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 However, you cannot lodge your tax return electronically if you do not quote your TFN.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		Year 2018	
Name of partnership, trust, fund or entity	Silich Family Super Fun	nd	
trust, fund or entity	billen ramity super run	14	

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 i	s authorised	to lodge	this	tax return.	
---	-------------	--------------	----------	------	-------------	--

Signature of partner, trustee or director	Date	

PART B

I

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.

0	's reference number ount Name	Silich Family Supe	r Fund				
I authorise the	refund to be	e deposited directly to the specified a	account.				
Signature				Date			
PART D	DN & AC	Tax agent's c		e (shared facilities on	ly)		
	I have rece correct, an	eived a declaration made by the entit d	ty that the inform	ion supplied by the partner, trustee, di mation provided to me for the prepara	tion of this	tax return	is true and
Agent's	I am autho	rised by the partner, trustee, director	or public office	er to lodge this tax return, including an	y applicable	e schedule	5.
signature			Date		Client re	eference	SILI0010
Contact name	Mr Wayı	ne Andrew Ottey					
Agent's phone	number 0	8 92402333]	Agent's reference	e number	641980)06

		Self-managed superannua	tion	2018
Wh	should complete this annual return?	fund annual return		
Only com	self-managed superannuation funds (SMSF plete this annual return. All other funds must d income tax return 2018 (NAT 71287).			
ins	e Self-managed superannuation fund annu tructions 2018 (NAT 71606) (the instructio u to complete this annual return.			
Ser	tion A: Fund information			
1	Tax file number (TFN)			
	The Tax Office is authorised by law to requ	Just your TFN. You are not obliged to quote your TFN but not annual return. See the Privacy note in the Declaration.	it quoting it could	increase the
2	Name of self-managed superannuat	ion fund (SMSF)		
		Silich Family Super Fund		
3	Australian business number (ABN)	15 432 826 346		
4	Current postal address	Suite 1A		
		152 Balcatta Road		
		Balcatta	WA	6021
5	Annual return status Is this an amendment to the SMSF's 2018 r			
	Is this the first required return for a newly	registered SMSF? B		
6	SMSF auditor			
	Auditor's name Title	Mr		
	Familyname	Boys		
	First given name	Tony		
	Other given names			
	SMSF Auditor Number	100 014 140		
	Auditor's phone number	0410 712708		
	Use Agent Postal address	Box 3376		
	address details?			
		RUNDLE MALL	SA	5000
		Date audit was completed A 28/10/2019		
		Was Part B of the audit report qualified ? ${\sf B}$ N		
		If the audit report was qualified, have the reported compliance issues been rectified?	С	

Silich Family Super Fund

7	Electr	onic	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.

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.

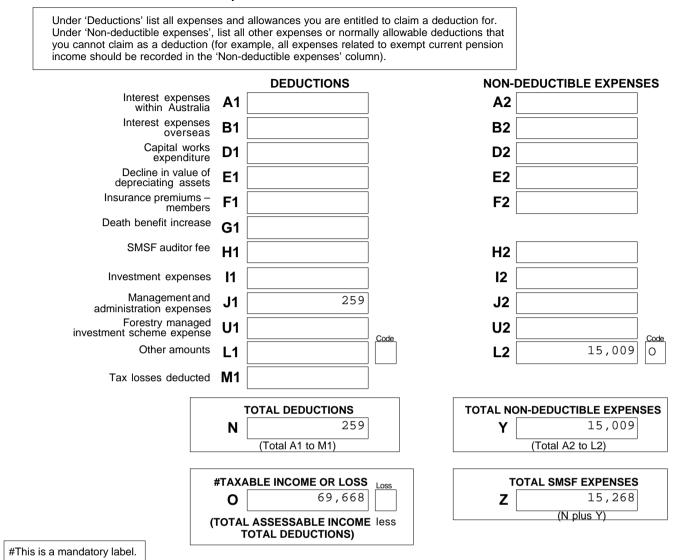
		Fund BSB number (must be six digits)	016112	Fund account number	451161081	
		Fund account name (f	or example, J&Q Citiz	en ATF J&Q Family SF)		
		Silich Family		. ,		
			fund's tax refunds pa	efunds only aid to a different account, pr personal account. (See rele		Use Agent Trust Account?
		Fund BSB number (must be six digits)	or example J&O Citiz	Account number en ATF J&Q Family SF)		
	С	Electronic service We will use your elec AUSPOSTSMSF		s alias to communicate with	your fund about ATO sup	per payments.
8	Sta	atus of SMSF	Australian superanı	nuation fund A	Fund ben	efit structure B A Code
			rust deed allow accep ment's Super Co-con Low Income Super C	tribution and		
9	Wa	as the fund wound	up during the inco	ome year?		
	N	Print Y for yes or N for no.	If yes, provide the which fund was w			tax lodgment and payment s been met?
10	Dic	Cempt current pens d the fund pay retireme the income year?		tion income stream benefits	to one or more members	N Print Y for yes or N for no.
		o claim a tax exemption e law. Record exempt		ncome, you must pay at lea me at Label A	st the minimum benefit pay	rment under
	lf	No, Go to Section B: In	come			
	lf	Yes Exempt current p	pension income amou	int A		
		Which method di	d you use to calculate	e your exempt current pensi	on income?	
		Segr	regated assets methor	d B		
		Unsegr	regated assets metho	d C Was an actu	uarial certificate obtained?	D Print Y for yes
	I	Did the fund have any	other income that wa	as assessable? E	Print Y for yes If Yes, go to S r N for no.	Section B: Income
						iding no-TFN quoted contributions. ot complete Section B: Income.)
		you are entitled to clai ese at Section D: Inco				

Silich Family Super Fund

ction B: Inco	ome				
etirement phase	for the entire year, there was no of	rests in the SMSF were supporting superannuation her income that was assessable, and you have not ts, you can record these at Section D: Income tax c	reali	ised a deferred	
Income	Did you have a capital gains tax (CGT) event during the year? Have you applied an	G Y Print Y for yes or N for no. Code \$10,000 or you el the deferred notic and attach a Capi	ected nal ga	to use the CGT relief in 2017 ain has been realised, comple ains Tax (CGT) schedule 2018	7 and ete
	exemption or rollover?	or N for no.	•	2,203	٦
		Net capital gain	A	2,203	
		Gross rent and other leasing and hiring income	В		
		Gross interest Forestry managed investment	C	135] 1
		scheme income	X		
Gross fo	reign income 438	Net foreign income	D	438	Loss
L	Austra	an franking credits from a New Zealand company	Е		
		Transfers from foreign funds	F		Numbe
		Gross payments where ABN not quoted	н]
	f assessable contributions ble employer contributions	Gross distribution from partnerships	I		Loss
	34,653 able personal contributions	* Unfranked dividend amount	J	790]
R2		* Franked dividend amount	Κ	15,811]
plus#*No-TFN R3	J-quoted contributions	* Dividend franking credit	L	6,777]
(an amount mu	st be included even if it is zero)	* Gross trust distributions	Μ	9,120	Code P
	ce company or PST	Assessable contributions (R1 plus R2 plus R3 less R6)	R	34,653]
Calculation of	i non-arm's length income				
* Net non	-arm's length private pany dividends				Code
U1		* Other income	S		
<i>plus</i> * Net not U2	n-arm's length trust distributions	*Assessable income due to changed tax status of fund	т]
plus * Net oth	er non-arm's length income	Net non-arm's length income (subject to 45% tax rate)	U]
#This is a mar * If an amount	is entered at this label, check the	(U1 plus U2 plus U3) GROSS INCOME	w		
instructions to treatment has	ensure the correct tax	(Sum of labels A to U)			
		Exempt current pension income	Y		
		TOTAL ASSESSABLE INCOME	v	69,927	Loss

Section C: Deductions and non-deductible expenses

12 Deductions and non-deductible expenses



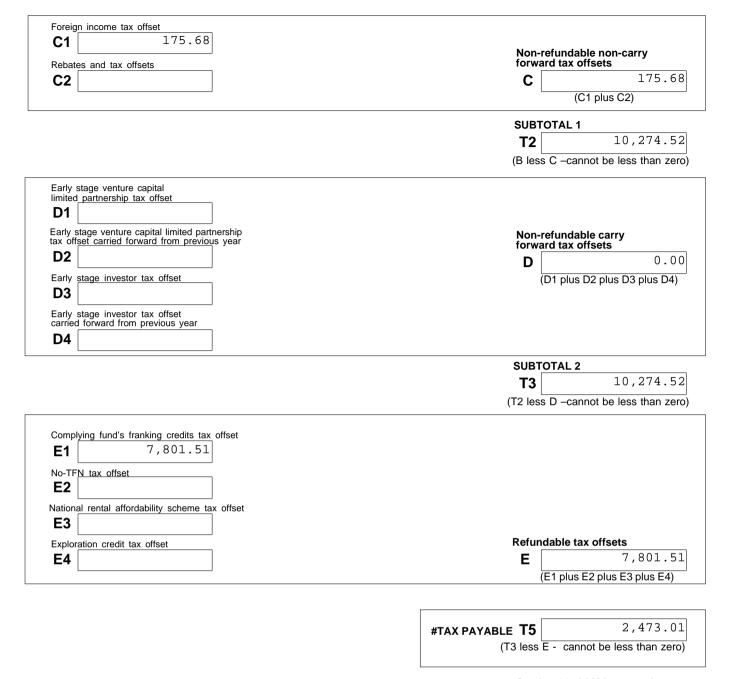
Section D: Income tax calculation statement #Important:

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 2018 on how to complete the calculation statement.

#Taxable income A	69,668
(an amount mu	st be included even if it is zero)
#Tax on taxable income T1	10,450.20
(an amount mu	st be included even if it is zero)
#Tax on no-TFN- quoted contributions J	0.00
	st be included even if it is zero)
Gross tax B	10,450.20
	(T1 plus J)



Section 102AAM interest charge

G

Credit for interest on early payments -		
amount of interest		
H1		
Credit for tax withheld – foreign		
Credit for tax withheld – foreign resident withholding (excluding capital gains)		
H2		
Credit for tax withheld – where ABN or TFN not quoted (non-individual)		
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 credits	
H8	Η 222.0	00
	(H1 plus H2 plus H3 plus H5 plus H6 plus H	-18)
		10)
	#Tax offset refunds	00
	(Remainder of refundable tax offsets). (unused amount from label E-	
	an amount must be included even if it is	zero)
	PAYG instalments raised	
	K 4,168.	00
	Supervisory levy	0.0
	L 259.	00
	Supervisory levy adjustment for wound up funds	
	M	
	Supervisory levy adjustment for new funds	
	N	
	Total amount of tax refundable S 1,657.	.99
#This is a mandatory label.	(T5 plus G less H less I less K plus L less M plus	SIN)
ection E: Losses		
4 Losses		
	Tax losses carried forward	
If total loss is greater than \$100,000,	to later income years	
complete and attach a Losses schedule 2018.	Net capital losses carried V	
	forward to later income years	
Net capital losses brought forward	Net capital losses carried forward	
from prior years	to later income years	
Non-Collectables 44,226	0	
Collectables 0	0	

SMSF Form 2018

Silich Family Super Fund

Section F / Section G: Member Information

Jse Section F / G	port all current members in to report any former memb	pers or deceased members who held an ir	teres	t in the fund at any t	ime during the ir	ncome y
		See the Privacy note in	the D	eclaration.	MemberNumb	~~ [
Title	Mr Member'sTFN					
Familyname	Silich		Account state	us 0		
First given name	Stephen					
her given names	Douglas					
		Date of birth 02/04/1955		If deceased, date of death		
ontributions				E10	200.00	
Refer to instruction or completing thes		OPENING ACCOUNT BALANCI		/18,	280.00	
abels.		Employer contributions	A	25,	000.00	
		ABN of principal employer A1				
		Personal contributions	В			
	C	GT small business retirement exemption	C			
	CGT sn	nall business 15-year exemption amount	D			
		Personal injury election	E			
		Spouse and child contributions	F			
		Other third party contributions	G			
	Assessab	le foreign superannuation fund amount	I [
	Non-assessab	le foreign superannuation fund amount	J			
	Trar	nsfer from reserve: assessable amount	κ			
	Transfer	from reserve: non-assessable amount	L			
	(Contributions from non-complying funds and previously non-complying funds	Т			
	Any other contribution	and Low Income Super Co-contributions	M			
ther transactior	IS	TOTAL CONTRIBUTIONS	N	25,	000.00	
	ase account balance	Allocated earnings or losses	ο	4,	150.00]
S1	747,430.00	Inward rollovers and transfers	P			1
- Non CDBIS	e account balance	Outward rollovers and transfers	Q			
S2	0.00 e account balance	Lump Sum payment	R1		Code	
-CDBIS		Income stream payment				
S3	0.00	income stream payment				
	RISCount	CLOSING ACCOUNT BALANCE			430.00	
				S1 plus S2 plus S3		
		Accumulation phase value	X1			
		Retirement phase value	X2]	

MSF Form 2018	Si	ilich Family Super Fund			TFN:	Page 8 of
	[See the Privacy note	in the D	Declaration.	MemberNumber	2
Title	Mr	Member'sTFN				
Familyname	Silich				Account status	O Code
First given name	Nicholas					
her given names						
		Date of birth		If deceased, date of death		
ontributions			Г	70	107.00	
Refer to instruction or completing these		OPENING ACCOUNT BALAN	CE	70,	197.00	
abels.		Employer contributions	5 A	9,	653.00	
		ABN of principal employer	1			
		Personal contribution	s B			
	CC	GT small business retirement exemption	n C			
	CGT sm	all business 15-year exemption amoun	t D			
		Personal injury election	• E			
		Spouse and child contributions	5 F			
		Other third party contributions	G			
	Assessabl	e foreign superannuation fund amoun	t 			
	Non-assessabl	e foreign superannuation fund amoun	t J			
	Tran	sfer from reserve: assessable amoun	t K			
	Transfer	from reserve: non-assessable amoun	t L			
	С	Contributions from non-complying fund	T			
	Any other contribu	and previously non-complying fund- tions (including Super Co-contributions and Low Income Super Contributions	5 L			
Other transaction	IS	TOTAL CONTRIBUTION	5 N [9,	653.00	
	ase account balance	Allocated earnings or losse	s O		660.00 L	
S1	79,190.00 e account balance	Inward rollovers and transfer	s P			
- Non CDBIS		Outward rollovers and transfer	s Q			
S2 Retirement phase	e account balance	Lump Sum paymer	nt R1		Code	
-CDBIS	0.00	Income stream paymer	nt R2		Code	
0 TR	ISCount	CLOSING ACCOUNT BALANC		, 79 S1 plus S2 plus S3	190.00	
		Accumulation phase value	• • • [
		Retirement phase value				
		Retirement phase valu	- 72			

a Australian managed investments	Listed trusts A	196,606
l	Unlisted trusts B	4
Ins	surance policy C	
Other manage	d investments D	

SMSF Form 2018 Si	ich Family Super Fund		TFN: Page	9 of 14
15b Australian direct investments	Cash and term deposits	E	150,357	
	Debt securities	F		
Limited recourse borrowing arrangements	Loans	G		
Australian residential real property	Listed shares	н	386,170	
Australian non-residential real property	Unlisted shares		10,000	
J2				
Overseas real property J3	Limited recourse borrowing arrangements	J	0	
Australian shares	Non-residential real property	K		
Overseas shares	Residential real property	L		
J5	Collectables and personal use assets	Μ		
Other	Other assets	0	83,483	
J6				
15c Overseas direct investments	Overseas shares	Ρ		
	Overseas non-residential real property	Q		
	Overseas residential real property	R		
	Overseas managed investments	S		
	Other overseas assets	т		
	TOTAL AUSTRALIAN AND OVERSEAS ASSETS (Sum of labels A to T)	U	826,620	
15d In-house assets Did th	e 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 arrange	If the fund had an LRBA were the LRBA borrowings from a licensed A	Print Y for or N for n		
	financial institution?	Print Y for or N for n	yes	
16 LIABILITIES				
Borrowings for limited recourse borrowing arrangements V1 Permissible temporary borrowings V2				
Other borrowings V3	Borrowings	V		
(total of :	Total member closing account balances II CLOSING ACCOUNT BALANCEs from Sections F and G)	W	826,620	1
	Reserve accounts	x		
	Otherliabilities	Y		
	TOTAL LIABILITIES	Z	826,620	
		-		

Section I: Taxation of financ 17 Taxation of financial arrangem					
A DAMAGE IS A DAMAGE IN A DAMAGE IN THE PARTY AND A DAMAGE INTE PARTY AND A DAMAGE IN THE PARTY AND A DAMAGE IN THE PARTY AND A DAMAGE IN THE PARTY AND A DAMAGE INTE PARTY		-			
		Total TOFA gains	н		
		Total TOFA losses			
Section J: Other information Family trust election status	1				
specified of the	e election	ng, a family trust election, write the four-digit income year (for example, for the 2017–18 income year, write 2018). y trust election, print R for revoke or print V for variation,			
		ch the Family trust election, revocation or variation 2018.			
or fund is making o	one or more	ction, write the earliest income year specified. If the trust e elections this year, write the earliest income year being posed entity election or revocation 2018 for each election			
specified and complete	If rev	roking an interposed entity election, print R, and complete l attach the Interposed entity election or revocation 2018.	ם י		
Section K: Declarations					
Penalties may be imposed for fals	se or mis	leading information in addition to penalties relating	g to any t	ax shortfalls.	
and any additional documents are true a	and correc	at all income has been disclosed and the annual return, a t in every detail. If you leave labels blank, you will have s t about any aspect of the annual return, place all the fac	specified a	zero amount o	r the
he TFN to identify the entity in our reco he processing of this form may be dela	ords. It is no ayed.	tion Act 1953 to request the provision of tax file numbers of an offence not to provide the TFN. However if you do r ation and disclose it to other government agencies. For ir	not provide	e the TFN,	
privacy go to ato.gov.au/privacy.		auon and disclose it to other government agencies. For it	lionnation	about your	
TRUSTEE'S OR DIRECTOR'S DEC declare that current trustees and direct	-	UN: authorised this annual return and it is documented as such	ch in tha S		
eturn, including any attached schedules	s and addi	aware of any matters raised. I declare that the informat tional documentation is true and correct. I also authorise	tion on this	annual	
eturn, including any attached schedules any tax refunds to the nominated bank	s and addir account (if	a aware of any matters raised. I declare that the informat tional documentation is true and correct. I also authorise applicable).	tion on this	annual o make	aar
eturn, including any attached schedules any tax refunds to the nominated bank	s and addir account (if	a aware of any matters raised. I declare that the informat tional documentation is true and correct. I also authorise applicable).	tion on this	annual	
eturn, including any attached schedules any tax refunds to the nominated bank Authorised trustee's, director's or public	s and addii account (if c officer's	a aware of any matters raised. I declare that the informat tional documentation is true and correct. I also authorise applicable). signature	tion on this the ATO to	annual o make <u>Day Month Ye</u>	
eturn, including any attached schedules any tax refunds to the nominated bank Authorised trustee's, director's or public	s and addii account (if c officer's	a aware of any matters raised. I declare that the informat tional documentation is true and correct. I also authorise applicable). signature	tion on this the ATO to	annual o make <u>Day Month Ye</u>	
eturn, including any attached schedules any tax refunds to the nominated bank Authorised trustee's, director's or public Preferred trustee or director cont	s and addii account (if c officer's act detail Title	a ware of any matters raised. I declare that the informat tional documentation is true and correct. I also authorise applicable). signature	tion on this the ATO to	annual o make <u>Day Month Ye</u>	
eturn, including any attached schedules any tax refunds to the nominated bank Authorised trustee's, director's or public Preferred trustee or director conta Far	s and addii account (if c officer's act detail Title mily name	a ware of any matters raised. I declare that the informat tional documentation is true and correct. I also authorise applicable). signature	tion on this the ATO to	annual o make <u>Day Month Ye</u>	
eturn, including any attached schedules any tax refunds to the nominated bank Authorised trustee's, director's or public Preferred trustee or director cont Far Far	s and addii account (if c officer's act detail Title mily name ven name	a ware of any matters raised. I declare that the informat tional documentation is true and correct. I also authorise applicable). signature	tion on this the ATO to	annual o make <u>Day Month Ye</u>	
eturn, including any attached schedules any tax refunds to the nominated bank Authorised trustee's, director's or public Preferred trustee or director conta Far	s and addii account (if c officer's act detail Title mily name ven name	a ware of any matters raised. I declare that the informat tional documentation is true and correct. I also authorise applicable). signature	tion on this the ATO to	annual o make <u>Day Month Ye</u>	
eturn, including any attached schedules any tax refunds to the nominated bank Authorised trustee's, director's or public Preferred trustee or director cont Far Far First give Other give	s and addii account (if c officer's act detail Title mily name ven name	aware of any matters raised. I declare that the informat tional documentation is true and correct. I also authorise applicable). signature	tion on this the ATO to	annual o make <u>Day Month Ye</u>	
eturn, including any attached schedules iny tax refunds to the nominated bank Authorised trustee's, director's or public Preferred trustee or director conta Far First giv Other give Phon	s and addii account (if c officer's act detail Title mily name ven name en names	aware of any matters raised. I declare that the informational documentation is true and correct. I also authorise applicable). signature Is: Mr Silich Stephen Douglas Area code Number	tion on this the ATO to	annual o make <u>Day Month Ye</u>	
eturn, including any attached schedules any tax refunds to the nominated bank Authorised trustee's, director's or public Preferred trustee or director conta Far First giv Other give Phon	s and addii account (if c officer's act detail Title mily name ven name en names he number il address	aware of any matters raised. I declare that the informational documentation is true and correct. I also authorise applicable). signature Is: Mr Silich Stephen Douglas Area code Number	tion on this the ATO to	annual o make <u>Day Month Ye</u>	
return, including any attached schedules any tax refunds to the nominated bank Authorised trustee's, director's or public Preferred trustee or director cont Far First giv Other give Phon Emai	s and addii account (if c officer's act detail Title mily name ven name en names he number il address	aware of any matters raised. I declare that the informational documentation is true and correct. I also authorise applicable). signature Is: Mr Silich Stephen Douglas Area code Number	tion on this the ATO to	annual o make <u>Day Month Ye</u>	
return, including any attached schedules any tax refunds to the nominated bank Authorised trustee's, director's or public Preferred trustee or director cont Far First giv Other give Phon Emai	s and addii account (if c officer's act detail Title mily name ven name en names ne number il address oplicable)	aware of any matters raised. I declare that the informational documentation is true and correct. I also authorise applicable). signature Is: Mr Silich Stephen Douglas Area code Number	tion on this the ATO to	annual o make <u>Day Month Ye</u>	
return, including any attached schedules any tax refunds to the nominated bank Authorised trustee's, director's or public Preferred trustee or director cont Far First giv Other give Phon Emai Non-individual trustee name (if ap	s and addii account (if c officer's act detail Title mily name ven name en names ne number il address oplicable)	aware of any matters raised. I declare that the informational documentation is true and correct. I also authorise applicable). signature Is: Mr Silich Stephen Douglas Area code Number	tion on this the ATO to Date	annual o make <u>Day Month Ye</u>	
eturn, including any attached schedules any tax refunds to the nominated bank Authorised trustee's, director's or public Preferred trustee or director conta Far First giv Other give Phon Emai Non-individual trustee name (if ap ABN of non-individual The Commissioner of Taxation, as	s and addii account (if c officer's act detail Title mily name ven name en names ne number il address oplicable) al trustee	a ware of any matters raised. I declare that the informat tional documentation is true and correct. I also authorise applicable). signature Signature Silich Stephen Douglas Area code Number 08 93099220	tion on this the ATO to Date	Bannual Day Month Ye 28/10/201	details

TAX AGENT'S DECLARATION:

, TAXACTION & ACCOUNTING SERVICES PTY LTD

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	28/10/2019	
Title	Mr					
Familyname	Ottey					
First given name	Wayne					
Other given names	Andrew					
Tax agent's practice	Taxaction & Accour	nting Ser	vices Pty Lto	l		
Tax agent's phone number	Area code Number 92402333	3				
Tax agent number	64198006		Reference number	SILI001	0	

Losses Schedule 2018	Silich Family Super Fund	TFN: Page 12 of 14
	Losses schedule Companies and trusts that do not join consolidated gro complete and attach this schedule to their 2018 tax ret	
	Superannuation funds should complete and attach this 2018 tax return.	schedule to their
	ctions 2018, available on our website on how to complete this schedule.	
Tax file number (TFN)		
Name of entity		
Silich Family Super Fu	and	
Australian business number (ABN)		
15 432 826 346		
4 Do current year loss provi	sions apply?	
	culate its taxable income or tax loss for	

for the year under Subdivision 165-B of its net capital gain of net capital loss for the year under Subdivision 165-CB of the Income Tax Assessment Act 1997 (ITAA 1997)?

f the schedule is not lodged with the income tax return you are required to sign and date the schedule	-
mportant	

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 more information about your privacy go to ato.gov.au/privacy

Taxpayer's declaration

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

Signature	-, г	Date
		Jaie
		Jovti

Contact person

Date			
Daytime contact	number		
Area code	Number		

Print Y for yes

or N for no.

KN

TFN: Page 13 of 14

2018

Capital gains tax (CGT) schedule

Use in conjunction with company, trust, fund or self-managed superannuation fund annual return. For instructions on how to complete this schedule refer to the publication Guide to capital gains tax.

Tax file number (TFN)

Taxpayer's name Silich Family Super Fund

Australian Business Number (ABN)

1 Current year capital gains and capital losses

Shares in companies listed on an Australian securities exchange

Other shares

Units in unit trusts listed on an Australian securities exchange

Other units

A \$

В\$

C \$

D \$

E \$

F \$

G \$

H \$

1\$

S \$

J\$

Real estate situated in Australia

Other real estate

Amount of capital gains from a trust (including a managed fund)

Collectables

Other CGT assets and any other CGT events

Amount of capital gain previously deferred under transitional CGT relief for superannuation funds

> Total current year capital gains

2 Capital losses

Total current year capital losses

Capital gain

32,739

20,668

53,407

Total current year net capital losses applied

Total prior year net capital losses applied

Total capital losses transferred in applied (only for transfers involving a foreign bank branch or permanent establishment of a foreign financial entity)

Total capital losses applied

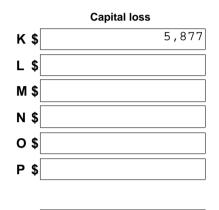
3 Unapplied net capital losses carried forward

Net capital losses from collectables carried forward to later income years

Other net capital losses carried forward to later income years

4 CGT discount

Total CGT discount applied



Q	\$
RS	\$

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

5,877
5,877
44,226
50,103

Add amounts at B, C and D.



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.

A \$	1,101

Sensitive (when completed)

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Net capital gain

A \$ 2,203

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'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

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

Signature

Date

Contact person

Daytime contact	number	(include	area	code)