AKH SUPER	
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PART A Electronic lodgment declaration (Form P, T, F, SMSF or EX)

This declaration is to be completed where the tax return is to be lodged via an approved ATO electronic channel. It is the responsibility of the taxpayer to retain this declaration for a period of five years after the declaration is made, penalties may apply for failure to do so.

Privacy The ATO is authorised by the Taxation Administration Act 1953 to request the provision of tax file numbers (TFNs). The ATO will use the TFNs to identify each partner or beneficiary or entity in our records. It is not an offence not to provide the TFNs. However, you cannot lodge your tax return electronically if you do not quote your TFN.

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

The Australian Business Register

The Commissioner of Taxation, as Registrar of the Australian Business Register, may use the ABN and business details which you provide on this tax return to maintain the integrity of the register.

Please refer to the privacy statement on the Australian Business Register (ABR) website (www.abr.gov.au) for further information - it outlines our commitment to safeguarding your details.

Electronic funds transfer - direct debit

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	429 390 921	Year	2018	
Name of partnership, trust, fund or entity	AKH SUPER			

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

Important

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

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.
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Signature of partner, trustee or director	Date	

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 refere num	ber		
Account Na	me 217730477		
I authorise the refund to	b be deposited directly to the specified account.		
Signature		Date	

		Self-managed superann	nuation	2018
Wh	o should complete this annual return?	fund annual return		
Onl com	y self-managed superannuation funds (SMS plete this annual return. All other funds must d income tax return 2018 (NAT 71287).			
in	ne Self-managed superannuation fund ann structions 2018 (NAT 71606) (the instruction ou to complete this annual return.			
Se	ction A: Fund information			
1	Tax file number (TFN)	429 390 921		
		uest your TFN. You are not obliged to quote your TFN r annual return. See the Privacy note in the Declaration		Id increase the
2	Name of self-managed superannuat	ion fund (SMSF)		
		AKH SUPER		
3	Australian business number (ABN)	70 221 558 979		
4	Current postal address	15 Antarlo Road		
		Ingle Farm	SA	5068
5	Annual return status Is this an amendment to the SMSF's 2018 Is this the first required return for a newly			
6	SMSF auditor Auditor's name Title	Mr		
	Family name	Boys		
	First given name	Anthony		
	Other given names			
	SMSF Auditor Number	100 014 140		
	Auditor's phone number	0439 844304		
	Use Agent Postal address address	PO Box 3376		
			п	
		RUNDLE MALL	SA	5000
		Date audit was completed		
		Was Part B of the audit report qualified ?		
		If the audit report was qualified, have the reported compliance issues been rectified?	C	

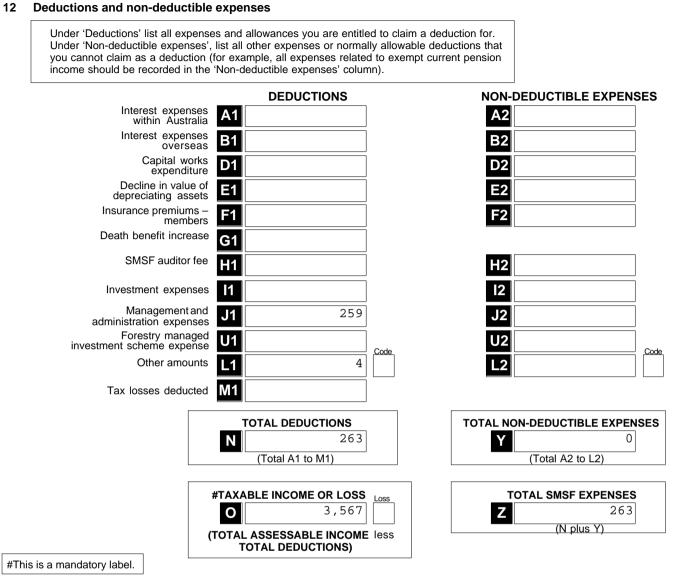
AKH SUPER

7	W	Financial institutio	ged super fund's finance on details for super financial institution det	payments and tax refu ails of your fund's nomina	ted super account. If you w	vould like your fund's
		tax refunds paid to a c	different account, you o	can provide additional fina Fund account number	ncial institution details at B.	
		(must be six digits)			013010	
		, ,	or example, J&Q Citize	n ATF J&Q Family SF)		
		217730477				
	в	Financial institutio		2		Use Agent Trust Account?
				d to a different account, pr ersonal account. (See rele	rovide additional financial in evant instructions.)	stitution details.
		Fund BSB number (must be six digits)		Account number		
		Fund account name (f	or example, J&Q Citize	n ATF J&Q Family SF)		
	С			alias to communicate with	n your fund about ATO sup	er payments.
8	St	atus of SMSF	Australian superannu	uation fund	Fund bene	efit structure B A Code
			rust deed allow accepta ment's Super Co-contr Low Income Super Co	ibution and		
9	w	as the fund wound		Day Month Ye	ar Have all t	tax lodgment
	N	Print Y for yes or N for no.	If yes, provide the which fund was wo	date on	a	and payments been met?
10	Di	xempt current pensi d the fund pay retireme the income year?		on income stream benefits	to one or more members	N Print Y for yes or N for no.
		o claim a tax exemptior ne law. Record exempt			ist the minimum benefit pay	ment under
	lf	No, Go to Section B: In	icome			
	lf	Yes Exempt current p	pension income amoun	t A		
				your exempt current pens	ion income?	
		Segr	regated assets method	В		
		Unsegr	regated assets method	C Was an act	uarial certificate obtained?	D Print Y for yes
		Did the fund have any	other income that was	s assessable?	Print Y for yes If Yes, go to S or N for no.	Section B: Income
						ding no-TFN quoted contributions. ot complete Section B: Income.)
		you are entitled to clai				

Sensitive (when completed)

F Form 2018	AKH SU	PER	TFN: 429 390 921	Page 3 o
ction B: Inco	ome			
etirement phase	for the entire year, there was no	erests in the SMSF were supporting superannua ther income that was assessable, and you have ets, you can record these at Section D: Income	e not realised a deferred	
Income	Did you have a capital gains ta (CGT) event during the yea	G N Print Y for yes or N for no. Code \$10,000 or y the deferred and attach a	apital loss or total capital gain is you elected to use the CGT relie I notional gain has been realised a Capital Gains Tax (CGT) scheo	ef in 2017 and d, complete
	Have you applied a exemption or rollove	M Print Y for yes or N for no.		
		Net capital	gain A	
		Gross rent and other leasing and hiring inco	ome B	
		Gross inte	erest C	
		Forestry managed investn scheme inco		
	reign income			Lo
D1		Net foreign inco	ome	
	Aust	lian franking credits from a New Zealand comp	bany E	NI
		Transfers f foreign fu		
		Gross payments wh ABN not que		
	f assessable contributions ble employer contributions	Gross distribu from partners		
	3,830 able personal contributions	* Unfranked divid amo	lend J	
R2		* Franked divid amo	lend K	
	J-quoted contributions	* Dividend fran	king L	
R3 (an amount mu	st be included even if it is zero)	* Gross t	trust	C(
	er of liability to life ce company or PST	distributi		L
R6	0	Assessable contribut (R1 plus R2 plus R3 less	R R	3,830
Calculation of	f non-arm's length income			
* Net non	-arm's length private pany dividends			Co
U1		* Other inco	ome S	
plus * Net nor	n-arm's length trust distributions	*Assessable inco due to changed	I tax	
	er non-arm's length income	status of t]
U3		Net non-arm's length incom (subject to 45% tax r (U1 plus U2 plus)	ate)	
	is entered at this label, check the ensure the correct tax	GROSS INCC (Sum of labels A to	DME W	
L		Exempt current pension inco	ome Y	
		TOTAL ASSESSABLE INCO		Lc 3,830

Section C: Deductions and non-deductible expenses



Section D: Income tax calculation statement #Important:

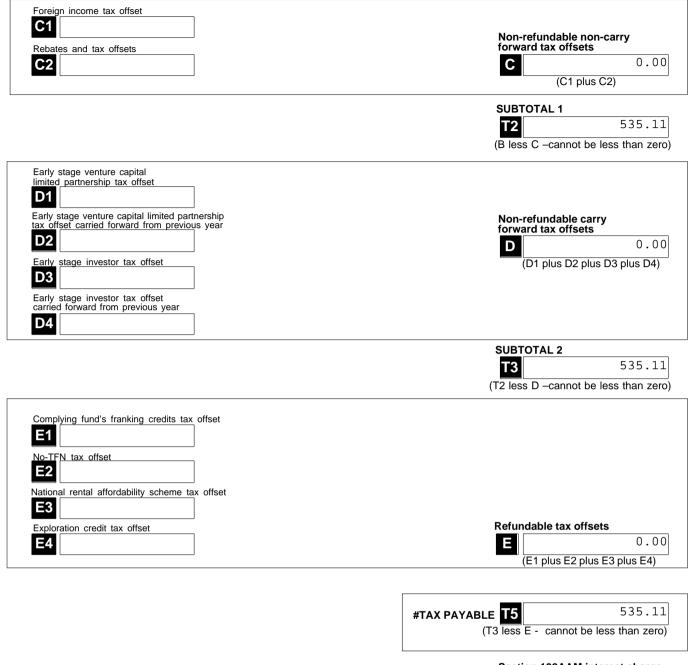
Section B label R3, Section C label O and Section D labels A,T1, J, T5 and I are mandatory.

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	3,567
(an amount mus	st be included even if it is zero)
#Tax on taxable income T1	535.11
(an amount mus	st be included even if it is zero)
#Tax on no-TFN- quoted contributions	0.00
(an amount mus	st be included even if it is zero)
Gross tax B	535.11
	(T1 plus J)

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Section 102AAM interest charge

G

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Collectables

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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	Eligible credi	
H8	H	0.00
	(H1 plus H2 plus H3 plu	s H5 plus H6 plus H8)
	#Tax offset refunds	
	(Remainder of refundable tax offsets).	0.00
		nount from label E- ncluded even if it is zero)
	PAYG instalr	nents raised
	K	
	Supervisory	259.00
	Supervisory	
		levy adjustment o funds
	M	
		levy adjustment s
	N	
	Total amount of tax payable	794.11
#This is a mandatory label.	(T5 plus G less H less I less	< plus L less M plus N)
Section E: Losses 14 Losses		
If total loss is greater than \$100,000,	Tax losses carried forward	
complete and attach a Losses	to later income years	
schedule 2018.	Net capital losses carried forward to later income years	
Net capital losses brought forward	Net capital losses carried forward	
from prior years	to later income years	
Non-Collectables		

Sensitive (when completed)

SMSF Form 2018

AKH SUPER

Section F / Section G: Member Information

		See the Privacy note in	the Declarati	on.		
Title		Member'sTFN 400	379 613	L	MemberNumber	
Familyname	HUGHES				Account status	0 0
First given name	DAVID					
her given names	PATRICK					
		Date of birth 04/01/1981		If deceased, date of death		
ontributions			_	10	440.47	
Refer to instruction or completing thes		OPENING ACCOUNT BALANCE				
abels.		Employer contributions	Α	3,	829.65	
		ABN of principal employer A1				
		Personal contributions	В			
	CG	T small business retirement exemption	С			
	CGT sma	Il business 15-year exemption amount	D			
		Personal injury election	E			
		Spouse and child contributions	F			
		Other third party contributions	G			
	Assessable	foreign superannuation fund amount	I			
	Non-assessable	foreign superannuation fund amount	J			
	Trans	fer from reserve: assessable amount	Κ			
	Transfer fi	rom reserve: non-assessable amount	L			
		ontributions from non-complying funds and previously non-complying funds	Т			
	Any other contributi	ons (including Super Co-contributions and Low Income Super Contributions)	Μ			
ther transactior	IS	TOTAL CONTRIBUTIONS	Ν	3,	829.65	
	ase account balance	Allocated earnings or losses	0		Loss	
S1	45,472.41	Inward rollovers and transfers	Р			
- Non CDBIS	e account balance	Outward rollovers and transfers	Q			
S2 Retirement phase	0.00 e account balance	Lump Sum payment	R1		Code	
-CDBIS	0.00	Income stream payment			Code	
				<i>1</i> E	472.41	
0 TR	ISCount	CLOSING ACCOUNT BALANCE		45, s S2 plus S3		
		Accumulation phase value	X1	p 00		

SMSF Form 2018	AKH SUP	ER T	FN:	429 390 921 Page	e 8 of 10
Section H: Assets and liabilities 15 ASSETS	S				
15a Australian managed investments		Listed trusts	Α		
		Unlisted trusts	в		
		Insurance policy	С]
		Other managed investments	D		
15b Australian direct investments		Cash and term deposits	Ε	114]
		Debt securities	F		
Limited recourse borrowing arrangements		Loans	G	48,004	
Australian residential real property		Listed shares	H		
Australian non-residential real property		Unlisted shares]
Overseas real property	1	Limited recourse borrowing arrangements	J	0]
Australian shares		Non-residential real property	Κ		
J4 Overseas shares		Residential real property	L		
J5		Collectables and personal use assets	Μ]
J6		Other assets	0]
					1
15c Overseas direct investments		Overseas shares	Р]
		Overseas non-residential real property	Q		
		Overseas residential real property	R		
		Overseas managed investments	S]
	_	Other overseas assets	Τ]
		TOTAL AUSTRALIAN AND OVERSEAS ASSETS (Sum of labels A to T)	U	48,118	
15d In-house assets					
Di		ave a loan to, lease to or investment in, ed parties (known as in-house assets) at the end of the income year]
15e Limited recourse borrowing arran	ngements				
	lf		Print Y or N fo	for yes or no.	
	Di		Print Y or N fo	for yes or no.	

SMSF Form 2018

16 LIABILITIES

	-1	
Borrowings for limited recourse borrowing arrangements		
V1		
Permissible temporary borrowings		
V2		
Other borrowings		
V3	Borrowing	s V 0
	s W 45,473	
	Reserve account	s X
	Otherliabilitie	s Y 2,645
	TOTAL LIABILITIE	S Z 48,118
Section I: Taxation of financial arra 17 Taxation of financial arrangements (To	•	
	Total TOFA gain	s H
	Total TOFA losse	s 🚺

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 2017–18 income year, write 2018).	
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 2018.	В
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 2018 for each election	С
If revoking an interposed entity election, print R, and complete	D

and attach the Interposed entity election or revocation 2018.

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 current trustees and directors have authorised this annual return and it is documented as such in the SMSF's records. I have received the audit report and I am aware of any matters raised. I declare that the information on this annual return, including any attached schedules and additional documentation is true and correct. I also authorise the ATO to make any tax refunds to the nominated bank account (if applicable).

Authorised trustee's, director's or public officer's signature

· · ·		0				Day Month	Year
					Date	MR	
Preferred trustee or director con	tact detail	s:					
	Title	HUGHES]			
Fa	milyname						DAV
	iven name	PATRICK					
Other given names		000					
-		Area code	Number				
Pho	ne number		000000000	0000			
Ema	ail address	0000					
Non-individual trustee name (if a	pplicable)	00					
ABN of non-individual trustee							
ABIN OF HOH-INGIVIAL							_
		Time taken to	prepare and	complete this ann	ual return	Hrs	
The Commissioner of Taxation, a which you provide on this annual	s Registra	r of the Australi	an Business	Register, may use	the ABN a	and busines	s details
					normation,		
TAX AGENT'S DECLARATION:							
, ALLEN FROST							
declare that the Self-managed sur							
by the trustees, that the trustees h the trustees have authorised me to			ating that the	Information provided 1	o me is true		
Tax agent's signature					Date	Day Month	Year
					Duit		
Title							
Familyname							
First given name							_
Other given names							
Tax agent's practice	ALLEN H	FROST					
	Area code	Number					
Tax agent's phone number							
Tax agent number	0046400)8]	Reference number	AKHS000	1	