Self-managed superannuation fund annual return

2023

	Who	should	complete	this	annual	return?
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Only self-managed superannuation funds (SMSFs) can complete this annual return. All other funds must complete the *Fund income tax return 2023* (NAT 71287).

- 1 The Self-managed superannuation fund annual return instructions 2023 (NAT 71606) (the instructions) can assist you to complete this annual return.
- The SMSF annual return cannot be used to notify us of a change in fund membership. You must update fund details via ABR.gov.au or complete the Change of details for superannuation entities form (NAT 3036).

To complete this annual return

- Print clearly, using a BLACK pen only.
- Use BLOCK LETTERS and print one character per box.

S M I T H S T

- Place |X| in ALL applicable boxes.
- Postal address for annual returns:

Australian Taxation Office GPO Box 9845 [insert the name and postcode of your capital city]

For example;

Australian Taxation Office GPO Box 9845 SYDNEY NSW 2001

_		£				
5	ection A: Fund in	Tormation		► To assist prod	cessing, write the f	und's TFN at
1	Tax file number (TFN)	******			ges 3, 5, 7 and 9.	and o mirat
	The ATO is authorised the chance of delay or	by law to request your TFN. Yerror in processing your annu	You are not obligedual return. See the	to quote your TFI Privacy note in the	N but not quoting Declaration.	it could increase
2	Name of self-managed	d superannuation fund (SMSF)			
Ol	sson Super Fund					
_						
3	Australian business nu	umber (ABN) (if applicable)	19869796384			
4	Current postal address	s				
14	3 Rocky Point Rd					
_	ourb/town NGAL BAY	_		1	State/territory	Postcode 2315
<u> [</u>	NGAL DAT				INSVV	2313
5	Annual return status Is this an amendment to the	e SMSF's 2023 return?	A No	Yes		

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

B No X Yes

		1000%-' \$' МS
		Fund's tax file number (TFN) ********
	- B. #	CC auditar
Title:	М	IR .
amily	SMSF auditor ditor's name e: MR nily name bys st given name Other given names thony MSF Auditor Number O014140 04 10712708 stal address D Box 3376	
Boys		
First giv	ven	name Other given names
Antho	ny	
SMSF	Αι	uditor Number Auditor's phone number
10001	141	40 04 10712708
Postal	l ac	ddress
PO Bo	ox 3	3376
Suburb	o/tov	wn State/territory Postcode
RUNE	DLE	MALL SA 5000
Date a	aud	dit was completed A
Was F	² art	t A of the audit report qualified?
Was F	Part	t B of the audit report qualified? C No X Yes
lf Part	Вс	of the audit report was qualified,
nave t	rne	reported issues been rectilled?
A	A	Fund's financial institution account details
		Fund BSB number 062471 Fund account number 10128018
		Peter Olsson & Delohrey Olsson ATF Olsson Super Fund
		I would like my tax refunds made to this account. Go to C.
_		Financial institution as a contribution of the financial state of the
В	3	
Auditor's Title: M Family nan Boys First given Anthony SMSF Au 1000141 Postal ac PO Box 3 Suburb/tov RUNDLE Date aud Was Part If Part B o have the We I		
		G Ferizis & Co PL Trust Account
C)	
		Provide the electronic service address alias (ESA) issued by your SMSF messaging provider. (For example, SMSFdataESAAlias). See instructions for more information.
		ti or example, oivior uataloxymias). See instructions for more information.

smsfdataflow

Page 2

							1000%+	' \$' MS	
		Fui	nd's tax file	e number (TFN) *****	***			
8	Status of SMSF	Australian superannu	uation fund	A No	Yes X	Fund benefit struc	ture B	A Code	
	Does the fu the Govern	and trust deed allow acc ament's Super Co-contri Low Income Super	bution and	C No	Yes X				
9	Was the fund woun	d up during the ince	ome year?						
	No Yes If ye which	s, provide the date on ch the fund was wound u	р	Month	Year	Have all tax lodgmen and paymen obligations been met	t Na 🔲	Yes	
10	Exempt current per	nsion 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 X Exempt curre	nt pension income amo	unt A \$			8898 -00			
	Which method did you use to calculate your exempt current pension income?								
		Segregated assets meth	nod BX						
	Unsegregated assets method C Was an actuarial certificate obtained? D Yes								
	Did the fund have any other income that was assessable?								
	E Yes O Go to Sec	ction B: Income.							
	No Choosing Go to Sec	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.)							
		to claim any tax offsets. D: Income tax calculatio	•						

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Fund's tax file number (TFN) ********

Section	B٠	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 If the total capital loss or total capital gain is greater than \$10,000 or you elected to use the transitional CGT relief in Did you have a capital gains tax Yes G No 2017 and the deferred notional gain has been realised, (CGT) event during the year? complete and attach a Capital gains tax (CGT) schedule 2023. Code Have you applied an M No Yes exemption or rollover? **A**\$ -00 Net capital gain -00 Gross rent and other leasing and hiring income -00 Gross interest Forestry managed investment -00 **X**\$ scheme income Gross foreign income Loss **D1**\$ -00 **D** \$ -00 Net foreign income -00 Australian franking credits from a New Zealand company E\$ Number Transfers from **F** \$ -00 foreign funds Gross payments where -00 **H** \$ ABN not quoted Loss Calculation of assessable contributions Gross distribution -00 Assessable employer contributions from partnerships **R1** \$ -00 Unfranked dividend -00 amount plus Assessable personal contributions *Franked dividend -00 **R2** \$ -00 **K** \$ amount plus **No-TFN-quoted contributions *Dividend franking -00 L \$ credit **R3**\$ o|-**00** Code *Gross trust (an amount must be included even if it is zero) M \$ -00 distributions Transfer of liability to life insurance less company or PST Assessable contributions -00 **R6**\$ -00 **R**\$ (R1 plus R2 plus R3 less R6) Calculation of non-arm's length income Code *Net non-arm's length private company dividends S\$ -00 *Other income **U1**\$ 'Assessable income plus *Net non-arm's length trust distributions due to changed tax -00 **T** \$ status of fund **U2** \$ -00 Net non-arm's plus *Net other non-arm's length income length income -00 U \$ **U3**\$ -00 (subject to 45% tax rate) (U1 plus U2 plus U3) Loss #This is a mandatory **GROSS INCOME** -00 W \$ label. (Sum of labels A to U) *If an amount is **Y**\$ -00 Exempt current pension income entered at this label. check the instructions Loss TOTAL ASSESSABLE to ensure the correct V \$ -00 INCOME (W less Y) tax treatment has been applied.

Fund's	tax file	number	(TFN)	******
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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-DED	UCTIBLE EXPENSES
Interest expenses within Australia	A1 \$	0 -00	A2 \$	0 -00
Interest expenses overseas	B1 \$	0 -00	B2 \$	0 -00
Capital works expenditure	D1 \$	0 -00	D2 \$	0 -00
Decline in value of depreciating assets	E1 \$	0 -00	E2 \$	0 -00
Insurance premiums – members	F1 \$	0-00	F2 \$	0-00
SMSF auditor fee	H1 \$	0 -00	H2 \$	330 -00
Investment expenses	I1 \$	0 -00	12 \$	4269 -00
Management and administration expenses	J1 \$	0 -00	J2 \$	5390 -00
Forestry managed investment scheme expense	U1 \$	0-00	U2 \$	0 -00 Code
Other amounts	L1 \$	0-00	L2 \$	259 -00
Tax losses deducted	M1 \$	0-00		
	TOTAL DEDUCTIONS		TOTAL NON-DE	DUCTIBLE EXPENSES

(Total A1 to M1)

#TAXABLE INCOME OR LOSS

O \$ 0 -00

(TOTAL ASSESSABLE INCOME /ess
TOTAL DEDUCTIONS)

TOTAL SMSF EXPENSES

Z \$ 10248 -00

(N plus Y)

(Total A2 to L2)

Y\$

*This is a mandatory label.

10248 -00

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 Ca	lculation statement			
Please	refer to the	#Taxable income	A \$	0 -00
	anaged superannuation	#Tax on taxable	- 4 6	(an amount must be included even if it is zero)
	nnual return instructions on how to complete the	income	T1 \$	(an amount must be included even if it is zero)
	ation statement.	#Tax on	ı e	·
		no-TFN-quoted contributions	J \$	(an amount must be included even if it is zero)
				(arramount must be included even in this zero)
		Gross tax	B \$	0
				(T1 plus J)
	Foreign income tax offset			
C1\$		0		
	Rebates and tax offsets			efundable non-carry forward tax offsets
C2\$			C \$	
				(C1 plus C2)
				OTAL 1
			T2 \$	0
				(B less C – cannot be less than zero)
	Early stage venture capital partnership tax offset	limited		
D1 \$	partifership tax offset	0		
μ	L Early stage venture capital	limited partnership		
	tax offset carried forward f	rom previous year	Non-re	efundable carry forward tax offsets
D2 \$		0	D \$	0
	Early stage investor tax off	set		(D1 plus D2 plus D3 plus D4)
D3 \$		0		
	Early stage investor tax off		CLIDT	OTAL 2
D 4¢	carried forward from previo			
D4 \$		0	T3 \$	[0]
				(T2 less D – cannot be less than zero)
	Complying fund's franking of	credits tax offset		
E1\$	1,7,0	3158.59		
+	No-TFN tax offset			
E2 \$				
	National rental affordability s	cheme tax offset		
E3 \$				
	Exploration credit tax offset			dable tax offsets
E4 \$			E\$	3158.59
				(E1 plus E2 plus E3 plus E4)
			- - ^	
		#TAX PAYABLE	T5 \$	(T2 (200 E connet be (200 then 700))
			0	(T3 less E – cannot be less than zero)
			1	n 102AAM interest charge
			G \$	0

Fund's tax file number (TFN) *********

Credit for tax withheld – foreign resident withholding (excluding capital gains)		
H2\$ 0		
Credit for tax withheld – where ABN or TFN not quoted (non-individual)		
H3\$ 0 Credit for TFN amounts withheld from		
payments from closely held trusts H5 \$		
Credit for interest on no-TFN tax offset		
Credit for foreign resident capital gains withholding amounts	Eligible credits	
H8\$		ol
	(H2 plus H3 plus H5 plus H6 plus H8)	-
#Tax offset re (Remainder of refundable tax	1 W 1 91 E 0 E 0	9
	PAYG instalments raised	
	K \$	0
	Supervisory levy	_
	L \$ 259	9
	Supervisory levy adjustment for wound up funds	_
	M \$	
	Supervisory levy adjustment for new funds	_
	N \$]
AMOUNT DUE OR REFUND. A positive amount at S is what yo while a negative amount is refundable	-2899.58	<u> </u>
*This is a mandatory label.		_
Section E: Losses		
14 Losses	Tax losses carried forward to later income years	0 -00
If total loss is greater than \$100,000, complete and attach a <i>Losses</i>	Net capital losses carried forward to later income years V \$	0 -00

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schedule 2023.

und's	tax	file	number	(TFN)
aria o	LUA	1110	Hallibel	(• • • • • • • • • • • • • • • • • • •

Section F: Member information

MEMBER 1				
Title: MR				
Family name				
Olsson				
First given name	Other given	names		
Peter	Lars			
Member's TFN See the Privacy note in the Declaration.	******	Da	te of birth 16/07/1950	nth Year
Contributions	G ACCOUNT BALANCE	\$	26848	6.63
Refer to instructions for completing	these labels.	Proceeds from pri	mary residence disposal	
Employer contributions A \$ ABN of principal employer A1 Personal contributions B \$ CGT small business retirement exits C \$ CGT small business 15-year exer D \$ Personal injury election E \$ Spouse and child contributions F \$ Other third party contributions G \$		Assessable foreign \$		amount
TOTAL CONTRI	· <u> </u>	of labels A to M)	0	
Other transactions	Allocated earning or losse	s • • • • • • • • • • • • • • • • • • •	3609	95.43 Loss
_ •	orollovers and transfer or tra	d P \$		Code
Retirement phase account balance – CDBIS \$3 \$	0 Income stream payments	R2 \$		6526 Code M
0 TRIS Count CLOSIN	NG ACCOUNT BALANC	· L	24805 \$1 plus \$2 plus \$3)	56.06
A	accumulation phase value	e X1 \$		
	Retirement phase value	· •		
Out borrow	standing limited recourse ving arrangement amoun	e Y \$		

Fund's tax file number (TFN)	******

MEMBER 2					
Title: MRS					
Family name					
Olsson					
First given name	Other given name:	S			
Delohrey					
Member's TFN See the Privacy note in the Declaration.			Date of birth	Day Month 19/01/1947	Year
Contributions OPENING ACCOL	INT BALANCE \$			60304.93	
Refer to instructions for completing these labe	els. Proceeds f	from prim	ary residence di	sposal	
Employer contributions	Receipt da	ate _{Da}	y Month	Year	
A \$	H1		•		
ABN of principal employer	Assessable	e foreign s	superannuation f	und amount	
A1	I \$				
Personal contributions		sable for	eian superannua	ition fund amount	
B \$	J \$				
CGT small business retirement exemption	· <u></u>	om reserv	re: assessable ar	mount	
C \$	K \$	3111 10001 V	01 4000004010 41	Tiodin.	
CGT small business 15-year exemption amount	· <u> </u>	om reserv	re: non-assessal	ole amount	
D \$] L \$	3111 10001 V	0.11011 0.000000		
Personal injury election	· <u> </u>	ons from i	non-complying f	unds	
E \$	and previo	usly non-	complying funds	3	
Spouse and child contributions	т \$				
F \$	Any other of	contributi	ons	ad	
Other third party contributions	Low Incom	ne Super	-contributions a Amounts)	IU	
G \$	M \$				
TOTAL CONTRIBUTIONS N	\$ (Sum of labels A to	M)	0		Loss
Other transactions Allo	ocated earnings or losses	\$		9048.42	Loss
Accumulation phase account balance	Inward rollovers and P	\$		0	
S1 \$ 0	transfers				
Retirement phase account balance	Outward rollovers and Q	\$		0	
– Non CDBIS	transfers	. Ψ			Code
\$2 \$ 67543.35	Lump Sum R1	\$			Code
Retirement phase account balance	payments P	Ψ			
- CDBIS	Income	. —			Code
S3 \$ 0	stream R2 payments	2 \$		1810	М
3	раутненто				
TRIS Count CLOSING ACCO	UNT BALANCE S	•		67542.25]
TRIS Count CLOSING ACCO	ONI BALANCE 3	φ	(04 -1 - 00 -1	67543.35	
			(S1 plus S2 plu	IS ə ð)	_
	on phase value X1	\$ -			
Accumulati	on priase value 🔨	Ψ			
Retireme	ent phase value X2	\$			
Outstanding li borrowing arrang	imited recourse gement amount	*\$			

15e 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?

\$	-00

							100	/0%-'	\$' MS
	Fui	nd's	s tax file	e numbe	r (TF	N) ******			
15f	Limited recourse borrowing arrangements If the fund had an LRBA were the LRBA borrowings from a licensed financial institution? Did the members or related parties of the		No _	Yes [
	fund use personal guarantees or other security for the LRBA?	В	No	Yes [
16	LIABILITIES								
	Borrowings for limited recourse borrowing arrangements	7							
	V1 \$ -90								
	Permissible temporary borrowings								
	V2 \$ -00								
	Other borrowings	L							\neg
	V3 \$		В	Borrowings	V	\$	0	-00	
	Total member clo					\$	315599	.00	
	(total of all CLOSING ACCOUNT BALANCE s f	rom	Sections	s F and G)				
			Reserve	accounts	X	\$	0	-00	
			Othe	er liabilities	Y	\$	0	-00	
			TOTAL I	_IABILITI	ES Z	\$	315599	-00	
Se	ction I: Taxation of financi a	al:	arrar	naem	ents				
	Taxation of financial arrangements (TOI			.90					
		Т	Total TOF	A gains	н \$[-00	
		Tc	otal TOFA	losses	ı \$[1	-00	
Se	ction J: Other information								
Fam	ily trust election status								
	f the trust or fund has made, or is making, a far specified of the election (for ex								
	If revoking or varying a family trust and complete and attach the								
Inte	posed entity election status								
	If the trust or fund has an existing election, or fund is making one or more elec specified and complete an <i>Interposed</i> 6	tion	ns this yea	ar, write th	e earlie	est income year being	C		
						print R , and complete on or revocation 2023.			

	Fund's tax file number (TFN)	1000% \$ IVIS
Section K: Declaration	ons	
Penalties may be imposed for f	alse or misleading information in addition	n to penalties relating to any tax shortfalls.
mportant Before making this declaration check to ensuring additional documents are true and correctabel was not applicable to you. If you are in declaration	t in every detail. If you leave labels blank, yo	ou will have specified a zero amount or the
dentify the entity in our records. It is not an ofform may be delayed.	fence not to provide the TFN. However if yo	of tax file numbers (TFNs). We will use the TFN to but do not provide the TFN, the processing of this agencies. For information about your privacy
to ato.gov.au/privacy	Thatler and disclose it to other governmen	it agonolog. For imprination about your privacy
ecords. I have received a copy of the audit eturn, including any attached schedules an	ctors have authorised this annual return a report and are aware of any matters rais and additional documentation is true and c	
Authorised trustee's, director's or public offic	cer's signature	
		Day Month Year Date / /
Preferred trustee or director contact	t details:	
Title: MR		
family name		
Olsson		
First given name	Other given names	
Peter	Lars	
Phone number 04 99548644 Email address		
Name to the transfer of the self-self-self-self-self-self-self-self-		
Non-individual trustee name (if applicable)		
ABN of non-individual trustee		
Time taken to	prepare and complete this annual return	Hrs
	trar of the Australian Business Register, ma the integrity of the register. For further infor	ay use the ABN and business details which you mation, refer to the instructions.
TAX AGENT'S DECLARATION: declare that the Self-managed superannua provided by the trustees, that the trustees have authorises that the trustees have authorises.	ave given me a declaration stating that th	
「ax agent's signature		
		Day Month Year Date / /
Tax agent's contact details		
Title: MR		
amily name		
Kabrovski		
First given name	Other given names	
Tony		
Fax agent's practice		
G. FERIZIS & CO PTY LTD		
·		

Tax agent's phone number

97968377

02

Tax agent number

26091790

Reference number

OLSSO01