Signature as prescribed in tax return

Self-managed superannuation **2021** fund annual return

 Who should complete this annual return? Only self-managed superannuation funds (SMSFs) can complete this annual return. All other funds must complete the <i>Fund</i> income tax return 2021 (NAT 71287). The Self-managed superannuation fund annual return instructions 2021 (NAT 71606) (the instructions) can assist you to complete this annual return. The SMSF annual return cannot be used to notify us of a change in fund membership. You must update fund details via ABR.gov.au or complete the Change of details for superannuation entities form (NAT 3036). 	 To complete this annual return Print clearly, using a BLACK pen only. Use BLOCK LETTERS and print one character per box. Image: Image: Image:
Section A: Fund information 1 Tax file number (TFN) 918170246 • The ATO is authorised by law to request your TEN. You are	To assist processing, write the fund's TFN at the top of pages 3, 5, 7 and 9.
 the chance of delay or error in processing your annual retuined Name of self-managed superannuation fund (SMSF) 	urn. See the Privacy note in the Declaration.
the chance of delay or error in processing your annual retuined and the chance of delay or error in processing your annual retuined and the chance of self-managed superannuation fund (SMSF).	· · · · · · · · · · · · · · · · · · ·
 the chance of delay or error in processing your annual retuined Name of self-managed superannuation fund (SMSF Beale Superannuation Fund Australian business number (ABN) (if applicable) 645 Current postal address 	urn. See the Privacy note in the Declaration.
 the chance of delay or error in processing your annual retuing 2 Name of self-managed superannuation fund (SMSF Beale Superannuation Fund 3 Australian business number (ABN) (if applicable) 645 4 Current postal address 11 Banks-Smith Drive 	548126141

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Tax File Number 918170246

6 SMSF auditor			
Auditor's name			
Title: Mr Mrs Miss Ms	Other		
Family name			
Boys			
First given name	Other given names		
Tony			
SMSF Auditor Number Aud	ditor's phone number		
100014140 04	10712708		
Postal address			
Box 3376			
Suburb/town		State/territ	ory Postcode
Rundle Mall		SA	5000
Date audit was completed A	Month Year		
Was Part A of the audit report qualified?	B No X Yes		
Was Part B of the audit report qualified?	C No X Yes		
If Part B of the audit report was qualified, have the reported issues been rectified?	D No Yes		

Electronic funds transfer (EFT) 7

We need your self-managed super fund's financial institution details to pay any super payments and tax refunds owing to you.

Fund's financial institution account details Α

This account is used for super contributions and rollovers. Do not provide a tax agent account here.

Fund BSB number	063149	Fund account number	10450539
Fund account name			
Beale Super Fund			

I would like my tax refunds made to this account. \mathbf{X} Go to C.

B Financial institution account details for tax refunds

This account is used for tax refunds. You can provide a tax agent account here.

BSB number Account name

Account number

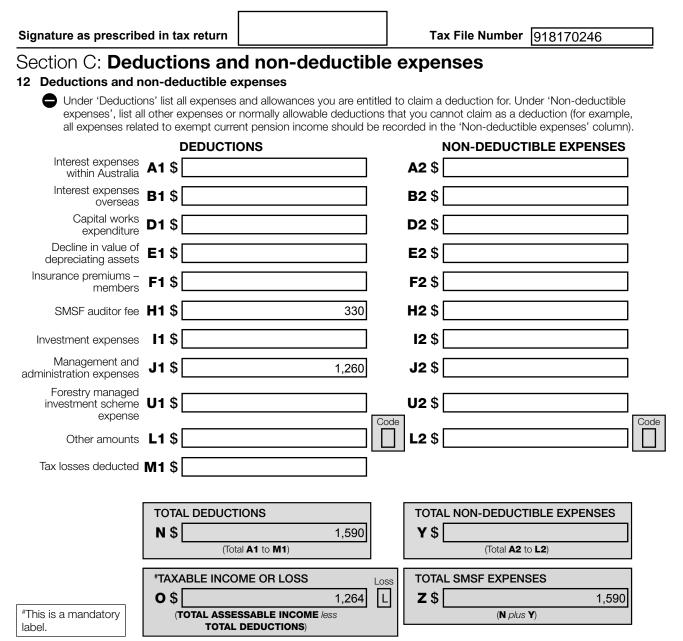
C Electronic service address alias

Provide the electronic service address alias (ESA) issued by your SMSF messaging provider. (For example, SMSFdataESAAlias). See instructions for more information.

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Sig	nature as prescribed in tax return Tax File Number 918170246
8	Status of SMSF Australian superannuation fund A No Yes Yes Fund benefit structure B A Code Does the fund trust deed allow acceptance of the Government's Super Co-contribution and Low Income Super Amounts? C No Yes Yes X Ves X
9	Was the fund wound up during the income year? No Yes Yes Yes Have all tax lodgment and payment obligations been met? No Yes Yes Yes Yes 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 Go to Section B: Income.
	Yes X) Exempt current pension income amount A \$ 0 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
	 Did the fund have any other income that was assessable? E Yes X) Go to Section B: Income. No A 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.

Signature as prescribed in tax return		Tax File Number 918170246
Section B: Income		
Do not complete this section if all super the retirement phase for the entire year, t notional gain. If you are entitled to claim a	here was no other income than ny tax offsets, you can record	SF were supporting superannuation income streams in at was assessable, and you have not realised a deferred these at Section D: Income tax calculation statement.
11 Income Did you have a capital gains tax (CGT) event during the year?	G No X Yes) \$10, 2017 com	e total capital loss or total capital gain is greater than 000 or you elected to use the transitional CGT relief in 7 and the deferred notional gain has been realised, plete and attach a <i>Capital gains tax (CGT) schedule 202</i>
Have you applied an exemption or rollover?		
	Net capital gain A	\$
Gross rent and other le	easing and hiring income B	\$
	Gross interest C	\$ 326
Fores	try managed investment scheme income	\$
Gross foreign income		Loss
D1 \$	Net foreign income	\$
Australian franking credits from a	New Zealand company	\$ Number
	Transfers from foreign funds	\$0
	Gross payments where ABN not quoted	
Calculation of assessable contributions	Gross distribution from partnerships	\$
R1 \$	*Unfranked dividend	s
plus Assessable personal contributions	amount -	*
	amount ^	\$
plus #*No-TFN-quoted contributions R3 \$	*Dividend franking credit	\$ Code
(an amount must be included even if it is zer		
less Transfer of liability to life insurance company or PST R6 \$	Assessable contributions (R1 plus R2 plus R3 less R6)	\$
Calculation of non-arm's length income		Code
*Net non-arm's length private company divider	*Other income S	\$
plus *Net non-arm's length trust distributions	*Assessable income due to changed tax T	\$
U2 \$	status of fund	•
plus *Net other non-arm's length income U3 \$	Net non-arm's length income (subject to 45% tax rate) (U1 plus U2 plus U3)	\$
[#] This is a mandatory label.	GROSS INCOME (Sum of labels A to U)	\$
	current pension income	\$0
	ASSESSABLE COME (W less Y) V \$	326 Loss

OFFICIAL: Sensitive (when completed)



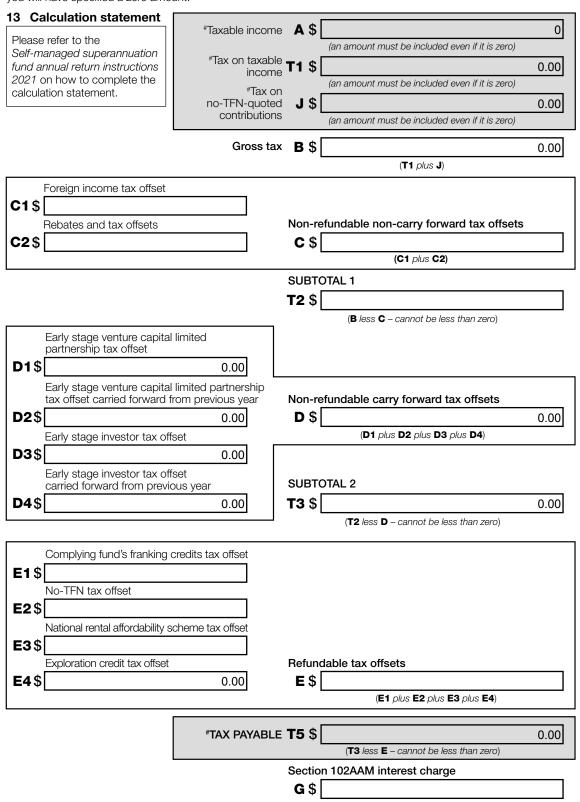
Signature as prescribed in tax return

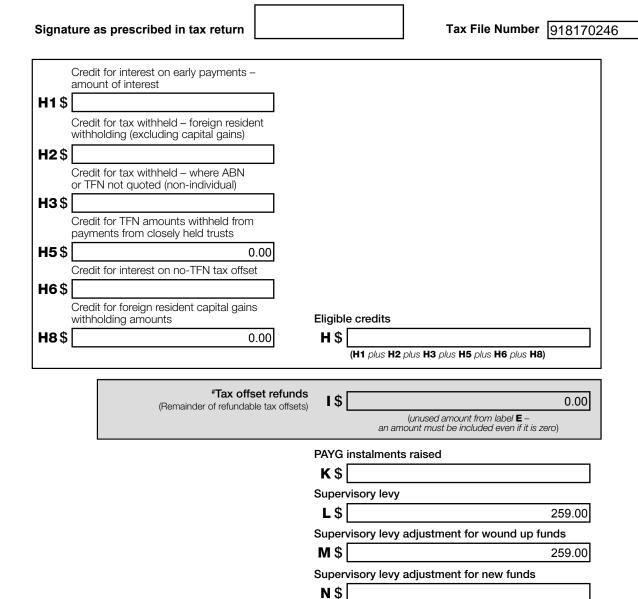
Tax File Number 918170246

Section D: Income tax calculation statement

#Important:

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



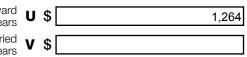


AMOUNT DUE OR REFUNDABLE A positive amount at **S** is what you owe, while a negative amount is refundable to you. **S S** (T5 *plus* **G** *less* **H** *less* **I** *less* **K** *plus* **L** *less* **M** *plus* **N**)

"This is a mandatory label.

Section E: Losses

If total loss is greater than \$100,000, complete and attach a Losses schedule 2021. Tax losses carried forward to later income years Net capital losses carried forward to later income years



0.00

Tax File Number 918170246

Section G: Supplementary m	ember ir	nfor	mation	
				Code
Title: Mr Mrs Miss Ms Other Family name				Account status C
Beale				
First given name	Other given na	ames		
Gary				
Member's TFN See the Privacy note in the Declaration. Date of Day	of birth Month	Year	If decease	ed, date of death
312036018	21/12/195			
Contributions OPENING ACCOU	INT BALANCE	\$		61,734.65
Refer to instructions for completing these labe	5101	Proceed H \$	ds from primary residence disp	oosal
Employer contributions		Receipt		Year
A \$		H1		ieai
ABN of principal employer			able foreign superannuation fun	d amount
A1		\$		
Personal contributions	1		sessable foreign superannuation	on fund amount
B \$	、	J \$		
CGT small business retirement exemption C \$			r from reserve: assessable amo	ount
CGT small business 15-year exemption am	aust	K \$		
D \$		L \$	r from reserve: non-assessable	amount
Personal injury election	I		Lutions from non-complying fur	ds
E \$		and pre	viously non-complying funds	
Spouse and child contributions		Г\$		
F \$	(includir	er contributions ng Super Co-contributions anc	l
Other third party contributions G \$			come Super Amounts)	
G \$		M \$		
TOTAL CONTRIBUTIONS	N \$			
		labels A	to M)	
Other transactions Allo	cated earnings	0\$		144.69
	or losses	ΨΨ		
Accumulation phase account balance	Inward rollovers and	Р\$		
S1 \$ 0.00	transfers Outward			
Retirement phase account balance	rollovers and	Q \$		60,051.01
	transfers			Code
S2 \$ 0.00	Lump Sum payments	R1 \$		G
Retirement phase account balance – CDBIS	Income			Code
S3 \$ 0.00	stream payments	R2 \$		1,550.00 M
	payments			
0 TRIS Count CLOSING ACCO	UNT BALANCE	S \$		0.00
		- +	(S1 plus S2 plus S3)	
			- · · ·	
Accumulati	on phase value	X1 \$		
Retireme	ent phase value	X2 \$		
Outstanding li	mited recourse	Y \$		
borrowing arrang	gement amount	īΦ		

OFFICIAL: Sensitive (when completed)

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Signature as prescribed in tax return		Tax File Number	918170246
MEMBER 6 Title: Mr Mrs X Miss Ms Other			Account status
First given name	Other given names		
Denise			
Member's TFN Date See the Privacy note in the Declaration. Day 450345361	of birth Month Ye 14/12/1953		ed, date of death
Contributions OPENING ACCOU	INT BALANCE \$	4	478,204.65
Refer to instructions for completing these lab	5101	eds from primary residence disp	posal
Employer contributions A \$ ABN of principal employer A1 Personal contributions	Receip H1 Asses	t date Day Month Month Sable foreign superannuation fur	
B \$ CGT small business retirement exemption C \$	J S Transf	ssessable foreign superannuati r from reserve: assessable am	
CGT small business 15-year exemption am D \$ Personal injury election E \$	Contri and pl	er from reserve: non-assessable butions from non-complying fur eviously non-complying funds	
Spouse and child contributions F \$ Other third party contributions G \$	Any of (incluc Low Ir	P L ther contributions ling Super Co-contributions and come Super Amounts) \$	k
TOTAL CONTRIBUTIONS	S N \$ (Sum of labels	A to M)	
Other transactions Allo	ocated earnings or losses	\$	1,118.97
Accumulation phase account balance S1 \$ 0.00	Inward rollovers and transfers	\$	
Retirement phase account balance – Non CDBIS	Outward rollovers and transfers	\$	465,024.63 Code
S2 \$ 0.00	Lump Sum R1 S	\$	11.05 A
Retirement phase account balance – CDBIS S3 \$ 0.00	Income stream R2 \$ payments	\$	12,050.00 Code
0 TRIS Count CLOSING ACCO	UNT BALANCE S \$	\$	0.00
Accumulat	on phase value X1 \$	\$	
Outstanding I	ent phase value X2 \$		
borrowing arranç OFFIC	gement amount		Page 13

Signature as prescribed in tax return		Tax File Number 91817	0246
Section H: Assets and liab	ilities		
15a Australian managed investments	Listed trusts	sts A \$	
	Unlisted trusts	sts B \$	
	Insurance policy	icy C \$	
	Other managed investments	nts D \$	
15b Australian direct investments	Cash and term deposits	sits E \$	
Limited recourse borrowing arrangem Australian residential real property	Debt securities	ies F \$	
J1 \$	Loans	ans G \$	
Australian non-residential real property	Listed shares	res H \$	
J2 \$ Overseas real property	Unlisted shares	res I\$	
J3 \$ Australian shares	Limited recourse		
J4 \$	Non-residential		
Overseas shares J5 \$	real property Residential	tial 💶 🛧	
Other	real property Collectables and		
J6 \$	personal use assets		
Property count	Other assets	əls O Ş]
15c Other investments	Crypto-Currency	ncy N \$	
15d Overseas direct investments	Overseas shares	res P \$	
Oversea	s non-residential real property	erty Q \$	
Ove	erseas residential real property	erty R\$	
O	verseas managed investments	nts S \$	
	Other overseas assets	ets T \$	
	N AND OVERSEAS ASSETS of labels A to T)	rs U \$	
15e In-house assets Did the fund have a loan to, leas or investment in, related pa (known as in-house ass at the end of the income ye	rties ANO res r sets)) \$	

Sigr	gnature as prescribed in tax return			Tax File Number 918170246]
15f	 Limited recourse borrowing arrangements If the fund had an LRBA were the LRBA borrowings from a licensed financial institution? Did the members or related parties of the fund use personal guarantees or other security for the LRBA? B No Yes Yes Yes Security for the LRBA?]			
16	Borrowings for limited recourse borrowing arrangements V1 \$ Permissible temporary borrowings V2 \$ Other borrowings				
	V3 \$ Borrowings Total member closing account balances (total of all CLOSING ACCOUNT BALANCEs from Sections F and G) Reserve accounts Other liabilities TOTAL LIABILITIES TOTAL LIABILITIES	W X Y	\$ \$		

Section I: **Taxation of financial arrangements** 17 Taxation of financial arrangements (TOFA)

Total TOFA gair	s H	\$	
Total TOFA losse	s I	\$[
Section J: Other information			 _

Family trust election status

If 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 2020–21 income year, write 2021).	A
If revoking or varying a family trust election, print R for revoke or print V for variation, and complete and attach the <i>Family trust election, revocation or variation 2021.</i>	в 🗌
Interposed entity election status	
If the trust or fund has an existing election, write the earliest income year specified. If the trust or fund is making one or more elections this year, write the earliest income year being specified and complete an <i>Interposed entity election or revocation 2021</i> for each election.	c
If revoking an interposed entity election, print R , and complete and attach the <i>Interposed entity election or revocation 2021</i> .	D 🗌

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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.

Important

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

Privacy

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

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

TRUSTEE'S OR DIRECTOR'S DECLARATION:

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

Authorised trustee's, director's or public officer's signature

	Day	Month Year
	Date	
Preferred trustee or director contact details:		
Title: Mr Mrs X Miss Ms Other		
Family name		
Beale		
First given name Other given names		
Denise		
Phone number 0438883134		
Email address		
dsbeale@gmail.com		
Non-individual trustee name (if applicable)		
ABN of non-individual trustee		
Time taken to prepare and complete this annual return	Hrs	1
The Commissioner of Taxation, as Registrar of the Australian Business Register, may us provide on this annual return to maintain the integrity of the register. For further informat		
TAX AGENT'S DECLARATION: I declare that the <i>Self-managed superannuation fund annual return 2021</i> has been prepa provided by the trustees, that the trustees have given me a declaration stating that the in correct, and that the trustees have authorised me to lodge this annual return. Tax agent's signature		
	Date 09	Month Year
Tax agent's contact details		,
Title: Mr X Mrs Miss Ms Other		
Family name		
Morrison		
First given name Other given names		
Angus		
Tax agent's practice		
Morrison, Angus		
Tax agent's phone number Reference number	Tax an	lent number
0395846422 BEALESUP0271	2475	
	2415	