Copy to be retained by client

Taxation Estimate

For the year ended 30 June 2021

Return Code: Description:	BROOSF Team Brooks Superannuation Fund	Tax File Number: Date prepared: 14	/04/2022
Summary of Ta	axable Income	\$	\$
Business ar No-TFN cor Other Busin		0.00 12,383.00	
Less Deduc	ctions		12,383.00 7,241.00
Taxable Inc	come	-	5,142.00
Tax on Taxable	e Income		
\$0.00 @ 3	ax on No-TFN contributions 32% (includes 2% Medicare Levy) ess Income \$5142.00 @ 15.00%	0.00 771.30	
	Gross Tax	-	771.30
	SUBTOTAL T2	-	771.30
Less Refundab	SUBTOTAL T3 le tax offsets	-	771.30
	franking credits	115.24	
		-	115.24
	TAX PAYABLE T5	-	656.06
Less Eligible C PAYG Insta	redits Iments raised	1,082.00	
			1,082.00
			-425.94
Add: Supervisory	levy	259.00	
		_	259.00
	TOTAL AMOUNT REFUNDABLE	-	166.94
2022 PAYG INS Commissior	STALMENTS ner's Instalment Rate		5.30%

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

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

This declaration is to be completed where the tax return is to be lodged via an approved ATO electronic channel. It is the responsibility of the taxpayer to retain this declaration for a period of five years after the declaration is made, penalties may apply for failure to do so.

Tax File Number	369 703 980	Year of retur	m 2021	
Name of Partnership, Trust, Fund or Entity	Team Brooks Superannu	ation Fund		
Total Income/Loss	Total Dedu	ictions 7241	Taxable Income/Loss	

Privacy

PART A

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 However, you cannot lodge your tax return electronically if you do not quote your TFN.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.

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 I have provided to my registered tax agent for the preparation of this tax return, including

- any applicable schedules is true and correct, and
- * I authorise the agent to give this document to the Commissioner of Taxation.

Signature of Partner, Trustee or Director	Agrado.	SIGN HERE	Date	22/04/22	
	\bigcirc				

PART B

ELECTRONIC FUNDS TRANSFER CONSENT

This declaration is to be completed when an electronic funds transfer (EFT) of a refund is requested and the tax return is being lodged through an approved ATO electronic 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:	THE TRUSTEE TEAM BROOKS SUPERANNUATION FUND					
I authorise the refund to be de	eposited directly to the specified	account				
Signature	Krodo.		SIGN HERE	Date	22/04/22	
PART D	Tax agent's certifica	ate (shared faciliti	es only)			
We, DGZ CHARTERED ACC	OUNTANTS declare that:					
* We have prepared this tax re	eturn in accordance with the info	ormation supplied by the	e partner, trustee, directo	or or public c	officer	
* We have received a declarat and correct, and	tion made by the entity that the	information provided to	us for the preparation of	f this tax retu	ırn is true	
* We are authorised by the pa	rtner, trustee, director or public	officer to lodge this tax	return, including any ap	plicable sche	edules.	
Г			1	Г		
Agent's Signature				Date		
Agent's phone	07 41524677	_ с	lient's reference	BR	OOSF	
Agent's Contact Name	Miranda Exelby	/				
Agent's reference numb	er 61032002					

Self-managed superannuation fund annual return 2021

Se	ction A: Fund Information					
1	Your tax file number	369 703 980				
no	e ATO is authorised by law to request t quoting it could increase the chance vacy note in the declaration.					
2	Name of self-managed superannuation fund (SMSF)	Team Brooks Supera	nnuation Fund			
3	ABN	73 603 184 958				
4	Current postal address Street	DGZ CHARTERED A	CCOUNTANTS			
	Suburb/State/P'code	PO BOX 1935 BUNDABERG		QLD	4670	
5	Annual return status					
	Is this the first required return for a n	ewly registered SMSF?		Ν		
6	SMSF auditorAuditor's nameTitleFamily nameGiven namesSMSF Auditor Number1Postal address	Mr BOYS ANTHONY 00 014 140	Auditor's phone num	ber	0410 712708	
	Street	SUPER AUDITS PTY PO BOX 3376	ĹTD			
	Suburb/State/P'code	RUNDLE MALL		QLD	5000	
	Date audit was completed		Was Part A of th Was Part B of th			
7	Electronic funds transfer (EFT)					
Α	Fund's financial institution account BSB no 0629 Fund account name TEAM BROOKS SUPERANNUATI	50	Account no	10093	3766	
	I would like my tax refunds made to t	this account.		N		
В	Financial institution account detaiBSB no0629Account name0629THE TRUSTEE TEAM BROOKS S	50	Account no	10093	3766	

Self-managed superannuation fund annual return 2021

C Electronic service address alias

AUSPOSTSMSF

8 Status of SMSF

Australian superannuation fund Fund benefit structure Does the fund trust deed allow acceptance of the Government's Super Co-contributions and Low Income Super-Contribution?

9 Was the fund wound up during the income year?

10 Exempt current pension income

Did the fund pay retirement phase superannuation income stream benefits to one or more members in the income year?

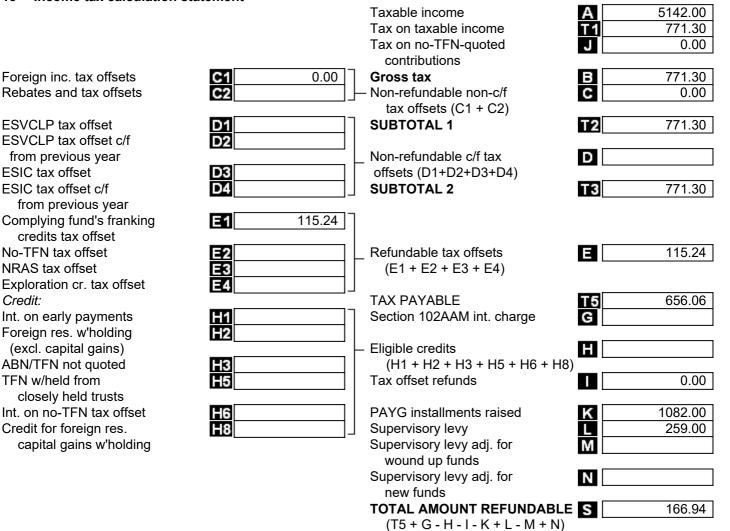
Ν

N



	Gross rent and other leasing and hiring income Franked dividend amount Dividend franking credit Calculation of assessable contributions <i>plus</i> No-TFN-quoted contributions GROSS INCOME TOTAL ASSESSABLE INCOME		R3 (BKLR R	12000 268 115 0 12383
Sec 12	tion C: Deductions and non-deductible expenses Deductions and non-deductible expenses		Deductions		Non-deductible
	Decline in value of depreciating assets SMSF auditor fee Management and administration expenses	E1 H1 J1	5076 500 1665	E2 H2 J2	expenses
	TOTAL DEDUCTIONS (A1 to M1)	Ν	7241		
	TOTAL NON-DEDUCTIBLE EXPENSES (A2 to L2)			Y	
	TOTAL SMSF EXPENSES (N + Y)	Ζ	7241		
	TOTAL INCOME OR LOSS (Total assessable income less deductions)	0	5142		

Section D: Income tax calculation statement 13 Income tax calculation statement



Section F: Member info	ormation
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MEMBER NUMBER: 1 Title First name Other names Surname Suffix Member's TFN See the Privacy note in the Declarat	Mr Steven James Brooks 490 185 972 ion	Accour	nt status O
OPENING ACCOUNT BALANCE TOTAL CONTRIBUTIONS (Sum of labels A to M) Other transactions Allocated earnings or losses Inward rollovers and transfers Accumulation phase account balance Retirement phase account bal Nor Retirement phase account balance - TRIS Count CLOSING ACCOUNT BALANCE	n CDBIS S2	N 0 181559.20 0.00 0 0 S	50513.01 1907.67
MEMBER NUMBER: 2 Title First name Other names Surname Suffix Member's TFN See the Privacy note in the Declarat	Mrs Kerri-Ann Brooks 165 026 235 ion	Accour	nt status O 28/10/1969
OPENING ACCOUNT BALANCE TOTAL CONTRIBUTIONS (Sum of labels A to M) Other transactions Allocated earnings or losses Inward rollovers and transfers Accumulation phase account balance Retirement phase account bal Nor Retirement phase account balance - TRIS Count CLOSING ACCOUNT BALANCE	n CDBIS S2	N 139283.19 0.00 0.00 0 S	38843.10 624.18

Section H: Assets and liabilities 15 ASSETS 15b Australian direct investments		
Limited Recourse Borrowing Arrangements	Cash and term deposits	E 26640
Australian residential II	Debt securities	F
Australian non-residential J2	Listed shares	G H 8334
Overseas real property J3 Australian shares J4	Limited recourse borrowing arrangements (J1 to J6)	J
Overseas shares J5 Other J6	Non-residential real	K
Property count J7	Residential real property Collectables and personal	L 283400 M
	use assets Other assets	0 12722
TOTAL AUSTRALIAN AND OVERSEAS ASSETS (sum of labels A to T)		U <u>331096</u>
16 Liabilities Borrowings for limited recourse borrowing]]_ Borrowings	V
arrangements	Total member closing	W 320842
Permissible temporary V2 borrowings	account balances Reserve accounts	X
Other borrowings V3	Other liabilities	Y 10254

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BROOSF

Section K: Declarations

Important

Before making this declaration check to ensure 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 are in doubt about any aspect of the annual return, place all the facts before the ATO.

Privacy

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TRUSTEE'S OR DIRECTOR'S DECLARATION:

I declare that, the current trustees and directors have authorised this annual return and it is documented as such in the SMSF's records. I have received a copy of the audit report and are aware of any matters raised therein. The information on this annual return, including any attached schedules and additional documentation is true and correct.

Authorised trustee's, director's or public officer's signature				Date]
Preferred trustee, direct Title	or or public offi	i cer's contact det a Mr	ails:				
Family name and suffix		BROOKS					
Given and other names		STEVEN JAMES					
Phone number Time taken to prepare a	nd complete thi	0741 524677 is tax return (hour	s)		J	0	
TAX AGENT'S DECLAR We declare that the Self-manage that the trustees have given us a us to lodge this annual return.	ed superannuation fu						
Tax agent's signature				Date]
Tax agent's contact deta	aile						

ent's contact details

Title Family name and suffix Given and other names Tax agent's practice

Ms
Exelby
Miranda
DGZ CHARTERED ACCOUNTANTS

Tax agent's phone Reference number Tax agent number

07 41524677	
BROOSF	
61032002	

NOTE: THIS PRINT-OUT IS NOT TO BE LODGED WITH THE ATO.