To the trustee of the THE MATUSIK SUPERANNUATION FUND 23 Yorston PI, Ormiston Queensland 4160

Dear Trustees

Audit Engagement Letter

Objectives and Scope of the Audit

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

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

Our Responsibilities

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

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

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

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

Trustees' Responsibilities

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

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

To provide us with:

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

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

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

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

Audit of SIS Compliance

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

Sections: 17A, 35AE, 35B, 35C(2), 52, 62, 65, 66, 67, 67A, 67B, 82-85, 103, 104, 104A, 105, 109, 126K Regulations: 1.06(9A), 4.09, 4.09A, 5.03, 5.08, 6.17, 7.04, 8.02B, 13.12, 13.13, 13.14, 13.18AA, 13.22C

Report on Significant Matters

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

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

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

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

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

Quality Control

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

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

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

Independence/Conflict of Interest

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

Outsourced Services

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

Data Storage

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

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

Limitation of Liability

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

Other

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

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

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

Yours sincerely

ANTHONY BOYS - REGISTERED COMPANY AUDITOR

To: MR ANTHONY BOYS

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

For and on behalf of the Trustee(s) of the THE MATUSIK SUPERANNUATION FUND

SIGNED:

Peter Matusik

Carolyn Matusik

DATED:

27/9/2021

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Mr Anthony Boys PO Box 3376 Bundle Mall SA 5000

Dear Anthony,

THE MATUSIK SUPERANNUATION FUND Superannuation Fund Trustee Representation Letter

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

Financial Report

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

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

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

Sole Purpose

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

Superannuation Fund Books/Records/Minutes

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

Asset Form

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

Ownership and Pledging of Assets

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

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

Investments

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

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- (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:
 - 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 THE MATUSIK SUPERANNUATION FUND

Peter Matusik

Matusik Enterprises Pty Limited

Director

Carolyn Matusik

Matusik Enterprises Pty Limited

Director

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The Matusik Superannuation Fund Projected Investment Strategy

For the year ended 30 June 2022

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.

Peter Matusik is 79 years of age and has retired. His member balance as at 30 June 2021 was \$824,949.51. Carolyn Matusik is 74 years of age and has retired. Her member balance as at 30 June 2021 was \$1,581,424.29

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 Fund has invested in Australian listed securities in order to earn regular dividend 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 some cash for unforeseen circumstances and 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 both Peter and Carolyn have retired and 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 2020) and as close of the year (30th June 2021) are as below with the Trustees asset allocation for the following year:

Asset Class	Assets 1/07/2020 \$	Assets 30/06/2021 \$	Target Range (% of To Fund Assets)		Tota	
Australian Shares	1,626,537	2,015,221	40	% -	100	%
International Shares			· Wander	% -		%
Cash	654,487	366,738	0	% -	40	%
Australian Fixed Interest	700,000	0	0	% -	30	%
International Fixed Interest			_	% -		%
Mortgages			·	% -		%
Direct Property				% -		%
Listed Property				_ % -	=	%
Other	0	0	0	% -	10	%

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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: 16 / 09 / 2021

Peter Matusik

Director of the Trustee Company

Carolyn Matusik

Director of the Trustee Company

The Matusik Superannuation Fund

Projected Investment Strategy – Memorandum of Resolution

For the year ended 30 June 2022

ADOPTION OF INVESTMENT STRATEGY:

The investment strategy for the financial year 2021 - 22, 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: 16 / 09 / 2021

Peter Matusik

Director of the Trustee Company

Carolyn Matusik

Director of the Trustee Company

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Self-managed superannuation fund annual return 2021

Only this inco	annual return. All other funds ome tax return 2021 (NAT 712) The Self-managed superanni instructions 2021 (NAT 7160) assist you to complete this at the SMSF annual return can	on funds (SMSFs) can complete must complete the Fund 87). Suation fund annual return 6) (the instructions) can nnual return. The property of a You must update fund details the Change of details for	To complete this annua ■ Print clearly, using a BLAC ■ Use BLOCK LETTERS an \$ # / 7 # \$ \$ ■ Place	CK pen only. d print one character le boxes. Jual returns: Dffice postcode	iter per box.
Se	ection A: Fund inf	ormation	S To applied proc	occoing write the f	und's TEN of
1	Tax file number (TFN)	Provided		essing, write the faces 3, 5, 7 and 9.	und's IFN at
	The ATO is authorised by the chance of delay or e	y law to request your TFN. You are error in processing your annual retur	not obliged to quote your TFI n. See the Privacy note in the	N but not quoting Declaration.	it could increase
2	Name of self-managed	superannuation fund (SMSF)			
ТН	E MATUSIK SUPERANNU	ATION FUND			
3	Australian business nur	mber (ABN) (if applicable) 9387	2119893		
4_	Current postal address				
PC) Box 24				
$\overline{}$	urb/town			State/territory	Postcode
Cle	eveland			QLD	4163
5	Annual return status Is this an amendment to the Is this the first required return	SMSF's 2021 return? n for a newly registered SMSF?	A No X Yes B No X Yes		

	Tax File Number Provided
6 SMSF auditor	
Auditor's name	
Title: Mr X Mrs Miss Ms Oth	ner
Family name	
Boys	Other gives person
First given name	Other given names
Anthony	William
	or's phone number
	10712708
Postal address	
PO Box 3376	
Suburb/town	State/territory Postcode
Rundle Mall	SA 5000
Day	Month Year
Date audit was completed A 21 /	09 / 2021
Was Part A of the audit report qualified?	B No X Yes
Was Part B of the audit report qualified?	C No X Yes
f Part B of the audit report was qualified,	D No C You C
have the reported issues been rectified?	D No Yes
 Flectronic funds transfer (EFT) We need your self-managed super fund A Fund's financial institution a 	d's financial institution details to pay any super payments and tax refunds owing to you.
This account is used for super co	ntributions and rollovers. Do not provide a tax agent account here.
Fund BSB number 184446	Fund account number 117846303
Fund account name	Turid decease training Trive reces
The Matusik Superannuation I	Fund
The Mataon Caperannacion	una .
I would like my tax refunds made	to this account $[X]$ Go to C
	to this account. [X] co to c.
B Financial institution accoun	t details for tax refunds
This account is used for tax refund	ds. You can provide a tax agent account here.
BSB number	Account number
Account name	
C Electronic service address	alias
	ss alias (ESA) issued by your SMSF messaging provider.
	See instructions for more information,
AUSPOSTSMSF	

100017996MS

	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
9	Was the fund wound up during the income year? No X 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.
	Which method did you use to calculate your exempt current pension income? Segregated assets method B
	Unsegregated assets method C X Was an actuarial certificate obtained? D Yes X Did the fund have any other income that was assessable? E Yes X Go to Section B: Income. No The Choosing 'No' means that you do not have any assessable income, including no-TFN quoted contributions.
	No 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 tay calculation statement.

			Tax File Number	Provided
Section B: Income				
Do not complete this section if all superan the retirement phase for the entire year, the notional gain. If you are entitled to claim any	re was no other incom	e that was a	assessable, and you hav	e not realised a deferred
I 1 Income Did you have a capital gains tax (CGT) event during the year?	No Yes X	\$10,000 or 2017 and th	apital loss or total capital you elected to use the trans ne deferred notional gain and attach a <i>Capital gains</i>	ansitional CGT relief in
Have you applied an exemption or rollover?	No X Yes 🗌	Code		
	Net capital gain	A \$		
Gross rent and other leas	ing and hiring income	в\$		
	Gross interest	c \$		7,191
Forestry	managed investment scheme income	x \$		
Gross foreign income				Loss
D1 \$	Net foreign income	D \$		
Australian franking credits from a N	ew Zealand company	E \$		Number
	Transfers from foreign funds	F \$		0
G	ross payments where ABN not quoted	н\$		
Calculation of assessable contributions Assessable employer contributions	Gross distribution from partnerships	ı \$ \		Loss
R1 \$	*Unfranked dividend	J \$		5,320
plus Assessable personal contributions	amount *Franked dividend	K \$		
plus "*No-TFN-quoted contributions	amount *Dividend franking			57,811
R3 \$ 0	credit	L \$		24,776 Code
less Transfer of liability to life insurance	*Gross trust distributions	М \$		
company or PST	Assessable contributions			
R6 \$	(R1 plus R2 plus R3 less R6)	R \$		
Calculation of non-arm's length income *Net non-arm's length private company dividends	1011	s \$		Code
U1 \$	*Other income *Assessable income	3 a [
plus *Net non arm's length trust distributions	due to changed tax status of fund	T \$		
plus *Net other non-arm's length income	Net non-arm's			
U3 \$	length income (subject to 45% tax rate) (U1 plus U2 plus U3)	U \$		
"This is a mandatory				Loss
label.	(Sum of labels A to U)	w \$		95,098
entered at this label,	rrent pension income	Y \$		92,269
	SSESSABLE ME (W less Y) V \$			2,829 Loss

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
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 \$ 42	H2 \$ 1,387
Investment expenses	I1 \$	12 \$
Management and administration expenses	J1 \$ 372	J2 \$ 3,713
Forestry managed investment scheme expense	U1 \$	U2 \$ Code
Other amounts	L1 \$	L2 \$
Tax losses deducted	M1 \$	
	TOTAL DEDUCTIONS	TOTAL NON-DEDUCTIBLE EXPENSES
	N\$ 414	Y \$ 5,100
	(Total A1 to M1)	(Total A2 to L2)
	*TAXABLE INCOME OR LOSS	Loss TOTAL SMSF EXPENSES
	O \$ 2,415	Z\$ 5,514
"This is a mandatory	(TOTAL ASSESSABLE INCOME less	(N plus Y)

	
Tax File Number	Provided

Section D: Income tax calculation statement

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"Important: Section B label R3, Section C lab you will have specified a zero am		bels A,T1 ,	J, T5 and I are mandatory. If you leave these labels
13 Calculation statement		A C	2 445
Please refer to the	*Taxable incom	ne A\$[2,415 (an amount must be included even if it is zero)
Self-managed superannuation fund annual return instructions	"Tax on taxab	ole T4 ¢[362.25
2021 on how to complete the	IIICOII		(an amount must be included even if it is zero)
calculation statement	"Tax o		0.00
	contribution	ns T	(an amount must be included even if it is zero)
	Gross ta	ax B \$	262.25
		- Δ Β Φ [362,25 (T1 plus J)
Foreign income tax offset			
C1\$			
Rebates and tax offsets		Non-re	fundable non-carry forward tax offsets
C2\$		C \$	= -
			(C1 plus C2)
		SUBTO	OTAL 1
		T2 \$	362.25
		ī	(B less C – cannot be less than zero)
Early stage venture capit partnership tax offset	al limited		
D1\$	0.00		
Early stage venture capit			
tax offset carried forward		Non-re	fundable carry forward tax offsets
D2\$	0.00	D \$	0.00
Early stage investor tax of			(D1 plus D2 plus D3 plus D4)
D3\$[0.00		
Early stage investor tax of carried forward from prev		SUBTO	OTAL 2
D4\$	0.00	тз \$ [362.25
			(T2 less D cannot be less than zero)
Complying fund's franking			
E1\$	24,776.18		
No-TFN tax offset			
E2\$			
National rental affordability	scheme tax offset		
E3\$		Defined	lable toy offerte
Exploration credit tax offse	0.00	E\$	lable tax offsets 24,776.18
E+0[0.00	Eဖုု	(E1 plus E2 plus E3 plus E4)
	16		(= - piec == piec == piec ==)
	*TAX PAYABL	E T5 \$	0.00
			(T3 less E – cannot be less than zero)
		Section	n 102AAM interest charge
		G\$	

Tax File Number Provided Credit for interest on early payments amount of interest H1\$ Credit for tax withheld - foreign resident withholding (excluding capital gains) H2\$ Credit for tax withheld - where ABN or TFN not quoted (non-individual) H3\$ Credit for TFN amounts withheld from payments from closely held trusts H5\$ 0.00 Credit for interest on no-TFN tax offset **H6**\$ Credit for foreign resident capital gains Eligible credits withholding amounts H8\$ 0.00 H \$ (H1 plus H2 plus H3 plus H5 plus H6 plus H8) Tax offset refunds 1\$ 24,413.93 (Remainder of refundable tax offsets) (unused amount from label E an amount must be included even if it is zero) PAYG instalments raised K \$ Supervisory levy L\$ 259.00 Supervisory levy adjustment for wound up funds M \$ Supervisory levy adjustment for new funds N \$ AMOUNT DUE OR REFUNDABLE S\$ -24,154.93 A positive amount at **S** is what you owe, while a negative amount is refundable to you. (T5 plus G less H less I less K plus L less M plus N) This is a mandatory label. Section E: Losses 14 Losses

OFFICIAL: Sensitive (when completed)

Tax losses carried forward to later income years

Net capital losses carried

forward to later income years

If total loss is greater than \$100,000,

complete and attach a Losses

schedule 2021.

60,431

Tax File Number Provided
Section F: Member information
MEMBER 1
Title: Mr X Mrs Miss Ms Other
Family name
Matusik
First given name Other given names
Peter Michael
Member's TFN See the Privacy note in the Declaration. Provided Provided Provided
Contributions OPENING ACCOUNT BALANCE \$ 1,601,163.31
Refer to instructions for completing these labels. Proceeds from primary residence disposal H \$
Employer contributions A \$
Personal contributions Non-assessable foreign superannuation fund amount Solution CGT small business retirement exemption Non-assessable foreign superannuation fund amount Transfer from reserve: assessable amount
C \$ CGT small business 15-year exemption amount D \$ Transfer from reserve: non-assessable amount L \$ Contributions from non-complying funds
Contributions from non-complying funds and previously non-complying funds Spouse and child contributions T \$ Any other contributions
Other third party contributions G \$
TOTAL CONTRIBUTIONS N \$ (Sum of labels A to M)
Other transactions Allocated carningc or losses 176,976.20
Accumulation phase account balance S1 \$ 0.00 P \$
Retirement phase account balance - Non CDBIS Outward rollovers and transfers Code
S2 \$ 824,949.51 Lump Sum payments R1 \$ 909,180.00 A
S3 \$ 0.00 Income stream payments R2 \$ 44,010.00
0 TRIS Count CLOSING ACCOUNT BALANCE \$ \$ 824,949.51 (\$1 plus \$2 plus \$3)
Accumulation phase value X1 \$
Retirement phase value X2 \$
Outstanding limited recourse borrowing arrangement amount

		Tax File N	umber Provided	
MEMBER 2				
Title: Mr Mrs X Miss Ms Other				
Family name				
Matusik First given name	Other alline names			
Carolyn	Other given names Joy			
Member's TEN				
See the Privacy note in the Declaration. Provided		Date of birth	Provide	d
Contributions OPENING ACCOU	NT BALANCE \$		1,412,207.00	
Refer to instructions for completing these label	/IO	rom primary residence dis	posal	
Employer contributions	H \$ Receipt dat		L	
A \$	H1	e Day Month	Year	
ABN of principal employer		foreign superannuation ful	nd amount	
A1	1 \$			
Personal contributions B \$		sable foreign superannuat	on fund amount	
CGT small business retirement exemption	· ·	m reserve: assessable am	J lount	
C \$	K \$□			
CGT small business 15-year exemption amount		m reserve: non-assessabl	e amount	
D \$ Personal injury election	L \$	012450HP 6		
E \$	and previou	ns from non-complying fu usly non-complying funds	nas	
Spouse and child contributions	т \$_	но реда пр едилитивален		
F \$	(including S	ontributions luper Co-contributions and	d	
Other third party contributions G \$	M \$	e Super Amounts)		
	4			
TOTAL CONTRIBUTIONS N S	(Sum of labels A to I			
				Loss
Other transactions Allo	cated earnings or losses	\$	204,527.29	
Accumulation phase account balance	Inward rollovers and P	\$		
S1 \$ 0.00	transfers Outward			
Retirement phase account balance – Non CDBIS	rollovers and transfers	\$		
\$2 \$ 1,581,424.29	Lump Sum payments R1	\$		Code
Retirement phase account balance	Income			Code
- CDBIS 0.00	stream R2	\$	35,310.00	M
0.00	payments			
0 TRIS Count CLOSING ACCOU	JNT BALANCE S	\$	1,581,424.29	
· · · · · · · · · · · · · · · · · · ·		(S1 plus S2 plus	S3)]
Accumulation	on phase value X1	\$		
Retireme	nt phase value X2	\$		

Outstanding limited recourse borrowing arrangement amount

		Tax File Number	Provided
Section H: Assets and liabi	lities		
5 ASSETS			
5a Australian managed investments	Listed trusts A	\$	
	Unlisted trusts B	\$	
	Insurance policy C	\$	
	Other managed investments D	\$	
b Australian direct investments	Cash and term deposits E	\$	366,738
Limited recourse borrowing arrangement Australian residential real property	Debt securities F	\$	
J1 \$	Loans G	\$	
Australian non-residential real property	Listed shares H	\$	2,015,221
Overseas real property	Unlisted shares	\$	
J3 \$	Limited recourse borrowing arrangements	\$	
Australian shares	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
Overseas shares	real property K	\$[
J5 \$	Residential real property	\$	
Other	Collectables and	¢ -	
J6 \$	personal use assets		
Property count J7	Other assets O	\$[24,413
c Other investments	Crypto-Currency N	\$	
d Overseas direct investments	Overseas shares P	\$	
Overseas	non recidential real property Q	\$	
Over	seas residential real property R	\$	
Ove	erseas managed investments \$	\$	
	Other overseas assots T	\$	
	AND OVERSEAS ASSETS U labels A to T)	\$	2,406,372
5e In-house assets Did the fund have a loan to, lease or investment in, related part (known as in-house asse at the end of the income ye	ets)	\$	

					Tax File Numbe	r Provided
15f	financial institution?	A No B No	Yes			
16	LIABILITIES					
	Borrowings for limited recourse borrowing arrangements V1 \$ Permissible temporary borrowings V2 \$ Other borrowings V3 \$	Во	rrowings	v	\$	
	Total member clos			w	\$	2,406,372
	(total of all CLOSING ACCOUNT BALANCEs fro	om Sections Reserve a	i and dj		\$ [2,406,372
				X Y		
			liabilities			
		TOTAL LI	ABILITIES	_	\$	2,406,372
	ction I: Taxation of financia		gemen	nts		
17	Taxation of financial arrangements (TOF	-	gains H (\$□		
		Total TOFA I	osses I	- \$Г		
				11		
<u></u>	ction J: Other information					15
	ily trust election status If the trust or fund has made, or is making, a fam specified of the election (for example)					A
	If revoking or varying a family trust eand complete and attach the F					в
Inte	rposed entity election status If the trust or fund has an existing election, we or fund is making one or more elections specified and complete an Interposed er	vrite the earli	est income y , write the ea	year arlie:	specified. If the trust st income year being	c
					rint R , and complete or revocation 2021.	D [

Too Elle Month on	100017996					
Tax File Number	Provided					
Section K: Declarations						
Penalties may be imposed for false or misleading information in addition to penalties relating to any	tax shortfalls.					
Important Before making this declaration check to ensure that all income has been disclosed and the annual return, all attached schedules and any additional documents are true and correct in every detail. If you leave labels blank, you will have specified a zero amount or the label was not applicable to you. If you are in doubt about any aspect of the annual return, place all the facts before the ATO.						
Privacy The ATO is authorised by the <i>Taxation Administration Act 1953</i> to request the provision of tax file numbers (TFI identify the entity in our records. It is not an offence not to provide the TFN. However if you do not provide the form may be delayed. Taxation law authorises the ATO to collect information and disclose it to other government agencies. For information and disclose it to other government agencies.	TFN, the processing of this					
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 records. I have received a copy of the audit report and are aware of any matters raised therein. The informaturn, including any attached schedules and additional documentation is true and correct.	as such in the SMSF's nation on this annual					
Authorised dustee's, director's or public officer's signature						
The Making Date 17	Month Year / 2021					
Preferred trustee or director contact details:						
Title: Mr X Mrs Miss Ms Other						
Family name						
Matusik						
First given name Other given names						
Peter Michael						
Phone number 07 3286 1322						
Email address						
Non-individual trustee name (if applicable)						
Matusik Enterprises Pty Limited						
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 use the ABN and be provide on this annual return to maintain the integrity of the register. For further information, refer to the integrity of the register.	usiness details which you structions.					
TAX AGENT'S DECLARATION: I declare that the Self-managed superannuation fund annual return 2021 has been prepared in accordance provided by the trustees, that the trustees have given me a declaration stating that the information provided correct, and that the trustees have authorised me to lodge this annual return. Tax agent's signature						
Date Day	Month Year					
Sale						

rax agents signature		
		Date Month Year
Tax agent's contact details		
Title: Mr Mrs X Miss Ms	Other	
Family name	8	
Sherman		
First given name	Other given names	
Shona	Lorraine	
Tax agent's practice		
HFB Super Pty Ltd		
Tax agent's phone number	Reference number	Tax agent number
07 3286 1322	MATP	24805931

Capital gains tax (CGT) schedule

■ Use in conjunction with company, trust, fund

When completing this form

2021

SPrint clearly, using a blue Use BLOCK LETTERS SMITHERS Do not use correction Sign next to any correction	anc fluid	or covering s	aracter in each bo	ox. su	iperannuat Refer to th available c	tion fund ne <i>Guide</i> on our we	or the self-managed annual return. to capital gains tax 2021 absite at ato.gov.au for v to complete this schedule.	
Tax file number (TFN We are authorised to However, if you don Australian business	by lav	w to request y could increase	the chance of d	elay or erro			ır form.	
Taxpayer's name			93072119090				_	
THE MATUSIK SUP	ERA	OITAUNNA	N FUND					
1 Current year ca	pital	l gains and	capital losses					
Shares in companies		٠,	Capital gain	40	000	1	Capital loss	100.055
listed on an Australian securities exchange	A	D		48	,223	K \$ _		108,655
Other shares	B	\$				L \$ [
Units in unit trusts listed on an Australian securities exchange	C	\$				м\$[
Other units	D	\$				N \$		
Real estate situated in Australia		\$				o \$[
Other real estate	F	\$				P \$ [
Amount of capital gains from a trust (including a managed fund)	G	\$					*	
Collectables	Н:	\$				Q \$ [
Other CGT assets and any other CGT events		\$				R \$ [
Amount of capital gain previously deferred under transitional CGT relief for superannuation funds	S	\$			0	the tota	e amounts at labels K to R and Il in item 2 label A – Total curre losses.	
Total current year capital gains	J :	\$		48	3,223			

			Т	ax File Number	Provided	
2	Capital losses					
	Total current year capital loss	ses A	\$			108,655
	Total current year capital losses appl	ied E	\$			48,223
	Total prior year net capital losses appl	ied (; \$			
	Total capital losses transferred in appl (only for transfers involving a foreign bank branch permanent establishment of a foreign financial ent	or	\$			
	Total capital losses applie	ed E	\$			48,223
		A	dd	amounts at B, C ar	nd D .	
3	Unapplied net capital losses carried forward					
•	Net capital losses from collectables carried forward to later income ye	ars 🗗	\$			
	Other net capital losses carried forward to later income ye					60,431
		A to	.dd o lal	amounts at A and I bel V – Net capital ter income years o	losses carried	forward
1	CGT discount					
	Total CGT discount applie	ed 🗗	\$			
5	CGT concessions for small business					
	Small business active asset reduct	ion 🖊	\$			
	Small business retirement exempt	ion E	3 \$			
	Small business rollo	ver C	\$			
	Total small business concessions applie	ed C	\$			
6	Net capital gain	-				
	Net capital ga	in 🛮	\$			
		Z	ero)	ess 2E less 4A less). Transfer the amou tal gain on your ta	ınt at A to label	

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

Tax File Number

Provided

Taxpayer's declaration

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

Important

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

Privaoy

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

I declare that the information on this form is true and correct. Signature Date Contact name Peter Michael Matusik Daytime contact number (include area code) 07 3286 1322

Losses schedule 2021

Companies and trusts that do not join consolidated groups should complete and attach this schedule to their 2021 tax return.

Print neatly in BLOCK LETTERS with a black or blue ballpoint pen only. Print one letter		mber in each box. Do not use
correction fluid or tape.		
Place X in all applicable boxes.		
Refer to Losses schedule instructions 2021, available on our website ato.gov.au for instructions on how to complete this schedule.		
Tax file number (TFN)		
Provided		
Name of entity		
THE MATUSIK SUPERANNUATION FUND		
Australian business number		
93872119893		
33072113033		
Part A - Losses carried forward to the 2021-	22	income year - excludes film losses
1 Tax losses carried forward to later income years		-
Year of loss	_	
2020–21	В	
2019–20	C	
2018–19	D	
0047 40	_	
2017–18	E	
2016–17	F	
2015–16 and earlier income years	G	
Total	U	
Transfer the amount at U to the Tax losses carried	forw	ard to later income years label on your tax return.
2 Net capital losses carried forward to later income years Year of loss		
2020–21	н	60,431
		50, 10 1
2019–20	•	
2018–19	J	
2017–18	K	
2016–17	L	
2015–16 and earlier income years	M	

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

Total **V**

				Provided
P	Part B - Ownership and bu	ısiness continuity	/ te	est – company and listed widely held trust only
	Complete item 3 of Part B if a loss is being ca atis ied in relation to that loss.	rried forward to later income ye	ears	and the business continuity test has to be
D	o not complete items 1 or 2 of Part B if, in th			
а	gainst a net capital gain or, in the case of con	npanies, losses have not been	tran	nsferred in or out.
1	Whether continuity of majority	Year of loss		
	ownership test passed	2020–21	A	Yes No
	Nute. If the entity has deducted, applied, transferred in or transferred out (as applicable)	2040.00	ь	V
	in the 2020-21 income year a loss incurred in	2019–20	В	Yes No
	any of the listed years, print X in the Yes or No box to indicate whether the entity has satisfied	2018–19	C	Yes No
	the continuity of majority ownership test in respect of that loss.	2017–18	D	Yes No
		2016–17	E	Yes No
		2015–16 and earlier income years	F	Yes No
_	Amount of loans aladystad/on-lind for			
2	Amount of losses deducted/applied for business continuity test is satisfied - exc		ority	y ownership test is not passed but the
	•	Tax losses	G	
			1	
		Net capital losses	Щ	
3	Losses carried forward for which the bu	siness continuity test must	be	satisfied before they can be deducted/
	applied in later years – excludes film losses	·		·
		Tax losses	П	
		Net capital losses	J	
			ı	
4	Do current year loss provisions apply? Is the company required to calculate its taxable.	e income or tay loss for		
	the year under Subdivision 165-B or its net capital gain or net capital loss for the year under Subdivision 165-CB of the <i>Income Tax Assessment Act</i>		K	Yes No
	1997 (ITAA 1997)?	ome tax Assessment Act		
<u> </u>	art C - Unrealised losses - com		-	
_	art C - Unrealised losses - com	ipany only		
	Note: These questions relate to the operation of Su			
	Has a changeover time occurred in relation to the after 1.00pm by legal time in the Australian Capit		L	Yes No
	11 November 1999?			
	If you printed X in the No box at L, do not complete	e M, N or O.		
	At the changeover time did the company satisfy net asset value test under section 152-15 of ITAA		М	Yes No
	If you printed X in the No box at M , has the comp	•	N	Yes No
	it had an unrealised net loss at the changeover tir			
	If you printed X in the Yes box at N , what was the unrealised net loss calculated under section 165-		0	

	Ta	x File Number	Provided
Part D – Life insurance companies			
Complying superannuation class tax losses carried forward to later income years	P		
Complying superannuation net capital losses carried forward to later income years	Q		
Part E – Controlled foreign company losses			
Current year CFC losses	M		
CFC losses deducted	N		
CFC losses carried forward	0		
Part F – Tax losses reconciliation statement			
Balance of tax losses brought forward from the prior income year	A		
ADD Uplift of tax losses of designated infrastructure project entities	В		
SUBTRACT Net forgiven amount of debt	С		
ADD Tax loss incurred (if any) during current year	D		
ADD Tax loss amount from conversion of excess franking offsets	E		
SUBTRACT Net exempt income	F		
SUBTRACT Tax losses forgone	G		
SUBTRACT Tax losses deducted	Н		
SUBTRACT Tax losses transferred out under Subdivision 170-A (only for transfers involving a foreign bank branch or a PE of a foreign financial entity)	8		
Total tax losses carried forward to later income years	J		
Transfer the amount at J to the Tax losses carried for	rwar	d to later income ye	ears label on your tax return.

Tax File Number	Provided
Tax File Number	Provided

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

Important

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

Privacy

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

Taxpayor's declaration

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

Signature	
Jater Wetundo	Date Day Month Year
	Date & 7 / V 7 / V OC
Contact person	Daytime contact number (include area code)
Peter Michael Matusik	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	THE MATUSIK SUPERANNUATION FUND	2021

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

Important

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

Declaration:

I declare that:

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

Signature of Partner, Trustee, or Director

Date

27 109 A

ELECTRONIC FUNDS TRANSFER CONSENT

This declaration is to be completed when an electronic funds transfer (EFT) of a refund is requested and the tax return is being lodged through an approved ATO electronic channel.

This declaration must be signed by the partner, trustee, director or public officer prior to the EFT details being transmitted to the Tax Office. If you elect for an EFT, all details below must be completed.

Important: Care should be taken when completing EFT details as the payment of any refund will be made to the account specified.

Account Name	The Matusik Superannuation Fund		
Account Number	184446 117846303	Client Reference	MATP

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

Signature

Date 27 109 121

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	MATP
Agent's Phone Nun	nber 07 3286 1322	Tax Agent Number	24805931

Peter Matusik
THE MATUSIK SUPERANNUATION FUND
23 Yorston Place, ORMISTON, Queensland 4160

Dear Sir/Madam

THE MATUSIK SUPERANNUATION FUND Continuation of Account Based Pension

We have recently completed a review of the assets of **THE MATUSIK SUPERANNUATION FUND** and your Account Based Pension account in the Fund as at 01 July 2020. It is confirmed that the pension balance will automatically revert to Carolyn Matusik 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 2021.

Your balance contains:

- a Taxable Balance of: \$1,313,498.02; and
- a Tax Free Balance of: \$0.00

Tax Free proportion: 0.00%.

Your Minimum income stream applicable is \$39,400.00.

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

Yours sincerely

Peter Matusik

23 Yorston Place, ORMISTON, Queensland 4160

Carolyn Matusik
THE MATUSIK SUPERANNUATION FUND
23 Yorston Place, ORMISTON, Queensland 4160

Dear Sir/Madam

THE MATUSIK SUPERANNUATION FUND Continuation of Account Based Pension

We have recently completed a review of the assets of **THE MATUSIK SUPERANNUATION FUND** and your Account Based Pension account in the Fund as at 01 July 2020. It is confirmed that the pension balance will automatically revert to Peter Matusik 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 2021.

Your balance contains:

a Taxable Balance of: \$1,014,845.91; anda Tax Free Balance of: \$111,115.05

Tax Free proportion: 9.87%.

Your Minimum income stream applicable is \$28,150.00.

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

Yours sincerely

Carolyn Matusik

23 Yorston Place, ORMISTON, Queensland 4160

(m)

Carolyn Matusik
THE MATUSIK SUPERANNUATION FUND
23 Yorston Place, ORMISTON, Queensland 4160

Dear Sir/Madam

THE MATUSIK SUPERANNUATION FUND Continuation of Account Based Pension

We have recently completed a review of the assets of **THE MATUSIK SUPERANNUATION FUND** and your Account Based Pension account in the Fund as at 01 July 2020. The pension does not have a reversionary beneficiary.

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 2021.

Your balance contains:

a Taxable Balance of: \$0.00; anda Tax Free Balance of: \$286,246.04

Tax Free proportion: 100.00%.

Your Minimum income stream applicable is \$7,160.00

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

Yours sincerely

Carolyn Matusik

23 Yorston Place, ORMISTON, Queensland 4160

- 0

Peter Matusik
THE MATUSIK SUPERANNUATION FUND
23 Yorston Place, ORMISTON, Queensland 4160

Dear Sir/Madam

THE MATUSIK SUPERANNUATION FUND Continuation of Account Based Pension

We have recently completed a review of the assets of **THE MATUSIK SUPERANNUATION FUND** and your Account Based Pension account in the Fund as at 01 July 2020. The pension does not have a reversionary beneficiary.

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 2021.

Your balance contains:

- a Taxable Balance of: \$0.00; and

a Tax Free Balance of: \$153,817.74

Tax Free proportion: 100.00%.

Your Minimum income stream applicable is \$4,610.00.

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

Yours sincerely

Peter Matusik

23 Yorston Place, ORMISTON, Queensland 4160

THE MATUSIK SUPERANNUATION FUND

held onat 231 Wellington Street, ORMISTON, Queensland 4160			
PRESENT:	Peter Matusik and Carolyn Matusik		
PENSION CONTINUATION:	Peter Matusik wishes to continue existing Account Based Pension with a commencement date of 30/06/2012. It is confirmed that the pension balance will automatically revert to Carolyn Matusik upon the death of the member.		
	The Pension Account Balance as at 01/07/2020 \$1,313,498.02, consisting of:		
	 Taxable amount of \$1,313,498.02; and Tax Free amount of \$0.00 Tax Free proportion: 0.00%. 		
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 \$39,400.00 in the frequency of at least an annual payment.		

CLOSURE:

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

Chairperson

THE MATUSIK SUPERANNUATION FUND

Minutes of a Meeting of the Director(s) held onat 231 Wellington Street, ORMISTON, Queensland 4160		
PRESENT:	Peter Matusik and Carolyn Matusik	
PENSION CONTINUATION:	Carolyn Matusik wishes to continue existing Account Based Pension with a commencement date of 30/06/2012. It is confirmed that the pension balance will automatically revert to Peter Matusik upon the death of the member.	
	The Pension Account Balance as at 01/07/2020 \$1,125,960.96, consisting of:	
	Taxable amount of \$1,014,845.91; and Tax Free amount of \$111,115.05 Tax Free proportion: 9.87%.	
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 \$28,150.00 in the frequency of at least an annual payment.	
CLOSURE:	Signed by the trustee(s) pursuant to the Fund Deed.	

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THE MATUSIK SUPERANNUATION FUND

CLOSURE:

Minutes of a Meeting of the Director(s) held onat 231 Wellington Street, ORMISTON, Queensland 4160		
PRESENT:	Peter Matusik and Carolyn Matusik	
PENSION CONTINUATION:	Carolyn Matusik wishes to continue existing Account Based Pension with a commencement date of 11/09/2018. The pension does not have a reversionary beneficiary.	
	The Pension Account Balance as at 01/07/2020 \$286,246.04, consisting of:	
	 Taxable amount of \$0.00; and Tax Free amount of \$286,246.04 Tax Free proportion: 100.00%. 	
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 one of their dependants or cashed as a lump sum to the pensioner's estate. 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 \$7,160.00 in the frequency of at least an annual payment.	

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

PeterMatusik Chairperson

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THE MATUSIK SUPERANNUATION FUND

CLOSURE:

Minutes of a Meeting of the Director(s) held onat 231 Wellington Street, ORMISTON, Queensland 4160		
PRESENT:	Peter Matusik and Carolyn Matusik	
PENSION CONTINUATION:	Peter Matusik wishes to continue existing Account Based Pension with a commencement date of 11/09/2018. The pension does not have a reversionary beneficiary.	
	The Pension Account Balance as at 01/07/2020 \$153,817.74, consisting of:	
	 Taxable amount of \$0.00; and Tax Free amount of \$153,817.74 Tax Free proportion: 100.00%. 	
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 one of their dependants or cashed as a lump sum to the pensioner's estate. 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 \$4,610.00 in the frequency of at least an annual payment.	

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

PeterMatusik Chairperson

 $(a) = x \cdot (a - \underline{x})$

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THE MATUSIK SUPERANNUATION FUND Matusik Enterprises Pty Limited ACN: 074087460

Trustees Declaration

The directors of the trustee company 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 directors of the trustee company declare that:

- the financial statements and notes to the financial statements for the year ended 30 June 2021 present fairly, in all material respects, the financial position of the superannuation fund at 30 June 2021 and the results of its operations for the year ended on that date in accordance with the accounting policies described in Note 1 to the financial statements;
- the financial statements and notes to the financial statements have been prepared in accordance with the requirements of the trust deed; and
- (iii) the operation of the superannuation fund has been carried out in accordance with its trust deed and in compliance with the requirements of the Superannuation Industry (Supervision) Act 1993 and associated Regulations during the year ended 30 June 2021.

Signed in accordance with a resolution of the directors of the trustee company by:

Peter Matusik

Matusik Enterprises Pty Limited

Director

Carolyn Matusik

Matusik Enterprises Pty Limited

Director

Dated this 27th day of September 2021

Memorandum of Resolutions of the Director(s) of

Matusik Enterprises Pty Limited ACN: 074087460

ATF THE MATUSIK 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 trustee(s), 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 2021 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 2021, 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 trustee(s) 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 their average daily balance (an alternative allocation basis may be percentage of opening balance).

INVESTMENT ACQUISITIONS:

It was resolved to ratify the investment acquisitions throughout the financial year ended 30 June 2021.

INVESTMENT DISPOSALS:

It was resolved to ratify the investment disposals throughout the financial year ended 30 June 2021.

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 trustee(s) confirmed that they are qualified to act as trustee(s) of the fund and that they are not disqualified persons as defined by s 120 of the SISA.

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Memorandum of Resolutions of the Director(s) of

Matusik Enterprises Pty Limited ACN: 074087460

ATF THE MATUSIK SUPERANNUATION FUND

CONTRIBUTIONS RECEIVED:

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

on the basis of the schedule provided by the principal Fund employer.

PAYMENT OF BENEFITS:

The trustee has 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 trustee has reviewed the payment of the benefit and received advice that the transfer is in accordance with the Deed and the superannuation laws. As such the trustee has resolved to allow the payment of the benefits on behalf of

the member.

CLOSURE:

Signed as a true record -

Peter Matusik

Carolyn Matusik

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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
- $\ensuremath{\text{\tiny{\#}}}$ 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)
- mathe 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.

Section A: Member details	
1 Tax file number (TFN)	
2 Name Title: Mr X Mrs Miss Ms Other Family name	
M A T U S I K Other given names Other given names	
PETER MICHAEL 3 Date of birth Day / Month / Year	
4 Current residential address	
23 YORSTON PLACE	
Suburb/town State/territory Pos	stçode
ORMISTON QLD 4	

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Section B: Cancellation
Are you cancelling a previous transfer balance account event? No X Yes
Section 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 Fund/Provider name THE MATUSIK SUPERANNUATION FUND
9 Fund/Provider ABN 9 3 8 7 2 1 1 9 8 9 3
10 Fund/Provider TFN
You don't have to provide the TFN to us. However, if you do, it will help us identify the fund/provider correctly and process your report quickly. For more information on privacy, refer to ato.gov.au/privacy

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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 Oo 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 \times 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
	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
Ĭ	So 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
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 5 / 0 2 / 2 0 2 1
18	Value \$ 766663:96
19	If you are responding to a commutation authority, was the commutation paid directly to the member? (ie, paid out of the super system)
	Only complete this question if the Reporting event type is Commutation authority – commuted in full or Commutation authority – commuted in part. If unknown leave this question blank. No Yes
Se	ection E-1: Member account details
0	Only certain event types require you to answer question 20. Refer to the instructions for more information on how to complete this question.
20	Member account type
	Account-based income stream X
	Capped defined benefit income stream just before 1 July 2017
	Market-linked capped defined benefit income stream just before 1 July 2017
21	Capped defined benefit income stream on or after 1 July 2017 Is the account closed?
21	No X Yes
22	Unique superannuation identifier (USI)
	If you don't have a USI leave this question blank
23	Member account number
	MATPET00001P
24	Member client identifier (number)
•	If you don't have a member client identifier leave this question blank MATUPETE0001 1

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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 Oo to question 13.
	An income stream that commenced on or after 1 July 2017 Go to question 13.
	A limited recourse borrowing arrangement repayment O Go to question 13.
	A different transfer balance cap event O 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
4.4	Sther transfer belongs can exert
14	Other transfer balance cap event Any other transfer balance cap event.
	If your member has voluntarily requested that you commute an amount, select Member commutation event type. Do not use this event type if you are responding to a commutation authority from the ATO.
	Event type: Member commutation
	Income stream stops being in retirement phase
	Structured settlement – post 1 July 2017
	Of to Event details on the next page.

C 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.
	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)
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
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 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
	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
	If you don't have a OSI 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
	If you don't have a thermoel client lideratine leave this question blank

Se	ection D-3: Event three
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 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 Oo to question 13.
	A limited recourse borrowing arrangement repayment O Go to question 13.
	A different transfer balance cap event O 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
14	So to Event details on the next page. 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
	Of to Event details on the next page.

ato.gov.au

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)
Ęν	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	
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 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
	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?
22	No Yes Unique superannuation identifier (USI)
22	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
	If you don't have a mornoel olient identified leave this question blank

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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 Oo to question 12.
	An income stream that commenced prior to 1 July 2017 Oo 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
	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
	S Go 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
	Of to Event details on the next page.

Ct	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.
	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)
Εv	ent details
•	You must complete Q17 and Q18 for each event reported with the exception of Commutation authority (deceased) and commutation authority – defined benefit. Refer to the instructions for more information on how to complete this section.
17	Effective date / / / / / / / / 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
_	ection E-4: 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 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 F: Third party details
	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 file number (TFN)
	You don't have to provide the TFN to us. However, if you do, it will help us identify the third party correctly and process your report quickly. For more information on privacy, refer to ato.gov.au/privacy
26 Fam	Name nily name
First	t given name Other given names
27	Date of birth

г ¬
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 PETER MATUSIK Business hours phone number (include area code) 0 7 3 2 8 6 1 3 2 2
Trustee, director a authorised officer signature
Day Month Year Date 1 5 0 9 2 0 2 1
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
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

Australian Securities & Investments Commission

Form 484

Corporations Act 2001

Trace Number 2008123203

Change to company details

Sections A. B or C ma	y be lodged independently	with this signed cover	page to notify ASIC of:

- A1 Change of address
- A2 Change of name officeholders and proprietary company members
- A3 Change ultimate holding company
- B1 Cease company officeholder
- B2 Appoint company officeholder
- B3 Special purpose company

- C1 Cancellation of shares
- C2 Issue of shares
- C3 Change to share structure
- C4 Changes to the register of members for proprietary companies

Company details	Company name							
	MATUSIK ENTERPRISES PTY LIMITED							
	ACN/ABN							
	074087460							
Refer to guide for information about	Corporate key							
corporate key								
	<u>, </u>							
Lodgement details	Who should ASIC contact if there is a query about to	his for	m?					
_	ASIC registered agent number (if applicable)							
An image of this form will be available as	35396							
part of the public register.	Firm/organisation							
	HFB ACCOUNTING PTY LTD							
	Contact name/position description	40	Telephone number (duri	ng b	ousiness hours)			
	ALISON PEARCE		(07)3286-1322					
	Email address (optional)							
	ALISONP@HFBGROUP.COM.AU							
	Postal address							
	146 BLOOMFIELD STREET							
	Suburb/City	Sta	te/Territory	_	Postcode			
	CLEVELAND	QL	LD		4163			
N		12			=			
Signature This form must be signed by a current offic	eholder of the company.							
		_#	d anations of this fame as	_ 4	us and secondate			
	I certify that the information in this cover sheet and the a Name	allache	ed sections of this form an	e uru	ue and complete.			
	CAROLYN JOY MATUSIK							
Capacity								
	Director							
	Director							
	Company secretary							
	Company secretary Signature) —						
	Company secretary Signature	>						
	Company secretary Signature	>						
	Company secretary Signature)						

Lodgement

Send completed and signed forms to:

Australian Securities and Investments Commission, PO Box 4000, Gippsland Mail Centre VIC 3841.

Or lodge the form electronically by visiting the ASIC website www.asic.gov.au

Web www.asic.gov.au Need help? www.asic.gov.au/question

Telephone 1300 300 630

Section C completion guide

Standard share codes

Refer to the following table for the share class codes for sections C1, C2, C3 and C4

Share class code	Full title	Share class code	Full title
Α	A	PRF	preference
В	Betc	CUMP	cumulative preference
EMP	employee's	NCP	non-cumulative preference
FOU	founder's	REDP	redeemable preference
LG	life governor's	NRP	non-redeemable preference
MAN	management	CRP	cumulative redeemable preference
ORD	ordinary	NCRP	non-cumulative redeemable preference
RED	redeemable	PARP	participative preference
SPE	special		

If you are using the standard share class codes you do not need to provide the full title for the shares, just the share class code.

If you are not using the standard share class code, enter a code of no more than 4 letters and then show the full title.

Sections to complete

Use the table below to identify the sections of this form to complete (please indicate the sections that have been completed). Completion of this table is optional.

		C1 - Cancellation of shares	C2 - Issue of shares	C3 - Change to share structure table	C4 - Change to members register
	Issue of shares				
V	Proprietary company	Not required	1	1	1
	+ Public company				
$-\Box$	if in response to the Annual company statement	Not required	1	✓	Not required
\Box	if not in response to the Annual company statement	Not required	1	✔ Preferred	Not required
	Cancellation of shares				
	Proprietary company	1	Not required	1	1
	→ Public company				
	if in response to the Annual company statement	1	Not required	•	Not required
	if not in response to the Annual company statement	1	Not required	✓ Preferred	Not required
	Transfer of shares				
	Proprietary company	Not required	Not required	Not required	1
	→ Public company				
$-\Box$	if in response to the Annual company statement	Not required	Not required	Not required	Not required
\Box	if not in response to the Annual company statement	Not required	Not required	Not required	Not required
	Changes to amounts paid				
	Proprietary company	Not required	Not required	1	1
	Public company				
	if in response to the Annual company statement	Not required	Not required	✓	Not required
$-\Box$	if not in response to the Annual company statement	Not required	Not required	Not required	Not required
	Changes to beneficial ownership				
	Proprietary company	Not required	Not required	Not required	1
	Public company	9			
Ш	if in response to the Annual company statement	Not required	Not required	Not required	Not required
ЦП	if not in response to the Annual company statement	Not required	Not required	Not required	Not required

To notify ASIC about a division or conversion of a class of shares, you must lodge a Form 211 within 28 days after the change occurring.

To notify ASIC about a conversion of shares into larger or smaller numbers, you must lodge a Form 2205B within 28 days after the change occurring.

ASIC Form 484 Section C

C1 Cancellation of shares Reason for cancellation Redeemable preference shares — \$.254J Please indicate the reason that shares Redeemed out of profits have been cancelled (select one or more boxes) Redeemed out of proceeds of a fresh issue of shares Capital reduction — S.256A - S.256E Single shareholder company Multiple shareholder company. A Form 2560 must be lodged before a capital reduction takes place Share buy-back. — ss.257H(3) Minimum holding buy-back by listed company Other buy-back type. A form 280 or 281 must be lodged at least 14 days, and no more than 1 year before the share buy-back can take place Forfeited shares - S.258D Shares returned to a public company — ss.258E(2) & (3) Under section 651C, 724(2), 737 or 738 Under section 1325A (court order) Other Description Give section reference List the details of shares cancelled in the following table **Details of cancelled shares** Share class code Number of shares cancelled Amount paid (cash or otherwise) Earliest date of change Please indicate the earliest date that any of the above changes occurred. D]

C2 Issue of	shares				
List details of new sha	re issues in the following table.				
Share class code	Number of shares issued	Amount paid per share		Amount unpaid pe	r share
ORD	14	1.00		0.00	
2 2 / 0 9 [D D] [M N If shares were issue Yes if yes, proprie and either a	earliest date that any of the above changed 2	of the shares issued under a written on the shares issued under a written on 207Z certifying that all stamp duties	s have been paid. Pul		•
Where a change to the	o share structure e share structure table has occurred (egare classes not affected by the change a	. as a result of the issue or cancellation	on of shares), please	show the updated d	letails for the share classes
Share class code	Full title if not standard	ne nocreganea nere.	Total number of shares (current after changes)	Total amount paid on these shares	Total amount unpaid on these shares
ORD	ORDINARY SHARES		24	24.00	0.00
	earliest date that any of the above chang	ges occurred			

Is this document being lodged to update the Annual Company Statement that was sent to you?

Lodgement details

✓ Yes

50 0 3

C4 Changes to the register of members for proprietary companies

Use this section to notify changes to the register of members for your proprietary company (changes to the shareholdings of members):

- If there are 20 members or less in a share class, all changes need to be notified
- If there are more than 20 members in a share class, only changes to the top twenty need be notified (s178B)

	oly to e name and address		Family name Given names CAROLYN JOY						
	ose shareholding ha								
			npany name						
		ACN/ARBI	N/ ABN						
		Office, unit	t, level, or PO Box	number	<u> </u>				
			nber and Street na	ame					
		Suburb/Cit	-				State/	Territory	
		Postcode 4160	ON	Country (if n	ot Australia)				
		4100		0 0					
ase indicate the	hange e earliest date that a anges occurred.	Date of ch	09/2	1 YI					
ase indicate the ne following ch he changes at eneficially held	e earliest date that a anges occurred. re I usually means that	Date of ch ny 2 2 [D D]	[M M] [Y	Y] o the direct benef				the entitlements	
ase indicate the he following ch he changes as deneficially held	e earliest date that a anges occurred. re	Date of ch ny 2 2 [D D]	[M M] [Y	Y] o the direct benef				the entitlements Top 20 member (y/n)	
ase indicate the following cheine changes at the change at the cha	e earliest date that a langes occurred. re d usually means that ation to any dividend Shares increased by	Date of ch ny Date of ch property [D D] the owner of the s s. Shares held by Shares decreased by	[M M] [Y shares is entitled to a person as trusted Total number	o the direct benefee, nominee or or Total \$ paid on these	account of anothe Total \$ unpaid on these	r person are nor Fully paid	n-beneficially held. Beneficially	Тор 20	
ase indicate the he following character in the changes at the denoticially held ayments in relations code	re d usually means that ation to any dividend Shares increased by (number)	Date of ch ny Date of ch property [D D] the owner of the s s. Shares held by Shares decreased by	[M M] [Y shares is entitled to a person as trusted Total number now held	o the direct benefee, nominee or or Total \$ paid on these shares	Total \$ unpaid on these shares	r person are nor Fully paid (y/n)	n-beneficially held. Beneficially held (y/n)	Тор 20	
he following ch The changes and deneficially held ayments in relations.	re d usually means that ation to any dividend Shares increased by (number)	Date of ch ny Date of ch property [D D] the owner of the s s. Shares held by Shares decreased by	[M M] [Y shares is entitled to a person as trusted Total number now held	o the direct benefee, nominee or or Total \$ paid on these shares	Total \$ unpaid on these shares	r person are nor Fully paid (y/n)	n-beneficially held. Beneficially held (y/n)	Тор 20	
ase indicate the following che changes at eneficially held ayments in relations code	re d usually means that ation to any dividend Shares increased by (number)	Date of ch ny Date of ch property [D D] the owner of the s s. Shares held by Shares decreased by	[M M] [Y shares is entitled to a person as trusted Total number now held	o the direct benefee, nominee or or Total \$ paid on these shares	Total \$ unpaid on these shares	r person are nor Fully paid (y/n)	n-beneficially held. Beneficially held (y/n)	Тор 20	

 $(w) \in E_{n} \cap w \subseteq X$

C4 Changes to the register of members for proprietary companies

0

9 /

M] [Y Y]

2 /

D] [M

[D

Use this section to notify changes to the register of members for your proprietary company (changes to the shareholdings of members):

• If there are 20 members or less in a share class, all changes need to be notified

The changes app		✓ Fan	nily name		Given names			
	e name and address lose shareholding ha		K		PETER MICHA	EL		
changed		OR Con	npany name					
		ACN/ARB	N/ ABN					
		Office uni	t, level, or PO Box	number				
			1121211					
		_	nber and Street na	ame				
		SERVE - 188	STON PLACE					
		Suburb/Ci ORMIST					State	e/Territory
		Postcode		Country (if n	ot Australia)		1 4-	
		4160			otridottanaj			
Earliest date of on the Please indicate the of the following characters.	e earliest date that a	Date of ch any 2 2 [D D]	0 9 2	1 YJ				
	i re d usually means that ation to any dividenc							
Share class code	Shares increased by (number)	Shares decreased by (number)	Total number now held	Total \$ paid on these shares	Total \$ unpaid on these shares	Fully paid (y/n)	Beneficially held (y/n)	Top 20 member (y/n)
	12		12	12.00	0.00	Υ	Υ	
ORD								
ORD							1	
ORD								
ORD							_	

register

(New members only)

APPLICATION FOR SHARES

MATUSIK ENTERPRISES PTY LIMITED ACN: 074 087 460

I, CAROLYN JOY MATUSIK of 23 YORSTON PLACE ORMISTON QLD 4160 hereby apply for an allotment of shares in MATUSIK ENTERPRISES PTY LIMITED as follows:

CLASS OF SHARES:

ORD

NUMBER OF SHARES:

2

AMOUNT PAID PER SHARE:

\$1.00

AMOUNT UNPAID PER

\$0.00

SHARE:

I hereby agree to be bound by the Constitution of the company.

Signed:

The Member

Signed by Carolyn Joy Matusik:

Carolyn Joy Matusik

Member

Dated: 27/9/2021

APPLICATION FOR SHARES

MATUSIK ENTERPRISES PTY LIMITED ACN: 074 087 460

I, PETER MICHAEL MATUSIK of 23 YORSTON PLACE ORMISTON QLD 4160 hereby apply for an allotment of shares in MATUSIK ENTERPRISES PTY LIMITED as follows:

CLASS OF SHARES:

ORD

NUMBER OF SHARES:

12

AMOUNT PAID PER SHARE:

\$1.00

AMOUNT UNPAID PER

\$0.00

SHARE:

I hereby agree to be bound by the Constitution of the company.

Signed:

The Member

Signed by Peter Michael Matusik:

Peter Michael Matusik

Dated: 20/9/2021

MINUTES OF MEETING OF THE DIRECTORS

MATUSIK ENTERPRISES PTY LIMITED ACN: 074 087 460

HELD AT 146 BLOOMFIELD STREET, CLEVELAND, QLD 4163 ON 22 SEPTEMBER 2021

ATTENDEES: Carolyn Joy Matusik and Peter Michael Matusik

CHAIRPERSON: Carolyn Joy Matusik

ISSUE OF SHARES: It was **RESOLVED** to approve the following issue of shares:

APPLICANT: CAROLYN JOY MATUSIK of 23 YORSTON PLACE

ORMISTON QLD 4160

CLASS OF SHARES: ORD

NUMBER OF SHARES: 2

AMOUNT PAID \$1.00

PER SHARE:

APPLICANT:

PETER MICHAEL MATUSIK of 23 YORSTON PLACE

ORMISTON OLD 4160

CLASS OF SHARES: ORD

NUMBER OF SHARES: 12

AMOUNT PAID \$1.00

PER SHARE:

PREPARATION OFIt was also resolved to complete the new share certificates pursuant to the rules that govern the

certificates pursuant to the rules that govern the execution of documents by the company and to cancel any certificates that are no longer

required.

CLOSURE: There being no further business the meeting was

closed.

SIGNED as a true and correct record by:

Carolyn Joy Matusik

Dated: 21/9/2021

CONSENT TO BE A MEMBER AND HOLD SHARES

MATUSIK ENTERPRISES PTY LIMITED ACN: 074 087 460

I, CAROLYN JOY MATUSIK of 23 YORSTON PLACE ORMISTON QLD 4160 hereby consent to become a MEMBER and agree to take up the following SHARES for the forementioned company:

DATE: 22 September 2021

CLASS OF SHARES: ORD

NUMBER OF SHARES: 2

AMOUNT PAID PER SHARE: \$1.00

AMOUNT UNPAID PER \$0.00

SHARE:

Signed:

The Member

Signed by Carolyn Joy Matusik:

Carolyn Joy Matusik Member

Dated: 27/4/2021

CONSENT TO BE A MEMBER AND HOLD SHARES

MATUSIK ENTERPRISES PTY LIMITED ACN: 074 087 460

I, PETER MICHAEL MATUSIK of 23 YORSTON PLACE ORMISTON QLD 4160 hereby consent to become a MEMBER and agree to take up the following SHARES for the forementioned company:

DATE:

22 September 2021

CLASS OF SHARES:

ORD

NUMBER OF SHARES:

12

AMOUNT PAID PER SHARE:

\$1.00

AMOUNT UNPAID PER

\$0.00

SHARE:

Signed:

The Member

Signed by Peter Michael Matusik:

Peter Michael Matusik

Member

Dated: 21/9/2021

ATTEMPT OF THE PROPERTY OF THE

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*

SHARE CERTIFICATE

MATUSIK ENTERPRISES PTY LIMITED ACN: 074 087 460

Registered under the Corporations Act 2001(Cth)

This is to certify that:

CAROLYN JOY MATUSIK of 23 YORSTON PLACE ORMISTON QLD 4160 is the registered holder of:

Date	Class	Number of Shares	Total Amount Paid	Total Amount Unpaid
22 September 2021	ORD	2	2.00	0.00

The Directors

Carolyn Joy Matusik and Peter Michael Matusik of 23 YORSTON PLACE, ORMISTON, QLD 4160:

Carolyn Joy Matusik Director

Dated 27/9/22/

Peter Michael Matusik

Dated: 27/9/2021

SHARE CERTIFICATE

MATUSIK ENTERPRISES PTY LIMITED ACN: 074 087 460

Registered under the Corporations Act 2001(Cth)

This is to certify that:

PETER MICHAEL MATUSIK of 23 YORSTON PLACE ORMISTON QLD 4160 is the registered holder of:

Date	Class	Number of Shares	Total Amount Paid	Total Amount
				Unpaid
22 September 2021	ORD	12	12.00	0.00

The Directors

Carolyn Joy Matusik and Peter Michael Matusik of 23 YORSTON PLACE, ORMISTON, QLD 4160:

Carolyn Joy Matusik Director

Dated: 27/9/2021

Peter Michael Matusik
Director

Dated: 01/9/2021

Newscard Control

SHARE REGISTRY

MATUSIK ENTERPRISES PTY LIMITED ACN: 074 087 460

NEWLY ISSUED SHARES:

Date of Issue	Member	Number of shares	Class	Paid per share	re
22/09/2021	CAROLYN JOY MATUSIK of 23 YORSTON PLACE ORMISTON QLD 4160	N	ORD	46	\$1.00
22/09/2021	PETER MICHAEL MATUSIK of 23 YORSTON PLACE ORMISTON OLD 4160	12 ,	ORD		\$1.00

UPDATED SHARE REGISTRY:

PETER MICHAEL MATUSIK of 23 YORSTON PLACE ORMISTON QLD 4160	CAROLYN JOY MATUSIK of 23 YORSTON PLACE ORMISTON QLD 4160	Member
12	12	Number of shares
ORD	ORD	Class
\$12.00	\$12.00	Total Paid
\$0.00	\$0.00	Total Unpaid
~	~	Beneficially held