

Thank you for engaging us to attend to the administration and taxation requirements for your Self-managed Super Fund.

These are the Terms of Engagement ("Terms"). This Agreement is constituted by these Terms and any other later document that we advise you becomes part of or varies this Agreement. These Terms confirm our understanding of the nature and the limitations of the services we will provide.

PURPOSE, SCOPE AND OUTPUT OF ENGAGEMENT

Our firm will provide Accounting and other professional services, which will be conducted in accordance with the relevant professional and ethical standards issued by the Accounting Professional & Ethical Standards Board Limited (APESB). The extent of our procedures and services will be limited exclusively for this purpose only. As a result, no audit or review will be performed and, accordingly, no assurance will be expressed. Our engagement cannot be relied upon to disclose irregularities including fraud, other illegal acts and errors that may exist. However, we will inform you of any such matters that come to our attention.

RESPONSIBILITY FOR YOUR WORK

Over the years our firm has established a cost-effective structure, incorporating a Team of Professional Accountants and Assistants to provide you with an economical service.

When dealing with your affairs many general administration and basic accounting problems may be handled by our team, which will allow Directors to be available for telephone advice, consulting, and other more complex issues.

The Directors oversee your affairs and are ultimately responsible for all the matters relating to your file.

Team members attend to certain functions relating to your affairs. This is done to afford you the most cost-effective service possible.

Of course, all work attended to by the team is supervised and reviewed by Directors and Senior Managers.

RELATIVE RESPONSIBILITIES AND CONFIDENTIALITY

The conduct of this engagement will be carried out in accordance with the standards and ethical requirements of The Institute of Chartered Accountants Australia, and The Institute for Public Accountants (hereafter 'The Institute'), which means that information acquired by us in the course of the engagement is subject to strict confidentiality requirements. We will not disclose any

information relating to your affairs to any third party without your consent, unless required by law.

You may provide us with permission to disclose your confidential information in certain circumstances, or place conditions on the disclosure of certain confidential information. If you do so, we will have permission to disclose the relevant information accordingly, in the performance of our services, unless you instruct us otherwise in writing.

Our files may, however, be subject to review as part of the quality control review program of The Institute, who monitor compliance with professional standards by its members. We advise that by signing this agreement you acknowledge that, if requested, our files relating to this engagement may be made available under this program. Should this occur, we will advise you prior to releasing any files.

We may on occasion use external contractors and/or third parties to undertake some of the work on your file and they may have access to our information. This will only be done if strict confidentiality agreements are entered into between us and the associated entities to prevent any unauthorised use of this information.

The indicative charge rates and levels of experience of the team providing you with your Professional Accounting Service are set out on the last page of this agreement.

We may also provide your information to our associated entities for services that we believe will be of value to you.

Once again, this will only be done if strict confidentiality agreements are entered into between us and the associated entities to prevent any unauthorised use of this information.

OTHER INSTITUTE RECOMMENDATIONS

The Institute has determined minimum standards with regards to service and, in accordance with those recommendations, our practice:

- a) uses properly trained and supervised staff to maintain quality standards and ensures that all qualified staff undertake a minimum of 40 hours of continuing professional education each year;
- b) maintains professional independence at all times;
- c) establishes and operates satisfactory quality control procedures;
- d) bases our fees on the chargeable time of each staff member;
- e) records all time to enable you to be aware of the extent of the work performed for you; and



f) will, if requested, provide an estimate of our billing prior to the commencement of an engagement.

YOUR OBLIGATIONS AND RIGHTS

We are required to advise you of your rights and obligations where we are acting for you on taxation matters. In relation to the taxation services provided:

- It is your obligation to provide us with all information that you reasonably expect will be necessary to allow us to perform work contemplated under this engagement within a timely manner or as requested. This includes providing accurate and complete responses to questions asked of you by us within a reasonable timeframe. Inaccurate, incomplete or late information could have a material effect on our services and/or our conclusions and may result in additional fees. We will not verify the underlying accuracy or completeness of information you provide to us.
- You are also required to advise us on a timely basis if there are any changes to your circumstances that may be relevant to the performance of our services. Specifically, if any subsequent event results in the information you provided to us being inaccurate, incomplete or misleading, then you are obliged to advise us as soon as possible. We take no responsibility to the extent that our advice is inaccurate, incomplete or misleading because it is based on inaccurate, incomplete or misleading information being provided to us.
- By accepting the terms of this agreement, you will be taken to have agreed that the performance of our services is dependent on the performance of your obligations relating to disclosure and record-keeping.
- The Taxation Administration Act 1953 contains specific provisions that may provide you with 'safe harbours' from administrative penalties for incorrect or late lodgement of Returns if, amongst other things, you give us 'all relevant taxation information' in a timely manner (the safe harbour provisions apply from 1 March 2010). Accordingly, it is to your advantage that all relevant information is disclosed to us as any failure by you to provide this information may affect your ability to rely on the 'safe harbour' provisions and will be taken into account in determining the extent to which we have discharged our obligations to you.
- You are also required to advise us if you become aware of any conflict of interest or potential conflict of interest. Generally, a conflict of interest is any event which may result in us becoming unable to remain objective in the performance of our services to you. Some examples of events which could give rise to a conflict of interest or potential conflict of interest

during this engagement are changes to your business circumstances, events affecting your family (e.g. death and/or marriage breakdown) or a legal action commencing against you.

- You are subject to the self-assessment system in relation to any of your Income Tax Returns. The Commissioner is entitled to rely on any statements made in your Income Tax Returns. If an answer or any statement made on a Return or attached schedule appears to be incorrect, incomplete or misleading, and where those statements are later found to be incorrect (even if the error was made unintentionally), the Commissioner may amend your Income Tax Assessment and, in addition to any tax assessed, you may also be liable for penalties and interest charges.
- You have an obligation to keep records that will substantiate the Taxation Returns prepared and which will satisfy the substantiation requirements of the *Income Tax Assessment Act*. This documentation must be retained for a minimum of 5 years and you must ensure you retain all the documentation in a safe and secure place in case the Australian Taxation Office wishes to review these documents. Failure to keep such records could result in claims being disallowed, additional tax being imposed, and the imposition of penalty and/or general interest charges. In more serious cases, prosecution may be instituted under the *Taxation Administration Act 1953* and fines imposed by Courts, if convicted.
- You are responsible for the accuracy and completeness of the information required to comply with the various Taxation Laws. We will use this information supplied in the preparation of your Returns. The following needs to be considered to ensure correctness of each Income Tax Return:
 - that income from all sources has been disclosed;
 - that all deductions claimed can be justified;
 - that all deductions claimed for work, car and travel expenses can be substantiated;
 - that all statements are correct and complete.
 - that every sale of property, of any description, should be considered for the possible application of both income tax and capital gains tax. The worldwide income of Australian resident taxpayers is now taxable in Australia with a credit allowed for income tax paid in a foreign country on that income.
- Your rights as a taxpayer include:
 - The right to seek a Private Ruling;
 - The right to object to an assessment by the Commissioner;



- The right to appeal against an adverse decision by the Commissioner.

Certain time limitations may exist for you to exercise these rights. Should you wish to exercise these rights at any time, you should contact us so that we can provide you with the relevant timeframes and to discuss any additional requirements which may exist.

OUR OBLIGATION

We have a duty to act in your best interests. However, the duty to act in your best interests is subject to an overriding obligation to comply with the law, even if that may require us to act in a manner that may be contrary to your interests. For example, we could not lodge an income tax return for you that we knew to be false in a material respect.

We also have an obligation to ensure that we manage conflicts of interest as they arise. In this regard, we have arrangements in place to ensure that we manage potential or actual conflicts of interest. The effective operation of these arrangements depends, in part, on you complying with your obligation to disclose any potential conflicts of interest to us.

Unless otherwise stated, this opinion is based on the Australian Tax Law in force at the date of the provision of the advice and/or services. It is your responsibility to seek updated advice if you intend to rely on our advice at a later stage, due to frequent changes made to Australian Tax Law.

OWNERSHIP OF DOCUMENTS

All original documents obtained from you arising from this engagement will remain your property. However, we reserve the right to make a reasonable number of copies of the original documents for our records.

Our engagement will result in the production of Income Tax Returns and Financial Statements. Ownership of these documents will vest in you.

All other documents produced by us in respect of this engagement will remain our property.

We have a policy of exploring a legal right of lien over any of your documents in our possession in the event of a dispute between us. We have also established dispute resolution processes, details of which are available on request.

LIMITATION OF LIABILITY

Our liability may be limited by a scheme approved under Professional Standards Legislation. Further information on the scheme is available from the Professional Standards Council at

http://www.professionalstandardscouncil.gov.au/

REVIEW AND PREPARATION OF FINANCIAL STATEMENTS

As and when required throughout the year we will review your records and where applicable process certain data to enable the preparation of Interim and End of Year Financial Statements. The Financial Statements will be based on the information you provide to us and other information that our office accesses. As a result:

- You and your employees are responsible for the maintenance of the accounting systems and internal controls for your business entities. That includes the keeping and maintenance of all required books of account.
- Our firm is not being engaged to conduct a statutory audit of the financial records of any of your business entities and we will not express an Auditor's opinion as to the truth and fairness of the Financial Statements (unless otherwise specifically requested to do so).
- Our reports will be prepared for distribution to proprietors for the purpose noted above. We disclaim any assumption of responsibility for any reliance on our report to any person other than the proprietor and for any purpose other than for which it was prepared. Our reports will contain a "Compilation Report" to this effect.

PREPARATION & LODGEMENT OF INCOME TAX RETURNS

We will prepare and lodge all Income Tax Returns based on the Financial Statements prepared, as well as information you provide to us in relation to your business and personal tax affairs. We are required to prepare detailed workpapers which must be retained on our files for producing to the ATO if required at a future date for client audit or review purposes.

We are required by the *Tax Agents Services Act 2009* to satisfy ourselves as to the reasonableness of the information and claims being made in your Income Tax Returns. The Legislation provides the basis for this and may require us to make further enquiries with you from time to time in relation to your Taxation Returns. Where possible, we will endeavour to identify the information that will be required in advance.

We are entitled to rely on the records provided as being both accurate and complete.

We will have your Income Tax Returns lodged on time, as required by the Australian Taxation Office, provided we are in receipt of all information to prepare your Returns no later than two months prior to the due date for lodgement. This avoids the delays that generally occur in our Firm just prior to lodgement dates.

We will take all possible steps to have your Returns lodged on time, however we offer no guarantee unless



we have received the information within the abovementioned timeframe.

We also advise that we are legally prevented from electronically lodging your Income Tax Returns until such time as we receive a signed Declaration back in our office to do so.

When Returns are left to the last minute, due to time constraints it may not be possible to have them forwarded to you for signature and a signed Declaration back in our office to enable lodgement by the due date.

Whilst we exercise due care in preparing your Returns from information supplied to us, the provisions of the *Income Tax Assessment Act* place the responsibility for the contents of the Returns (including the necessary substantiation records provided to us) with the taxpayer.

CORPORATE AFFAIRS MATTERS

There are various requirements of the Australian Securities & Investments Commission (ASIC) that must be adhered to in relation to Companies that you may be involved with. This includes notifying ASIC of various changes to the details of Directors and Shareholders, preparation, and lodgement of Annual Company Statements etc.

We will prepare and lodge the appropriate documents in relation to matters that affect your company as soon as practical after being provided with the information. These will be forwarded to you for signature prior to lodgement. Many of these documents must be lodged within a short period of time after the change occurs.

In this regard, documents not returned to our office by the due date will incur additional lodgement fees and/or additional processing fees. You will be advised of relevant due dates for lodgement.

The Corporate Affairs Division of our practice utilises an electronic recording system to keep track of all company data. It is not possible to maintain the integrity of this system if documents are lodged by other means. We are still required to input the details of a change into our electronic system. In this regard, we must be informed of any changes or matters that may affect your companies.

BUSINESS ACTIVITY STATEMENTS AND INSTALMENT ACTIVITY STATEMENTS

Should we be instructed by you, we will prepare and lodge the appropriate BAS and IAS as and when required on a quarterly or monthly basis as soon as practical after being provided with the information to do so. At present, the deadline for lodgement of these documents is the 28th day after the end of each quarter (for quarterly lodgers). However, as Tax Agents, we are

given a further four (4) week extension, but this must be lodged through our Tax Agent system.

If we are not provided with the information by the 14th day of the particular lodgement month, we will not be able to guarantee that we will have the above Statements lodged on time. This is due to the extraordinary level of work imposed by the Australian Taxation Office on our Firm during the two weeks prior to lodgement dates.

If the information is provided later than the 14th day of the said month, we will endeavour to have the documents lodged by the due date, however we offer no guarantees, and penalties for late lodgement may be imposed (subject to extensions that may be provided by the Australian Taxation Office from time to time).

SPECIFIC MATTERS TO BE RESEARCHED

From time to time you may request advice from us which may not be able to be provided immediately, due to the issues and facts to be considered.

With the complexity of the superannuation legislation and regulations, the magnitude of the Taxation Laws which we must consider, as well as other non-taxation issues, it may not be possible to provide you with an immediate answer.

We will endeavour to provide you with an immediate and quick answer where appropriate, however to ensure that you receive a professional service and accurate advice a more detailed investigation into the facts may be required.

AUTHORITY TO ACT ON YOUR BEHALF WITH THE ATO

There are a number of functions we are required to carry out on your behalf with the Australian Taxation Office and in particular the following accounts for you and your associated entities:

- Income Tax Account
- Integrated Client Account
- BAS Roles

This Agreement allows us to act on your behalf – to make various changes as they arise, update communication preferences, and lodge documents which have been appropriately signed by an authorised signatory.

USE OF SOFTWARE

We may use software and other electronic tools in providing our services. If we provide you with access to these programs, you acknowledge that they are not your property, were developed for our purposes and without consideration of any purpose for which you might use them. We make no representations or



warranties as to the sufficiency or appropriateness of the information contained therein.

TELEPHONE & EMAIL ADVICE

Telephone and email communications and advice are recorded in writing on your file for quality assurance and professional indemnity insurance purposes. We encourage you to telephone or email us for advice on matters of concern. However simple, the advice may save you significant time and money.

Our fees are based on time, which includes telephone calls and email correspondence. Time spent by our team in relation to these matters will be recorded on your WIP and may be billed to you at the discretion of the partner in charge.

PRINCIPLES OF DETERMINING FEE LEVELS

The Institute recommends that its members conform to prescribed guidelines in determining fee levels. The Institute does not issue a standard scale of professional fees due to the diversity of services offered by Accountants and the degree of skill attached to those services. Additionally, the Institute does not intervene between an Accountant and client on the question of professional fees charged. However, the Institute has issued guidelines for establishing fee levels to ensure that, on the one hand you are fairly charged and, on the other, that our firm is remunerated appropriately for the services we perform for you.

The charge-out rates applied to the time incurred take account of staff salaries, direct costs associated with providing the service, and indirect costs associated with operating our practice. These rates are reviewed on a periodic basis.

Special services, such as unusual audit and investigation assignments, management advisory services, and the need to provide these services at little or no prior notice, requires us to ensure we have the available staff with the necessary qualifications to handle all challenges that we may face.

With ever changing taxation and other laws, we are required to undertake significant education and training programs to ensure that we have the ability to provide you with the right advice. On many occasions (due to the ever changing laws), it is a necessity that specialist research will be undertaken on particular matters that pertain to your file. A clear record of this time is maintained.

The manner in which we monitor the work carried out for you is based on the time we spend in relation to your affairs. This is the same as many other professionals charge for the services they provide. The time is recorded in 'Time Records' we keep for you and when

the job is completed, we use this as a guide to determine your fees. While we are required to record all time, it does not mean we will bill you for that time.

The only commodity we have to sell is our knowledge and ability to perform accounting functions on your behalf. Therefore, to ensure an equitable remuneration to our Firm for the services we provide, an efficient record is maintained of time spent on your file.

We do not necessarily bill you for all the time that is allocated to your file, but the recording system does provide us with a guide as to the amount of time we have utilised in providing you with the highest quality service possible.

FEES

HFB Super Pty Ltd processes super funds on a daily basis, with interim invoices issued on a quarterly basis, for work completed the previous quarter.

For additional compliance work, outside the scope of end of financial year processing, we issue invoices to you for the work that is carried out. The interim invoices also exclude any outlays paid on your behalf to suppliers, such as Audit, Actuarial and Title Searches.

Our Fees are based on the nature and complexity of the work involved, level of experience and expertise required, degree of responsibility applicable to the work, inherent risks associated with the service and the expected time required.

CREDIT TERMS

Our credit terms are strictly 14 days from invoice.

We issue statements on a monthly basis for amounts outstanding at the end of the month.

DESTRUCTION OF RECORDS

Under the current Corporations Law, you are required to retain your records (in a safe and secure place) for a minimum of five years. This includes keeping original documentation to verify expenditure claimed.

After this five year period our office will confidentially dispose of these old files, being workpapers and correspondence files.

If you would like your records returned to you in this regard, please notify our office when returning your acceptance.

AUTHORITY TO RELEASE INFORMATION

By acknowledging this Engagement Agreement, you authorise any third party to release information relating to the financial affairs of your SMSF to HFB Group. This may include (but is not limited to) bank,



investment, insurance, superannuation and property information and statements.

REFERRALS

Our firm may refer you to an external service provider where we believe them to be a good fit for you and in no way do we do this with the expectation of the referral of clients or work from the said provider in return.

Some service providers may in return refer clients to our firm – we do not however accept any referral fees or commission.

Please note that it is up to you to determine if the provider is suitable for your needs.

ENTITIES PROVIDING SERVICE

Full details of our Legal Structure are as follows:

HFB Super Pty Ltd

HFB Super Pty Ltd ABN: 66 600 231 089 Tax Agent Number: 24 805 931

Our Team

Name Position Shona Sherman Director

Danielle Barrow Senior Associate
Cate Morse Accountant

Associated Entities

HFB Super Strategies Pty Ltd HFB Accounting Pty Ltd HFB Advisory Pty Ltd HFB Wilsons Pty Ltd

Team of Associated Entity Directors

Tim Davis Shona Sherman Samantha Sheriff Joshua McDade Chris Jones Stephen Wilson

TEAM OF PROFESSIONALS – INDICATIVE CHARGE RATES

 Director
 \$300 - \$400

 Senior Accountant
 \$180 - \$250

 Accountant
 \$150 - \$170

 Undergraduate
 \$130 - \$140

 Administration Support
 \$120

The rates (excluding GST) are those applicable as at the date of the Engagement Agreement.

They may change from time to time based on the changes in our firm costs (in particular Annual Wage and Rental increases) and the skill level of various team members as and when they undertake further studies.



CONFIRMATION OF ENGAGEMENT

Obviously, there are many issues to consider in this engagement and we ask that you consider all aspects of this agreement to ensure you are satisfied with the scope of our engagement. Please contact us if you have any questions about this agreement.

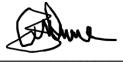
Once you are satisfied with the terms of our engagement, would you please sign and date this agreement.

As mentioned above, if you do not return this Engagement Agreement signed, nor contact us with changes to the engagement, yet continue to provide us with information and instructions regarding your financial affairs, the terms and information provided in this agreement will bind us both.

We are delighted for the opportunity to provide accounting and taxation services to you and your business and we look forward to continuing our close working relationship with you for many years to come.

I acknowledge that I have read and understand the terms of the engagement and hereby accept them.

Dated this 22 / 04 / 2021



Dime
Signature
Bruce Durie
Print Name
Christine McCarthy
Signature
Christine McCarthy
Jon McCarthy
Signature
Ionathan McCarthy
Print Name
Michele Durie
Signature
Michele Durie
Print Name
SMSF Name:
The Lawcleve Superannuation Fund

To the trustee of the LAWCLEVE SUPERANNUATION FUND PO Box 178, Cleveland Queensland 4163

Dear Trustees

Audit Engagement Letter

Objectives and Scope of the Audit

You have requested that we audit the financial statements of the LAWCLEVE SUPERANNUATION FUND for the year ended 30/06/2020. 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 30/06/2020, 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 LAWCLEVE SUPERANNUATION FUND

SIGNED:

Bruce Durie

Michele Durie

Michele Durie

DATED: 22 / 04 / 2021

Mr Anthony Boys PO Box 3376 Rundle Mall SA 5000

Dear Anthony,

LAWCLEVE SUPERANNUATION FUND Superannuation Fund Trustee Representation Letter

In connection with your audit examination of the financial report of **LAWCLEVE SUPERANNUATION FUND** ('the Fund') for the year ended 30/06/2020, 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 30/06/2020 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 SISR.
- (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 LAWCLEVE SUPERANNUATION FUND

Bruce Durie

Trustee

Michele Durie

Trustee

Jon McCarthy

Jonathan Mccarthy

Trustee

Christine McCarthy

Christine Mccarthy

Trustee

Lawcleve Superannuation Fund Projected Investment Strategy

For the year ended 30 June 2021

Background

The Trustees of the Fund have devised this Investment strategy for the Fund considering the objective of the Fund and in line with the governing rules of the Fund and superannuation law. Through this investment strategy the Trustees are seeking to maximise the superannuation benefits for all its members of the Fund having regard to risk and reward of each type of investment.

Among other things, the Trustees have considered and determined that the Fund's current asset mix of assets are appropriate for its members for the financial year. Trustees have given regard to the members age and their in-ability to withdraw from the Fund their superannuation interests for retirement purposes in devising a strategy for the next financial year.

The Fund has four members:

- Bruce Durie is 69 years of age and is transitioning to retirement. His member balance as at 30 June 2020 was \$1,019,701.56.
- Michele Durie is 62 years of age and is eligible for retirement. Her member balance as at 30 June 2020 was \$149,657.55.
- Jon McCarthy is 68 years of age and is transitioning to retirement. His member balance as at 30 June 2020 was \$1,531,305.96.
- Christine McCarthy is 74 years of age and is retired. Her member balance as at 30 June 2020 was \$138,547.91.

Investment Objective

To maximise returns and minimise the risks of investment of the Fund's assets in managing and providing superannuation benefits to members and their dependants in meeting their retirement needs.

To ensure all investments are consistent with the governing rules of the Fund and appropriate Superannuation Legislations and the Fund's investment strategy.

The Trustees wish to have two separate investment pools – one for each family. The Fund has predominately invested in Australian listed securities in order to earn regular investment income.

Risk & Return on Investments

Each investment decision will be made with due regard to the associated, risk and expected return. With this in mind, the Trustees will, from time to time, seek professional investment advice in order to assist in the process of determining what investments are suitable for the Fund and also taking into account the concerns of the members.

The overall strategy is to maximise the returns of the Fund's investments and minimise the exposure of risk from any particular investment, the Fund will try to maintain a diversified portfolio.

In making a decision on the types of investments made by the Fund, the Trustees have consulted with the members in this regard. They have taken into account the members overall risk profile and their concerns about various investment opportunities.

After discussions with the members of the Fund, the Trustees have determined that they will invest most of the Fund in Australian listed securities and keep at some cash for unforeseen circumstances or future investment opportunities.

Liquidity of Fund's Assets

Each investment decision will be made with due regard to the cash flow requirements of the Fund. The Trustees will consider the liabilities (current and prospective) of the Fund and ensure adequate cash is maintained by the Fund to meet its liabilities as and when they fall due.

The Fund's liquidity needs will be considered at the time of each investment and also during the regular review of the Fund's portfolio and investment strategy.

The Trustees have considered and determined that the current investment provides the Fund with all the necessary expenses of the Fund for the next year.

The Trustees are aware that Bruce, Jon and Christine currently have account based pensions. In the current economic environment, income from the assets are sufficient to meet the minimum pension requirement.

Asset Class

The Fund's asset classes as at the beginning of the year (1st July 2019) and as close of the year (30th June 2020) are as below with the Trustees asset allocation for the following year:

Asset Class	Assets 1/07/2019 \$	Assets 30/06/2020 \$	Target Range (% of Total Fund Assets)
Australian Shares	1,718,002	1,845,086	% - <u></u> %
International Shares	70,505	81,249	% - <u></u> %
Cash	352,078	340,930	% - <u></u> %
Australian Fixed Interest	373,315	281,901	<u></u> % - <u></u> %
International Fixed Interest	69,204	66,656	<u></u> % - <u></u> %
Mortgages			<u></u> % - <u></u> %
Direct Property	139,878	134,472	<u></u> % - <u></u> %
Listed Property			<u> </u>
Other	20,000	63,333	0 % - 10 %

Insurance Cover

The Trustees will assess the need of insurance for all members and will seek financial insurance advice where necessary to ensure all members are adequately insured. Insurance policies may be held by the fund or by members personally.

Review

This Fund's strategy will be reviewed regularly and updated if any modifications are required.

Approved at meeting of Trustees dated: 21 / 04 / 2021

Bruce Durie

Trustee

Michele Durie

Michele Durie

Trustee

Jon McCarthy

Trustee

Christine McCorthy

Christine McCarthy

Trustee

Lawcleve Superannuation Fund

Projected Investment Strategy – Memorandum of Resolution

For the year ended 30 June 2021

ADOPTION OF INVESTMENT STRATEGY:

The investment strategy for the financial year 2020 - 21, formulated by the Trustees of the Fund to achieve investment objectives of the Fund having regard to the whole of the circumstances of the Fund was tabled. The following was discussed:

1. Risk & Return on Investments

Have Trustees considered the risk involved in making, holding and realising a single asset class with risk to likely return of the fund, having regard to its objectives and its expected cash flow requirements for the next financial year.

2. Risk Associated with limited diversification

Have Trustees considered lack of diversification in this investment strategy, all associated risks due to inadequate diversification and considered the following:

- Current volatility and investment climate in local and international share market - loss of capital;
- Low interest rates offered by deposit taking entities & Banks;
- Age of members, members wishes etc;
- Quality of the current property investment, rental return.

3. Liquidity of the Fund's Assets

Have Trustees considered the liquidity of the Fund's investments having regard to its expected cash flow requirements in the next two years and considered the following;

- Ability of the fund to discharge its existing and future liabilities;
- Ability of the fund to make any LRBA loan repayments considering anticipated contributions from members:
- Cash inflow and Fund expenses from past investment performance of the Fund.

RESOLUTION:

It was resolved to adopt the Investment Strategy as set out in the attached document and implement the strategy for the following year.

CLOSURE:

Signed as a true record -

Date: 21 / 04 / 2021

Bruce Durie

Trustee

Jon McCarthy

Trustee

Michele Durie
Michele Durie
Trustee
Christine McCarthy

Christine McCarthy

Trustee

Self-managed superannuation fund annual return 2020

To complete this annual return

this	The Self-managed superann instructions 2020 (NAT 716) you to complete this annual The SMSF annual return car	uation fund annual return (6) (the instructions) can assist return. (not be used to notify us of a you must update fund details the Change of details for	■ Print clearly, using a BLAC ■ Use BLOCK LETTERS an SMITHES Place X in ALL applicabl Postal address for ann Australian Taxation C GPO Box 9845 [insert the name and of your capital city] For example; Australian Taxation C GPO Box 9845 SYDNEY NSW 2001	d print one characteristics of the boxes. Description of the boxes of	cter per box.
Se	ection A: Fund inf	ormation	S To assist prod	cessing, write the	fund's TFN at
1	Tax file number (TFN)	Provided		ges 3, 5, 7 and 9	
2	Name of self-managed	y law to request your TFN. You ar rror in processing your annual retu superannuation fund (SMSF	urn. See the Privacy note in the	N but not quoting Declaration.	it could increase
LA	WCLEVE SUPERANNUAT	ION FUND			
3	Australian business nur	nber (ABN) (if applicable)	086893121		
4	Current postal address				
_) Box 24				
Sub	urb/town			State/territory	Postcode
Cle	eveland			QLD	4163
5	Annual return status Is this an amendment to the	SMSF's 2020 return?	A No X Yes		
	Is this the first required return	for a newly registered SMSF?	B No X Yes		

Who should complete this annual return?

	Tax File Number Provided
_	SF auditor
Auditor's	
Title: Mr Family nam	
Boys	
First given	name Other given names
Anthony	William
SMSF AL	uditor Number Auditor's phone number
100014	140 61410712708
Postal ad	ldress
PO Box	3376
Suburb/tov	wn State/territory Postcode
Rundle	Mall SA 5000
5.	Day Month Year
Date aud	it was completed A 20 / 04 / 2021
Was Par	t A of the audit report qualified? B No Yes X
\\\ D	4 D of Alice and
was Par	t B of the audit report qualified? C No X Yes
If Part B	of the audit report was qualified, reported issues been rectified?
	Teported issues been rectilied:
7 Elec	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 034070 Fund account number 241331
	Fund account name
	Lawcleve Superannuation Fund
	Lawron or outperannation i and
	I would like my tax refunds made to this account. X Go to C.
	/// de te e.
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
	L
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
	AUSTUSTSINIST

	Tax File Number Provided
8	Status of SMSF Australian superannuation fund Does the fund trust deed allow acceptance of the Government's Super Co-contribution and Low Income Super Amounts? A No Yes X Fund benefit structure B A Code C No Yes X
9	Was the fund wound up during the income year? No X Yes) If yes, provide the date on which the fund was wound up / Month / Year Have all tax lodgment and payment obligations been met? No Yes
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 Section B: Income. Yes X Exempt current pension income amount A \$ 147,447
	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?
	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.

				Tax File Number	Provided	d l
Section B: Income	!					
Do not complete this secti the retirement phase for the notional gain. If you are entit	entire year, there was n	o other incom	e that was	assessable, and you ha	ve not reali	sed a deferred
11 Income Did you have a capir (CGT) event during		Yes X	\$10,000 or 2017 and t	capital loss or total capital you elected to use the the the deferred notional gair and attach a Capital gains	ransitional C n has been r	CGT relief in realised,
	applied an or rollover? M No	Yes [Code			
	Ne	et capital gain	A \$		44,404	
Gross rer	nt and other leasing and l	niring income	B \$			
	C	Gross interest	c \$		2,647	
	Forestry manage sch	ed investment neme income	X \$			
Gross foreign inc	ome					Loss
D1 \$	14,877 Net fo	reign income	D \$		14,877	
Australian franking	credits from a New Zeala	and company	E \$			Number
		ransfers from foreign funds	F \$			0
	Gross pay	ments where N not quoted	н \$			
Calculation of assessable Assessable employer co	contributions Ontributions Gros	s distribution partnerships	I \$			Loss
R1 \$		ked dividend amount	J \$		8,965	
plus Assessable personal co		iked dividend amount	к \$		46,014	
plus #*No-TFN-quoted cor		dend franking	L S		19,720	
R3 \$ [(an amount must be include	od even if it is zero)	credit *Gross trust	м \$		18,898	Code
less Transfer of liability to life		distributions	Ψ		10,000	
company or PS	C	Assessable contributions (R1 plus R2 lus R3 less R6)	R \$		74,275	
Calculation of non-arm's le *Net non-arm's length private co	mnany dividende	Other income	s \$		205	Code
U1 \$ plus *Net non-arm's length trus		sable income changed tax	т \$			
U2 \$	000 10	status of fund	1 D			_
plus *Net other non-arm's ler	lei (subject t	et non-arm's ngth income to 45% tax rate) lus U2 plus U3)	U \$			
#This is a mandatory label.		SS INCOME labels A to U)	w \$		230,005	Loss
*If an amount is entered at this label,	Exempt current per	nsion income	Y \$		147,447	
check the instructions to ensure the correct tax treatment has been applied.	TOTAL ASSESSA INCOME (W /e.				82,558	Loss

Page 4

Tax File Number	Provided

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	j
Interest expenses within Australia	A1 \$		A2 \$		
Interest expenses overseas	B1 \$		B2 \$		
Capital works expenditure	D1 \$		D2 \$		
Decline in value of depreciating assets	E1 \$		E2 \$		
Insurance premiums – members	F1 \$		F2 \$		
SMSF auditor fee	H1 \$	976	H2 \$	783	
Investment expenses	I1 \$	361	12 \$	6,433	
Management and administration expenses	J1 \$	5,946	J2 \$	4,562	
Forestry managed investment scheme expense	U1 \$		U2 \$		Code
Other amounts	L1 \$		📋 L2 \$		
Tax losses deducted	M1 \$				
	TOTA	L DEDUCTIONS	ТОТ	AL NON-DEDUCTIBLE EXPENSES	
	N \$	7,283		11,778	
	,	(Total A1 to M1)		(Total A2 to L2)	
	#TAXA	ABLE INCOME OR LOSS	Loss	AL SMSF EXPENSES	
	0\$	75,275	👸	19,061	
#This is a mandatory label.		TOTAL ASSESSABLE INCOME less TOTAL DEDUCTIONS)		(N plus Y)	

Tax File Number	Provided

Section D: Income tax calculation statement

#Important:

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

ou will have specified a zero amour	nt.		
13 Calculation statement	#Taxable incom	e A \$	75,275
Please refer to the Self-managed superannuation			(an amount must be included even if it is zero)
fund annual return instructions	#Tax on taxable income	e T1 \$	11,291.25
2020 on how to complete the	#Tax o		(an amount must be included even if it is zero)
calculation statement.	no-TFN-quote	d J\$	0.00
L	contribution	S	(an amount must be included even if it is zero)
	Gross ta	× B \$	11,291.25
			(T1 plus J)
Foreign income tax offset	1		
C1\$	50.12		
Rebates and tax offsets			efundable non-carry forward tax offsets
C2\$		C \$	(C1 plus C2)
		SUBT	· · · · · · · · · · · · · · · · · · ·
		T2 \$	11,241.13
		+	(B less C – cannot be less than zero)
Early stage venture capital li	mited		
partnership tax offset			
D1\$	0.00		
Early stage venture capital li tax offset carried forward fro	mited partnership	Non-re	efundable carry forward tax offsets
D2\$	0.00	D \$	0.00
Early stage investor tax offse		ΦΨ	(D1 plus D2 plus D3 plus D4)
D3\$	0.00		(2 · plac 22 plac 20 plac 2 ·)
Early stage investor tax offse			
carried forward from previou		SUBT	OTAL 2
D4\$	0.00	T3 \$	11,241.13
			(T2 less D – cannot be less than zero)
Complying fund's franking cr	redits tax offset		
E1\$	20,487.49		
No-TFN tax offset	20, 107.10		
E2\$			
National rental affordability scl	heme tax offset		
E3\$			
Exploration credit tax offset		Refund	dable tax offsets
E4\$	0.00	E \$	20,487.49
			(E1 plus E2 plus E3 plus E4)
Г	# T AV D AVA = -	- -	
	#TAX PAYABLI	155	(T3 less E – cannot be less than zero)
L		Costi-	,
		G \$	n 102AAM interest charge
		GΦ	

Page 6

Tax File Number	Provided

Credit for interest on early payments amount of interest			
H1\$			
Credit for tax withheld – foreign resid withholding (excluding capital gains)	ent		
12\$			
Credit for tax withheld – where ABN or TFN not quoted (non-individual)			
13 \$			
Credit for TFN amounts withheld from payments from closely held trusts	<u> </u>		
. —	0.00		
Credit for interest on no-TFN tax offs	et		
16\$			
Credit for foreign resident capital gair withholding amounts	S Eligible cred	its	
	0.00 H \$		
	(H1 plus	s H2 plus H3 plus H5 plus H6 plus H8	В)
# Tax off (Remainder of refunda	set refunds ble tax offsets)		9,246.36
(33.33.33.33.33.33.33.33.33.33.33.33.33.	,	(unused amount from label I an amount must be included even	
	PAYG instalr		
	K \$		
	Supervisory	levy	
	L\$		259.00
	Supervisory	levy adjustment for wound	up funds
	М \$		
		levy adjustment for new fu	nds
	N \$		
AMOUNT DUE OR RE	LINDARI E		
A positive amount at S is	what you owe,		-8,987.36
while a negative amount is refu	ndable to you. (T5 p	ilus G less H less I less K plus L le	ess M plus N)
This is a mandatory label.			
no o a mandatory labor.			
ection E: Losses			
Losses	Tax losses carrie	ed forward U \$	
If total loss is greater than \$100,000,	to later inco	ome years	
complete and attach a Losses schedule 2020.	Net capital loss forward to later inco		

				Tax File Nu	mber Provided	
Section F: Memb	er informati	on				
		•••				
MEMBER 1	☐ Ma ☐ Othar					
Title: Mr X Mrs Miss Family name	Ms Other					
Mccarthy						
First given name		Other given r	names			
Jonathan		James				
Member's TFN See the Privacy note in the De	eclaration. Provided			Date of birth	Provide	ed
Contributions	OPENING ACCOU	NT BALANCE	\$		1,461,355.29	
Refer to instructions for	completing these labe	115.	Proceeds fi	rom primary resider	nce disposal	
Employer contribution	าร		Receipt dat	to		
A \$			H1	Le Day Mon	h Year	
ABN of principal emp				foreign superannua	/tion fund amount	
A1	•		I \$		and an out	
Personal contribution	S		· -	sable foreign supera	annuation fund amou	nt
B \$	118,00		J \$ [
CGT small business r	etirement exemption	_	Transfer fro	m reserve: assessa	ble amount	
c \$			K \$			
	5-year exemption amo	ount	_	m reserve: non-ass	essable amount	
D \$			L \$_			
Personal injury election	on			ns from non-complusly non-complying		
Spouse and child cor	ntributions.		T \$	asiy flori compiying	idilds	
F \$	iti ibution is		Any other c	contributions		
Other third party cont	ributions		(including S	Super Co-contribution e Super Amounts)	ons and	
G \$			M \$	<u>s caper / ii ii carrie, </u>		
тотл	AL CONTRIBUTIONS	·		124,889	9.38	
		(Sum c	of labels A to I	M)		l
Other transactions	Allo	cated earnings or losses			18,408.71	Loss
Accumulation phase	account balance	Inward rollovers and	Р\$			
S1 \$	121,051.82	transfers				
Retirement phase acc		Outward rollovers and transfers	Q \$			
S2 \$	1,410,254.14	Lump Sum payments			0	Code
Retirement phase acc - CDBIS	count balance	Income	DO &		20 520 00	Code
S3 \$	0.00	stream payments	n2		36,530.00	IVI
0 TRIS Count	CLOSING ACCOL	JNT BALANCI	s \$	(S1 plus S2 plus	1,531,305.96	
	Accumulation	on phase value	X1 \$			
	Retireme	nt phase value	X2 \$			
	Outstanding ling borrowing arrang	mited recourse ement amount	Y \$			
Page 8	S	ensitive (whe	en comple	ted)		

		Tax File Numb	er Provided
MEMBER 2			
Title: Mr Mrs X Miss Ms Other			
Family name			
Mccarthy			
First given name	Other given names		
Christine			
Member's TFN See the Privacy note in the Declaration. Provided		Date of birth	Provided
Contributions OPENING ACCOL	INT BALANCE \$		143,577.36
Refer to instructions for completing these lab	JIO	s from primary residence di	sposal
Employer contributions	H \$[alaka	
A \$	Receipt o	date Day Month /	Year
ABN of principal employer		/ / / ole foreign superannuation f	und amount
A1	I \$	ore rereign eapera made on r	
Personal contributions		essable foreign superannua	ation fund amount
В \$	J [
CGT small business retirement exemption	Transfer	from reserve: assessable a	mount
C \$	K \$[
CGT small business 15-year exemption am	Transiti	from reserve: non-assessal	ole amount
Personal injury election	L \$[tions from non complying f	unda
E \$		tions from non-complying f iously non-complying funds	
Spouse and child contributions	т \$[
F \$	Any othe	er contributions g Super Co-contributions a	nd
Other third party contributions	Low Inco	ome Super Amounts)	
G \$	M \$[
TOTAL CONTRIBUTIONS	N \$		
TOTAL CONTRIBUTIONS	(Sum of labels A	to M)	
	`	,	Loss
Other transactions Allo	ocated earnings or losses		1,439.45 L
	I Inward . r		
Accumulation phase account balance	rollovers and P \$[transfers		
S1 \$ 0.00	Outward -		
Retirement phase account balance – Non CDBIS	rollovers and Q \$ transfers		
S2 \$ 138,547.91	Lump Sum — - + F		Code
,	payments R1 \$[0 []
Retirement phase account balance – CDBIS	Income		Code
S3 \$ 0.00	stream R2 \$ payments		3,590.00 M
	1-17		
0 TRIS Count CLOSING ACCO	UNT BALANCE S \$		138,547.91
	_	(S1 plus S2 plus S3)	
Accumulati	on phase value X1 \$		
Retireme	ent phase value X2 \$		
	mited recourse		
borrowing arrang			
	Sensitive (when comp	oleted)	Page 9

				Tax File Nu	ımber [Provided
MEMBER 3						
Title: Mr Mrs X Miss Ms Other						
Family name Durie						
First given name	Other given r	names				
Michele	Annette					
Member's TFN See the Privacy note in the Declaration. Provided				Date of birth		Provided
Contributions OPENING ACCOU	NT BALANCE	\$			127	,641.02
Refer to instructions for completing these label	,io.	Proceeds	from	primary residen	ce disposa	al
Employer contributions		Receipt of	late	Day Mont	h	Year
A \$		H1			\Box / \Box	
ABN of principal employer			le for	eign superannua	tion fund a	mount
A1 Personal contributions		\$	naaah	la faraign aunare	annuation f	iund amount
B \$ 26,22	l	J \$[355aD	le foreign supera	il il luation i	
CGT small business retirement exemption		Transfer f	rom r	eserve: assessa	ble amoun	t
C \$		K \$				
CGT small business 15-year exemption am D \$			rom r	eserve: non-ass	essable an	nount
Personal injury election			ions f	rom non-comply	vina funds	
E \$		and previ	ously	non-complying	funds	
Spouse and child contributions F \$		T \$ L Any other	r cont	rihutions		
F \$Other third party contributions		(including	ı Supe	er Co-contribution uper Amounts)	ons and	
G \$		M \$[1110 0			
TOTAL CONTRIBUTIONS		of labels A t	○ M)	26,227	7.70	
Other transactions Allo	cated earnings					Loss
The transactions	cated earnings or losses	O \$[4	,211.17 L
Accumulation phase account balance	Inward rollovers and					
S1 \$ 149,657.55	transfers					
Retirement phase account balance	Outward rollovers and	Q \$				
- Non CDBIS 0.00	transfers Lump Sum	_				Code
	payments	R1 \$				0
Retirement phase account balance – CDBIS	Income	- - + [Code
S3 \$ 0.00	stream payments	R2 \$[
0 TRIS Count CLOSING ACCO	JNT BALANCI	S \$[(S1 plus S2 plus		,657.55
Accumulati	on phase value	X1 \$ [
Retireme	nt phase value	X2 \$ [
Outstanding li borrowing arrang	mited recourse ement amount					

Page 10

					Tax File N	umber [Provided	
MEMBER 4								
Title: Mr X Mrs Miss Ms Oth	er							
Family name Durie								
First given name	Oth	ner given na	ames					
Bruce	М	ichael						
Member's TFN See the Privacy note in the Declaration.	ovided				Date of birth		Provided	i
Contributions OPENING	ACCOUNT BA	LANCE	\$			1,095	5,811.07	
Refer to instructions for completing the	ese labels.		Proceed	ls from	n primary resider	nce dispos	al	
Employer contributions			Receipt	date	Day Mon	ith	Year	
A \$ ABN of principal employer	24,385.98	ı	H1		reign superannua]/[
A1			\$					
Personal contributions B \$			Non-ass	sessab	ole foreign super	annuation	fund amoun	t
CGT small business retirement exen	nption	7	Transfer	from r	reserve: assessa	able amour	nt	
CGT small business 15-year exemp	tion amount	_	K	from	roconio: non cor	ooooblo or	mount	
D \$		ľ		1101111	reserve: non-ass	sessable al	Hourit	
Personal injury election		(utions	from non-comp	lying funds		
E \$			and prev		non-complying			
Spouse and child contributions			T \$	er con	tributions			
F \$Other third party contributions		(i	includin	ıg Sup	er Co-contributi Super Amounts)	ons and		
G \$		_	M \$	orne c	super Amounts)			
			· I					
TOTAL CONTRIBU	JTIONS N S				24,38	5.98		
		(Sum of	labels A	to M)				
Other transactions	Allocated o	earnings or losses	o \$			7	7,495.49	Loss
Accumulation phase account balance	ce rollov	Inward ers and	Р\$					
S1 \$ 20,69		ransfers	ΓΨ					
Retirement phase account balance Non CDBIS	rollov	Outward vers and ransfers	Q \$					
S2 \$ 999,01	10.97 Lun	_	R1 \$			47	7,800.00	Code
Retirement phase account balance - CDBIS		Income	ام ما					Code
S3 \$	0.00 pa	stream yments	R2 \$			45	5,200.00	M
0 TRIS Count CLOSING	ACCOUNT B	ALANCE	S \$		(S1 plus S2 plu		9,701.56	
Acc	umulation pha	se value	X1 \$					
	Retirement pha		X2 \$					
	anding limited r g arrangement	amount	Y \$					
	Sensiti	ve (whe	n com	pleted	d)		Pa	age 11

				Tax File Number	Provided	
Section 5 ASSE	n H: Assets and liabilit	ies				
	alian managed investments	Listed trusts	A	\$	442,816	
		Unlisted trusts	В	\$	195,672	
		Insurance policy	С	\$		
	Oth	er managed investments	D	\$	304,075	
5b Austr	ralian direct investments	Cash and term deposits	Ε	\$	396,702	
	ited recourse borrowing arrangements tralian residential real property	Debt securities	F	\$		
J1		Loans	G	\$	40,000	
	tralian non-residential real property	Listed shares	Н	\$	1,410,143	
J2 Ove	? \$[rseas real property	Unlisted shares	ı	\$	23,333	
J3 Aust	tralian shares	Limited recourse borrowing arrangements		\$		
Ove	rseas shares	Non-residential real property	K	\$		
Othe		Residential real property	L	\$		
J6	s \$perty count		М	\$		
J7		Other assets	0	\$	25,583	
5c Othe	r investments	Crypto-Currency	N	\$		
5d Overs	seas direct investments	Overseas shares	Р	\$	885	
	Overseas no	n-residential real property	Q	\$		
	Oversea	s residential real property	R	\$		
	Overse	as managed investments	S	\$		
		Other overseas assets	T	\$		
	TOTAL AUSTRALIAN AN (Sum of labe		U	\$	2,839,209	
5e In-ho	Did the fund have a loan to, lease to or investment in, related parties (known as in-house assets) at the end of the income year?	A No Yes X		\$	40,000	

	Tax File Number Provided
15f	imited recourse borrowing arrangements If the fund had an LRBA were the LRBA borrowings from a licensed financial institution? Did the members or related parties of the fund use personal guarantees or other security for the LRBA? A No Yes Yes Yes
16	ABILITIES Borrowings for limited recourse borrowing arrangements V1 \$
	Other borrowings V3 \$ Borrowings V \$
	Total member closing account balances ws 2,839,209 Reserve accounts X\$ Other liabilities Y\$ TOTAL LIABILITIES Z\$ 2,839,209 Action I: Taxation of financial arrangements (TOFA) Total TOFA gains H\$ Total TOFA losses I\$
Se	tion J: Other information
	trust election status the trust or fund has made, or is making, a family trust election, write the four-digit income year specified of the election (for example, for the 2019-20 income year, write 2020).

Tax i lie Mullibei Tovided	Tax File Number	Provided	
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Section K: Declarations



Penalties may be imposed for false or misleading information in addition to penalties relating to any tax shortfalls.

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

The ATO is authorised by the Taxation Administration Act 1953 to request the provision of tax file numbers (TFNs). We will use the TFN to identify the entity in our records. It is not an offence not to provide the TFN. However if you do not provide the TFN, the processing of this form may be delayed.

Taxation law authorises the ATO to collect information and disclose it to other government agencies. For information about your privacy go to ato.gov.au/privacy

TRUSTEE'S OR DIRECTOR'S DECLARATION:

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

Authorised trustee's, director's or public officer's si	gnature					
	<u> </u>	Day Month Year				
(Allen L		Date 22 7 04 / 2021 /				
Preferred trustee or director contact details:						
Title: Mr X Mrs Miss Ms Other						
Family name						
Durie						
First given name	Other given names					
Bruce	Michael					
Phone number 07 3286 1322 Email address						
Non-individual trustee name (if applicable)						
ABN of non-individual trustee						
Time taken to prepar	re and complete this annual return	Hrs				
The Commissioner of Taxation, as Registrar of provide on this annual return to maintain the int	the Australian Business Register, may us egrity of the register. For further informat	se the ABN and business details which you cion, refer to the instructions.				
TAX AGENT'S DECLARATION: I declare that the Self-managed superannuation fun provided by the trustees, that the trustees have given and correct, and that the trustees have authorised Tax agent's signature	ven me a declaration stating that the in					
		Day Month Year				
		Date / /				
Tax agent's contact details						
Title: Mr Mrs X Miss Ms Other						
Family name						
Sherman						
First given name	Other given names					
Shona	Lorraine					
Tax agent's practice						
Hfb Super Pty Ltd						
Tax agent's phone number	Reference number	Tax agent number				
07 32861322	MDRN	24805931				

Page 18 Sensitive (when completed)

Capital gains tax (CGT) schedule

2020

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 2020</i> available on our website at ato.gov.au for instructions on how to complete this schedule. 				
Tax file number (TFN	I) Pr	rovided					
		to request your TFN. You do not buld increase the chance of delay			n.		
Australian business	numl	ber (ABN) 95086893121					
Taxpayer's name							
LAWCLEVE SUPER	ANN	UATION FUND					
1 Current year cap	oital g	gains and capital losses					
Shares in companies listed on an Australian securities exchange	A \$	Capital gain	45,758	K \$	Capital loss	33,227	
Other shares	в\$.		L \$			
Units in unit trusts listed on an Australian securities exchange			19,208	M\$		8,971	
Other units	D \$;	33,084	N \$		1,228	
Real estate situated in Australia	E \$	5		o \$			
Other real estate	F \$)		P \$			
Amount of capital gains from a trust (including a managed fund)	G \$		11,982				
Collectables	н\$;		Q \$			
Other CGT assets and any other CGT events	ı \$;		R \$			
Amount of capital gain previously deferred under transitional CGT relief for superannuation funds	S \$;	0		ounts at labels K to R and em 2 label A – Total curre es.		
Total current year capital gains	J \$;	110,032				

			Ta	ax File Number Provided
2	Capital losses			
	Total current year capital losses	A	\$	43,426
	Total current year capital losses applied	В	\$	43,426
	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)		\$	
	Total capital losses applied	E	\$	43,426
		Ad	ld a	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	\$	
		to	lab	amounts at A and B and transfer the total lel V – Net capital losses carried forward er income years on your tax return.
4	CGT discount			
	Total CGT discount applied	A	\$	22,202
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	\$	44,404
				ss 2E less 4A less 5D (cannot be less than Transfer the amount at A to label A – Net

capital gain on your tax return.

	т	Tax File Number	Provided
7	7 Earnout arrangements		
	Are you a party to an earnout arrangement? A Yes, as a buyer $\begin{tabular}{c} \end{tabular}$ (Print $\begin{tabular}{c} \end{tabular}$ in the appropriate box.)	Yes, as a seller	No 🗌
	If you are a party to more than one earnout arrangement, copy and attach a details requested here for each additional earnout arrangement.	separate sheet to thi	s schedule providing the
	How many years does the earnout arrangement run for? B		
	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.		/ Loss
	Request for amendment If you received or provided a financial benefit under a look-through earnout right of to seek an amendment to that earlier income year, complete the following:	created in an earlier ir	ncome year and you wish
	Income year earnout right created F		
	Amended net capital gain or capital losses carried forward G \$		Loss
8	8 Other CGT information required (if applicable)		CODE
	Small business 15 year exemption – exempt capital gains A\$		/
	Capital gains disregarded by a foreign resident B \$		
	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 \$		

Tux The Humber	Tax File Number	Provided
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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

illionnation of the person authorised to sign the declaration. For information about your privacy go to ato.gov.au/privacy	
I declare that the information on this form is true and correct.	
Signature	
Same	Date Day Month Year Yea
Contact name	
Bruce Michael Durie	
Daytime contact number (include area code)	
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	LAWCLEVE SUPERANNUATION FUND	2020

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

22 / 04 / 2021

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 Lawcleve Superannuation Fund

Account Number 034070 241331 Client Reference MDRN

I authorise the refund to be deposited directly to the specified account

Signature

Some

Date

22 / 04 / 2021

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	MDRN
Agent's Phone Num	ber 07 32861322	Ta	ax Agent Number	24805931

LAWCLEVE SUPERANNUATION FUND

To the Trustees of:

LAWCLEVE SUPERANNUATION FUND

I, JONATHAN JAMES MCCARTHY, apply for admission to membership of the Fund and undertake as follows:-

- 1. I will be bound by the Trust Deed governing the Fund as it is presently constituted or as it may be varied from time to time.
- I understand the terms and conditions of the Trust Deed including benefits payable to Members and understand my rights and the rights of my dependants pursuant to the Trust Deed.

My personal details and those of my employer/s are attached to this application. I acknowledge that the discretion vested in you as to the application of benefits in circumstances where I cannot receive them myself is an absolute, free and unfettered discretion, but I express the wish that in the exercise of that discretion you give consideration to paying any such benefits to the following person, in the following proportions:

Name of Designated	Address of Designated	Relationship to Member	Proportion of Benefits
Beneficiary	Beneficiary		

I understand that the Trustee is required to request that I provide my Tax File Number for the purposes of Section 299F of the Superannuation Industry (Supervision) Act 1993. I further understand that I am under no obligation to supply this number, but that should I fail to do so, tax may be deducted from my account at the top marginal rate.

My Tax File Number is: 476 119 577

Dated:

Signature

JONATHAN JAMES MCCARTHY

LAWCLEVE SUPERANNUATION FUND

To the Trustees of:

LAWCLEVE SUPERANNUATION FUND

I, CHRISTINE MCCARTHY, apply for admission to membership of the Fund and undertake as follows:-

- 1. I will be bound by the Trust Deed governing the Fund as it is presently constituted or as it may be varied from time to time.
- 2. I understand the terms and conditions of the Trust Deed including benefits payable to Members and understand my rights and the rights of my dependants pursuant to the Trust Deed.

My personal details and those of my employer/s are attached to this application. I acknowledge that the discretion vested in you as to the application of benefits in circumstances where I cannot receive them myself is an absolute, free and unfettered discretion, but I express the wish that in the exercise of that discretion you give consideration to paying any such benefits to the following person, in the following proportions:

Name of Designated	Address of Designated	Relationship to Member	Proportion of Benefits
Beneficiary	Beneficiary		

I understand that the Trustee is required to request that I provide my Tax File Number for the purposes of Section 299F of the Superannuation Industry (Supervision) Act 1993. I further understand that I am under no obligation to supply this number, but that should I fail to do so, tax may be deducted from my account at the top marginal rate.

,	
Dated:	
Signature Christine	McCarthy
CHRISTINE MCC	ARTHY

My Tax File Number is: 480 856 410

LAWCLEVE SUPERANNUATION FUND

To the Trustees of:

LAWCLEVE SUPERANNUATION FUND

I, BRUCE MICHAEL DURIE, apply for admission to membership of the Fund and undertake as follows:-

- 1. I will be bound by the Trust Deed governing the Fund as it is presently constituted or as it may be varied from time to time.
- 2. I understand the terms and conditions of the Trust Deed including benefits payable to Members and understand my rights and the rights of my dependants pursuant to the Trust Deed.

My personal details and those of my employer/s are attached to this application. I acknowledge that the discretion vested in you as to the application of benefits in circumstances where I cannot receive them myself is an absolute, free and unfettered discretion, but I express the wish that in the exercise of that discretion you give consideration to paying any such benefits to the following person, in the following proportions:

Name of Designated	Address of Designated	Relationship to Member	Proportion of Benefits
Beneficiary	Beneficiary		

I understand that the Trustee is required to request that I provide my Tax File Number for the purposes of Section 299F of the Superannuation Industry (Supervision) Act 1993. I further understand that I am under no obligation to supply this number, but that should I fail to do so, tax may be deducted from my account at the top marginal rate.

My Tax File Number is: 476 218 296

Dated:

Signature

BRUCE MICHAEL DURIE

LAWCLEVE SUPERANNUATION FUND

To the Trustees of:

LAWCLEVE SUPERANNUATION FUND

I, MICHELE ANNETTE DURIE, apply for admission to membership of the Fund and undertake as follows:-

- 1. I will be bound by the Trust Deed governing the Fund as it is presently constituted or as it may be varied from time to time.
- I understand the terms and conditions of the Trust Deed including benefits payable to Members and understand my rights and the rights of my dependants pursuant to the Trust Deed.

My personal details and those of my employer/s are attached to this application. I acknowledge that the discretion vested in you as to the application of benefits in circumstances where I cannot receive them myself is an absolute, free and unfettered discretion, but I express the wish that in the exercise of that discretion you give consideration to paying any such benefits to the following person, in the following proportions:

Name of Designated	Address of Designated	Relationship to Member	Proportion of Benefits
Beneficiary	Beneficiary		

I understand that the Trustee is required to request that I provide my Tax File Number for the purposes of Section 299F of the Superannuation Industry (Supervision) Act 1993. I further understand that I am under no obligation to supply this number, but that should I fail to do so, tax may be deducted from my account at the top marginal rate.

My Tax File Number is: 483 767 816

Michele Durie

Dated:

Signature

MICHELE ANNETTE DURIE

The Trustees LAWCLEVE SUPERANNUATION FUND PO Box 178 Cleveland QLD 4163

Dear Trustees

Request to withdraw a lump sum from Pension Account

I request a lump sum benefit payment from my account based pension account number 4.

I confirm that I have met a condition of release as required by the SIS Act 1993.

I further confirm that the lump sum amount requested is less than my total benefits in the Fund.

Details of the lump sum:

Date of Payment: 3 April 2020 Lump Sum Amount: \$25,000.00

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

Kind regards

Bruce Durie

13 Edward Street, Alexandra Hills, Queensland 4161

Memorandum of Resolutions of the Trustees for LAWCLEVE SUPERANNUATION FUND

Present:	Bruce Durie Michele Durie John McCarthy Christine McCarthy
Lump Sum benefit payment from Pension:	The Trustees have received notification from the following member to withdraw a lump sum benefit payment from their pension account:
	The details are: Member Name: Bruce Durie Pension Account: ABP 4 Date of Payment: 3 April 2020 Lump Sum Amount: \$25,000.00
Trustee Acceptance:	The Trustees confirm receipt of the member's declaration that a condition of release had been met.
	The Trustees have ensured that the lump sum payment meets the requirements of the Fund's deed and does not breach the superannuation laws in relation to making payments to members.
Trustee Acknowledgement:	The Trustees have resolved to allow payment of the lump sum benefit on behalf of the member.
Closure:	There being no further business, the meeting was declared closed.
	Signed as a true and correct record
	Jame
	Bruce Durie
	Michele Durie
	Michele Durie
	Jon McCarthy
	Jon McCarthy
	Christine McCarthy
	,

Christine McCarthy

The Trustees LAWCLEVE SUPERANNUATION FUND PO Box 178 Cleveland QLD 4163

Dear Trustees

Request to withdraw a lump sum from Pension Account

I request a lump sum benefit payment from my account based pension account number 4.

I confirm that I have met a condition of release as required by the SIS Act 1993.

I further confirm that the lump sum amount requested is less than my total benefits in the Fund.

Details of the lump sum:

Date of Payment: 6 April 2020 Lump Sum Amount: \$10,800.00

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

Kind regards

Bruce Durie

13 Edward Street, Alexandra Hills, Queensland 4161

Memorandum of Resolutions of the Trustees for LAWCLEVE SUPERANNUATION FUND

Present:	Bruce Durie Michele Durie John McCarthy Christine McCarthy
Lump Sum benefit payment from Pension:	The Trustees have received notification from the following member to withdraw a lump sum benefit payment from their pension account:
	The details are: Member Name: Bruce Durie Pension Account: ABP 4 Date of Payment: 6 April 2020 Lump Sum Amount: \$10,800.00
Trustee Acceptance:	The Trustees confirm receipt of the member's declaration that a condition of release had been met.
	The Trustees have ensured that the lump sum payment meets the requirements of the Fund's deed and does not breach the superannuation laws in relation to making payments to members.
Trustee Acknowledgement:	The Trustees have resolved to allow payment of the lump sum benefit on behalf of the member.
Closure:	There being no further business, the meeting was declared closed.
	Signed as a true and correct record
	Filme
	Bruce Durie
	Michele Durie
	Michele Durie Jon McCarthy
	Jon McCarthy
	Christine McCarthy
	Christine McCarthy

The Trustees LAWCLEVE SUPERANNUATION FUND PO Box 178 Cleveland QLD 4163

Dear Trustees

Request to withdraw a lump sum from Pension Account

I request a lump sum benefit payment from my account based pension account number 4.

I confirm that I have met a condition of release as required by the SIS Act 1993.

I further confirm that the lump sum amount requested is less than my total benefits in the Fund.

Details of the lump sum:

Date of Payment: 15 April 2020 Lump Sum Amount: \$4,000.00

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

Kind regards

Bruce Durie

13 Edward Street, Alexandra Hills, Queensland 4161

Memorandum of Resolutions of the Trustees for LAWCLEVE SUPERANNUATION FUND

Present:	Bruce Durie Michele Durie John McCarthy Christine McCarthy
Lump Sum benefit payment from Pension:	The Trustees have received notification from the following member to withdraw a lump sum benefit payment from their pension account:
	The details are: Member Name: Bruce Durie Pension Account: ABP 4 Date of Payment: 15 April 2020 Lump Sum Amount: \$4,000.00
Trustee Acceptance:	The Trustees confirm receipt of the member's declaration that a condition of release had been met.
	The Trustees have ensured that the lump sum payment meets the requirements of the Fund's deed and does not breach the superannuation laws in relation to making payments to members.
Trustee Acknowledgement:	The Trustees have resolved to allow payment of the lump sum benefit on behalf of the member.
Closure:	There being no further business, the meeting was declared closed.
	Signed as a true and correct record
	Ame
	Bruce Durie
	Michele Durie
	Michele Durie Jon McCarthy
	Jon McCarthy
	Christine McCarthy
	Christine McCarthy

The Trustees LAWCLEVE SUPERANNUATION FUND PO Box 178 Cleveland QLD 4163

Dear Trustees

Request to withdraw a lump sum from Pension Account

I request a lump sum benefit payment from my account based pension account number 4.

I confirm that I have met a condition of release as required by the SIS Act 1993.

I further confirm that the lump sum amount requested is less than my total benefits in the Fund.

Details of the lump sum:

Date of Payment: 15 May 2020 Lump Sum Amount: \$4,000.00

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

Kind regards

Bruce Durie

13 Edward Street, Alexandra Hills, Queensland 4161

Memorandum of Resolutions of the Trustees for LAWCLEVE SUPERANNUATION FUND

Present:	Bruce Durie Michele Durie John McCarthy Christine McCarthy
Lump Sum benefit payment from Pension:	The Trustees have received notification from the following member to withdraw a lump sum benefit payment from their pension account:
	The details are: Member Name: Bruce Durie Pension Account: ABP 4 Date of Payment: 15 May 2020 Lump Sum Amount: \$4,000.00
Trustee Acceptance:	The Trustees confirm receipt of the member's declaration that a condition of release had been met.
	The Trustees have ensured that the lump sum payment meets the requirements of the Fund's deed and does not breach the superannuation laws in relation to making payments to members.
Trustee Acknowledgement:	The Trustees have resolved to allow payment of the lump sum benefit on behalf of the member.
Closure:	There being no further business, the meeting was declared closed.
	Signed as a true and correct record
	Dane.
	Bruce Durie
	Michele Durie
	Michele Durie
	Jon McCarthy
	Jon McCarthy
	Christine McCarthy
	<i>'</i>

Christine McCarthy

The Trustees LAWCLEVE SUPERANNUATION FUND PO Box 178 Cleveland QLD 4163

Dear Trustees

Request to withdraw a lump sum from Pension Account

I request a lump sum benefit payment from my account based pension account number 4.

I confirm that I have met a condition of release as required by the SIS Act 1993.

I further confirm that the lump sum amount requested is less than my total benefits in the Fund.

Details of the lump sum:

Date of Payment: 15 June 2020 Lump Sum Amount: \$4,000.00

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

Kind regards

Bruce Durie

13 Edward Street, Alexandra Hills, Queensland 4161

Memorandum of Resolutions of the Trustees for LAWCLEVE SUPERANNUATION FUND

Present:	Bruce Durie Michele Durie John McCarthy Christine McCarthy
Lump Sum benefit payment from Pension:	The Trustees have received notification from the following member to withdraw a lump sum benefit payment from their pension account:
	The details are: Member Name: Bruce Durie Pension Account: ABP 4 Date of Payment: 15 June 2020 Lump Sum Amount: \$4,000.00
Trustee Acceptance:	The Trustees confirm receipt of the member's declaration that a condition of release had been met.
	The Trustees have ensured that the lump sum payment meets the requirements of the Fund's deed and does not breach the superannuation laws in relation to making payments to members.
Trustee Acknowledgement:	The Trustees have resolved to allow payment of the lump sum benefit on behalf of the member.
Closure:	There being no further business, the meeting was declared closed.
	Signed as a true and correct record
	Jame.
	Bruce Durie
	Michele Durie
	Michele Durie
	Jon McCarthy
	Jon McCarthy
	Christine McCarthy
	Christine McCarthy

The Trustees Lawcleve Superannuation Fund Level 1, 80 Old Cleveland Road CAPALABA, QLD, 4157

Dear Trustees

Treatment of pension withdrawals

I wish to confirm that it is my intention to withdraw at least the minimum pension for the 2021 financial year.

I request the Trustees of the Fund to treat any withdrawals in excess of the minimum as a lump sum superannuation benefit payment from my accounts in the following order:

Account: Account Code: MCCJON00002A Account Based Pension 5 MCCJON00055P

I confirm that I have met a condition of release with a 'nil' cashing restriction under the rules of the Fund and as required by the SIS Act 1993 and Regulations.

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

Kind regards

Jonathan McCarthy

Level 1, 80 Old Cleveland Road, Capalaba, Qld, 4157

The Trustees Lawcleve Superannuation Fund Level 1, 80 Old Cleveland Road CAPALABA, QLD, 4157

Dear Trustees

Treatment of pension withdrawals

Christine McCarthy

I wish to confirm that it is my intention to withdraw at least the minimum pension for the 2021 financial year.

I request the Trustees of the Fund to treat any withdrawals in excess of the minimum as a lump sum superannuation benefit payment from my Pension account.

I confirm that I have met a condition of release with a 'nil' cashing restriction under the rules of the Fund and as required by the SIS Act 1993 and Regulations.

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

Kind regards

Christine McCarthy

Level 1, 80 Old Cleveland Road, Capalaba, Qld, 4157

The Trustees Lawcleve Superannuation Fund Level 1, 80 Old Cleveland Road CAPALABA, QLD, 4157

Dear Trustees

Treatment of pension withdrawals

I wish to confirm that it is my intention to withdraw at least the minimum pension for the 2021 financial year.

I request the Trustees of the Fund to treat any withdrawals in excess of the minimum as a lump sum superannuation benefit payment from my accounts in the following order:

Account:	Account Code:
Accumulation	DURBRU00002A
Account Based Pension 5	DURBRU00012P
Account Based Pension 3	DURBRU00010P

I confirm that I have met a condition of release with a 'nil' cashing restriction under the rules of the Fund and as required by the SIS Act 1993 and Regulations.

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

Kind regards

Bruce Durie

Level 1, 80 Old Cleveland Road, Capalaba, Qld, 4157

Memorandum of Resolutions of the Trustees for Lawcleve Superannuation Fund

Present: Jonathan McCarthy

Christine McCarthy Michele Durie Bruce Durie

Treatment of pension withdrawals for 2021FY:

The Trustees have received notification from Jonathon McCarthy, Christine McCarthy and Bruce Durie requesting that any withdrawals in excess of their minimum pagaint for the year anded 20 June 2021 by treated as a

minimum pension for the year ended 30 June 2021 be treated as a

superannuation benefit payment.

The Trustees also acknowledge receipt of the member's declaration that a

condition of release with a 'nil' cashing restriction has been met.

Governing Rules: It was confirmed that this strategy is in accordance with the governing rules of

the Fund and the superannuation laws.

Resolution: The Trustees resolved to allocate the withdrawals as follows:

Jonathan McCarthy

Amount	Account	Treatment
Minimum pension	Account Based Pension	Pension payment
Excess above minimum pension	Accumulation (until exhausted) then	Lump sum
	Account Based Pension 5	

Christine McCarthy

Amount	Account	Treatment
Minimum pension	Account Based Pension	Pension payment
Excess above	Account Based Pension 1	Lump sum
minimum pension		

Bruce Durie

Amount	Account	Treatment
Minimum pension	Account Based Pension	Pension payment
Excess above minimum pension	Accumulation (until exhausted) then Account Based Pension 5 (until exhausted) then	Lump sum
	 Account Based Pension 3 	

The Trustees also resolved to ensure any PAYG and TBAR obligations are reported to the ATO in a timely manner.

no further busines	ss, the meeting was	declared closed.
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ne McCar	thy	
Carthy		
iele Du	rie	
)		
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	rue and correct re McCarthy Carthy Carthy Carthy Carthy	carthy Carthy Lele Durie

.....

Bruce Durie

Closure:

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: $Mr X Mrs \square Miss \square Ms \square Other$				
Surname:	Durie			
Given Name(s):	Bruce			
Date of Birth:	12/06/1952	Gender: Male X	Female \Box	
Mailing Address:	13 Edward Street ALEXANDRA HILLS QLD 4161			
2. TAX FILE N	JMBER (TFN) DETAILS			
You are not legally red 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 no	ed at the top margina	al tax rate plus	
TFN:	476 218 296			
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. BENEFICIAR	RY NOMINATION			
You can nominate one or more beneficiaries to receive the benefit from your pension and insurance (if any) in the event of your death, provided you have nominated a dependant as defined under superannuation law. Refer to the Product Disclosure Statement for more information.				
Do you wish to nominate a beneficiary? No – go to section 6. X Yes – complete the next question.				
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. PLEASE SPEAK TO YOUR FINANCIAL ADVISER AND LEGAL **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 **AFTER CONSULTATION WITH** YOUR LEGAL ADVISER then go to section 6 X Yes – please complete section 5.

5. REVERSIONARY BENEFICIARY DETAILS $Mr \square Mrs X Miss \square Ms \square Other$ Title: Surname: Durie Given Name(s): Michelle Gender: Male Female X Date of Birth: 18/11/1958 Relationship Spouse X Child \square Financial Dependant \square Interdependant \square (including de facto) to Self: Share of Benefit 1 0 0 . 0 0 % Mailing Address: 13 Edward Street

ALEXANDRA HILLS QLD 4161

6. PENSION PAYMENT DETAILS

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.

6a. STANDARD PENSION			
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: \$\frac{100}{200} \text{ To be advised}			
Please specify the amount per payment - This must be at least the minimum amount. Go to section 6c.			
GO TO SECTION 6C.			
Ch. NON COMMUTADI E DENCIONI			
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: 01/07/2019			
Print Member Name: Bruce Durie			
Capacity: X Member			

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 \square Miss \square Ms \square Other				
Surname:	McCarthy			
Given Name(s):	Jonathan			
Date of Birth:	22/02/1953	Gender: Male X	Female \Box	
Mailing Address:	12 Esplanade WELLINGTON POINT QLD 4160			
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 no	ed at the top margina	al tax rate plus	
TFN:	476 119 577			
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. BENEFICIAL	RY NOMINATION			
You can nominate one or more beneficiaries to receive the benefit from your pension and insurance (if any) in the event of your death, provided you have nominated a dependant as defined under superannuation law. Refer to the Product Disclosure Statement for more information.				
Do you wish to nominate a beneficiary? No – go to section 6. X Yes – complete the next question.				
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 ☐ Ms ☐ Other		
Surname:	Christine		
Given Name(s): McCarthy			
Date of Birth:	10/10/1946	Gender: Male \square Female X	
Relationship to Self:	Spouse X Child ☐ (including de facto)	Financial Dependant	
Mailing Address: 12 Esplanade WELLINGTON POINT QLD 4160			

6. PENSION PAYMENT DETAILS

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.

6a. STANDARD PENSION			
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: \$\frac{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?			
, <u>, , , , , , , , , , , , , , , , , , </u>			
7. MEMBER DECLARATION AND SIGNATURE			
7. MEMBER DECLARATION AND SIGNATURE			
Members Signature: Dated: 01/07/2019			
Print Member Name: Jonathan McCarthy			
Capacity: X Member			

Bruce Durie LAWCLEVE SUPERANNUATION FUND 13 Edward Street, Alexandra Hills, Queensland 4161

Dear Sir/Madam

LAWCLEVE SUPERANNUATION FUND Commencement of Account Based Pension

I hereby request the trustee to commence a Account Based Pension with a commencement date of 01/07/2019 with \$316,822.92 of the superannuation benefits standing to my member's account in the fund. It is confirmed that the pension balance will automatically revert to Michele Durie upon the death of the member.

This balance contains:

a Taxable Balance of: \$315,309.96; and a Tax Free Balance of: \$1,512.96. Tax Free proportion: 0.48%.

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 \$15,840.00 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

Bruce Durie

13 Edward Street, Alexandra Hills, Queensland 4161

LAWCLEVE SUPERANNUATION FUND

Minutes of a Meeting of the Trustee(s)
held on _____ at 13 Edward Street, Alexandra Hills, Queensland 4161

PRESENT:	Bruce Durie, Michele Durie, Jonathan Mccarthy and Christine Mccarthy
PENSION COMMENCEMENT:	Bruce Durie wishes to commence a new Account Based Pension with a commencement date of 01/07/2019.
	The Pension Account Balance used to support this pension will be \$316,822.92, consisting of:
	 Taxable amount of \$315,309.96; and Tax Free amount of \$1,512.96 Tax Free proportion: 0.48%.
CONDITION OF RELEASE:	It was resolved that the member has satisfied a Condition of Release 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 Michele Durie 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 \$15,840.00 in the frequency of at least an annual payment.
CLOSURE:	Signed by the trustee(s) pursuant to the Fund Deed.

Bruce Durie Chairperson LAWCLEVE SUPERANNUATION FUND Bruce Durie 13 Edward Street, Alexandra Hills, Queensland 4161

Dear Sir/Madam

LAWCLEVE SUPERANNUATION FUND **Commencement of Account Based Pension**

Bruce Durie, Michele Durie, Jonathan Mccarthy and Christine Mccarthy as trustee for LAWCLEVE SUPERANNUATION FUND acknowledges that Bruce Durie has advised their intention to commence a new Account Based Pension on 01/07/2019. It is confirmed that the pension balance will automatically revert to Michele Durie 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 \$15,840.00. 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

Bruce Durie

Michele Durie

Michele Durie

Jon McCarthy

Jonathan Mccarthy

Christine McCarthy

Christine Mccarthy

Jonathan Mccarthy
LAWCLEVE SUPERANNUATION FUND
12 Esplanade, Wellington Point, Queensland 4160

Dear Sir/Madam

LAWCLEVE SUPERANNUATION FUND Commencement of Account Based Pension

I hereby request the trustee to commence a Account Based Pension with a commencement date of 01/07/2019 with \$1,461,355.29 of the superannuation benefits standing to my member's account in the fund. It is confirmed that the pension balance will automatically revert to Christine Mccarthy upon the death of the member.

This balance contains:

a Taxable Balance of: \$1,158,531.68; and a Tax Free Balance of: \$302,823.61. Tax Free proportion: 20.72%.

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 \$73,070.00 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

Jonathan Mccarthy

12 Esplanade, Wellington Point, Queensland 4160

Jon McCarthy

LAWCLEVE SUPERANNUATION FUND

Minutes of a Meeting of the Trustee(s) held on at 13 Edward Street, Alexandra Hills, Queensland 4161

at 15 Edward Street, Alexandra Hills, Queensiand 4101	
PRESENT:	Bruce Durie, Michele Durie, Jonathan Mccarthy and Christine Mccarthy
PENSION COMMENCEMENT:	Jonathan Mccarthy wishes to commence a new Account Based Pension with a commencement date of 01/07/2019.
	The Pension Account Balance used to support this pension will be \$1,461,355.29, consisting of:
	 Taxable amount of \$1,158,531.68; and Tax Free amount of \$302,823.61 Tax Free proportion: 20.72%.
CONDITION OF RELEASE:	It was resolved that the member has satisfied a Condition of Release 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 Christine Mccarthy 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 \$73,070.00 in the frequency of at least an annual payment.
CLOSURE:	Signed by the trustee(s) pursuant to the Fund Deed

Bruce Durie Chairperson LAWCLEVE SUPERANNUATION FUND Jonathan Mccarthy 12 Esplanade, Wellington Point, Queensland 4160

Dear Sir/Madam

LAWCLEVE SUPERANNUATION FUND Commencement of Account Based Pension

Bruce Durie, Michele Durie, Jonathan Mccarthy and Christine Mccarthy as trustee for LAWCLEVE SUPERANNUATION FUND acknowledges that Jonathan Mccarthy has advised their intention to commence a new Account Based Pension on 01/07/2019. It is confirmed that the pension balance will automatically revert to Christine Mccarthy 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 \$73,070.00. 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

Michele Durie
Michele Durie
Michele Durie
Michele Durie
McCarthy

Jonathan Mccarthy

Christine McCarthy

Christine Mccarthy

Mr Jonathan Mccarthy 12 Esplanade Wellington Point, Queensland 4160

Dear Sir/Madam

LAWCLEVE 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 01/07/2019

Account Code: DURBRU00009P

Account Description: Account Based Pension 2

Balance to Commute: \$278,479.83

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

Yours sincerely

Mr Bruce Durie 13 Edward Street

Alexandra Hills, Queensland 4161

LAWCLEVE SUPERANNUATION FUND

Minutes of a Meeting of the Trustee(s)

held on 01 July 2019 at 12 Esplanade, Wellington Point, Queensland 4160

PRESENT: Bruce Durie, Michele Durie, Jonathan Mccarthy and Christine Mccarthy

PENSION COMMUTATION: Bruce Durie has requested to commute the following accounts to an existing

accumulation account on 01/07/2019.

Account Code: DURBRU00009P

Account Description: Account Based Pension 2

Balance to Commute: \$278,479.83

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.

Jonathan Mccarthy Chairperson

Jon McCarthy

Mr Bruce Durie 13 Edward Street Alexandra Hills, Queensland 4161

Dear Bruce Durie

LAWCLEVE SUPERANNUATION FUND Commutation of Account Based Pension

We confirm that the full commutation of your Account Based Pension (DURBRU00009P) has been completed.

An amount of \$278,479.83 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

Mr Jonathan Mccarthy

Trustee 12 Esplanade

Wellington Point, Queensland 4160

Jon McCarthy

Mr Bruce Durie 13 Edward Street Alexandra Hills, Queensland 4161

Dear Sir/Madam

LAWCLEVE 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 01/07/2019

Account Code: MCCJON00006P

Account Description: Account Based Pension 2

Balance to Commute: \$1,328,132.14

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

Yours sincerely

Mr Jonathan Mccarthy 12 Esplanade

Wellington Point, Queensland 4160

LAWCLEVE SUPERANNUATION FUND

Minutes of a Meeting of the Trustee(s)

held on 01 July 2019 at 13 Edward Street, Alexandra Hills, Queensland 4161

PRESENT: Bruce Durie, Michele Durie, Jonathan Mccarthy and Christine Mccarthy

PENSION COMMUTATION: Jonathan Mccarthy has requested to commute the following accounts to an

existing accumulation account on 01/07/2019.

Account Code: MCCJON00006P

Account Description: Account Based Pension 2

Balance to Commute: \$1,328,132.14

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.

Bruce Durie Chairperson Mr Jonathan Mccarthy 12 Esplanade Wellington Point, Queensland 4160

Dear Jonathan Mccarthy

LAWCLEVE SUPERANNUATION FUND Commutation of Account Based Pension

We confirm that the full commutation of your Account Based Pension (MCCJON00006P) has been completed.

An amount of \$1,328,132.14 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

Mr Bruce Durie Trustee

13 Edward Street Alexandra Hills, Queensland 4161 Christine Mccarthy
LAWCLEVE SUPERANNUATION FUND
12 Esplanade, Wellington Point, Queensland 4160

Dear Sir/Madam

LAWCLEVE SUPERANNUATION FUND Continuation of Account Based Pension

We have recently completed a review of the assets of **LAWCLEVE SUPERANNUATION FUND** and your Account Based Pension account in the Fund as at 01 July 2019. It is confirmed that the pension balance will automatically revert to Jonathan Mccarthy upon the death of the member.

Based on the account balance and the legislative requirements for Account Based Pension, I have set out below the Minimum income stream which must be taken for the year ending 30 June 2020.

Your balance contains:

a Taxable Balance of: \$63,047.44; anda Tax Free Balance of: \$80,529.92

Tax Free proportion: 56.09%.

Your Minimum income stream applicable is \$3,590.00.

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

Yours sincerely

Christine McCarthy

Christine Mccarthy

12 Esplanade, Wellington Point, Queensland 4160

Bruce Durie LAWCLEVE SUPERANNUATION FUND 13 Edward Street, Alexandra Hills, Queensland 4161

Dear Sir/Madam

LAWCLEVE SUPERANNUATION FUND Continuation of Account Based Pension

We have recently completed a review of the assets of **LAWCLEVE SUPERANNUATION FUND** and your Account Based Pension account in the Fund as at 01 July 2019. It is confirmed that the pension balance will automatically revert to Michele Durie upon the death of the member.

Based on the account balance and the legislative requirements for Account Based Pension, I have set out below the Minimum income stream which must be taken for the year ending 30 June 2020.

Your balance contains:

a Taxable Balance of: \$494,920.57; anda Tax Free Balance of: \$284,067.58

Tax Free proportion: 36.47%.

Your Minimum income stream applicable is \$19,470.00.

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

Yours sincerely

Bruce Durie

13 Edward Street, Alexandra Hills, Queensland 4161

LAWCLEVE SUPERANNUATION FUND

Minutes of a Meeting of the Trustee(s)

held on at 13 Edward Street, Alexandra Hills, Queensland 4161

PRESENT:

Bruce Durie, Michele Durie, Jonathan Mccarthy and Christine Mccarthy

PENSION CONTINUATION:

Christine Mccarthy wishes to continue existing Account Based Pension with a commencement date of 01/07/2015. It is confirmed that the pension balance will automatically revert to Jonathan Mccarthy upon the death of the member.

The Pension Account Balance as at 01/07/2019 \$143,577.36, consisting of:

- Taxable amount of \$63,047.44; and
- Tax Free amount of \$80,529.92
- Tax Free proportion: 56.09%.

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

PAYMENT:

It was resolved that the trustees have agreed to pay at least the minimum pension payment for the current year of \$3,590.00 in the frequency of at least an annual

payment.

CLOSURE:

Signed by the trustee(s) pursuant to the Fund Deed.

BruceDurie Chairperson

LAWCLEVE SUPERANNUATION FUND

Minutes of a Meeting of the Trustee(s)

held on_____at 13 Edward Street, Alexandra Hills, Queensland 4161

PRESENT: Bruce Durie, Michele Durie, Jonathan Mccarthy and Christine Mccarthy

PENSION CONTINUATION: Bruce Durie wishes to continue existing Account Based Pension with a

commencement date of 01/07/2017. It is confirmed that the pension balance will

automatically revert to Michele Durie upon the death of the member.

The Pension Account Balance as at 01/07/2019 \$778,988.15, consisting of:

- Taxable amount of \$494,920.57; and

- Tax Free amount of \$284,067.58
- Tax Free proportion: 36.47%.

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

PAYMENT: It was resolved that the trustees have agreed to pay at least the minimum pension

payment for the current year of \$19,470.00 in the frequency of at least an annual

payment.

CLOSURE: Signed by the trustee(s) pursuant to the Fund Deed.

BruceDurie Chairperson

LAWCLEVE SUPERANNUATION FUND Deductions Notice Letter

Bruce Durie, Michele Durie, Jonathan Mccarthy and Christine Mccarthy as trustee for LAWCLEVE SUPERANNUATION FUND acknowledges that

Jonathan Mccarthy

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

\$18000.00

for contributions paid in the year ended 30 June 2020. The Trustee has taken action to deduct the appropriate level of tax from the contributions claimed.

Bruce Durie

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 2019 to 30 June 2020 is: \$

Jonathan Mccarthy

/ /

Date:

LAWCLEVE SUPERANNUATION FUND Deductions Notice Letter

Bruce Durie, Michele Durie, Jonathan Mccarthy and Christine Mccarthy as trustee for LAWCLEVE SUPERANNUATION FUND acknowledges that

Michele Durie

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 2020. The Trustee has taken action to deduct the appropriate level of tax from the contributions claimed.

Bruce Durie

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 2019 to 30 June 2020 is: \$

Michele Durie

Date: / /

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

Section A: Your details

1	lax file number (TFN)			
	PROVIDED			
	•			
	The ATO does not collect this information pr			
	super fund. Your super fund is authorised to requ			
	Industry (Supervision) Act 1993, the Income Tax offence not to provide your TFN. However, if you			
	they will not be permitted to accept the contribut			
	contact the entity you are providing this form to.	norm (o) covered by the motion of the entire	nation about your	pirvacy picacc
	, , , ,			
2	Name			
Title:	MR			
Fami	ly name			
МС	CARTHY			
First	given name	Other given names		
JOI	NATHAN	JAMES		
_				
3	Date of birth 22/02/1953			
4	Current postal address			
	ESPLANADE			1
12	ESPLANADE			
Subu	urb/town/locality		State/territory	Postcode
	ELLINGTON POINT		QLD	4160
	ntry if outside of Australia		(Australia only)	(Australia only)
	,			
5	Daytime phone number (include area code)			
	(
Se	ection B: Super fund's detail	S		
	-			
6	Fund name			
LA۱	WCLEVE SUPERANNUATION FUND			
7	Fund Australian business number (ABN)	95086893121		
8	Member account number MCCJON0000)2A		
9	Unique Superannuation Identifier (USI) ((if known)		

Se	ection C: Contribution details	
10	Personal contribution details	
	Is this notice varying an earlier notice? No X	
	If you answered 'No' complete the Original Notice to Claim a Tax Deduction section be If you answered 'Yes' complete the Variation of previous valid notice of intent section be	
	ORIGINAL NOTICE TO CLAIM A TAX DEDUCTION	
11	Financial year ended 30 June 20 20	
12	My personal contributions to this fund in the above financial year	\$ 118000.00
13	The amount of these personal contributions I will be claiming as a tax deduction	\$ 18000.00
Se	ection D: Declaration	
sign	s form has a declaration where you say the information in it is correct and complete. Please the declaration. If you provide false or misleading information, or fail to take reasonable callalties imposed by taxation law.	
	INTENTION TO CLAIM A TAX DEDUCTION	
	① Complete this declaration if you have not previously lodged a valid notice with your s	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 before the end of the contributions were made in which the contributions in which the contributions 	ncome year following the year
	Name (Print in BLOCK LETTERS)	
	JONATHAN MCCARTHY	
	Jon McCarthy	Date 22 / 04 / 2021
Sup	Send your completed notice to your super fund. Do not send it to us . The information oper fund. We don't collect this information; we only provide a format for you to provide the i	
	VARIATION OF PREVIOUS VALID NOTICE OF INTENT	
14	Financial year ended 30 June 20	
15	My personal contributions to this fund in the above financial year	\$
16	The amount of these personal contributions claimed in my original notice of intent	\$
17	The amount of these personal contributions I will now be claiming as a tadeduction	× \$

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	- D.
	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.

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

Section 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	: MRS
Fam	ily name
DU	IRIE
First	given name Other given names
MI	CHELE ANNETTE
3	Date of birth 18/11/1958
•	10/11/1930
4	Current postal address
13	EDWARD STREET
Ļ	
	urb/town/locality State/territory Postcode
Ь	EXANDRA HILLS QLD (Australia only) (Australia only) (Australia only)
Cou	ntry if outside of Australia (Australia Only) (Australia Only)
5	Douting above number (include area code)
5	Daytime phone number (include area code)
Se	ection B: Super fund's details
_	
6	Fund name
LA	WCLEVE SUPERANNUATION FUND
7	Fund Australian business number (ABN) 95086893121
	`
8	Member account number DURMIC00001A
9	Unique Superannuation Identifier (USI) (if known)

Se	ection C: Contribution details	
10	Personal contribution details	
	Is this notice varying an earlier notice? No X Yes	
	If you answered 'No' complete the Original Notice to Claim a Tax Deduction section below the section of previous valid notice of intent section below the variation of previous valid notice of intent section below.	
	ORIGINAL NOTICE TO CLAIM A TAX DEDUCTION	
11	Financial year ended 30 June 20 20	
12	My personal contributions to this fund in the above financial year	\$ 26227.70
13	The amount of these personal contributions I will be claiming as a tax deduction	\$ 25000.00
Se	ection D: Declaration	
sign	form has a declaration where you say the information in it is correct and complete. Please rethe declaration. If you provide false or misleading information, or fail to take reasonable care alties imposed by taxation law. INTENTION TO CLAIM A TAX DEDUCTION	
	Complete this declaration if you have not previously lodged a valid notice with your su	uper 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 based in whole or part on these contributions I have not included any of the contributions in an earlier valid notice. Name (Print in BLOCK LETTERS) 	come year following the year
	MICHELE DURIE	
	Michele Durie	^{Date} 25 / 04 / 2021
	Send your completed notice to your super fund. Do not send it to us . The information on per fund. We don't collect this information; we only provide a format for you to provide the in	
	VARIATION OF PREVIOUS VALID NOTICE OF INTENT	
14	Financial year ended 30 June 20	
15	My personal contributions to this fund in the above financial year	\$
16	The amount of these personal contributions claimed in my original notice of intent	\$
17	The amount of these personal contributions I will now be claiming as a tax deduction	\$

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.



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.

8 M 1 T H 8 T H

 \blacksquare Place X in ALL applicable boxes.



1	Tax file number (TFN)	4	7	6	1	1	9		5	7	7
---	-----------------------	---	---	---	---	---	---	--	---	---	---

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

Inte: Mr X Mrs Miss Ms Other	
Family name	•
MCCARTHY	
First given name Other given names	
JONATHAN JAMES	
3 Date of birth 2 2 / 0 2 / 1 9 5 3	
4 Current residential address	
4 Current residential address 1 2 E S P L A N A D E	
	State/territory Postcode
1 2 E S P L A N A D E	State/territory Postcode
12 ESPLANADE	State/territory Postcode Q L D 4 1 6 0
1 2 E S P L A N A D E	

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Se	ection B: Cancellation
5	Are you cancelling a previous transfer balance account event? No Yes Open Previous transfer balance account event? Yes Open Previous transfer balance account event. If you previously reported multiple events you only need to include details of the event/s you wish to cancel. Refer to the instructions for more information on how to cancel a previous report.
_	ection C: Fund/Supplier/Provider details If you are an SMSF trustee completing this report for a member of your SMSF you may leave questions 6 and 7 blank.
6	Intermediary/Supplier name
7	Australian business number (ABN) Your contact details are required in case we need to speak to you about details supplied on this report. Provide your contact details in Section G.
8 L	Fund/Provider name A W C L E V E S U P E R A N N U A T I O N F U N D
9	Fund/Provider ABN 9 5 0 8 6 8 9 3 1 2 1
10	Fund/Provider TFN 9 8 9 8 8 1 1 2

	7
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
11	Sthey transfer belongs can event
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 X
	Structured settlement – post 1 July 2017
	Go to Event details on the next page

	her information
_	Total super balance
10	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
_	
V	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. Day Month Year
17	Effective date 0 1 / 0 7 / 2 0 1 9
18	Value \$ 1 3 2 8 1 3 2 · 1 4
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
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	Unique superannuation identifier (USI)
	If you don't have a USI leave this question blank
23	Member account number
	MCCJONOOO6P
24	Member client identifier (number)
	If you don't have a member client identifier leave this question blank MCCAJJONAOOOO

	7										
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										
	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 X										
	Reversionary income stream										
	LRBA repayment										
1/	Other transfer balance cap event Solution Go to Event details on the next page.										
17	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 controller poor Youly 2017 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 1 9
18	Value \$ 1 4 6 1 3 5 5 · 2 9
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-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	1 1 ,
	If you don't have a USI leave this question blank
23	Member account number
	MCCJONO008P
24	
	If you don't have a member client identifier leave this question blank MCCAJONAOOO1

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 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
	Oo 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
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.
	do to Event details on the next page.

Ct Ot	her information
	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
0	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 Day / Month / Year / Year
18	Value \$ ·
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
Se	ection E-3: 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
	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
22	Unique superannuation identifier (USI)
	If you don't have a USI 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

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
	Oo 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
14	Other transfer balance cap event Solution Go to Event details on the next page.
17	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.

15 Total super balance Complete this question to provide information regarding the total super balance of a member.		.
Complete this question to provide information regarding the total super balance of a member. Refer to all opo authorisal superbalance for more information on Total super balance used to calculate your member's total super balance and is only required from 30 June 2018. Event type: Accountation phase value Retirement phase value (30 June 2018 only) 16 Concessional contributions Information regarding the notional taxed contributions of a member. ① Only use this event type if you are reporting information for your member's national taxed contributions. Event type: Uncapped notional taxed contributions (from 2017–18 financial year onwards) Event details ② 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 Yellow	Ot	her information
Refer to sto.gox.autotalsuperbalance for more information on Total super balance.	15	
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.		
Accumulation phase value Retirement phase value (30 June 2018 only) 16 Concessional contributions Information regarding the notional taxed contributions of a member. ① 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) Event details ② 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. Pay Mortion New		
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) Event details Vou must complete Q17 and Q18 for each event reported with the exception of Commutation authority (secessed) and commutation authority – defined benefit. Refer to the instructions for more information on how to complete this section. Desprice of the second of the super system. If unknown leave 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 Section 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. 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 or after 1 July 2017 Market-linked capped defined benefit income stream or after 1 July 2017 Capped defined benefit income stream or after 1 July 2017 Capped defined benefit income stream or after 1 July 2017 Capped defined benefit income stream or after 1 July 2017 Market-linked capped defined benefit income stream or after 1 July 2017 Capped defined benefit income stream or after 1 July 2017 Market-linked capped defined benefit income stream or after 1 July 2017 Capped defined benefit income stream or after 1 July 2017 Member account number Member account number Member client identifier (number)		
Event details 1 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	16	
Event details • You must complete 017 and 018 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. • Yes		Only use this event type if you are reporting information for your member's notional taxed contributions.
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		
commutation authority - defined benefit. Refer to the instructions for more information on how to complete this section. Property Property	Εv	ent details
17 Effective date	0	
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 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 21 Is the account closed? No Yes 22 Unique superannuation identifier (USI) If you don't have a USI leave this question blank Wember account number Account-based income stream on or after 1 July 2017 Admit account closed? No Yes Account details Member account number	17	
(ie, paid out of the super system) ① 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 Section E-4: Member account details ① 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 Capped defined benefit income stream just before 1 July 2017 Market-linked capped defined benefit income stream on or after 1 July 2017 Capped defined benefit income stream on or after 1 July 2017 21 Is the account closed? No Yes 22 Unique superannuation identifier (USI) If you don't have a USI leave this question blank Member client identifier (number)	18	Value \$ ·
Commutation authority – commuted in part. If unknown leave this question blank. No Yes Section 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. 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 Capped defined benefit income stream on or after 1 July 2017 21 Is the account closed? No Yes 22 Unique superannuation identifier (USI) If you don't have a USI leave this question blank Wember account number 4 Member client identifier (number)	19	
Section 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. 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 Member account number Member client identifier (number)		
Section 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. 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 1sthe account closed? No Yes Unique superannuation identifier (USI) If you don't have a USI leave this question blank Wember account number Member client identifier (number)		·
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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 1s the account closed? No Yes Unique superannuation identifier (USI) If you don't have a USI leave this question blank Member account number Member client identifier (number)		
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 Member account number Member client identifier (number)	Se	ection F-4: Member account details
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 22 Unique superannuation identifier (USI) If you don't have a USI leave this question blank Member account number Member client identifier (number)	0	Only certain event types require you to answer question 20. Refer to the instructions for more information on how to
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 22 Unique superannuation identifier (USI) If you don't have a USI leave this question blank Member account number 24 Member client identifier (number)	20	
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 22 Unique superannuation identifier (USI) If you don't have a USI leave this question blank Member account number 23 Member account number 24 Member client identifier (number)		Account-based income stream
Capped defined benefit income stream on or after 1 July 2017 21 Is the account closed? No Yes 22 Unique superannuation identifier (USI) If you don't have a USI leave this question blank 23 Member account number 24 Member client identifier (number)		Capped defined benefit income stream just before 1 July 2017
21 Is the account closed? No Yes 22 Unique superannuation identifier (USI) If you don't have a USI leave this question blank Member account number 24 Member client identifier (number)		Market-linked capped defined benefit income stream just before 1 July 2017
No Yes 22 Unique superannuation identifier (USI) If you don't have a USI leave this question blank Member account number 24 Member client identifier (number)		Capped defined benefit income stream on or after 1 July 2017
22 Unique superannuation identifier (USI) If you don't have a USI leave this question blank 23 Member account number 24 Member client identifier (number)	21	Is the account closed?
If you don't have a USI leave this question blank		No Yes
23 Member account number 24 Member client identifier (number)	22	
24 Member client identifier (number)		If you don't have a USI leave this question blank
· ,	23	Member account number
· ,		
If you don't have a member client identifier leave this question blank	24	·
		If you don't have a member client identifier leave this question blank

Se	ecti	on F: 1	Γhir	d p	ar	ty c	det	ails	5															
	You only need to complete Section F if the Reporting event type is Child death benefit income stream or Child reversionary income stream. Otherwise leave Section F blank. You must complete this section with the deceased person's details.																							
25	Tax	c file num	ber (TFN)																			
	0	You don't your repor														ne th	nird p	arty	corı	rectly	, an	d pro	oces	S
26	Na	me																						
Fam	ily nar	me																						
First	given	name							(Other g	jiven na	mes												
27	Da	te of birth		Day	/ [Month	/ [Ye	ar															

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 information. Penalties may be imposed for giving false or misleading information.
Trustee, director or authorised officer declaration Complete this declaration if you are the trustee, director or authorised officer of the super provider. I declare that the information contained in the statement is true and correct.
Name JONATHAN MCCARTHY
Business hours phone number (include area code)
Trustee, director or authorised officer signature
Jon McCarthy Date 28/10/2019
OR
Authorised representative declaration Complete this declaration if you are an authorised representative of the super provider or life insurance company. I declare that: I have prepared the statement with the information supplied by the super provider or life insurance company I have received a declaration made by the super provider or life insurance company that the information provided to me for the preparation of this statement is true and correct I am authorised by the super provider or life insurance company to give the information in the statement to the ATO.
Name
Business hours phone number (include area code)
Authorised representative signature
Date Day Month Year Date Day Month Year
Lodging this report

Do not remove any pages when lodging your report, all pages must be returned for the form to be accepted.

You can lodge this report via:

- Tax Agent Portal
- Business Portal if you are a business portal user
- Post

Lodging through the Tax Agent Portal or Business Portal means you will receive an instant receipt.

If you are lodging by post, use the postal address below:

Australian Taxation Office PO BOX 3006 PENRITH NSW 2740



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.

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	ш	oxdot		\Box	\Box	\Box		\Box	لسا	لــــا	

Place X in ALL applicable boxes.



1 Tax file number (TFN) 4 7 6 2 1 8 2 9 6

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	Nomo
	Name

Title: Mr X Mrs Miss Ms Other	
Family name	_
DURIE	
First given name Other given names	
B R U C E M I C H A E L	
3 Date of birth 1 2 / 0 6 / 1 9 5 2	
4 Convent residential address	
4 Current residential address	
4 Current residential address 1 3 E D W A R D S T R E E T	
13 EDWARD STREET	
1 3 E DWARD STREET	State/territory Postcode
13 EDWARD STREET	State/territory Postcode Q L D 4 1 6 1
1 3 E DWARD STREET	

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Se	ection B: Cancellation
5	Are you cancelling a previous transfer balance account event? No Yes Open Previous transfer balance account event? Yes Open Previous transfer balance account event. If you previously reported multiple events you only need to include details of the event/s you wish to cancel. Refer to the instructions for more information on how to cancel a previous report.
_	ection C: Fund/Supplier/Provider details If you are an SMSF trustee completing this report for a member of your SMSF you may leave questions 6 and 7 blank.
6	Intermediary/Supplier name
7	Australian business number (ABN) Your contact details are required in case we need to speak to you about details supplied on this report. Provide your contact details in Section G.
8 L	Fund/Provider name A W C L E V E S U P E R A N N U A T I O N F U N D
9	Fund/Provider ABN 9 5 0 8 6 8 9 3 1 2 1
10	Fund/Provider TFN 9 8 9 8 8 1 1 2

	7
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
11	Sthey transfer belongs can event
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 X
	Structured settlement – post 1 July 2017
	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
0	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 1 9
18	Value \$ 278479 · 83
19	
	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
24	Member client identifier (number)
	If you don't have a member client identifier leave this question blank DURIBRUC00011

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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
	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 X
	Reversionary income stream
	LRBA repayment
11	Sther transfer belongs can event
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 Structured settlement – post 1 July 2017
	as to Eroni dotails 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 1 9
18	Value \$ 3 1 6 8 2 2 · 9 2
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-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	
	If you don't have a USI leave this question blank
23	Member account number
	DURBRU00011P
24	Member client identifier (number)
	If you don't have a member client identifier leave this question blank DURIBRUCO00011

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 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
	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
	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
	So to Event details on the next page.

	her information
_	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
0	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 3 / 0 4 / 2 0 2 0
18	Value \$ 25000 - 00
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
Se	ection 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.
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
23	Member account number
24	Member client identifier (number) If you don't have a member client identifier 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 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
	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
	Reversionary income stream
	LRBA repayment
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 X
	Income stream stops being in retirement phase
	Structured settlement – post 1 July 2017
	Gradulated Settlement post 1 day 2017 Go to Event details on the next page.

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 6 / 0 4 / 2 0 2 0
18	Value \$ 10800 - 00
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-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.
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
24	Capped defined benefit income stream on or after 1 July 2017
21	Is the account closed?
22	No X Yes Unique superannuation identifier (USI)
LĽ	If you don't have a USI leave this question blank
23	Member account number
-	DURBRU00011P
24	Member client identifier (number)
	If you don't have a member client identifier leave this question blank DURIBRUCIO 0 0 1 1 C C C C C C C C C
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Se	ecti	on F: 1	Γhir	d p	ar	ty c	det	ails	5														
	0	You only r Child reve the decea	ersior	nary i	ncon	ne str																	
25	Tax	c file num	ber (TFN)																		
	0	You don't your repor													ne th	nird p	arty	corı	rectly	, an	d pro	oces	S
26	Na	me																					
Fam	ily nar	me																					
First	given	name							(Other g	jiven na	mes											
27	Da	te of birth		Day	/ [Month	/ [Ye	ar														

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 information. Penalties may be imposed for giving false or misleading information.
Trustee, director or authorised officer declaration Complete this declaration if you are the trustee, director or authorised officer of the super provider. I declare that the information contained in the statement is true and correct.
Name BRUCEDURIE
Business hours phone number (include area code)
Trustee, director or authorised officer signature
Date 2 8 / 0 7 / 2 0 2 0
OR
Authorised representative declaration Complete this declaration if you are an authorised representative of the super provider or life insurance company. I declare that: I have prepared the statement with the information supplied by the super provider or life insurance company I have received a declaration made by the super provider or life insurance company that the information provided to me for the preparation of this statement is true and correct I am authorised by the super provider or life insurance company to give the information in the statement to the ATO.
Name
Business hours phone number (include area code)
Authorised representative signature
Date Day Month Year Date Day / Day

Do not remove any pages when lodging your report, all pages must be returned for the form to be accepted.

You can lodge this report via:

- Tax Agent Portal
- Business Portal if you are a business portal user
- Post

Lodging through the Tax Agent Portal or Business Portal means you will receive an instant receipt.

If you are lodging by post, use the postal address below:

Australian Taxation Office PO BOX 3006 PENRITH NSW 2740



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.

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Place X in ALL applicable boxes.



1 Tax file number (TFN) 4 7 6 2 1 8 2 9 6

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	Nama
	Name

Title: Mr X Mrs Miss Ms Ot	her	
Family name		
DURIE		
First given name	Other given names	
BRUCE	MICHAEL	
3 Date of birth $\begin{bmatrix} 0 & 1 & 1 \\ 1 & 2 \end{bmatrix} / \begin{bmatrix} 0 & 6 \\ 0 & 6 \end{bmatrix} / \begin{bmatrix} 0 & 1 & 1 \\ 0 & 1 & 1 \end{bmatrix}$	1 9 5 2	
4 Current residential address		
4 Current residential address		
	REET	
13 EDWARD ST		
1 3 E D W A R D S T	State/territory Postcode	
13 EDWARD ST	State/territory Postcode	6 1
1 3 E D W A R D S T	State/territory Postcode	3 1

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Se	ection B: Cancellation
5	Are you cancelling a previous transfer balance account event? No Yes Open Previous transfer balance account event? Yes Open Previous transfer balance account event. If you previously reported multiple events you only need to include details of the event/s you wish to cancel. Refer to the instructions for more information on how to cancel a previous report.
_	ection C: Fund/Supplier/Provider details If you are an SMSF trustee completing this report for a member of your SMSF you may leave questions 6 and 7 blank.
6	Intermediary/Supplier name
7	Australian business number (ABN) Your contact details are required in case we need to speak to you about details supplied on this report. Provide your contact details in Section G.
8 L	Fund/Provider name A W C L E V E S U P E R A N N U A T I O N F U N D
9	Fund/Provider ABN 9 5 0 8 6 8 9 3 1 2 1
10	Fund/Provider TFN 9 8 9 8 8 1 1 2

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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 X
	Income stream stops being in retirement phase
	Structured settlement – post 1 July 2017
	Go to Event details on the next page

	her information
_	Total super balance
10	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
_	
V	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. Day Month Year
17	Effective date 1 5 / 0 4 / 2 0 2 0
18	Value \$ 4000 - 00
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 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 X Yes
22	Unique superannuation identifier (USI)
	If you don't have a USI leave this question blank
23	Member account number
	DURBRU00011P
24	Member client identifier (number)
	If you don't have a member client identifier leave this question blank DURUBBRUCOOO001

Se	ection D-2: Event two
•	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 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
	Of 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 X
	Income stream stops being in retirement phase
	Structured settlement – post 1 July 2017
	Go to Event details on the next page.

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	her information
_	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.
	① 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
0	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 1 5 / 0 5 / 2 0 2 0
18	Value \$ 4000 - 00
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-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
23	Member account number
	DURBRU00011P
24	Member client identifier (number)
	If you don't have a member client identifier leave this question blank DURIBRUC00011

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 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
	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
	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 X
	Income stream stops being in retirement phase
	Structured settlement – post 1 July 2017
	So to Event details on the next page.

	her information
_	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
0	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 1 5 / 0 6 / 2 0 2 0
18	Value \$ 4000 - 00
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-3: 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
21	Capped defined benefit income stream on or after 1 July 2017 Is the account closed?
	No X Yes
22	Unique superannuation identifier (USI)
	If you don't have a USI leave this question blank
23	Member account number
	DURBRU00011P
24	Member client identifier (number) If you don't have a member client identifier leave this question blank
	DURIBRUCO 0 0 1

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
	Oo 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
14	Other transfer balance cap event Solution Go to Event details on the next page.
17	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.

15 Total super balance Complete this question to provide information regarding the total super balance of a member.		_
Complete this question to provide information regarding the total super balance of a member. Refer to all opo authorisal superbalance for more information on Total super balance used to calculate your member's total super balance and is only required from 30 June 2018. Event type: Accountation phase value Retirement phase value (30 June 2018 only) 16 Concessional contributions Information regarding the notional taxed contributions of a member. ① Only use this event type if you are reporting information for your member's national taxed contributions. Event type: Uncapped notional taxed contributions (from 2017–18 financial year onwards) Event details ② 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 Yellow Yellow Yellow 18 Value Yellow Yellow Yellow 19 If you are responding to a commutation authority, was the commutation paid directly to the member? (i.e. paid out of the super system) ② 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 Section E-4: Member account details ④ 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 Capped defined benefit income stream just before 1 July 2017 Capped defined benefit income stream in ust before 1 July 2017 Capped defined benefit income stream on or after 1 July 2017 Capped defined benefit income stream on or after 1 July 2017 Capped defined benefit income stream on or after 1 July 2017 Capped defined benefit income stream on or after 1 July 2017 Capped defined benefit income stream in the formation of the account number Capped defined be	Ot	her information
Refer to sto.gox.autotalsuperbalance for more information on Total super balance.	15	
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.		
Accumulation phase value Retirement phase value (30 June 2018 only) 16 Concessional contributions Information regarding the notional taxed contributions of a member. ① 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) Event details ② 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. Pay Mortion New		
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) Event details Vou must complete Q17 and Q18 for each event reported with the exception of Commutation authority (secessed) and commutation authority – defined benefit. Refer to the instructions for more information on how to complete this section. Desprice of the second of the super system. If unknown leave 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 Section 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. 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 or after 1 July 2017 Market-linked capped defined benefit income stream or after 1 July 2017 Capped defined benefit income stream or after 1 July 2017 Capped defined benefit income stream or after 1 July 2017 Capped defined benefit income stream or after 1 July 2017 Market-linked capped defined benefit income stream or after 1 July 2017 Capped defined benefit income stream or after 1 July 2017 Market-linked capped defined benefit income stream or after 1 July 2017 Capped defined benefit income stream or after 1 July 2017 Market-linked capped defined benefit income stream or after 1 July 2017 Market-linked capped defined benefit income stream or after 1 July 2017 Market-linked capped defined benefit income stream or after 1 July 2017		
Event details 1 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	16	
Event details • You must complete 017 and 018 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. • Yes		Only use this event type if you are reporting information for your member's notional taxed contributions.
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		
commutation authority - defined benefit. Refer to the instructions for more information on how to complete this section. Property Property	Εv	ent details
17 Effective date	0	
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 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 21 Is the account closed? No Yes 22 Unique superannuation identifier (USI) If you don't have a USI leave this question blank Wember account number Account-based income stream on or after 1 July 2017 Admit account closed? No Yes Account details Member account number	17	
(ie, paid out of the super system) ① 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 Section E-4: Member account details ① 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 Capped defined benefit income stream just before 1 July 2017 Market-linked capped defined benefit income stream on or after 1 July 2017 Capped defined benefit income stream on or after 1 July 2017 21 Is the account closed? No Yes 22 Unique superannuation identifier (USI) If you don't have a USI leave this question blank Member client identifier (number)	18	Value \$ ·
Commutation authority – commuted in part. If unknown leave this question blank. No Yes Section 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. 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 Capped defined benefit income stream on or after 1 July 2017 21 Is the account closed? No Yes 22 Unique superannuation identifier (USI) If you don't have a USI leave this question blank Wember account number 4 Member client identifier (number)	19	
Section 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. 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 Member account number Member client identifier (number)		
Section 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. 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 1sthe account closed? No Yes Unique superannuation identifier (USI) If you don't have a USI leave this question blank Wember account number Member client identifier (number)		·
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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 22 Unique superannuation identifier (USI) If you don't have a USI leave this question blank Member account number Member client identifier (number)	0	Only certain event types require you to answer question 20. Refer to the instructions for more information on how to
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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 22 Unique superannuation identifier (USI) If you don't have a USI leave this question blank Member account number 23 Member account number 24 Member client identifier (number)		Account-based income stream
Capped defined benefit income stream on or after 1 July 2017 21 Is the account closed? No Yes 22 Unique superannuation identifier (USI) If you don't have a USI leave this question blank 23 Member account number 24 Member client identifier (number)		Capped defined benefit income stream just before 1 July 2017
21 Is the account closed? No Yes 22 Unique superannuation identifier (USI) If you don't have a USI leave this question blank Member account number 24 Member client identifier (number)		Market-linked capped defined benefit income stream just before 1 July 2017
No Yes 22 Unique superannuation identifier (USI) If you don't have a USI leave this question blank Member account number 24 Member client identifier (number)		Capped defined benefit income stream on or after 1 July 2017
22 Unique superannuation identifier (USI) If you don't have a USI leave this question blank 23 Member account number 24 Member client identifier (number)	21	Is the account closed?
If you don't have a USI leave this question blank		No Yes
23 Member account number 24 Member client identifier (number)	22	
24 Member client identifier (number)		If you don't have a USI leave this question blank
· ,	23	Member account number
· ,		
If you don't have a member client identifier leave this question blank	24	·
		If you don't have a member client identifier leave this question blank

Se	ecti	on F: 1	Γhir	d p	ar	ty c	det	ails	5														
	0	You only need to complete Section F if the <i>Reporting event type</i> is Child death benefit income stream or Child reversionary income stream . Otherwise leave Section F blank. You must complete this section with the deceased person's details.																					
25	Tax	c file num	ber (TFN)																		
	0	You don't your repor													ne th	nird p	arty	corı	rectly	, an	d pro	oces	S
26	Na	me																					
Fam	ily nar	me																					
First	given	name							(Other g	jiven na	mes											
27	Da	te of birth		Day	/ [Month	/ [Ye	ar														

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 information. Penalties may be imposed for giving false or misleading information.
Trustee, director or authorised officer declaration Complete this declaration if you are the trustee, director or authorised officer of the super provider. I declare that the information contained in the statement is true and correct.
Name BRUCE DURIE
Business hours phone number (include area code)
Trustee, director or authorised officer signature
Date 28 / 07 / 20 2 0
OR
Authorised representative declaration Complete this declaration if you are an authorised representative of the super provider or life insurance company. I declare that: I have prepared the statement with the information supplied by the super provider or life insurance company I have received a declaration made by the super provider or life insurance company that the information provided to me for the preparation of this statement is true and correct I am authorised by the super provider or life insurance company to give the information in the statement to the ATO.
Name
Business hours phone number (include area code)
Authorised representative signature
Date Day Month Year Date Day / Day
Lodging this report Do not remove any pages when lodging your report, all pages must be returned for the form to be accepted.

Do not remove any pages when lodging your report, all pages must be returned for the form to be accepted.

You can lodge this report via:

- Tax Agent Portal
- Business Portal if you are a business portal user
- Post

Lodging through the Tax Agent Portal or Business Portal means you will receive an instant receipt.

If you are lodging by post, use the postal address below:

Australian Taxation Office PO BOX 3006 PENRITH NSW 2740

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 2020 present fairly, in all material respects, the financial position of the superannuation fund at 30 June 2020 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 2020.

Signed in accordance with a resolution of the trustees by:

Dame
Bruce Durie
Trustee Michele Durie
Michele Durie
Trustee Jon McCarthy Jonathan Mccarthy
Trustee
Christine McCarthy
Christine Mccarthy
Trustee 22 / 04 / 2021
Dated this day of

Contributions Summary Report

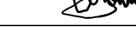
For The Period 01 July 2019 - 30 June 2020

Bruce Durie

Date of Birth: Provided
Age: 68 (at year end)
Member Code: DURBRU00002A
Total Super Balance*1 as at 30/06/2019: 1,095,811.07

Contributions Summary Concessional Contribution	2020	2019
Employer	24,385.98	24,903.69
	24,385.98	24,903.69
Total Contributions	24,385.98	24,903.69

I, BRUCE DURIE, confirm that the amounts reported above are the total contributions deposited to the fund with respect of my member balance for the period 01/07/2019 to 30/06/2020.



BRUCE DURIE

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

Contributions Summary Report

For The Period 01 July 2019 - 30 June 2020

Jonathan Mccarthy

Date of Birth: Provided
Age: 67 (at year end)
Member Code: MCCJON00002A
Total Super Balance*1 as at 30/06/2019: 1,461,355.29

Contributions Summary Concessional Contribution	2020	2019
Employer	6,889.38	25,000.00
Personal - Concessional	18,000.00	0.00
	24,889.38	25,000.00
Non-Concessional Contribution		
Personal - Non-Concessional	100,000.00	100,000.00
	100,000.00	100,000.00
Total Contributions	124,889.38	125,000.00

I, JONATHAN MCCARTHY, confirm that the amounts reported above are the total contributions deposited to the fund with respect of my member balance for the period 01/07/2019 to 30/06/2020.

Joh Viccaring

JONATHAN MCCARTHY

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

Contributions Summary Report

For The Period 01 July 2019 - 30 June 2020

Michele Durie

Date of Birth:

Age:

Member Code:

Total Super Balance*1 as at 30/06/2019:

Provided

61 (at year end)

DURMIC00001A

127,641.02

Contributions Summary Concessional Contribution	2020	2019
Personal - Concessional	25,000.00	25,000.00
	25,000.00	25,000.00
Non-Concessional Contribution		
Personal - Non-Concessional	1,227.70	0.00
	1,227.70	0.00
Total Contributions	26,227.70	25,000.00

I, MICHELE DURIE, confirm that the amounts reported above are the total contributions deposited to the fund with respect of my member balance for the period 01/07/2019 to 30/06/2020.



MICHELE DURIE

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

LAWCLEVE SUPERANNUATION FUND **Contributions Summary Report** For The Period 01 July 2019 - 30 June 2020

Memorandum of Resolutions of

Bruce Durie, Michele Durie, Jonathan Mccarthy and Christine Mccarthy

ATF LAWCLEVE SUPERANNUATION FUND

FINANCIAL STATEMENTS OF SUPERANNUATION FUND:

It was resolved that the financial statements would be prepared as special purpose financial statements as, in the opinion of the Trustees, the superannuation Fund is a non-reporting entity and therefore is not required to comply with all Australian Accounting Standards.

The Chair tabled the financial statements and notes to the financial statements of the superannuation Fund in respect of the year ended 30 June 2020 and it was resolved that such statements be and are hereby adopted as tabled.

TRUSTEE'S DECLARATION: It was resolved that the Trustee's declaration of the superannuation Fund be

signed.

ANNUAL RETURN: Being satisfied that the Fund had complied with the requirements of the

Superannuation Industry (Supervision) Act 1993 (SISA) and Regulations during the year ended 30 June 2020, it was resolved that the annual return be

approved, signed and lodged with the Australian Taxation Office.

INVESTMENT STRATEGY: The allocation of the Fund's assets and the Fund's investment performance over

the financial year were reviewed and found to be within the acceptable ranges outlined in the investment strategy. After considering the risk, rate of return and liquidity of the investments and the ability of the Fund to discharge its existing liabilities, it was resolved that the investment strategy continues to reflect the purposes and circumstances of the Fund and its members. Accordingly, no

changes in the investment strategy were required.

INSURANCE COVER: The Trustees reviewed the current life and total and permanent disability

insurance coverage on offer to the members and resolved that the current

insurance arrangements were appropriate for the Fund.

ALLOCATION OF INCOME: It was resolved that the income of the Fund would be allocated to the members

based on the segregation of assets and on member average daily account

balances.

INVESTMENT ACQUISITIONS: It was resolved to ratify the investment acquisitions throughout the financial year

ended 30 June 2020.

INVESTMENT DISPOSALS: It was resolved to ratify the investment disposals throughout the financial year

ended 30 June 2020.

AUDITORS: It was resolved that

Super Audits Pty Ltd

of

PO Box 3376, Rundle Mall, South Australia 5000

act as auditors of the Fund for the next financial year.

TAX AGENTS: It was resolved that

Hfb Super Pty Ltd

act as tax agents of the Fund for the next financial year.

TRUSTEE STATUS: Each of the Trustees confirmed that they are qualified to act as Trustee of the

Fund and that they are not disqualified persons as defined by s 120 of the SISA.

CONTRIBUTIONS RECEIVED: It was resolved that the contributions during the year be allocated to members

on the basis of the schedule provided by the employer.

Memorandum of Resolutions of

Bruce Durie, Michele Durie, Jonathan Mccarthy and Christine Mccarthy ATF LAWCLEVE SUPERANNUATION FUND

Ρ	Α	ΥI	ΜE	NT	OF	BEI	NEF	ITS:
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The Trustees have ensured that any payment of benefits made from the Fund, meets the requirements of the Fund's deed and does not breach the superannuation laws in relation to:

- 1. making payments to members; and,
- 2. breaching the Fund or the member investment strategy.

The Trustees have reviewed the payment of the benefits and received advice that the transfers are in accordance with the Deed and the superannuation laws. As such the Trustees have resolved to allow the payment of the benefits on behalf of the members.

CLOSURE:

Signed as a true record -

Bruce Durie

Michele Durie

Michele Durie

Jon McCarthy

Jonathan Mccarthy

Christine McCarthy

Christine Mccarthy



TITLE 9MDRN - 2020 Tax Package

 FILE NAME
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 DOCUMENT ID
 0c379ec1be1633ec96f93f1934712d56ff4b1673

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Document History

22 / 04 / 2021 Sent for signature to Bruce Durie (bruced@mdl.com.au),

SENT 09:44:28 UTC+10 Christine McCarthy (maccajon@bigpond.com), Jonathan McCarthy

(jonm@mdl.com.au) and Michele Durie

(michele.durie@gmail.com) from superdocs@hfbgroup.com.au

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O 22 / 04 / 2021 Viewed by Bruce Durie (bruced@mdl.com.au)

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O 22 / 04 / 2021 Viewed by Jonathan McCarthy (jonm@mdl.com.au)

VIEWED 12:10:54 UTC+10 IP: 203.43.229.162

> 22 / 04 / 2021 Signed by Bruce Durie (bruced@mdl.com.au)

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<u>▶</u> 22 / 04 / 2021 Signed by Jonathan McCarthy (jonm@mdl.com.au)

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TITLE 9MDRN - 2020 Tax Package

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STATUS • Completed

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25 / 04 / 2021
Signed by Michele Durie (michele.durie@gmail.com)

SIGNED 11:09:49 UTC+10 IP: 203.43.229.162

O 26 / 04 / 2021 Viewed by Christine McCarthy (maccajon@bigpond.com)

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<u>▶ 26 / 04 / 2021</u> Signed by Christine McCarthy (maccajon@bigpond.com)

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26 / 04 / 2021 The document has been completed.

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