# Self-managed superannuation fund annual return

To complete this annual return

this	ly self-managed superannuation funds (SMSFs) can complete sannual return. All other funds must complete the <i>Fund</i>	<ul> <li>Print clearly, using a BLACK pen only.</li> <li>Use BLOCK LETTERS and print one characteristics.</li> </ul>	cter per box.
inc	ome tax return 2023 (NAT 71287).	8 M / T H 8 T	
0	The Self-managed superannuation fund annual return instructions 2023 (NAT 71606) (the instructions) can assist you to complete this annual return.	■ Place  in ALL applicable boxes.	
•	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).	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 information	To assist processing, write the	fund's TFN at
1	Tax file number (TFN) 941024579	the top of pages 3, 5, 7 and 9.	
	The ATO is authorised by law to request your TFN. You are the chance of delay or error in processing your annual returns.	e not obliged to quote your TFN but not quoting urn. See the Privacy note in the Declaration.	it could increase
2	Name of self-managed superannuation fund (SMSF		
L 8	k J De Silva Superannuation Fund		
_			
3	Australian business number (ABN) (if applicable) 7439	95259254	
4	Current postal address		
11	Daniel St		
Sub	purb/town	State/territory	Postcode
Gra	anville	NSW	2142

OFFICIAL: Sensitive (when completed) Page 1

**Annual return status** 

Is this an amendment to the SMSF's 2023 return?

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

Who should complete this annual return?

1000%+' \$' MS

6 SM Auditor's	ISF auditor
Title:	s riditie
Family nar	me
First given	name Other given names
SMSF A	uditor Number Auditor's phone number
Postal a	ddress
Suburb/to	wn State/territory Postcode
	Day Month Year
Date aud	dit was completed A
Mac Dar	t A of the audit report qualified?
vvas i ai	TA Of the addit report qualified:
Was Par	t B of the audit report qualified? C No 🔀 Yes 🔲
	of the audit report was qualified,
have the	reported issues been rectified?
	rectronic funds transfer (EFT) need your self-managed super fund's financial institution details to pay any super payments and tax refunds owing to you.  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  Fund account number
	Fund account name
	I would like my tax refunds made to this account. 📈 Go to C.
_	
В	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
С	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

Fund's tax file number (TFN) 941024579

	1000%-' \$' MS
	Fund's tax file number (TFN) 941024579
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 Yes   If yes, provide the date on which the fund was wound up   Day Month Year Have all tax lodgment and payment obligations been met? No Yes
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 \$ 19577
	Which method did you use to calculate your exempt current pension income?
	Segregated assets method <b>B</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 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.)
	If you are entitled to claim any tax offsets, you can list these at Section D: Income tax calculation statement.

**OFFICIAL: Sensitive** (when completed)

Do not complete this section if all superannuation interests in the SMSF were supporting superannuation income streams in

l041	024579	
1 T T	027010	

# Section B: Income

				e, and you <b>have not</b> realised a deferre D: Income tax calculation statement.
1 Income  Did you have a capit  (CGT) event durin	tal gains tax g the year?	No Yes	\$10,000 or you elected 2017 and the deferred	or total capital gain is greater than d to use the transitional CGT relief in I notional gain has been realised, a <i>Capital gains tax (CGT) schedule 202</i>
	applied an or rollover?	No Yes	Code	
		Net capital gain	A \$	-00
Gross rer	nt and other leasir	ng and hiring income	В\$	-00
		Gross interest	C \$	-00
	Forestry r	managed investment scheme income	X \$	-00
Gross foreign inc				Loss
D1 \$	-90	Net foreign income	D \$	.00
Australian franking	credits from a Ne	w Zealand company	E \$	-00 Number
		Transfers from foreign funds	F \$	-00 Number
	Gro	oss payments where	н \$	-00
Calculation of assessable Assessable employer co		ABN not quoted Gross distribution	1\$	-00 Loss
R1 \$	-00	from partnerships *Unfranked dividend		
plus Assessable personal co	ontributions	amount *Franked dividend	J \$	-90
R2 \$	-00	amount	K \$	-00
plus #*No-TFN-quoted cor	tributions -60	*Dividend franking credit	L \$	- <b>90</b> Code
(an amount must be include	ed even if it is zero)	*Gross trust distributions	м \$	-00
less Transfer of liability to life company or PS	insurance l T	Assessable		
R6 \$	-00	contributions (R1 plus R2 plus R3 less R6)	R \$	-00
Calculation of non-arm's le	ength income			Code
*Net non-arm's length private co	mpany dividends	*Other income	<b>s</b> \$	-90
plus *Net non-arm's length trus		*Assessable income due to changed tax	т \$	-00
U2 \$	-00	status of fund	Ψ	
plus *Net other non-arm's ler	•	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 <b>A</b> to <b>U</b> )	w \$	-90 Loss
*If an amount is entered at this label,	Exempt cur	rent pension income	Y \$	-00
check the instructions to ensure the correct tax treatment has been applied.		SESSABLE IE (W less Y) V \$		-00 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-DEDU	JCTIBLE EXPENSES
Interest expenses within Australia	A1 \$	0-00	A2 \$	0 -00
Interest expenses overseas	B1 \$	0-00	B2 \$	0 -00
Capital works expenditure	D1 \$	0-00	D2 \$	0 -00
Decline in value of depreciating assets	E1 \$	0-00	E2 \$	0 -00
Insurance premiums – members	F1 \$	0-00	F2 \$	0 -00
SMSF auditor fee	H1 \$	0-00	H2 \$	11727 <b>-00</b>
Investment expenses	I1 \$	0-00	I2 \$	2534 <b>-00</b>
Management and administration expenses	J1 \$	0-00	J2 \$	0 -00
Forestry managed investment scheme expense	U1 \$	0 <b>-00</b>	U2 \$	0 <b>-00</b>
Other amounts	L1 \$	0-90	L2 \$	5429 -00
Tax losses deducted	M1 \$	0-00		
	TOTAL DEDUCTIONS		TOTAL WOLLDED	
	TOTAL DEDUCTIONS			UCTIBLE EXPENSES
	N \$(Total A1 to M1)	0-00	<b>Y</b> \$	19690 - <b>90</b>

#This is a mandatory label.

#TAXABLE INCOME OR LOSS		Loss			
0\$	0 -00	П			
(TOTAL ASSESSABLE INCOME /ess					
TOTAL DEDUCTIONS					

TOTAL SMSF EXPENSES								
<b>Z</b> \$		19690	-00					
(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 Ca	alculation statement				
Please refer to the Self-managed superannuation fund annual return instructions		#Taxable income	٠,	(an amount must be included even if it is zero)	Q
		#Tax on taxable income	T1 \$		0
	on how to complete the	#Tax on		(an amount must be included even if it is zero)	
Calcula	ation statement.	no-TFN-quoted	J \$		0
		contributions	•	(an amount must be included even if it is zero)	
		Gross tax	В\$		0
			_ • [	( <b>T1</b> <i>plus</i> <b>J</b> )	
	Foreign income tax offset				
C1\$		0			
	Rebates and tax offsets			efundable non-carry forward tax offsets	
C2\$			<b>C</b> \$		0
				(C1 plus C2)	
			SUBT	OTAL 1	
			<b>T2</b> \$		0
				(B less C – cannot be less than zero)	
	Early stage venture capital partnership tax offset	limited			
<b>D</b> 1\$	<del>-</del>	0			
_ · · •	Early stage venture capital	limited partnership			
	tax offset carried forward f	rom previous year	Non-re	efundable carry forward tax offsets	
<b>D2</b> \$		0	<b>D</b> \$		0
	Early stage investor tax off	set		(D1 plus D2 plus D3 plus D4)	
<b>D3</b> \$		0			
	Early stage investor tax off		SUBT	OTAL 2	
<b>D</b> 4\$	carried forward from previo	ous year 0	T3 \$	JIAL 2	0
<b>D</b> +0		<u> </u>	13 5	( <b>T2</b> less <b>D</b> – cannot be less than zero)	U
				(12 less D - Callifor De less triair 2010)	
	Complying fund's franking	credits tax offset			
<b>E1</b> \$					
	No-TFN tax offset				
<b>E2</b> \$					
	National rental affordability s	cheme tax offset			
<b>E3</b> \$					
	Exploration credit tax offset			dable tax offsets	
<b>E4</b> \$			<b>E</b> \$		0
				(E1 plus E2 plus E3 plus E4)	
		#TAX PAYABLE	T5 ¢		0
		IAA FAIABLE	199	(T3 less E – cannot be less than zero)	
			Section	n 102AAM interest charge	
			<b>G</b> \$		0
			<del>-</del>		

# Fund's tax file number (TFN) 941024579

	Credit for tax withheld – foreign resident withholding (excluding capital		
H2\$	gains)		
	Credit for tax withheld – where ABN or TFN not quoted (non-individual)		
Н3\$			
	Credit for TFN amounts withheld from payments from closely held trusts		
H5\$	paymente nom closely field tracte		
'	Credit for interest on no-TFN tax offset		
H6\$			
	Credit for foreign resident capital gains withholding amounts	Eligible credits	
H8\$	with louring amounts	H\$ 0	
		(H2 plus H3 plus H5 plus H6 plus H8)	
	#Tax offset refunds (Remainder of refundable tax offsets)		
	(nemainder of refundable tax offsets)	(unused amount from label <b>E</b> – an amount must be included even if it is zero)	
		,	
		PAYG instalments raised	
		<b>K</b> \$ 498	
		Supervisory levy L \$ 259	
		Supervisory levy adjustment for wound up funds	
		M \$	
		Supervisory levy adjustment for new funds	
		N \$	
	AMOUNT DUE OR REFUNDABLE  A positive amount at <b>S</b> is what you owe,	-2391	
	while a negative amount is refundable to you.		
#This is	a mandatory label.		
Sect	ion E: <b>Losses</b>		
14 Lo	2020	ax losses carried forward	
● If to	tal loss is greater than \$100.000.	to later income years 5 5	0 -00
con	nolete and attach a <i>l</i> osses	Net capital losses carried v \$ ard to later income years	0 -00

OFFICIAL: Sensitive (when completed)

schedule 2023.

# Section F: Member information

MEMBER 1						
Title: MRS						
Family name						
De Silva						
First given name	Other given r					
Jane	Shanthini ł	Kusum				
Member's TFN See the Privacy note in the Declaration. 171317623				Date of birth	Day Month 20/03/1950	Year
Contributions OPENING ACCOUN	NT BALANCE	\$			246288.96	
Refer to instructions for completing these label	0.	Procee <b>H</b> \$		n primary reside	nce disposal	
Employer contributions		Receipt		Day Mo		
<b>A</b> \$	0	H1		Day	THE TOTAL	
ABN of principal employer			able for	reign superannu	ation fund amount	
A1		I \$			0	
Personal contributions		Non-as	sessab	ole foreign supe	rannuation fund amou	nt
В \$	0	J \$		<u> </u>	0	
CGT small business retirement exemption		Transfe	r from	reserve: assess	able amount	
<b>C</b> \$	0	K \$			0	
CGT small business 15-year exemption amo	unt	Transfe	r from	reserve: non-as	sessable amount	
D \$	0	L \$			0	
Personal injury election		Contrib	utions	from non-comp	olying funds	
E \$	0		viously	/ non-complying		
Spouse and child contributions		<b>T</b> \$		Authorities e	0	
F \$	0	(includi	ier con ng Sup	tributions er Co-contribut Super Amounts)	ions and	
Other third party contributions				Super Amounts)		
<b>G</b> \$	0	M \$			0	
TOTAL CONTRIBUTIONS	N \$	of labels A	A to M)		0	
	(Sum e	7 100010 2	1 10 111)			Loss
Other transactions Alloc	ated earnings or losses	υψ			4736.25	
Accumulation phase account balance  S1 \$ 0	Inward rollovers and transfers	P \$			0	
	Outward					
Retirement phase account balance  - Non CDBIS	rollovers and transfers				0	
	Lump Sum					Code
	payments	R1 \$			233600	
Retirement phase account balance  - CDBIS	Income					Code
	stream	<b>R2</b> \$			7952.71	M
S3 \$	payments					_
						7
0 TRIS Count CLOSING ACCOU	NT BALANCI	E <b>S</b> \$			0	
				(S1 plus S2 plu	us <b>S3</b> )	
Accumulatio	n phase value	X1 \$				
Retiremer	nt phase value	X2 \$				
Outstanding lin	nited recourse	v A				
borrowing arrange	ment amount	<b>Y</b> \$				

Fund's tax file number	(TFN)	941024579
------------------------	-------	-----------

MEMBER 2	
Title: MR	
Family name	
De Silva	
First given name Other given names	
Laknath Wisantha Sepaal  Day Month	Year
Member's TFN See the Privacy note in the Declaration. 149719344 Date of birth 18/06/1950	real
Contributions OPENING ACCOUNT BALANCE \$ 523815.55	
Refer to instructions for completing these labels.  Proceeds from primary residence disposal  H \$ 0	
Employer contributions  Receipt date Day Month Year	
A \$ 0 H1	
ABN of principal employer  Assessable foreign superannuation fund amount	
A1	
Personal contributions Non-assessable foreign superannuation fund amount	
B \$ 0 J \$ 0	
CGT small business retirement exemption  Transfer from reserve: assessable amount	
C \$ 0 K \$ 0 CGT small business 15-year exemption amount	
Transier from reserve. Her assessable arriodite	
December 1997	
Contributions from non-complying funds  and previously non-complying funds	
Spouse and child contributions T \$ 0	
F \$ 0 Any other contributions	
Other third party contributions (including Super Co-contributions and Low Income Super Amounts)	
G \$ 0 M \$ 0	
TOTAL CONTRIBUTIONS N \$ 0 (Sum of labels A to M)	
Other transactions  Allocated earnings or losses  O \$ 10377.16	Loss
Inward D C	
Accumulation phase account balance rollovers and transfers	
Outward	
Retirement phase account balance rollovers and - Non CDBIS rollovers and transfers	
	Code
payments	
Retirement phase account balance  - CDBIS  Income	Code
stream payments   17038.39	М
payments	
0 TRIS Count CLOSING ACCOUNT BALANCE \$ \$ 0 (S1 plus S2 plus S3)	
Accumulation phase value X1 \$	
Retirement phase value <b>X2</b> \$	
Outstanding limited recourse borrowing arrangement amount	

# Section H: Assets and liabilities

5 ASSETS			
a Australian managed investments	Listed trusts	<b>A</b> \$	0 -90
	Unlisted trusts	В\$	0 -00
	Insurance policy	<b>c</b> \$	0 -00
	Other managed investments	<b>D</b> \$	0-00
5b Australian direct investments	Cash and term deposits	E \$	0 -00
Limited recourse borrowing arrangeme	ents Debt securities	<b>F</b> \$	0 -00
Australian residential real property  J1 \$ 0	-00 Loans	G \$	0 -00
Australian non-residential real property	Listed shares	H \$	0-00
J2 \$ 0	-00 Unlisted shares	. —	0-00
J3 \$ 0	Limited recourse borrowing arrangements		0]-90
	Non-residential real property		0 -00
Overseas shares  J5 \$	Residential real property		0 -00
Other	Collectables and personal use assets	ви с	0-90
Property count  J7 0	Other assets	<b>o</b> \$	0 -00
c Other investments	Crypto-Currency	N \$	0 -90
d Overseas direct investments	Overseas shares	P \$	0 -00
Overseas	non-residential real property	Q \$	0 -00
Overs	seas residential real property	R \$	0 -00
Ove	erseas managed investments	<b>s</b> \$	0-90
	<b>T</b> \$	0 -00	
	AND OVERSEAS ASSETS labels <b>A</b> to <b>T</b> )	U \$	0-00
ie In-house assets  Did the fund have a loan to, lease or investment in, related parti (known as in-house asse at the end of the income year	ies A No M res Mr ets)	\$	-00

	Fur	nd's tax file number (TFN) 941024579	1000%+' \$' MS
15f	Limited recourse borrowing arrangements  If the fund had an LRBA were the LRBA borrowings from a licensed financial institution?	A No Yes	
	Did the members or related parties of the fund use personal guarantees or other security for the LRBA?	B No Yes	
16	LIABILITIES		
	Borrowings for limited recourse borrowing arrangements		
	V1 \$ -00		
	Permissible temporary borrowings		
	V2 \$ -00		
	Other borrowings		
	V3 \$ -00	Borrowings <b>V</b> \$	0 -90
		Reserve accounts X \$  Other liabilities Y \$  TOTAL LIABILITIES Z \$	0 - <b>90</b> 0 - <b>90</b>
	ction I: <b>Taxation of financia</b> Taxation of financial arrangements (TOF		-90
		Total TOFA losses	-00
 Se	ction J: Other information		
		nily trust election, write the four-digit income year ample, for the 2022–23 income year, write 2023).	
		election, print <b>R</b> for revoke or print <b>V</b> for variation, Family trust election, revocation or variation 2023.	
Inte	or fund is making one or more elect	write the earliest income year specified. If the trust tions this year, write the earliest income year being critity election or revocation 2023 for each election.	
		n interposed entity election, print <b>R</b> , and complete the <i>Interposed entity election or revocation 2023</i> .	

**OFFICIAL: Sensitive** (when completed)

	1000%+'	\$' MS
Fund's tax file number (TFN)	941024579	

## 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.

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 signa	ature					
			Date	Day	Month /	/	Year
Preferred trustee or dire	ector contact details	:					
Title: MR							
Family name					<del>-</del>		
De Silva							
First given name		Other given names					
Laknath		Wisantha Sepaal					
Phone number 02 Email address	96375158						
Non-individual trustee name	 (if applicable)						
L & J De Silva Pty Ltd							
ABN of non-individual trustee	;						
	Time taken to prepare a	nd complete this annual retur	n l	Hrs			
The Commissioner of Tax provide on this annual ret	kation, as Registrar of the integri	Australian Business Register, n ty of the register. For further info	nay use the ABI ormation, refer t	N and b	ousiness de nstructions.	tails wh	nich you
TAX AGENT'S DECLARATED I declare that the Self-manage provided by the trustees, that correct, and that the trustees Tax agent's signature	ed superannuation fund a t the trustees have given i	me a declaration stating that i	prepared in acc the information	cordano provid	ce with info ed to me is	rmatio	n nd
			Date	Day	Month /	/	Year
Tax agent's contact deta	ails						
Title:							
Family name					-		
First given name		Other given names					
Tax agent's practice							
Tax agent's phone number		Reference number		Tax ag	ent numbe	er	
	l IL	JDE0019		1			