PART A

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

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

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electronically if you do not quote your TFN.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	XXX XXX XXX	Year 2022	
Name of partnership, trust, fund or entity	WATERS SUPERANNUATION FUND		

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

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

on tax returns	aspect of the tax retain, place all the facts before the	ax Office.	The tax law provides heavy penalties for false or misleading statements
on tax returns.			
Declaration:			
 the information 	provided to the agent for the proporation of this town	Acres Santa	Who was a second

BUR	Date	
	BUR	BUSE

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

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.

numb	64215004		
Account Nam	e BM AND RV WATERS SUPER FUND		
I authorise the refund to b	e deposited directly to the specified account.		
Signature	NIA	Date	-
		_	

Client Ref: WATERSUP Agent: 64215-004

Self-managed superannuation fund annual return

2022

Who should complete this annual return?

Only self-managed superannuation funds (SMSFs) can complete this annual return. All other funds must complete the Fund income tax return 2022 (NAT 71287).

Return year

2022

The Self-managed superannuation fund annual return instructions 2022 (NAT 71606) (the instructions) can assist you to complete this annual return.

The SMSF annual return cannot be used to notify

ection A: Fund information		_	
Tax file number (TFN)	XXX XXX XXX		
The ATO is authorised by law to request you chance of delay or error in processing your	our TFN. You are not obliged to quote your T r annual return. See the Privacy note in the D	FN but not quoting it could Declaration.	increase the
Name of self-managed superannua			
	WATERS SUPERANNUATION FUN	D	
Australian business number (ABN) (if applicable)	NN NNN NNN		
Current postal address	PEEL TAXATION & ACCOUNTING	3	
	PO BOX 4304		
	MANDURAH NORTH	WA	6210
Annual return status Is this an amendment to the SMSF's 2022 Is this the first required return for a newly re			
Is this an amendment to the SMSF's 2022 Is this the first required return for a newly re SMSF auditor Auditor's name	egistered SMSF? B N		
Is this an amendment to the SMSF's 2022 Is this the first required return for a newly re SMSF auditor Auditor's name Title	egistered SMSF? B N		
Is this an amendment to the SMSF's 2022 Is this the first required return for a newly re SMSF auditor Auditor's name Title Family name	egistered SMSF? B N MR BOYS		
Is this an amendment to the SMSF's 2022 Is this the first required return for a newly re SMSF auditor Auditor's name Title	egistered SMSF? B N		
Is this an amendment to the SMSF's 2022 Is this the first required return for a newly re SMSF auditor Auditor's name Title Family name First given name	egistered SMSF? B N MR BOYS		
Is this an amendment to the SMSF's 2022 Is this the first required return for a newly re SMSF auditor Auditor's name Title Family name First given name Other given names	MR BOYS ANTHONY		
Is this an amendment to the SMSF's 2022 Is this the first required return for a newly re SMSF auditor Auditor's name Title Family name First given name Other given names SMSF Auditor Number	MR BOYS ANTHONY		
Is this an amendment to the SMSF's 2022 Is this the first required return for a newly re SMSF auditor Auditor's name Title Family name First given name Other given names SMSF Auditor Number Auditor's phone number Use Agent	MR BOYS ANTHONY 100 014 140 13 00283486	SA	5045
Is this an amendment to the SMSF's 2022 Is this the first required return for a newly re SMSF auditor Auditor's name Title Family name First given name Other given names SMSF Auditor Number Auditor's phone number Use Agent address details? Postal address	MR BOYS ANTHONY 100 014 140 13 00283486 5A BROADWAY GLENELG Date audit was completed A		5045
Is this an amendment to the SMSF's 2022 Is this the first required return for a newly re SMSF auditor Auditor's name Title Family name First given name Other given names SMSF Auditor Number Auditor's phone number Use Agent address details? Postal address	MR BOYS ANTHONY 100 014 140 13 00283486 5A BROADWAY GLENELG	В	5045
Is this an amendment to the SMSF's 2022 Is this the first required return for a newly re SMSF auditor Auditor's name First given name Other given names SMSF Auditor Number Auditor's phone number Use Agent address details? Postal address	MR BOYS ANTHONY 100 014 140 13 00283486 5A BROADWAY GLENELG Date audit was completed A		5045

7	W		ged super fund's financ		on details to pay	any super payments and to	ax refunds owing to you.	
	A	This account is used f	nstitution account d for super contributions a	letails and rollove	ers. Do not provi	de a tax agent account here	.	
		Fund BSB number	NNNNN		ccount number	NNNNNNN		
		Fund account name						
		BM AND RV WAT	TERS SUPER FUNI	D				
		I would like my tax ref	funds made to this acco	ount. Y	Print Y for yes or N for no.	If Yes, Go to C.		
	В		on account details f			int here	Use Agent Trust Acco	unt?
		BSB number			ccount number	THE NOTE.		
		Account name						
-	_	Electronic service	- dd 11					
		Provide the electronic	service address alias(ElataESAAlias). See insti	ESA) issue ructions fo	d by your SMSF r more informati	messaging provider.		
_								
8	St	atus of SMSF Does the fund t Govern	Australian superannu trust deed allow accepta ment's Super Co-contri Low Income Super	ance of the	CY		XXXX XXXXXX XXXXX nefit structure	XXX XXX Code
9	N	Print Y for yes	up during the incom If yes, provide the date which the fund was wo	on [Day Month Year	Have all	tax lodgment and payment ns been met?	
10	Did	empt current pension the fund pay retirement the income year?		n income s	tream benefits t	o one or more members	N Print Y for yes or N for no.	
	To	claim a tax exemption e law. Record exempt c	for current pension inco current pension income	ome, you r	must pay at leas	t the minimum benefit payn		
	If N	No, Go to Section B: Inc	come					
	If Y		ension income amount					
			d you use to calculate y	our exemp	t current pensio	n income?		
			egated assets method	C	Was an actua	rial certificate obtained?	D Print Yfor yes	
	D	id the fund have any ot	ther income that was as	sessable?	E Pri	nt Yfor yes If Yes go to Se	ction B: Income	
			Choosing 'No' means Go to Section C: Ded	that you o	do not have any	assessable income, includi e expenses. (Do not comple	ng no-TEN quoted contr	ibutions.
	If yo	ou are entitled to claim se at Section D: Incom	any tax offsets, you can e tax calculation statem	n list		- expenses, (50 not comple	ste dection b: Income.)	

Section B: Income

Do not complete this section if all superannuation interests in the SMSF were supporting superannuation income streams in the retirement phase for the entire year, there was no other income that was assessable, and you have not realised a deferred notional gain. If you are entitled to claim any tax offsets, you can record these at Section D: Income tax calculation statement.

Income	Did you have a capital gains tax (CGT) event during the year?	Frint Y for yes or N for no. If the total capital loss or total capital gain is greate \$10,000 or you elected to use the transitional CGT and the deferred notional gain has been realised, cand attach a Capital gains tax (CGT) schedule 202	relief in 2 complete
	Have you applied an exemption or rollover?	M Print Y for yes or N for no.	
		Net capital gain	
		Gross rent and other leasing and hiring income B 17, 98	8
		Gross interest C 6	52
		Forestry managed investment scheme income	
Gross	foreign income		Los
D1		Net foreign income D	
	Austra	lian franking credits from a New Zealand company	
		Transfers from foreign funds	Nur
		Gross payments where ABN not quoted	ī
	on of assessable contributions sable employer contributions	Gross distribution from partnerships 47,18	3 Los
R1	0	* Unfranked dividend	<u> </u>
plus Asse	ssable personal contributions 55,000	* Franked dividend	_
plus #*No-1	TFN-quoted contributions	amount	
R3	0	* Dividend franking credit	Coc
less Trans	nust be included even if it is zero) fer of liability to life nce company or PST	* Gross trust distributions	
R6	0	Assessable contributions (R1 plus R2 plus R3 less R6)	0
Calculatio	on of non-arm's length income		
* Net no	on-arm's length private mpany dividends		22.00
U1	inparty dividends	* Other income S	Cod
plus * Net no	on-arm's length trust distributions	*Assessable income due to changed tax status of fund	
	her non-arm's length income	Status of fulld	_
U3	nor non ann a longth meanne	Net non-arm's length income (subject to 45% tax rate) (U1 plus U2 plus U3)	
* If an amour instructions to	andatory label. It is entered at this label, check the o ensure the correct tax is been applied.	GROSS INCOME (Sum of labels A to U)	Loss
		Exempt current pension income Y	
		TOTAL ASSESSABLE INCOME (W less Y) 120, 23:	Loss

Fund's tax file number (TFN)

XXX XXX XXX

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 exper within Austr	nses A1	A2
Interest exper	nses B1	B2
Capital we expendi	orks D1 686	D2
Decline in valu depreciating ass	e of sets E1	E2
Insurance premiun memb	ns – F1	F2
SMSF auditor	fee H1	H2
Investment exper	7,759	12
Management administration expen	and sees J1 3,017	J2
Forestry mana investment scheme expe	ged U1	U2
Other amou	unts L1	L2 Code
Tax losses deduc	cted M1	
	TOTAL DEDUCTIONS 11,462 (Total A1 to M1)	TOTAL NON-DEDUCTIBLE EXPENSES (Total A2 to L2)
	#TAXABLE INCOME OR LOSS Loss	TOTAL SMSF EXPENSES 11,462
#This is a mandatory label.	(TOTAL ASSESSABLE INCOME less TOTAL DEDUCTIONS)	(N plus Y)

Section D: Income tax calculation statement #Important:

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

13 Calculation statement

Please refer to the Self-managed superannuation fund annual return instructions 2022 on how to complete the calculation statement.

#Taxable income A	108,771
(an amount must t	be included even if it is zero)
#Tax on taxable income T1	16,315.65
(an amount must t	pe included even if it is zero)
#Tax on no-TFN- quoted contributions	0.00
	pe included even if it is zero)
Gross tax B	16,315.65
	(T1 plus J)

C1 Rebates and tax offsets C2	Non-refundable non-carry forward tax offsets C 0.00 (C1 plus C2)
Early stage venture capital limited partnership tax offset	SUBTOTAL 1 T2 16, 315.65 (B less C –cannot be less than zero
Early stage venture capital limited partnership tax offset carried forward from previous year D2 Early stage investor tax offset D3	Non-refundable carry forward tax offsets D 0.00 (D1 plus D2 plus D3 plus D4)
Early stage investor tax offset carried forward from previous year	SUBTOTAL 2 T3 16,315.65 (T2 less D –cannot be less than zero
Complying fund's franking credits tax offset E1 No-TFN tax offset E2	
National rental affordability scheme tax offset E3 Exploration credit tax offset E4	Refundable tax offsets E 0.00 (E1 plus E2 plus E3 plus E4)

#TAX PAYABLE	T5				16,	315	. 6
(T3	less	E-	cannot	be	less	than	zero

Section 102AAM interest charge

Fund's tax file number (TFN) XXX XXX XXX

Credit for interest on early payments – amount of interest		
Credit for tax withheld – foreign resident withholding (excluding capital gains)		
resident withholding (excluding capital gains)		
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		
Credit for interest on no-TFN tax offset		
Credit for foreign resident capital gains withholding amounts	FR-11-1	e.co.
Н8	Eligible c	0.00
		olus H5 plus H6 plus H8)
	#Tax offset refunds	
	(Remainder of refundable tax offsets)	0.00
	an amount must b	amount from label E- e included even if it is zero)
		stalments raised
	K Supervise	12,742.00
	Supervis	259.00
	Supervi	sory levy adjustment
	M	d up funds
		sory levy adjustment
	N Tor new f	unds
	Total amount of tax payable	3,832.65
#This is a mandatory label.	(T5 plus G less H less I less	
Section E: Losses		
14 Losses		
If total loss is greater than \$100,000,	Tax losses carried forward	
complete and attach a Losses schedule 2022.	to later income years	
	forward to later income years	
Net capital losses brought forward from prior years	Net capital losses carried forward to later income years	
Non-Collectables	to later income years	
Collectables		

Section F / Section G: Member Information

		See the Privacy no	ote in the Declaration.	Marshan
Title MR			XXX XXX XXX	Member 1
Family name WAT	TERS			Account status
First given name BRY	YAN			Account status
her given names MAU	JRICE			Code
Date	of birth 15/02/1957	If deceased date of deat		
ontributions		OPENING ACCOUNT BA	LANCE 62	26,930.77
Refer to instructions for	completing these labels.		Proceeds from primar	y residence disposa
Employer contributions		_	Receipt date	
A			H1	
ABN of principal employ	yer		Assessable foreign s fund amount	uperannuation
Personal contributions B 50	0,000.00		Non-assessable foreighted amount	gn superannuation
CGT small business reti	rement exemption		Transfer from reserve assessable amount	
CGT small business 15 exemption amount	-year		K	
D			Transfer from reserve non-assessable amou	
Personal injury election			L	
Spouse and child contri	butions		Contributions from nor and previously non-co	n-complying funds emplying funds
Other third party contrib	utions		Any other contribution Super Co-contribution Income Super Amount	s and low
G			M	(5)
	TOTAL CONTRIBUTI	ONS N 50,	000.00	
		(Sum of labels A		
her transactions Accumulation phase acc			Allocated earnings or I	osses Loss 9,157.82
Retirement phase accou	, 088.59 Int balance		Inward rollovers and tr	ansfers
- Non CDBIS	0.00		Outward rollovers and	tennefore
Retirement phase accou- CDBIS	int balance		Q	uansiers
S3	0.00		Lump Sum payments	Code
			R1 45	5,000.00 B
			Income stream payme	nts Code
0 TRIS Cou	nt	CLOSING ACCOUNT BALANC	SE S 801	,088.59
			(S1 plus S2 plus S	3)
		Accumulation phase value	e X1 801	,088.59
		Retirement phase valu	ie X2	
		Outstanding limited recourse borrowing arrangement amount	e Y	

Fund's tax file number (TFN)

	lum a	See the Privacy note in the De	
Title	MRS	Member'sTFN XXX XXX	2 XXX 2
Family name	WATERS		Account status
First given name	ROSEMARY		O Code
Other given names	VALERIE		
	Date of birth 15/03/1958	If deceased, date of death	
Contributions		OPENING ACCOUNT BALANCE	596,907.45
Refer to instruction	ns for completing these labels.		eeds from primary residence disposal
Employer contribu		Page	ipt date
A		H1	ipt date
ABN of principal e	employer		ssable foreign superannuation
A1		fund a	amount
Personal contribut	tions	Non	
В	50,000.00	fund a	assessable foreign superannuation amount
CGT small busines	ss retirement exemption	J	
C			fer from reserve:
CGT small busine	ess 15-year	K	audic difficult
exemption amoun	t		fer from reserve:
		non-a	ssessable amount
Personal injury ele	ction	Contri	butions from
	000000000000000000000000000000000000000	and p	butions from non-complying funds reviously non-complying funds
Spouse and child	contributions	Т	
HALL MI		Any o	ther contributions (including Co-contributions and low
Other third party c	ontributions	Incom	e Super Amounts)
U		M	
	TOTAL CONTRIBUTE	ONS N FO 200 00	
	TOTAL CONTRIBUTI		
Other transactions		(Sum of labels A to M)	
		Alloca	ted earnings or losses Loss
	se account balance	0	162,168.83
	764,076.28	Inward	rollovers and transfers
Retirement phase - Non CDBIS	account balance	Р	
S2	0.00	Outwa	rd rollovers and transfers
Retirement phase	account balance	Q	a tonovers and dansiers
- CDBIS	0.00	Lump	Sum payments Code
00		R1	45,000.00 B
	1	A CONTRACTOR OF THE PARTY OF TH	e stream payments Code
		Po	
		R2	
O TRIS	Count		764,076.28
O TRIS	Count	CLOSING ACCOUNT BALANCE S	764,076.28
O TRIS	Count	CLOSING ACCOUNT BALANCE S	1 plus S2 plus S3)
0 TRIS	Count	CLOSING ACCOUNT BALANCE S (S Accumulation phase value X1	5 250 250 5 5 5 5 5 5 5
O TRIS	Count	CLOSING ACCOUNT BALANCE S	1 plus S2 plus S3)

Section H: Assets and liabilities 15 ASSETS		
15a Australian managed investments	Listed trusts A	
	Unlisted trusts B	
	Insurance policy C	
	Other managed investments	
15b Australian direct investments	Cash and term deposits	123,095
	Debt securities F	
Limited recourse borrowing arrangements Australian residential real property	Loans G	100,000
J1	Listed shares H	
Australian non-residential real property J2	Unlisted shares	
Overseas real property J3	Limited recourse borrowing arrangements	0
Australian shares	Non-residential real property K	1,029,830
J4 Overseas shares	Residential real property	299,407
J5	Collectables and personal use assets M	
Other J6	Other assets O	22,733
Property count		
J7		
15c Other investments	Crypto-Currency N	
15d Overseas direct investments	Overseas shares P	
	Overseas non-residential real property Q	
	Overseas residential real property	
	Overseas managed investments S	
	Other overseas assets T	
	TOTAL AUSTRALIAN AND OVERSEAS ASSETS (Sum of labels A to T)	1,575,065
15e In-house assets		
Did the fund have a loan to, related parties (k. at the	lease to or investment in, nown as in-house assets) a end of the income year?	
5f Limited recourse borrowing arrangements		
If the fund had	an LRBA were the LRBA prrowings from a licensed financial institution? A Print Y for yes or N for no.	
Did the member	rs or related parties of the sonal guarantees or other security for the LRBA?	

16 LIABILITIES

Borrowings for limited recourse borrowing arrangements V1 Permissible temporary borrowings V2		
Other borrowings V3	Borrowings V	0.
Total n (total of all CLOSING ACCOUNT BA	nember closing account balances NLANCEs from Sections F and G)	1,565,164
	Reserve accounts X	
	Other liabilities Y	9,901
	TOTAL LIABILITIES Z	1,575,065
Section I: Taxation of financial arrangements 17 Taxation of financial arrangements (TOFA)		
	Total TOFA gains H	
	Total TOFA losses	
Section J: Other information Family trust election status		
If the trust or fund has made, or is making, a family trust election specified of the election (for example, for the 20		
If revoking or varying a family trust election, print R and complete and attach the Family trust elect		
Interposed entity election status If the trust or fund has an existing election, write the earliest if or fund is making one or more elections this year, write specified and complete an Interposed entity election or re	ite the earliest income year being	
	ty election, print R, and complete entity election or revocation 2022.	

Section K: Declarations

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

Important

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

Privacy

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

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

TRUSTEE'S OR DIRECTOR'S DECLARATION:

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

Authorised trustee's, directors of pub	officer's	signa	ture							
	A. S.	R	111	2	-			Date	Day Month	Year
Preferred trustee or director co	ntact date	14	100							
Preferred trustee of director co	Title		2							
	ne e									
F	amily name	WA	ATERS							
First	given name	BF	RYAN							
Other given names			AURIC	E						
		Are	a code	N	lumber					
Pho	one numbe	08	3	9	53574	10				
Em	ail address									
Non-individual trustee name (if	applicable)									
,		-								
		_								
ABN of non-individ	lual trustee									
		-					_		Hrs	7
		Т	ime tak	en to pre	pare and	complete this	annual r	eturn	1113	
The Commissioner of Taxation, as I										
TAX AGENT'S DECLARATION:	intain the ir	negrii	y or the	register	. For furt	ner information,	, reter to	the instructio	ns.	
, HARPE PTY LTD										
declare that the Self-managed sup by the trustees, that the trustees have authorised me to Tax agent's signature	ave given i	me a	declara	tion stați	2022 has	s been prepared ne information p	d in acco provided	to me is true	nformation provand correct, and Day Month	nd that
Tax agent's contact details										
Title	MRS									
Family name	BIRCH							_		7
First given name	SHARON	I								-
to the second of										-
Other given names							W. C.			
Tax agent's practice		PTY			PEEL	TAXATION	AND I	ACCOUNTI	NG	
Tax agent's phone number	Area code		9535	58818						
Tax agent number	642150	004				Reference	e numbe	r WATERS	UP	
						11.500 T. 11.11.11		200-200-200-200-200-200-200-200-200-200		