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

On this inc	 In should complete this annual return? Iy self-managed superannuation funds (SMSFs) can complete a annual return. All other funds must complete the <i>Fund ome tax return 2021</i> (NAT 71287). The Self-managed superannuation fund annual return instructions 2021 (NAT 71606) (the instructions) can assist you to complete this annual return. The SMSF annual return cannot be used to notify us of a change in fund membership. You must update fund details via ABR.gov.au or complete the Change of details for superannuation entities form (NAT 3036). 	 To complete this annual return Print clearly, using a BLACK pen only. Use BLOCK LETTERS and print one character per box. 𝔅 𝑘 𝔅 𝑘 𝔅 𝑘 𝔅 𝑘 𝑘 𝔅 𝑘 𝔅 𝑘 𝔅 𝑘 Place 𝔅 𝑘 n ALL applicable boxes. Nostal address for annual returns: Australian Taxation Office GPO Box 9845 [insert the name and postcode of your capital city] For example; Australian Taxation Office GPO Box 9845 SYDNEY NSW 2001
Se 1	Ection A: Fund information Tax file number (TFN) Provided Image: The ATO is authorised by law to request your TFN. You are the chance of delay or error in processing your annual return	To assist processing, write the fund's TFN at the top of pages 3, 5, 7 and 9. e not obliged to quote your TFN but not quoting it could increase rm. See the Privacy note in the Declaration.
2 Mo	Name of self-managed superannuation fund (SMSF CFARLANE SUPERANNUATION FUND	;)
3	Australian business number (ABN) (if applicable) 955	29540290
4	Current postal address	
	D Box 24	
	eveland	State/territory Postcode QLD 4163
5	Annual return status Is this an amendment to the SMSF's 2021 return?	A No X Yes
	Is this the first required return for a newly registered SMSF?	B No X Yes

OFFICIAL: Sensitive (when completed)

6 SMSF auditor Auditor's name						
Title: Mr X Mrs Miss Ms	Other					
Family name						
Boys						
First given name		Other given	names			
Anthony		William				
SMSF Auditor Number	Auditor's phone	number				
100014140	61410712708					
Postal address						
PO Box 3376						
Suburb/town					State/territory	Postcode
Rundle Mall				7	State/ternitory	5000
Date audit was completed A	y Month	Year]			
Was Part A of the audit report qualified	ed? B	No X	Yes			
Was Part B of the audit report qualifi	ed? C	No X	Yes			
If Part B of the audit report was qualif have the reported issues been rectifie		No 🗌	Yes			

7 Electronic funds transfer (EFT)

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

A Fund's financial institution account details

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

Fund BSB number	084435	Fund account number	662885362			
und account name						
McFarlane Superannuation Fund						

I would like my tax refunds made to this account. X) Go to C.

B Financial institution account details for tax refunds

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

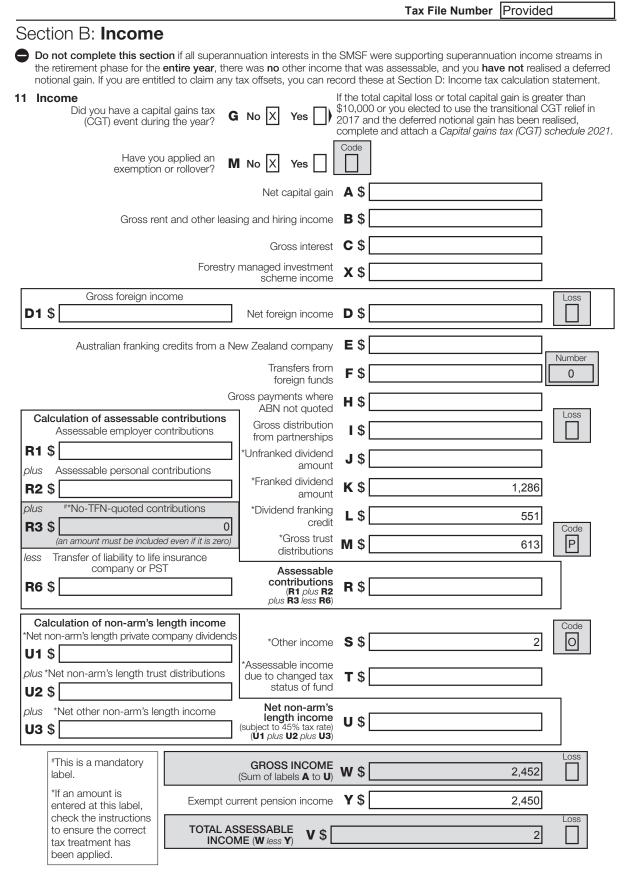
BSB number Account number Account name

C Electronic service address alias

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

BGLSF360

				Тах	File Number	rovided	
8	Does the fund to the Governmen	ustralian superannuation fund ust deed allow acceptance of t's Super Co-contribution and _ow Income Super Amounts?	A No C No	Yes X Yes X	Fund benefit sl	tructure	B A Code
9		b during the income year? Divide the date on Day Defund was wound up 17 /	Month	Year 2021	Have all tax lodgn and payn obligations been n	nent 🗤 🔽] Yes X
10	Exempt current pensio	n income	stream benefit	s to one or	more members in tl	ne income y	/ear?
		ion for current pension income, It pension income at Label A .	you must pay	at least the	minimum benefit p	ayment und	ler the law.
	No D Go to Section B: I	ncome.					
	Yes X) Exempt current pe	ension income amount A\$	2,	450			
	Which method dic	you use to calculate your exen	npt current pe	nsion incom	e?		
	Segr	egated assets method B X					
	Unsegr	egated assets method C	Was an actua	arial certifica	te obtained?	Yes	
	Did the fund have any other	income that was assessable?					
	E Yes X) Go to Section	B: Income.					
	No Choosing 'No Go to Section	means that you do not have a C: Deductions and non-deduct	ny assessable ible expenses	income, inc . (Do not co	luding no-TFN quo mplete Section B: I	ted contribu ncome.)	utions.
		aim any tax offsets, you can list come tax calculation statement					

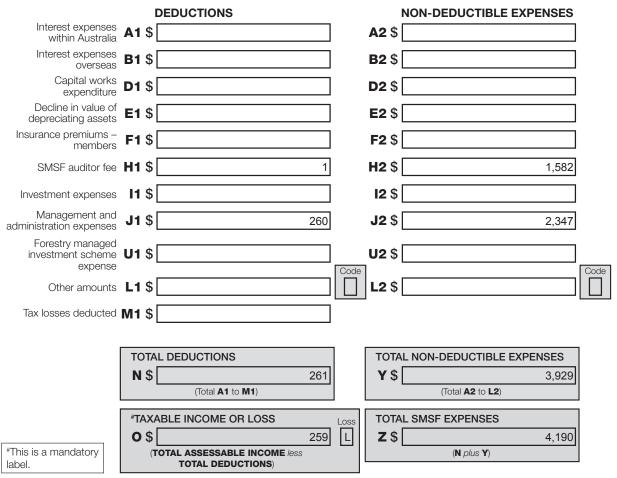


Page 4

Section C: Deductions and non-deductible expenses

12 Deductions and non-deductible expenses

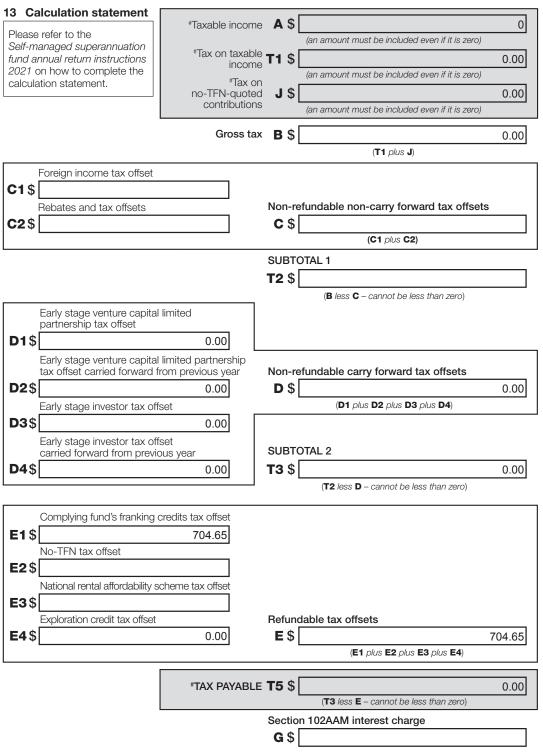
Under 'Deductions' list all expenses and allowances you are entitled to claim a deduction for. Under 'Non-deductible expenses', list all other expenses or normally allowable deductions that you cannot claim as a deduction (for example, all expenses related to exempt current pension income should be recorded in the 'Non-deductible expenses' column).

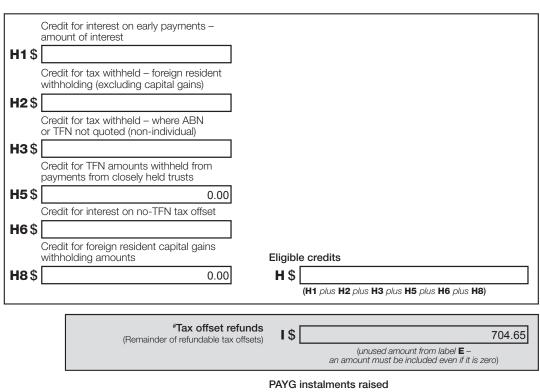


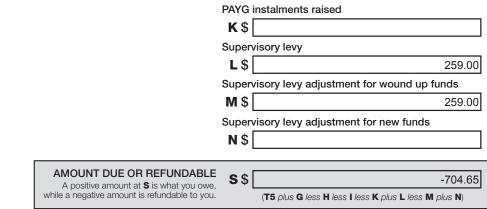
Section D: Income tax calculation statement

#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.







*This is a mandatory label.

Section E: Losses 14 Losses

If total loss is greater than \$100,000, complete and attach a Losses schedule 2021.

Tax losses carried forward **U**\$ to later income years

Net capital losses carried V \$ forward to later income years

259

OFFICIAL: Sensitive (when completed)

T

Tax File Number Provided

Section G: Suppl	ementary member information
MEMBER 5 Title: Mr X Mrs Miss	Ms Other Account status
Family name	
McFarlane	
First given name	Other given names
Barry	Glenn
Member's TFN See the Privacy note in the Decla	Date of birth If deceased, date of death ration. Day Month Year Day Month Year
Provided	Provided / / / /
Contributions	OPENING ACCOUNT BALANCE \$ 720,474.72
Refer to instructions for	completing these labels. Proceeds from primary residence disposal H \$
Employer contributior	
A \$	H1 Month Year
ABN of principal emp	
A1	
Personal contribution	
B \$	S Non-assessable foreign superannuation fund amount
CGT small business r	etirement exemption
C \$	Transfer from reserve: assessable amount
	5 year evention amount
D \$	Transfer from reserve: non-assessable amount
Personal injury election	
E \$	Contributions from non-complying funds and previously non-complying funds
Spouse and child cor	tributions T \$
F \$	Any other contributions
Other third party cont	(including Super Co-contributions and Low Income Super Amounts)
G \$	M \$
тот	AL CONTRIBUTIONS N \$
Other transactions	Allocated earnings O \$ 1,509.28
	or losses
Accumulation phase	account balance rollovers and P\$
S1 \$	0.00 transfers
	Outward
Retirement phase acc – Non CDBIS	transfers
S2 \$	Code
σε ψ	0.00 Lump Sum R1 \$18.44 A
Retirement phase acc – CDBIS	count balance
	stream R2 \$ 7,060.00 M
S3 \$	0.00 payments
0 TRIS Count	
	(\$1 <i>plus</i> \$2 <i>plus</i> \$3)
	Accumulation phase value X1 \$
	Retirement phase value X2 \$
	Outstanding limited recourse borrowing arrangement amount Y\$
Page 12	OFFICIAL: Sensitive (when completed)

MEMBER 6		
Title: Mr Mrs X Miss Ms Other		Account status
Family name McFarlane		
First given name	Other given names	
Alana	Deanne	
Member's TFN Date of	f birth	If deceased, date of death
See the Privacy note in the Declaration. Day Provided	Month Year Provided	Day Month Year
	TTOVIDED	
Contributions OPENING ACCOU	NT BALANCE \$	887,836.23
Refer to instructions for completing these labe	Hs. Proceeds	from primary residence disposal
Employer contributions	■■ ♥L Receipt d	late Day Month Year
A \$	H1	
ABN of principal employer	Assessab	le foreign superannuation fund amount
A1	I \$_	
Personal contributions		essable foreign superannuation fund amount
B \$	J \$_	
CGT small business retirement exemption C \$		rom reserve: assessable amount
CGT small business 15-year exemption am	K \$	rom reserve: non-assessable amount
D \$		
Personal injury election		ions from non-complying funds
E \$	and previo	ously non-complying funds
Spouse and child contributions	T \$_	
F \$	Any other (including	r contributions Super Co-contributions and me Super Amounts)
Other third party contributions G \$		me Super Amounts)
G U		
TOTAL CONTRIBUTIONS	N \$ (Sum of labels A to	• M)
		Loss
Other transactions Allo	cated earnings of \$	4,973.22 L
	Inward	
Accumulation phase account balance	rollovers and transfers	
S1 \$ 0.00	Outward	
Retirement phase account balance – Non CDBIS	rollovers and Q\$	875,113.00
S2 \$ 0.00		
	payments R1 \$	790.01 B
Retirement phase account balance – CDBIS	Income	Code
S3 \$ 0.00	stream R2 \$	6,960.00 M
	paymonto	
0 TRIS Count CLOSING ACCO	JNT BALANCE S \$	
	- •	(S1 plus S2 plus S3)
Accumulati	on phase value X1 \$	
Retireme	nt phase value X2 \$	
	mited recourse	
borrowing arrang		
OFFIC	IAL: Sensitive (when	completed) Page 13

Section H: Assets and liabilities				
15 ASSETS15a Australian managed investments	Listed trusts A\$			
	Unlisted trusts B\$			
	Insurance policy C \$			
Othe	her managed investments D \$			
15b Australian direct investments	Cash and term deposits E\$			
Limited recourse borrowing arrangements				
Australian residential real property J1 \$	Loans G \$			
Australian non-residential real property	Listed shares H \$			
J2 \$ Overseas real property	Unlisted shares			
J3 \$	Limited recourse J \$			
Australian shares				
Overseas shares				
J5 \$	real property 🕨 🧿			
Other J6 \$	Collectables and M \$			
Property count	Other assets O \$			
J7				
15c Other investments	Crypto-Currency N\$			
15d Overseas direct investments	Overseas shares P\$			
Overseas non	n-residential real property Q \$			
Overseas	as residential real property R\$			
Oversea	eas managed investments S\$			
	Other overseas assets T\$			
TOTAL AUSTRALIAN AND (Sum of label	ND OVERSEAS ASSETS U \$			
15e In-house assets Did the fund have a loan to, lease to or investment in, related parties				

(known as in-house assets) at the end of the income year?

						Tax File Number Pro	ovided	
15f	financial institution?	A No	Yes					
16	LIABILITIES							
	Borrowings for limited recourse borrowing arrangements							
	V1 \$							
	Permissible temporary borrowings							
	Other borrowings	Bor	rowings	v	\$]
					Ψ			
	Total member clos (total of all CLOSING ACCOUNT BALANCE s fro			W	\$			
		Reserve a	ccounts	X	\$			
		Other I	iabilities	Y	\$			
		TOTAL LIA	BILITIES	Z	\$			
	ction I: Taxation of financia Taxation of financial arrangements (TOF		gemei	nts	6			
		Total TOFA	gains Ħ	\$[
		Total TOFA lo	osses	\$[

Section J: Other information

Family trust election status

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

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.

return, including any attached schedules and additional documentation is true and co	prrect.
Authorised trustee's, cirparans or pupilic officer's signature	14 / 01 / 2022
$ \gamma\rangle$	Day Month Year
	Date / /
Preferred trustee or director contact details:	
Title: Mr X Mrs Miss Ms Other	
Family name	
McFarlane	
First given name Other given names	
Barry Glenn	
Phone number 07 3286 1322 Email address	
Non-individual trustee name (if applicable)	
ABN of non-individual trustee	
Time taken to prepare and complete this annual return	Hrs
The Commissioner of Taxation, as Registrar of the Australian Business Register, may provide on this annual return to maintain the integrity of the register. For further inform	
TAX AGENT'S DECLARATION:	
I declare that the Self-managed superannuation fund annual return 2021 has been pre	
provided by the trustees, that the trustees have given me a declaration stating that the correct, and that the trustees have authorised me to lodge this annual return.	information provided to me is true and
Tax agent's signature	
E M	Date 14 / 01 / 2022
	Date 14 / 01 / 2022
Tax agent's contact details	
Title: Mr X Miss Ms Other	
Family name	
Sherman First given name Other given names	
Shona Lorraine	
Tax agent's practice	
HFB Super Pty Ltd	
Tax agent's phone number Reference number	Tax agent number
07 3286 1322 MCBA	24805931

100017996BP

2021

Losses schedule

Companies and trusts that do not join consolidated groups should complete and attach this schedule to their 2021 tax return. Superannuation funds 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 or number in each box. Do not use correction fluid or tape. Place χ in all applicable boxes. Refer to *Losses schedule instructions 2021*, available on our website

Tax file number (TFN)

Provided

Name of entity

McFARLANE SUPERANNUATION FUND

ato.gov.au for instructions on how to complete this schedule.

Australian business number

95529540290

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	B	3 259
	2019–20	C	
	2018–15	D	
	2017–18	E	
	2016–17	F	=
	2015–16 and earlier income years	G	à
	Tota	U	J259
	Transfer the amount at U to the Tax losses carried	l for	ward 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
2019–20	1
2018–19	J
2017–18	К
2016–17	L
2015–16 and earlier income years	M
Total	V
Transfer the amount at V to the Net capital losses carried for	rward to later income years label on your tax return.

Part B - Ownership and business continuity test - company and listed widely held trust only

Year of loss

2020–21 🗛

2019–20 **B**

2018–19 **C**

2017–18 **D** 2016–17 **E**

F

Yes

Complete item 3 of Part B if a loss is being carried forward to later income years and the business continuity test has to be satis ied in relation to that loss.

Do not complete items 1 or 2 of Part B if, in the 2020-21 income year, no loss has been claimed as a deduction, applied against a net capital gain or, in the case of companies, losses have not been transferred in or out.

1 Whether continuity of majority ownership test passed

> Note: If the entity has deducted, applied, transferred in or transferred out (as applicable) in the 2020-21 income year a loss incurred in any of the listed years, print X in the Yes or No box to indicate whether the entity has satisfied the continuity of majority ownership test in respect of that loss.

2 Amount of losses deducted/applied for which the continuity of majority ownership test is not passed but the business continuity test is satisfied - excludes film losses

2015-16 and earlier

income years

Tax losses	G	
Net capital losses	Η	

3 Losses carried forward for which the business continuity test must be satisfied before they can be deducted/ applied in later years - excludes film losses

Net capital losses

Tax losses

4	Do current	year l	loss	prov	isic	ons	apply	?	

Is the company required to calculate its taxable income or tax 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 Income Tax Assessment Act 1997 (ITAA 1997)?

Part C - Unrealised losses - company only

Note: These questions relate to the operation of Subdivision 165-CC of ITAA 1997. Has a changeover time occurred in relation to the company after 1.00pm by legal time in the Australian Capital Territory on 11 November 1999?

If you printed X in the No box at L, do not complete M, N or O.

At the changeover time did the company satisfy the maximum net asset value test under section 152-15 of ITAA 1997?

If you printed X in the No box at M, has the company determined it had an unrealised net loss at the changeover time?

If you printed X in the Yes box at N, what was the amount of unrealised net loss calculated under section 165-115E of ITAA 1997?

L	Yes No
М	Yes No
Ν	Yes No
o [

OFFICIAL: Sensitive (when completed)

Tax File Number Provided

	Та	x File Number	Provided
Part D – Life insurance companies			
Complying superannuation class tax losses carried forward to later income years	Ρ		
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	Ν		
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		259
ADD Tax loss amount from conversion of excess franking offsets	Е		
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)	I		
Total tax losses carried forward to later income years	J		259
Transfer the amount at J to the Tax losses carried for	ware	d to later income ye	ars label on your tax return.

Tax File Number	Provided
If the schedule is not lodged with the income tax return you are required to sign and date the schedule	dule.

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**

Taxpayer's declaration

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

Signature Bolt Jo-Lone,	14 / 01 / 2022 Day Month Year
Contact person	Daytime contact number (include area code)
Barry Glenn McFarlane	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 Ye	
Provided	McFARLANE SUPERANNUATION FUND	2022

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	BGM For-lone	Date	14 / 0⁄1 / 2022
		-	

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	McFarlane Superannuation Fund	
Account Number	084435 662885362	Client Reference MCBA
I authorise the refund to b	be deposited directly to the specified account	

Signature	BGM For-lone	Date	14 / 0⁄1 / 2022

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	14	[/] 01	/2022
Contact name	Shona Sherman		Client Reference	MC	BA	
Agent's Phone Num	lber 07 3286 1322	т	ax Agent Number	248	05931	