The Lelievre Super Fund

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 However, you cannot lodge your tax return electronically if you do not quote your TFN.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	943	425 751			Year	2019		
Name of partnership, trust, fund or entity	The	Lelievre	Super	Fund				

TFN: 943 425 751

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 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:

the information provided to the agent for the	preparation of this tax return, including	g any applicable schedules is true and correct, an	nd

the agent is authorised to lodge	e this tax return.	ole scriedules is true and correct, and	
Signature of partner, trustee or director	Mulli	Date	

PART B

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 lodgment 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.

Agent's reference number	74856004		
Account Name	The Lelievre Super Fund		
I authorise the refund to be d	eposited directly to the specified account.	Date	

Sensitive (when completed)

Client Ref: LELI0005 Agent: 74856-004

TFN: 943 425 751 Page 1 of 11

2019

2019

Return year

Self-managed superannuation fund annual return

Who should complete this annual return?

Only self-managed superannuation funds (SMSFs) can complete this annual return. All other funds must complete the Fund income tax return 2019 (NAT 71287)

in	ne Self-managed superannuation fund annu structions 2019 (NAT 71606) (the instructio ou to complete this annual return.				
cl vi	ne SMSF annual return cannot be used to n nange in fund membership. You must upda a ABR.gov.au or complete the Change of d uperannuation entities form (NAT3036).	te fund details			
Se	ction A: Fund information		_		
1	Tax file number (TFN)	943 425 751			
	The Tax Office is authorised by law to reque chance of delay or error in processing your				ld increase the
2	Name of self-managed superannuat	ion fund (SMSF)			
		The Lelievre S	Super Fund		
3	Australian business number (ABN)	77 453 398 858	3		
4	Current postal address	PO Box 354			
		ASPLEY		QLD	4034
5	Annual return status Is this an amendment to the SMSF's 2019 Is this the first required return for a newly re		N N		
6	SMSF auditor				
ă.	Auditor's name Title	Mr			
	Family name	Boys			
	First given name	Anthony			
	Other given names				
	SMSF Auditor Number	100 014 140			
	Auditor's phone number	0410 712708			
	Use Agent N Postal address	PO Box 3376	TO THE STATE OF TH		
		Rundle Mall		SA	5000
		Date audit was comple	ted A		
		Was Part A of the audi	t report qualified ?	BN	
		Was Part B of the audi	t report qualified ?	C	
		If the audit report was a issues been rectified?	qualified, have the reported	D	

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 (must be six digits) Fund account number 397152
	Fund account name (for example, J&Q Citizen ATF J&Q Family SF)
	The Lelievre Super Fund
	I would like my tax refunds made to this account. Y Print Y for yes or N for no. If Yes, Go to C.
	Use Agent Trust Account?
	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
	Fund account name (for example, J&Q Citizen ATF J&Q Family SF)
	C Electronic service address alias
	Provide the electronic service address (ESA) issued by your SMSF messaging provider
	(For example, SMSFdataESAAlias). See instructions for more information.
	Fund's tax file number (TFN) 943 425 751
8	Status of SMSF Australian superannuation fund A Y Fund benefit structure B A Code
	Doca the fund trust deed allow acceptance of the
	Government's Super Co-contribution and Low Income Super Contribution?
9	Was the fund wound up during the income year?
5	Day Month Year Have all tax lodgment
	N PrintY for yes and payment or N for no. which fund was wound up obligations been met?
	g
10	Exempt current pension income Did the fund pay retirement phase superannuation income stream benefits to one or more members N Print Y for yes
	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
	If No, Go to Section B: Income
	If Yes Exempt current pension income amount A
	Which method did you use to calculate your exempt current pension income?
	Segregated assets method B
	Unsegregated assets method C Was an actuarial certificate obtained? D Print Yfor yes
	Did the fund have any other income that was assessable? Print Y for yes or N for no. If Yes, go to Section B: Income
	Choosing 'No' means that you do not have any assessable income, including no-TFN quoted contributions. If 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 tax calculation statement

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 ta (CGT) event during the year	? or N for no. and attach a Capital Gains Tax (CGT) schedule 2019	
	Have you applied a exemption or rollover	n Print Yfor yes	
		Net capital gain	
		Gross rent and other leasing and hiring income	
		Gross interest C 54	
		Forestry managed investment scheme income	
Gross f	foreign income 6,123	2 4 2 2	oss
וטן	0/123	Net foreign income D 6,123	
	Aus	tralian franking credits from a New Zealand company	lumber
		Transfers from foreign funds	
		Gross payments where ABN not quoted	
A CONTRACTOR OF THE CONTRACTOR	on of assessable contributions sable employer contributions	Gross distribution from partnerships	oss
R1	7,318	* Unfranked dividend amount	
plus Asses	ssable personal contributions 0	* Franked dividend amount	
,	FN-quoted contributions	* Dividend franking credit	
(an amount m	0 nust be included even if it is zero)	* Gross trust M 193	ode P
	efer of liability to life nce company or PST	distributions ——	=,
R6	0	Assessable contributions (R1 plus R2 plus R3 less R6)	
Calculation	on of non-arm's length income	_	
* Net no	on-arm's length private		
U1	mpany dividends	* Other income S	ode
plus * Net n	on-arm's length trust distributions	*Assessable income due to changed tax	
U2		status of fund	
U3	ther non-arm's length income	Net non-arm's length income (subject to 45% tax rate) (U1 plus U2 plus U3)	
* If an amour	andatory label nt is entered at this label, check the to ensure the correct tax is been applied.	GROSS INCOME (Sum of labels A to U)	oss
	H	Exempt current pension income Y	
		TOTAL ASSESSABLE INCOME (W) less Y) 13,688	.oss

TFN: 943 425 751 Page 4 of 11

Fund's tax file number (TFN) 943 425 751

Section C: Deductions and non-deductible expenses

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 expen within Austr	ses alia A1				A2
Interest expen- overs	ses eas B1				B2
Capital wo expendit	orks ture D1				D2
Decline in value depreciating ass	e of sets E1				E2
Insurance premium memb	ns – pers F1				F2
Death benefit incre	ase G1				
SMSF auditor	fee H1				H2
Investment expen	ises [1]				12
Management administration expen	and J1	626			J2
Forestry mana investment scheme expe	ged ense U1		Code		U2 Code
Other amou	unts L1				L2
Tax losses deduc	cted M1				
e	7	OTAL DEDUCTIONS			TOTAL NON-DEDUCTIBLE EXPENSES
	N	626			Y 0
		(Total A1 to M1)			(Total A2 to L2)
	O (TOTAL	BLE INCOME OR LOSS 13,062 ASSESSABLE INCOME OTAL DEDUCTIONS)	Loss		TOTAL SMSF EXPENSES [N plus Y)
				J	

#This is a mandatory label.

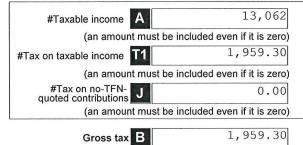
Section D: Income tax calculation statement

#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 13

Please refer to the Self-managed superannuation fund annual return instructions 2019 on how to complete the calculation statement.



(T1 plus J)

Foreign income tax offset C1	Non-refundable non-carry forward tax offsets C 1,000.00 (C1 plus C2)
	SUBTOTAL 1 T2 959.30 (B less C –cannot be less than zero)
Early stage venture capital limited partnership tax offset	
Early stage venture capital limited partnership tax offset carried forward from previous year D2 Early stage investor tax offset	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 959.30 (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)
	250, 20
	#TAX PAYABLE T5 959.30 (T3 less E - cannot be less than zero)
	Section 102AAM interest charge

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943 425 751 Fund's tax file number (TFN) 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** Credit for interest on no-TFN tax offset **H6** Credit for foreign resident capital gains withholding amounts Eligible credits 0.00 H8 H (H1 plus H2 plus H3 plus H5 plus H6 plus H8) #Tax offset refunds (Remainder of refundable tax offsets). (unused amount from label E-an amount must be included even if it is zero) PAYG instalments raised 676.00 K Supervisory levy 259.00 Supervisory levy adjustment for wound up funds Supervisory levy adjustment for new funds N Total amount of tax payable 542.30 S (T5 plus G less H less I less K plus L less M plus N) #This is a mandatory label. Section E: Losses Losses Tax losses carried forward U

If total loss is greater than \$100,000, complete and attach a Losses schedule 2019.

Net capital losses brought forward

from prior years

to later income years

Net capital losses carried V

forward to later income years Net capital losses carried forward to later income years

Non-Collectables

Collectables

Sensitive (when completed)

Section F / Section G: Member Information

In Section F / G report all current members in the fund at 30 June.	
Use Section F / G to report any former members or deceased members who held an interest in the fund at any time during the income y	ear.

		See the Privacy note in	the Declaration	Member Number
Title	Mr	Member'sTFN 360		
Family name	Lelievre			Account status
First given name	Marcel			Code
Other given names	Xavier]
	Date of birth 09/06/1971	If deceased, date of death		
Contributions		OPENING ACCOUNT BALAN	NCE 152,	,288.85
Refer to instruction	ns for completing these labels]	Proceeds from primary re	esidence disposal
Employer contribu	utions		Receipt date	
A	1,705.63		H	
ABN of principal	employer		Assessable foreign superfund amount	erannuation
A1		*	1	
Personal contribu	itions		Non-assessable foreign fund amount	superannuation
	as rationant avamation		J	
C sinali busine	ss retirement exemption		Transfer from reserve: assessable amount	
CGT small busin	ess 15-year		K	
exemption amou	nt		Transfer from reserve: non-assessable amount	
Personal injury el	ection		L	
E			Contributions from non-cand previously non-com	complying funds plying funds
Spouse and child	I contributions		Т	
			Any other contributions of Super Co-contributions	(including and low
Other third party	contributions		Income Super Contribution	ons)
	TOTAL CONTRIBUT		05.63	
Other transaction	ne	(Sum of labels A to) IVI)	
	ase account balance	Allocated earnings or losses	O 21,	,466.82 Loss
S1	175,461.30			,400.02
Retirement phas	e account balance	Inward rollovers and transfers	P	
S2	0.00	Outward rollovers and transfers	Q	Code
Retirement phas	e account balance	Lump Sum payment	R1	Code
S3	0.00	Income stream payment	R2	
0 TF	RIS Count	CLOSING ACCOUNT BALANCE	S 175	,461.30
			S1 plus S2 plus S3	
		Accumulation phase value	X1	
		Retirement phase value	X2	
		Outstanding limited recourse borrowing arrangement amount	Υ	

				Fund's tax file	number (TFN) 943 425 751
			See the Privacy note in		Member Number
Title	Mrs		Member'sTFN 430	039 989	2
Family name	Lelievre				Account status
First given name	Megan				OCode
Other given names	Lousie				
	Date of birth 13/10/1	1978	If deceased, date of death		
Contributions		OPEN	ING ACCOUNT BALAN	NCE g	99, 399. 64
Refer to instruction	ons for completing these lal	bels		Proceeds from primar	y residence disposal
Employer contrib	utions			Receipt date	
A	5,612.88			Н	
ABN of principal	employer			Assessable foreign s	uperannuation
A1	Sp.ioyo.			fund amount	
Personal contribu	utions			Non-assessable forei	gn superannuation
В	2,118.00			fund amount	
CGT small busine	ess retirement exemption			Transfer from reserve	
С				assessable amount	;.
CGT small busin				K	
D D	ant			Transfer from reserve non-assessable amo	
Personal injury e	lection			L	
E				Contributions from no and previously non-c	on-complying funds
Spouse and chile	d contributions			T	omplying funds
F	a continuations			Any other contribution	ns (including
Other third party	contributions			Super Co-contribution Income Super Contribution	ns and low outions)
G				M	
	TOTAL CONT	RIBUTIONS		30.88	
			(Sum of labels A to	o M)	
Other transactio	ns	•			Loss
	hase account balance	Allo	ocated earnings or losses	0	13,688.19
S1	120,818.71	l Inwar	d rollovers and transfers	Р	
Retirement phase - Non CDBIS	se account balance			Q	
S2	0.00	Outwar	d rollovers and transfers		Code
Retirement phase	se account balance		Lump Sum paymen	t R1	Code
S3	0.00		Income stream paymen	t R2	Code
0 TI	RIS Count	CLOSI	NG ACCOUNT BALANCE	S 12	20,818.71
				S1 plus S2 plus	S3
		A	Accumulation phase value	X1	
			Retirement phase value	X2	
		Out	tstanding limited recourse	Y	
		borrov	ving arrangement amount		

Sect	tion H: Assets and liabilities		
15a	Australian managed investments	Listed trusts A	
		Unlisted trusts B	
		Insurance policy C	
		Other managed investments D	
15b	Australian direct investments	Cash and term deposits E	26,613
		Debt securities F	
	Limited recourse borrowing arrangements	Loans G	
	Australian residential real property J1	Listed shares H	
	Australian non-residential real property	Unlisted shares	
	Overseas real property	Limited recourse borrowing arrangements	0
	Australian shares	Non-residential real property K	
	J4	Residential real property L	
	Overseas shares J5	Collectables and personal use assets	
	Other	Other assets O	11,942
	J6		
15c	Other investments	Crypto-Currency N	
15d	Overseas direct investments	Overseas shares P	
		Overseas non-residential real property Q	
		Overseas residential real property R	
		Overseas managed investments S	
		Other overseas assets	257,894
		TOTAL AUSTRALIAN AND OVERSEAS ASSETS (Sum of labels A to T)	296,449
15e	In-house assets		
	Did the fu	nd have a loan to, lease to or investment in, related parties (known as in-house assets) at the end of the income year	
15f	Limited recourse borrowing arrangement	s	
		If the fund had an LRBA were the LRBA borrowings from a licensed financial institution?	Y for yes or no.
		Did the members or related parties of the fund use personal guarantees or other security for the LRBA?	Y for yes or no.

16 LIABILITIES

Borrowings for limited recourse borrowing arrangements V1 Permissible temporary borrowings V2									
Other borrowings V3	Borrowings	V 0							
(total of all C	W 296,280								
	X								
	Y 169								
	TOTAL LIABILITIES	296,449							
Section I: Taxation of financial arrangements 17 Taxation of financial arrangements (TOFA)									
	Total TOFA gains	Н							
	Total TOFA losses	1							
Section J: Other information Family trust election status									
If the trust or fund has made, or is makin specified of the election	A								
If revoking or varying a fam and complete and atta	В								
Interposed entity election status If the trust or fund has an existing election or fund is making one or more specified and complete an Intermediate of the specified and complete an intermediate of the specified and comp									

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

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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 (if required) and are aware of any matters raised therein. The information on this annual return, including any attached schedules and additional documentation is true and correct.

Authorised trustee's, director's or public officer's signature										
	U	all				Date	Day Month Y	ear		
Preferred trustee or director contact details:										
	Title M	ir								
Fam	ily name I	Lelievre								
First give	en name	Marcel								
Other given names		Cavier								
			Number							
Phone number)7 [32635200							
Email address										
Non-individual trustee name (if applicable)		Jelievre S	uper Inve	estments 1	Pty Ltd					
ABN of non-individual trustee										
Hrs										
Time taken to prepare and complete this annual return										
The Commissioner of Taxation, as Registrar of the Australian Business Register, may use the ABN and business details which you provide on this annual return to maintain the integrity of the register. For further information, refer to the instructions.										
TAY AGENTIC DEGLADATION										
TAX AGENT'S DECLARATION: I, SAM GRECO & CO										
declare that the Self-managed super										
by the trustees, that the trustees have the trustees have authorised me to leave			iting that the in	nformation prov	rided to me					
Tax agent's signature						Date	Day Month Ye	ar		
Tax agents signature						oato				
Tax agent's contact details										
Title [Mr									
Family name	Greco									
First given name	Sam									
Other given names										
Tax agent's practice	SAM GREC	CO & CO								
	Area code	Number	2	1						
, an agains phone hanne	07	3263520	J 			an and the same state				
Tax agent number	74856004	1		Reference no	umber LE	LI000	5			

Sensitive (when completed)