
Do you wish this account to be a non-commutable pension? (Refer to the Product Disclosure Statement for information about non-commutable pensions.) Yes X No				
4. BENEFICIAI	RY NOMINATION			
in the event of your de	or more beneficiaries to receive the benefit from yath, provided you have nominated a dependant as isclosure Statement for more information.			
Do you wish to non ☐ No – go to section X Yes – complete the				
Note: You cannot no	Do you wish to nominate a reversionary beneficiary? Note: You cannot nominate a reversionary beneficiary once your pension has commenced. For more information about reversionary beneficiaries, including who can nominate, refer to the			

Product Disclosure Statement.

Important information about making a reversionary beneficiary nomination:

- The longer of you or your reversionary beneficiary's life expectancies will be used to calculate the deductible amount for the purposes of assessing your eligibility for Social Security benefits.
- You may **only** nominate a **tax dependant** as your reversionary beneficiary. Please see the Product Disclosure for more information or speak to your financial adviser.
- At the date of your death, the person you select must meet the description you have specified below. For example, your spouse must still be your spouse at the date of your death. Unless your nominated beneficiary meets that description, we will not automatically pay a benefit to them even if they qualify on another ground, for example, as being a financial dependant.
- There may be tax implications and estate planning implications involved in nominating eligible dependants. <u>PLEASE SPEAK TO YOUR FINANCIAL ADVISER AND LEGAL</u> <u>ADVISER</u> before completing section 5.

	ADVISER before completing section 5.
•	Refer to 'what happens on death?' in Part 1 of the Product Disclosure Statement for more information.
	No – Consider completing a Binding Death Nomination form <u>AFTER CONSULTATION WITH</u> <u>YOUR LEGAL ADVISER</u> then go to section 6
X	Yes – please complete section 5.
5.	REVERSIONARY BENEFICIARY DETAILS

5. REVERSIONARY BENEFICIARY DETAILS				
Title: Mr Mrs X Miss Other				
Surname:	Egan			
Given Name(s):	Bernadette			
Date of Birth:	28/06/1957	Gender: Male \square Female X		
Relationship to Self:	Spouse X Child ☐ (including de facto)	Financial Dependant Interdependant		
Mailing Address:	29 Kaija Street	Share of Benefit 1 0 0 . 0 0 %		

MT GRAVATT EAST QLD 4122

6. PENSION PAYMENT DETAILS

6a. STANDARD PENSION

If you commence your pension in the middle of a financial year (between 1 July and 30 June), your annual pension amount will be pro-rated. Income will be adjusted to remain within Government limits. Refer to the Product Disclosure Statement for details about pension payments. We recommend you discuss the amount with your financial adviser.

Complete this question if you ticked 'No' in response to the question in section 3 .			
How much income do you wish to receive from your pension per payment?			
 ☐ The minimum amount X The amount nominated by me: \$To be advised Please specify the amount per payment - This must be at least the minimum amount. 			
Go to section 6c.			
6b. NON-COMMUTABLE PENSION			
Complete this question if you ticked 'Yes' in response to the question in section 3 .			
How much income do you wish to receive from your pension per payment?			
☐ The minimum amount ☐ The maximum amount			
An amount (between the minimum and maximum amounts) nominated by me below:			
\$ (please specify the amount per payment)			
6c. PENSION PAYMENT DATE AND FREQUENCY			
How often do you wish to receive your pension payments?			
☐ monthly☐ quarterly (every 3 months)☐ half yearly (every 6 months)☐ annually (every 12 months)			
When would you like to start receiving your pension payments?///			
7. MEMBER DECLARATION AND SIGNATURE			
Members Signature:Dated: 01/07/2020			
Print Member Name: John Egan			
Capacity: X Member			

John Egan BIRDSVILLE BULLWHIP & SADDLE COMPANY SUPERANNUATION FUND 29 Kaija Street, Mt Gravatt East, Queensland 4122

Dear Sir/Madam

BIRDSVILLE BULLWHIP & SADDLE COMPANY SUPERANNUATION FUND Commencement of Account Based Pension

I hereby request the trustee to commence a Account Based Pension with a commencement date of 01/07/2020 with \$520,362.83 of the superannuation benefits standing to my member's account in the fund. It is confirmed that the pension balance will automatically revert to Bernadette Egan upon the death of the member.

This balance contains:

a Taxable Balance of: \$505,730.94; and a Tax Free Balance of: \$14,631.89.

Tax Free proportion: 2.81%.

I have reached my preservation age and have currently satisfied a condition of release under the SIS Act.

I agree to withdraw at least my minimum pension of at least \$13,010.00 and will not exceed my maximum allowable threshold for the current period.

If you have any queries with regard to the above, please do not hesitate to contact me.

Yours sincerely

John Egan

29 Kaija Street, Mt Gravatt East, Queensland 4122

BIRDSVILLE BULLWHIP & SADDLE COMPANY SUPERANNUATION FUND Minutes of a Meeting of the Trustee(s) held on 02 January 2019 at 29 Kaija Street, Mount Gravatt East, Queensland 4122

PRESENT:	John Egan and Bernadette Egan
PENSION COMMENCEMENT:	John Egan wishes to commence a new Account Based Pension with a commencement date of 01/07/2020. The Pension Account Balance used to support this pension will be \$520,362.83, consisting of: - Taxable amount of \$505,730.94; and - Tax Free amount of \$14,631.89
	- Tax Free proportion: 2.81%.
CONDITION OF RELEASE:	It was resolved that the member has satisfied the condition of release of retirement and was entitled to access their benefits on their Account Based Pension.
TRUSTEE ACKNOWLEDGEMENT:	 It was resolved that Trustee(s) have agreed to this and has taken action to ensure the following: The member's minimum pension payments are to be made at least annually An amount or percentage of the pension will not be prescribed as being left-over when the pension ceases The pension can be transferred only on the death of the pensioner to their beneficiary(s). The Trustee(s) will comply with ATO obligations such as PAYG withholding and payment summary obligations The fund's trust deed provides for payment of this pension to the member The Trustee(s) will notify the member, in writing, of their pension amount and assessable amount each year
REVERSIONARY:	It is confirmed that the pension balance will automatically revert to Bernadette Ega upon the death of the member.
PAYMENT:	It was resolved that the trustees have agreed to pay the pension payment for the current year of at least \$13,010.00 in the frequency of at least an annual payment.
CLOSURE:	Signed by the trustee(s) pursuant to the Fund Deed.

John Egan Chairperson

BIRDSVILLE BULLWHIP & SADDLE COMPANY SUPERANNUATION FUND John Egan 29 Kaija Street, Mt Gravatt East, Queensland 4122

Dear Sir/Madam

BIRDSVILLE BULLWHIP & SADDLE COMPANY SUPERANNUATION FUND Commencement of Account Based Pension

John Egan and Bernadette Egan as trustee for BIRDSVILLE BULLWHIP & SADDLE COMPANY SUPERANNUATION FUND acknowledges that John Egan has advised their intention to commence a new Account Based Pension on 01/07/2020. It is confirmed that the pension balance will automatically revert to Bernadette Egan upon the death of the member.

The Trustee(s) has agreed to this and has taken action to ensure the following:

- The member's minimum pension payments are to be made at least annually
- An amount or percentage of the pension will not be prescribed as being left-over when the pension ceases
- The pension can be transferred only on the death of the pensioner to their beneficiary(s).
- The Trustee(s) will comply with ATO obligations such as PAYG withholding and payment summary obligations
- You have reached your preservation age and satisfied a condition of release under the SIS Act.
- Establish that the fund's trust deed provides for payment of this pension to the member.

The trustee(s) have agreed to pay your pension payment for the current year of at least \$13,010.00. The frequency will be at the trustee's discretion however will be at minimum an annual payment.

If you have any queries with regard to the above, please do not hesitate to contact me.

Yours sincerely

John Egan

Bernadette Egan

Mrs Bernadette Egan 19 Kaija Street Mount Gravatt East, Queensland 4122

Dear Sir/Madam

BIRDSVILLE BULLWHIP & SADDLE COMPANY SUPERANNUATION FUND Commutation of Account Based Pension

I hereby request the trustee(s) to commute the accounts listed below into an existing accumulation account on 01/07/2020

Account Code: EGAJOH00005P

Account Description: Account Based Pension

Balance to Commute: \$124,373.98

If you have any queries with regard to the above, please do not hesitate to contact me.

Yours sincerely

Mr John Egan 29 Kaija Street

Mt Gravatt East, Queensland 4122

BIRDSVILLE BULLWHIP & SADDLE COMPANY SUPERANNUATION FUND Minutes of a Meeting of the Trustee(s) held on / / at 19 Kaija Street, Mount Gravatt East, Queensland 4122

neid on 7 7 at 19 Kaija St	reet, Mount Gravatt East, Queensiand 4122
PRESENT:	John Egan and Bernadette Egan
PENSION COMMUTATION:	John Egan has requested to commute the following accounts to an existing accumulation account on 01/07/2020. Account Code: EGAJOH00005P Account Description: Account Based Pension Balance to Commute: \$124,373.98
TRUSTEE ACKNOWLEDGEMENT:	It was resolved that Trustee(s) have agreed to this and has taken action to ensure the following: The Member's balance(s) has been updated for any contributions, withdrawals and earnings The fund's trust deed provides for the transfer to take place Any existing pensions for the above mentioned accounts have been ceased and that the pro-rated minimum amount has been met where necessary
CLOSURE:	Signed by the trustee(s) pursuant to the Fund Deed.

Bernadette Egan Chairperson

/ /

Mr John Egan 29 Kaija Street Mt Gravatt East, Queensland 4122

Dear John Egan

BIRDSVILLE BULLWHIP & SADDLE COMPANY SUPERANNUATION FUND Commutation of Account Based Pension

We confirm that the full commutation of your Account Based Pension (EGAJOH00005P) has been completed.

An amount of \$124,373.98 has been transferred to your accumulation account.

If you have any queries with regard to the above, please do not hesitate to contact me.

Yours sincerely

Mrs Bernadette Egan

Trustee

19 Kaija Street

Mount Gravatt East, Queensland 4122

BIRDSVILLE BULLWHIP & SADDLE COMPANY SUPERANNUATION FUND **Deductions Notice Letter**

John Egan and Bernadette Egan as trustee for BIRDSVILLE BULLWHIP & SADDLE COMPANY SUPERANNUATION FUND acknowledges that

John Egan

has advised in writing in accordance with Section 290-170 of the Income Tax Assessment Act 1997 the intention to claim a tax deduction of

\$25000.00

for contributions paid in the year ended 30 June 2021. The Trustee has taken action to deduct the appropriate level of tax from the contributions claimed.

Bernadette Egan

21 / 05 / 2022 Date: / /

** IMPORTANT INFORMATION - PLEASE READ THE FOLLOWING CAREFULLY **

If your records confirm the above amount claimed no action on your behalf is required. Retain this acknowledgement with your taxation records as it may be requested by the Australian Taxation Office to substantiate your tax deduction for Superannuation Contributions.

Otherwise: Complete the details below and return this form to the Trustee if:

- 1. The amount shown above is not the amount that will be claimed, or
- 2. The Australian Taxation Office disallows/reduces the amount you claim.

In terms of Section 290-170 of the Income Tax Assessment Act 1997 I advise that the amount I intend to claim as a tax deduction for the period 01 July 2020 to 30 June 2021 is: \$

John Egan

/

Date:

Notice of intent to claim or vary a deduction for personal super contributions

_	ection A: Your details
1	Tax file number (TFN) PROVIDED
	The ATO does not collect this information provided on this form. This form is to assist you in providing details to your super fund. Your super fund is authorised to request your personal details, including your TFN, under the Superannuation Industry (Supervision) Act 1993, the Income Tax Assessment Act 1997 and the Taxation Administration Act 1953. It is not an offence not to provide your TFN. However, if you do not provide your TFN, and your super fund doesn't already hold your TFN, they will not be permitted to accept the contribution(s) covered by this notice. For more information about your privacy please contact the entity you are providing this form to.
2	Name
Title	mR
_	nily name
EG	GAN
_	t given name Other given names
JO	ARMSTRONG ARMSTRONG
	Current postal address KAIJA STREET
	ourb/town/locality State/territory Postcode
	GRAVATT EAST QLD 4122
Cou	Intry if outside of Australia (Australia only) (Australia only)
5	Daytime phone number (include area code)
Se	ection B: Super fund's details
6	Fund name
BII	RDSVILLE BULLWHIP & SADDLE COMPANY SUPERANNUATION FUND
7	Fund Australian business number (ABN) 13208340129
8	Member account number EGAJOH00002A
9	Unique Superannuation Identifier (USI) (if known)

10	Personal contribution details													
	Is this notice varying an earlier notice?													
	If you answered 'No' complete the Original Notice to Claim a Tax Deduct If you answered 'Yes' complete the Variation of previous valid notice of in													
	ORIGINAL NOTICE TO CLAIM A TAX DEDUCTION													
11	Financial year ended 30 June 20 21													
12	My personal contributions to this fund in the above financial y	ear \$25000.00												
13	The amount of these personal contributions I will be claiming a tax deduction	as \$ 25000.00												
Se	ection D: Declaration													
sign	is form has a declaration where you say the information in it is correct and congo the declaration. If you provide false or misleading information, or fail to take nalties imposed by taxation law. INTENTION TO CLAIM A TAX DEDUCTION													
	Complete this declaration if you have not previously lodged a valid not	tice with your super fund for these contributions.												
	 I intend to claim the personal contributions stated as a tax deduction I am a current member of the identified super fund the identified super fund currently holds these contributions and has not begun to pay a superannuation income stream 	that I am lodging this notice at the earlier of either: the end of the day that I lodged my income tax or the income year in which the personal tions were made, or the end of the income year following the year the contribution was made. That the information given on this notice is correct lete.												
	Name (Print in BLOCK LETTERS)													
	JOHN EGAN Signature													
	Je Z	Date 21 / 05 / 2022												
sup	Send your completed notice to your super fund. Do not send it to us . The uper fund. We don't collect this information; we only provide a format for you to													
14	VARIATION OF PREVIOUS VALID NOTICE OF INTENT Financial year ended 30 June 20													
15	My personal contributions to this fund in the above financial y	ear \$												
16	The amount of these personal contributions claimed in my ori of intent	ginal notice \$												
17	The amount of these personal contributions I will now be clair deduction	ming as a tax \$												

Section C: Contribution details

Declaration

This form has a declaration where you sign to indicate that the information in it is correct and complete. Please review the information before you sign the declaration. If you provide false or misleading information, or fail to take reasonable care, you may be liable to administrative penalties imposed by taxation law.

① Complete this declaration if you have already lodged a valid notice with your fund for these contributions and you wish to reduce the amount stated in that notice.

VARIATION OF PREVIOUS VALID NOTICE OF INTENT

I declare that at the time of lodging this notice:

- I intend to claim the personal contributions stated as a tax deduction
- I am a current member of the identified super fund
- the identified super fund currently holds these contributions and has not begun to pay a superannuation income stream based in whole or part on these contributions.

I declare that I wish to vary my previous valid notice for these contributions by **reducing** the amount I advised in my previous notice and I confirm that either:

■ I have lodged my income tax return for the year in which the contribution was made, prior to the end of the following income year, and this variation notice is being lodged before the end of the day on which the return was lodged, or

- I have not yet lodged my income tax return for the relevant year and this variation notice is being lodged on or before 30 June in the financial year following the year in which the personal contributions were made, **or**
- the ATO has disallowed my claim for a deduction for the relevant year and this notice reduces the amount stated in my previous valid notice by the amount that has been disallowed.

I declare that the information given on this notice is correct and complete.

Name (Print in BLOCK LETTERS)	
Signature	
	Date

Send your completed variation notice to your super fund. **Do not send it to us**. The information on this notice is for you and your super fund. We don't collect this information; we only provide a format for you to provide the information to your super fund.

Sensitive (when completed)



Super transfer balance account report

Who should complete this report?

Super providers and life insurance companies should complete this report when:

- there is a transfer balance account reporting requirement
- further information is required to calculate a member's total super balance
- further information is required to determine a member's concessional contributions amount
- incorrect information has previously been reported to us.

The obligation to report is on:

- the trustee of the fund for a super fund, including self-managed super funds (SMSFs) or an approved deposit fund (ADF)
- the retirement savings account (RSA) provider for an RSA
- a director of the life insurance company for a life insurance company.

Instructions

Follow the Super transfer balance account report instructions for assistance when completing this report.

You must complete and lodge separate reports for each member. If you have more than four events to report for a member you must lodge separate reports. However, if you are reporting a child death benefit income stream or a child reversionary income stream you can only report one event per report.

To cancel or update information already reported to us, you must cancel the original report. Ensure the "Yes" box in Section B is clearly marked and lodge the report exactly the same as the original event. A new report can then be lodged with the correct information.

Completing this report

- Print clearly, using a BLACK pen only.
- Use BLOCK LETTERS and print one character per box.

		_					
S	M	7	H	5	7		

in ALL applicable boxes.



$\overline{}$	and an All Marian and a substitution
Se	ection A: Member details
1	Tax file number (TFN)
	You don't have to provide the TFN to us. However, if you do, it will help us identify the member correctly and process your report quickly. For more information on privacy, refer to ato.gov.au/privacy
2	Name
Title	
E	G A N
First	given name Other given names
J	OHN ARMSTRONG
	Day Month Year
3	Date of birth / / / / / / / / / / / / / / / / / / /
4	Current residential address
2	9 KAIJA STREET
Sub	urb/town State/territory Postcode
M	T G R A V A T T E A S T
Cou	ntry if other than Australia (Australia only) (Australia only) (Australia only)

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Se	ection	B:	Ca	anc	el	la	tio	n																									
5	Are yo	u ca Yes) Co	mp u or	lete nly r	viou this need on on	repo to ir	ort e	xac de d	tly tl letai	he s ils o	sam of the	e a e e	s th	ie oi t/s y	rigin ⁄ou	al e	vent													6	
_	ection If you ar																		SF y	/ou	ma	y le	ave	qu	esti	ons	 s 6 a		7 b	 lanl	ζ.		
6	Interm	edia	ry/S	upp	lier	na	ame																										
7	Austra Your co Provide	ntact	deta	ils are	e red	quir	ed in	cas	e w	e ne	eed ·	to s	pea		o yo	bu a] bou	It de	tails	S SU	lppl	ied	on t	this	rep	ort.							
8	Fund/I	Provi	der	nam	ne																												
В	IRC	s	V	L	L	Ε		3 (J	L	W	Н	I	Р		&		S	Α	D	D	L	Ε		С	0	М	Р	Α	N	Υ		S
U	PER	R A	N	1 U	Α	Т	I	N C	1	F	U	N	D																				
9	Fund/I	Provi	der	ABN	1		1 3		2	0	8		3 4	4	0		1	2 9	9														
10	Fund/I	Provi	der	TFN	l																												
		u don ur repo																				y th	e fu	nd/	'pro	vide	∍r co	orre	ctly	and	d pr	oce	SS

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Se	ection D-1: Event one
0	Refer to the instructions for more information on how to complete this section. Only report one event in this section. You can report a second event in Section D-2.
11	Is the first event:
	A response to a commutation authority Go to question 12.
	An income stream that commenced prior to 1 July 2017 Go to question 13.
	An income stream that commenced on or after 1 July 2017 Go to question 13.
	A limited recourse borrowing arrangement repayment Go to question 13.
	A different transfer balance cap event X Go to question 14.
	Additional information to calculate a member's total super balance or concessional contributions – Go to questions 15 and 16.
Tra	ansfer balance cap event
12	Commutation authority An event that occurred in response to a commutation authority issued by the ATO.
	A commutation authority is a notice the Commissioner issues to a super income stream provider requiring
	the provider to commute an amount out of a specified super income stream.
	Event type: Commutation authority – commuted in full
	Commutation authority – commuted in part
	Commutation authority – deceased
	Commutation authority – defined benefit
	So to Event details on the next page.
13	Pre-existing or new income stream event or a limited recourse borrowing arrangement (LRBA) repayment A transfer balance cap event in relation to an income stream in existence just before 1 July 2017; a new income stream that commenced on or after 1 July 2017; or an LRBA repayment.
	If you select either child death benefit income stream or child reversionary income stream you must complete Section F and you can only report one event on this report.
	Event type:
	Super income stream
	Reversionary income stream
	LRBA repayment
	If you select one of the below events you can only report one event in this report. Refer to the instructions for more information.
	Child death benefit income stream
	Child reversionary income stream
14	Other transfer balance cap event Solution Go to Event details on the next page.
	Any other transfer balance cap event.
	If your member has voluntarily requested that you commute an amount, select Member commutation event type. Do not use this event type if you are responding to a commutation authority from the ATO.
	Event type: Member commutation
	Income stream stops being in retirement phase X
	Structured settlement – post 1 July 2017
	S Go to Event details on the next page

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Ot	her information
15	Total super balance
	Complete this question to provide information regarding the total super balance of a member. Refer to ato.gov.au/totalsuperbalance for more information on Total super balance.
	Do not use these event types if you are reporting about your member's transfer balance cap. Retirement phase value is used to calculate your member's total super balance and is only required from 30 June 2018.
	Event type: Accumulation phase value Retirement phase value (30 June 2018 only)
16	Concessional contributions Information regarding the notional taxed contributions of a member.
	Only use this event type if you are reporting information for your member's notional taxed contributions.
	Event type: Uncapped notional taxed contributions (from 2017–18 financial year onwards)
Ev	ent details
•	You must complete Q17 and Q18 for each event reported with the exception of Commutation authority (deceased) and commutation authority – defined benefit. Refer to the instructions for more information on how to complete this section.
17	Effective date 0 1 / 0 7 / 2 0 2 0
18	Value \$ 124373 - 98
19	If you are responding to a commutation authority, was the commutation paid directly to the member? (ie, paid out of the super system)
	Only complete this question if the Reporting event type is Commutation authority – commuted in full or Commutation authority – commuted in part.
	If unknown leave this question blank.
	No Yes
Se	ection E-1: Member account details
0	Only certain event types require you to answer question 20. Refer to the instructions for more information on how to complete this question.
20	Member account type
	Account-based income stream X
	Capped defined benefit income stream just before 1 July 2017
	Market-linked capped defined benefit income stream just before 1 July 2017
	Capped defined benefit income stream on or after 1 July 2017
21	Is the account closed?
	No Yes X
22	1 1 ,
	If you don't have a USI leave this question blank
23	Member account number
	E G A J O H 0 0 0 5 P
24	Member client identifier (number) If you don't have a member client identifier leave this question blank
	E G A N J O H N O O O 1 D D D D D D D D D D D D D D D D

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Se	ection D-2: Event two
0	Refer to the instructions for more information on how to complete this section. Only report one event in this section. You can report a third event in Section D-3.
11	Is the second event:
	A response to a commutation authority Go to question 12.
	An income stream that commenced prior to 1 July 2017 Go to question 13.
	An income stream that commenced on or after 1 July 2017 X Go to question 13.
	A limited recourse borrowing arrangement repayment Go to question 13.
	A different transfer balance cap event Go to question 14.
	Additional information to calculate a member's total super balance or concessional contributions - Go to questions 15 and 16
Tra	ansfer balance cap event
12	Commutation authority An event that occurred in response to a commutation authority issued by the ATO.
	A commutation authority is a notice the Commissioner issues to a super income stream provider requiring the provider to commute an amount out of a specified super income stream.
	Event type: Commutation authority – commuted in full
	Commutation authority – commuted in part
	Commutation authority – deceased
	Commutation authority – defined benefit
	Go to Event details on the next page.
13	Pre-existing or new income stream event or a limited recourse borrowing arrangement (LRBA) repayment A transfer balance cap event in relation to an income stream in existence just before 1 July 2017; a new income stream that commenced on or after 1 July 2017; or an LRBA repayment.
	If you select either child death benefit income stream or child reversionary income stream you must complete Section F and you can only report one event on this report.
	Event type:
	Super income stream X
	Reversionary income stream
	LRBA repayment
14	Other transfer balance cap event Any other transfer balance cap event.
	If your member has voluntarily requested that you commute an amount, select Member commutation event type. Do not use this event type if you are responding to a commutation authority from the ATO.
	Event type: Member commutation
	Income stream stops being in retirement phase
	Structured settlement – post 1 July 2017
	Structured settlement – post 1 July 2017 Go to Event details on the next page.
	do to Event details on the next page.

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Ot	her information
15	Total super balance
	Complete this question to provide information regarding the total super balance of a member. Refer to ato.gov.au/totalsuperbalance for more information on Total super balance.
	Do not use these event types if you are reporting about your member's transfer balance cap. Retirement phase value is used to calculate your member's total super balance and is only required from 30 June 2018.
	Event type: Accumulation phase value Retirement phase value (30 June 2018 only)
16	Concessional contributions Information regarding the notional taxed contributions of a member.
	Only use this event type if you are reporting information for your member's notional taxed contributions.
	Event type: Uncapped notional taxed contributions (from 2017–18 financial year onwards)
Εv	ent details
•	You must complete Q17 and Q18 for each event reported with the exception of Commutation authority (deceased) and commutation authority – defined benefit. Refer to the instructions for more information on how to complete this section.
17	Effective date 0 1 / 0 7 / 2 0 2 0
18	Value \$ 520362 · 83
19	If you are responding to a commutation authority, was the commutation paid directly to the member? (ie, paid out of the super system)
	Only complete this question if the <i>Reporting event type</i> is Commutation authority – commuted in full or Commutation authority – commuted in part .
	If unknown leave this question blank.
	No Yes Yes
Se	ection E-2: Member account details
0	Only certain event types require you to answer question 20. Refer to the instructions for more information on how to complete this question.
20	Member account type
	Account-based income stream X
	Capped defined benefit income stream just before 1 July 2017
	Market-linked capped defined benefit income stream just before 1 July 2017
	Capped defined benefit income stream on or after 1 July 2017
21	Is the account closed?
	No X Yes
22	Unique superannuation identifier (USI) If you don't have a USI leave this question blank
	If you don't have a osh leave this question blank
23	Member account number
24	Member client identifier (number) If you don't have a member client identifier leave this question blank
	E G A N J O H N O O O 1

Se	ection D-3: Event three
•	Refer to the instructions for more information on how to complete this section. Only report one event in this section. You can report a fourth event in Section D-4.
11	Is the third event:
	A response to a commutation authority Go to question 12.
	An income stream that commenced prior to 1 July 2017 Go to question 13.
	An income stream that commenced on or after 1 July 2017 Go to question 13.
	A limited recourse borrowing arrangement repayment Go to question 13.
	A different transfer balance cap event Go to question 14.
	Additional information to calculate a member's total super balance or concessional contributions - Go to questions 15 and 16.
Tra	ansfer balance cap event
12	Commutation authority An event that accoursed in response to a commutation outhority issued by the ATO
	An event that occurred in response to a commutation authority issued by the ATO. A commutation authority is a notice the Commissioner issues to a super income stream provider requiring
	the provider to commute an amount out of a specified super income stream.
	Event type:
	Commutation authority – commuted in full
	Commutation authority – commuted in part
	Commutation authority – deceased
	Commutation authority – defined benefit
	So to Event details on the next page.
13	Pre-existing or new income stream event or a limited recourse borrowing arrangement (LRBA) repayment A transfer balance cap event in relation to an income stream in existence just before 1 July 2017; a new income stream that commenced on or after 1 July 2017; or an LRBA repayment.
	If you select either child death benefit income stream or child reversionary income stream you must complete Section F and you can only report one event on this report.
	Event type:
	Super income stream
	Reversionary income stream
	LRBA repayment
	So to Event details on the next page.
14	Other transfer balance cap event Any other transfer balance cap event.
	If your member has voluntarily requested that you commute an amount, select Member commutation event type. Do not use this event type if you are responding to a commutation authority from the ATO.
	Event type: Member commutation
	Income stream stops being in retirement phase
	Structured settlement – post 1 July 2017
	Go to Event details on the next page.
	- 10 10 10 10 10 10 10 10 10 10 10 10 10

15								
	Total super balance							
	Complete this question to provide information regarding the total super balance of a member. Refer to ato.gov.au/totalsuperbalance for more information on Total super balance.							
	Do not use these event types if you are reporting about your member's transfer balance cap. Retirement phase value is used to calculate your member's total super balance and is only required from 30 June 2018.							
	Event type: Accumulation phase value Retirement phase value (30 June 2018 only)							
3	Concessional contributions Information regarding the notional taxed contributions of a member.							
	Only use this event type if you are reporting information for your member's notional taxed contributions.							
	Event type: Uncapped notional taxed contributions (from 2017–18 financial year onwards)							
V	ent details							
	You must complete Q17 and Q18 for each event reported with the exception of Commutation authority (deceased) and commutation authority – defined benefit. Refer to the instructions for more information on how to complete this section.							
7	Effective date							
8	Value \$ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \							
19 If you are responding to a commutation authority, was the commutation paid directly (ie, paid out of the super system)								
	Only complete this question if the Reporting event type is Commutation authority – commuted in full or Commutation authority – commuted in part. If unknown leave this question blank.							
	No Yes							
 }e	ction E-3: Member account details							
	Only certain event types require you to answer question 20. Refer to the instructions for more information on how to complete this question.							
0	Member account type							
	Account-based income stream							
	Account-based income stream Capped defined benefit income stream just before 1 July 2017							
	Capped defined benefit income stream just before 1 July 2017							
1	Capped defined benefit income stream just before 1 July 2017 Market-linked capped defined benefit income stream just before 1 July 2017							
1	Capped defined benefit income stream just before 1 July 2017 Market-linked capped defined benefit income stream just before 1 July 2017 Capped defined benefit income stream on or after 1 July 2017							
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	Capped defined benefit income stream just before 1 July 2017 Market-linked capped defined benefit income stream just before 1 July 2017 Capped defined benefit income stream on or after 1 July 2017 Is the account closed? No Yes							
2	Capped defined benefit income stream just before 1 July 2017 Market-linked capped defined benefit income stream just before 1 July 2017 Capped defined benefit income stream on or after 1 July 2017 Is the account closed? No Yes Unique superannuation identifier (USI)							
2	Capped defined benefit income stream just before 1 July 2017 Market-linked capped defined benefit income stream just before 1 July 2017 Capped defined benefit income stream on or after 1 July 2017 Is the account closed? No Yes Unique superannuation identifier (USI) If you don't have a USI leave this question blank							
2	Capped defined benefit income stream just before 1 July 2017 Market-linked capped defined benefit income stream just before 1 July 2017 Capped defined benefit income stream on or after 1 July 2017 Is the account closed? No Yes Unique superannuation identifier (USI) If you don't have a USI leave this question blank							

Se	ection D-4: Event four
0	Refer to the instructions for more information on how to complete this section. Only report one event in this section.
11	Is the fourth event: A response to a commutation authority Go to question 12.
	An income stream that commenced prior to 1 July 2017 Go to question 13.
	An income stream that commenced on or after 1 July 2017 Go to question 13.
	A limited recourse borrowing arrangement repayment Go to question 13.
	A different transfer balance cap event Go to question 14.
	Additional information to calculate a member's total super balance or concessional contributions - Go to questions 15 and 16.
Tra	ansfer balance cap event
12	Commutation authority An event that occurred in response to a commutation authority issued by the ATO.
	A commutation authority is a notice the Commissioner issues to a super income stream provider requiring the provider to commute an amount out of a specified super income stream.
	Event type:
	Commutation authority – commuted in full
	Commutation authority – commuted in part
	Commutation authority – deceased
	Commutation authority – defined benefit
	On to Event details on the next page.
13	Pre-existing or new income stream event or a limited recourse borrowing arrangement (LRBA) repayment A transfer balance cap event in relation to an income stream in existence just before 1 July 2017; a new income stream that commenced on or after 1 July 2017; or an LRBA repayment.
	If you select either child death benefit income stream or child reversionary income stream you must complete Section F and you can only report one event on this report.
	Event type:
	Super income stream
	Reversionary income stream
	LRBA repayment
4.4	Sthey transfer helenes can exert
14	Other transfer balance cap event Any other transfer balance cap event.
	If your member has voluntarily requested that you commute an amount, select Member commutation event type. Do not use this event type if you are responding to a commutation authority from the ATO.
	Event type: Member commutation
	Income stream stops being in retirement phase
	Structured settlement – post 1 July 2017
	On to Event details on the next page.

15								
	Total super balance							
	Complete this question to provide information regarding the total super balance of a member. Refer to ato.gov.au/totalsuperbalance for more information on Total super balance.							
	Do not use these event types if you are reporting about your member's transfer balance cap. Retirement phase value is used to calculate your member's total super balance and is only required from 30 June 2018.							
	Event type: Accumulation phase value Retirement phase value (30 June 2018 only)							
6	Concessional contributions Information regarding the notional taxed contributions of a member.							
	Only use this event type if you are reporting information for your member's notional taxed contributions.							
	Event type: Uncapped notional taxed contributions (from 2017–18 financial year onwards)							
V	ent details							
	You must complete Q17 and Q18 for each event reported with the exception of Commutation authority (deceased) and commutation authority – defined benefit. Refer to the instructions for more information on how to complete this section.							
7	Effective date / / / / / / / / / / / / / / / / / / /							
8	Value \$ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \							
19 If you are responding to a commutation authority, was the commutation paid directly (ie, paid out of the super system)								
	Only complete this question if the Reporting event type is Commutation authority – commuted in full or Commutation authority – commuted in part. If unknown leave this question blank.							
	No Yes							
e)	ction E-4: Member account details							
	ction E-4: Member account details Only certain event types require you to answer question 20. Refer to the instructions for more information on how to complete this question.							
	Only certain event types require you to answer question 20. Refer to the instructions for more information on how to complete this question. Member account type							
	Only certain event types require you to answer question 20. Refer to the instructions for more information on how to complete this question.							
	Only certain event types require you to answer question 20. Refer to the instructions for more information on how to complete this question. Member account type							
	Only certain event types require you to answer question 20. Refer to the instructions for more information on how to complete this question. Member account type Account-based income stream							
	Only certain event types require you to answer question 20. Refer to the instructions for more information on how to complete this question. Member account type Account-based income stream Capped defined benefit income stream just before 1 July 2017							
0	Only certain event types require you to answer question 20. Refer to the instructions for more information on how to complete this question. Member account type Account-based income stream Capped defined benefit income stream just before 1 July 2017 Market-linked capped defined benefit income stream just before 1 July 2017							
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0 1 2	Only certain event types require you to answer question 20. Refer to the instructions for more information on how to complete this question. Member account type Account-based income stream Capped defined benefit income stream just before 1 July 2017 Market-linked capped defined benefit income stream just before 1 July 2017 Capped defined benefit income stream on or after 1 July 2017 Is the account closed? No Yes Unique superannuation identifier (USI)							
0 1 2	Only certain event types require you to answer question 20. Refer to the instructions for more information on how to complete this question. Member account type Account-based income stream Capped defined benefit income stream just before 1 July 2017 Market-linked capped defined benefit income stream just before 1 July 2017 Capped defined benefit income stream on or after 1 July 2017 Is the account closed? No Yes Unique superannuation identifier (USI) If you don't have a USI leave this question blank							
0 1 2 3	Only certain event types require you to answer question 20. Refer to the instructions for more information on how to complete this question. Member account type Account-based income stream Capped defined benefit income stream just before 1 July 2017 Market-linked capped defined benefit income stream just before 1 July 2017 Capped defined benefit income stream on or after 1 July 2017 Is the account closed? No Yes Unique superannuation identifier (USI) If you don't have a USI leave this question blank							

Se	ection F: T I	hird pa	irty deta	ils					
		sionary inc	elete Section F if come stream. C details.						
25	Tax file numb	er (TFN)							
			ide the TFN to u more information				he third party	correctly and	process
26	Name								
Fam	nily name								
First	given name			Other	given name	S			
27	Date of birth	Day /	Month / [Year					

Section G: Declarations	
Complete the declaration that applies to you. Print your full name then sign and date	the declaration.
Before you sign the declaration, check that you have provided true and correct in giving false or misleading information.	nformation. Penalties may be imposed for
Trustee, director or authorised officer declaration Complete this declaration if you are the trustee, director or authorised officer of the self declare that the information contained in the statement is true and correct.	uper provider.
Name BERNADETTEEGAN	
Business hours phone number (include area code)	
Trustee, director or authorised officer signature	
OR R. K. Igan	Date 0 1 / 0 7 / 2 0 2
Authorised representative declaration Complete this declaration if you are an authorised representative of the super provider of declare that: I have prepared the statement with the information supplied by the super provider of life insurance company preparation of this statement is true and correct I am authorised by the super provider or life insurance company to give the information.	or life insurance company y that the information provided to me for the
Name Business hours phone number (include area code)	
Authorised representative signature	Date Day Month Year

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- Business Portal if you are a business portal user
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If you are lodging by post, use the postal address below:

Australian Taxation Office PO BOX 3006 PENRITH NSW 2740

Memorandum of Resolutions of the Trustees for Birdsville Bullwhip & Saddle Company Superannuation Fund

Present: John Egan

Bernadette Egan

Investment
Strategy Review:

The Trustees tabled the current Investment Strategy dated 01/02/2021for

review and discussion.

The Trustees confirm that there have not been any significant changes to the purpose of the Fund, the members' circumstances or to the investments of

the Fund.

Resolution: It was resolved to:

• continue to adopt the Investment Objectives and Strategies as set out in the strategy dated 01/02/2021.

 formally record these on-going investment strategy reviews once a year in writing, or when an event occurred requiring a significant

change to the Fund's investment strategy.

Closure: There being no further business, the meeting was declared closed.

Signed as a true and correct record

John Egan

Trustee

Bernadette Egan

Trustee

Dated: 04 / 05 / 2022

/ /

John Egan BIRDSVILLE BULLWHIP & SADDLE COMPANY SUPERANNUATION FUND 29 Kaija Street Mt Gravatt East, Queensland 4122

Dear Sir/Madam,

RE: Work Test Declaration

I declare that I am aged between 67 and 74 inclusive and satisfied the work test requirement of being gainfully employed for at least 40 hours in a 30 day period in the 2021 financial year. Accordingly, the fund can accept my employer and personal superannuation contributions.

Yours faithfully,

John Egan

Additional information:

Date of Birth: Provided

Total employer superannuation contributions: \$0.00

Total personal superannuation contributions: \$25000.00



TITLE 9EGAJ - 2021 Super pack

FILE NAME AUD - REP.pdf and 9 others

DOCUMENT ID 35ad6b222a6f2283904051fa0914330ad84e264a

AUDIT TRAIL DATE FORMAT DD / MM / YYYY

STATUS • Signed

Document history

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superdocs@hfbgroup.com.au

IP: 180.150.101.27

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