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

| ho should complete this annual return? Ity self-managed superannuation funds (SMSFs) can complete s annual return. All other funds must complete the <i>Fund ome tax return 2021</i> (NAT 71287). The Self-managed superannuation fund annual return instructions 2021 (NAT 71606) (the instructions) can assist you to complete this annual return. The SMSF annual return cannot be used to notify us of a change in fund membership. You must update fund details via ABR.gov.au or complete the Change of details for superannuation entities form (NAT 3036). | To complete this annual return Print clearly, using a BLACK pen only. Use BLOCK LETTERS and print one character per box. Image: Image: Imag |
|---|---|
| ection A: Fund information Tax file number (TFN) Provided Image: The ATO is authorised by law to request your TFN. You are the chance of delay or error in processing your annual return | To assist processing, write the fund's TFN at the top of pages 3, 5, 7 and 9. e not obliged to quote your TFN but not quoting it could increase urn. See the Privacy note in the Declaration. |
| Name of self-managed superannuation fund (SMSF HE HAINES FAMILY SUPER FUND | |
| Australian business number (ABN) (if applicable) 714 | 41259518 |
| Current postal address |] |
| | |
| eveland | State/territory Postcode QLD 4163 |
| Annual return status Is this an amendment to the SMSF's 2021 return? | |
| | Iv self-managed superannuation funds (SMSFs) can complete s annual return. All other funds must complete the Fund one tax return 2021 (NAT 71287). 1) The Self-managed superannuation fund annual return instructions 2021 (NAT 71606) (the instructions) can assist you to complete this annual return. 2) 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). 2) Ection A: Fund information Tax file number (TFN) Provided ① The ATO is authorised by law to request your TFN. You are the chance of delay or error in processing your annual returned. Name of self-managed superannuation fund (SMSF HAINNES FAMILY SUPER FUND Australian business number (ABN) (if applicable) 714 Current postal address D Box 24 Annual return status |

| 6 SMSF auditor Auditor's name | | | | |
|---|-------------------|---|-----------------|----------|
| Title: Mr X Mrs Miss Ms Other | | | | |
| Family name | | | | |
| Boys | | | | |
| First given name | Other given names | | | |
| Anthony | William | | | |
| SMSF Auditor Number Auditor's pł | none number | | | |
| 100014140 61410712 | 2708 | | | |
| Postal address | | | | |
| PO Box 3376 | | | | |
| | | | | |
| | | | <u></u> | |
| Suburb/town | | _ | State/territory | Postcode |
| Rundle Mall | | | SA | 5000 |
| Date audit was completed A 26 / 11 | Year 2021 | | | |
| Was Part A of the audit report qualified? | B No Yes X | | | |
| Was Part B of the audit report qualified? | C No X Yes | | | |
| If Part B of the audit report was qualified, have the reported issues been rectified? | D No Yes | | | |

7 Electronic funds transfer (EFT)

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

A Fund's financial institution account details

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

| Fund BSB number | 084402 Fund account number | | 176988702 | | |
|-------------------|----------------------------|---|-----------|--|--|
| Fund account name | | | | | |
| THE HAINES FAM | ILY SUPER FUNC |) | | | |

Account number

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.

Account name

C Electronic service address alias

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

AUSPOSTSMSF

BSB number

| | Tax File Number Provided |
|----|---|
| 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 Amounts? 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 Vo Year Have all tax lodgment and payment obligations been met? No Year |
| 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) 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. |

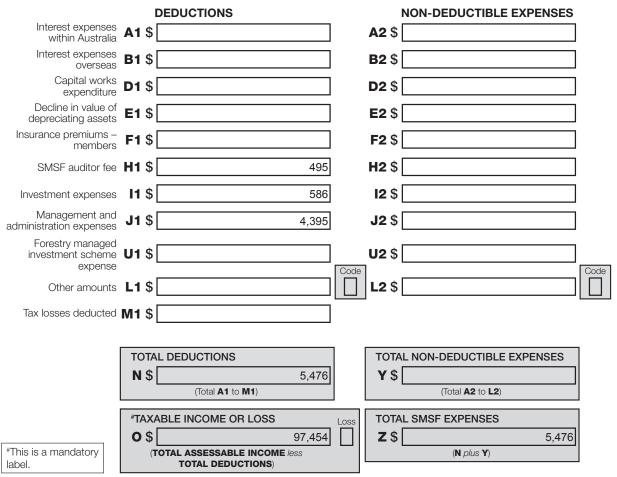
| | | Tax I | File Number Provided |
|---|---|--|---|
| Section B: Income | | | |
| Do not complete this section if all superanr the retirement phase for the entire year, ther notional gain. If you are entitled to claim any t | e was no other incom | e that was assessab | le, and you have not realised a deferred |
| 11 Income Did you have a capital gains tax (CGT) event during the year? G | | \$10,000 or you elect 2017 and the deferre complete and attach | s or total capital gain is greater than ed to use the transitional CGT relief in d notional gain has been realised, a <i>Capital gains tax (CGT) schedule 2021</i> |
| Have you applied an exemption or rollover? | No X Yes | Code | |
| | Net capital gain | A \$ | 3,608 |
| Gross rent and other leasi | ng and hiring income | в\$ | |
| | Gross interest | C \$ | 1 |
| Forestry | managed investment scheme income | X \$ | |
| Gross foreign income | | | Loss |
| D1 \$ 1,000 | Net foreign income | D \$ | 1,000 |
| Australian franking credits from a Ne | ew Zealand company | E \$ | Number |
| | Transfers from foreign funds | F \$ | |
| Gı | ross payments where ABN not quoted | Н\$ | |
| Calculation of assessable contributions Assessable employer contributions | Gross distribution from partnerships | I \$ | |
| R1 \$ 1,567 | *Unfranked dividend | J \$ | |
| plus Assessable personal contributions R2 \$ 66,692 | amount *Franked dividend | K \$ | |
| plus #*No-TFN-quoted contributions | amount *Dividend franking | | |
| R3 \$ 0 (an amount must be included even if it is zero) | credit *Gross trust | | Code |
| less Transfer of liability to life insurance | distributions | М\$ | 30,062 |
| company or PST | Assessable contributions (R1 plus R2 plus R3 less R6) | R \$ | 68,259 |
| 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 \$ | *Other income *Assessable income due to changed tax status of fund | S \$ T \$ | |
| 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 \$ | |
| | GROSS INCOME (Sum of labels A to U) | W \$ | 102,930 |
| entered at this label, | rrent pension income | Y \$ | |
| | SESSABLE V \$ | | 102,930 |

Page 4

Section C: Deductions and non-deductible expenses

12 Deductions and non-deductible expenses

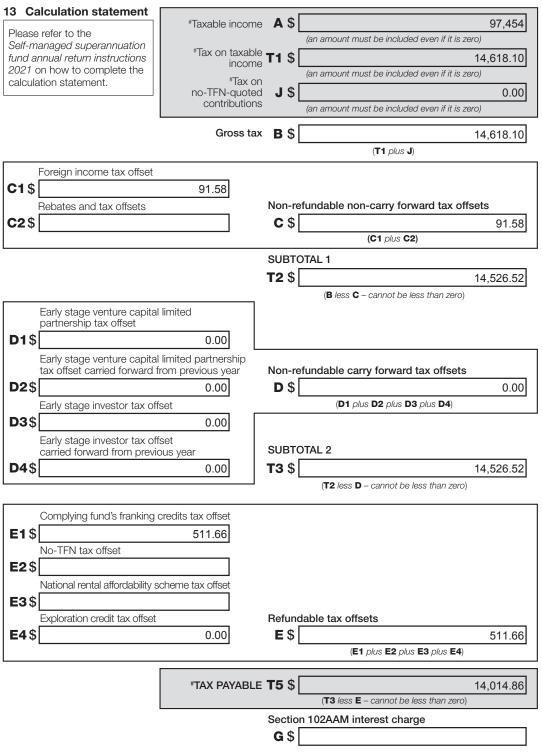
Under 'Deductions' list all expenses and allowances you are entitled to claim a deduction for. Under 'Non-deductible expenses', list all other expenses or normally allowable deductions that you cannot claim as a deduction (for example, all expenses related to exempt current pension income should be recorded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

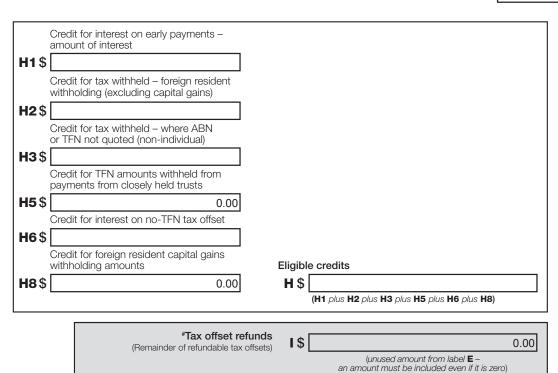


Section D: Income tax calculation statement

#Important:

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





PAYG instalments raised **K**\$ 10,608.00 Supervisory levy L \$ 259.00 Supervisory levy adjustment for wound up funds **M**\$ Supervisory levy adjustment for new funds N \$ AMOUNT DUE OR REFUNDABLE **S**\$ 3,665.86 A positive amount at **S** is what you owe, while a negative amount is refundable to you. (T5 plus G less H less I less K plus L less M plus N)

*This is a mandatory label.

Section E: Losses 14 Losses

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

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

forward to later income years

OFFICIAL: Sensitive (when completed)

| Section F: Member information | | | | | |
|--|--|--|--|--|--|
| MEMBER 1 | | | | | |
| Title: Mr Miss Ms Other | | | | | |
| Family name Haines | | | | | |
| First given name Other given names | | | | | |
| Mathew James | | | | | |
| Member's TFN | | | | | |
| See the Privacy note in the Declaration. Provided Date of birth Provided | | | | | |
| Contributions OPENING ACCOUNT BALANCE \$ 324,251.64 | | | | | |
| Proceeds from primary residence disposal H \$ | | | | | |
| Employer contributions Receipt date Day Month Year | | | | | |
| A \$ H1// | | | | | |
| ABN of principal employer Assessable foreign superannuation fund amount | | | | | |
| | | | | | |
| Personal contributions Non-assessable foreign superannuation fund amount B \$ 33,346.00 J \$ | | | | | |
| | | | | | |
| C S K S | | | | | |
| CGT small business 15-year exemption amount | | | | | |
| | | | | | |
| Personal injury election Contributions from non-complying funds | | | | | |
| E snd previously non-complying funds T \$ | | | | | |
| | | | | | |
| Image: Construction of the party contributions (including Super Co-contributions and Low Income Super Amounts) | | | | | |
| G \$ M \$ | | | | | |
| | | | | | |
| TOTAL CONTRIBUTIONS N \$ 33,346.00 | | | | | |
| (Sum of labels A to M) | | | | | |
| Other transactions Allocated earnings or losses 0 \$ 32,741.24 | | | | | |
| Accumulation phase account balance rollovers and P\$ | | | | | |
| Accumulation phase account balance rollovers and transfers | | | | | |
| Outward • • | | | | | |
| Retirement phase account balance rollovers and transfers Q \$ - Non CDBIS Code | | | | | |
| S2 \$ 0.00 Lump Sum P1 ¢ | | | | | |
| Retirement phase account balance | | | | | |
| | | | | | |
| S3 \$ 0.00 payments | | | | | |
| | | | | | |
| 0 TRIS Count CLOSING ACCOUNT BALANCE \$\$ 390,338.88 | | | | | |
| (S1 plus S2 plus S3) | | | | | |
| Accumulation phase value X1 \$ | | | | | |
| Retirement phase value X2 \$ | | | | | |
| | | | | | |
| Outstanding limited recourse Y\$ | | | | | |
| | | | | | |

| MEMBER 2 | | | |
|---|--|-----------------------------------|------------|
| Title: Mr Mrs X Miss Ms Other | | | |
| Family name | | | |
| Haines | 0.1 | | |
| First given name Melissa | Other given names Pamela-Ann | | |
| | I ameia-Aim | | |
| Member's TFN See the Privacy note in the Declaration. Provided | | Date of birth | Provided |
| | | |] |
| Contributions OPENING ACCOU | | | 331,786.48 |
| Refer to instructions for completing these labe | Proceeds from prir | nary residence disposal | |
| | H \$ | | |
| Employer contributions | Receipt date | ay Month Yea | ur |
| A \$ 1,567.50 | H1 | | |
| ABN of principal employer A1 | | superannuation fund amo | iunt |
| Personal contributions | | | |
| B \$ 33,346.00 | J \$ | reign superannuation fund | |
| CGT small business retirement exemption | - + | ve: assessable amount | |
| C \$ | К \$ | | |
| CGT small business 15-year exemption amount | Transfer from reser | ve: non-assessable amou | unt |
| D \$ | L \$ | | |
| Personal injury election E \$ | Contributions from and previously non | non-complying funds | |
| Spouse and child contributions | T \$ | | |
| F \$ | Any other contribu | tions | |
| Other third party contributions | Low Income Super | o-contributions and r Amounts) | |
| G \$ | M \$ | | |
| TOTAL CONTRIBUTIONS N S | s [| 34,913.50 | |
| | (Sum of labels A to M) | | |
| | | | Loss |
| Other transactions Allo | or losses 0 \$ | | 33,392.04 |
| | Inward | | |
| Accumulation phase account balance S1 \$ 400,092.02 | rollovers and P \$ transfers | | |
| | Outward | | |
| Retirement phase account balance – Non CDBIS | rollovers and transfers | | Code |
| S2 \$ 0.00 | Lump Sum R1 \$ | | |
| Retirement phase account balance | payments | | |
| - CDBIS | Income stream R2 \$ | | |
| S3 \$ 0.00 | payments | | |
| | | | |
| 0 TRIS Count CLOSING ACCOU | JNT BALANCE S \$ | | 100,092.02 |
| | | (S1 plus S2 plus S3) | |
| Accumulatio | on phase value X1 \$ | | |
| Retireme | nt phase value X2 \$ | | |
| Outstanding li | mited recourse V & | | |
| borrowing arrang | | malatad) | |
| OFFIC | IAL: Sensitive (when co | npiereu) | Page 9 |

Tax File Number Provided Section H: Assets and liabilities 15 ASSETS Listed trusts A \$ 15a Australian managed investments Unlisted trusts **B**\$ 501,468 Insurance policy C\$ Other managed investments **D**\$ 191,300 Cash and term deposits **E**\$ 80,503 15b Australian direct investments Limited recourse borrowing arrangements Debt securities F\$ Australian residential real property Loans G\$ J1 \$ Australian non-residential real property Listed shares H\$ **J2**\$ Unlisted shares |\$ Overseas real property **J3**\$ Limited recourse J \$ borrowing arrangements Australian shares Non-residential K \$ **J4**\$ real property Overseas shares Residential L \$ **J5**\$ real property Collectables and personal use assets **M** \$ Other **J6**\$ 23,217 Other assets **O** \$ Property count **J7** Crypto-Currency **N**\$ 15c Other investments 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 **T** \$ TOTAL AUSTRALIAN AND OVERSEAS ASSETS **U**\$ 796,488 (Sum of labels A to T) 15e In-house assets Did the fund have a loan to, lease to or investment in, related parties **A** No X Yes \$ (known as in-house assets)

at the end of the income year?

| | | | | | | Tax File Number | Provided | |
|-----|---|-------------------|-----------|----|-----|-----------------|----------|---|
| 15f | financial institution? | A No B No | Yes | | | | | |
| 16 | LIABILITIES | | | | | | | |
| | Borrowings for limited recourse borrowing arrangements | | | | | | | |
| | V1 \$ | | | | | | | |
| | Permissible temporary borrowings | | | | | | | |
| | V2 \$ | | | | | | | |
| | Other borrowings | | | | | | | _ |
| | V3 \$ | Borre | owings | V | \$[| | | |
| | Total member closir (total of all CLOSING ACCOUNT BALANCE s fro | | | W | \$[| | 790,430 | |
| | | Reserve ac | counts | X | \$[| | | |
| | | Other lia | abilities | Y | \$[| | 6,058 | |
| | | TOTAL LIA | BILITIES | z | \$[| | 796,488 | |
| | | | | | | | | I |
| | | | | | | | | |
| | ction I: Taxation of financial Taxation of financial arrangements (TOFA | - | emen | ts | • | | | |
| | | Total TOFA g | ains H S | 5 | | | | |
| | | Total TOFA los | sses I S | 5 | | | | |

Section J: Other information

| Family t | rust | ele | ctior | n status | 5 | |
|----------|------|-----|-------|----------|---|--|
| 16.11 | | | ~ | | | |

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

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. 00/44/0004

Authorised trustee's director's or Authorised trustee's signature

| Authorised trustees, directory of public officers sig | liature | 29 / 11 / 2021 |
|---|--|-------------------|
| NVAH | | Date A Month Year |
| Preferred trustee or director contact detai | ls: | |
| Title: Mr X Mrs Miss Ms Other | | |
| Family name | | |
| Haines | | |
| First given name | Other given names | |
| Mathew | James | |
| Phone number 07 3286 1322 Email address | | |
| Non-individual trustee name (if applicable) | | |
| | | |
| ABN of non-individual trustee | and complete this annual return | Hrs |
| The Commissioner of Taxation, as Registrar of the provide on this annual return to maintain the integration of the integration | | |
| TAX AGENT'S DECLARATION: I declare that the <i>Self-managed superannuation func</i> provided by the trustees, that the trustees have give correct, and that the trustees have authorised me to Tax agent's signature | n me a declaration stating that the in | |
| | | Day Month Year |
| Tax agent's contact details Title: Mr Mrs X Miss Ms Other Family name Mrs X Miss Ms Other Ms | | |
| Sherman | | |
| First given name | Other given names | |
| Shona | Lorraine | |
| Tax agent's practice | | |
| HFB Super Pty Ltd | | |
| Tax agent's phone number | Reference number | Tax agent number |
| 07 3286 1322 | HAIM | 24805931 |
| | | |

100017996BW

2021

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 2021 available on our website at ato.gov.au for instructions on how to complete this schedule.

 Tax file number (TFN)
 Provided

 Image: the second second

However, if you don't it could increase the chance of delay or error in processing your form.

Australian business number (ABN) 71441259518

Taxpayer's name

THE HAINES FAMILY SUPER 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 \$[| | М\$[| 1,537 |
| Other units | D \$[| 628 | N \$ | |
| Real estate situated in Australia | Е\$[| | o \$[| |
| Other real estate | F \$[| | Р\$[| |
| Amount of capital gains from a trust (including a managed fund) | G \$[| 6,321 | | |
| 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 | | 0 | the to | he amounts at labels K to R and write tal in item 2 label A – Total current year al losses . |
| Total current year capital gains | J \$[| 6,949 | | |

OFFICIAL: Sensitive (when completed)

| | | Tax File Number | Provided |
|---|---|--|--------------------------|
| 2 | Capital losses | | |
| | Total current year capital losses | A \$ | 1,537 |
| | Total current year capital losses applied | в\$ | 1,537 |
| | 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 \$ | 1,537 |
| | | 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 \$ | 1,804 |
| 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 | D \$ | |
| | | | |
| 6 | Net capital gain | | |
| | Net capital gain | A \$ | 3,608 |
| | | 1J less 2E less 4A less 5 zero). Transfer the amoun capital gain on your tax | nt at A to label A – Net |

| | Tax File Number Provided | |
|---|--|------|
| 7 | Earnout arrangements | |
| | Are you a party to an earnout arrangement? A Yes, as a buyer Yes, as a seller No | |
| | If you are a party to more than one earnout arrangement, copy and attach a separate sheet to this schedule providing the details requested here for each additional earnout arrangement. | е |
| | How many years does the earnout arrangement run for? | |
| | What year of that arrangement are you in? | |
| | If you are the seller, what is the total estimated capital proceeds from the earnout arrangement? D \$ | |
| | Amount of any capital gain or loss you made under estimate to the second | .0SS |
| | Request for amendment | |
| | If you received or provided a financial benefit under a look-through earnout right created in an earlier income year and you wis to seek an amendment to that earlier income year, complete the following: | sh |
| | Income year earnout right created F | |
| | Amended net capital gain or capital losses carried forward G | .0SS |
| 8 | Other CGT information required (if applicable) | CODE |
| | Small business 15 year exemption – exempt capital gains 🗛 💲 | |
| | Capital gains disregarded 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 inter-company asset rollover D\$ | |
| | Capital gains disregarded by a demerging entity E \$ | |

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

| MPALI | Date 29 / 11 / 2021 |
|---------|---------------------|
| 777 + 7 | Day Month Year |

Contact name

Mathew James Haines

Daytime contact number (include area code)

07 3286 1322

Electronic Lodgment Declaration (SMSF)

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

Privacy

The ATO is authorised by the Taxation Administration Act 1953 to request the provision of tax file numbers (TFNs). The ATO will use the TFNs to identify each partner or beneficiary or entity in our records. It is not an offence not to provide the TFNs. However, you cannot lodge your tax return electronically if you do not quote your TFN.

Taxation law authorises the ATO to collect information and disclose it to other government agencies, including personal information about the person authorised to sign the declaration. For information about privacy go to ato.gov.au/privacy

The Australian Business Register

The Commissioner of Taxation, as Registrar of the Australian Business Register, may use the ABN and business details which you provide on this tax return to maintain the integrity of the register.

Please refer to the privacy statement on the Australian Business Register (ABR) website (www.abr.gov.au) for further information - it outlines our commitment to safeguarding your details.

Electronic funds transfer - direct debit

Where you have requested an EFT direct debit some of your details will be provided to your financial institution and the Tax Office's sponsor bank to facilitate the payment of your taxation liability from your nominated account.

| Tax File Number | Name of Fund | Year |
|-----------------|------------------------------|------|
| Provided | THE HAINES FAMILY SUPER FUND | 2021 |

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

Important

Before making this declaration please check to ensure that all income has been disclosed and the tax return is true and correct in every detail. If you are in doubt about any aspect of the tax return, place all the facts before the Tax Office. The tax law provides heavy penalties for false or misleading statements on tax returns.

Declaration: I declare that:

- All the information provided to the agent for the preparation of this tax return, including any applicable schedules
- is true and correct; and
- I authorise the agent to lodge this tax return.

| Signature of Partner, Trustee, or Director | MPA H | Date | 29 / 11 / 202/1 |
|---|-------|------|-----------------|

ELECTRONIC FUNDS TRANSFER CONSENT

This declaration is to be completed when an electronic funds transfer (EFT) of a refund is requested and the tax return is being lodged through an approved ATO electronic channel.

This declaration must be signed by the partner, trustee, director or public officer prior to the EFT details being transmitted to the Tax Office. If you elect for an EFT, all details below must be completed.

Important: Care should be taken when completing EFT details as the payment of any refund will be made to the account specified.

| Account Name | THE HAINES FAMILY SUPER FUND | | |
|----------------|------------------------------|------------------|------|
| Account Number | 084402 176988702 | Client Reference | HAIM |
| | | | |

I authorise the refund to be deposited directly to the specified account

| Signature | Date | / | / | |
|-----------|------|---|---|--|
| | | | | |

Tax Agent's Declaration

I declare that:

- I have prepared this tax return in accordance with the information supplied by the partner, trustee, director or public officer
- I have received a declaration made by the entity that the information provided to me for the preparation of this tax return is true and correct; and
- I am authorised by the partner, trustee, director or public officer to lodge this tax return, including any applicable schedules.

| Agent's signature | | | Date | |
|-------------------|-------------------|---|------------------|----------|
| Contact name | Shona Sherman | | Client Reference | HAIM |
| Agent's Phone Nun | nber 07 3286 1322 | т | ax Agent Number | 24805931 |