2015

Self-managed superannuation fund annual return

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 2015 (NAT 71287).

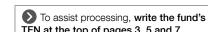
The Self-managed superannuation fund annual return instructions 2015 (NAT 71606) (the instructions) can assist you to complete this annual return.

Section A: Fund information

Tax file number (TFN) 1

TO COMPLETE THIS ANNUAL RETURN Print clearly, using a BLACK pen only.

- Use BLOCK LETTERS.
- Place $|\mathcal{X}|$ in ALL applicable boxes.



TFN at the top of pages 3, 5 and 7.

Ithe Tax Office 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.

2 Name of self-managed superannuation fund (SMSF)

Australian business number (ABN) (if applicable) 3

4 **Current postal address**

Sub	urb/town				State/territory	Postcode	
5	Annual return status Is this an amendment to the SMSF's 2015 return?	A	No	Yes			
	Is this the first required return for a newly registered SMSF?	В	No	Yes			
6 Auc	SMSF auditor litor's name						
Title Fam	: Mr Mrs Miss Ms Other ily name						
First	given name Other giver	n name	s				
SM	SMSF Auditor Number Auditor's phone number						
Pos	tal address						
Sub	urb/town				State/territory	Postcode	
Dat	Day Month Year						
Was	Was Part B of the audit report qualified? B No Yes						
	f the audit report was qualified, have the reported compliance issues been rectified?						

7	Electronic funds transfer (EFT) We need your self-managed super fund's financial institution details to pay any super payments and tax refunds owing to you.											
	A											
		Fund BSB number (must be six digits)Fund account numberFund account name (for example, J&Q Citizen ATF J&Q Family SF)										
	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.										
8	Sta	atus of SMSF Australian superannuation fund A No Yes Fund benefit structure B Code Does the fund trust deed allow acceptance of the Government's Super Co-contribution and Low Income Super Contribution? C No Yes										
9	Wa No	As the fund wound up during the income year? Yes) If yes, provide the date on //// / / Have all tax lodgment and payment obligations been met? No Yes										
10	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											
	n No	e law. Record exempt current pension income at Label A.										
	Yes											
		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?											
		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 lese 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.

		-			
	ave a capital gains tax event during the year?	G No	Yes	If the total capital loss or total capital gain is greater than \$10,000 complete and attach a <i>Capital gains tax (CGT) schedule 2015.</i> Code	
e	Have you applied an exemption or rollover?	M No	Yes		
		Net ca	apital gain	A \$	
Gro	oss rent and other leasi	ng and hiring	g income	B \$	
		Gros	s interest	C \$	
	Forestry	managed in schem	vestment e income	X \$	
Gross fore	ign income				Loss
D1 \$		Net foreig	n income	D \$	
Australian fra	nking credits from a Ne	ew Zealand o	company	E \$	Number
			sfers from ign funds	F \$	Number
	Gr	ross paymer ABN no	nts where ot quoted	Н\$	1 000
Calculation of asses Assessable emplo	sable contributions		stribution tnerships	I \$	Loss
R1 \$		*Unfranked	l dividend amount	J \$	
plus Assessable perso R2 \$	onal contributions	*Franked	l dividend amount	К\$	
plus [#] *No-TFN-quote	ed contributions	*Dividenc		L \$	
R3 \$ (an amount must be	included even if it is zero)		ross trust tributions	M \$	Code
less Transfer of liability					_
company or PST		conti (F	sessable ributions R1 plus R2 R3 less R6)	R \$	
Calculation of non-a	-]	- /		Code
*Net non-arm's length priv U1 \$	ate company dividends	*Othe	er income	S \$	
plus *Net non-arm's leng	th trust distributions	*Assessable due to cha statu		т\$	
<i>plus</i> *Net other non-an	0		on-arm's n income % tax rate) 2 plus U3)	U \$	
"This is a mandatory label.		GROSS (Sum of labe	INCOME els A to U)	W \$	Loss
*If an amount is entered at this label,	Exempt cu	rrent pensio	n income	Y \$	
check the instructions to ensure the correct tax treatment has	TOTAL ASSESSABI	LE INCOME (W less Y)			Loss

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 \$	B2 \$	
Capital works expenditure	D1 \$	D2 \$	
Decline in value of depreciating assets	E1 \$	E2\$	
Insurance premiums – members	F1 \$	F2 \$	
Death benefit increase	G1 \$		
SMSF auditor fee	H1 \$	H2 \$	
Investment expenses	l1 \$	12 \$	
Management and dministration expenses	J1 \$	J2 \$	
Forestry managed investment scheme expense	U1 \$	U2 \$ Code	Code
Other amounts	L1 \$	L2 \$	
Tax losses deducted	M1 \$		
	TOTAL DEDUCTIONS	TOTAL NON-DEDUCTIBLE EXPENSES	
	N \$	Y \$	
	(Total A1 to M1)	(Total A2 to L2)	

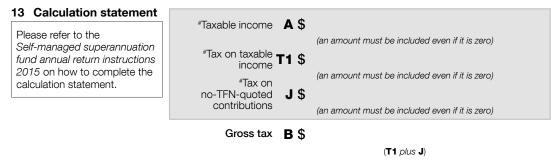
	IN φ		ΤΦ	
	(Total A1 to M1)		(Total A2 to L2)	
	*TAXABLE INCOME OR LOSS	Loss	TOTAL SMSF EXPENSES	
	O \$		Z \$	
#This is a mandatory			(N plus Y)	
label.	TOTAL DEDUCTIONS			

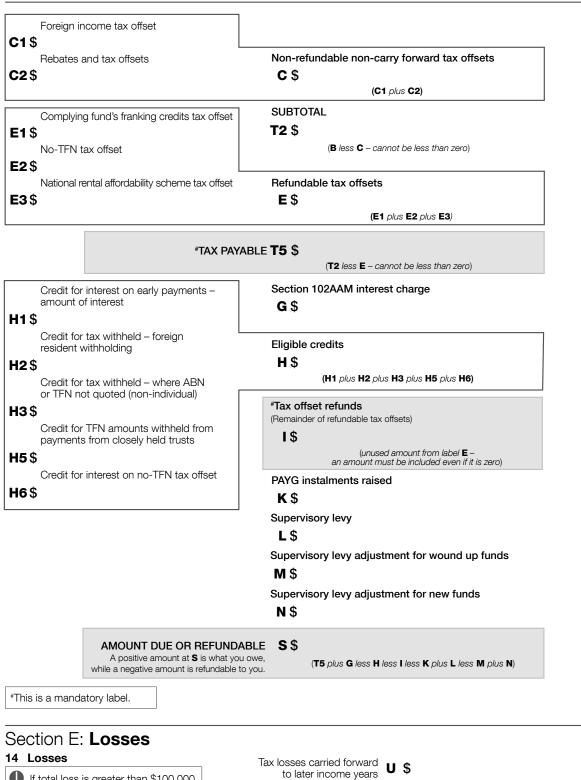
Section D: Income tax calculation statement

#Important:

label.

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.





If total loss is greater than \$100,000, complete and attach a Losses schedule 2015.

- 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 Mrs Family name	Miss	Ms	Other								
First given name				Other giv	ven na	mes					
Member's TFN See the Privacy note in	n the De	eclaratior	n.				Date of birth	Day	Month	Ye	ear
Contributions										7	
Refer to instruction	ons			JNT BALANCE	: \$						
for completing these labels.			Employe	er contribution	s 🖡	\$					
		ABN o	of principal e	employer A1	1						
			Persona	al contribution	s	B \$					
(CGT sn	nall busir	ness retirem	nent exemptio	n C	;\$					
CGT small business 15-year exemption amount					nt C	\$					
			Persona	al injury electio	n E	\$					
		Spou	ise and chil	ld contribution	s	\$					
		Othe	er third part	ty contribution	s G	\$					
Assess	able fo	reign sup	perannuatic	on fund amour	nt	I \$					
Non-assess	able fo	reign sup	oerannuatic	on fund amour	nt 🚽	I \$					
-	Transfe	r from re	serve: asse	essable amour	nt K	ζ\$					
Trans	sfer fror	e: non-asse	essable amour	nt L	\$						
				omplying fund		5\$					
and previously non-complying funds Any other contributions (including Super Co-contributions and Low Income Super Contributions)					SN	I \$					
		т	TOTAL COM	NTRIBUTION	s N	\$					
Other transactions		Allocate	ed earnings	s or losses ()\$					Loss	
		Inward r	ollovers and	d transfers	> \$						
	\cap	utward r	ollovers and	d transfers) \$						
		n payment R1						Code			
			·							Code	
			me stream	n payment R2	2 ⊅					7	
	CLO	SING A	CCOUNT E	BALANCE	S \$						

	ction H: Assets an Assets	d liabilitie	S			
15a	15a Australian managed investments		Listed trusts	A	\$	
			Unlisted trusts	В	\$	
			Insurance policy	С	\$	
		Other	managed investments	D	\$	
15b	Australian direct investments		ash and term deposits	F	\$	
100	Limited recourse borrowing					
	Australian residential real prop	-	Debt securities	F	\$	
	J1 \$		Loans	G	\$	
	Australian non-residential real	property	Listed shares	н	\$	
	J2 \$		Unlisted shares		\$	
	Overseas real property			<u> </u>	Ψ	
	J3 \$ Australian shares	hr	Limited recourse prrowing arrangements	J	\$	
	J4 \$		Non-residential			
	Overseas shares		real property	K	\$	
	J5 \$		Residential real property	L	\$	
	Other		Collectables and personal use assets	м	\$	
	J6 \$			_		
			Other assets	0	Φ	
15c	Overseas direct investments		Overseas shares	Ρ	\$	
		Overseas non-r	residential real property	Q	\$	
		residential real property	R	\$		
		S	\$			
		т	\$			
	TOTAL AU	U	\$			

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?

Loss

16	LIABILITIES	Borrowings	v	\$
	Total member clo (total of all CLOSING ACCOUNT BALANCE s fi	sing account balances from Sections F and G)	w	\$
		Reserve accounts	X	\$
		Other liabilities	Y	\$
		TOTAL LIABILITIES	Z	\$

Section I: Taxation of financial arrangements (TOFA) 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? G No Yes Total TOFA gains H \$ Total TOFA losses I \$ TOFA transitional balancing adjustment J \$

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 2014–15 income year, write **2015**).

> 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 2015.* **B**

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 2015* for each election.

If revoking an interposed entity election, print **R**, and complete and attach the *Interposed entity election or revocation 2015*.

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 Date	Month `	Year
Preferred trustee or director	contact details:			
Title: Mr Mrs Miss M Family name	is Other			
First given name	Other given names			
Phone number Email address				
Non-individual trustee name (if app	licable)			
ABN of non-individual trustee				
Time	taken to prepare and complete this annual return	Hrs		
The Commissioner of Taxatio you provide on this annual return	n, as Registrar of the Australian Business Register, ma to maintain the integrity of the register. For further infor	ay use the ABN mation, refer to	and business details the instructions.	3 which
	perannuation fund annual return 2015 has been prepar ave given me a declaration stating that the information			
		Day Date	Month v	Year
Tax agent's contact details				
Title: Mr Mrs Miss M Family name	s Other			
First given name	Other given names			
Tax agent's practice				
Tax agent's phone number	Reference number	Ta	x agent number	
Postal address for annual ret	urns: Australian Taxation Office, GPO Box 9845, IN	YOUR CAPITA	AL CITY	
Page 16	Soncitive (when completed)			

Page 16

PART A

Electronic Lodgment Declaration (Form DžHz: , SMSF cf 9L)

H\]g`XYWUFUH]cb`]g`hc`VY`Wcad`YhYX`k\YfY`h\Y`HU`fYhifb`]g`hc`VY``cX[YX`j`]U'h\Y`HU`CZZWWfbj'9`YW#fcb]W@cX[aYbhGYfj]WWff9@GL" =h]g`h\YfYgdcbg]V]`]hmcZh\Y`HUIdUmYf`hc`fYHU]b`h]g`XYWUFUH]cb`Zcf`UdYf]cX`cZZ]jY`mYUfg`UZhYf`h\Y`XYWUFUH]cb`]g`aUXYždYbUH]Yg`aUm Udd`mZcf`ZU]`ifY`hc`Xc`gc"

Privacy

V@ Á025/ÚÁ≊ Ásĕ ơ@;¦ãr^åÅaî^Ás@ Ávæçææði}}Á02ā{ājã dææði}Á0386A≂JÍHÁţÁ^``^•o4s@ Áj¦[çããį}Áj-ÁsæçÁãr^Á,`{à^\•Á0,00 • DBÁV@ Á025/UÁjä|Á•^Ás@ ÁÁ VØD•ÁţÁāa^}cã÷Áræ&@ájæd;}^!Á;¦Áa^}cãčÆjjÁj`!Á^&[ásÆðiAg¥jÁ];ÁsæjÁj[o4sajÁj~A}&^A}&^Aj[o4stjÁj:[çãa^Ás@ Á/ØD•DBÁV@ Á025/UÁjä|Á*o^Ás@ ÁÁ [[å*^Á[`¦Ásæ¢Á^č¦}Ár|^&d[}ã&ædj^ÁsÁ[`Ás[Á][cá`[cŕÁ[`¦Á/ØD=DBÁWA á

Værææ‡i}Áæ;Áæčc@;¦ãr^•Ác@.ÁDE/UÁ;Á&[||^&cA\$j+{;{ææ‡i}Áæàå&[[•^ÁæA‡iA;c@;!A*[ç^!;{ ^}oÅe* ^}&&?+&ä}*Á;A;^!•[}æ44j+{;{ææ‡i}Áæà[čơ¾A c@:Aj^!•[}Áæčc@;!ãr^åÁq[Á:ā]Áx@/Áa^&]æææ‡i}ĚÁk2[;{Aj+{;{ææ‡i}Áæà[čơÅ;láp;æ&cA*[Áq[Áæq[È[çÈæĕĐ];ãp;æ&cÁ¾A Á

H\Y`5 i qhfU`]Ub`6 i q]bYqq`FY[]qhYfÄ

V@ ÁÔ[{{ã•ā}}^¦Á,-Á/æçææā}ÈÉee ÁÜ^*ã dælÁ;-Ás@ ÁCE • dælāae) ÁÓ*•ā;^• AÜ^*ã c°¦ÉÃ;æĉ Á • ^ Ás@ ÁOEÓ⊳ Áse) å Ási*•ā;^• eā;^• • Ás^ æaāer Á;@a&@A[*/#A]¦[çãa ^Á;}Ás@a ÁææcA^č ¦}ÁtjÁ;æājæaajÁs@ Ásj c* ¦ãc Á;-Ás@ Á^*ã c°¦ĚÁMÁ

Ú|^æe^Á^-^¦Áq[Ás@-Á,¦ãçæ&îÁræe^{^}o4(;}Ás@-ÁCE•dæ¢äae)ÁÓ`•āj^••ÁÜ^*ãrcº¦ÁQCEÓÜDÁ,^à•ãrÁÇ,, Èæà¦È[çÈeĕDÁq[¦Á`¦c@:¦Áaj-{[¦{æeāq}}ÁÁA E¥asA{`dāj^•A,{`¦Áaq[{{ãq}^>cA{`iAsac*`æàã}*Á[`¦Ás^cæa‡eÈÁÁA

Á

Á

9`YWfcb]WZIbXg'lfUbgZ/f'!'X]fYWhXYV]hÁ

Y@\^Á[[×]Á@æç^Ă^[×]^{*}• c^{*}å Ása) ÁÒZV/Åsā^ŠoÁs^àãó4[{^Á;-Á[[×]|/Ás^cæa‡+Á,ā|/Ás^A;4][çãa^å Áq[Á[[×]|Áā],æ) 8ãæ‡Áş) • cãč cā[} Ása) å Ás@ Á/æçÁU~a32^©ÁÁ •][}•[|Ásaa) \Á{[Áæ34]āzæ*Ás@Ájæê{{^}cň_*A[[×]|Ázæ¢æaã]} Áãæàājãć Á4[{ Á[[×]|Á]{ 3] æ*^{*}å Ásæ84[[×]] cÈ

Tax File NumberName of Partnership, Trust, Fund or Entity

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 Væ¢ÁU~æ∧È The tax law provides heavy penalties for false or misleading statements [n tax returns.

Declaration: I declare that:

↓ the agent is authorised to |[å* ^Ás@á Ásæ¢Á^č ¦} È

Signature of Partner, TrusteeÊ[¦ Öã^&{ ¦	Date	/	1	

PART 6

9 @97 HFCB=7 ': I B8 G'HF5 BG: 9 F '7 CBG9 BH

H\]g`XYWUFUH]cb`]g`hc`VY`Wcad`YhYX`k\Yb`Ub`Y`YWFfcb]WZibXg`lfUbgZYf`f9:HL`cZUfYZibX`]g`fYeiYghYX`UbX`h\Y`HUI`fYhifb`]g`VY]b[` `cX[YX`h\fci[\`h\Y`YWFfcb]W`cX[aYbhgYfj]VW`f9@GL"

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.

=a dcftLbh[•] Care should be taken when completing EFT details as the payment of any refund will be made to the account specified.

5 [YbhfgˈfYZYfYbWY/bia VYf

5 WWci bhname

Qásě c@[¦ãr^Ás@^Á^~`}åÁş[Ásà^Ås^][•ãc^åÁsåã^&q^Áş[Ás@A^]^&ãã?aÁsa&&[`}c

Signature

1

Date

Year

/

PART 8

Tax Agent's Certificate (ghared facilit]Yg only)

I declare that.

- I have prepared this tax return in accordance with the information supplied by the] add ^{Ext`• c^ Ext`* c^

#ŹWabeę Ásečo@;¦ãr^å/\$a^Ás@∘Ájasto;^¦Ékst`∙o?^É£\$iã^&o[;¦Áj¦Áj`à 38vÁj~a8v^¦Ág[Á[å*^Ás@árÁsæ¢Á^č¦}ÉBáj& ĭå3j*Ásej^Áse]] 38aaà ^Át&@°åĭ ^•È			
Agent's signature	Date / /		
Contact name	7`]YbhRefYfYbW¥		
5 [YbhfógːD\cbYːBiaVYf	5 [Ybhfng FYZYfYbWY Bia VYf		