Enrile Super	Fund
--------------	------

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

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

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 However, you cannot lodge your tax return electronically if you do not quote your TFN.

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	940 728 127	Year	2017
Name of partnership, trust, fund or entity	Enrile Super	Fund	

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 lo	dge 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 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 refernu	ance ber
Account N	ame Enrile Pty Ltd atf Enrile super
ise the refund	o be deposited directly to the specified account.
iture	Date

Signature

I author

Wh	o should complete this annual return?	Self-managed superannua fund annual return	ation	2017
Onl con	y self-managed superannuation funds (SMS) aplete this annual return. All other funds must			
Only self-managed superannuation funds (SMSFs) can complete this annual return. All other funds music complete the Fund income tax return 2017 (NAT 71287). The Self-managed superannuation fund annual return instructions 2017 (NAT 71606) (the instructions) can assist you to complete this annual return. Section A: Fund information 1 Tax file number (TFN) 940 728 127 The Tax Office 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) Enrile Super Fund 3 Australian business number (ABN) 72 564 206 156 4 Current postal address PO Box 3304 Australia Fair Southport QLD 4215 5 Annual return status Is this an amendment to the SMSF's 2017 return? Is this the first required return for a newly registered SMSF? 6 SMSF auditor Auditor's name Family name Family name Other dwn names Difference in the managed SMSF is 2011 return? First given name Collin				
	Tax file number (TFN)			
			not quoting it cou	ld increase the
2	Name of self-managed superannuat	tion fund (SMSF)		
		Enrile Super Fund		
3	Australian business number (ABN)	72 564 206 156		
4	Current postal address	PO Box 3304		
		Australia Fair		
		Southport	QLD	4215
•	Is this an amendment to the SMSF's 2017			
6	SMSE auditor			
Ū	A 114 1	Mr		
	Familyname	Mackenzie		
		Colin		
	Other given names			
	SMSF Auditor Number	100 004 466		
	Auditor's phone number	07 55646884		
	Use Agent Postal address address details?	PO Box 1231		
		Mudgeeraba	QLD	4213
		Date audit was completed A 16/08/2017		
		Was Part B of the audit report qualified ?		
		If the audit report was qualified, have the reported compliance issues been rectified?	С	

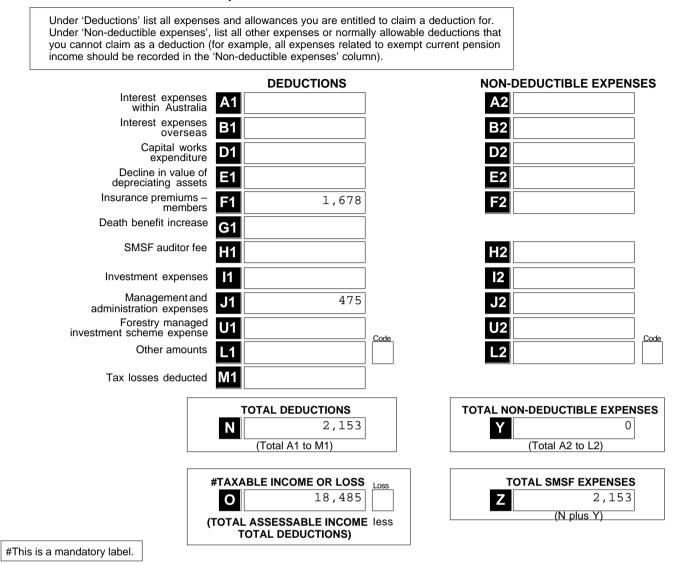
7	W	Financial institution You must provide the f	ed super fund's finan n details for super financial institution de	payments and tax refutering the tax refutering the tax refutering the tax refutering tax refuter	y any super payments and ta Inds ted super account. If you wor ncial institution details at B.	
		Fund BSB number (must be six digits)	035050	Fund account number	299020	
		ι ο <i>γ</i>	or example, J&Q Citize	en ATF J&Q Family SF)		_
		Enrile Pty Lto	d atf Enrile	super		
	в	Financial institution	n details for tax re	funds only	U	Ise Agent Trust Account?
				d to a different account, pr ersonal account. (See rele	ovide additional financial inst vant instructions.)	itution details.
		Fund BSB number (must be six digits)		Account number		
		Fund account name (fo	r example, J&Q Citize	en ATF J&Q Family SF)		
	С	Electronic service a We will use your elect		alias to communicate with	your fund about ATO super	payments.
8	St	Governn	Australian superann ist deed allow accept nent's Super Co-cont Low Income Super C	tance of the C Y	Fund benefit	t structure B A Code
9	W N	Year Year Print Y for yes or N for no.	IP during the inco If yes, provide the which fund was w	e date on		d payment
10	Die	o claim a tax exemption	e stream to one or mo		year? N Print Y for yes or N for no. st the minimum benefit payme	ent under
	-	ne law. Record exempt o		ne at Label A		
			ension income amour	nt A		
				your exempt current pensi	on income?	
			egated assets method			
		Unsegre	egated assets method	d C Was an actu	uarial certificate obtained?	Print Y for yes
		Did the fund have any o	other income that wa	s assessable?	Print Y for yes If Yes, go to Sec r N for no.	ction B: Income
			-			ng no-TFN quoted contributions complete Section B: Income.)

SMSF Form 2017

ction B: Inco	ome		
		Ill pension phase for the entire year and there was no other income that ax offsets, you can record these at Section D: Income tax calculation statement	
Income	Did you have a capital gains ta (CGT) event during the yea Have you applied a exemption or rollove	ar? \square or N for no. Capital gains tax (CGT) schedule 2017. an \square Print Y for yes	
		Net capital gain A 1,51	.9
		Gross rent and other leasing and hiring income	
		Gross interest C 4,51	.3
		Forestry managed investment x	
	preign income		Loss
D1		Net foreign income	
	Aust	tralian franking credits from a New Zealand company	Num
		foreign funds	
Calculation	of assessable contributions	Gross payments where ABN not quoted	Loss
Assessa	able employer contributions	Gross distribution from partnerships	
R1 plus Assess	7,179 able personal contributions	* Unfranked dividend amount 10	1
R2	4,865	* Franked dividend K 1,72	3
<i>plus</i> #*No-TFI	N-quoted contributions	* Dividend franking credit	8 Code
less Transfe	ust be included even if it is zero) er of liability to life	* Gross trust distributions	
R6	0	Assessable contributions R 12,04 (R1 plus R2 plus R3 less R6)	4
Calculation o	of non-arm's length income		
	n-arm's length private npany dividends	* Other income S	Code
	on-arm's length trust distributions	*Assessable income due to changed tax	
		status of fund	
U3	her non-arm's length income	Net non-arm's length income (subject to 47% tax rate) (U1 plus U2 plus U3)	
instructions to	ndatory label t is entered at this label, check the o ensure the correct tax s been applied.	GROSS INCOME (Sum of labels A to U)	
L		Exempt current pension income	
		TOTAL ASSESSABLE INCOME V 20,63 (W less Y)	8
			-

Section C: Deductions and non-deductible expenses

12 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 2017 on how to complete the calculation statement.

#Taxable income A	18,485
(an amount mu	ust be included even if it is zero)
#Tax on taxable income T1	2,772.75
(an amount mu	st be included even if it is zero)
#Tax on no-TFN- quoted contributions	0.00
(an amount mu	ust be included even if it is zero)
Gross tax B	2,772.75
	(T1 plus J)

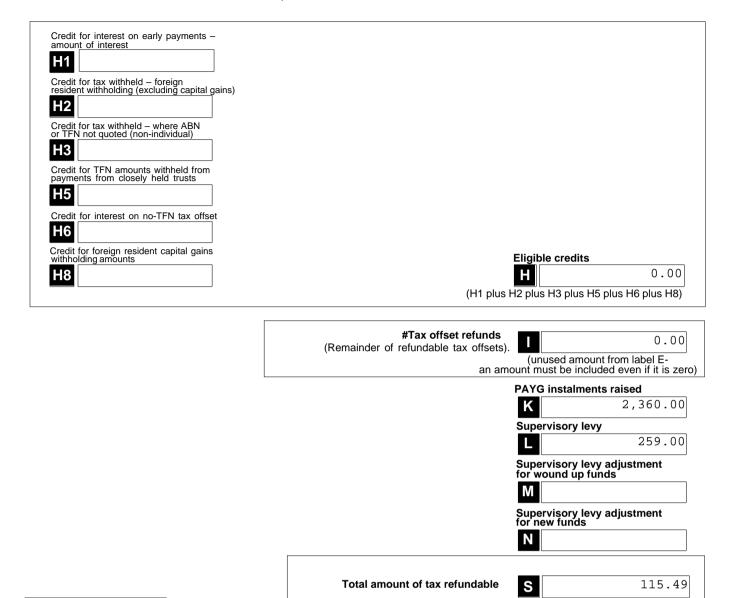
Enrile Super Fund

Section 102AAM interest charge

G

Foreign income tax offset	Non-refundable non-carry forward tax offsets
Rebates and tax offsets	
	(C1 plus C2)
	SUBTOTAL 1
	T2 2,772.75
	(B less C –cannot be less than zero)
Early stage venture capital limited partnership tax offset	
D1	Non-refundable carry
Early stage investor tax offset	Non-refundable carry forward tax offsets
D2	D 0.00 (D1 plus D2)
	SUBTOTAL 2
	T3 2,772.75
	(T2 less D –cannot be less than zero)
Complying fund's franking credits tax offset E1 738.24	
No-TFN tax offset	
National rental affordability scheme tax offset	
Exploration credit tax offset	Refundable tax offsets
E4	E 787.24 (E1 plus E2 plus E3 plus E4)
	#TAX PAYABLE T5 1,985.51
	(T3 less E - cannot be less than zero)

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



#This is a mandatory label.

SMSF Form 2017		rile Super Fund	TFN: 940 728 127	Page 7 of 12	
Section E: Losse 14 Losses	es				
	reater than \$100,000, attach a Losses		come years		
Net capital I Non-Collectables Collectables	osses brought forward from prior years	Net capital losses carried forward to later income years			

SMSF Form 2017 E

Section F / Section G: Member Information

	Mr	See the Privacy note in th Member'sTFN 178 15	e Declaration.	MemberNumber	
Title Family name	Enrile	176 15	0 009	Account status	
First given name	Anthony				
her given names					
0	L	Date of birth 30/10/1968	If deceased, date of death		
ontributions					
Refer to instruction		OPENING ACCOUNT BALANCE	113,	157.80	
or completing thes abels.	e	Employer contributions A	7,	178.82	
		ABN of principal employer A1			
		Personal contributions	4,	864.54	
	CGT	small business retirement exemption			
	CGT small b	business 15-year exemption amount	1		
		Personal injury election			
		Spouse and child contributions			
		Other third party contributions			
	Assessable fr	preign superannuation fund amount			
		preign superannuation fund amount			
		r from reserve: assessable amount			
		n reserve: non-assessable amount ributions from non-complying funds			
	а	nd previously non-complying funds			
	an	s (including Super Co-contributions d Low Income Super Contributions)			
		TOTAL CONTRIBUTIONS	12,	043.36	
other transaction	IS	Allocated earnings or losses	1,	Loss	
		Inward rollovers and transfers			
		Outward rollovers and transfers			
		Lump Sum payment R1		Code	
				Code	
		Income stream payment R2			

SMSF Form 2017	Enrile Super Fund TFN			940 728 127	Page 9 of 12
-	See the Privacy note in the Declaration. Member'sTFN 178 216 487		MemberNumber	2	
Title	Miss	Member'sTFN 178 216 487			
Family name	Enrile Gerel	Account status	O Code		
First given name Other given names	May Ann				
Other given hames			If deceased,	j	
		Date of birth 11/05/1971	date of death		
Contributions	-		67.	500.76	
Refer to instruction for completing these labels.	OPENING ACCOUNT BALANCE				
		Employer contributions	Α		
		ABN of principal employer A1			
		Personal contributions	В		
	CGT s	mall business retirement exemption	C		
	CGT small b	usiness 15-year exemption amount	D		
		Personal injury election			
		Spouse and child contributions	3		
		Other third party contributions	G		
	Assessable for	reign superannuation fund amount			
	Non-assessable fo	reign superannuation fund amount	J		
	Transfer from reserve: assessable amount				
	Transfer from	n reserve: non-assessable amount			
	Contr	ibutions from non-complying funds			
			N		
		TOTAL CONTRIBUTIONS	Ν	0.00	
Other transaction	S	Allocated earnings or losses (2,	054.30	
		Inward rollovers and transfers	P		
		Outward rollovers and transfers	Q	Code	
		Lump Sum payment	1		
		Income stream payment	2	Code	
		CLOSING ACCOUNT BALANCE	S 69,	555.06	
		L			

Section H: Assets and liabilities

15 ASSETS	
15a Australian managed investments	Listed trusts A
	Unlisted trusts B
	Insurance policy C
	Other managed investments

SMSF Form 2017	Form 2017 Enrile Super Fund		40 728 127 Page	e 10 of 12
15b Australian direct investments	Cash and term deposits		135,065	
	Debt secur	ties F]
Limited recourse borrowing arrangemen	s Lo	ans G		
Australian residential real propert	Listed sha	ares H	62,080	
Australian non-residential real propert	Unlisted sha	ares]
Overseas real property	Limited recourse borrowing arrangeme	ents J	0	
Australian shares	Non-residential real prop	erty K		
J4 Overseas shares	Residential real prop	erty		
J5	Collectables and personal use as	sets M		
Other	Other as	sets O]
J6				
15c Overseas direct investments]
	Overseas sha]
	Overseas non-residential real prop]
	Overseas residential real prop			
	Overseas managed investme	ents S		
	Other overseas as	sets		
	TOTAL AUSTRALIAN AND OVERSEAS ASS (Sum of labels A to T)	ETS U	197,145]
15d In-house assets				
C	d 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]
15e Limited recourse borrowing arra	ngements			
	If the fund had an LRBA were the LRBA borrowings from a licensed financial institution?	Print Y for		
	Did the members or related parties of the fund use personal guarantees or other security for the LRBA?	Print Y fo		
16 LIABILITIES				
Borrowings for limited recourse borrowing arrangements				
V1				
Permissible temporary borrowings				
Other borrowings				<u>, </u>
V3	Borrowi	ngs V	0	
	ces W	196,589]	
(tota	d G)			
	ities	556]	
	TOTAL LIABILIT	IES Z	197,145	

Sensitive (when completed)

SMSF Form 2017 Enrile Super Fund TFN: 940 728 127 Page 11 of 12 Section I: Taxation of financial arrangements 17 Taxation of financial arrangements (TOFA) **Total TOFA gains** Н Total TOFA losses 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 Α specified of the election (for example, for the 2016-17 income year, write 2017). If revoking or varying a family trust election, print R for revoke or print V for variation, В and complete and attach the Family trust election, revocation or variation 2017. Interposed entity election status If the trust or fund has an existing election, write the earliest income year specified. If the trust С 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 2017 for each election If revoking an interposed entity election, print R, and complete D and attach the Interposed entity election or revocation 2017. 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 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 Day Month Year Date Preferred trustee or director contact details: Mr Title Enrile Family name Anthony First given name Other given names Number Area code 07 55646884 Phone number Email address Non-individual trustee name (if applicable) ABN of non-individual trustee Hrs Time taken to prepare and complete this annual return 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

Number 55646884

Area code

79652015

07

TAX AGENT'S DECLARATION:

Tax agent's phone number

Tax agent number

IBANEZ PTY LTD
declare that the Self-managed superannuation fund annual return 2017 has been prepared in accordance with information provided by 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
Title
Mr
Family name
Ibanez
First given name
Reynaldo
Other given names
Tax agent's practice
IBANEZ PTY LTD

Reference number ENRI0001