Signature as prescribed in tax retu	rn			
		aged superannua ual return	ation 2	2016
WHO SHOULD COMPLETE THIS AN Only self-managed superannuation funds (SI this annual return. All other funds must compincome tax return 2016 (NAT 71287).	MSFs) can complete	TO COMPLETE THIS AN ■ Print clearly, using a BLACI ■ Use BLOCK LETTERS. ■ Place In ALL applicable	K pen only.	I
The Self-managed superannuation fun instructions 2016 (NAT 71606) (the instruction you to complete this annual return.				
Section A: Fund informat 1 Tax file number (TFN) 1 The ATO is authorised by law to recommend to the state of the state o	990913608	To assist processing, TFN at the top of pages	3, 5 and 7.	
could increase the chance of delay or e	rror in processing you	r annual return. See the Privacy	note in the Declara	ation.
2 Name of self-managed superanr	-	F)		
Moriarty Family Superannuation Fund				
3 Australian business number (AB	N) (if applicable) 27	403083600		
4 Current postal address				
21 Stokes Street				
Suburb/town Bardon		1	State/territory QLD	Postcode 4065
Bardon				4000
5 Annual return status Is this an amendment to the SMSF's 20	16 return?	A No X Yes		
Is this the first required return for a newl	ly registered SMSF?	B No Yes X		
6 SMSF auditor				
Auditor's name				
Title: Mr X Mrs Miss Ms Other	er			
Boys				
First given name	Other given	names		
Anthony	William			
	r's phone number	$\overline{}$		
	712708			
Postal address				
PO Box 3376				
Suburb/town			State/territory	Postcode
Rundle Mall	Month Year		SA	5000
Date audit was completed A / /	/]		
Was Part B of the audit report qualified?	B No X Yes	J		
If the audit report was qualified, have the repo compliance issues been rectified?	orted C No	Yes		

Sig	gnat	ure as prescribed in tax return Tax File Number 990913608							
7		ectronic funds transfer (EFT)							
	_	need your self-managed super fund's financial institution details to pay any super payments and tax refunds owing to you.							
	Α	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) 083088 Fund account number 715469355							
	Fund account name (for example, J&Q Citizen ATF J&Q Family SF)								
	Moriarty Family Superannuation F								
	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&Q Citizen ATF J&Q Family SF)							
	С	Electronic service address alias We will use your electronic service address alias to communicate with your fund about ATO super payments.							
		The same of the second of the							
8	Sta	atus 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 Contribution?							
9	Was the fund wound up during the income year?								
	No X Yes) If yes, provide the date on which the fund was wound up / Month / Year Have all tax lodgment and payment obligations been met?								
10	Ex	empt current pension income							
	Did	the fund pay an income stream to one or more members in the income year?							
	th	To claim a tax exemption for current pension income, you must pay at least the minimum benefit payment under e law. Record exempt current pension income at Label A.							
	No	X) Go to Section B: Income.							
	Yes Exempt current pension income amount A\$								
	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?							
	_	Yes OG 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 ese at Section D: Income tax calculation statement.							

Signature as prescribed in tax retur	n	Fund's tax file number (TF 990913608
Section B: Income		
		nase for the entire year and there was no other income th cord these at Section D: Income tax calculation statement
11 Income Did you have a capital gains (CGT) event during the year	tax G No X Yes	If the total capital loss or total capital gain is greater than \$10,000 complete and attach a Capital gains tax (CGT) schedule 2016.
Have you applied exemption or rollov	an er? M No X Yes	
	Net capital gain	A \$
Gross rent and other	leasing and hiring income	В\$
	Gross interest	C \$ 12
Fore	estry managed investment scheme income	X \$
Gross foreign income		Loss
D1 \$	Net foreign income	D \$
Australian franking credits from	a New Zealand company	E\$
	Transfers from foreign funds	F\$ Number 0
	Gross payments where ABN not quoted	н \$
Calculation of assessable contribution Assessable employer contributions	Gross distribution	Loss
R1 \$	from partnerships *Unfranked dividend	J \$
plus Assessable personal contributions	*Franked dividend	
R2 \$ 65,0	amount '	K \$
plus #*No-TFN-quoted contributions	*Dividend franking credit	L \$
R3 \$ (an amount must be included even if it is z	*Gross trust distributions	M \$
less Transfer of liability to life insurance company or PST	Assessable	
R6 \$	7,000000000	R \$ 65,000
Calculation of non-arm's length incom		Code
*Net non-arm's length private company divide U1 \$	ends *Other income	s \$
plus *Net non-arm's length trust distribution	*Assessable income due to changed tax	т \$
U2 \$	status of fund	· • L
plus *Net other non-arm's length income U3 \$	Net non-arm's length income (subject to 47% tax rate) (U1 plus U2 plus U3)	U \$
#This is a mandaton:		Loss
*This is a mandatory label.	GROSS INCOME (Sum of labels A to U)	W \$ 65,012
entered at this label,	ot current pension income	Y \$
check the instructions to ensure the correct tax treatment has been applied.	SABLE INCOME (W /ess Y) V \$	65,012 Loss

Tax	File	Number	

990913608

/	/
// //	6
/(//	

Place your attachments here.

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	A1 \$	A2 \$
Interest expenses overseas	B1 \$	B2 \$
Capital works expenditure	D1 \$	D2 \$
Decline in value of depreciating assets	E1 \$	E2 \$
Insurance premiums – members	F1 \$	F2 \$
Death benefit increase	G1 \$	
SMSF auditor fee	H1 \$	H2 \$
Investment expenses	I1 \$	I2 \$
Management and administration expenses	J1 \$ 12	J2 \$
Forestry managed investment scheme expense	U1 \$	U2 \$
Other amounts	L1 \$	L2 \$
Tax losses deducted	M1 \$	
	TOTAL DEDUCTIONS N \$ 12 (Total A1 to M1)	TOTAL NON-DEDUCTIBLE EXPENSES Y \$ [(Total A2 to L2)
	*TAXABLE INCOME OR LOSS • \$ 65,000	TOTAL SMSF EXPENSES Z \$ 12
This is a mandatory abel.	(TOTAL ASSESSABLE INCOME less TOTAL DEDUCTIONS)	(N plus Y)

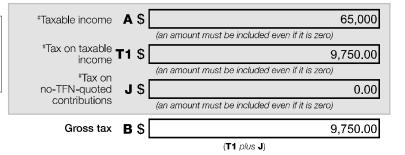
Section D: Income tax calculation statement

#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 Calculation statement

Please refer to the Self-managed superannuation fund annual return instructions 2016 on how to complete the calculation statement.



Signature as prescribed in tax return	Fund's tax file number (TFN) 990913608
Foreign income tax offset C1 \$	
Rebates and tax offsets C2\$	Non-refundable non-carry forward tax offsets C \$
G25	(C1 plus C2)
Compliance funding front in a gradita toy officet	SUBTOTAL
Complying fund's franking credits tax offset	T2 \$ 9,750.00
No-TFN tax offset	(B less C – cannot be less than zero)
E2\$	
National rental affordability scheme tax offset	
E3\$	
Exploration credit tax offset	Refundable tax offsets
E4 \$ 0.00	E \$
	(E1 plus E2 plus E4 plus E4)
*TAX PAYABL	E T5 \$ 9,750.00
	(T2 less E – cannot be less than zero)
Credit for interest on early payments –	Section 102AAM interest charge
amount of interest	G \$
H1 \$	
Credit for tax withheld – foreign resident withholding	Eligible credits
H2\$	H \$ 5.00
Credit for tax withheld – where ABN	(H1 plus H2 plus H3 plus H5 plus H6)
or TFN not quoted (non-individual)	
H3\$ 5.00	"Tax offset refunds (Remainder of refundable tax offsets)
Credit for TFN amounts withheld from payments from closely held trusts	0.00
H5 \$ 0.00	(unused amount from label E –
Credit for interest on no-TFN tax offset	an amount must be included even if it is zero)
H6\$	PAYG instalments raised
	K\$
	Supervisory levy
	L \$259.00
	Supervisory levy adjustment for wound up funds
	M \$
	Supervisory levy adjustment for new funds
	N \$259.00
AMOUNT DUE OR REFUNDABL	E \$ \$ 10,263.00
A positive amount at S is what you owe	
while a negative amount is refundable to you	J.
#This is a mandatory label.	
Section E: Losses	
14 Losses	Tax losses carried forward to later income years
If total loss is greater than \$100,000,	to later income years
complete and attach a Losses schedule 2016. forv	Net capital losses carried ward to later income years \$

					10	0017658MS
Signature as prescribed	in tax return			Tax File Number	9909136	08
Section F: Memb	er information					
In Section F report all cu Use Section G to report any income year.			vho held	an interest in the fund at	any time dur	ing the
MEMBER 1 Title: Mr X Mrs Miss Family name	Ms Other					
Moriarty						
First given name Sean		her given names Peter				
Member's TFN See the Privacy note in the De	497244422	Glei		Date of birth 08	/ 06 /	Year 1960
Contributions	· · · · · · · · · · · · · · · · · · ·	A				
Refer to instructions	OPENING ACCOUNT BAL	ANCE \$				
for completing these labels.	Employer contrib	outions A\$				
	ABN of principal employer	A1				
	Personal contrib	outions B \$		35	,000.000	
CGT sm	nall business retirement exer	mption C \$				
CGT small bu	siness 15-year exemption a	mount D \$				
	Personal injury e	lection E \$				
	Spouse and child contrib	outions F \$				
	Other third party contrib	outions G \$				
Assessable for	reign superannuation fund a	mount [\$				
Non-assessable for	reign superannuation fund a	mount J \$				
Transfer	r from reserve: assessable a	mount K \$				
Transfer from	n reserve: non-assessable a	mount L \$				
Contrib	outions from non-complying nd previously non-complying	funds T\$				
Any other contributions	(including Super Co-contrib Low Income Super Contrib	outions				
	TOTAL CONTRIBU	TIONS N \$		35	,000.000	
Other transactions	Allocated earnings or losse	es 0 \$		5	,249.96	Loss
1	Inward rollovers and transfe	rs P \$				
Ou	utward rollovers and transfe	rs Q \$				Code
	Lump Sum paymen	t R1 \$				
	Income stream paymen	nt R2 \$				Code

CLOSING ACCOUNT BALANCE \$\$

29,750.04

Signature as presc	ribed in	tax return						tax file r 990913	number (TFN) 608
In Section F reportuse Section G to report income year.					rs who	held	an interest in the fund at a	any time d	uring the
MEMBER 2 Title: Mr Mrs X ! Family name	Miss M	s Other							
Moriarty									
First given name Cassandra			Other giv		nes				
			Judith			_	Day	Month	Year
Member's TFN See the Privacy note in t	the Declara	ation. 48593	5840				Date of birth 01	/ 02	/ 1967
Contributions	OPE	ENING ACCOL	JNT BALANCE	<u></u> \$Г				$\overline{}$	
Refer to instruction for completing these				_	<u>-</u>			=	
labels.			er contribution	_	\$				
	AE	N of principal	employer A1						
		Persor	al contribution	s B	\$		30,0	00.00	
C	GT small b	ousiness retirer	ment exemption	n C	\$				
CGT sm	nall busine:	ss 15-year exe	emption amour	t D	\$				
		Person	al injury electio	n E	s_				
	0		ild contribution		s =				
	(Other third pai	ty contribution		\$				
Assessa	ble foreign	superannuati	on fund amour	t	\$				
Non-assessa	.ble foreign	superannuati	on fund amour	t J	\$				
Tr	ansfer fror	n reserve: ass	essable amour	t K	\$				
Transfe	er from res	erve: non-ass	essable amour	t L	\$				
(Contributio	ns from non-c	complying fund	s T	s				
Any other contrib	utions (incl	uding Super C	complying fund Co-contribution	S S mæ	\$			=	
	and Low	Income Supe	r Contributions	"					
Ollers		TOTAL CO	NTRIBUTIONS	3 N	\$		30,0	00.00	Loss
Other transactions	Allo	ocated earning	s or losses C	\$[4,4	499.97	L
	Inwa	rd rollovers an	d transfers	\$ [
	Outwa	rd rollovers an	d transfers	\$ [Codo
		Lump Sun	n payment R1	\$[Code
		Income strean	n payment R2	\$[
	CLOSING	G ACCOUNT	BALANCE S	s \$[25,:	500.03	

Signature as prescr	ribed in tax return	Tax File Number 990913608
	all current members in the fund at 30 Ju t any former members or deceased mer	June. embers who held an interest in the fund at any time during the
MEMBER 3		
Title: Mr Mrs Mrs Mrs Mrs Mrs Mrs Mrs Mrs Mrs	Miss Ms Other	
First given name	Other give	ven names
		Day Month Year
Member's TFN See the Privacy note in the	he Declaration.	Date of birth / / /
Contributions	OPENING ACCOUNT BALANCE	\$
Refer to instructions for completing these		
labels.	ABN of principal employer A1	
	Personal contributions	
CC	GT small business retirement exemption	
	nall business 15-year exemption amount	
Out sin		•
	Personal injury election	
	Spouse and child contributions	
Aggagash	Other third party contributions	
	ble foreign superannuation fund amount	
	ble foreign superannuation fund amount	
	ansfer from reserve; assessable amount	
	er from reserve: non-assessable amount Contributions from non-complying funds	
	and previously non-complying funds utions (including Super Co-contributions	
,	and Low Income Super Contributions)	3) W 3
Other transactions	TOTAL CONTRIBUTIONS	S N \$ Loss
Other transactions	Allocated earnings or losses •	\$
	Inward rollovers and transfers P	• \$
	Outward rollovers and transfers Q	Q \$
	Lump Sum payment R1	Code
	Income stream payment R2	2 \$
	CLOSING ACCOUNT BALANCE S	s\$

Signature as prescr	ibed in tax	return				Tax File Nun	n be r 99091	3608
In Section F report Use Section G to report income year.					who held	d an interest in the fu	und at any time (during the
MEMBER 4								
Title: Mr Mrs Mrs Mrs M	liss Ms	Other						
First given name		Othe	r give	n name	3			
							Day Month	Year
Member's TFN See the Privacy note in the	ne Declaratio	n.				Date of birth		
Contributions		NG ACCOUNT BALAN	ICE	\$[ĺ]
Refer to instructions for completing these	s L	Employer contribut	ions		:		1	J
labels.	 ABN (of principal employer	A1					
		Personal contribut	ions	в \$	3			
CC	GT small busi	ness retirement exemp	tion	c s				
CGT sm	all business ⁻	5-year exemption amo	ount	D S				
		Personal injury elec	tion	E \$				
	Spoi	use and child contribut	ions	F\$				
	Oth	er third party contribut	ions	G \$				
Assessat	ole foreign su	perannuation fund amo	ount	ı \$				
Non-assessak	ole foreign su	perannuation fund amo	ount	J \$;			
Tra	ansfer from re	eserve: assessable amo	ount	K \$				
Transfe	r from reserv	e: non-assessable am	ount	L\$;			
C	Contributions and previo	from non-complying fu ously non-complying fu	ınds ınds	т \$	i			
Any other contribu	itions (includi and Low Inc	ng Super Co-contribut come Super Contributi	ions ons)	м \$				
	-	TOTAL CONTRIBUTION	ONS	N S				
Other transactions	Allocat	ed earnings or losses	0	\$				Loss
	Inward r	ollovers and transfers	P	\$				
	Outward r	rollovers and transfers	Q	\$				Code
		Lump Sum payment	R1	\$				
	Inco	ome stream payment	R2	\$				Code
	CLOSING A	CCOUNT BALANCE	S	\$]

Signature as prescr	ibed in tax return	Tax File Number 990913608
Section G: Sup	oplementary member informa	tion
	any former members or deceased members who held ction G report any other members who cannot be inclu	
MEMBER 5 Title: Mr Mrs Mrs M	fliss Ms Other	Account status Code
First given name	Other given names	
Manakasia TEN		M decreed data of days
Member's TFN See the Privacy note in the I	Date of birth Declaration, Day Month Year	If deceased, date of death Day Month Year
Contributions	OPENING ACCOUNT BALANCE \$	
Refer to instructions for completing these labels.		
15.50.51	ABN of principal employer A1	
	Personal contributions B \$	
CG	GT small business retirement exemption C \$	
CGT sma	all business 15-year exemption amount D\$	
	Personal injury election E\$	
	Spouse and child contributions F\$	
	Other third party contributions G \$	
Assessab	ole foreign superannuation fund amount	
Non-assessab	ole foreign superannuation fund amount J\$	
Tra	ansfer from reserve; assessable amount K\$	
Transfe	r from reserve: non-assessable amount L\$	
	Contributions from non-complying funds and previously non-complying funds tions (including Super Co-contributions and Low Income Super Contributions)	
	TOTAL CONTRIBUTIONS N \$	
Other transactions	Allocated earnings or losses • • •	Loss
	Inward rollovers and transfers P\$	
	Outward rollovers and transfers Q\$	Code
	Lump Sum payment R1 \$	Code
	Income stream payment R2 \$	
	CLOSING ACCOUNT BALANCE \$\$	

Signature as preso	ribed in 1	tax return					Tax Fil	e Number	99091	3608
In Section G report any former members or deceased members who held an interest in the fund at any time during the income year. Also in Section G report any other members who cannot be included at pages 6 to 9.										
MEMBER 6 Title: Mr Mrs Mrs Mrs Mrs Mrs Mrs Mrs Mrs Mrs	Miss M	S Other							Accoun	t status Code
First given name			Other give	en nan	nes					
, and the second										
Member's TFN See the Privacy note in the	Declaration		Date of birth	onth	/[Year		If dece	ased, dat	e of death Year
Contributions										1
		NING ACCO	UNT BALANCE	\$						
Refer to instruction for completing these labels.		Emplo	yer contributions	A	\$					
	 AB	N of principa	l employer A1							
		Perso	nal contributions	В	\$					
C	GT small b	usiness retire	ment exemption	C	\$					
CGT sn	na ll busines	ss 15-year ex	emption amount	D	\$					
		Persor	nal injury election	E	\$					
	SI	oouse and ch	nild contributions	; F	\$					
	(Other third pa	arty contributions	G	\$					
Assessa	able foreign	superannuat	ion fund amount	t I	\$					
Non-assessa	able foreign	superannuat	ion fund amount	: J	\$					
Ті	ransfer from	n reserve: ass	sessable amount	K	\$					
Transf	er from res	erve: non-ass	sessable amount	L	\$					
	Contributio and pre	ns from non- eviously non-	complying funds	T	\$					
Any other contrib	utions (incl	uding Super (3 B.	\$					
		TOTAL CO	ONTRIBUTIONS	N	\$					Loss
Other transactions	Allo	cated earning	gs or losses O	\$						
	Inwai	rd rollovers a	nd transfers P	\$[
	Outwar	rd rollovers a	nd transfers Q	\$[01-
		Lump Sui	m payment R1	\$						Code
	I	ncome strear	m payment R2	\$						Code
	CLOSING	ACCOUNT	BALANCE \$	\$\$[

Signature as preso	ribed in t	tax return						Tax	File Nu	mber	99091	3608	
In Section G report any former members or deceased members who held an interest in the fund at any time during the income year. Also in Section G report any other members who cannot be included at pages 6 to 9.													
MEMBER 7 Title: Mr Mrs Mrs Family name	Miss M	s Other]		Accour	nt status	ode
First given name			Oth	er given	nom	200							
Tilst giver hame				er giveri	Hall	103							
Member's TFN See the Privacy note in the	Dodovation		Date of	birth Monti			. V		į	If dece	ased, da	te of death	
See the Frivacy flote in the	e Declaration	,	Day	/	٦,	/ [Year			Day	/	/	
Contributions			,	•		_						· 	
Contributions		ENING ACC	OUNT BALA	NCE \$	₽□								
Refer to instruction for completing these labels.	ns L	Emplo	oyer contribu	utions	A	\$						_	
ISSOCI	 AB	N of principa	al employer	A1									
		Pers	onal contribu	utions	В	\$							
C	GT sma ll b	usiness retir	rement exem	ption	C	\$							
CGT sr	mall busines	ss 15-year e	xemption an	nount	D	\$							
		Perso	onal injury ele	ection	Ε	\$							
	S	pouse and c	child contribu	utions	F	\$							
	(Other third p	arty contribu	utions	G	\$							
Assessa	able foreign	superannua	ation fund an	nount	I	\$							
Non-assessa	able foreign	superannua	ation fund an	nount	J	\$							
П	ransfer fron	n reserve: as	ssessable an	nount	K	\$							
Transf	er from res	erve: non-as	ssessable an	nount	L	\$							
	Contributio and pre	ns from non eviously non	n-complying in-complying	funds funds	T	\$							
Any other contrib	outions (incl and Low	uding Super Income Su	Co-contribu per Contribu	utions tions)	М	\$							
		TOTAL C	ONTRIBUT	IONS	N	\$							
Other transactions	Allo	cated earnir	ngs or losses	· 0 9	₿□							Loss	
	Inwa	rd rollovers a	and transfers	. P	\$[
	Outwa	rd rollovers a	and transfers	Q 9	\$ [Code	
		Lump St	um payment	R1 9	₿□								
	I	ncome strea	am payment	R2 5	₽							Code	
	CLOSING	ACCOUN	T BALANCE	S	βE								

Signature as presc	ribed in t	ax return				Tax File	Number	99091	3608
In Section G report any former members or deceased members who held an interest in the fund at any time during the income year. Also in Section G report any other members who cannot be included at pages 6 to 9.									
MEMBER 8 Title: Mr Mrs Mrs Family name	Miss Ms	S Other						Accoun	t status Code
First given name			Other give	n name	es				
Member's TFN See the Privacy note in the	Declaration		te of birth	nth /	Ye	oar	If dece	eased, dat	e of death Year
Contributions		NING ACCOUNT E	PALANICE	۰				1]
Refer to instruction for completing these labels.		Employer cor		Ψ <u></u> Α :	\$				
laboro.	 AB	N of principal emplo	oyer A1						
		Personal cor	ntributions	В	\$				
C	GT small b	usiness retirement e	exemption	C S	\$				
CGT sr	na ll busines	s 15-year exemptic	n amount	D S	\$				
		Personal inju	ry election	E S	\$				
	Sp	oouse and child cor	ntributions	F S	\$				
	(Other third party cor	ntributions	G S	\$				
Assessa	ıble foreign	superannuation fur	nd amount	1 (\$				
Non-assessa	ıble foreign	superannuation fur	nd amount	J	\$				
П	ansfer from	reserve: assessab	le amount	K	\$				
Transf	er from rese	erve: non-assessab	le amount	L S	\$				
	Contribution and pre	ns from non-comply eviously non-comply	ying funds ying funds	т :	\$				
Any other contrib	utions (incl	uding Super Co-cor Income Super Con	ntributions	м :	\$				
		TOTAL CONTRI	BUTIONS	N S	\$				Loss
Other transactions	Allo	cated earnings or lo	osses O	\$_					
	Inwar	d rollovers and tran	isfers P	\$[
	Outwar	d rollovers and tran	sfers Q	\$[Code
		Lump Sum payr	ment R1	\$[
	l	ncome stream payr	ment R2	\$_					Code
	CLOSING	ACCOUNT BALA	NCE S	\$					

Signature as prescribed in tax return		Tax File Number 990913608
Section H: Assets and liab 15 ASSETS	ilities	
15a Australian managed investments	Listed trusts	A \$
	Unlisted trusts	3 \$
	Insurance policy C	\$
	Other managed investments	\$
15b Australian direct investments	Cash and term deposits	≣ \$ 35,995
Limited recourse borrowing arrangem Australian residential real property	Debt securities	F \$
J1 \$	Loans C	\$ \$
Australian non-residential real property	Listed shares	1 \$
J2 \$	 Unlisted shares	1\$
Overseas real property J3 \$		
Australian shares	Limited recourse borrowing arrangements	J \$
J4 \$	Non-residential real property	(\$ 29,000
Overseas shares J5 \$	Residential	
Other	real property Collectables and	1 \$
J6 \$	personal use assets NO	
	Other debote	
15c Overseas direct investments	Overseas shares	• \$
Oversea	s non-residential real property	2 \$
Ove	erseas residential real property	R \$
O	verseas managed investments	5 \$
	Other overseas assets 1	r \$
	N AND OVERSEAS ASSETS (J \$ 64,995
15d In-house assets Did the fund have a loan to, leas or investment in, related parties (kn as in-house assets) at the end of income years.	own A No K Yes []/ f the	\$

Signature as prescribed in tax return		Tax File Number	990913608
			000010000
16 LIABILITIES	Borrowings V	\$	
Total memb (total of all CLOSING ACCOUNT BALAN	per closing account balances NCEs from Sections F and G)	v \$	55,250
	Reserve accounts X	\$	
	Other liabilities Y	\$	9,745
	TOTAL LIABILITIES Z	: \$	64,995
Section I: Taxation of finan 17 Taxation of financial arrangements	_	S	
	Total TOFA gains H \$		
	Total TOFA losses \$		
	•		
Section J: Other information	on		
Family trust election status If the trust or fund has made, or is making, specified of the election (for the election (a family trust election, write the for example, for the 2015–16 inco		A
	trust election, print R for revoke the <i>Family trust election, revoca</i>		в
Interposed entity election status If the trust or fund has an existing elector fund is making one or more specified and complete an Interpose.	elections this year, write the earli	iest income year being	c
	ng an interposed entity election, tach the <i>Interposed entity electic</i>		D 🗌

Tax File Nu	mber 990	913608

Section K: Declarations

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

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

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 docur nominated bank account (if applicable).	mentation is true and correct. I also autho	rise the ATO to ma	ake any tax refunds to the
Authorised trustee's, director's or public office	er's signature		
		Day	Month Year
		Date 27	/ 06 / 2017
Preferred trustee or director contact	detaile:	Dato 27	7 00 7 2017
Title: Mr X Mrs Miss Ms Othe Family name			
Moriarty First given name	Other given names		
Sean	Peter		
	l etel		
Phone number 0412731070			
Email address			
scmoriarty@bigpond.com			
Non-individual trustee name (if applicable)			
Moriarty Family Superannuation Fund	Pty Ltd		
ABN of non-individual trustee			
Time taken to p	repare and complete this annual return	Hrs	
The Commissioner of Taxation, as Regis you provide on this annual return to maintain	strar of the Australian Business Register, r n the integrity of the register, For further int		
TAX AGENT'S DECLARATION: I declare that the Self-managed superannuation by the trustees, that the trustees have given not the trustees have authorised me to lodge this Tax agent's signature	ne a declaration stating that the informatio		
		Day Day	/ Month Year 2017
Tour a south a subset data!		Date 27	/ 06 / 2017
Tax agent's contact details Title: Mr X Mrs Miss Ms Othe	r		
Family name			
Kelly			
First given name	Other given names		
William			
Tax agent's practice			
Kelly Tax Accounting Pty Ltd			
Tax agent's phone number	Reference number	Tax	agent number
0731625585	MORIARTYFSF	·	583000
		<u> </u>	
Postal address for annual returns: Aust	ralian Taxation Office, GPO Box 9845, I	IN YOUR CAPITA	L CITY