Joseph Superannuation Fund

#### **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 However, you cannot lodge your tax return electronically if you do not quote your TFN.

TFN: 936 405 564

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

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	936 405 564	Year	2018
Name of partnership, trust, fund or entity	Joseph Superannuation Fund		

I authorise my tax agent to electronically transmit this tax return via an approved ATO electronic channel.

Before making this declaration please check to ensure that all income has been disclosed and the tax return is true and correct in every detail. If you are in doubt about any aspect of the tax return, place all the facts before the Tax Office. The tax law provides heavy penalties for false or misleading statements on tax returns

#### Declaration: I declare that:

- · the information provided to the agent for the preparation of this tax return, including any applicable schedules is true and correct, and
- the agent is authorised to lodge this tax return. Signature of partner, Date trustee or director

#### **PART B**

#### Electronic funds transfer consent

This declaration is to be completed when an electronic funds transfer (EFT) of a refund is requested and the tax return is being lodged through an approved ATO electronic lodgment 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 referer numb	per		
Account Nar	me Joseph Superannuation Fund		
authorise the refund to	be deposited directly to the specified account.	Date	

Client Ref: JOSE0008 Agent: 76696-008

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

2018

TFN: 936 405 564

#### 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 2018 (NAT 71287).

The Self-managed superannuation fund annual return instructions 2018 (NAT 71606) (the instructions) can assist you to complete this annual return.

ection A: Fund information								
Tax file number (TFN)	936 405 564							
	uest your TFN. You are not obliged to quote your TFN but rannual return. See the Privacy note in the Declaration.	not quoting it co	uld increase the					
Name of self-managed superannuat	ion fund (SMSF)							
	Joseph Superannuation Fund	Joseph Superannuation Fund						
Australian business number (ABN)	24 533 296 330							
Current postal address 74 Division Street								
	WELSHPOOL	WA	6106					
SMSF auditor Auditor's name	Mr							
Auditor's name Title Family name	Boys							
First given name	Tony							
Other given names								
SMSF Auditor Number	100 014 140							
Auditor's phone number	04   10712708							
Use Agent address details? Postal address	PO Box 3376							
	RUNDLE MALL	SA	5000					
	Date audit was completed A 28/03/2019		<u>,</u>					
	Was Part B of the audit report qualified ?							
	If the audit report was qualified, have the reported compliance issues been rectified?	С						

7

TFN: 936 405 564

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.								
	Α	Financial institution You must provide the f tax refunds paid to a d	inancial institution deta	ails of your fund's nor	ninated super a	ccount. If you would ion details at B.	d like your fund's		
		Fund BSB number (must be six digits)	016363	Fund account num	ber 264823	289			
		Fund account name (fo	r example, J&Q Citizer	ATF J&Q Family SF	l				
		Joseph Supera	nnuation Fund						
	В	Financial institution	n details for tax refu	unds only		Us	e Agent Trust Account?		
		If you would like your f Tax refunds cannot be	und's tax refunds paid	to a different accour	t, provide additi relevant instruc	onal financial institutions.)	ution details.		
		Fund BSB number (must be six digits)		Account num	ber				
		Fund account name (fo	r example, J&Q Citizer	n ATF J&Q Family SF					
	С	Electronic service a		alias to communicate	with your fund	about ATO super p	payments.		
8	St	Governn	Australian superannu ist deed allow accepta nent's Super Co-contrib Low Income Super Coi	nce of the bution and	Y	Fund benefit s	structure B A Code		
9	N	as the fund wound u	Ip during the incom If yes, provide the of which fund was wo	date on Day Month	Year	Have all tax and obligations be	payment		
10	Die	kempt current pension d the fund pay retirement the income year?		n income stream ber	efits to one or n	nore members	N Print <b>Y</b> for yes or <b>N</b> for no.		
		o claim a tax exemption ne law. Record exempt of			t least the minim	num benefit paymer	nt under		
	lf	No, Go to Section B: Inc	come						
	If	Yes Exempt current p	ension income amount	Α					
		Which method did	l you use to calculate y	our exempt current p	ension income?				
		Segre	egated assets method	В					
		Unsegre	egated assets method	C Was an	actuarial certific	cate obtained?	Print <b>Y</b> for yes		
		Did the fund have any of	other income that was	assessable?	Print Y for yes or N for no.	If Yes, go to Secti	on B: Income		
							g no-TFN quoted contributions. omplete Section B: Income.)		
		you are entitled to clain nese at Section D: Incom							

# Section B: Income

Do not complete this section if all superannuation interests in the SMSF were supporting superannuation income streams in the retirement phase for the entire year, there was no other income that was assessable, and you have not realised a deferred notional gain. If you are entitled to claim any tax offsets, you can record these at Section D: Income tax calculation statement.

Income	Did you have a capital gains tax	<b>G</b> N Print <b>Y</b> for ye	\$10,000 or you e	I loss or total capital gain is greater lected to use the CGT relief in 2017 onal gain has been realised, complet	and
	(CGT) event during the year?	or N for no.	Code	ital Gains Tax (CGT) schedule 2018	
	Have you applied an exemption or rollover?	M Print <b>Y</b> for ye or <b>N</b> for no.	28		
			Net capital gain	Α	
		Gross rent and other	r leasing and hiring income	<b>B</b> 26,400	
			Gross interest	<b>C</b> 148	
		Fo	restry managed investment scheme income	Y	
Gros	s foreign income				
D1			Net foreign income	D	Loss
	Austral	an franking credits fror	n a New Zealand company	Е	
			Transfers from foreign funds		Num
			Gross payments where ABN not quoted		
	n of assessable contributions ssable employer contributions		Gross distribution from partnerships		Loss
R1	0		* Unfranked dividend amount	J	
plus Asse	essable personal contributions 0		* Franked dividend amount	K	
ı	TFN-quoted contributions		* Dividend franking credit		
less Trai	must be included even if it is zero)		* Gross trust distributions	М	Code
R6	rance company or PST 0	(F	Assessable contributions 11 plus R2 plus R3 less R6)		
	n of non-arm's length income non-arm's length private				
	company dividends		* Other income	S	Code
nlus * Net	non-arm's length trust distributions		*Assessable income		]
U2	Thorram 3 length trust distributions		due to changed tax status of fund	Т	
plus * Net	other non-arm's length income	Net no	on-arm's length income (subject to 45% tax rate)	U	
#This is a	mandatory label		(U1 plus U2 plus U3)		
* If an amo	bunt is entered at this label, check the s to ensure the correct tax has been applied.		GROSS INCOME (Sum of labels A to U)	W	Loss
-		Exer	npt current pension income	Υ	
		тотл	AL ASSESSABLE INCOME		Loss

## 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 EXPENS	ES
Interest expenses within Australia	7,893	A2	
Interest expenses overseas	B1	B2	
Capital works expenditure	D1	D2	
Decline in value of depreciating assets	s <b></b>	E2	
Insurance premiums - members	F1	F2	
Death benefit increase	e G1		
SMSF auditor fee	<b>H1</b> 600	H2	
Investment expense	s <b>[1</b> 7,260	12	
Management and administration expense	s <b>3</b> 1	J2	
Forestry manage investment scheme expension	d U1	Code.	Code
Other amounts	s L1	L2	
Tax losses deducted	<b>M1</b>		
	TOTAL DEDUCTIONS	TOTAL NON-DEDUCTIBLE EXPENS	SES
	N 18,208		
	(Total A1 to M1)	(Total A2 to L2)	
	#TAXABLE INCOME OR LOSS	1033	
	<b>O</b> 8,340	(N plus V)	
	(TOTAL ASSESSABLE INCOME TOTAL DEDUCTIONS)	IE less (14 plus 1)	
#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 2018 on how to complete the calculation statement.

#Taxable income A	8,340
(an amount must be included	even if it is zero)
#Tax on taxable income T1	1,251.00
(an amount must be included	even if it is zero)
#Tax on no-TFN- quoted contributions	0.00
(an amount must be included	even if it is zero)
Gross tax B	1,251.00
(T1 p	olus J)

Foreign income tax offset  C1  Rebates and tax offsets  C2	Non-refundable non-carry forward tax offsets  0.00  (C1 plus C2)
	SUBTOTAL 1  T2  1,251.00  (B less C –cannot be less than zero)
Early stage venture capital limited partnership tax offset  D1  Early stage venture capital limited partnership tax offset carried forward from previous year  D2  Early stage investor tax offset  D3  Early stage investor tax offset carried forward from previous year	Non-refundable carry forward tax offsets  0.00  (D1 plus D2 plus D3 plus D4)
	T3 1,251.00 (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  E4	Refundable tax offsets  0.00  (E1 plus E2 plus E3 plus E4)

#TAX PAYABLE T5	1,251.00
(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 foreign resident capital gains withholding amounts  H8	Eligible credits  H  0.00  (H1 plus H2 plus H3 plus H5 plus H6 plus H8)
	(m) plus H2 plus H3 plus H5 plus H6 plus H8)
	#Tax offset refunds (Remainder of refundable tax offsets).  (unused amount from label E-an amount must be included even if it is zero)
	PAYG instalments raised
	K
	Supervisory levy
	Supervisory levy
	Supervisory levy adjustment for wound up funds
	M
	Supervisory levy adjustment
	for new funds
	N
	Total amount of tax payable S 1,510.00
#This is a mandatory label.	(T5 plus G less H less I less K plus L less M plus N)
-	
ection E: <b>Losses</b> Losses	
If total loss is greater than \$400,000	Tax losses carried forward
If total loss is greater than \$100,000, complete and attach a Losses	to later income years
schedule 2018.	Net capital losses carried V
	forward to later income years
Net capital losses brought forward	Net capital losses carried forward
from prior years	to later income years
Non-Collectables	
Collectables	

# Section F / Section G: Member Information

			See	the Privacy	note in	the Dec	claration.	Member			1
Title	MR		Member'sTFN 370 087 231								1
Family name	CHEEDHAPARAMBII	L						Account	status	0	Cod
First given name	JOSEPH										
Other given names											
			Date of birth 0	2/06/19	65		If deceased date of death				
Contributions							•		1		
Refer to instruction for completing thes labels.			OPENING AC	CCOUNTBA			181,	813.87			
iabeis.		Employer contributions A									
			ABN of principa	al employer	<b>A1</b>						
			Persor	nal contribu	tions	В		148.00			
	C	CGT small	l business retire	ment exemp	otion	С					
	CGT si	small busin	ness 15-year ex	emption am	ount	D					
			Persona	al injury eled	tion	B					
			Spouse and ch								
	Assessal	ble foreign superannuation fund amount  ble foreign superannuation fund amount  J									
	Non-assessa										
	Tra	ansfer fror	m reserve: asse	essable am	ount	K					
	Transfe	sfer from reserve: non-assessable amount									
		Contributions from non-complying funds and previously non-complying funds									
	Any other contrib	and p butions (in	oreviously non-outling Super (	complying to Co-contributer or Contribute	inds (	M					
								148.00			
Other transaction	IS 	_,	TOTAL CC	ONTRIBUTI	ONS	N		140.00			
	ase account balance		Allocated ea	rnings or lo	sses	0	1,	553.22	Loss		
S1	183,515.09		Inward rollove	rs and tran	sfers	Р					
- Non CDBIS	e account balance	C	Outward rollove	rs and tran	sfers	Q					
S2	a account balance			np Sum pay					Code		
Retirement phase account balance -CDBIS			Income stream payment R2								
S3			Income	stream pay	ment	<b>KZ</b>			 -ı		
TR	IS Count	С	LOSING ACC	OUNT BALA	NCE	S	183,	515.09			
	S1 plus S2 plus S3					l plus S2 plus S3					
			Accumulati	ion phase v	alue	X1					
			Retirem	nent phase v	alue	X2					

SMSF Form 2018	·	Joseph Superannuation Fund TFN: 9							36 405 564		
				See the Privacy							
Title	MRS		l	Member'sTFN	340	551	992	Memberi	Number		2
Family name	JOSEPH							Account	status	0	Code
First given name	JESSIE										
Other given names											
		Date	of birth	11/10/19	967		If decease date of deat	, k h			
Contributions							1.50		7		
Refer to instruction for completing thes		0	PENING	ACCOUNTBA	LANCE	E	159	,797.14			
labels.		Employer contributions A									
		ABN	l of princ	ipal employer	<b>A1</b>						
			Per	sonal contribu	utions	В		148.00			
	C	GT small bus	iness ret	tirement exem	ption	С					
	CGT sr	nall business	15-year	exemption an	nount	D					
			Pers	onal injury ele	ection	旦					
		Spouse and child contributions									
		Other third party contributions									
	Assessat	ble foreign superannuation fund amount									
	Non-assessal	ble foreign superannuation fund amount									
	Tra	nsfer from re	serve: a	issessable an	nount	K					
		er from reserve: non-assessable amount									
		Contributions from non-complying funds and previously non-complying funds									
	Any other contrib	utions (includ and Low In	ing Supe come Su	er Co-contribu uper Contribut	itions ions)	М			·		
Other transaction	าร		TOTAL	CONTRIBUT	IONS	N		148.00			
Accumulation ph	nase account balance	А	llocated	earnings or l	osses	0	1	,365.13	Loss		
Retirement phas	e account balance	Inw	ard rollo	overs and trai	nsfers	Р					
- Non CDBIS		Outw	ard rollo	overs and trai	nsfers	Q			Code		
Retirement phase account balance -CDBIS		Lump Sum payment R1									
		Income stream payment R2							Code		
TR	RISCount	CLOS	SING AC	COUNT BAL	ANCE			,310.27			
							1 plus S2 plus S3	<u></u>	_		
			Accumu	lation phase		X1					
			Retir	ement phase	value	X2					

#### **ASSETS** 15

15a Australian managed investments

Listed trusts	Α
Unlisted trusts	В
Insurance policy	С
er managed investments	D

Othe

Hrs

# Section I: Taxation of financial arrangements

17 Taxation of financial arrangements (TC	DFA)		
	Total TOFA gains	H	
	Total TOFA losses		
Section J: Other information Family trust election status			
	ng, a family trust election, write the four-digit income year (for example, for the 2017–18 income year, write 2018).		
	y trust election, print R for revoke or print V for variation, ch the Family trust election, revocation or variation 2018.		
or fund is making one or mor	ction, write the earliest income year specified. If the trust e elections this year, write the earliest income year being posed entity election or revocation 2018 for each election		
	voking an interposed entity election, print R, and complete I attach the Interposed entity election or revocation 2018		
Section K:Declarations			
Penalties may be imposed for false or mis	leading information in addition to penalties relating	g to any t	ax shortfalls.
Privacy The ATO is authorised by the Taxation Administrate the TFN to identify the entity in our records. It is not the processing of this form may be delayed.	at about any aspect of the annual return, place all the fact ation Act 1953 to request the provision of tax file numbers of an offence not to provide the TFN. However if you do a ation and disclose it to other government agencies. For in	s (TFNs). \ not provide	Ve will use the TFN,
records. I have received the audit report and I am	authorised this annual return and it is documented as surn aware of any matters raised. I declare that the informational documentation is true and correct. I also authorise applicable).	tion on this	annual o make <u>Day Month Year</u>
		Date	28/03/2019
Preferred trustee or director contact detai	ls:		
Title	MR		
Family name	CHEEDHAPARAMBIL		
First given name	JOSEPH		
Other given names			
S.i.s. given names	Area code Number		
Phone number	08 92721355		

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

Time taken to prepare and complete this annual return

Email address

Non-individual trustee name (if applicable)

ABN of non-individual trustee

76696008

Tax agent number

TFN: 936 405 564

Reference number JOSE0008

# TAX AGENT'S DECLARATION:

, ESSAY BUSINESS SER	VICES PTY LTD	
	perannuation fund annual return 2018 has been prepared in accordance given me a declaration stating that the information provided to lodge this annual return.	
Title	MR	
Family name	ADIYODI	
First given name	SUNIL	
Other given names		
Tax agent's practice	ESSAY BUSINESS SERVICES PTY LTD	
Tax agent's phone number	Area code Number 92742844	