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

2017

# 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 2017 (NAT 71287).

The Self-managed superannuation fund annual return instructions 2017 (NAT 71606) (the instructions) can assist you to complete this annual return.

Is this an amendment to the SMSF's 2017 return?

Is this the first required return for a newly registered SMSF?

# TO COMPLETE THIS ANNUAL RETURN

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

01:	Λ.	<b>F</b>	:£.	
Section	A:	Funa	INTO	rmation

S	ection A: <b>Fund information</b>	To assist processing, v	vrite the fund's
1	Tax file number (TFN)	TFN at the top of pages 3	
	The ATO is authorised by law to request your TFN. You are not obliged to quote could increase the chance of delay or error in processing your annual return. See the	e your TFN but not quoting e Privacy note in the Declar	it ation.
2	Name of self-managed superannuation fund (SMSF)		
3	Australian business number (ABN) (if applicable)		
4	Current postal address		
Sub	purb/town	State/territory	Postcode
5	Annual return status		

A No

**B** No

Yes

Yes

6 SMSF auditor Auditor's name Title: Mr Mrs Miss Ms Other Family name			
First given name	Other given names		
SMSF Auditor Number Auditor's phone r	number		
Postal address			
Suburb/town		State/territory	Postcode
Date audit was completed A Month	Year		
Was Part B of the audit report qualified? <b>B</b> No	Yes		
If the audit report was qualified, have the reported compliance issues been rectified?	C 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 Financial institution details for super payments and tax refunds

You must provide the financial institution details of your fund's nominated super account. If you would like your fund's tax refunds paid to a different account, you can provide additional financial institution details at **B**.

Fund BSB number (must be six digits)

Fund account number

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

# B 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)

### C Electronic service address alias

We will use your electronic service address alias to communicate with your fund about ATO super payments.

8	Status of	f SMSF	Australian superani	nuation fund	<b>A</b> No	Yes	Fund benefit structur	re <b>B</b> Code	Э	
		Does the the Gove	fund trust deed allow ac ernment's Super Co-cont Low Income Super C	ribution and	C No	Yes				
9	Was the	fund wou	und up during the inc	come year?						
	No Y		yes, provide the date on hich the fund was wound	up /	Month /	Year	Have all tax lodgment and payment obligations been met?	No Yes		
10	Exempt of	current p	ension income							
	Did the fun	nd pay an ir	ncome stream to one or	more members	s in the in	come year?				
			exemption for current per empt current pension inco			pay at least th	ne minimum benefit paymer	nt under		
	No )	Go to Secti	on B: Income.							
	Yes D	Exempt cur	rent pension income am	ount <b>A</b> \$						
	٧	Which meth	nod did you use to calcul	late your exem	pt curren	t pension inco	me?			
			Segregated assets me	thod <b>B</b>						
	Unsegregated assets method C Was an actuarial certificate obtained? D Yes									
	Did the fund have any other income that was assessable?									
	<b>E</b> Yes	Go to S	ection 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 <b>not</b> complete Section B: Income.)									
			ed to claim any tax offset Income tax calculation s							

# 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?	<b>G</b> No	Yes	If the total capital loss or total capital gain is greater than \$10,000 complete and attach a Capital gains tax (CGT) schedule 2017.	
6	Have you applied an exemption or rollover?	<b>M</b> No	Yes		
		Net cap	oital gain	<b>A</b> \$	
Gro	oss rent and other leasi	ing and hiring	g income	<b>B</b> \$	
		Gross	s interest	<b>C</b> \$	
	Forestry	managed inv	vestment e income	<b>X</b> \$	
Gross fore	ign income				Loss
D1 \$		Net foreigr	n income	D \$ ,	
Australian fra	inking credits from a Ne	ew Zealand o	company	<b>E</b> \$	Number
			fers from gn funds	F \$	Number
	Gı	ross paymen ABN no	ts where t quoted	<b>H</b> \$	Loss
Calculation of assess Assessable emplo		Gross dis		1\$	L033
R1 \$		*Unfranked	dividend amount	J\$	
plus Assessable perso	onal contributions	*Franked		K \$	
plus #*No-TFN-quote	ed contributions	*Dividend		L\$	
R3 \$ (an amount must be	included even if it is zero)		oss trust	M \$	Code
less Transfer of liability company			essable		
R6 \$	G1 1 G1	contr (R	ibutions 11 plus R2 3 less R6)	R	
Calculation of non-a *Net non-arm's length priv U1 \$	-	*Othe	r income	<b>s</b> \$	Code
plus*Net non-arm's leng	th trust distributions	*Assessable due to cha statu:		T \$	
plus *Net other non-an	m's length income		on-arm's income % tax rate) 2 plus U3)	U \$	
#This is a mandatory label.		GROSS I (Sum of label		w	Loss
*If an amount is entered at this label,	Exempt cu	rrent pensior	n income	Y	
check the instructions to ensure the correct tax treatment has	TOTAL ASSESSABI	LE INCOME (W less Y)	W		Loss
been applied.					

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).

	DEDUCTIONS		NON-DEDUCTIBLE EXPENSES	
Interest expenses within Australia	A1 \$		<b>A2</b> \$	
Interest expenses overseas	B1 \$		B2 \$	
Capital works expenditure	D1 \$		D2 \$	
Decline in value of depreciating assets	E1 \$		<b>E2</b> \$	
Insurance premiums – members	F1 \$		F2 \$	
Death benefit increase	G1 \$			
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	U2 \$	Code
Other amounts	L1 \$		L2 \$	
Tax losses deducted	M1 \$			
	TOTAL DEDUCTIONS		TOTAL NON-DEDUCTIBLE EXPENSES	1
	N \$		<b>Y</b> \$	
	(Total A1 to M1)		(Total A2 to L2)	
	*TAXABLE INCOME OR LOSS	Loss	TOTAL SMSF EXPENSES	
	<b>o</b> \$		<b>z</b> \$	
#This is a mandatory label.	(TOTAL ASSESSABLE INCOME /ess TOTAL DEDUCTIONS)		(N plus Y)	

# 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 2017 on how to complete the calculation statement.

#Tax on taxable T1 \$

#Tax on taxable T1 \$

#Tax on no-TFN-quoted J\$

#Tax on no-TFN-quoted J\$

Gross tax **B** \$

contributions

(T1 plus J)

(an amount must be included even if it is zero)

Foreign income tax offset

C1 \$

Rebates and tax offsets

Non-refundable non-carry forward tax offsets

C2 \$

(C1 plus C2)

SUBTOTAL 1

T2 \$

(B less C - cannot be less than zero)

Early stage venture capital limited partnership tax offset

D1\$

Early stage investor tax offset

Non-refundable carry forward tax offsets

D2\$

(D1 plus D2)

SUBTOTAL 2

T3 \$

(T2 less D - cannot be less than zero)

Complying fund's franking credits tax offset

E1\$

No-TFN tax offset

**E2**\$

National rental affordability scheme tax offset

**E3**\$

Exploration credit tax offset Refundable tax offsets

**E4**\$

E\$

(E1 plus E2 plus E3 plus E4)

\*TAX PAYABLE **T5**\$

(T3 less E - cannot be less than zero)

Section 102AAM interest charge

**G**\$

Credit for interest on early payments amount of interest

### H1\$

Credit for tax withheld – foreign resident withholding (excluding capital gains)

### **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**\$

Credit for amounts withheld from foreign resident capital gains withholding

# **H8**\$

Eligible credits

**H**\$

(H1 plus H2 plus H3 plus H5 plus H6 plus H8)

# \*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

### AMOUNT DUE OR REFUNDABLE

A positive amount at **S** is what you owe, while a negative amount is refundable to you.

**S**\$

(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 2017.

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 **E**\$ 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\$ Code Lump Sum payment R1 \$ Code Income stream payment R2 \$

S\$

**CLOSING ACCOUNT BALANCE** 

In Section F report a Use Section G to report a income year.	III current m any former	embers in the fund at 30 Ju members or deceased mer	une. mbers who he	eld an interest in the	fund at any time d	luring the
MEMBER 2						
Title: Mr Mrs Mis Family name	ss Ms	Other				
First given name		Other give	n names		Day Month	Year
Member's TFN See the Privacy note in the	e Declaratio	n.		Date of birth	/ World	/
Contributions			Φ			
Refer to instructions	OPENI	NG ACCOUNT BALANCE	<del></del>			
for completing these labels.		Employer contributions	<b>A</b> \$			
	ABN	of principal employer A1				
		Personal contributions	в\$			
CGT	Γsmall busi	ness retirement exemption	<b>c</b> \$			
CGT smal	l business	15-year exemption amount	<b>D</b> \$			
		Personal injury election	<b>E</b> \$			
	Spor	use and child contributions	F\$			
	Oth	er third party contributions	<b>G</b> \$			
Assessable	e foreign su	perannuation fund amount	1\$			
Non-assessable	e foreign su	perannuation fund amount	J \$			
Tran	sfer from re	eserve: assessable amount	<b>K</b> \$			
Transfer	from reserv	e: non-assessable amount	L\$			
Co		from non-complying funds	т\$			
Any other contribution	ons (includi	ously non-complying funds ng Super Co-contributions come Super Contributions)	м\$			
		TOTAL CONTRIBUTIONS	N \$			
Other transactions		ted earnings or losses <b>O</b>				Loss
	Inward	rollovers and transfers <b>P</b>	\$			
	Outward	rollovers and transfers Q	\$			Codo
		Lump Sum payment R1	\$			Code
	Inc	ome stream payment R2	\$			Code
C	LOSING A	CCOUNT BALANCE \$	\$			

Sensitive (when completed)

Page 9

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 3 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\$ Page 10 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 4** Title: 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\$

Sensitive (when completed)

Page 11

In Section F report all current members in the fund at 30 June.

# 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 \$ borrowing arrangements Australian shares 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 \$ Yes or investment in, related parties (known as in-house assets) at the end of the income year? 15e Limited recourse borrowing arrangements If the fund had an LRBA were the LRBA Yes borrowings from a licensed financial institution? Did the members or related parties of the Yes fund use personal guarantees or other security for the LRBA?

### 16 LIABILITIES

Borrowings for limited recourse borrowing arrangements

V1 \$

Permissible temporary borrowings

**V2**\$

Other borrowings

**V3**\$

Borrowings V \$

ΨΨ

Total member closing account balances (total of all **CLOSING ACCOUNT BALANCE**s from Sections F and G)

**W** \$

Reserve accounts X \$

Other liabilities Y \$

TOTAL LIABILITIES **Z** \$

# Section I: Taxation of financial arrangements

17 Taxation of financial arrangements (TOFA)

Total TOFA gains **H** \$

Total TOFA losses | \$

# 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 2016–17 income year, write **2017**).

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 2017.

# 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 2017* for each election.

If revoking an interposed entity election, print **R**, and complete and attach the *Interposed entity election or revocation 2017*.

Section K: <b>Declarations</b>						
Penalties may be imposed for false or misleading information in addition to	penalties r	elating	to a	ny tax	shortf	alls.
Important Before making this declaration check to ensure that all income has been disclosed and the a any additional documents are true and correct in every detail. If you leave labels blank, you w label was not applicable to you. If you are in doubt about any aspect of the annual return, plateriacy  The ATO is authorised by the Taxation Administration Act 1953 to request the provision of taxidentify the entity in our records. It is not an offence not to provide the TFN. However if you deform may be delayed.  Taxation law authorises the ATO to collect information and disclose it to other government acting to ato.gov.au/privacy	vill have speace all the f ace all the f x file numb o not provi	ecified acts be ers (TF ide the	a zer efore 'Ns). TFN	the AT We wil , the p	unt or t O. I use th	he TFN to ng of this
TRUSTEE'S OR DIRECTOR'S DECLARATION:  I declare that current trustees and directors have authorised this annual return and it is a law received the audit report and I am aware of any matters raised. I declare that the any attached schedules and additional documentation is true and correct. I also authorise nominated bank account (if applicable).  Authorised trustee's, director's or public officer's signature	informatio	n on th	nis ar	nnual r	eturn,	including
Authorised trastees, directors or public officers signature	Date	Day	/	Month	/	Year
Preferred trustee or director contact details:	J		,		,	
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	H	Irs				
The Commissioner of Taxation, as Registrar of the Australian Business Register, myou provide on this annual return to maintain the integrity of the register. For further info	ay use the ermation, r	e ABN efer to	and the	busine instruc	ess det etions.	ails which
TAX AGENT'S DECLARATION:  I declare that the Self-managed superannuation fund annual return 2017 has been prepared by the trustees, that the trustees have given me a declaration stating that the information the trustees have authorised me to lodge this annual return.  Tax agent's signature	red in acc provided	ordand to me	ce wi is tru	th info ie and	rmation correc	n provided t, and that
	Date	Day	/	Month	/	Year
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

Postal address for annual returns: Australian Taxation Office, GPO Box 9845, IN YOUR CAPITAL CITY

Reference number

Tax agent number

### **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

Declarations I declare that

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 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.

PART B								
Signature of Pa	artner, Trustee, or		Date	1	1			
	is true and correct; and the agent is authorised to	lodge this tax return.						
•	the information provided to the agent for the preparation of this tax return, including any applicable schedules							
Deciaration.	i deciare mat.							

# **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.

### Agent's reference number

### **Account name**

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

# **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	ne partner, trustee, director or public officer to lodge this tax return, inclu	ding any ap	plicable sche	edules.		
Agent's signature		Date	1	1		
Contact name	CI	ient Refere	nce			
Agent's Phone Num	ber Agent's Refe	Agent's Reference Number				