Signature as prescribed in tax retur

Self-managed superannuation fund annual return	2022
fund annual return	ZUZZ

Onl this	 In should complete this annual return? Ity self-managed superannuation funds (SMSFs) can complete annual return. All other funds must complete the <i>Fund come tax return 2022</i> (NAT 71287). 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 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). 	 Description of the state of the st
Se	ection A: Fund information	
1	Tax file number (TFN) 97415353	To assist processing, write the fund's TFN at the top of pages 3, 5, 7, 9 and 11.
	The ATO is authorised by law to request your TFN. You are the chance of delay or error in processing your annual retu	e not obliged to quote your TFN but not quoting it could increase rn. See the Privacy note in the Declaration.
2 Sc	Name of self-managed superannuation fund (SMSF hnapper Superannuation Fund)
3	Australian business number (ABN) (if applicable) 773	75939509
4	Current postal address	
Su	ite 2, 115 Currumburra Road	
Sub	urb/town	State/territory Postcode
As	hmore	QLD 4214
5	Annual return status	
	Is this an amendment to the SMSF's 2022 return?	A No X Yes
	Is this the first required return for a newly registered SMSF?	B No X Yes

Signature as prescribed in tax return Tax File Number 97415353 6 SMSF auditor Auditor's name Mr X Mrs Other Title: Miss Ms Family name Boys First given name Other given names Anthony William SMSF Auditor Number Auditor's phone number 100014140 0410712708 Postal address Box 3376 Suburb/town State/territory Postcode Rundle Mall 5000 SA Day Month Year Date audit was completed Α Iх Was Part A of the audit report qualified? **B** No Yes C No Was Part B of the audit report qualified? lх Yes If Part B of the audit report was gualified, D No Yes have the reported issues been rectified?

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	182222	Fund account number	117177758					
Fund account name								
Schnapper 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 name Account number

C Electronic service address alias

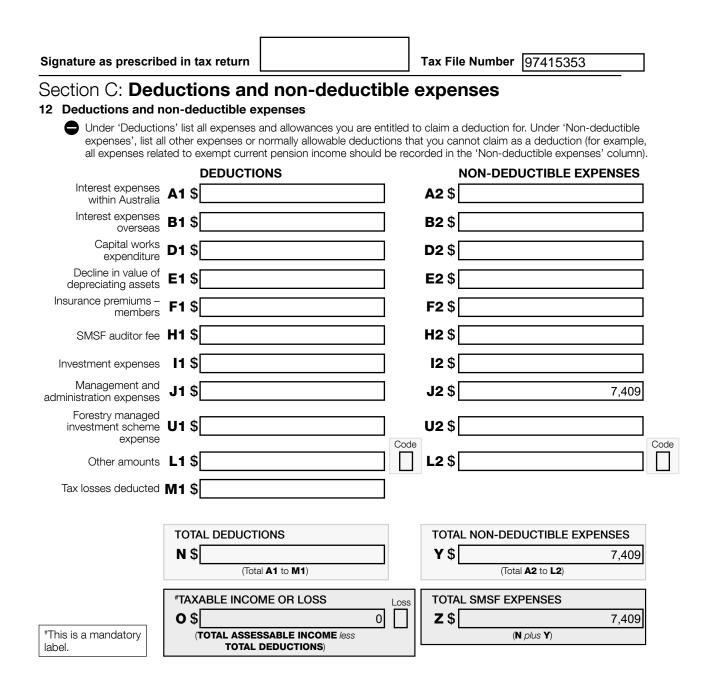
Provide the electronic service address alias (ESA) issued by your SMSF messaging provider. (For example, SMSFdataESAAlias). See instructions for more information.

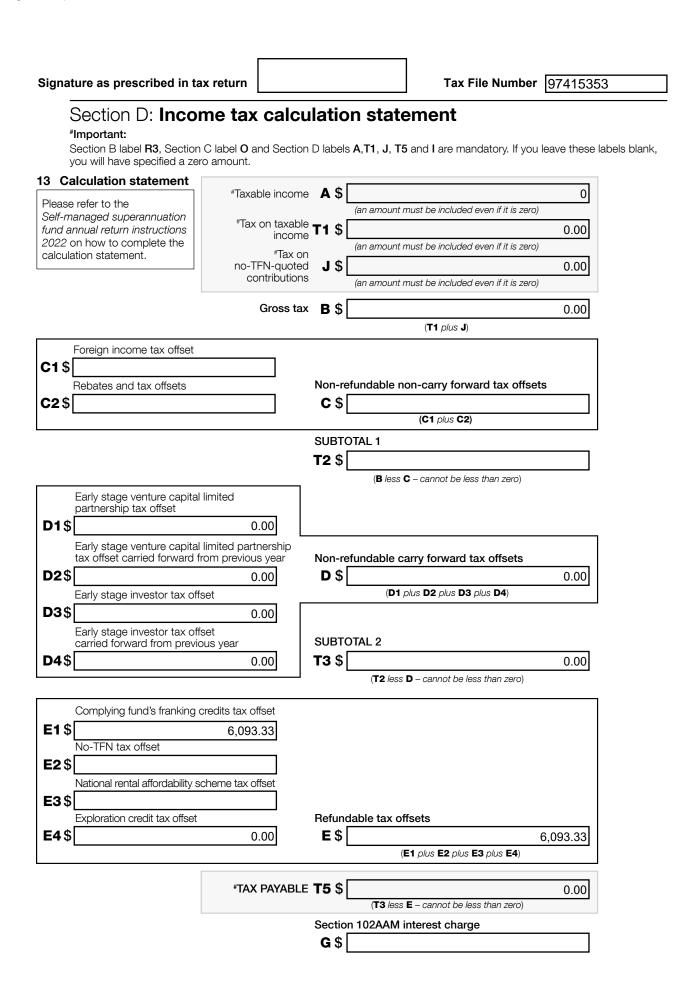
AUSPOSTSMSF

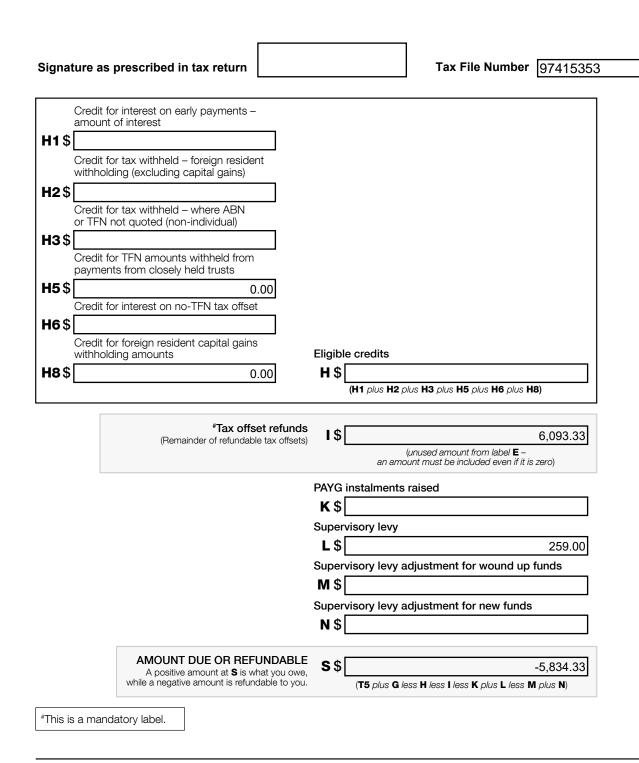
0:-	
510	nature as prescribed in tax return Tax File Number 97415353
8	Status of SMSF Australian superannuation fund A No Yes X Fund benefit structure B A Code
	Does the fund trust deed allow acceptance of the Government's Super Co-contribution and Low Income Super Amounts?
9	Was the fund wound up during the income year?
	No X Yes) If yes, provide the date on which the fund was wound up / / / / / / / / / / / / / / / / / /
10	Exempt current pension income
	Did the fund pay retirement phase superannuation income stream benefits to one or more members in the income year?
	To claim a tax exemption for current pension income, you must pay at least the minimum benefit payment under the law. Record exempt current pension income at Label A .
	No Go to Section B: Income.
	Yes X Exempt current pension income amount A \$ 31,491
	Which method did you use to calculate your exempt current pension income?
	Segregated assets method B X
	Unsegregated assets method $\mathbf{C}(\mathbf{X})$ Was an actuarial certificate obtained? \mathbf{D} Yes \mathbf{X}
	Did the fund have any other income that was assessable?
	E Yes Go to Section B: Income.
	No (Choosing 'No' means that you do not have any assessable income, including no-TFN quoted contributions. Go to Section C: Deductions and non-deductible expenses. (Do not complete Section B: Income.)
	If you are entitled to claim any tax offsets, you can list these at Section D: Income tax calculation statement.

Signature as prescribed in tax return Tax File Number 97415353 Section B: Income Sont complete this section If all superannuation interests in the SMSF were supporting superannuation income streams in the retirement phase for the entirement pase of the entitement pase of the entirement pase of the ent			
Do not complete this section if all superannuation interests in the SMSF were supporting superannuation income streams in the internet phase for the entire year, there was no other income that was assessable, and you have not realised a deferrence into a daily into the internet is a daily of the income is daily of the income is a daily of the income is daily of the income is daily of the income is a daily of the income is a daily of the i	Signature as prescribed in	tax return	Tax File Number 97415353
the enterment phase for the entire year, there was no other income that was assessable, and you have not tax calculation statement. I lincome Did you have a capital gains tax Did you have a capital gains tax CGT is event during the year? C No Yes Did you have a capital gains tax CGT is event during the year? C No Yes Did you have a capital gains tax CGT is event during the year? C No Yes Did you have a capital gains tax CGT is event during the year? C No Yes Did you have a capital gains tax CGT is event during the year? C No Yes Did you have a capital gains tax CGT is event during the year? C No Yes Did you have a capital gains tax CGT is event during the year? C CGT CGT is event during the year? C CGT CGT is event and other leasing and him is income Did S Cores rent and other leasing and him is income Did S Cores foreign income Did S Cores foreign income C Cores parents where the set income C Core parents and the capital gains tax (CGT) schedule 202 Core parents where the transitional CCT is event during the year? C Calculation of assessable contributions R 2 S R 3 S R and and the leasing and hims C Core parents where the set income C Calculation of non-arm's length income C Calculation of non-arm's length income C Cores foreign income C Calculation of non-arm's length income C Cores foreign income C Calculation of non-arm's length income C Cores foreign income C Calculation of non-arm's length income C Cores foreign income C Calculation of an andatcory C Core space tax C Core income C Calculation of an andatcory C Core to parents C Calculation of non-arm's length income C Calculation of an andatcory C Core to parents C Core income C Calculation of an andatcory C Core to parents C Core income C Core C Calculation C Core C Ca	Section B: Inco	ome	
Did you have a capital gains tax (CGT) actual tay in the been called to deterred notanal gain has been realised. Complete and attach a Capital gains tax (CGT) schedule 202 Have you applied an everytion or rollover? M No yes capital gains tax (CGT) schedule 202 Have you applied an everytion or rollover? M No yes capital gain A S Orces rent and other leasing and hiring income B S Gross interest C S Forestry managed investment scheme income X S Out Scheme income D S D1 S Net foreign income D1 S Net foreign income Australian franking credits from a New Zealand company E S Australian franking credits from a New Zealand company F S Calculation of assessable contributions Franked dividend amount Assessable enclose events with anount S Cross foreign income Core PMas "No-TFN-quoted contributions Franked dividend amount S Core Mass Calculation of non-arm's length income S S Core Typics Transfer or liability to the insurance company or PST Calculation of non-arm's length income Net non-arm's length income	the retirement phase for the	entire year, there was no other inco	come that was assessable, and you have not realised a deferred in record these at Section D: Income tax calculation statement.
Have you applied any Mino with the second grant of the leasing and hiring income Net capital gain A \$ Net capital gain A \$	Did you have a capit		■ \$10,000 or you elected to use the transitional CGT relief in
Gross rent and other leasing and hiring income B \$ Gross interest C \$ Forestry managed investment scheme income X \$ D1 \$ Net foreign income D \$ Australian franking credits from a New Zealand company Australian franking credits from a New Zealand company E \$ Number F \$ Image: Calculation of assessable contributions Assessable employer contributions Plus ************************************			
Gross interest C \$ Forestry managed investment scheme income X \$ Image: Construction of the scheme income incom		Net capital gai	ain A \$
Forestry managed investment scheme income X \$ Image: Cross foreign income Image: Cross foreign income Image: Cross foreign income D \$ Image: Cross foreign income D \$ Australian franking credits from a New Zealand company E \$ Australian franking credits from a New Zealand company E \$ Transfers from F \$ Australian franking credits from a New Zealand company E \$ Mathematic Scheme F \$ Transfers from F \$ Mathematic Scheme F \$ Mathematic Schematic Scheme F \$ <	Gross ren	nt and other leasing and hiring incom	me B \$
Gross foreign income Net foreign income D \$ D1 \$ Net foreign income D \$ Australian franking credits from a New Zealand company E \$ Number Australian franking credits from a New Zealand company E \$ Number Australian franking credits from a New Zealand company E \$ Number Australian franking credits from a New Zealand company E \$ Number Transfers from creating funds F \$ Image: Status of the status		Gross interes	est C\$
D1 \$ Net foreign income D \$ Australian franking credits from a New Zealand company E \$ Number Australian franking credits from a New Zealand company F \$ Number Transfers from foreign funds F \$ Number F \$ F F Number Calculation of assessable contributions F \$ H \$ Image: Sease dividend framewing		Forestry managed investmer scheme incom	ent X \$
Australian franking credits from a New Zealand company E \$ Number Australian franking credits from a New Zealand company E \$ Number Transfers from fress F \$ Image: Second particular second partex second particular second particular secon	Gross foreign inco	ome	Loss
Transfers from foreign funds F \$ Calculation of assessable contributions H \$ Assessable employer contributions Gross distribution from partnerships H \$ Number I \$ I Assessable personal contributions I \$ I Plus Assessable personal contributions I \$ R2 \$ If the included even if it is zerol I \$ Plus *No-TEN-quoted contributions Franked dividend amount K \$ R3 \$ Imamount must be included even if it is zerol I \$ I \$ less Transfer of liability to life insurance company or PST Assessable contributions R \$ I I \$ R4 \$ If the server If the server I \$ I \$ I \$ plus The non-arm's length income Net non-arm's length income I \$ I \$ I \$ plus The non-arm's length income *Assessable income due to changed tax at at the company dividends I \$ I \$ I \$ plus The non-arm's length income *Assessable income due to tax at at at the company dividends I \$ I \$ I \$ I \$ plus The non-arm's length income S I \$ I \$ I \$	D1 \$	Net foreign incom	me D \$
Transfers from foreign funds F \$ Calculation of assessable contributions Assessable employer contributions Assessable employer contributions H \$ Plus Assessable personal contributions Plus *No-TFN-quoted contributions R3 \$	Australian franking	credits from a New Zealand compar	
Cross payments where ABN not quoted H \$			om E¢
Calculation of assessable contributions Assessable employer contributions R1 \$ plus Assessable personal contributions R2 \$ plus "No-TFN-quoted contributions R3 \$		0	
Assessable employer contributions R1 \$		Contributions ABN not quote	
plus Assessable personal contributions R2 \$		from partnership	ips IS
R2 \$ *Franked dividend amount *Franked dividend amount *K \$ plus **No-TFN-quoted contributions *Dividend franking credit L \$ R3 \$ amount must be included even if it is zero) *Gross trust distributions M \$ less Transfer of liability to life insurance company or PST Assessable contributions Code R6 \$ M1 \$ *Gross trust distributions M \$ `` Value R3 less R6 *Other income *Net non-arm's length private company dividends plus *Net non-arm's length trust distributions *Other income due to changed tax status of fund T \$ V2 \$ plus *Net non-arm's length income *Us so *Net other non-arm's length income gue to changed tax status of fund T \$. V3 \$ glus *Net other non-arm's length income gue to changed tax status of fund U \$. . 13 \$ (U1 plus U2 plus U3 b) Y= (Sum of labels A to U) .			
plus "No-TFN-quoted contributions plus "No-TFN-quoted contributions R3 \$		*Franked dividen	
Image: Construction of the insurance company or PST "Gross trust distributions M \$ Code Image: Ref \$ Image: Company or PST Assessable contributions R \$ Image: Company or PST Ref \$ Image: Company or PST Assessable contributions R \$ Image: Company or PST Ref \$ Image: Company or PST Assessable contributions R \$ Image: Company or PST Ref \$ Image: Company or PST Assessable contributions R \$ Image: Company or PST Ref \$ Image: Company or PST Assessable contributions R \$ Image: Company or PST Ref \$ Image: Company or PST Assessable contributions R \$ Image: Company or PST "Net non-arm's length private company dividends plus "Net non-arm's length income due to changed tax to status of fund to the non-arm's length income (subject to 45% tax rate) (Image: Pulse VS tax rate) (Im			
Image: contraction of labelity to life insurance company or PST distributions Image: contributions company or PST R6 \$ Assessable contributions (R1 plus R2 plus R3 less R6) R \$ Calculation of non-arm's length income "Net non-arm's length private company dividends" *Other income S \$ Code plus *Net non-arm's length trust distributions *Other income due to changed tax ts status of fund T \$ Code plus *Net other non-arm's length income *Net non-arm's length income due to changed tax ts status of fund T \$ Code V1 \$ Net non-arm's length income *Net non-arm's length income due to changed tax ts status of fund T \$ Code plus *Net other non-arm's length income Net non-arm's length income (subject to 45% tax tate) U \$ Code V3 \$ GROSS INCOME (Sum of labels A to U) W \$ Code Code "This is a mandatory label. GROSS INCOME (Sum of labels A to U) W \$ Code Code "If an amount is ensure the correct Exempt current pension income Y \$ Code Code Code TOTAL ASSESSABLE V \$ Code Code Code Code	R3 \$	crec	
company or PST Assessable contributions plus R3 less R6 R \$ Calculation of non-arm's length income "Net non-arm's length private company dividends U1 \$ *Other income "Assessable income due to changed tax status of fund \$ U2 \$ Net non-arm's length income plus "Net other non-arm's length income due to changed tax status of fund T \$ U3 \$ Net non-arm's length income (U1 plus U2 plus U3) U \$ "This is a mandatory label. GROSS INCOME (Sum of labels A to U) W \$ "If an amount is entered at this label, check the instructions to ensure the correct Correct TOTAL ASSESSABLE V \$		distribution	
Rt plus R2 R 1 plus R3 less R6 Calculation of non-arm's length income *Net non-arm's length private company dividends U1 \$ plus *Net non-arm's length trust distributions U2 \$ plus *Net other non-arm's length income us *Net other non-arm's length income (subject to 45% tax rate) (U1 plus U2 plus U3) *T \$ Net non-arm's us \$ *Net other non-arm's length income (subject to 45% tax rate) (U1 plus U2 plus U3) *This is a mandatory abel. *'f an amount is entered at this label, the instructions to ensure the correct TOTAL ASSESSABLE V \$		T Assessabl	
*Net non-arm's length private company dividends U1 \$	R6 \$	(R1 plus R	R2 Π Ψ
U1 \$			
plus *Net non-arm's length trust distributions *Assessable income due to changed tax status of fund T \$ U2 \$		*Other incom	me S\$
U2 \$ status of fund plus *Net other non-arm's length income Net non-arm's length income (subject to 45% tax rate) (U1 plus U2 plus U3) U \$ U3 \$	· · · · · · · · · · · · · · · · · · ·		
Image: State of the Holf-arms length income (subject to 45% tax rate) (U1 plus U2 plus U3) U \$ Image: State of the income (subject to 45% tax rate) (U1 plus U2 plus U3) U \$ Image: State of the income (subject to 45% tax rate) (U1 plus U2 plus U3) U \$ Image: State of the income (subject to 45% tax rate) (U1 plus U2 plus U3) U \$ Image: State of the income (subject to 45% tax rate) (U1 plus U2 plus U3) U \$ Image: State of the income (subject to 45% tax rate) (U1 plus U2 plus U3) U \$ Image: State of the income (subject to 45% tax rate) (U1 plus U2 plus U3) U \$ Image: State of the income (subject to 45% tax rate) (Sum of labels A to U) W \$ Image: State of tax rate of tax	U2 \$		
U3 \$ (subject to 45% tax rate) (U1 plus U2 plus U3) U3 \$ "This is a mandatory label. GROSS INCOME (Sum of labels A to U) W \$ "If an amount is entered at this label, check the instructions to ensure the correct Exempt current pension income Y \$ TOTAL ASSESSABLE V \$	plus *Net other non-arm's len		
*This is a mandatory label. GROSS INCOME (Sum of labels A to U) *If an amount is entered at this label, check the instructions to ensure the correct Exempt current pension income Y \$ TOTAL ASSESSABLE V \$	U3 \$	(subject to 45% tax rat (U1 plus U2 plus U 3	
entered at this label, check the instructions to ensure the correct TOTAL ASSESSABLE	-		
check the instructions to ensure the correct TOTAL ASSESSABLE VS		Exempt current pension incom	me Y\$
been applied.	check the instructions to ensure the correct tax treatment has		







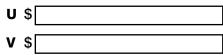


Section E: Losses

14 Losses

If total loss is greater than \$100,000, complete and attach a Losses schedule 2022. Tax losses carried forward to later income years

Net capital losses carried forward to later income years



Signature as prescribed in tax return				Tax File Number 97415353					
· _ ·	iormatic	<u></u>							
	Section F: Member information								
Title: Mr Mrs Miss Ms X Other									
Family name									
Clarke									
First given name	Othe	r giver	n names						
Patricia				Day Month Year					
Member's TFN See the Privacy note in the Declaration.	371255			Date of birth 29/06/1956					
Contributions OPENING ACCOUNT	NT BALANCE	\$		848,347.52					
Refer to instructions for completing thes	e labels.	н	Proce	eeds from primary residence disposal					
Employer contributions			Ψ	Day Month Year					
A \$		Н	1 Rece	ipt date / / /					
ABN of principal employer				ssable foreign superannuation fund amount					
A1 Personal contributions		I	\$	accessed to foreign superson uption fund amount					
B \$		J	\$	assessable foreign superannuation fund amount					
CGT small business retirement exem	ption	•		sfer from reserve: assessable amount					
C \$		Κ	\$						
CGT small business 15-year exempti	on amount			sfer from reserve: non-assessable amount					
D \$ Personal injury election		L	\$	ributions from non-complying funds					
E \$				previously non-complying funds					
Spouse and child contributions		Т	\$						
F \$			Any c (inclu	other contributions Iding Super Co-contributions _ow Income Super Amounts)					
Other third party contributions G \$		М		Low Income Super Amounts)					
G ֆ			<u>ه</u>						
TOTAL CON	TRIBUTIONS	N	\$						
				(Sum of labels A to M)					
Other transactions		•		ated earnings or losses					
		0	\$	44,430.84 L					
Accumulation phase account balance	e	Р	\$						
S1 \$	0.00	-	·	vard rollovers and transfers					
Retirement phase account balance – Non CDBIS		Q	\$						
S2 \$ 713,23	0.16			o Sum payments Code					
Retirement phase account balance		R1	\$						
- CDBIS				ne stream payments Code					
S3 \$	0.00	R2	\$	90,686.52 M					
0 TRIS Count CLOSING ACCOUN	NT BALANCE	S	\$	713,230.16 (S1 plus S2 plus S3)					
Accumulatio	n phase value	X1	\$						
Retiremer	nt phase value	X2	\$						
Outstanding lin borrowing arrange	nited recourse	v	\$						

			Tay File N		15050
Signature as prescribed in tax return			Tax File N	umber 974	15353
MEMBER 2					
Title: Mr Mrs Miss Ms Other					
Family name					
First given name C	Other given r	names			
Member's TFN			Data of birth	Day Mont	h Year
See the Privacy note in the Declaration.			Date of birth		
Contributions OPENING ACCOUNT BALANCE	CE \$				
Refer to instructions for completing these labels.			rom primary reside	nce disposal	
Employer contributions	HS	5	Day		
A \$	H1	Receipt da	te	1 Year	\neg
ABN of principal employer	_	Assessable	e foreign superannu	ation fund amo	unt
A1		\$			
Personal contributions B \$			sable foreign supe	rannuation func	l amount
CGT small business retirement exemption	JS		om reserve: assess	able amount	
C \$	KS				
CGT small business 15-year exemption amount	t	Transfer fro	m reserve: non-as	sessable amou	nt
D \$	LS				
Personal injury election E \$			ns from non-comp usly non-complying		
Spouse and child contributions	Т		, , , , ,	5	
F \$		Any other of (including s	contributions	tions	
Other third party contributions			Super Co-contribut Icome Super Amo	unts)	
G \$	MS	۶ 			
TOTAL CONTRIBUTIO	NS NS	\$			
		(Sur	n of labels A to M)		
Other transactions	_		earnings or losses		Loss
	0 9				
Accumulation phase account balance	PS		overs and transfers	;]	
S1 \$			ollovers and transfe	ers	
Retirement phase account balance – Non CDBIS	QS				
S2 \$		Lump Sum	payments		Code
Retirement phase account balance	R1 \$	\$			
- CDBIS			eam payments		Code
S3 \$	R2 \$	5			
TRIS Count CLOSING ACCOUNT BALAN	ICE SS	\$			
	- •		1 plus S2 plus S3)	J	
Accumulation phase va	alue X1 (s 🗌 🔤			
Retirement phase va					
Outstanding limited recou borrowing arrangement amo	unt YS	5			

Signature as prescribed in tax return			Tax File Number	07/15353
				97415555
MEMBER 3 Title: Mr Mrs Miss Other				
Title: Mr Mrs Miss Ms Other Family name				
First given name	Other giver	n names		
Member's TFN			Date of birth	Month Year
See the Privacy note in the Declaration.				
Contributions OPENING ACCOUNT	BALANCE \$			
Refer to instructions for completing these	labels.		from primary residence disp	oosal
Employer contributions	— H	\$	Day Month	Year
A \$	н	Receipt d		
ABN of principal employer			le foreign superannuation fur	nd amount
	I	\$		
Personal contributions B \$	_	Non-asse	ssable foreign superannuati	on fund amount
CGT small business retirement exempti		·	rom reserve: assessable am	ount
C \$	_ к			
CGT small business 15-year exemption			rom reserve: non-assessable	e amount
D\$	L	\$		
Personal injury election E \$			ions from non-complying fur ously non-complying funds	nds
Spouse and child contributions	т	\$		
F \$		Any other	contributions Super Co-contributions	
Other third party contributions			Super Co-contributions Income Super Amounts)	
G \$	M	\$		
TOTAL CONT	RIBUTIONS N	\$		
		(Si	um of labels A to M)	
Other transactions	о		earnings or losses	
Accumulation phase account balance		Inward ro	llovers and transfers	
S1 \$	P	\$		
Retirement phase account balance			rollovers and transfers	
– Non CDBİS	Q			
S2 \$	R1		m payments	
Retirement phase account balance – CDBIS		·	tream payments	
S3 \$	R2		iream payments	
		+ <u> </u>		
TRIS Count CLOSING ACCOUNT	BALANCE S	\$		
		(;	S1 plus S2 plus S3)]
Accumulation	phase value X1	\$		
Retirement	phase value X2	\$		_
Outstanding limit	ed recourse 🗸	\$		<u> </u>
borrowing arrangem	ent amount	Ψ]

Signature as prescribed in tax return	Tax File Number 97415353
Signature as prescribed in tax return	
Title: Mr Miss Ms Other Family name Family nam	
First given name Other given nar	nes
Member's TFN	Day Month Year
See the Privacy note in the Declaration.	
Contributions OPENING ACCOUNT BALANCE \$	
Refer to instructions for completing these labels	Proceeds from primary residence disposal
Employer contributions H\$[Day Month Year
A \$ H1 F	Receipt date / / /
	Assessable foreign superannuation fund amount
A1 Personal contributions	
B \$ J \$	Non-assessable foreign superannuation fund amount
•••[Fransfer from reserve: assessable amount
С\$К\$[
	Fransfer from reserve: non-assessable amount
D \$ L \$ [
	Contributions from non-complying funds and previously non-complying funds
Spouse and child contributions T \$	
• •	Any other contributions including Super Co-contributions
Other third party contributions	and Low Income Super Amounts)
G5[
TOTAL CONTRIBUTIONS N \$	
	(Sum of labels A to M)
	Allocated earnings or losses
0,9[nward rollovers and transfers
Accumulation phase account balance	
S1 \$	Dutward rollovers and transfers
Retirement phase account balance Q \$	
S2 \$	ump Sum payments Code
Retirement phase account balance	
	ncome stream payments Code
S3 \$ R2 \$ [
TRIS Count CLOSING ACCOUNT BALANCE S \$	
	(S1 <i>plus</i> S2 <i>plus</i> S3)
Accumulation phase value X1 \$	
Retirement phase value X2 \$	
Outstanding limited recourse borrowing arrangement amount	

Signature as prescribed in tax return			Tax File Number 97415353	
MEMBER 5 Title: Mr Mrs Miss Ms Other				
Family name				
First given name Other	given	na	ames	
Member's TFN			Day Month Ye	ar
See the Privacy note in the Declaration.			Date of birth	
Contributions OPENING ACCOUNT BALANCE	\$			
Refer to instructions for completing these labels.	н		Proceeds from primary residence disposal	
Employer contributions		ΨĮ	Day Month Year	
A \$ ABN of principal employer	Η		Receipt date / / /	
A1	Т	\$	Assessable foreign superannuation fund amount	
Personal contributions		. 1	Non-assessable foreign superannuation fund amount	
B \$	J	· •		
CGT small business retirement exemption	Κ		Transfer from reserve: assessable amount	
CGT small business 15-year exemption amount			Transfer from reserve: non-assessable amount	
D \$ Personal injury election	L	. 1		
E\$		į	Contributions from non-complying funds and previously non-complying funds	
Spouse and child contributions	Т	<u> </u>		
F \$			Any other contributions (including Super Co-contributions and Low Income Super Amounts)	
Other third party contributions G	М		· · · ·	
	N	٩		
TOTAL CONTRIBUTIONS	Ν	ΦĮ	(Sum of labels A to M)	
		,	Allocated earnings or losses	
Other transactions	0			
Accumulation phase account balance	Р		Inward rollovers and transfers	
S1 \$	•	· 1	Outward rollovers and transfers	
Retirement phase account balance – Non CDBIS	Q	\$[;	
S2 \$	R1		Lump Sum payments	
Retirement phase account balance – CDBIS	ΠI	. 1		
	R2		Income stream payments Code	
		ب		
TRIS Count CLOSING ACCOUNT BALANCE	S	\$Į	(S1 plus S2 plus S3)	
Accumulation phase value	¥1	¢[
Retirement phase value				
Outstanding limited recourse borrowing arrangement amount	Y	\$	·	

Signature as prescribed in tax return			Tax File r	Number 9741	5353
Title: Mr Mrs Miss Ms Other					
Family name					
First given name	Other giver	names			
Member's TFN				Day Month	Year
See the Privacy note in the Declaration.			Date of birth		
Contributions OPENING ACCOUNT BA	LANCE \$				
Refer to instructions for completing these labeled		Proceeds	from primary resid	ence disposal	
•	H	\$			
Employer contributions	н	1 Receipt da		th Year	7
ABN of principal employer			e foreign superann	uation fund amoun] it
A1	I	\$	0 1		
Personal contributions			ssable foreign supe	erannuation fund a	imount
B \$ CGT small business retirement exemption	J	· I			
C \$	ĸ		om reserve: asses		
CGT small business 15-year exemption an	•	·	om reserve: non-a	ssessable amount	
D \$	L	\$			
Personal injury election E \$	l		ons from non-com ously non-complyir		
Spouse and child contributions	т				
F \$		Any other	contributions	Itiono	
Other third party contributions		and Low I	Super Co-contribu ncome Super Amo	ounts)	
G \$	М	\$			
TOTAL CONTRIB	UTIONS N	\$			
			m of labels A to M)		
			earnings or losses		Loss
Other transactions	0	·			
Accumulation phase account balance	P		overs and transfer	S	
S1 \$		·	ollovers and transf	ers	
Retirement phase account balance – Non CDBIS	Q				
S2 \$		Lump Sur	n payments		Code
Retirement phase account balance	R1	\$			
- CDBIS			ream payments		Code
S3 \$	R2	\$			
TRIS Count CLOSING ACCOUNT BA	LANCE S	\$			
			61 plus S2 plus S3)	·	
Accumulation pha	se value X1	\$			
]	
Retirement pha					
Outstanding limited r borrowing arrangement	amount Y	\$			

Signature as prescribed in tax return		Tax File Number 97415353
Section G: Supplementary me	ember info	ormation
MEMBER 7		Code
Title: Mr Mrs Miss Ms Other		Account status
Family name		
L First given name Othe	r given names	
Member's TFN Date of birth See the Privacy note in the Declaration. Day Mont	n Year	If deceased, date of death
	1 100	
Contributions OPENING ACCOUNT BALAN	CE \$	
	Procee	ds from primary residence disposal
Refer to instructions for completing these labels.	H \$	
Employer contributions		Day Month Year
ABN of principal employer	H1 Receip	able foreign superannuation fund amount
A1	I\$	
Personal contributions		ssessable foreign superannuation fund amount
B \$ CGT small business retirement exemption	J \$	
C \$	Transfe	er from reserve: assessable amount
CGT small business 15-year exemption amount	*	er from reserve: non-assessable amount
D \$	L \$	
Personal injury election E \$		outions from non-complying funds eviously non-complying funds
Spouse and child contributions	T \$	
F \$	Any oth	ner contributions (including Super tributions and Low Income Super Amounts)
Other third party contributions G \$	M \$	
TOTAL CONTRIBUTIO	NS N\$	
	Allocat	(Sum of labels A to M) ed earnings or losses
Other transactions	O \$	
Accumulation phase account balance	Inward	rollovers and transfers
S1 \$	Р\$	
Retirement phase account balance	Outwar Q \$	rd rollovers and transfers
		Sum payments Code
S2 \$	R1 \$	
Retirement phase account balance – CDBIS	Income	e stream payments Code
S3 \$	R2 \$	
TRIS Count CLOSING ACCOUNT BALAN	CE S \$	
	ol 3 Ψ	(S1 plus S2 plus S3)
Accumulation phase va	lue X1 \$	
Retirement phase va		
Outstanding limited recou borrowing arrangement amo	unt Y\$	
Page 14 OFFICIAL: Se	nsitive (when co	ympleted)

OFFICIAL: Sensitive (when completed)

Signature as prescribed in tax return	Tax File Number 97415353
MEMBER 8 Title: Mr Miss Ms Other Family name First given name Member's TFN Date or See the Privacy note in the Declaration. Date	Account status Code status Other given names If deceased, date of death birth If deceased, date of death Month Year Image: Code status Image: Code status
Contributions OPENING ACCOUNT	BALANCE \$
Employer contributions A \$ ABN of principal employer A1 Personal contributions B \$ CGT small business retirement exemption C \$ CGT small business 15-year exemption am D \$ Personal injury election E \$ Spouse and child contributions F \$ Other third party contributions G \$	 H\$
TOTAL CONTR	BUTIONS N \$
Other transactions Accumulation phase account balance S1 \$ Retirement phase account balance	Allocated earnings or losses Uses Loss Inward rollovers and transfers P \$ Outward rollovers and transfers
- Non CDBİS S2 \$ Retirement phase account balance - CDBIS S3 \$	Q \$ Lump Sum payments R1 \$ Income stream payments R2 \$
TRIS Count CLOSING ACCOUNT	BALANCE S \$
Retirement p Outstanding limite borrowing arrangeme	hase value X1 \$ hase value X2 \$ d recourse Y \$ ht amount Y \$ AL: Sensitive (when completed) Page 15

Signature as prescri	bed in tax return			Tax File Number 97415353
MEMBER 9 Title: Mr Mrs Mrs M Family name	liss Ms Other			Account status
First given name		Other given na	mes	
Member's TFN See the Privacy note in the I		of birth Month	Year	If deceased, date of death Day Month Year
Contributions	OPENING ACCOUNT	BALANCE \$		
Employer contril A \$ ABN of principa A1 Personal contrib B \$ CGT small busir C \$	l employer outions ness retirement exemption ness 15-year exemption an election Id contributions	H	 \$	eds from primary residence disposal
	TOTAL CONTR	RIBUTIONS N	\$	
Other transactions		0	Allocat	(Sum of labels A to M) ated earnings or losses
Accumulation pl	hase account balance	Р	Inward	d rollovers and transfers
Retirement phas – Non CDBIS	se account balance	Q	\$	ard rollovers and transfers Sum payments Code
S2 \$ Retirement phas - CDBIS S3 \$	se account balance	R1	\$	ne stream payments
TRIS Count	CLOSING ACCOUNT		\$	(S1 plus S2 plus S3)
	Accumulation	phase value X1	\$	
	Retirement	phase value X2	\$	
	Outstanding limit borrowing arrangem	ed recourse Y	\$	
Page 16	OFFIC	IAL: Sensitive	(when co	completed)

Signature as prescribed in tax return		Tax File Number 97415353
	r Other given names	Account Code Laboratoria Status
See the Privacy note in the Declaration.	Day Month Year	Day Month Year
Contributions OPENING ACC	COUNT BALANCE \$	
Employer contributions A \$ ABN of principal employer A1 Personal contributions B \$ CGT small business retirement exem C \$ CGT small business 15-year exemp D \$ Personal injury election E \$ Spouse and child contributions F \$ Other third party contributions G \$	I \$ nption J \$ Implie Transf K \$ Transf L \$ Contriand point T \$ Any of	but date / / Year but date / / / sable foreign superannuation fund amount ssessable foreign superannuation fund amount ssessable foreign superannuation fund amount ssessable amount er from reserve: assessable amount er from reserve: non-assessable amount butions from non-complying funds reviously non-complying funds reviously non-complying funds reviously non-complying funds reviously non-complying funds reviously non-complying funds reviously non-complying funds reviously non-complying funds
TOTAL	CONTRIBUTIONS N \$	
Other transactions Accumulation phase account balance Retirement phase account balance	C \$ D \$ P \$	(Sum of labels A to M) ted earnings or losses d rollovers and transfers ard rollovers and transfers
- Non CDBIS S2 \$ Retirement phase account balance - CDBIS S3 \$	R1 \$	Sum payments Code Stream payments Code
TRIS Count CLOSING ACC	OUNT BALANCE S \$	(S1 plus S2 plus S3)
Retire Outstandir borrowing arr	Ilation phase value X1 \$ ement phase value X2 \$ ng limited recourse angement amount Y \$	
C	DFFICIAL: Sensitive (when c	ompleted) Page 17

Signature as prescribed in tax return	Tax File Number 97415353
MEMBER 11 Title: Mr Mrs Miss Ms Other Family name	Account status
First given name Other given name	ven names
Member's TFN See the Privacy note in the Declaration. Date of birth Day Month	Year If deceased, date of death Day Month Year
Contributions OPENING ACCOUNT BALANCE	\$
 Refer to instructions for completing these labels. Employer contributions A \$ ABN of principal employer A1 Personal contributions B \$ CGT small business retirement exemption C \$ CGT small business 15-year exemption amount D \$ Personal injury election E \$ Spouse and child contributions F \$ Other third party contributions 	Proceeds from primary residence disposal H\$
TOTAL CONTRIBUTIONS	S N \$ (Sum of labels A to M)
Other transactions	Allocated earnings or losses
Accumulation phase account balance	Inward rollovers and transfers
S1 \$ Retirement phase account balance – Non CDBIS	Outward rollovers and transfers Q\$
S2 \$ Retirement phase account balance	Lump Sum payments Code R1 \$
- CDBIS \$3 \$	Income stream payments Code R2 \$
TRIS Count CLOSING ACCOUNT BALANCE	E \$ \$
Accumulation phase value	∋ X1 \$
Retirement phase value	≥ X2 \$
Outstanding limited recourse borrowing arrangement amoun	
	itive (when completed)

Signature as prescribed in tax return		Tax File Number 97415353
MEMBER 12 Title: Mr Miss Ms Other Family name First given name Member's TFN Date or See the Privacy note in the Declaration. Date or		Account Code Line Status
	Month Year	
Contributions OPENING ACCOUNT	BALANCE \$	
 Refer to instructions for completing these labels Employer contributions A \$ ABN of principal employer A1 Personal contributions B \$ CGT small business retirement exemption C \$ CGT small business 15-year exemption arr D \$ Personal injury election E \$ Spouse and child contributions F \$ Other third party contributions 	H \$ H \$ H Receip Assess I \$ J \$ Non-a J \$ Transfi K \$ Contril and pr T \$ Any ot	eds from primary residence disposal Day Month Year ot date / / / sable foreign superannuation fund amount
G \$TOTAL CONTF		
	Alloca	(Sum of labels A to M) ted earnings or losses
Accumulation phase account balance	O \$	d rollovers and transfers
S1 \$ Retirement phase account balance - Non CDBIS	Q \$	ard rollovers and transfers Sum payments Code
S2 \$ Retirement phase account balance - CDBIS	R1 \$	e stream payments Code
S3 \$	R2 \$	
TRIS Count CLOSING ACCOUNT	BALANCE S \$	(S1 plus S2 plus S3)
Accumulation p	ohase value X1 \$	
Retirement	ohase value X2 \$	
Outstanding limite borrowing arrangem	ed recourse ent amount	
	AL: Sensitive (when c	ompleted) Page 19

Continu II. Annata and			
Section H: Assets and I Assets	liadilities		
Australian managed investments	Listed trusts	A \$	113,606
	Unlisted trusts	в\$	
	Insurance policy	c \$	
	Other managed investments	D \$	175,457
Australian direct investments	Cash and term deposits	E \$	110,486
Limited recourse borrowing arrangem	Debt securities	F \$	119
Australian residential real property J1 \$	Loans	G \$	
Australian non-residential real property	Listed shares		303,604
J2 \$	Unlisted shares	I\$	
Overseas real property 33 \$	L	••	
Australian shares	Limited recourse borrowing arrangements	J \$	
J4 \$	Non-residential	κ \$	
Overseas shares	real property Residential	L \$	
J5 \$	collectables and		
J6 \$	personal use assets	M \$	
Property count	Other assets	O \$	9,955
J7			
Other investments	Crypto-Currency	N \$	
Overseas direct investments	Overseas shares	Р\$	
Overseas	s non-residential real property	Q \$	
Ove	rseas residential real property	R \$	
Ov	erseas managed investments	S \$	
	Other overseas assets	т \$	
	I AND OVERSEAS ASSETS f labels A to T)	U \$	713,227
(Sum o In-house assets Did the fund have a loan to, lease		\$	

Sig	nature as prescribed in tax return]	Tax File Number	97415353
U			_		
15f	Limited recourse borrowing arrangements If the fund had an LRBA were the LRBA borrowings from a licensed financial institution?	A No Yes]		
	Did the members or related parties of the fund use personal guarantees or other security for the LRBA?	B No Yes]		
16	LIABILITIES				
	Borrowings for limited recourse borrowing arrangements				
	V1 \$				
	Permissible temporary borrowings				
	V2 \$				
	Other borrowings				
	V3 \$	Borrowings	V	\$	
	Total member clos (total of all CLOSING ACCOUNT BALANCEs fro	ing account balances om Sections F and G)	w	\$	713,227
		Reserve accounts	Χ	\$	
		Other liabilities	Y	\$	
		TOTAL LIABILITIES	Ζ	\$	713,227

Section I: Taxation o 17 Taxation of financial arran	f financial arrangements gements (TOFA)
	Total TOFA gains 📕 💲
	Total TOFA losses
Section J: Other info	ormation
Family trust election status If the trust or fund has made, or	r is making, a family trust election, write the four-digit income year

Α		specified of the election (for example, for the 2021–22 income year, write 2
в	ion, 122.	If revoking or varying a family trust election, print R for revoke or print V for variant and complete and attach the <i>Family trust election, revocation or variation 2</i>
		Interposed entity election status
c	eing	If the trust or fund has an existing election, write the earliest income year specified. If the or fund is making one or more elections this year, write the earliest income year specified and complete an <i>Interposed entity election or revocation 2022</i> for each ele
D 🗌	lete)22.	If revoking an interposed entity election, print R , and com and attach the <i>Interposed entity election or revocation 2</i>

Signature as prescribed in tax return

Tax File Number 97415353

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.

Authorized trustee's director's or public officer's signature

Autorised trustees, directors of public officers signature	
	Day Month Year Date 09 / 12 / 2022
Preferred trustee or director contact details:	
Title: Mr Mrs Miss Ms X Other	
Family name	
Clarke	
First given name Other given names	
Patricia	
Phone number 0755646884 Email address	1
Non-individual trustee name (if applicable)	
ABN of non-individual trustee	Hrs
The Commissioner of Taxation, as Registrar of the Australian Business Register, may use provide on this annual return to maintain the integrity of the register. For further information	e the ABN and business details which you on, refer to the instructions.
TAX AGENT'S DECLARATION: I declare that the <i>Self-managed superannuation fund annual return 2022</i> has been prepare provided by the trustees, that the trustees have given me a declaration stating that the info correct, and that the trustees have authorised me to lodge this annual return. Tax agent's signature	
	Day Market
	Date 09 / 12 / 2022
	Date 09 / 12 / 2022
Tax agent's contact details Title: Mr Miss Ms Other Family name Family name Miss Ms Other	
Ibanez	
First given name Other given names	
Reynaldo	
Tax agent's practice	
Accrual Accounting and Taxation	
Tax agent's phone number Reference number	Tax agent number
07 55646884 SCHNAPPE0277	79652015

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Capital gains tax (CGT) schedule 2022				
S M I T H S T Do not use correction fluid c	pr dark blue pen only. print one character in each box.	 Use in conjunction with company, trust, fund income tax return or the self-managed superannuation fund annual return. Refer to the <i>Guide to capital gains tax 2022</i> available on our website at ato.gov.au for instructions on how to complete this schedule. 		
Tax file number (TFN)	97415353			
	v to request your TFN. You do not hav ould increase the chance of delay or e			
Australian business num	nber (ABN) 77375939509			
Taxpayer's name				
Schnapper Superannuation	on Fund			
1 Current vear capital	gains and capital losses			
Shares in companies	Capital gain	Capital loss		
listed on an Australian A \$ securities exchange	\$	К\$		
Other shares B \$	6	L \$		
Units in unit trusts listed on an Australian C \$ securities exchange)	M\$		
Other units D\$	ò	N \$		
Real estate situated E \$	ò	O \$		
Other real estate F\$	\$	P \$		
Amount of capital gains from a trust (including G \$ a managed fund)	>			
Collectables H\$	\$	Q \$		
Other CGT assets and any other CGT events	6	R \$		
Amount of capital gain previously deferred under transitional S CGT relief for superannuation funds	¢	Add the amounts at labels K to R and v the total in item 2 label A – Total curren capital losses .		
Total current year capital gains	¢			

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Si	gnature as prescribed in tax return		Tax File Number	97415353
2	Capital losses			
-		Total current year capital losses	۵ \$	
			~ ¥	
				1
	Total cu	urrent year capital losses applied	В\$	
	Total pric	or year net capital losses applied	C \$	
	Total car	bital losses transferred in applied		
	(only for transfers in permanent establish	volving a foreign bank branch or ment of a foreign financial entity)	D \$	
		Total capital losses applied	E \$	
		l	Add amounts at B , C and	d D .
3	Unapplied net capital losses carrie		. [
	Net capital losses from collectables carri	ed forward to later income years	A \$	
	Other net capital losses carri	ed forward to later income years	В\$	
			Add amounts at A and B to label V – Net capital I to later income years or	osses carried forward
4	CGT discount			
		Total CGT discount applied	A \$	
5	CGT concessions for small busines	SS		
	Smal	business active asset reduction	A \$	
	Sma	Il business retirement exemption	в\$	
		Small business rollover	C \$	
		[–	
	Total small b	usiness concessions applied	D \$	
6	Net capital gain			
Ŭ		1		1
		Net capital gain	A \$	
			1J less 2E less 4A less 5 zero). Transfer the amour capital gain on your tax	nt at A to label A – Net

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S	ignature as prescribed in tax return		Tax File Number	97415353
	L			
7	Earnout arrangements			
	Are you a party to an earnout arrangement? , (Print \fbox in the appropriate box.)	A Yes, as a buyer	Yes, as a seller	No
	If you are a party to more than one earn details requested here for each additional earn		ach a separate sheet to th	is schedule providing the
	How many years does the earr	nout arrangement run for?		
	What year of tha	t arrangement are you in?		
	If you are the seller, what is the total e from t	stimated capital proceeds D the earnout arrangement?	\$	
	Amount of any capital gai your non-qualifying arrang	in or loss you made under ement in the income year.	\$	
	Request for amendment			
	If you received or provided a financial benefit to seek an amendment to that earlier income		right created in an earlier i	ncome year and you wish
	Income	year earnout right created F		LOSS
	Amended net capital gain or cap	ital losses carried forward G	\$	/
8	Other CGT information required (if a	pplicable)		CODE
	Small business 15 year exempti	ion – exempt capital gains	\$	/
	Capital gains disrega	arded by a foreign resident B	\$	
	Capital gains disregarded as a result	of a scrip for scrip rollover C	\$	
	Capital gains disregarded as a result of an int	er-company asset rollover	\$	
	Capital gains disregare	ded by a demerging entity	\$	

Signature as prescribed in tax return	Tax File Number	97415353

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.

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

I declare that the information on this form is true and correct.	
Signature	
	Date Day / Month Year
Contact name	
Patricia Clarke	
Daytime contact number (include area code)	
0755646884	

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2022

Companies and trusts that do not join consolidated groups should complete and attach this schedule to their 2022 tax return. Superannuation funds should complete and attach this schedule to their 2022 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 2022*, available on our website **ato.gov.au** for instructions on how to complete this schedule. **Tax file number (TFN)** 97415353 Name of entity Schnapper Superannuation Fund

Australian business number

77375939509

Part A - Losses carried forward to the 2022-23 income year - excludes film losses

- 1 Tax losses carried forward to later income years

 Year of loss

 G021-22
 B

 2020-G1
 C

 2019-20
 D

 2018-19
 E

 2017-18
 F

 2016-17 and earlier income years
 G

 Transfer the amount at U to the Tax losses carried forward to later income years label on your tax return.
- 2 Net capital losses carried forward to later income years

Year of loss	
2021–22	н
2020–21	I
2019–20	J
2018–19	κ
2017–18	L
2016–17 and earlier income years	M
Total	V
Transfer the amount at V to the Net capital losses carried for	orward to later income years label on your tax return.

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			٦					
Si	gnature as prescribed in tax return			Tax File Number 97415353				
Ρ	Part B – Ownership and business continuity test – company and listed widely held trust only							
sa D	omplete item 3 of Part B if a loss is being o atis ied in relation to that loss. o not complete items 1 or 2 of Part B if, in gainst a net capital gain or, in the case of c	the 2021–22 income year, no los	s ha					
1	Whether continuity of majority	Year of loss						
	ownership test passed	2021–22	A	Yes No				
	Note: If the entity has deducted, applied, transferred in or transferred out (as applicable) in the 2021–22 income year a loss incurred in	2020–21	В	Yes No				
	any of the listed years, print X in the Yes or No box to indicate whether the entity has satis ied the continuity of majority ownership test in	2019–20	С	Yes No				
	respect of that loss.	2018–19	D					
		2017–18	Ε	Yes No				
		2016–17 and earlier income years	F	Yes No				
2	Amount of losses deducted/applied for business continuity test is satisfied -		orit	y ownership test is not passed but the				
		Tax losses	G					
		Net capital losses	Н					
3	Losses carried forward for which the applied in later years – excludes film losse		be	satisfied before they can be deducted/				
		Tax losses	I					
		Net capital losses	J					
_		_						
4	Do current year loss provisions apply Is the company required to calculate its taxa the year under Subdivision 165-B or its net cap for the year under Subdivision 165-CB of the <i>In</i> 1997 (ITAA 1997)?	able income or tax loss for pital gain or net capital loss	K	Yes No				
P	art C – Unrealised losses - a	ompany only						
	Note: These questions relate to the operation of	Subdivision 165-CC of ITAA 1997.						
	Has a changeover time occurred in relation to after 1.00pm by legal time in the Australian Ca 11 November 1999?		L	Yes No				
	If you printed X in the No box at L, do not compl	lete M, N or O.						
	At the changeover time did the company satis net asset value test under section 152-15 of IT		М	Yes No				
	If you printed ${\bf X}$ in the ${\bf No}$ box at ${\bf M},$ has the contract it had an unrealised net loss at the changeover		Ν	Yes No				
	If you printed ${\bf X}$ in the ${\bf Yes}$ box at ${\bf N},$ what was unrealised net loss calculated under section 10		0					

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Signature as prescribed in tax return		Та	x File Number	97415353
Part D – Life insurance comp	anies			
Complying superant	nuation class tax losses carried forward to later income years	Ρ		
Complying superannu	ation net capital losses carried forward to later income years	Q		
Part E – Controlled foreign co	ompany losses			
	Current year CFC losses	М		
	CFC losses deducted	Ν		
	CFC losses carried forward	0		
Part F – Tax losses reconcilia	tion statement			
Balance of tax losses brou	ught forward from the prior income year	A		
ADD Uplift of tax losses of o	designated infrastructure project entities	В		
SL	IBTRACT Net forgiven amount of debt	С		
ADD Tax	loss incurred (if any) during current year	D		
ADD Tax loss amount from	m conversion of excess franking offsets	Е		
	SUBTRACT Net exempt income	F		
			L	

SUBTRACT Tax losses forgone G

SUBTRACT Tax losses deducted

Total tax losses carried forward to later income years J

L

Transfer the amount at ${\bf J}$ to the Tax losses carried forward to later income years label on your tax return.

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)

Tax File Number 97415353				
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				
Taxpayer's declaration				
I declare that the information on this form is true and correct.				
Signature				
Day Month Year				

		Date	Day	Month	Year
Contact person	Dayt	- ime contact	number	(include area	a code)
Patricia Clarke	075	5646884			

SCHEDULE

Other Attachments 2022

Tax file No 97415353

Taxpayer name Schnapper Superannuation Fund

Signature.....

Schedule

SENSITIVE (when completed) -

THIS SCHEDULE CANNOT BE LODGED WITH THE ATO AS A PAPER REPRESENTATION OF THE SCHEDULE. FOR PAPER LODGEMENT PLEASE USE THE PRE PRINTED FORMAT ISSUED BY THE ATO.