

## 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 However, you cannot lodge your tax return electronically if you do not quote your TFN.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](http://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](http://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 (TFN)	<input type="text"/>	Year	<input type="text" value="2018"/>
Name of partnership, trust, fund or entity	<input type="text" value="Montana Downs Super Fund"/>		
Total income or loss	<input type="text" value="225040"/>	Total deductions	<input type="text" value="11094"/>
		Taxable income or loss	<input type="text" value="213946"/>

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.

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 channel.

This declaration must be signed by the partner, trustee or director 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 Reference Number

Account Name

I authorise the refund to be deposited directly to the specified account.

Signature

Date

## PART C(a) ~~Interposed entity election and revocation~~ (Section not required for this Return)

I/We declare 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,
- and that the trustee(s)/company/partners is/are making or revoking an interposed entity election, the details of which are set out above, for the purposes of section 272-85 of Schedule 2F to ITAA 1936 and that
- the trustee(s)/company/partners is/are able to make or revoke the election in accordance with that section.

Signature of partner, trustee or public officer

Date

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**PART C(b)**-----**Family trust election, revocation or variation** (Section not required for this Return)

**I/We** declare that

- all the information required has been provided in this form and any attachments to this form,
- and that the information provided is true and correct in every detail,
- and that the trustee(s)/partners is/are making, varying or revoking a family trust election, the details of which are set out above, for the purposes of section 272-80 of Schedule 2F to ITAA 1936 and that
- the trustee(s) or, if the trustee is a company, the public officer of the corporate trustee is/are able to make, vary or revoke the election in accordance with that section.

Signature of trustee or  
if the trustee is a company,  
the public officer of  
the corporate trustee

Date

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**PART D****Tax agent's certificate (shared facilities only)**

**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

Client reference

1009307

Contact name

TTO CHARTERED ACCOUNTANTS

Agent's phone number

08 82119426

Agent's reference number

25809482

# Self-managed superannuation fund annual return

# 2018

## 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.

## Section A: Fund information

### 1 Tax file number (TFN)

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

**!** 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)



### 3 Australian business number (ABN) (if applicable)

### 4 Current postal address



Suburb/town

State/territory

Postcode

### 5 Annual return status

Is this an amendment to the SMSF's 2018 return?

**A** No ☒ Yes ☐

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

**B** No ☒ Yes ☐

# Self managed superannuation fund return 2018

RN :100017882MS

Taxpayer/entity name: Montana Downs Super Fund

TFN

## 6 SMSF auditor

Auditor's name

Title: Mr ☒ Mrs ☐ Miss ☐ Ms ☐ Other 

Family name

Tony

First given name

Boys

Other given names

SMSF Auditor Number

100 014 140

Auditor's phone number

04 10712708

Postal address

PO Box 3376

Suburb/town

RUNDLE MALL

State/territory

SA

Postcode

5000

Date audit was completed **A** /12/2018Was Part B of the audit report qualified? **B** No ☒ Yes ☐If the audit report was qualified, have the reported compliance issues been rectified? **C** 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 Financial institution details for super payments and tax refunds

You must provide the financial institution details of your fund's nominated super account. If you would like your fund's tax refunds paid to a different account, you can provide additional financial institution details at **B**.Fund BSB number (must be six digits)  Fund account number 

Fund account name (for example, J&amp;Q Citizen ATF J&amp;Q Family SF)

Montana Downs Superannuation Fun

### B Financial institution details for tax refunds only

If you would like your fund's tax refunds paid to a different account, provide additional financial institution details. Tax refunds cannot be paid to a trustee's personal account. (See relevant instructions.)

BSB number (must be six digits)  Account number 

Account name (for example, J&amp;Q Citizen ATF J&amp;Q Family SF)

### C Electronic service address alias

We will use your electronic service address alias to communicate with your fund about ATO super payments.

Taxpayer/entity name: Montana Downs Super Fund

Fund's tax file number (TFN)

**8 Status of SMSF**

Australian superannuation fund

**A** No ☐ Yes ☒Fund benefit structure **B** **A** Code

Does the fund trust deed allow acceptance of the Government's Super Co-contribution and Low Income Super Contribution?

**C** No ☐ Yes ☒**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 ☒Exempt current pension income amount **A** \$ .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 ☐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.

# Self managed superannuation fund return 2018

RN :100017882MS

Taxpayer/entity name: Montana Downs Super Fund

TFN

## 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.

### 11 Income

Did you have a capital gains tax (CGT) event during the year?

**G** No ☐ Yes ☒

If the total capital loss or total capital gain is greater than \$10,000 or you elected to use the CGT relief in 2017 and the deferred notional gain has been realised, complete and attach a *Capital gains tax (CGT) schedule 2018*.

Have you applied an exemption or rollover?

**M** No ☒ Yes ☐ Code

Net capital gain **A** \$ 49468 -00

Gross rent and other leasing and hiring income **B** \$ -00

Gross interest **C** \$ 9945 -00

Forestry managed investment scheme income **X** \$ -00

Gross foreign income	<b>D1</b> \$ 23398 -00	Net foreign income	<b>D</b> \$ 23398 -00	Loss <input type="checkbox"/>
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Australian franking credits from a New Zealand company **E** \$ -00

Transfers from foreign funds **F** \$ -00

Gross payments where ABN not quoted **H** \$ -00

Gross distribution from partnerships **I** \$ -00

\*Unfranked dividend amount **J** \$ 7233 -00

\*Franked dividend amount **K** \$ 68507 -00

\*Dividend franking credit **L** \$ 29360 -00

\*Gross trust distributions **M** \$ 45333 -00

<b>Calculation of assessable contributions</b>	
Assessable employer contributions	<b>R1</b> \$ -00
plus Assessable personal contributions	<b>R2</b> \$ 25000 -00
plus **No-TFN-quoted contributions (an amount must be included even if it is zero)	<b>R3</b> \$ 0 -00
less Transfer of liability to life insurance company or PST	<b>R6</b> \$ -00

**Assessable contributions**  
(R1 plus R2 plus R3 less R6)  
**R** \$ 25000 -00

<b>Calculation of non-arm's length income</b>	
*Net non-arm's length private company dividends	<b>U1</b> \$ -00
plus *Net non-arm's length trust distributions	<b>U2</b> \$ -00
plus *Net other non-arm's length income	<b>U3</b> \$ -00

\*Other income **S** \$ -00

\*Assessable income due to changed tax status of fund **T** \$ -00

**Net non-arm's length income**  
(subject to 45% tax rate)  
(U1 plus U2 plus U3)  
**U** \$ -00

\*This is a mandatory label.  
  
\*If an amount is entered at this label, check the instructions to ensure the correct tax treatment has been applied.

<b>GROSS INCOME</b> (Sum of labels A to U)	<b>W</b> \$ 258244 -00	Loss <input type="checkbox"/>
Exempt current pension income	<b>Y</b> \$ 33204 -00	
<b>TOTAL ASSESSABLE INCOME</b> (W less Y)	<b>V</b> \$ 225040 -00	Loss <input type="checkbox"/>

Taxpayer/entity name: Montana Downs Super Fund

Fund's tax file number (TFN)

## 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 EXPENSES

Interest expenses within Australia	<b>A1</b> \$		-00	<b>A2</b> \$		-00
Interest expenses overseas	<b>B1</b> \$		-00	<b>B2</b> \$		-00
Capital works expenditure	<b>D1</b> \$		-00	<b>D2</b> \$		-00
Decline in value of depreciating assets	<b>E1</b> \$		-00	<b>E2</b> \$		-00
Insurance premiums – members	<b>F1</b> \$		-00	<b>F2</b> \$		-00
Death benefit increase	<b>G1</b> \$		-00			
SMSF auditor fee	<b>H1</b> \$	757	-00	<b>H2</b> \$	111	-00
Investment expenses	<b>I1</b> \$	8276	-00	<b>I2</b> \$	1373	-00
Management and administration expenses	<b>J1</b> \$	2061	-00	<b>J2</b> \$	304	-00
Forestry managed investment scheme expense	<b>U1</b> \$		-00	<b>U2</b> \$		-00
Other amounts	<b>L1</b> \$		-00	<b>L2</b> \$	1	-00
Tax losses deducted	<b>M1</b> \$		-00			

Code

Code

## TOTAL DEDUCTIONS

**N** \$ 11094 -00(Total **A1** to **M1**)

## TOTAL NON-DEDUCTIBLE EXPENSES

**Y** \$ 1789 -00(Total **A2** to **L2**)

## #TAXABLE INCOME OR LOSS

**O** \$ 213946 -00(TOTAL ASSESSABLE INCOME less  
TOTAL DEDUCTIONS)

Loss

## TOTAL SMSF EXPENSES

**Z** \$ 12883 -00

(N plus Y)

#This is a mandatory label.

# Self managed superannuation fund return 2018

RN :100017882MS

Taxpayer/entity name: Montana Downs Super Fund

TFN

## 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 Calculation statement

Please refer to the *Self-managed superannuation fund annual return instructions 2018* on how to complete the calculation statement.

#Taxable income **A** \$ 213946 -00

(an amount must be included even if it is zero)

#Tax on taxable income **T1** \$ 32091.90

(an amount must be included even if it is zero)

#Tax on no-TFN-quoted contributions **J** \$ 0.00

(an amount must be included even if it is zero)

Gross tax **B** \$ 32091.90

(T1 plus J)

Foreign income tax offset  
**C1** \$ 3016.20

Rebates and tax offsets  
**C2** \$

Non-refundable non-carry forward tax offsets

**C** \$ 3016.20

(C1 plus C2)

SUBTOTAL 1

**T2** \$ 29075.70

(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  
**D4** \$

Non-refundable carry forward tax offsets

**D** \$

(D1 plus D2 plus D3 plus D4)

SUBTOTAL 2

**T3** \$ 29075.70

(T2 less D – cannot be less than zero)

Complying fund's franking credits tax offset  
**E1** \$ 41621.21

No-TFN tax offset  
**E2** \$

National rental affordability scheme tax offset  
**E3** \$

Exploration credit tax offset  
**E4** \$

Refundable tax offsets

**E** \$ 41621.21

(E1 plus E2 plus E3 plus E4)

#TAX PAYABLE **T5** \$ 0.00

(T3 less E – cannot be less than zero)

Section 102AAM interest charge

**G** \$



Taxpayer/entity name: Montana Downs Super Fund

Fund's tax file number (TFN)

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 \$** 

(H1 plus H2 plus H3 plus H5 plus H6 plus H8)

#Tax offset refunds

(Remainder of refundable tax offsets)

**I \$** (unused amount from label **E** –  
an amount must be included even if it is zero)

PAYG instalments raised

**K \$** 

Supervisory levy

**L \$** 

Supervisory levy adjustment for wound up funds

**M \$** 

Supervisory levy adjustment for new funds

**N \$** 

AMOUNT DUE OR REFUNDABLE

A positive amount at **S** is what you owe,  
while a negative amount is refundable to you.**S \$** 

(T5 plus G less H less I less K plus L less M plus N)

#This is a mandatory label.

Section E: **Losses****14 Losses****!** If total loss is greater than \$100,000,  
complete and attach a *Losses*  
*schedule 2018*.Tax losses carried forward  
to later income years**U \$** Net capital losses carried  
forward to later income years**V \$**

# Self managed superannuation fund return 2018

RN :100017882MS

Taxpayer/entity name: Montana Downs Super Fund

TFN

## Section F: Member information

### MEMBER 1

Title: Mr ☒ Mrs ☐ Miss ☐ Ms ☐ Other 

Family name

Fisher

First given name

Timothy

Other given names

### Member's TFN

See the Privacy note in the Declaration.

Date of birth

Day

Month

Year

17/03/1951

### Contributions

Refer to instructions for completing these labels.

OPENING ACCOUNT BALANCE \$ 735397.21

Employer contributions A \$

ABN of principal employer A1

Personal contributions B \$

CGT small business retirement exemption C \$

CGT small 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 \$

Transfer from reserve: assessable amount K \$

Transfer from reserve: non-assessable amount L \$

Contributions from non-complying funds and previously non-complying funds T \$

Any other contributions (including Super Co-contributions and Low Income Super Contributions) M \$

TOTAL CONTRIBUTIONS N \$

### Other transactions

Allocated earnings or losses

O \$ 81839.74

Inward rollovers and transfers

P \$

Outward rollovers and transfers

Q \$

Lump Sum payment

R1 \$

Income stream payment

R2 \$

300000.00

Accumulation phase account balance

S1 \$ 0.00

Retirement phase account balance – Non CDBIS

S2 \$ 522514.95

Retirement phase account balance – CDBIS

S3 \$ 0.00

0 TRIS Count

CLOSING ACCOUNT BALANCE S \$ 522514.95

(S1 plus S2 plus S3)

Accumulation phase value X1 \$

Retirement phase value X2 \$

Loss

Code

Code

M

## Self managed superannuation fund return 2018

RN:100017882MS

Taxpayer/entity name: Montana Downs Super Fund

Fund's tax number (TFN)

## MEMBER 2

Title: Mr ☐ Mrs ☐ Miss ☐ Ms ☒ Other 

Family name

Scheer

First given name

Terri

Other given names

## Member's TFN

See the Privacy note in the Declaration.

Date of birth

Day Month Year

27/10/1960

## Contributions

! Refer to instructions for completing these labels.

OPENING ACCOUNT BALANCE \$ 3614343.21

Employer contributions A \$

ABN of principal employer A1

Personal contributions B \$ 25000.00

CGT small business retirement exemption C \$

CGT small 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 \$

Transfer from reserve: assessable amount K \$

Transfer from reserve: non-assessable amount L \$

Contributions from non-complying funds and previously non-complying funds T \$

Any other contributions (including Super Co-contributions and Low Income Super Contributions) M \$

TOTAL CONTRIBUTIONS N \$ 25000.00

## Other transactions

Allocated earnings or losses

O \$ 489312.93

Loss

☐

Inward rollovers and transfers

P \$

Outward rollovers and transfers

Q \$

Lump Sum payment

R1 \$

Code

☐

Income stream payment

R2 \$

Code

☐

Accumulation phase account balance

S1 \$ 4146981.32

Retirement phase account balance – Non CDBIS

S2 \$ 0.00

Retirement phase account balance – CDBIS

S3 \$ 0.00

0 TRIS Count

CLOSING ACCOUNT BALANCE S \$ 4146981.32

(S1 plus S2 plus S3)

Accumulation phase value X1 \$

Retirement phase value X2 \$

# Self managed superannuation fund return 2018

Taxpayer/entity name: Montana Downs Super Fund

RN:100017882MS

TFN

## MEMBER 3

Title: Mr ☐ Mrs ☐ Miss ☐ Ms ☐ Other

Family name

First given name

Other given names

### Member's TFN

See the Privacy note in the Declaration.

Date of birth

Day

Month

Year

## Contributions

**!** Refer to instructions for completing these labels.

OPENING ACCOUNT BALANCE \$

Employer contributions **A** \$

ABN of principal employer **A1**

Personal contributions **B** \$

CGT small business retirement exemption **C** \$

CGT small 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** \$

Transfer from reserve: assessable amount **K** \$

Transfer from reserve: non-assessable amount **L** \$

Contributions from non-complying funds and previously non-complying funds **T** \$

Any other contributions (including Super Co-contributions and Low Income Super Contributions) **M** \$

**TOTAL CONTRIBUTIONS** **N** \$

## Other transactions

Allocated earnings or losses **O** \$

Loss

Inward rollovers and transfers **P** \$

Outward rollovers and transfers **Q** \$

Lump Sum payment **R1** \$

Income stream payment **R2** \$

Code

Code

Accumulation phase account balance **S1** \$

Retirement phase account balance – Non CDBIS **S2** \$

Retirement phase account balance – CDBIS **S3** \$

☐ TRIS Count

**CLOSING ACCOUNT BALANCE** **S** \$

(S1 plus S2 plus S3)

Accumulation phase value **X1** \$

Retirement phase value **X2** \$

# Self managed superannuation fund return 2018

Taxpayer/entity name: Montana Downs Super Fund

RN :100017882MS

TFN

## MEMBER 4

Title: Mr ☐ Mrs ☐ Miss ☐ Ms ☐ Other

Family name

First given name

Other given names

### Member's TFN

See the Privacy note in the Declaration.

Date of birth

Day

Month

Year

### Contributions

**!** Refer to instructions for completing these labels.

OPENING ACCOUNT BALANCE \$

Employer contributions **A** \$

ABN of principal employer **A1**

Personal contributions **B** \$

CGT small business retirement exemption **C** \$

CGT small 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** \$

Transfer from reserve: assessable amount **K** \$

Transfer from reserve: non-assessable amount **L** \$

Contributions from non-complying funds and previously non-complying funds **T** \$

Any other contributions (including Super Co-contributions and Low Income Super Contributions) **M** \$

**TOTAL CONTRIBUTIONS** **N** \$

### Other transactions

Allocated earnings or losses **O** \$

Loss

Inward rollovers and transfers **P** \$

Outward rollovers and transfers **Q** \$

Lump Sum payment **R1** \$

Income stream payment **R2** \$

Code

Code

Accumulation phase account balance **S1** \$

Retirement phase account balance – Non CDBIS **S2** \$

Retirement phase account balance – CDBIS **S3** \$

☐ TRIS Count

**CLOSING ACCOUNT BALANCE** **S** \$

(S1 plus S2 plus S3)

Accumulation phase value **X1** \$

Retirement phase value **X2** \$

Section G: **Supplementary member information**

**MEMBER 5**

Title: Mr Mrs Miss Ms Other

Account status

Code

Family name

First given name

Other given names

Day

Month

Year

Member's TFN

See the Privacy note in the Declaration.

Date of birth

**Contributions**

Refer to instructions for completing these labels.

OPENING ACCOUNT BALANCE \$

Employer contributions A \$

ABN of principal employer A1

Personal contributions B \$

CGT small business retirement exemption C \$

CGT small 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 \$

Transfer from reserve: assessable amount K \$

Transfer from reserve: non-assessable amount L \$

Contributions from non-complying funds and previously non-complying funds T \$

Any other contributions (including Super Co-contributions and Low Income Super Contributions) M \$

TOTAL CONTRIBUTIONS N \$

**Other transactions**

Accumulation phase account balance S1 \$

Retirement phase account balance – Non CDBIS S2 \$

Retirement phase account balance – CDBIS S3 \$

TRIS Count

Allocated earnings or losses O \$

Inward rollovers and transfers P \$

Outward rollovers and transfers Q \$

Lump Sum payment R1 \$

Income stream payment R2 \$

Loss

Code

Code

CLOSING ACCOUNT BALANCE S \$

(S1 plus S2 plus S3)

Accumulation phase value X1 \$

Retirement phase value X2 \$

# Self managed superannuation fund return 2018

Taxpayer/entity name: Montana Downs Super Fund

RN :100017882MS

TFN

## MEMBER 6

Title: Mr ☐ Mrs ☐ Miss ☐ Ms ☐ Other

Code

Account status ☐

Family name

First given name

Other given names

Day

Month

Year

### Member's TFN

See the Privacy note in the Declaration.

Date of birth

## Contributions

**!** Refer to instructions for completing these labels.

OPENING ACCOUNT BALANCE \$

Employer contributions **A** \$

ABN of principal employer **A1**

Personal contributions **B** \$

CGT small business retirement exemption **C** \$

CGT small 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** \$

Transfer from reserve: assessable amount **K** \$

Transfer from reserve: non-assessable amount **L** \$

Contributions from non-complying funds and previously non-complying funds **T** \$

Any other contributions (including Super Co-contributions and Low Income Super Contributions) **M** \$

**TOTAL CONTRIBUTIONS N** \$

## Other transactions

Allocated earnings or losses **O** \$

Loss

☐

Inward rollovers and transfers **P** \$

Outward rollovers and transfers **Q** \$

Lump Sum payment **R1** \$

Income stream payment **R2** \$

Code

☐

Code

☐

Accumulation phase account balance

**S1** \$

Retirement phase account balance – Non CDBIS

**S2** \$

Retirement phase account balance – CDBIS

**S3** \$

☐ TRIS Count

**CLOSING ACCOUNT BALANCE S** \$

(S1 plus S2 plus S3)

Accumulation phase value **X1** \$

Retirement phase value **X2** \$

# Self managed superannuation fund return 2018

Taxpayer/entity name: Montana Downs Super Fund

RN :100017882MS

TFN

## MEMBER 7

Title: Mr ☐ Mrs ☐ Miss ☐ Ms ☐ Other

Code

Account status

Family name

First given name

Other given names

Day

Month

Year

### Member's TFN

See the Privacy note in the Declaration.

Date of birth

## Contributions

**!** Refer to instructions for completing these labels.

OPENING ACCOUNT BALANCE \$

Employer contributions **A** \$

ABN of principal employer **A1**

Personal contributions **B** \$

CGT small business retirement exemption **C** \$

CGT small 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** \$

Transfer from reserve: assessable amount **K** \$

Transfer from reserve: non-assessable amount **L** \$

Contributions from non-complying funds and previously non-complying funds **T** \$

Any other contributions (including Super Co-contributions and Low Income Super Contributions) **M** \$

TOTAL CONTRIBUTIONS **N** \$

## Other transactions

Allocated earnings or losses **O** \$

Loss

Inward rollovers and transfers **P** \$

Outward rollovers and transfers **Q** \$

Lump Sum payment **R1** \$

Income stream payment **R2** \$

Code

Code

Accumulation phase account balance **S1** \$

Retirement phase account balance – Non CDBIS **S2** \$

Retirement phase account balance – CDBIS **S3** \$

☐ TRIS Count

CLOSING ACCOUNT BALANCE **S** \$

(S1 plus S2 plus S3)

Accumulation phase value **X1** \$

Retirement phase value **X2** \$



# Self managed superannuation fund return 2018

Taxpayer/entity name: Montana Downs Super Fund

RN:100017882MS

TFN

## MEMBER 8

Title: Mr ☐ Mrs ☐ Miss ☐ Ms ☐ Other

Code

Account status

Family name

First given name

Other given names

Day Month Year

### Member's TFN

See the Privacy note in the Declaration.

Date of birth

## Contributions

**!** Refer to instructions for completing these labels.

OPENING ACCOUNT BALANCE \$

Employer contributions **A** \$

ABN of principal employer **A1**

Personal contributions **B** \$

CGT small business retirement exemption **C** \$

CGT small 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** \$

Transfer from reserve: assessable amount **K** \$

Transfer from reserve: non-assessable amount **L** \$

Contributions from non-complying funds and previously non-complying funds **T** \$

Any other contributions (including Super Co-contributions and Low Income Super Contributions) **M** \$

**TOTAL CONTRIBUTIONS** **N** \$

## Other transactions

Allocated earnings or losses **O** \$

Loss

Inward rollovers and transfers **P** \$

Outward rollovers and transfers **Q** \$

Lump Sum payment **R1** \$

Income stream payment **R2** \$

Code

Code

Accumulation phase account balance

**S1** \$

Retirement phase account balance – Non CDBIS

**S2** \$

Retirement phase account balance – CDBIS

**S3** \$

☐ TRIS Count

**CLOSING ACCOUNT BALANCE** **S** \$

(S1 plus S2 plus S3)

Accumulation phase value **X1** \$

Retirement phase value **X2** \$

## Section H: Assets and liabilities

## 15 ASSETS

## 15a Australian managed investments

Listed trusts **A** \$ 221748 -00Unlisted trusts **B** \$ 1322644 -00Insurance policy **C** \$ -00Other managed investments **D** \$ -00

## 15b Australian direct investments

Cash and term deposits **E** \$ 368750 -00

## Limited recourse borrowing arrangements

Australian residential real property

**J1** \$ -00

Australian non-residential real property

**J2** \$ -00

Overseas real property

**J3** \$ -00

Australian shares

**J4** \$ -00

Overseas shares

**J5** \$ -00

Other

**J6** \$ -00Debt securities **F** \$ -00Loans **G** \$ -00Listed shares **H** \$ 1386626 -00Unlisted shares **I** \$ -00Limited recourse borrowing arrangements **J** \$ -00Non-residential real property **K** \$ -00Residential real property **L** \$ -00Collectables and personal use assets **M** \$ -00Other assets **O** \$ 131808 -00

## 15c Overseas direct investments

Overseas shares **P** \$ -00Overseas non-residential real property **Q** \$ -00Overseas residential real property **R** \$ -00Overseas managed investments **S** \$ -00Other overseas assets **T** \$ 1241154 -00**TOTAL AUSTRALIAN AND OVERSEAS ASSETS U** \$ 4672730 -00

(Sum of labels A to T)

## 15d 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

## 15e 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 ☐

# Self managed superannuation fund return 2018

Taxpayer/entity name: Montana Downs Super Fund

RN :100017882MS

TFN

## 16 LIABILITIES

Borrowings for limited recourse  
borrowing arrangements

**V1** \$  -00

Permissible temporary borrowings

**V2** \$  -00

Other borrowings

**V3** \$  -00

Borrowings **V** \$  -00

Total member closing account balances  
(total of all **CLOSING ACCOUNT BALANCES** from Sections F and G)

**W** \$  4669496 -00

Reserve accounts **X** \$  -00

Other liabilities **Y** \$  3234 -00

**TOTAL LIABILITIES Z** \$  4672730 -00

## Section I: Taxation of financial arrangements

### 17 Taxation of financial arrangements (TOFA)

Total TOFA gains **H** \$  -00

Total TOFA losses **I** \$  -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 2017–18 income year, write **2018**).

**A**

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*.

**B**

### 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.

**C**

If revoking an interposed entity election, print **R**, and complete and attach the *Interposed entity election or revocation 2018*.

**D**

# Self managed superannuation fund return 2018

RN :100017882MS

Taxpayer/entity name: Montana Downs Super Fund

TFN

## 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](http://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

Date 

Day	Month	Year

### Preferred trustee or director contact details:

Title: Mr ☒ Mrs ☐ Miss ☐ Ms ☐ Other 

Family name

First given name

Other given names

Phone number

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 2018* 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

Date 

Day	Month	Year

### Tax agent's contact details

Title: Mr ☐ Mrs ☐ Miss ☐ Ms ☐ Other 

Family name

First given name

Other given names

Tax agent's practice

Tax agent's phone number

Reference number

Tax agent number



Postal address for annual returns: Australian Taxation Office, GPO Box 9845, IN YOUR CAPITAL CITY

# Capital gains tax (CGT) schedule 2018

- Use in conjunction with company, trust, fund income tax return or the self-managed superannuation fund annual return.
- Refer to the *Guide to capital gains tax 2018* available on our website at [ato.gov.au](http://ato.gov.au) for instructions on how to complete this schedule.

**Tax file number (TFN)**



We are authorised by law to request your TFN. You do not have to quote your TFN. However, if you don't it could increase the chance of delay or error in processing your form.

**Australian business number (ABN)**

51 504 322 033

**Taxpayer's name**

Montana Downs Super Fund

## 1 Current year capital gains and capital losses

	Capital gain	Capital loss
Shares in companies listed on an Australian securities exchange <b>A</b> \$	11207 -00	<b>K</b> \$ 67950 -00
Other shares <b>B</b> \$	-00	<b>L</b> \$ -00
Units in unit trusts listed on an Australian securities exchange <b>C</b> \$	16929 -00	<b>M</b> \$ -00
Other units <b>D</b> \$	-00	<b>N</b> \$ -00
Real estate situated in Australia <b>E</b> \$	-00	<b>O</b> \$ -00
Other real estate <b>F</b> \$	-00	<b>P</b> \$ -00
Amount of capital gains from a trust (including a managed fund) <b>G</b> \$	100715 -00	
Collectables <b>H</b> \$	-00	<b>Q</b> \$ -00
Other CGT assets and any other CGT events <b>I</b> \$	13301 -00	<b>R</b> \$ -00
Amount of capital gain previously deferred under transitional CGT relief for superannuation funds <b>S</b> \$	-00	
<b>Total current year capital gains</b> <b>J</b> \$	142152 -00	

Add the amounts at labels **K** to **R** and write the total in item 2 label **A – Total current year capital losses**.

Taxpayer/entity name: Montana Downs Super Fund

TFN

**2 Capital losses**Total current year capital losses **A \$** 67950 **·00**Total current year capital losses applied **B \$** 67950 **·00**Total prior year net capital losses applied **C \$** **·00**Total capital losses transferred in applied  
(only for transfers involving a foreign bank branch or  
permanent establishment of a foreign financial entity) **D \$** **·00**Total capital losses applied **E \$** 67950 **·00**Add amounts at **B**, **C** and **D**.**3 Unapplied net capital losses carried forward**Net capital losses from collectables carried forward to later income years **A \$** **·00**Other net capital losses carried forward to later income years **B \$** **·00**Add amounts at **A** and **B** and transfer the total  
to label **V – Net capital losses carried forward**  
to later income years on your tax return.**4 CGT discount**Total CGT discount applied **A \$** 24734 **·00****5 CGT concessions for small business**Small business active asset reduction **A \$** **·00**Small business retirement exemption **B \$** **·00**Small business rollover **C \$** **·00**Total small business concessions applied **D \$** **·00****6 Net capital gain**Net capital gain **A \$** 49468 **·00**1J less 2E less 4A less 5D (cannot be less than  
zero). Transfer the amount at **A** to label **A – Net**  
**capital gain** on your tax return.

Taxpayer/entity name: Montana Downs Super Fund

TFN

**7 Earnout arrangements**

Are you a party to an earnout arrangement? **A** Yes, as a buyer ☐ Yes, as a seller ☐ No ☐  
 (Print ☐ in the appropriate box.)

**!** If you are a party to more than one earnout arrangement, copy and attach a separate sheet to this schedule providing the details requested here for each additional earnout arrangement.

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? **D** \$ .00

Amount of any capital gain or loss you made under your non-qualifying arrangement in the income year. **E** \$ .00 /  <sup>LOSS</sup>

**! Request for amendment**

If you received or provided a financial benefit under a look-through earnout right created in an earlier income year and you wish to seek an amendment to that earlier income year, complete the following:

Income year earnout right created **F**

Amended net capital gain or capital losses carried forward **G** \$ .00 /  <sup>LOSS</sup>

**8 Other CGT information required (if applicable)**

Small business 15 year exemption – exempt capital gains **A** \$ .00 /  <sup>CODE</sup>

Capital gains disregarded by a foreign resident **B** \$ .00

Capital gains disregarded as a result of a scrip for scrip rollover **C** \$ .00

Capital gains disregarded as a result of an inter-company asset rollover **D** \$ .00

Capital gains disregarded by a demerging entity **E** \$ .00

Taxpayer/entity name: Montana Downs Super Fund

TFN

## Taxpayer's declaration

**!** 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](https://ato.gov.au/privacy)

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

Signature

Date

Day

Month

Year

Contact name

TTO CHARTERED ACCOUNTANTS

Daytime contact number (include area code)

08 82119426