MICKLEE SUPERANNUATION FUND

PART A Electronic lodgment declaration (Form P, T, F, SMSF or EX)

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

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 However, you cannot lodge your tax return electronically if you do not quote your TFN.

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

The Australian Business Register

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

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

Electronic funds transfer - direct debit

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

Tax file number	862 317 897]	Year	2020	
Name of partnership, trust, fund or entity	MICKLEE SUPE	ERANNUATION FU	ND		

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:

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

•	the agent is	authorised	to lo	dge this	tax	return.	
---	--------------	------------	-------	----------	-----	---------	--

Signature of partner, trustee or director	Date	

PART B

Electronic funds transfer consent

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

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

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

Agent's reference number	74081009
Account Name	D Baker trust Account
I authorise the refund to be	deposited directly to the specified account.

Signature

Date

ay	e		•

		Self-mana	ged superar	nuation	2020
Wh	o should complete this annual return?	fund annu			
Only com	y self-managed superannuation funds (SMS plete this annual return. All other funds mus d income tax return 2020 (NAT 71287)	Fs) can t complete the		Return year	2020
ins	ne Self-managed superannuation fund ann structions 2020 (NAT 71606) (the instruction ou to complete this annual return.				
ch via	ne SMSF annual return cannot be used to hange in fund membership. You must upda a ABR.gov.au or complete the Change of o pperannuation entities form (NAT3036).	ate fund details			
Seo 1	ction A: Fund information Tax file number (TFN)	862 317 897			
	The Tax Office is authorised by law to req chance of delay or error in processing you				ncrease the
2	Name of self-managed superannuat				
		MICKLEE SUPERA	ANNUATION FUND		
3	Australian business number (ABN)	60 164 348 06	3		
4	Current postal address	C/- D BAKER &	ASSOCIATES PTY I	JTD	
		PO Box 310			
		MIDLAND		WA 6	5936
5	Annual return status Is this an amendment to the SMSF's 2020 Is this the first required return for a newly				
	is this the hist required return for a newly				
6	SMSF auditor Auditor's name	Mr			
	Auditor's name Title Family name	Boys			
	First given name	Anthony			
	Other given names	William			
	SMSF Auditor Number	100 014 140			
	Auditor's phone number	041 712708			
	Use Agent address details? N Postal address	PO Box 3376			
		Rundle Mall		SA 5	5000
		Date audit was comple	ted A		
		Was Part A of the audi	t report qualified ?	BN	
		Was Part B of the audi	t report qualified ?	C N	
		If Part B of the audit re have the reported issu	port was qualified, es been rectified?	D	

Sensitive (when completed)

MICKLEE SUPERANNUATION FUND

	Α	Fund's financial inst This account is used fo			ers. Do not prov	vide a tax agent a	ccount here.		
		Fund BSB number (must be six digits)	066115	Fund a	ccount number	10334994			
		Fund account name (for	example, J&Q Citiz	zen ATF J&C	Family SF)				
		D Baker trust	Account						
		I would like my tax refu	nds made to this ad	ccount. Y	Print Y for yes or N for no.	If Yes, Go to C			
	в	Financial institution	account details	for tax ref	unds		Use	e Agent Trust Account	? N
		This account is used fo	r tax refunds. You	can provide	a tax agent acc	count here.			
		BSB number		A	ccount number				
		Fund account name (for	example, J&Q Citiz	zen ATF J&C	Family SF)				
	с	Electronic service a	ddress alias						
	-	Provide the electronic s (For example, SMSFda	ervice address (ES						
						Func	's tax file nu	mber (TFN) 862 31	7 897
8	St	atus of SMSF	Australian superan	nuation fund	ΑΥ		fund benefit s		Code
•	01	Does the fund true Governm	st deed allow acceptent's Super Co-conton of the second seco	otance of the	C Y				oode
9	W	as the fund wound u	p during the inco	ome vear?					
-		Print Y for yes	If yes, provide th	•	Day Month Ye	ar ł	lave all tax		
	Ν		which fund was v			ot	ligations be	payment en met?	
10	Ev	empt current pensio	n incomo						
10	Dic	d the fund pay retirement the income year?		ation income	stream benefits	to one or more m	embers	Y Print Y for yes or N for no.	
		o claim a tax exemption the law. Record exempt c				st the minimum be	enefit paymen	it under	
	lf	No, Go to Section B: Inco	ome						
	lf	Yes Exempt current pe							
			nsion income amou	unt A	45,	296			
		Which method did	vou use to calculate						
				e your exem					
		Segre	you use to calculate	e your exem	pt current pensi		btained? D	Print Y for yes	
		Segre	you use to calculate gated assets metho gated assets metho	e your exem	pt current pensi	on income? uarial certificate o		Print Y for yes	
		Segreg	you use to calculate gated assets metho gated assets metho ther income that wa Choosing 'No' me	e your exem od B od C X as assessab	pt current pensi	on income? uarial certificate o Print Y for yes r N for no.	s, go to Section		

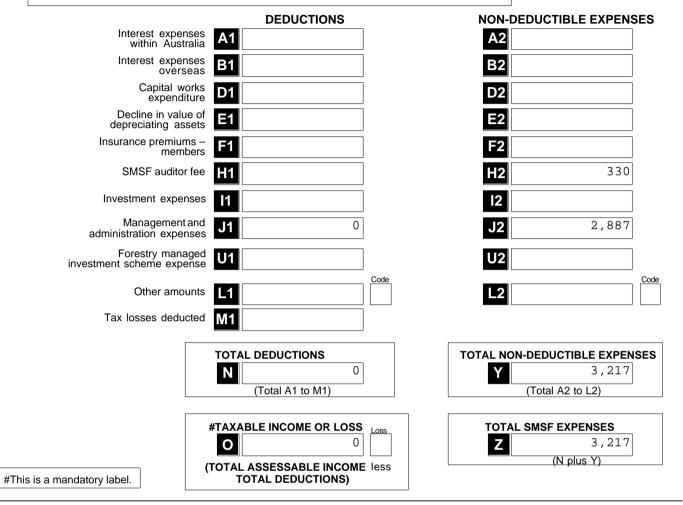
MICKLEE SUPERANNUATION FUND

ISI	F Return 2020	Ν	IICKLEE SUPERA	NNUATION FUND	TFN: 862 317 897	Page 3 of 11
ec	tion B: Incon	ne				
re	tirement phase fo	r the entire year, there v	vas no other income	SMSF were supporting superannuation that was assessable, and you have no record these at Section D: Income tax	ot realised a deferred	
1	Income	Did you have a capital (CGT) event during t Have you a	he year?	Print Y for yes \$10,000 or you the deferred not	al loss or total capital gain is elected to use the CGT relief ional gain has been realised, pital Gains Tax (CGT) schede	in 2017 and complete
		exemption or	rollover?	or N for no.		
			0	Net capital gair		
			Gross n	ent and other leasing and hiring income		
				Gross interes		
				scheme income		
	Gross fore	ign income		Net foreign income	e D	Loss
			Australian franking	credits from a New Zealand company	/ E	
				Transfers from foreign funds		Number
	[]	Gross payments where ABN not quoted		
		e employer contribution		Gross distributior from partnerships		Loss
	R1	0 le personal contribution	s	* Unfranked dividenc amoun		
	R2	0		* Franked dividenc amoun		
	plus#*No-TFN-c	quoted contributions		* Dividend franking credi		
	(an amount must	be included even if it is of liability to life	zero)	* Gross trus distributions	t M	
		company or PST		Assessable contributions (R1 plus R2 plus R3 less R6)	R	0
	[i			
		ion-arm's length incom rm's length private	e			
	compa	iny dividends		* Other income	S	Code
	plus * Net non-a	arm's length trust distribu	tions	*Assessable income due to changed tax		
				status of fund		
	U3	non-arm's length incom	3	Net non-arm's length income (subject to 45% tax rate) (U1 plus U2 plus U3)		
		entered at this label, ch ensure the correct tax	eck the	GROSS INCOMI (Sum of labels A to U)	• W	Loss
				Exempt current pension income	Y	
				TOTAL ASSESSABLE INCOM (W less Y)	V.	0

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).



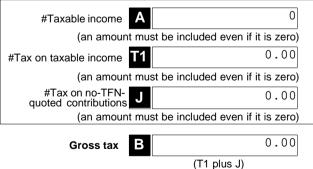
Section D: Income tax calculation statement

#Important:

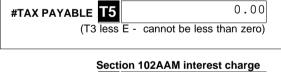
Section B label R3, Section C label O and Section D labels A,T1, J, T5 and I are mandatory. If you leave these labels blank you will have specified a zero amount

13 Calculation statement

Please refer to the Self-managed superannuation fund annual return instructions 2020 on how to complete the calculation statement.

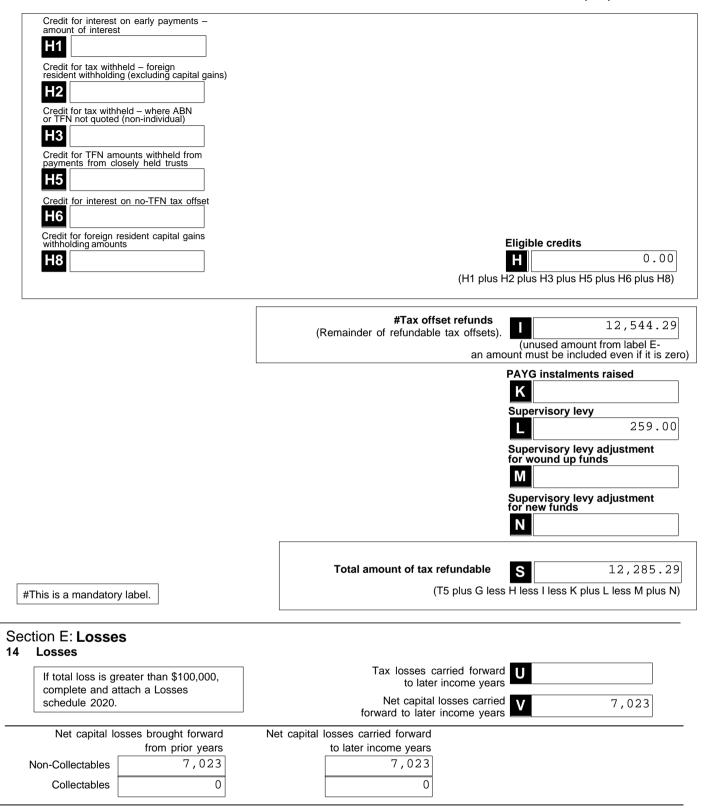






G

Fund's tax file number (TFN) 862 317 897



MICKLEE SUPERANNUATION FUND

Section F / Section G: Member Information In Section F / G report all current members in the fund at 30 June. Use Section F / G to report any former members or deceased members who held an interest in the fund at any time during the income year. See the Privacy note in the Declaration. Member Number Member'sTFN 363 811 160 1 Mrs Title Kaplan Family name Account status First given name Miriam 0 Code Other given names If deceased. 14/12/1933 Date of birth date of death 655,669.00 Contributions **OPENING ACCOUNT BALANCE** Proceeds from primary residence disposal Refer to instructions for completing these labels Η Employer contributions Receipt date Α Н Assessable foreign superannuation ABN of principal employer fund amount A1 Personal contributions Non-assessable foreign superannuation fund amount В J CGT small business retirement exemption Transfer from reserve: С assessable amount Κ CGT small business 15-year exemption amount Transfer from reserve: non-assessable amount D Personal injury election Contributions from non-complying funds П and previously non-complying funds Spouse and child contributions Т F Any other contributions (including Super Co-contributions and low Other third party contributions Income Super Contributions) G Μ TOTAL CONTRIBUTIONS 0.00 (Sum of labels A to M) Other transactions Accumulation phase account balance 90,314.00 Allocated earnings or losses L 0 0.00 **S1** Ρ Inward rollovers and transfers Retirement phase account balance - Non CDBIS Q Outward rollovers and transfers 535,135.00 **S**2 Code Lump Sum payment R1 Retirement phase account balance -CDBIS Code 30,220.00 Μ 0.00 Income stream payment R2 **S**3 535,135.00 0 TRISCount CLOSING ACCOUNT BALANCE S1 plus S2 plus S3 X1 Accumulation phase value **X2** Retirement phase value

Sensitive (when completed)

Outstanding limited recourse

borrowing arrangement amount

Υ

MICKLEE SUPERANNUATION FUND

See the Privacy note in the Declaration. Member Number Title MR Member'sTFN 413 096 382 2 Family name MOSBACH Account status
Family name MOSBACH
Account status
First given name FARRELL O Code
Other given names
Date of birth 27/04/1955 If deceased, date of death
Contributions OPENING ACCOUNT BALANCE 0.00
Refer to instructions for completing these labels Proceeds from primary residence disposal
Employer contributions Receipt date
A
ABN of principal employer Assessable foreign superannuation fund amount
A1
Personal contributions Non-assessable foreign superannuation
B fund amount
CGT small business retirement exemption
C assessable amount
CGT small business 15-year K exemption amount Transfer from reserve:
D non-assessable amount
Personal injury election
E Contributions from non-complying funds and previously non-complying funds
Spouse and child contributions T
E Any other contributions (including Super Co-contributions and low
Other third party contributions
G
TOTAL CONTRIBUTIONS N 0.00
(Sum of labels A to M)
Other transactions
Accumulation phase account balance Allocated earnings or losses 0 0.00
Retirement phase account balance
- Non CDBIS Outward rollovers and transfers
-CDBIS
S3 0.00 Income stream payment R2
0 TRIS Count CLOSING ACCOUNT BALANCE 0.00
S1 plus S2 plus S3
Accumulation phase value
Retirement phase value X2
Outstanding limited recourse borrowing arrangement amount

	on H: Assets and liabilities ASSETS		
15a A	Australian managed investments	Listed trusts	Α
		Unlisted trusts	В
		Insurance policy	С
		Other managed investments	D
15b A	Australian direct investments	Cash and term deposits	E 73,929
		Debt securities	F
Li	imited recourse borrowing arrangements Australian residential real property	Loans	G
	J1	Listed shares	H 448,661
	Australian non-residential real property	Unlisted shares	
	Overseas real property J3	Limited recourse borrowing arrangements	J 0
	Australian shares	Non-residential real property	Κ
	J4 Overseas shares	Residential real property	
	J5	Collectables and personal use assets	Μ
	Other J6	Other assets	0 12,545
	Property count		
15c (Other investments	Crypto-Currency	Ν
15d C	Overseas direct investments	Overseas shares	Р
		Overseas non-residential real property	Q
		Overseas residential real property	R
		Overseas managed investments	S
		Other overseas assets	Т
		TOTAL AUSTRALIAN AND OVERSEAS ASSETS (Sum of labels A to T)	U 535,135
15e l	n-house assets		
		have a loan to, lease to or investment in, ated parties (known as in-house assets) at the end of the income year	
15f L	imited recourse borrowing arrangements	S	
		If the fund had an LRBA were the LRBA borrowings from a licensed financial institution?	Print Y for yes or N for no.
		Did the members or related parties of the fund use personal guarantees or other security for the LRBA?	Print Y for yes or N for no.

16 LIABILITIES

Borrowings for limited recourse borrowing arrangements		
V1		
Permissible temporary borrowings		
Other borrowings	Borrowings	V
(total of all	Total member closing account balances CLOSING ACCOUNT BALANCEs from Sections F and G)	W 535,135
	Reserve accounts	X
	Other liabilities	Y
	TOTAL LIABILITIES	Z 535,135
Section I: Taxation of financial arra	-	
	Total TOFA gains	Н

Section J: Other information Family trust election status

If the trust or fund has made, or is making, a family trust election, write the four-digit income year specified of the election (for example, for the 2019–20 income year, write 2020).
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 2020.
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 2020 for each election
If revoking an interposed entity election, print R, and complete

and attach the Interposed entity election or revocation 2020.

Total TOFA losses

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

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

		-					Day Month	Year
					Date	e 18/03/2021		
Preferred trustee or director con	tact details	<u>.</u>						
	Г	Mr]				
F		Farrell						
Family name		Mosbach						
First given name		Mospacii						
Other given names								
	Г	Area code	Number]			
Pho	nenumber	08	92746637					
Ema	ail address							
Non-individual trustee name (if applicable)		Micklee En	terprise	s Pty Lt	d			
ABN of non-individual trustee]			
					J			
		Time teken te		d complete	this oppus	l roturn [Hrs	
		Time taken to	prepare and		this annua			
The Commissioner of Taxation, a								
which you provide on this annual	return to ma	aintain the inte	grity of the re	egister. For	further info	ormation,	refer to the	instructions
TAX AGENT'S DECLARATION: I. D BAKER & ASSOCIATE	S PTY L	תיד						
declare that the Self-managed sur			ırn 2020 has h		ed in accord	ance with	information p	rovided
by the trustees, that the trustees h	ave given me	e a declaration s						
the trustees have authorised me to	o lodge this a	innual return.					Day Month `	Year
Tax agent's signature						Date	18/03/20)21
Tax agent's contact details	Mac							
Title	Mr							_
Familyname	Mosbach							_
First given name	Farrell							
Other given names								
Tax agent's practice	D BAKER & ASSOCIATES PTY LTD							
	Area code	Number		1				
Tax agent's phone number	08	9274663	7					
Tax agent number	7408100	9	7	Reference	number K	AP03		