Self-managed superannuation fund annual return

2014

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 2014 (NAT 71287).

The Self-managed superannuation fund annual return instructions 2014 (NAT 71606) (the instructions) can assist you to complete this annual return.

TO COMPLETE THIS ANNUAL RETURN

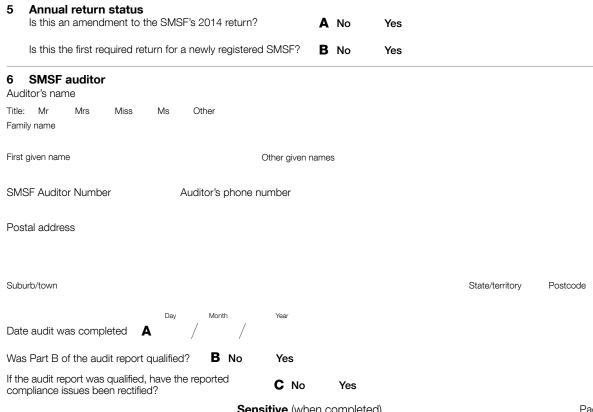
- Print clearly, using a BLACK pen only.
- Use BLOCK LETTERS.
- Place | X | in ALL applicable boxes.

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2

Name of self-managed superannuation fund (SMSF)		
The Tax Office is authorised by law to request your TFN. You are quoting it could increase the chance of delay or error in processing	re not obliged to quote your TFN but not your annual return. See the Privacy note in th	e Declaration.
Tax file number (TFN)	To assist processing, write the fund's TFN at the top of pages 3, 5 and 7.	

Australian business number (ABN) (if applicable) **Current postal address** Suburb/town Postcode State/territory **Annual return status** Is this an amendment to the SMSF's 2014 return? A No Yes Is this the first required return for a newly registered SMSF? **B** No SMSF auditor



Electronic funds transfer (EFT)

We need your fund's financial institution details to pay any refund owing to you, even if you have provided them to us before. Write the fund's BSB number, fund's account number and fund's account name below. We do not issue refunds to a trustee's personal account. (See relevant instructions.)

Fund BSB number (must be six digits)

Fund account number

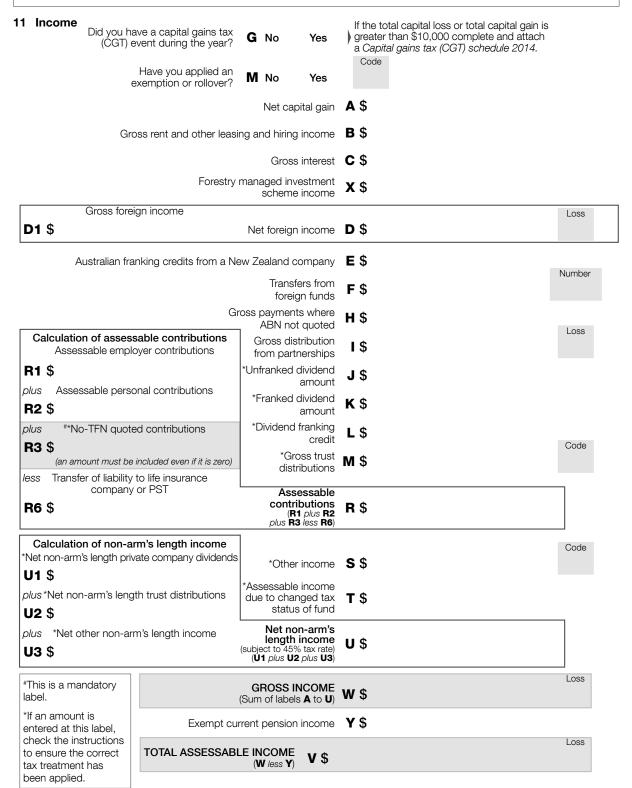
Fund account name (for example, J&Q Citizen ATF J&Q Family SF)

8	Statu	s of SM	SF	Australia	an superannu	ation fun	nd A	No	Yes		Fund be	nefit struct	ture B	Cod
				nment's Sup	ed allow acce per Co-contrib ne Super Cor	oution an	id C	No	Yes					
9	Was	the fund	l wou	nd up duri	ng the inco	me yea								
	No	Yes) If you	es, provide thich the fund	ne date on was wound up	Day O	/ M	onth /	Year	\ \	Have all tax and obligations l	d payment	No	Yes
10	Exem	pt curr	ent pe	ension inc	ome									
	Did the	e fund pa	y an ind	come strean	n to one or m	ore mem	nbers i	n the in	come year'	?				
	_			•	current pens pension incon			u must	pay at leas	t the i	minimum be	enefit paym	nent und	er
	No) Go to	Sectio	n B: Income	ı.									
	Yes) Exem	pt curre	ent pension	income amou	unt A \$	6							
		Which	n metho	od did you u	se to calculat	e your ex	xempt	current	pension in	come	?			
				Segregated	l assets meth	od B								
			Uı	nsegregated	l assets meth	od C) W	as an a	ctuarial cer	tificate	e obtained?	D Yes		
	Did the	e fund ha	ve any	other incom	e that was as	ssessable	∋?							
	E Ye	s)G	o to Se	ection B: Inco	ome.									
	No) G	hoosing o to Se	g 'No' mean ection C: Dec	s that you do ductions and	not have non-ded	e any a luctible	assessa e expen	ble income ses. (Do no	e, inclu ot con	uding no-TF nplete Secti	N quoted on B: Inco	contribut me.)	ions.

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 \$		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	I1 \$		12 \$	
Management and administration expenses	J1 \$		J2 \$	
Forestry managed investment scheme expense	U1 \$	Code	U2 \$	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)	
	*TAXABLE INCOME OR LOSS	Loss	TOTAL SMSF EXPENSES	
	O \$		Z \$	
	(TOTAL ASSESSABLE INCOME less TOTAL DEDUCTIONS)		(N plus Y)	

*This is a mandatory label.

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.

13 Calculation statement

Please refer to the Self-managed superannuation fund annual return instructions 2014 on how to complete the calculation statement.



Gross tax **B** \$

(T1 plus J)

Foreign income tax offset

C1\$

Rebates and tax offsets

C2\$

Non-refundable non-carry forward tax offsets

C\$

SUBTOTAL

(C1 plus C2)

Complying fund's franking credits tax offset

E1\$

No-TFN tax offset

E2\$

National rental affordability scheme tax offset

E3\$

T2 \$ (B less C - cannot be less than zero)

Refundable tax offsets

E\$

(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)

*Tax offset refunds

(Remainder of refundable tax offsets)

1\$

(unused amount from label **E** – an amount must be included even if it is zero)

PAYG instalments raised

K\$

Supervisory levy

Supervisory levy adjustment for wound up funds

Supervisory levy adjustment for new funds

N\$

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 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 2014.

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 Ms Other Family name First given name Other given names Day Month Member's TFN Date of birth See the Privacy note in the Declaration. Contributions OPENING ACCOUNT BALANCE \$ Refer to instructions for completing these Employer contributions A\$ labels. ABN of principal employer A1 Personal contributions **B**\$ CGT small business retirement exemption CGT small business 15-year exemption amount **D** \$ Personal injury election Spouse and child contributions Other third party contributions Assessable foreign superannuation fund amount Non-assessable foreign superannuation fund amount Transfer from reserve: assessable amount 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 and Low Income Super Contributions) TOTAL CONTRIBUTIONS N \$ Loss Other transactions

Allocated earnings or losses **O** \$

Inward rollovers and transfers

Outward rollovers and transfers Q\$

Lump Sum payment R1 \$

Code

Code

Income stream payment R2 \$

CLOSING ACCOUNT BALANCE S\$

Page 6

Sensitive (when completed)

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 2** Title: Mr Miss Ms Other Family name First given name Other given names Day Month Member's TFN Date of birth See the Privacy note in the Declaration. Contributions OPENING ACCOUNT BALANCE \$ Refer to instructions for completing these Employer contributions A\$ labels. ABN of principal employer A1 Personal contributions **B**\$ CGT small business retirement exemption **C**\$ 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 Non-assessable foreign superannuation fund amount Transfer from reserve: assessable amount **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 and Low Income Super Contributions) м\$ TOTAL CONTRIBUTIONS N \$ Loss Other transactions Allocated earnings or losses **O** \$ Inward rollovers and transfers Outward rollovers and transfers Q\$ 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 \boldsymbol{V} \$

Total member closing account balances (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? **G** No Yes

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 2013–14 income year, write **2014**).

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 2014.*

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 2014* for each election.

If revoking an interposed entity election, print **R**, and complete and attach the *Interposed entity election or revocation 2014*.

Section	I /·		laration	•
Seciion	N.	Dec	iaratior	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.

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.

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 I have received the audit report and I am aware of any matters raised. I declare that th any attached schedules and additional documentation is true and correct. I also authonominated bank account (if applicable).	e informatic	n on t	his a	ınnualı	return,	including
Authorised trustee's, director's or public officer's signature	\neg					
		Day	,	Month	,	Year
	Date		/		/	
Preferred trustee or director contact details:						
Title: Mr Mrs Miss Ms Other Family name						
First given name Other given names						
Phone number						
Email address Non-individual trustee name (if applicable)						
ABN of non-individual trustee						
Time taken to prepare and complete this annual return	ŀ	Hrs				
The Commissioner of Taxation, as Registrar of the Australian Business Register, you provide on this annual return to maintain the integrity of the register. For further in	may use the formation, r	e ABN refer to	and the	busine instruc	ess det	ails which
TAX AGENT'S DECLARATION: I declare that the Self-managed superannuation fund annual return 2014 has been preply the trustees, that the trustees have given me a declaration stating that the information that trustees have authorised me to lodge this annual return. Tax agent's signature						
lat agont o signaturo		Devi		Manda		Year
	Date	Day	/	Month	/	rear
Tax agent's contact details						
Title: Mr Mrs Miss Ms Other						
Family name						
First given name Other given names						
Tax agent's practice						
Tax agent's phone number Reference number		Ta	x ag	ent nui	mber	
Postal address for annual returns: Australian Taxation Office, GPO Box 9845,	IN YOUR C	CAPITA	AL C	ITY		
Page 16 Sensitive (when completed)					_	

PART A

Electronic Lodgement Declaration (Form DžHž7 ž: , SMSF cf 9L)

This declaration is to be completed where the cast Ateurn is to be lodged via the Vast AJ ~ 3K '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.	lectaration for a period of five years after the dectaration	is made, pename	is illay						
Privacy V@ \(\bar{CE}\)U\\(\bar{a}\) \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\									
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Tax File Number Nam	e of Partnership, Trust, Fund or Entity		Year						
I authorise my tax agent to electronically tra	ansmit this tax return via the Electronic Lodgment Servic	e.							
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 VaxÁJ~&\È The tax law provides heavy penalties for false or misleading statements [n tax returns.									
Declaration: I declare that: the information provided to the agent for the preparation of that ÁpærÁ^c'; ☐ ☐ & Ápēr ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐									
Signature of Partner, TrusteeÊ ¦ Öã^&{ ¦		Date	/	1					
PART B									
ELEC	CTRONIC FUNDS TRANSFER CONSENT								
This declaration is to be completed when a through the electronic lodgment service EL	n electronic funds transfer (EFT) of a refund is requested S.	d and the tax retu	rn is being lodg	ed					
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 co	mpleting EFT details as the payment of any refund will b	e made to the acc	count specified	ÁÁ					
Agent Ref No									
Account name									
Á Œbeĕc@(¦ãr^Áo@Á^~`}åÁq[Áa^Áa^][•ãr^åÁaãa^8	‡^ Á[Áo@Á]^8ãa?åÁ sa8 8[ˇ}c	1							
Signature		Date	/	/					

PART D

Tax Agent's Certificate (shared facilities only)

I declare that:

■ I have received a de ã Át ^ Ás åÁs ¦ ¦ ^ &d.	s tax return in accordance with the information supplied by the] & 今 ^ 上	} A A A A A A A A A A A A A A A A A A A	Á^č¦}		
Agent's signature	Date	1	1		
Contact name	7`]YbhRefYfYbW	(
Agent's Phone No" Agentfig RefYfYbWY No"					