100017996MS

Signature as prescribed in tax return

Self-managed superannuation fund annual return

2018

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 2018 (NAT 71287).

The Self-managed superannuation fund annual return instructions 2018 (NAT 71606) (the instructions) can assist you to complete this annual return.

To complete this annual return

- Print clearly, using a BLACK pen only.
- Use BLOCK LETTERS and print one character per box. S М 8 T / T H
- Place $|\mathcal{X}|$ in ALL applicable boxes.

Section A: Fund information

231486158

To assist processing, write the fund's TFN at the top of pages 3, 5 and 7.

> tate/territc VIC

3194

The ATO is authorised by law to request your TFN. You are not obliged to quote your TFN but not quoting it could increase the chance of delay or error in processing your annual return. See the Privacy note in the Declaration.

Name of self-managed superannuation fund (SMSF) 2

Cuderman Family Superannuation Fund

Australian business number (ABN) (if applicable) 42681145581 3

4 **Current postal address**

19 Bourke Street

uburb/town

Mentone

5

Annual return status Is this an amendment to the SMSF's 2018 return?	A No X Yes
Is this the first required return for a newly registered SMSF?	B No Yes X

Sig	nat	ture as prescribed in tax return Tax File Number 231486158
6 Audi Title: Family First (SMS 100	SM tor's M y nar y nar	ISF auditor p name r Miss Miss Miss Miss Other Other given names Uname Other given names Uname Auditor's phone number Uditor Number Auditor's phone number Uditor Number M140 Othor12708
Post Box		ddress
Date Was If the com 7	auc Par auc oliar	wn State/territory Postcode a Mall SA 5000 It was completed A M / Month / Month / Year SA 5000 SA 5000 SA 5000 SA 5000 Source issues completed A / Month / Year The audit report qualified? B No X Yes State/territory Sa 10 Y Year Sa 2000
	В	Financial institution details for tax refunds only If you would like your fund's tax refunds paid to a different account, provide additional financial institution details. Tax refunds cannot be paid to a trustee's personal account. (See relevant instructions.) BSB number (must be six digits) Account number Account name (for example, J&Q Citizen ATF J&Q Family SF)
	С	Electronic service address alias We will use your electronic service address alias to communicate with your fund about ATO super payments.

100017996MS

Si	gnature as prescribed in tax return Tax File Number 231486158
8	Status of SMSF Australian superannuation fund A No Yes Yes Fund benefit structure B A Code Does the fund trust deed allow acceptance of the Government's Super Co-contribution and Low Income Super Contribution? C No Yes Yes X
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 X) Go to Section B: Income. 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 Yes
	Did the fund have any other income that was assessable?
	E Yes O 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.

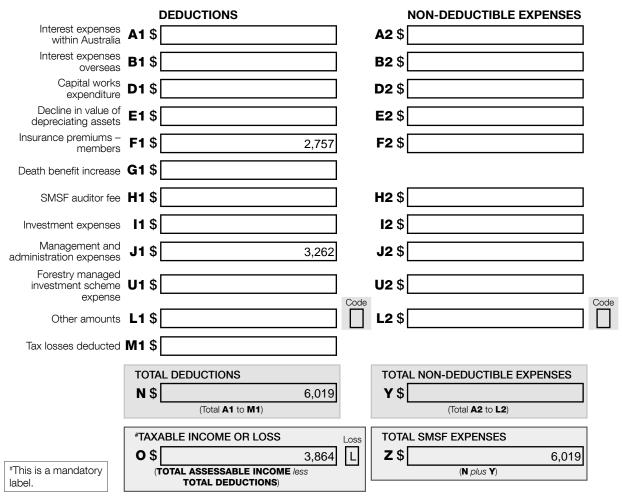
Signature as prescribed in tax return			Fund's tax file number (TFN) 231486158
Section B: Income			
Do not complete this section if all superative retirement phase for the entire year, the	ere was no other income y tax offsets, you can reco X C No X you Can	that wa ord thes If the 1 \$10,0 the de	tere supporting superannuation income streams in as assessable, and you have not realised a deferred as at Section D: Income tax calculation statement. total capital loss or total capital gain is greater than 00 or you elected to use the CGT relief in 2017 and eferred notional gain has been realised, complete and in a <i>Capital gains tax (CGT) schedule 2018</i> .
Have you applied a exemption or rollover	? MNoXYes		•
Gross rent and other lea		А\$_ В\$_	
	Gross interest	c \$	
Forest	ry managed investment scheme income	x \$[
Gross foreign income	_		Loss
D1 \$	Net foreign income	D \$	
Australian franking credits from a	T (E \$ [F \$ [Number
	foreign tunas	• ↓ н \$[
Calculation of assessable contributions Assessable employer contributions	Gross distribution from partnerships	I \$	
R1 \$ 2,15	Unfranked dividend amount	J \$ [
plus Assessable personal contributions R2 \$	*Erapkad dividand	к \$_	
plus **No-TFN-quoted contributions	*Dividend franking credit	L \$	Code
(an amount must be included even if it is zero less Transfer of liability to life insurance	*Croop trupt	м \$_	
company or PST	Assessable contributions (R1 plus R2 plus R3 less R6)	R \$	2,155
Calculation of non-arm's length income *Net non-arm's length private company dividen U1 \$ plus *Net non-arm's length trust distributions U2 \$	ds *Other income	s \$_ т \$_	Code
plus *Net other non-arm's length income U3 \$	Net non-arm's length income (subject to 45% tax rate) (U1 plus U2 plus U3)	U \$_	
[#] This is a mandatory label.	GROSS INCOME (Sum of labels A to U)	w [2,155
*If an amount is entered at this label, check the instructions	current pension income	Y \$	Loss
to ensure the correct tax treatment has been applied.	BLE INCOME (W /ess Y) V \$		2,155

	[100017996MS
Signature as prescribed in tax return		Tax File Number	231486158

Section C: Deductions and non-deductible expenses

12 Deductions and non-deductible expenses

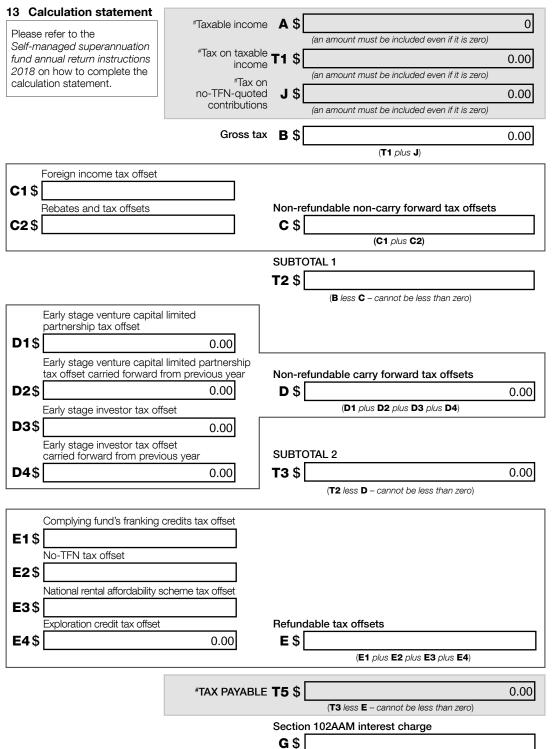
Under 'Deductions' list all expenses and allowances you are entitled to claim a deduction for. Under 'Non-deductible expenses', list all other expenses or normally allowable deductions that you cannot claim as a deduction (for example, all expenses related to exempt current pension income should be recorded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

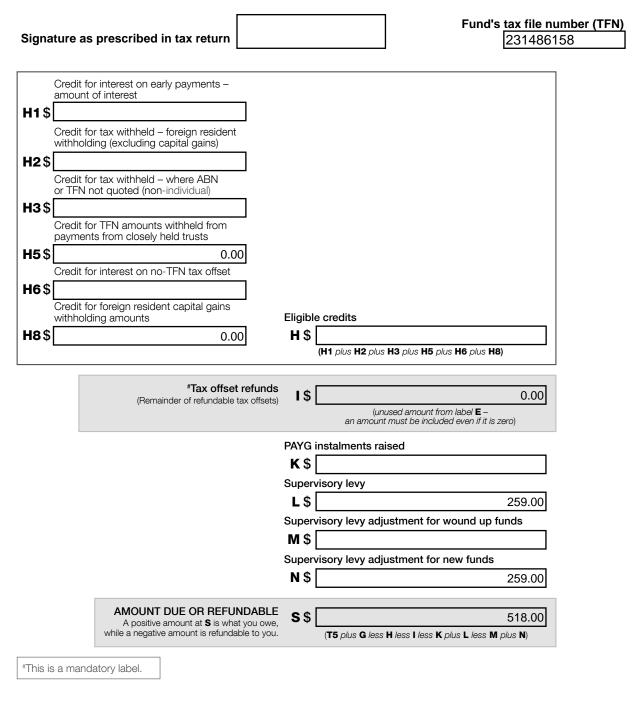


Section D: Income tax calculation statement

#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.





Section E: Losses

14 Losses

If total loss is greater than \$100,000, complete and attach a Losses schedule 2018. Tax losses carried forward to later income years Net capital losses carried forward to later income years

U \$ 3,864 V \$

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Signature as prescribed in tax retu	rn	Tax File Number 23148615	58				
Section F: Member infor	mation						
MEMBER 1							
Title: Mr Mrs Miss Ms Other							
Family name Cuderman							
First given name	Other given names						
Edward		Day Month	Year				
Member's TFN See the Privacy note in the Declaration. 48	7827062	Date of birth 21 / 10 /	1964				
Contributions	ACCOUNT BALANCE						
Refer to instructions	Employer contributions A\$						
for completing these labels. ABN of pr	rincipal employer A1						
	Personal contributions B \$						
CGT small busines	s retirement exemption C \$						
CGT small business 15-y	rear exemption amount D \$						
	Personal injury election E \$						
Spouse	and child contributions F \$						
Other ti	hird party contributions G \$						
Assessable foreign supera	annuation fund amount						
Non-assessable foreign supera	annuation fund amount J \$						
Transfer from reser	ve: assessable amount K\$						
Transfer from reserve: n	on-assessable amount L\$						
Contributions from	n non-complying funds T \$						
Any other contributions (including S and Low Incom							
Other transactions	Allocated earnings	3,681.24					
	or losses •••	3,001.24					
Accumulation phase account balance S1 \$ 201,20	ce rollovers and P\$	204,949.04					
S1 \$ 201,20 Retirement phase account balance	Outward rollovers and Q \$						
– Non CDBIS	transfers		Code				
S2 \$	0.00 Lump Sum R1 \$						
- CDBIS	Income stream R2 \$		Code				
S3 \$	0.00 payment						
0 TRIS Count CLOSING		201,267.80					
		(S1 plus S2 plus S3)]				
Acc	cumulation phase value X1 \$						
F	Retirement phase value X2 \$						

Г

Signature as prescribed in ta	ax return]	Fund's tax file nu 2314861	
				_		
	s Other					
Cuderman						
First given name Karen		Other given n	ames			
Member's TFN				1	Day Month	Year
See the Privacy note in the Declara	tion. 1399670	96		Date of birth	27 / 06 /	1964
Contributions	PENING ACCOU	INT BALANCE	\$			
Refer to instructions for completing	Employe	er contributions	A \$		2,155.44	
	ABN of principal e	employer A1				
	Person	al contributions	в\$			
CGT smal	l business retiren	nent exemption	c \$			
CGT small busin	ness 15-year exe	mption amount	D \$			
	Persona	al injury election	E \$			
	Spouse and chil	d contributions	F \$			
	Other third part	ty contributions	G \$ [
Assessable foreig	gn superannuatic	on fund amount	I\$			
Non-assessable foreig	gn superannuatio	on fund amount	J \$			
Transfer from reserve: assessable amount			к \$			
Transfer from reserve: non-assessable amount			L \$			
Contribut	tions from non-co previously non-co	omplying funds	т \$ 🗌			
Any other contributions (in		o-contributions	м \$ [
		NTRIBUTIONS	N \$		2,155.44	
Other transactions	Allo	cated earnings or losses	o \$		2,338.51	Loss
Accumulation phase accou	unt balance	Inward rollovers and	Р\$		116,340.42	
S1 \$	116,157.35	transfers	••		110,010.12	
Retirement phase account – Non CDBIS	balance	Outward rollovers and transfers	Q \$			
S2 \$	0.00		R1 \$			Code
Retirement phase account – CDBIS	balance	Income	_			Code
S3 \$	0.00	stream payment	R2 \$			
0 TRIS Count C	LOSING ACCO		- e ¢ [116 157 05	7
		UNI DALANUI	. J J	(S1 plus S2 plu	116,157.35 Js S3)	
L	Accumulati	on phase value	X1 \$]	_
		ent phase value				
			γ - Ψ			

1	0	00	1	7	9	9	61	M	S
---	---	----	---	---	---	---	----	---	---

Signature as prescribed in tax return		Tax File Number 231486158
Section H: Assets and lia	bilities	
15a Australian managed investments	Listed trusts	A \$
	Unlisted trusts	B \$
	Insurance policy	
	Other managed investments	D \$
15b Australian direct investments	Cash and term deposits	E \$ 317,943
Limited recourse borrowing arrang	Debt securities	F \$
Australian residential real property	Loans (G \$
Australian non-residential real propert		
J2 \$		
Overseas real property	Unlisted shares	I \$
J3 \$ Australian shares	Limited recourse borrowing arrangements	J \$
J4 \$	Non-residential	К \$
Overseas shares		
J5 \$	real property	L \$
Other J6 \$	personal use assets	M \$
	Other assets	O \$
15c Overseas direct investments	Overseas shares	P \$
Overs	seas non-residential real property	Q \$
	Overseas residential real property	
· · · · · · · · · · · · · · · · · · ·		
	Overseas managed investments	
	Other overseas assets	T \$
	AN AND OVERSEAS ASSETS (m of labels A to T)	U \$ 317,943
(· ·		
15d In-house assets Did the fund have a loan to, le	ease to	¢]
or investment in, related parties (as in-house assets) at the end		\$
income	e year?	
15e Limited recourse borrowing arrange		
If the fund had an LRBA were the borrowings from a lic financial insti		
Did the members or related parties		
fund use personal guarantees c security for the		

Sig	nature as prescribed in tax return			Tax File Numb	per 231486158
16	LIABILITIES				
	Borrowings for limited recourse borrowing arrangements				
	V1 \$				
	Other borrowings V3 \$	Borrowings	v	\$	
	Total member clos (total of all CLOSING ACCOUNT BALANCE s fr	sing account balances rom Sections F and G)	w	\$	317,425
		Reserve accounts	X	\$	
		Other liabilities	Y	\$	518
		TOTAL LIABILITIES	z	\$	317,943

Section I: Taxation of financial arrangements

17 Taxation of financial arrangements (TOFA)

Total TOFA gains H\$

Total TOFA losses | \$

Section J: Other information

Family trust election status

8). A 🗋	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 2017–18 income year, write 2018).
^{on,} B	If revoking or varying a family trust election, print R for revoke or print V for variation, and complete and attach the Family trust election, revocation or variation 2018

election, print **R** for revoke or print **V** for vari family trust If revoking or varying a and complete and attach the Family trust election, revocation or variation 2018.

Interposed entity election status

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 Interposed entity election or revocation 2018 for each election.

> If revoking an interposed entity election, print ${\bf R},$ and complete and attach the Interposed entity election or revocation 2018.

С

D

Tax File Number 231486158

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 current trustees and directors have authorised this annual return and it is documented as such in the SMSF's records. I have received the audit report and I am aware of any matters raised. I declare that the information on this annual return, including any attached schedules and additional documentation is true and correct. I also authorise the ATO to make any tax refunds to the nominated bank account (if applicable).

Authorised trustee's, director's or public officer's signature

	Day Month Year
	Date / / /
Preferred trustee or director contact details:	
Title: Mr Mrs Miss Ms Other	
Family name	
Cuderman	
First given name Other given names	
Edward	
Phone number Email address	
Non-individual trustee name (if applicable)	
Cuderman Super Pty Ltd	
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, ryou provide on this annual return to maintain the integrity of the register. For furth	
TAX AGENT'S DECLARATION: I declare that the <i>Self-managed superannuation fund annual return 2018</i> has been prep by the trustees, that the trustees have given me a declaration stating that the informatic the trustees have authorised me to lodge this annual return. Tax agent's signature	on provided to me is true and correct, and that
	Date 29 / 08 / 2019
Tax agent's contact details	
Morrison	
First given name Other given names	
Angus	
Tax agent's practice	
Morrison, Angus	
Tax agent's phone number Reference number	Tax agent number
0395846422 CUDERMAN0468	24756885
Postal address for annual returns: Australian Taxation Office, GPO Box 9845,	IN YOUR CAPITAL CITY
Page 18 Sensitive (when completed)	

2018

Capital gains tax (CGT) schedule

When completing this form

- Print clearly, using a black or dark blue pen only.
- Use BLOCK LETTERS and print one character in each box.
- Do not use correction fluid or covering stickers.
- Sign next to any corrections with your full signature (not initials).
- Use in conjunction with company, trust, fund income tax return or the self-managed superannuation fund annual return.
- Refer to the Guide to capital gains tax 2018 available on our website at ato.gov.au for instructions on how to complete this schedule.

Tax file number (TFN) 231486158

We are authorised by law to request your TFN. You do not have to quote your TFN. However, if you don't it could increase the chance of delay or error in processing your form.

Australian business number (ABN) 42681145581

Taxpayer's name

Cuderman Family Superannuation Fund

1 Current year capital gains and capital losses

Shares in companies	Capital gain	Capital loss
listed on an Australian securities exchange	A \$	К\$
Other shares	в \$	L \$
Units in unit trusts listed on an Australian securities exchange	C \$	M\$
Other units	D \$	N \$
Real estate situated in Australia	E \$	O \$
Other real estate	F \$	Р\$
Amount of capital gains from a trust (including a managed fund)	G \$	
Collectables	Н\$	Q \$
Other CGT assets and any other CGT events	I \$	R \$
Amount of capital gain previously deferred under transitional CGT relief for superannuation funds	S \$0	Add the amounts at labels K to R and write the total in item 2 label A – Total current year capital losses .
Total current year capital gains	J \$	

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		7	
Si	gnature as prescribed in tax return	Tax File Number	231486158
2	Capital losses		
	Total current year capital losses	A \$	
	Total current year capital losses applied	в\$	
	Total prior year net capital losses applied	C \$	
	Total capital losses transferred in applied (only for transfers involving a foreign bank branch or permanent establishment of a foreign financial entity)	D \$	
	Total capital losses applied	E \$	
		Add amounts at B , C an	d D .
3	Unapplied net capital losses carried forward		
	Net capital losses from collectables carried forward to later income years	A \$	
	Other net capital losses carried forward to later income years	в\$	
		Add amounts at A and E to label V – Net capital I to later income years o	osses carried forward
4	CGT discount		
	Total CGT discount applied	A \$	
5	CGT concessions for small business		
	Small business active asset reduction	A \$	
	Small business retirement exemption	в\$	
	Small business rollover	C \$	
	Total small business concessions applied		
	Total small business concessions applied	D \$	
6	Net capital gain		
	Net capital gain	A \$	
		1J less 2E less 4A less 5 zero). Transfer the amoun 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 231486158
7	Earnout arrangements	
	Are you a party to an earnout arrangement? A Yes, as a buyer (Print \overline{X} in the appropriate box.)	Yes, as a seller No
	If you are a party to more than one earnout arrangement, copy details requested here for each additional earnout arrangement.	and attach a separate sheet to this schedule providing the
	How many years does the earnout arrangement run for	r? B
	What year of that arrangement are you	n? C
	If you are the seller, what is the total estimated capital procee from the earnout arrangemen	
	Amount of any capital gain or loss you made und your non-qualifying arrangement in the income ye	
	Request for amendment	
	If you received or provided a financial benefit under a look-through a to seek an amendment to that earlier income year, complete the foll	
	Income year earnout right creat	ed F
	Amended net capital gain or capital losses carried forwa	rd G\$
8	Other CGT information required (if applicable)	CODE
	Small business 15 year exemption – exempt capital ga	
	Capital gains disregarded by a foreign reside	ent B\$
	Capital gains disregarded as a result of a scrip for scrip rollow	rer C\$
	Capital gains disregarded as a result of an inter-company asset rollow	rer D\$
	Capital gains disregarded by a demerging en	ity E\$

Signature as prescribed in tax return	Tax File Number	231486158

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	
Contact name	Date Day Month Year
Edward Cuderman	
Daytime contact number (include area code)	

100017996BP

2018

Losses schedule

Companies and trusts that do not join consolidated groups should complete and attach this schedule to their 2018 tax return. Superannuation funds should complete and attach this schedule to their 2018 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 \swarrow in all applicable boxes. Refer to *Losses schedule instructions 2018*, available on our website **ato.gov.au** for instructions on how to complete this schedule. Tax file number (TFN) 231486158 Name of entity Cuderman Family Superannuation Fund

Australian business number

42681145581

Part A - Losses carried forward to the 2018-19 income year - excludes film losses

1	Tax losses carried forward to later income years			
•	Year of lo	ss	_	
	2017-	18	3	3,864
	2016-	17	2	
	2015-	16	כ	
	2014-	15	Ξ	
	2013-	14	F	
	2012–13 and ear income yea		3	
	То	al (ן	3,864
	Transfer the amount at U to the Tax losses carr	ed fo	rwa	ard to later income years label on your tax return.

2 Net capital losses carried forward to later income years

fear of loss	
2017-18	н
2016–17	I
2015–16	J
2014–15	К
2013-14	L
2012–13 and earlier income years	M
Total	v
Transfer the amount at V to the Net capital losses carried for	prward to later income years label on your tax return.

			1	
S	gnature as prescribed in tax return		_ ·	Tax File Number 231486158
Ρ	art B – Ownership and b	ousiness continuity	' te	est – company and listed widely held trust only
sa D	omplete item 3 of Part B if a loss is being of atisfied 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 co	the 2017–18 income year, no loss	s ha	as been claimed as a deduction, applied
1	Whether continuity of majority	Year of loss		
	ownership test passed	2017–18	Α	Yes No
	Note: If the entity has deducted, applied, transferred in or transferred out (as applicable) in the 2017–18 income year a loss incurred in	2016–17	В	Yes No
	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	2015–16	С	Yes No
	respect of that loss.	2014–15	_	Yes No
		2013–14	E	Yes No
		2012–13 and earlier income years	F	Yes No
2	Amount of losses deducted/applied for business continuity test is satisfied – e		orit	y ownership test is not passed but the
		Tax losses	G	
		Net capital losses	Η	
3	Losses carried forward for which the l 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>Ir</i> <i>1997</i> (ITAA 1997)?	ble income or tax loss for bital gain or net capital loss	K	Yes No
P	art C – Unrealised losses - co	ompany only		
•				
	Note: These questions relate to the operation of 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	ete M , N or O .		
	At the changeover time did the company satisfined 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 cor it had an unrealised net loss at the changeover		N	Yes No
	If you printed X in the Yes box at N , what was unrealised net loss calculated under section 16		0	

Signature as prescribed in tax return		Та	x File Number	231486158
Part D – Life insurance comp	anies			
Complying superanr	nuation class tax losses carried forward to later income years			
Complying superannu	ation net capital losses carried forward to later income years			
Part E – Controlled foreign co	ompany losses			
	Current year CFC losses	M		
	CFC losses deducted	N		
	CFC losses carried forward	0		

Balance of tax losses brought forward from the prior income year A ADD Uplift of tax losses of designated infrastructure project entities B SUBTRACT Net forgiven amount of debt C ADD Tax loss incurred (if any) during current year D

Part F – Tax losses reconciliation statement

ADD Tax loss incurred (if any) during current year	D	3,864
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	Η	
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	3,864

Transfer the amount at J to the Tax losses carried forward to later income years label on your tax return.

	Tax File Number 231486158
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 require to this form, and that the information provided is true and correct in every deta place all the facts before the ATO. The income tax law imposes heavy penaltie	ail. If you are in doubt about any aspect of the tax return,
Privacy Taxation law authorises the ATO to collect information and disclose it to other information of the person authorised to sign the declaration. For information a	
Taxpayer's declaration	
I declare that the information on this form is true and correct.	
Signature	
	Date Day / Month Year
Contact person	Daytime contact number (include area code)
Edward Cuderman	

A

Other Attachments Schedule

\mathbf{A}	1	
20		•
20		•

Tax file No 231486158

Taxpayer name Cuderman Family Superannuation Fund

Signature.....

SENSITIVE (when completed) -