Self-managed superannuation fund annual return

Who should complete this annual return?

Only self-managed superannuation funds (SMSFs) can complete this annual return. All other funds must complete the Fund income tax return 2023 (NAT 71287).

1

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).

To complete this annual return

- Print clearly, using a BLACK pen only.
- Use BLOCK LETTERS and print one character per box.



Place $|\mathcal{X}|$ 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

Section A: Fund information

******* Tax file number (TFN)

To assist processing, write the fund's TFN at the top of pages 3, 5, 7 and 9.

The ATO is authorised by law to request your TFN. You are not obliged to quote your TFN but not quoting it could increase the chance of delay or error in processing your annual return. See the Privacy note in the Declaration.

2 Name of self-managed superannuation fund (SMSF) Storrs Superannuation Fund

3 Australian business number (ABN) (if applicable) 78526948262 **Current postal address** 4 740 Donnellys Castle Road Suburb/town State/territory Postcode POZIERES QLD 4352 5 Annual return status Is this an amendment to the SMSF's 2023 return? No Yes

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

B No

Yes

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Fund's tax file number (TFN) ********

6 SMSF auditor

Auditor's name			
Title: MR			
Family name			
Boys			
First given name	Other given names		
Anthony			
SMSF Auditor Number Auditor's phone	number		
100014140 04 1071	2708		
Postal address			
PO Box 3376			
Suburb/town		State/territory	Postcode
RUNDLE MALL		SA	5000
Day Month Date audit was completed	Year		
Was Part A of the audit report qualified?	B No 🗙 Yes 🗌		
Was Part B of the audit report qualified?	C No 🗙 Yes 🗌		
If Part B of the audit report was qualified, have the reported issues been rectified?	D 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 Fund's financial institution account details

This account is used for super contributions and rollovers. Do not provide a tax agent account here.

Fund BSB number 182512		Fund account number	962163069				
Fund account name							
Storrs Superannuation Fund							

I would like my tax refunds made to this account. \square Go to C.

B Financial institution account details for tax refunds

This account is used for tax refunds. You can provide a tax agent account here.

BSB number	Account number	
Account name		

C Electronic service address alias

Provide the electronic service address alias (ESA) issued by your SMSF messaging provider. (For example, SMSFdataESAAlias). See instructions for more information.

smsfdataflow

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	Fund's tax file number (TFN)
8	Status of SMSF Australian superannuation fund A No Yes X Fund benefit structure B A Code
	Does the fund trust deed allow acceptance of the Government's Super Co-contribution and Low Income Super Amounts?
9	Was the fund wound up during the income year? No X Yes) If yes, provide the date on which the fund was wound up
10	Exempt current pension income Did the fund pay retirement phase superannuation income stream benefits to one or more members in the income year?
	To claim a tax exemption for current pension income, you must pay at least the minimum benefit payment under the law. Record exempt current pension income at Label A.
	No Go to Section B: Income.
	Yes X Exempt current pension income amount A \$ 50117 •00
	Which method did you use to calculate your exempt current pension income?
	Segregated assets method B
	Unsegregated assets method C Was an actuarial certificate obtained? D Yes
	Did the fund have any other income that was assessable?
	E Yes Go to Section B: Income.
	No X Choosing 'No' means that you do not have any assessable income, including no-TFN quoted contributions. Go to Section C: Deductions and non-deductible expenses. (Do not complete Section B: Income.)
	If you are entitled to claim any tax offsets, you can list these at Section D: Income tax calculation statement.

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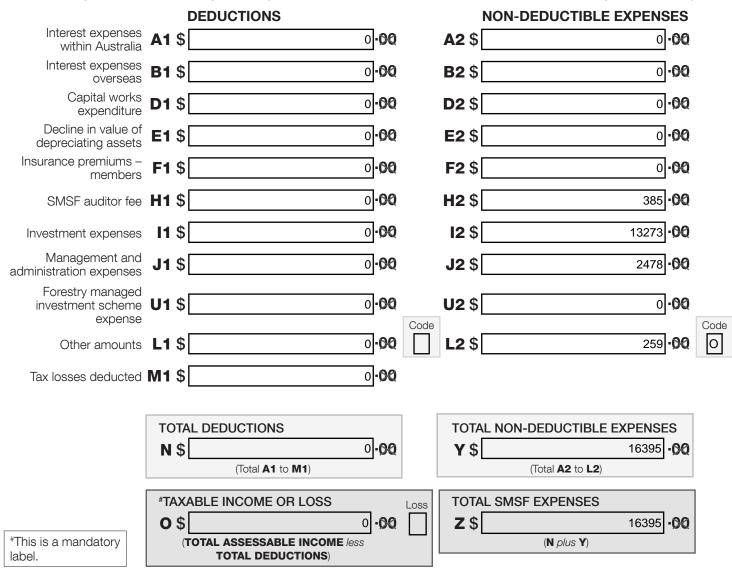
Do not complete this section if all superannuation interests in the SMSF were supporting superannuation income streams in the retirement phase for the entire year, there was no other income that was assessable, and you have not realised a deferred notional gain. If you are entitled to claim any tax offsets,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

Income			If the total capital loss (or total capital gain is greater than
Did you have a capi (CGT) event durir	tal gains tax G ng the year?	No Yes	\$10,000 or you elected 2017 and the deferred	d to use the transitional CGT relief in notional gain has been realised, <i>Capital gains tax (CGT) schedule 20</i>
		ſ	Code	Capital gains tax (CGT) schedule 20
Have you exemption	u applied an or rollover?	No Yes		
		Net capital gain	A \$	-00
Gross rer	nt and other leas	ing and hiring income	В\$.00
		Gross interest	C \$.00
	Forestry	managed investment scheme income	X \$.00
Gross foreign inc			- +	Loss
91 \$	-00	Net foreign income	D \$	-00
Australian franking	credits from a N	ew Zealand company	E \$	• 00 Number
		Transfers from foreign funds	F \$	•00
		ross payments where ABN not quoted	Н\$.00
Calculation of assessable Assessable employer co		Gross distribution from partnerships	I \$	-00
1 \$	-00	*Unfranked dividend amount	J \$.00
Assessable personal co		*Franked dividend amount	К \$.00
<i>is</i> #*No-TFN-quoted cor		*Dividend franking credit	1.5	.00
(an amount must be include	0-00 ed even if it is zero)	*Gross trust		
s Transfer of liability to life		distributions		
company or PS	- 00	Assessable contributions (R1 plus R2 plus R3 less R6)	R \$	-00
Calculation of non-arm's le et non-arm's length private co	•	*Other income	S \$	Code
1 \$	-00		• •	
s *Net non-arm's length trus		*Assessable income due to changed tax status of fund	Т \$.00
2 \$	-00			
<pre>//s *Net other non-arm's ler 3 \$</pre>	ngth income	Net non-arm's length income (subject to 45% tax rate) (U1 plus U2 plus U3)	U \$.00
		· · · · · · · · · · · · · · · · · · ·		
[#] This is a mandatory label.		GROSS INCOME (Sum of labels A to U)	w \$	
*If an amount is entered at this label,	Exempt cu	irrent pension income	Y \$.00
check the instructions to ensure the correct				Loss
tax treatment has been applied.		ME (W less Y) V J		

Section C: Deductions and non-deductible expenses

12 Deductions and non-deductible expenses

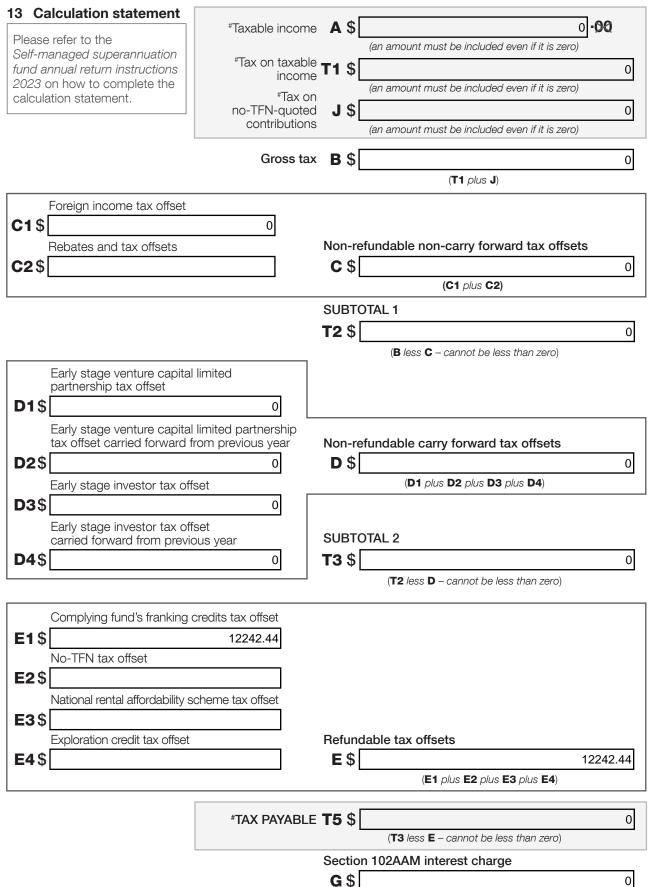
Under 'Deductions' list all expenses and allowances you are entitled to claim a deduction for. Under 'Non-deductible expenses', list all other expenses or normally allowable deductions that you cannot claim as a deduction (for example, all expenses related to exempt current pension income should be recorded in the 'Non-deductible expenses' column).



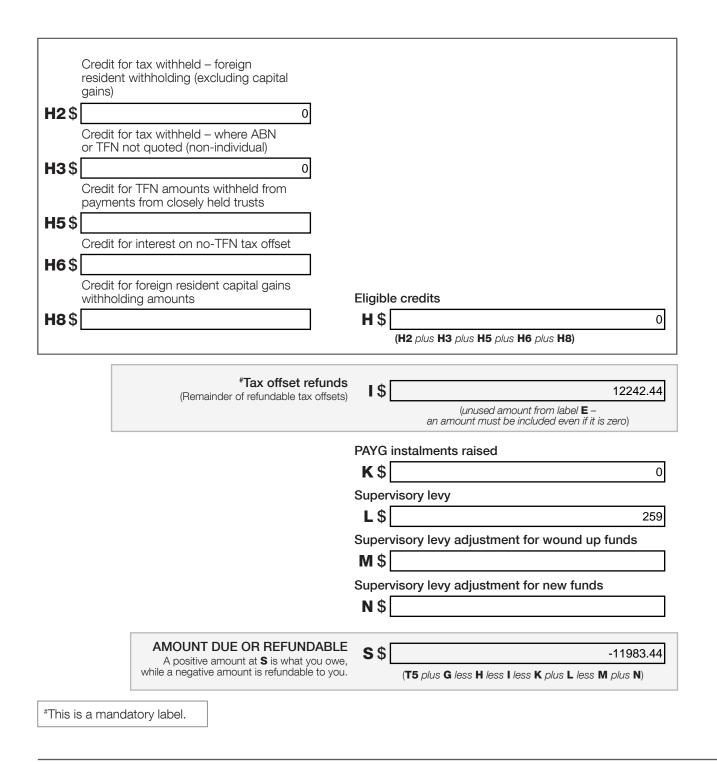
Section D: Income tax calculation statement

#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.



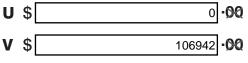
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Section E: Losses

14 Losses

If total loss is greater than \$100,000, complete and attach a *Losses schedule 2023*. Tax losses carried forward to later income years Net capital losses carried forward to later income years



Section F: Member information

MEMBER 1

Title: MRS				
Family name				
Storrs				
First given name	Other given	names		
Christine				
Member's TFN			Day Month Date of birth 13/02/1948	Year
See the Privacy note in the Declaration.			Date of birtin 13/02/1948	
Contributions OPENING ACCOU	JNT BALANCE	\$	386328.02	
Refer to instructions for completing these lab	els.	Procee	eds from primary residence disposal	1
Employer contributions A \$ ABN of principal employer	0	Receip H1 Assess	able foreign superannuation fund amount]
A1 Personal contributions B \$		I \$ Non-as	ssessable foreign superannuation fund amo	
CGT small business retirement exemption C \$	0	- 1	er from reserve: assessable amount	1
CGT small business 15-year exemption am	nount 0	L \$		
Personal injury election E \$ Spouse and child contributions	0	Contrib and pre	outions from non-complying funds eviously non-complying funds	
F \$ Other third party contributions	0	(includi Low In	her contributions ing Super Co-contributions and come Super Amounts)	
G \$	0	M \$	0	
TOTAL CONTRIBUTIONS		of labels	0 A to M)	
Other transactions Allo	ocated earnings or losses	3 0 4	27933.14	Loss
Accumulation phase account balance S1 \$ 0	Inward rollovers and transfers Outward	# P\$	S0	2
Retirement phase account balance – Non CDBIS	rollovers and transfers	d Q \$		Code
S2 \$ 404601.16 Retirement phase account balance – CDBIS	payments Income	ΠIΨ		
S3 \$ 0	stream payments	R2 \$	9660	
0 TRIS Count CLOSING ACCO	UNT BALANC	e S \$	(S1 <i>plus</i> S2 <i>plus</i> S3)]
	ion phase value]
	ent phase value imited recourse]
borrowing arrang	gement amoun	e Y \$		J

1000%+' \$' MS

Fund's tax file number (TFN)

Title: MR				
Family name				
Storrs				
First given name Graham	Other given names			
	Loward		Day Month	Year
Member's TFN See the Privacy note in the Declaration.		Date of birth	04/06/1955	
Contributions OPENING ACCOUNT	T BALANCE \$		486820.61	
Refer to instructions for completing these labels	. Proceeds fro	om primary residence di	sposal	
Employer contributions	Receipt date	Day Maath		
A \$ 0	H1	Day Month	Year	
ABN of principal employer		oreign superannuation fu	ind amount	
A1			0	
Personal contributions	+	able foreign superannua	tion fund amount	
B \$ 0	J \$		0	
CGT small business retirement exemption	- +	n reserve: assessable ar	-	
C \$ 0	K \$		0	
CGT small business 15-year exemption amount	Transfer from	n reserve: non-assessat	ble amount	
D \$ 0	L \$		0	
Personal injury election	Contribution	s from non-complying fu	unds	
E \$ 0		sly non-complying funds		
Spouse and child contributions	T \$		0	
F \$0	Any other co (including Su	iper Co-contributions ar Super Amounts)	nd	
Other third party contributions		Super Amounts)		
G \$0	М\$		0	
TOTAL CONTRIBUTIONS N \$		0		
	(Sum of labels A to M)		
				Loss
Other transactions Alloca	ited earnings or losses	\$	35226.94	
[]	Inward			
	rollovers and P S	\$	0	
S1 \$0	transfers Outward			
	rollovers and Q	\$	0	
– Non CDBIS	transfers			Code
\$2 \$ 473307.55	Lump Sum R1 S	\$	36570	A
Retirement phase account balance				Code
	Income stream R2 \$	\$	12170	M
S3 \$0	payments	۳ <u> </u>		
				1
0 TRIS Count CLOSING ACCOUN	NT BALANCE S	5	473307.55	
		(S1 plus S2 plu	IS S3)	
Accumulation	phase value X1 S	Þ		
Retirement	phase value X2 S	5		
Outstanding limi	ted recourse 🗸			
borrowing arranger	ment amount	P		

15 ASSETS

15a	Australian managed investments	Listed trusts	A	\$	105140	-00
		Unlisted trusts	В	\$	0	-00
		Insurance policy	С	\$	0	-00
	Othe	er managed investments	D	\$	0	-00
15b	Australian direct investments	Cash and term deposits	E	\$	181525	.00
	Limited recourse borrowing arrangements	Debt securities	F	\$	0	-00
	Australian residential real property J1 \$ 0.00	Loans	G	\$	0	-00
	Australian non-residential real property	Listed shares	Н	\$	574403	-00
	J2 \$0 •00 Overseas real property	Unlisted shares		\$	0	-00
	J3 \$ 0.00 Australian shares	Limited recourse		\$	0	-00
	J4 \$0.00	Non-residential real property	Κ	\$	0	-00
	Overseas shares J5 \$ 0.00	Residential		\$	0	-00
	Other			\$	0	-00
	J6 \$0 •00 Property count	Other assets		\$	16840	-00
	J7 0					
15c	Other investments	Crypto-Currency	N	\$	0	-00
15d	Overseas direct investments	Overseas shares	Ρ	\$	0	.00
	Overseas non	-residential real property	Q	\$	0	-00
	Overseas	residential real property	R	\$	0	-00
	Oversea	s managed investments	S	\$	0	-00
		Other overseas assets	т	\$	0	-00
	TOTAL AUSTRALIAN AND (Sum of label		U	\$	877908	-00
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?	A No 🗙 Yes 🚺		\$[-00

				1000%+	' \$' M	
	Fund	l's tax file number (TF	N) *******		
5f	Limited recourse borrowing arrangements If the fund had an LRBA were the LRBA borrowings from a licensed financial institution?	No Yes				
	Did the members or related parties of the fund use personal guarantees or other security for the LRBA?	3 No Yes				
3	LIABILITIES					
	Borrowings for limited recourse borrowing arrangements					
	V1 \$00					
	Permissible temporary borrowings					
	Other borrowings L V3 \$.00	Borrowings	V	\$	0 0-00	
I	Total member closir (total of all CLOSING ACCOUNT BALANCE s from	ng account balances m Sections F and G)	w	\$	877908 - 00	
		Reserve accounts	Χ	\$	0 00	
		Other liabilities	Y	\$	0 -00	
		TOTAL LIABILITIES	Ζ	\$	877908 -00	

Section I: Taxation of financial arrangements

17	Taxation	of finan	cial arra	angements	(TOFA)	
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Total TOFA gains	Н\$	-00
Total TOFA losses	Ι\$	-00

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 2022–23 income year, write **2023**).

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 2023.*

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 2023* for each election.

If revoking an interposed entity election, print **R**, and complete and attach the *Interposed entity election or revocation 2023*.

Α	
В	

0	
U	

D	

Section K: Declarations

Penalties may be imposed for false or misleading information in addition to penalties relating to any tax shortfalls.

Important

Before making this declaration check to ensure that all income has been disclosed and the annual return, all attached schedules and any additional documents are true and correct in every detail. If you leave labels blank, you will have specified a zero amount or the label was not applicable to you. If you are in doubt about any aspect of the annual return, place all the facts before the ATO.

Privacy

The ATO is authorised by the *Taxation Administration Act 1953* to request the provision of tax file numbers (TFNs). We will use the TFN to identify the entity in our records. It is not an offence not to provide the TFN. However if you do not provide the TFN, the processing of this form may be delayed.

Taxation law authorises the ATO to collect information and disclose it to other government agencies. For information about your privacy go to **ato.gov.au/privacy**

TRUSTEE'S OR DIRECTOR'S DECLARATION:

I declare that, 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	Day	Month /	/	Year
Preferred trustee or director contact details:		Date		/	/	
Title: MRS						
Family name						
Storrs						
First given name Other gi	ven names					
Christine						
Phone number 04 13112504 Email address						
Non-individual trustee name (if applicable)						
Time taken to prepare and completion of Taxation, as Registrar of the Australian provide on this annual return to maintain the integrity of the return tax AGENT'S DECLARATION:	Business Register, may us	se the ABN	I rs I and b o the in	usiness de structions.	tails wł	nich you
I declare that the Self-managed superannuation fund annual ret provided by the trustees, that the trustees have given me a dec correct, and that the trustees have authorised me to lodge this	laration stating that the in					
Tax agent's signature		1				
		Date	Day	Month	/	Year
Tax agent's contact details Title: MRS Family name						
Reissis						
	ven names			I		
Angela						
Tax agent's practice						
Connectus Accountants						
Tax agent's phone number Reference 04 68339809 STORRSS			Tax ag 26071	ent numbe 945	er	