Self-managed superannuation fund annual return 2023

To 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 2023 (NAT 71287). The Self-managed superannuation fund annual return instructions 2023 (NAT 71606) (the instructions) can assist you to complete this annual return. The SMSF annual return cannot be used to notify us of a change in fund membership. You must update fund details via ABR.gov.au or complete the Change of details for superannuation entities form (NAT 3036). 			■ Print clearly, using a BLACK pen only. ■ Use BLOCK LETTERS and print one character per box. ③ M / T # ⑤ T □ □ □ □ ■ Place X in ALL applicable boxes. → Postal address for annual returns: Australian Taxation Office GPO Box 9845 [insert the name and postcode of your capital city] For example; Australian Taxation Office GPO Box 9845 SYDNEY NSW 2001						
Se	ection A: Fund in	 formation							
1	Tax file number (TFN)	Provided	To assist processing, write the the top of pages 3, 5, 7, 9 and						
			re not obliged to quote your TFN but not quoting turn. See the Privacy note in the Declaration.	; it could increase					
2	Name of self-managed	I superannuation fund (SMS	F)						
Na	airn Superannuation Fund								
3	Australian business nu	imber (ABN) (if applicable) 694	405249695						
4	Current postal address	•							
	O Box 3685	,							
F									
Sub	ourb/town		State/territory	Postcode					
Rι	undle Mall		SA	5000					
5	Annual return status Is this an amendment to the		A No X Yes						
	Is this the first required retur	rn for a newly registered SMSF?	B No X Yes						

Who should complete this annual return?

e em	CC auditor						
6 SM Auditor's	SF auditor name						
Title: Mi	r X Mrs Miss	Ms Other					
Family nan	ne						
Boys							
First given			Other given names				
Anthon	y William						
SMSF A	uditor Number	Auditor's phone	number				
100014	140	0410712708					
Postal ac	ddress						
РО Вох	3376						
Suburb/to	wn				State/territory	Postcode	
Rundle	Mall				SA	5000	
		Day Month	Year			L	
Date auc	lit was completed	4 / / [
Mac Dod	t A of the audit report	qualified?	Na V vaa 🗆				
vvas Fari	A of the addit report	quaiiileu !	No X Yes				
Was Parl	t B of the audit report	qualified?	No X Yes				
If Part B	of the audit report was	aualified.	🗆 🗆				
	reported issues been		No Yes				
7 Ele	ctronic funds tran	sfer (EFT)					
We	need your self-manag	ed super fund's financial	institution details to pay any s	super payments	and tax refunds o	wing to you.	
Α	Fund's financial i	nstitution account d	letails				
	This account is used	for super contributions	and rollovers. Do not provide	e a tax agent acc	count here		
	Fund BSB number	065146	Fund account number		oditi fiore.		
	Fund account name	000140	Turia account number	10240001			
	Nairn Superannua	tion Fund					
	INAIITI Superannua	ILION FUNG					
I would like my tax refunds made to this account. X Go to C.							
			n provide a tax agent accour	it here			
	BSB number		Account number				
	Account name		Account number				
	Account name						
_							
С	Electronic service						
			A) issued by your SMSF messa	aging provider.			
	(i or example, SIVISFO	ataeo <i>m</i> aiias). See instruct	ions for more information.				

Tax File Number Provided

				Tax	File Number	Provided	1	
8	Status of SMSF	Australian superannuation fund	A No	Yes X	Fund benef	fit structure	BA	Code
		und trust deed allow acceptance of nment's Super Co-contribution and Low Income Super Amounts?	C No	Yes X				
9	Was the fund would	nd up during the income year?	Month	Year	Have all tax lo	dgment		
	No X Yes h If ye wh	es, provide the date on ich the fund was wound up			and p obligations bee	en met?	Yes	s [
10	Exempt current pe	ension income						
	Did the fund pay retire	ment phase superannuation income	stream benefi	its to one or	more members	in the incom	e year?	
To claim a tax exemption for current pension income, you must pay at least the minimum benefit payment und Record exempt current pension income at Label A. No Go to Section B: Income.							nder the la	aw.
	Yes X Exempt curre	ent pension income amount A\$	79	9,453				
	Which method did you use to calculate your exempt current pension income?							
		Segregated assets method $$						
	Uı	nsegregated assets method C	Was an actu	arial certifica	ate obtained?	D Yes		
	Did the fund have any	other income that was assessable?						
	E Yes Oo to Se	ction B: Income.						
	No X Choosing Go to Se	g 'No' means that you do not have a ction C: Deductions and non-deduc	ny assessable tible expenses	e income, inc s. (Do not co	cluding no-TFN o	quoted contri B: Income.)	ibutions.	
	• •	to claim any tax offsets, you can lis						

Tax File Number	Provided

Section B: Income

Do not complete this section the retirement phase for the ent notional gain. If you are entitled	tire year, there was no	other income	e that was	assessable, and yo	ou have not realis	ed a deferred
11 Income Did you have a capital of (CGT) event during the	gains tax he year? G No	Yes 🔲	\$10,000 or 2017 and t complete a	capital loss or total or you elected to use the deferred notional attach a <i>Capital</i>	the transitional Cal gain has been re	GT relief in ealised,
Have you ap exemption or	oplied an rollover? M No	Yes 🗌	Code			
	Net o	capital gain	A \$			
Gross rent a	nd other leasing and hiri	ng income	B \$			
	Gro	oss interest	c \$			
	Forestry managed i scher	nvestment me income	x \$			
Gross foreign incom	e					Loss
D1 \$	Net forei	gn income	D \$			
Australian franking cre	dits from a New Zealand	d company	E \$			Nicosalesco
		nsfers from reign funds	F \$			Number
	Gross payme	Ū	н \$			
Calculation of assessable cor	ntributions Gross	distribution				Loss
Assessable employer contr	from pa	artnerships	I \$			
plus Assessable personal contr		d dividend amount	J \$			
R2 \$		d dividend	к \$			
plus #*No-TFN-quoted contrib	utions *Divider	nd franking	L \$			
(an amount must be included ex		credit Gross trust	м \$			Code
less Transfer of liability to life insu	urance	istributions				
company or PST	cor	ssessable stributions (R1 plus R2 R3 less R6)	R \$			
Calculation of non-arm's leng	th income					Code
*Net non-arm's length private comp	any dividends *Oth	ner income	s \$			
plus *Net non-arm's length trust di		ole income	-		1	
U2 \$	440 10 01	nanged tax tus of fund	T \$			
plus *Net other non-arm's length		non-arm's th income				
U3 \$	(subject to 4 (U1 plus	5% tax rate) U2 plus U3)	U \$			
"This is a mandatory label.		S INCOME bels A to U)	w \$			Loss
*If an amount is entered at this label,	Exempt current pensi	on income	Y \$			
check the instructions to ensure the correct tax treatment has been applied.	TOTAL ASSESSABL INCOME (W less					Loss

	Tax File Number	Provided
--	-----------------	----------

TOTAL SMSF EXPENSES

(N plus Y)

Z\$

0

Section C: Deductions and non-deductible expenses

***TAXABLE INCOME OR LOSS**

(TOTAL ASSESSABLE INCOME less

TOTAL DEDUCTIONS

o \$[

*This is a mandatory

label.

12 Deductions and non-deductible expenses

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 \$	
SMSF auditor fee H1 \$	H2 \$	990
Investment expenses I1 \$	I2 \$	13,893
Management and dministration expenses J1 \$	J2 \$	2,239
Forestry managed investment scheme expense U1 \$	U2 \$	
Other amounts L1 \$	L2\$	
Tax losses deducted M1 \$		
TOTAL DEDUCTIONS	TOTAL NON-DEDUCTIBLE I	EXPENSES

OFFICIAL: Sensitive (when completed)

17,122

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 Ca	Iculation statement				
Dlooso	refer to the	#Taxable income	A \$		0
	anaged superannuation	# -		(an amount must be included even if it is zero)	
	nnual return instructions	#Tax on taxable income			0.00
	n how to complete the	#Tax on		(an amount must be included even if it is zero)	
Calcula	tion statement.	no-TFN-quoted			0.00
		contributions		(an amount must be included even if it is zero)	
		•			
		Gross tax	B \$		0.00
				(T1 plus J)	
	Foreign income tax offset				
C1\$					
'	Rebates and tax offsets		Non-r	efundable non-carry forward tax offsets	
C2\$			C \$	-	
			- +	(C1 plus C2)	
			SLIBT	OTAL 1	
			T2 \$	T T T T T T T T T T T T T T T T T T T	
			123		
				(B less C – cannot be less than zero)	
	Early stage venture capital partnership tax offset	limited			
D 1\$	partitional lip tax officer	0.00			
	Early stage venture capital tax offset carried forward f	rom previous vear	Non-r	efundable carry forward tax offsets	
D2 \$		0.00	D\$		0.00
	Early stage investor tax off		- Ψ	(D1 plus D2 plus D3 plus D4)	0.00
D3 \$	Larry stage investor tax on			(
		0.00			
	Early stage investor tax off carried forward from previous	set ous vear	SUBT	OTAL 2	
D 4\$		0.00	T3 \$		0.00
<u></u> Ψ		0.00	. • •	(T2 less D – cannot be less than zero)	0.00
				(127666 2	
	Complying fund's franking	credits tax offset			
E1\$					
Ψ	No-TFN tax offset				
E2 \$	110 1111 1000				
 Ψ	National rental affordability s	chomo tay offect			
E3 \$	Trational rental anordability 5	CHEITIE LAX OIISEL			
EST	Evaloration aradit toy offset		Dofun	deble toy effects	
- 40	Exploration credit tax offset	0.00		dable tax offsets	
E4 \$		0.00	E\$		
				(E1 plus E2 plus E3 plus E4)	
		#TAX PAYABLE	T5 \$		0.00
				(T3 less E – cannot be less than zero)	
				on 102AAM interest charge	
			G \$		

Tax File Number	Provided

					1
Credit for tax withheld – foreign res withholding (excluding capital gains					
H2\$,				
Credit for tax withheld – where ABN					
or TFN not quoted (non-individual)					
H3\$					
Credit for TFN amounts withheld fro	om				
payments from closely held trusts					
H5\$	0.00				
Credit for interest on no-TFN tax of	fset				
H6\$					
Credit for foreign resident capital ga	ains				
withholding amounts		Eligible	credits		
H8\$	0.00	H \$ _			
			(H2 plus H3 plus	H5 plus H6 plus	us H8)
	offset refunds	1\$□			0.00
(Remainder of refund	dable tax offsets)	ıφ_	lunused	d amount from la	
				st be included e	
		DAVC in	stalments raise	A	
		_	istaiments raise	u .	
		K \$_			
			sory levy		
		L\$_			259.00
		Supervis	sory levy adjust	ment for wou	ınd up funds
		м \$Г			
		Supervis	sory levy adjust	ment for new	, funds
		N S	bory levy adjust	THORIT TOT TICK	Tanao
		ΝФГ			
AMOUNT DUE OD D	EELINDADI E	_			
AMOUNT DUE OR R A positive amount at S i		S \$			259.00
while a negative amount is re	fundable to you.		(T5 plus G less H le	ess I less K plus	L less M plus N)
This is a mandatory label.					
Section E: Losses					
4 Losses	-		annia al ferrorent		
	la 1		carried forward rincome years	J \$	
If total loss is greater than \$100,000,	l N		Locaca carried		
complete and attach a Losses schedule 2023.	forwa	ard to late	r income years	v \$	

Section F: Member inform	ation			
MEMBER 1				
Title: Mr X Mrs Miss Ms Other				
Family name				
Nairn				
First given name	Other give	n na	ames	
Malcolm	John		Day Month Year	
Member's TFN See the Privacy note in the Declaration. Provided			Date of birth Provided	
Contributions OPENING ACCOUNT BALA	ANCE \$		582,844.44	
Refer to instructions for completing these labels	s. L	I \$	Proceeds from primary residence disposal	
Employer contributions		Ψ	Day Month Year	
A \$	H	11	Receipt date / / /	
ABN of principal employer			Assessable foreign superannuation fund amount	
A1		\$		
Personal contributions B \$		\$ ا	Non-assessable foreign superannuation fund amount	
CGT small business retirement exemption			Transfer from reserve: assessable amount	
C \$	К	\$		
CGT small business 15-year exemption amount			Transfer from reserve: non-assessable amount	
D \$	L	\$		
Personal injury election			Contributions from non-complying funds	
E \$	-	_	and previously non-complying funds	
Spouse and child contributions	ı	\$		
F \$[Any other contributions (including Super Co-contributions and Low Income Super Amounts)	
Other third party contributions				
G \$	IVI	\$		
TOTAL CONTRIBUT	TIONS N	\$		
TOTAL GONTHIBOT	TIONS I	اΨ	(Sum of labels A to M)	
			Allo pated a guidene au la page	
Other transactions	0	ا\$		
	·		Inward rollovers and transfers	
Accumulation phase account balance	D	sا		
S1 \$ 0.00	•	٠,	Outward rollovers and transfers	
Retirement phase account balance – Non CDBIS	Q	\$		
			Lump Sum payments Code	
	R1			
Retirement phase account balance – CDBIS			Income stream payments Code	
S3 \$ 0.00	R2			
		· • I	20,000.00	
0 TRIS Count CLOSING ACCOUNT BAL	ANCE S	\$	633,689.23	
		_ '	(S1 plus S2 plus S3)	
A any many distriction in the name	volue V4	اج		
Accumulation phase	value 🗚 🕽	Φ		
Retirement phase	value X2	\$		
Outstanding limited rec	course Y	' \$		

Tax File Number Provided

				Tax File N	umber [Provided	
MEMBER 2							
Title: Mr Mrs X Miss Ms Other							
Family name							
Nairn	011 :						
First given name	Other give	n names					
Beverly	Ann				Day	Month	Year
Member's TFN See the Privacy note in the Declaration. Provided				Date of birth	Day	Provided	real
Contributions OPENING ACCOUNT BAL	ANCE \$[586,631.0	09	
Pefer to instructions for completing these label		Proce	eeds fro	om primary reside	nce dispos	 sal	
Refer to instructions for completing these labels	s. H	I \$					
Employer contributions				Day Monti	n ,	Year	
A \$	H	11 Rece	ipt date	•	」/ 		
ABN of principal employer			ssable f	oreign superannu	ation fund a	amount	
A1		I\$ <u></u>					
Personal contributions		Non-	assess	able foreign supe	rannuation	fund amount	
B \$	J	J \$ 🔼					
CGT small business retirement exemption		Trans	sfer fron	n reserve: assess	able amour	nt	
C \$		\$					
CGT small business 15-year exemption amo	ount	Trans	sfer fron	n reserve: non-as	sessable a	mount	
D \$	L	. \$					
Personal injury election				s from non-comp		3	
E \$	_		orevious	sly non-complying	g funds	_	
Spouse and child contributions	T	* \$					
F \$		Any d	other co Idina Si	ontributions uper Co-contribut	tions		
Other third party contributions		and I	_ow Inc	ome Super Amo	unts)		
G \$	M	। \$					
						_	
TOTAL CONTRIBU	TIONS N	I\$ <u></u>					
			(Sum	of labels A to M)			
Other town and the second			ated ea	rnings or losses		Loss	
Other transactions	0	\$			81,506.5	58	
Accumulation phase account balance		Inwai	rd rollov	ers and transfers	3		
	P	\$					
		Outw	ard roll	overs and transfe	ers		
Retirement phase account balance – Non CDBIS	Q	\$					
S2 \$ 638,157.67		Lump	o Sum į	payments		Code	
	R1	\$					
Retirement phase account balance – CDBIS		Incor	no etro	am payments			
S3 \$ 0.00	R2		ne sue	апт рауппента	20 080 0	Code M	
σσ	nz	. y			29,980.0		
0 TRIS Count CLOSING ACCOUNT BAL	ANCE S	\$\$			638,157.6	37	
SEGGING AGGGGNT BAL		, Ψ <u> </u>	(S1	plus S2 plus S3)	555, 157.0	<u>"</u>	
<u> </u>			,				
Accumulation phase	e value X1	\$					
Retirement phase	o valuo Va					 _	
Outstanding limited re borrowing arrangement a	course amount	' \$					

					Tax File Number	Provided	
15	Section H: Assets and liab ASSETS	ilities					
15a	Australian managed investments	Listed trusts	A	\$			
		Unlisted trusts	В	\$			
		Insurance policy	С	\$			
	Other	managed investments	D	\$			
15b	Australian direct investments	Cash and term deposits	Ε	\$		35,911	
	Limited recourse borrowing arrangements	Debt securities	F	\$			
	Australian residential real property J1 \$	Loans	G	\$			
	Australian non-residential real property	Listed shares	н	\$			
	J2 \$						
	Overseas real property	Unlisted shares		\$			_
	J3 \$b	Limited recourse orrowing arrangements	J	\$			
	J4 \$	Non-residential		_			
	Overseas shares	real property	K	\$		1,200,000	
	J5 \$	Residential real property	L	\$			
	Other	Collectables and personal use assets	M	\$			
	J6 \$	Other assets				39,788	
	Property count J7			Ψ		30,100	
15c	Other investments	Crypto-Currency	N	\$			
l5d	Overseas direct investments	Overseas shares	P	\$			
	Overseas non-	residential real property	Q	\$			
	Overseas	residential real property	R	\$			
	Overseas	s managed investments	S	\$			
		Other overseas assets	T	\$			
	TOTAL AUSTRALIAN AND (Sum of labels		U	\$		1,275,699	
15e	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?	No X Yes ☐)		\$			

				Tax File Number	Provided	
15f	Limited recourse borrowing arrangements If the fund had an LRBA were the LRBA borrowings from a licensed financial institution? Did the members or related parties of the	_ 🗆	′es 🗌			
	fund use personal guarantees or other security for the LRBA?	B No L	es			
16	LIABILITIES	-				
	Borrowings for limited recourse borrowing arrangements					
	V1 \$					
	Permissible temporary borrowings					
	V2 \$					
	Other borrowings					7
	V3 \$	Borrow	rings V	\$		
	Total member clos (total of all CLOSING ACCOUNT BALANCE s from the countries of the countr			\$	1,271,847	
		Reserve acco	unts X	\$		
		Other liabi	lities Y	\$	3,852	
		TOTAL LIABIL	LITIES Z	\$	1,275,699	
	ection I: Taxation of financia Taxation of financial arrangements (TOF	_	. –	3		
		_	· -			
_		Total TOFA losse	es [\$ [
Se	ection J: Other information					
	nily trust election status If the trust or fund has made, or is making, a fam specified of the election (for exi				A	
	If revoking or varying a family trust and complete and attach the <i>F</i>				3 🗌	
Inte	rposed entity election status If the trust or fund has an existing election, or fund is making one or more elect specified and complete an Interposed e	write the earliest ir ions this year, writ	ncome year te the earlie	r specified. If the trust est income year being		
				orint R , and complete or revocation 2023.		

Tax File Number Provided Section K: Declarations Penalties may be imposed for false or misleading information in addition to penalties relating to any tax shortfalls.								
Penalties may be imposed for false or misleading information in addition to penalties relating to any tax shortfalls.								
mportant Sefore 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 abel 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 dentify 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 orm may be delayed. Taxation law authorises the ATO to collect information and disclose it to other government agencies. For information about your privacy 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 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								
Date 30 / 10 / 2023								
Preferred trustee or director contact details:								
Title: Mr X Mrs Miss Ms Other								
Family name Nairn								
First given name Other given names								
Malcolm John								
Phone number 08 82719555 Email address								
Non-individual trustee name (if applicable)								
ABN of non-individual trustee Time taken to prepare and complete this annual return Hrs								
The Commissioner of Taxation, as Registrar of the Australian Business Register, may use the ABN and business details which you provide on this annual return to maintain the integrity of the register. For further information, refer to the instructions.								
TAX AGENT'S DECLARATION: I declare that the Self-managed superannuation fund annual return 2023 has been prepared in accordance with information provided by the trustees, that the trustees have given me a declaration stating that the information provided to me is true and correct, and that the trustees have authorised me to lodge this annual return.								
Tax agent's signature Day Month Year								
Date 30 / 10 / 2023								
Tax agent's contact details								
Title: Mr X Mrs Miss Ms Other								
Family name								

First given name

08 82719555

Tax agent's practice

Tax agent's phone number

PDK Financial Synergy Pty Ltd

Phillip

Tax agent number

25452589

Other given names

Reference number

NAIRN

2023

Losses schedule

Companies and trusts that do not join consolidated groups should complete and attach this schedule to their 2023 tax return. Superannuation funds should complete and attach this schedule to their 2023 tax return.

Print neatly in BLOCK LETTERS with a black or blue ballpoint pen only. Print one letter or number in each box. Do not use correction fluid or tape.

Place X in all applicable boxes.		
Refer to Losses schedule instructions 2023, available on our webs for instructions on how to complete this schedule.	site ato.gov.au	
Tax file number (TFN)		
Provided		
Name of entity		
Nairn Superannuation Fund		
Australian business number		
69405249695		
Part A – Losses carried forward to	the 2023–24 income year - excludes	film losses
1 Tax losses carried forward to later income years	Year of loss	
	9022–23 B	

Of loss

G022–23 B

2021–© C

2020–21 D

2019–20 E

2018–19 F

2017–18 and earlier income years

Total U

Transfer the amount at **U** to the **Tax losses carried forward to later income years** label on your tax return.

2	Net capital losses	carried forward	to later income vears
_	INCL Capital 1055C5	carried forward	to later income vears

Year of loss		
2022–23	Н	
2021–22	I	
2020–21	J	
2019–20	K	
2018–19	L	
2017–18 and earlier income years	M	
Total	V	

Transfer the amount at **V** to the **Net capital losses carried forward to later income years** label on your tax return.

Tax File Number Provided

P	Part B – Ownership and b	ousiness continuity	/ to	est - company and listed widely held trust only
s	Complete item 3 of Part B if a loss is being of atis ied in relation to that loss.	·		•
a	o not complete items 1 or 2 of Part B if, in gainst a net capital gain or, in the case of co	the 2022–23 income year, no los ompanies, losses have not been	s ha tran	as been claimed as a deduction, applied asferred in or out.
1	Whether continuity of majority	Year of loss		
	ownership test passed	2022–23	A	Yes No
	Note : If the entity has deducted, applied, transferred in or transferred out (as applicable) in the 2022–23 income year a loss incurred in	2021–22	В	Yes No
	any of the listed years, print X in the Yes or No box to indicate whether the entity has satisfied the continuity of majority ownership test in	2020–21	С	Yes No
	respect of that loss.	2019–20	D	Yes No
		2018–19	Ε	Yes No
		2017–18 and earlier income years	F	Yes No
2	Amount of losses deducted/applied for business continuity test is satisfied - e		orit	y ownership test is not passed but the
		Tax losses	G	
		Net capital losses	Н	
3	Losses carried forward for which the applied in later years – excludes film losse		be	satisfied before they can be deducted/
		Tax losses	I	
		Net capital losses	J	
4	Do current year loss provisions apply' Is the company required to calculate its taxa the year under Subdivision 165-B or its net cap for the year under Subdivision 165-CB of the In 1997 (ITAA 1997)?	able income or tax loss for pital gain or net capital loss	K	Yes No
P	art C - Unrealised losses - a	ompany only		
	Note: These questions relate to the operation of	Subdivision 165-CC of ITAA 1997.		
	Has a changeover time occurred in relation to after 1.00pm by legal time in the Australian Ca 11 November 1999?		L	Yes No
	If you printed ${\bf X}$ in the ${\bf No}$ box at ${\bf L}$, do not compl	ete M, N or O.		
	At the changeover time did the company satismet asset value test under section 152-15 of IT		M	Yes No
	If you printed ${\bf X}$ in the ${\bf No}$ box at ${\bf M}$, has the continuous that an unrealised net loss at the changeover		N	Yes No
	If you printed X in the Yes box at N , what was unrealised net loss calculated under section 16		0	

	Ta	x File Number	Provided
Part D – Life insurance companies			
Complying superannuation class tax losses carried forward to later income years	P		
Complying superannuation net capital losses carried forward to later income years	Q		
Part E – Controlled foreign company losses			
Current year CFC losses	M		
CFC losses deducted	N		
CFC losses carried forward	0		
Part F – Tax losses reconciliation statement			
Balance of tax losses brought forward from the prior income year	A		
ADD Uplift of tax losses of designated infrastructure project entities	В		
SUBTRACT Net forgiven amount of debt	С		
ADD Tax loss incurred (if any) during current year	D		
ADD Tax loss amount from conversion of excess franking offsets	E		
SUBTRACT Net exempt income	F		
SUBTRACT Tax losses forgone	G		
SUBTRACT Tax losses deducted	н		
SUBTRACT Tax losses transferred out under Subdivision 170-A (only for transfers involving a foreign bank branch or a PE of a foreign financial entity)	ı		
Total tax losses carried forward to later income years	J		
Transfer the amount at .I to the Tax losses carried for	rwar	d to later income ve	ears label on your tax return

Tax File Number	Provided

If the schedule is not lodged with the income tax return you are required to sign and date the schedule.

Important

Before making this declaration check to ensure that all the information required has been provided on this form and any attachments to this form, and that the information provided 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 ATO. The income tax law imposes heavy penalties for false or misleading statements.

Privacy

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

Taxpayer's declaration

I declare that the information on this form is true and correct.

Signature					
			Day	Month	Year
		Date		//	
Contact person	Daytii	me contac	t number	(include are	a code)
Malcolm John Nairn	08 8	2719555			

Capital gains tax (CGT) schedule

2023

When completing this form ■ Print clearly, using a black or dark blue pen only. ■ Use BLOCK LETTERS and print one character in each box. ■ M / T # & T Complete the state of the stat	 Use in conjunction with company, trust, fund income tax return or the self-managed superannuation fund annual return. Refer to the <i>Guide to capital gains tax 2023</i> available on our website at ato.gov.au for instructions on how to complete this schedule. 						
Tax file number (TFN) Provided							
We are authorised by law to request your TFN. You do not However, if you don't it could increase the chance of delay							
Australian business number (ABN) 69405249695							
Taxpayer's name							
Nairn Superannuation Fund							
Current year capital gains and capital losses Capital gain	Capital loss						
Shares in companies listed on an Australian securities exchange	K \$						
Other shares B \$	L \$						
Units in unit trusts listed on an Australian securities exchange	M\$						
Other units D \$	N \$						
Real estate situated in Australia E \$	o \$						
Other real estate F \$	P \$						
Amount of capital gains from a trust (including a managed fund)							
Collectables H \$	Q \$						
Other CGT assets and any other CGT events	R \$						
Amount of capital gain previously deferred under transitional CGT relief for superannuation funds	Add the amounts at labels K to R and write the total in item 2 label A – Total current year capital losses .						
Total current year capital gains							

		T	ax File Number	Provided
2	Capital losses			
	Total current year capital losses	A \$	3	
	Total current year capital losses applied	В\$	s [
	Total prior year net capital losses applied	C \$		
	Total capital losses transferred in applied (only for transfers involving a foreign bank branch or permanent establishment of a foreign financial entity)		3	
	Total capital losses applied	E \$	S	
		Add	amounts at B, C an	d D .
3	Unapplied net capital losses carried forward			
	Net capital losses from collectables carried forward to later income years	A \$	3	
	Other net capital losses carried forward to later income years	В\$	6	
		to la		and transfer the total osses carried forward n your tax return.
4	CGT discount			
	Total CGT discount applied	A \$	S	
5	CGT concessions for small business			
	Small business active asset reduction	A \$	S	
	Small business retirement exemption	В\$	S	
	Small business rollover	C \$	s	
	Total small business concessions applied	D\$	S	
6	Net capital gain			
	Net capital gain	A \$	8	
				5D (cannot be less than nt at A to label A - Net

capital gain on your tax return.

		Tax File Number	Provided
7	Earnout arrangements		
	Are you a party to an earnout arrangement? A Yes, as a buyer (Print X in the appropriate box.)	Yes, as a seller	No 🗌
	If you are a party to more than one earnout arrangement, copy and attace details requested here for each additional earnout arrangement.	ch a separate sheet to th	is schedule providing the
	How many years does the earnout arrangement run for? B		
	What year of that arrangement are you in? C		
	If you are the seller, what is the total estimated capital proceeds from the earnout arrangement?		
	Amount of any capital gain or loss you made under your non-qualifying arrangement in the income year.		/ Loss
	Request for amendment If you received or provided a financial benefit under a look-through earns wish to seek an amendment to that earlier income year, complete the fo		rlier income year and you
	Income year earnout right created F		
	Amended net capital gain or capital losses carried forward G \$		/ Loss
8	Other CGT information required (if applicable)		CODE
	Small business 15 year exemption – exempt capital gains A\$		/
	Capital gains disregarded by a foreign resident B \$		
	Capital gains disregarded as a result of a scrip for scrip rollover C\$;	
	Capital gains disregarded as a result of an inter-company asset rollover D\$		
	Capital gains disregarded by a demerging entity E \$		
	Capital gains disregarded by a demerging entity E \$		

Tax File Number	Provided
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Taxpayer's declaration

If the schedule is not lodged with the income tax return you are required to sign and date the schedule.

Important

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Thomason of the person dutioned to sign the decidation. For information about your	phyddy go to dto.gov.dd/phivdoy
I declare that the information on this form is true and correct.	
Signature	
	Date
	Day Month Year
Contact name	
Malcolm John Nairn	
Daytime contact number (include area code)	
08 82719555	

Electronic Lodgment Declaration (SMSF)

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.

Signature

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

		ne of Fund			Year	
		airn Superannuation Fund			2023	
authorise my tax a	agent to electronically to	ransmit this tax return via an approved AT	ΓO electronic cha	nnel.		
correct in every det	ail. If you are in doubt a	eck to ensure that all income has been disc about any aspect of the tax return, place a alse or misleading statements on tax return	all the facts before			
Declaration:	declare that:					
		vided to the agent for the preparation of th	nis tax return, incl	uding any appli	cable schedules	
_	true and correct; and I authorise the agent to	o lodge this tax return.				
				Γ		
Signature of Partne Director	er, Trustee, or			Date	1 1	
		_				
	ELE	CTRONIC FUNDS TRANSFER	CONSENT			
	s to be completed when approved ATO electi	en an electronic funds transfer (EFT) of ronic channel.	a refund is requ	ested and the	tax return is being	
	ist be signed by the par FT, all details below m	rtner, trustee, director or public officer pricust be completed.	or to the EFT deta	ils being transn	nitted to the Tax Offi	
mportant: Care sh	nould be taken when co	ompleting EFT details as the payment of a	any refund will be	made to the ac	count specified.	
	Ja Y '' Näirn Supera	nnuation Fund				
5 WWCibhBl			1			
5 WWti bhBl	ber 065146 1024	8351	Client R	eference NA	MRN	
Account Num		8351 ctly to the specified account	Client R	eference NA	AIRN	

Date

Tax Agent's 8 YWUfUijcb

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
Contact name	Phillip Lounder	Client Reference	NAIRN	
Agent's Phone Num	ber 08 82719555	łUI'5 [YbhˈBia VYf	25452589	