# Self-managed superannuation fund annual return

**2013** 

#### 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 2013* (NAT 71287).

The Self-managed superannuation fund annual return instructions 2013 (NAT 71606) (the instructions) can assist you to complete this annual return.

Section A: Fund information

#### TO COMPLETE THIS ANNUAL RETURN

To assist processing, write the fund's

- Print clearly, using a BLACK pen only.
- Use BLOCK LETTERS.
- Print X in ALL applicable boxes.

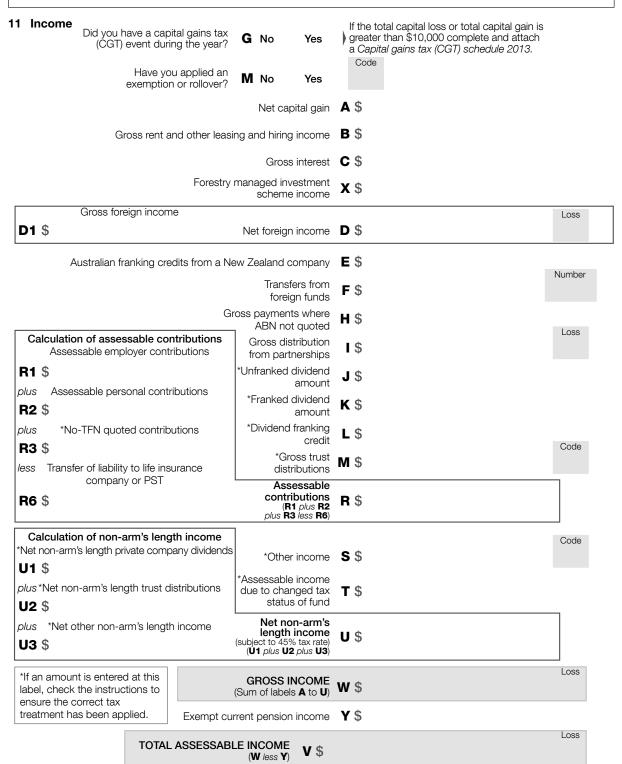
1	Tax file number (TFN)		TFN at the top of pages 3	3, 5 and 7.	
	The Tax Office is authorised by law to reques quoting it could increase the chance of delay or e	st your TFN. You ai	re not obliged to quote you your annual return.	r TFN but not	-
2	Name of self-managed superannuation f	iund (SMSF)			
3	Australian business number (ABN) (if appli	icable)			
1	Current postal address				
ŝub≀	urb/town			State/territory	Postcode
5	Annual return status Is this an amendment to the SMSF's 2013 annual	I return? No	Yes		
<b>3</b> Aud	SMSF auditor litor's name				
itle: am	: Mr Mrs Miss Ms Other ily name				
irst	given name	Other given names			
SMS	SF Auditor Number Professional body Code	Membership nur	nber A	uditor's phone nu	mber
Pos	stal address				
Subi	urb/town			State/territory	Postcode
Date	e audit was completed <b>A</b> Day Month	Year			
Nas	s Part B of the audit report qualified? <b>B</b> No	Yes			
	e audit report was qualified, have the reported npliance issues been rectified?	C No	Yes		

#### Electronic funds transfer (EFT) Provide your fund's financial institution details. Write the BSB number, fund's account number and account name below. (See relevant instructions.) We do not issue refunds to a trustee's personal account. Fund account number BSB number (must be six digits) Fund account name (for example, J&Q Citizen ATF J&Q Family SF) Status of SMSF Fund benefit structure Australian superannuation fund A No Yes В Code Does the fund trust deed allow acceptance of C No Yes the Government's Super Co-contribution and Low Income Super Contribution? Was the fund wound up during the income year? Have all tax lodgment Month and payment obligations been met? If yes, provide the date on No Yes which the fund was wound up 10 Exempt current pension income Did the fund pay an income stream 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 Go to Section B: Income. No 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. Go to Section C: Deductions and non-deductible expenses. No (Do not complete Section B: Income.)

f you are entitled to claim any tax offsets, you can list these at Section D: Income tax calculation statement.

# Section B: Income

Do not complete this section if your fund was in full pension phase for the entire year and there was no other income that was assessable. If you are entitled to claim any tax offsets, you can record these at Section D: Income tax calculation statement.



Place your attachments here.

# 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).

	DEDUCTIONS		NON-DEDUCTIBLE EXPENSES	
Interest expenses within Australia	A1 \$		A2 \$	
Interest expenses overseas	B1 \$		<b>B2</b> \$	
Capital works expenditure	D1 \$		D2 \$	
Decline in value of depreciating assets	E1 \$		<b>E2</b> \$	
Insurance premiums – members	F1 \$		F2 \$	
Death benefit increase	<b>G1</b> \$			
SMSF auditor fee	H1 \$		H2 \$	
Investment expenses	I1 \$		<b>I2</b> \$	
Management and administration expenses	J1 \$		<b>J2</b> \$	
Forestry managed investment scheme expense	U1 \$	Code	<b>U2</b> \$	Code
Other amounts	L1 \$		L2 \$	
Tax losses deducted	M1 \$			
	TOTAL DEDUCTIONS		TOTAL NON-DEDUCTIBLE EXPENSES	
	N \$		<b>Y</b> \$	
	(Total A1 to M1)		(Total <b>A2</b> to <b>L2</b> )	
	TAXABLE INCOME OR LOSS	Loss	TOTAL SMSF EXPENSES	]
	<b>o</b> \$	_000	<b>z</b> \$	
	(TOTAL ASSESSABLE INCOME less TOTAL DEDUCTIONS)		(N plus Y)	

# Section D: Income tax calculation statement

### 13 Calculation statement

Please refer to the Self-managed superannuation fund annual return instructions 2013 on how to complete the calculation statement.

Taxable income A\$

Tax on taxable **T1** \$ income

Tax on no-TFN J \$ quoted contributions

Gross tax B \$

Foreign income tax offset

(T1 plus J)

C1\$

Rebates and tax offsets

C2\$

Non-refundable non-carry forward tax offsets

**C**\$

**SUBTOTAL** 

Refundable tax offsets

(C1 plus C2)

Complying fund's franking credits tax offset

**E1**\$

No-TFN tax offset

T2 \$

(B less C - cannot be less than zero)

**E2**\$

National rental affordability scheme tax offset

E\$

**E3**\$

(E1 plus E2 plus E3 plus other refundable tax offset amounts)

TAX PAYABLE **T5** \$

(T2 less E - cannot be less than zero)

Credit for interest on early payments amount of interest

H1\$

Credit for tax withheld - foreign resident withholding

**H2**\$

Credit for tax withheld - where ABN or TFN not quoted (non-individual)

**H3**\$

Credit for TFN amounts withheld from payments from closely held trusts

H5\$

Credit for interest on no-TFN tax offset

**H6**\$

Section 102AAM interest charge

**G**\$

Eligible credits

**H**\$

(H1 plus H2 plus H3 plus H5 plus H6)

Remainder of refundable tax offsets

1\$

(unused amount from label E)

PAYG instalments raised

**K**\$

Supervisory levy

L\$

Supervisory levy adjustment for wound up funds

**M** \$

# AMOUNT DUE OR REFUNDABLE \$\$

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)

# Section E: Losses

If total loss is greater than \$100,000, or there is a foreign loss, complete and attach a Losses schedule 2013.

Tax losses carried forward to later income years

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

# Section F: Member information

In Section F report all current members in the fund at 30 June. Use Section G to report any former members or deceased members who held an interest in the fund at any time during the income year. **MEMBER 1** Title: Mr Miss Ms Other Family name First given name Other given names Month Year Member's TFN Date of birth Contributions OPENING ACCOUNT BALANCE \$ Refer to instructions for completing these Employer contributions A\$ labels. For example, include contributions ABN of principal employer A1 reported to you on a Rollover benefits statement Personal contributions **B** \$ (RBS) (NAT 70944). CGT small business retirement exemption CGT small business 15-year exemption amount **D** \$ Personal injury election **E**\$ Spouse and child contributions Other third party contributions **G** \$ Assessable foreign superannuation fund amount 1\$ Non-assessable foreign superannuation fund amount Transfer from reserve: assessable amount K \$ L\$ Transfer from reserve: non-assessable amount Contributions from non-complying funds **T**\$ and previously non-complying funds Any other contributions (including Super Co-contributions м \$ and Low Income Super Contributions) TOTAL CONTRIBUTIONS N \$ Loss Other transactions Allocated earnings or losses **O** \$ Loss Inward amounts less any rolled in contributions reported at **A** – **M P**\$ Outward amounts less any rolled out contributions at item 15K on RBS Code Lump Sum payment R1 \$ Code Income stream payment R2 \$ **CLOSING ACCOUNT BALANCE** S\$

# Section H: Assets and liabilities 15 ASSETS Listed trusts A \$ 15a Australian managed investments Unlisted trusts **B** \$ Insurance policy C\$ Other managed investments **D** \$ 15b Australian direct investments Cash and term deposits **E**\$ 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 \$ Australian shares borrowing arrangements **J4**\$ Non-residential real property **K** \$ Overseas shares Residential **J5**\$ real property Collectables and personal use assets **M** \$ Other **J6**\$ Other assets **O** \$ 15c Overseas direct investments Overseas shares **P** \$ Overseas non-residential real property Q \$ Overseas residential real property R\$ Overseas managed investments \$\$ Other overseas assets **T** \$ TOTAL AUSTRALIAN AND OVERSEAS ASSETS U\$ (Sum of labels A to T) 15d In-house assets Did the fund have a loan to, lease to or investment in, related parties (known \$ as in-house assets) at the end of the

income year?

16 LIABILITIES Borrowings V \$

Total member closing account balances w

(total of all CLOSING ACCOUNT BALANCEs from Sections F and G)

Reserve accounts X \$

Other liabilities Y \$

TOTAL LIABILITIES Z \$

# Section I: Taxation of financial arrangements

### 17 Taxation of financial arrangements (TOFA)

Did you make a gain, loss or transitional balancing adjustment from a financial arrangement subject to the TOFA rules?

Total TOFA gains **H** \$

Total TOFA losses | \$

TOFA transitional balancing adjustment **J** \$

Loss

# 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 2012–13 income year, write **2013**).

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 2013.* 

#### 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 2013* for each election.

If revoking an interposed entity election, print **R**, and complete and attach the *Interposed entity election or revocation 2013*.

Section	<b>I</b> /·		laratia	-
Seciion	N.	Dec	iaratioi	15



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 are in doubt about any aspect of the annual return, place all the facts before the ATO.

# TRUSTEE'S OR DIRECTOR'S DECLARATION:

s.

I declare that current trustee I have received the audit rep	ort and I ar	m aware of	any matter	s raised. I d	declare that th	e informatio	n on tl	his a	nnual r	eturn,	including
any attached schedules and nominated bank account (if			ation is true	and correc	ct. I also autho	orise the AT	O to m	ake a	any tax	retun	ds to the
Authorised trustee's, directo			gnature								
	-		-				Б.		Month		V.
						Date	Day	/	Month	/	Year
Duefermed two stees an di-			.:			Date		/		/	
Preferred trustee or di			alis:								
Title: Mr Mrs Miss Family name	Ms	Other									
First given name			Other	given names							
Phone number Email address											
Non-individual trustee name	e (if applicab	ole)									
ABN of non-individual truste	ee										
						Hrs					
	Time take	n to prepar	e and com	plete this a	nnual return						
The Commissioner of which you provide on this											
TAX AGENT'S DECLAF I declare that the Self-mana, by the trustees, that the trus the trustees have authorised	ged superar stees have g	jiven me a d	declaration								
Tax agent's signature											
						Date	Day	/	Month	/	Year
Toy agent's contact de	toilo					Date		/		/	
<b>Tax agent's contact de</b> Title: Mr Mrs Miss Family name		Other									
First given name			Other	given names							
Tax agent's practice											
Tax agent's phone number			Reference	e number			Tax	x age	ent nur	nber	
Postal address for ann	nual returns	: Australiar	n Taxation	Office, GF	O Box 9845,	IN YOUR (	CAPITA	AL C	ITY		

#### **PART A**

#### **Electronic Lodgement Declaration (Form P, T, C, F, SMSF or EX)**

This declaration is to be completed where the tax return is to be lodged via the Tax Office's Electronic Lodgment Service (ELS). 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**

Your tax file number

It is not an offence not to quote your (or if applicable, the partner's or beneficiary's) tax file number (TFN). However, you cannot lodge your tax return electronically if you do not quote your TFN. The Tax Office is authorised by the *Income Tax Assessment Act 1936* and the *Income Tax Assessment Act 1997* to ask for information on this tax return.

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 Partnership, Trust, Fund or Entity Year

I authorise my tax agent to electronically transmit this tax return via the Electronic Lodgment Service.

#### **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 is true and correct; and	on of this tax return, including any applicable s	schedules	
•	the agent is authorised to lodge this tax return.			
Signature of Pa Director or Pub	artner, Trustee, blic Officer	Date	I	1

#### **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 the electronic lodgment service ELS.

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 Ref No** 

Account name

I authorise the refund to be deposited directly to the specified account						
Signature		Date	1	I		

# **PART D**

# Tax Agent's Certificate (shared facilities only)

### 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	1	1			
Contact name	7`]YbhRefYfYbW	7`]YbhRefYfYbWY				
Agent's Phone No"	Agentfig RefYfYbWY N	No"				