

# **Self-managed superannuation** fund annual return



# Who should complete this annual return?

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

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

- 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

Section A	: Fund	linforn	nation
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- Tax file number (TFN)

- To assist processing, write the fund's TFN at the top of pages 3, 5, 7, 9 and 11.
- The ATO is authorised by law to request your TFN. You are not obliged to quote your TFN but not quoting it could increase the chance of delay or error in processing your annual return. See the Privacy note in the Declaration.

Name of self-managed superannuation fund (SMSF)

S	ł	L	SCHERMA	SUPERI	ANNUATION FUND

Australian business number (ABN) (if applicable) 31 366 261 708

**Current postal address** BIOX 806

DXENFORD QLD 4210

Annual return status

2014

Is this an amendment to the SMSF's 2023 return?

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



<b>6</b> Audi	SMSF auditor tor's name
Title:	Mr X Mrs Miss Ms Other Other
	DUS DOMESTICATION OF THE PROPERTY OF THE PROPE
First g	giveo name Other given names
	JTHONY  Auditor's phone number  Auditor Number
	00014140 0410712708
Post	al address
B	0 x 3 3 1 6
Subur	b/town State/territory Postcode
	ANDLE MALL State/territory Postcode S A 5000
Date	audit was completed A / / / / / / / / / / / / / / / / / /
	Part A of the audit report qualified?  B No Yes
	Part B of the audit report qualified?  C No Yes
It Par have	t B of the audit report was qualified, the reported issues been rectified?  D No Yes
	<b>Electronic funds transfer (EFT)</b> We need your self-managed super fund's financial institution details to pay any super payments and tax refunds owing to you.
	A Fund's financial institution account details
	This account is used for super contributions and rollovers. Do not provide a tax agent account here.
	Fund BSB number 084510 Fund account number 627 219 340
	FILECO PTU LTO ATF S+L SCHERMA
	SUPERFUND
	I would like my tax refunds made to this account. (M) Go to C.
E	Financial institution account details for tax refunds
	This account is used for tax refunds. You can provide a tax agent account here,  Account number  Account number
	Account number Account number Account number
	C Electronic service address alias
	Provide the electronic service address alias (ESA) issued by your SMSF messaging provider.
	(For example, SMSFdataESAAlias). See instructions for more information.
	BGLSF360

		Fund's tax f	file number (TFN) 9	5 484	805	
8	Status of SMSF	Australian superannuation fund	A No Yes X	Fund benefit str	ucture B	A
		d trust deed allow acceptance of nent's Super Co-contribution and Low Income Super Amounts?	C No Yes X			
9		l up during the income year provide the date on the fund was wound up	? / 0a / 20a4	Have all tax lodgme and payme obligations been me		Yes X
10		sion income ent phase superannuation income	e stream benefits to one c	or more members in the	e income year?	?
	To claim a tax exen Record exempt cur	nption for current pension income rent pension income at Label <b>A</b> .	e, you must pay at least th	ne minimum benefit pay	ment under th	ne law.
	No Go to Section B	3: Income,				
	Yes Exempt current	pension income amount A \$	,388,4	15.00		
	Which method	did you use to calculate your exe	mpt current pension inco	me?		
	Se	egregated assets method B				
	Unse	egregated assets method <b>C</b>	Was an actuarial certific	cate obtained? D Ye	es X	
	Did the fund have any oth	ner income that was assessable?				
	E Yes X Go to Section	on B: Income.				
	No Choosing 'N Go to Section	No' means that you do not have a on C: Deductions and non-deduc	any assessable income, in ctible expenses. (Do <b>not</b> c	ncluding no-TFN quote complete Section B: Ind	d contributions come.)	S.
	lf you are entitled to these at Section D:	claim any tax offsets, you can lis Income tax calculation statement	st t,			



Section B: Income	
Do not complete this section if all superannuation interests in the the retirement phase for the entire year, there was no other incom- notional gain. If you are entitled to claim any tax offsets, you can re-	ne that was assessable, and you have not realised a deferred
11 Income  Did you have a capital gains tax (CGT) event during the year?  G No Yes X	If the total capital loss or total capital gain is greater than \$10,000 or you elected to use the transitional CGT relief in 2017 and the deferred notional gain has been realised, complete and attach a <i>Capital gains tax (CGT) schedule 2023</i> .
Have you applied an exemption or rollover? M No X Yes	Code
Net capital gain	A\$ ,380,555.00
Gross rent and other leasing and hiring income	
Gross interest	c \$
Forestry managed investment scheme income	X \$,,
Gross foreign income  D1 \$,	D\$,
Australian franking credits from a New Zealand company	E \$
Transfers from foreign funds	F\$ Number
Gross payments where	H \$ \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Calculation of assessable contributions Assessable employer contributions Assessable employer contributions	I \$ Loss
R1 \$ 0 0 % *Unfranked dividend	J\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
plus Assessable personal contributions amount  *Franked dividend	
R2 \$, o **No-TFN-quoted contributions *Dividend franking	K\$,41.50
R3 \$ Credit	L\$,
(an amount must be included even if it is zero)  /ess Transfer of liability to life insurance  *Gross trust distributions	M \$,
Company or PST  R6 \$	R\$,
Calculation of non-arm's length income *Net non-arm's length private company dividends U1 \$ Other income	S\$,
plus *Net non-arm's length trust distributions  U2 \$ -50  *Assessable income due to changed tax status of fund	T \$,
plus *Net other non-arm's length income  U3 \$   Net non-arm's length income (subject to 45% tax rate) (U1 plus U2 plus U3)	U \$ □ □ □ , □ □ □ • • • • • • • • • • • • •
#This is a mandatory label. GROSS INCOME (Sum of labels A to U)	w\$,388,492.00
*If an amount is entered at this label, Exempt current pension income	Y\$ ,388,415.50

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entered at this label, check the instructions

to ensure the correct

tax treatment has been applied.

**OFFICIAL: Sensitive** (when completed)

**V**\$

83-00

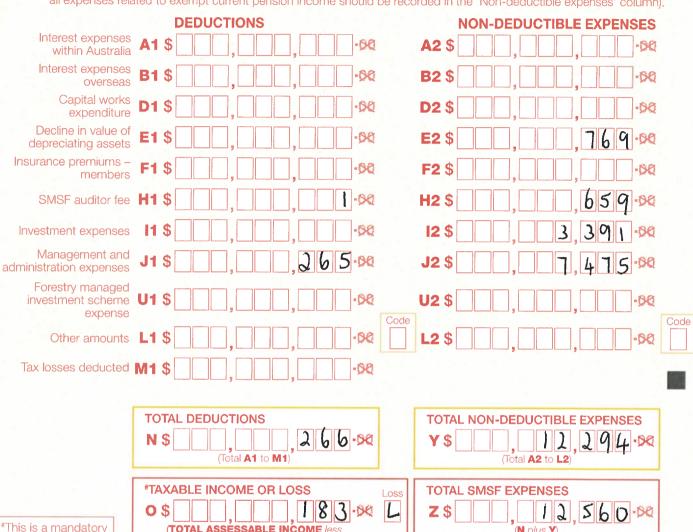
TOTAL ASSESSABLE INCOME (W less Y)

# Section C: Deductions and non-deductible expenses

TOTAL DEDUCTIONS

## 12 Deductions and non-deductible expenses

Dunder '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),



#This is a mandatory label.





# Section D: Income tax calculation statement

# \*Important:

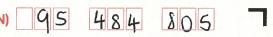
Г

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	#Taxable income	e <b>A</b> \$,,,
Self-managed superannuation fund annual return instructions	#Tax on taxable	T1 \$ 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
2023 on how to complete the calculation statement.	income #Tax or	(an amount must be included even if it is zero)
Calculation statement.	no-TFN-quoted	d <b>J</b> \$
	contributions	(an amount must be included even if it is zero)
	Gross tax	(T1 plus J)
Foreign income tax offset		
Rebates and tax offsets		Non-refundable non-carry forward tax offsets
C2\$,,_		C \$ (C1 plus C2)
		SUBTOTAL 1
		T2 \$, O-0 O
Early stage venture capital	limited	(B less C - cannot be less than zero)
partnership tax offset		
D1\$,,,	limited portporebio	
tax offset carried forward fr	rom previous year	Non-refundable carry forward tax offsets
D2\$,,		D \$,
Early stage investor tax offs		(D1 plus D2 plus D3 plus D4)
Early stage investor tax offs	set	
carried forward from previo	ous year	SUBTOTAL 2 <b>T3</b> \$ 0 0 0 0
		T3 \$,,,
Complying fund's franking of E1\$ No-TFN tax offset	redits tax offset	
E2\$	•	
National rental affordability so	cheme tax offset	
Exploration credit tax offset		Refundable tax offsets
E4\$	•	E\$
	*TAX PAYABLE	T5 \$ (T3 less E – cannot be less than zelo)
		Section 102AAM interest charge
		G\$,

Fund's	tax	file	number	(TFN
1 4114 0	CCOL		HOHIMOU	





withhold withhold the state of	for tax withheld – foreign resident olding (excluding capital gains)  for tax withheld – where ABN not quoted (non-individual)  for TFN amounts withheld from ents from closely held trusts  for interest on no-TFN tax offset  for foreign resident capital gains olding amounts	Eligible credits	712260923
	#Tax offset refunds (Remainder of refundable tax offsets)	(H2 plus H3 plus H5 plus H6 plus H8)	
	(Normander of Forandable tax orisota)	(unused amount from label E – an amount must be included even if it is zero)  PAYG instalments raised	
		K\$ , , , , , , , , , , , , , , , , , , ,	
		Supervisory levy adjustment for wound up funds  M\$ , , , , , , , , , , , , , , , , , , ,	
		N\$,,,	
	AMOUNT DUE OR REFUNDABLE A positive amount at S is what you owe, while a negative amount is refundable to you.		
#This is a mar	ndatory label.		
14 Losses		ux losses carried forward to later income years	-00
	and attach a Losses	let capital losses carried v \$,,,	-56

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Section F: <b>Member information</b>	
MEMBER 1	
Title: Mr Mrs Miss Ms Other	
Family name	
First given name Other giver	
Member's TFN See the Privacy note in the Declaration.	Date of birth Day Month Year
Contributions OPENING ACCOUNT BALANCE \$	
A Defeate intention for a societies the societies	Proceeds from primary residence disposal
Refer to instructions for completing these labels.	\$,
Employer contributions  A \$	1 Receipt date / Month / Year
ABN of principal employer	Assessable foreign superannuation fund amount
A1	\$
Personal contributions	Non-assessable foreign superannuation fund amount
B\$,	·
CGT small business retirement exemption  C \$ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Transfer from reserve: assessable amount
CGT small business 15-year exemption amount	Transfer from reserve: non-assessable amount
D \$ L	
Personal injury election	Contributions from non-complying funds
E\$,	and previously non-complying funds
Spouse and child contributions  F \$	Any other contributions
Other third party contributions	(including Super Co-contributions and Low Income Super Amounts)
	\$
TOTAL CONTRIBUTIONS N	
TOTAL CONTRIBUTIONS N	(Sum of labels <b>A</b> to <b>M</b> )
	Allocated earnings or losses Loss
Other transactions o	\$
Accumulation phase account balance	Inward rollovers and transfers
S1 \$ P	\$,
Retirement phase account balance	Outward rollovers and transfers  \$
- NOTI CODIS	Lump Sum payments Code
\$2 \$ R1	\$
Retirement phase account balance CDBIS	Income stream payments Code
S3 \$, R2	
TRIS Count CLOSING ACCOUNT BALANCE S	\$,
Accumulation phase value X1	\$,,
Retirement phase value X2	\$,
Outstanding limited recourse	\$

Fund's tax file	number (TFN)
MEMBER 2	
Title: Mr Mrs Miss Ms Other	
First given name Other giver	
Member's TFN See the Privacy note in the Declaration.	Date of birth Day Month Year
Contributions OPENING ACCOUNT BALANCE \$	],,,
Refer to instructions for completing these labels.	Proceeds from primary residence disposal  \$
Employer contributions  A \$,H	1 Receipt date / Month / Year
ABN of principal employer	Assessable foreign superannuation fund amount  \$
Personal contributions	Non-assessable foreign superannuation fund amount
B \$,	
CGT small business retirement exemption  C \$	Transfer from reserve: assessable amount
CGT small business 15-year exemption amount	Transfer from reserve: non-assessable amount
	\$ ,
Personal injury election  E \$	Contributions from non-complying funds and previously non-complying funds
Spouse and child contributions	\$ Any other contributions
F \$ , ,	(including Super Co-contributions
Other third party contributions  G \$	and Low Income Super Amounts)
TOTAL CONTRIBUTIONS N	\$ (Sum of labels <b>A</b> to <b>M</b> )
	Allocated earnings or losses Loss
Other transactions	\$,,
Accumulation phase account balance	Inward rollovers and transfers
S1 \$,	S Outward rollovers and transfers
Retirement phase account balance  – Non CDBIS	\$
S2 \$	Lump Sum payments Code
Retirement phase account balance	\$,
- CDBIS R2	\$ Code
TRIS Count CLOSING ACCOUNT BALANCE S	\$, (S1 plus \$2 plus \$3)
Accumulation phase value X1	
Retirement phase value X2	\$ _   _   _   _   _   _   _   _
Outstanding limited recourse borrowing arrangement amount	\$

MEMBER 3	
Title: Mr Mrs Miss Ms Other	
Family name	
First given name  Other given names	
Day Month Year	
Member's TFN See the Privacy note in the Declaration.  Date of birth  Date of birth	_
decine invacy note in the beginning.	
Contributions OPENING ACCOUNT BALANCE \$	
Refer to instructions for completing these labels.	
Employer contributions  H \$ Day Month Year	
A \$ H1 Receipt date / / / / / / / / / / / / / / / / / / /	
ABN of principal employer  Assessable foreign superannuation fund amount	
A1	
Personal contributions  Non-assessable foreign superannuation fund amount	
B\$ J, J, J, J, Transfer from reserve; assessable amount	
C\$	
CGT small business 15-year exemption amount  Transfer from reserve: non-assessable amount	
D\$	
Personal injury election Contributions from non-complying funds	
and previously non-complying funds  T \$ T	
Spouse and child contributions  F \$ Any other contributions	
(including Super Co-contributions  Other third party contributions  And Low Income Super Amounts)	
G \$ M \$	
TOTAL CONTRIBUTIONS N \$,	
(Sum of labels <b>A</b> to <b>M</b> )	
Allocated earnings or losses  Other transactions	
Accumulation phase account balance  P \$   P   P   P   P   P   P   P   P   P	
S1 \$ Outward rollovers and transfers	
Retirement phase account balance  - Non CDBIS  Q \$	
S2 \$ Lump Sum payments Code	
R1 \$ , , , , , , , , , , , , , , , , , ,	
- CDBIS Income stream payments Code	
S3 \$,,,   R2 \$,,,	
TRIS Count CLOSING ACCOUNT BALANCE \$ \$	
Accumulation phase value X1 \$,	
Retirement phase value X2 \$	
Outstanding limited recourse borrowing arrangement amount  Y \$	

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Fund's tax file	number (TFN)
MEMBER 4	
Title: Mr Mrs Miss Ms Other	
First given name Other given	names
Member's TFN See the Privacy note in the Declaration.	Date of birth Day Month Year
Contributions OPENING ACCOUNT BALANCE \$	],
Refer to instructions for completing these labels.	Proceeds from primary residence disposal  \$
Employer contributions  A \$	1 Receipt date / / / / Year
A1	Assessable foreign superannuation fund amount  \$
Personal contributions  B \$	Non-assessable foreign superannuation fund amount  \$
CGT small business retirement exemption  C \$ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Transfer from reserve: assessable amount
CGT small business 15-year exemption amount	Transfer from reserve: non-assessable amount
Personal injury election	Contributions from non-complying funds
Spouse and child contributions	
<b>F\$</b> ,, Other third party contributions	Any other contributions (including Super Co-contributions and Low Income Super Amounts)
G \$,	\$
TOTAL CONTRIBUTIONS N	\$
Other transactions O	Allocated earnings or losses
	Inward rollovers and transfers
Accumulation phase account balance  S1 \$	S Outward rollovers and transfers
Retirement phase account balance  - Non CDBIS	\$ ,
S2 \$,, R1 :	Lump Sum payments  Code
- CDBIS	Income stream payments Code
TRIS Count CLOSING ACCOUNT BALANCE \$	\$,,
Accumulation phase value X1	\$
Retirement phase value X2	\$,
Outstanding limited recourse borrowing arrangement amount	\$ <u></u>

MEMBER 5	
Title: Mr Mrs Miss Ms Other	
Family name	
First given pages	
First given name Other given names	
Member's TFN	Day Month Year
See the Privacy note in the Declaration. Date of b	pirth / / / / / / / / / / / / / / / / / / /
Contributions OPENING ACCOUNT BALANCE \$	
Refer to instructions for completing these labels.	residence disposal
Employer contributions	
A \$	Month Year
ABN of principal employer Assessable foreign supe	rannuation fund amount
A1	
	superannuation fund amount
B \$,,,,,	acceptale amount
C \$   Small business retirement exemption   Transfer from reserve: a	ssessable amount
CGT small business 15-year exemption amount  Transfer from reserve: no	on-assessable amount
D\$,,,,	
Personal injury election  Contributions from non- and previously non-com	complying funds
Spouse and child contributions	pryning rando
<b>F</b> \$ Any other contributions	
Other third party contributions  (including Super Co-cor and Low Income Super	
G \$,, M \$, ,	
TOTAL CONTRIBUTIONS N \$	
(Sum of labels A to	<b>M</b> )
Allocated earnings or los	sses Loss
Other transactions • \$ , , , ,	
Accumulation phase account balance	nsfers
S1 \$ Outward rollovers and tr	ranafara
Retirement phase account balance	ansiers
- Non CDBIS  S2 \$ Lump Sum payments	Code
Retirement phase account balance	
- CDBIS Income stream payment	ts Code
S3 \$ , R2 \$ , , ,	
TRIS Count CLOSING ACCOUNT BALANCE \$\$	
(S1 plus S2 plus	
Accumulation phase value X1 \$	
Retirement phase value X2 \$	
Outstanding limited recourse borrowing arrangement amount	-

Page 12 **OFFICIAL: Sensitive** (when completed)

MEMBER 6	
Title: Mr Mrs Miss Ms Other	
Family name	
First given name  Other given names	
Member's TFN See the Privacy note in the Declaration.  Date of birth  Date of birth	Year
Contributions OPENING ACCOUNT BALANCE \$	
Proceeds from primary residence disposal	
Refer to instructions for completing these labels.	
Employer contributions  A \$ Day Month Year  H1 Receipt date	
A \$, H1 Receipt date// ABN of principal employer  Assessable foreign superannuation fund amount	
A1	
Personal contributions  Non-assessable foreign superannuation fund amount	
B\$ J\$ J\$ J\$ Transfer from reserve; assessable amount	
CGT small business retirement exemption  Transfer from reserve: assessable amount  K \$	
CGT small business 15-year exemption amount  Transfer from reserve: non-assessable amount	
D \$ , ,	
Personal injury election  Contributions from non-complying funds and previously non-complying funds	
Spouse and child contributions	
F\$ Any other contributions (including Super Co-contributions	
Other third party contributions and Low Income Super Amounts)	
G \$ , M \$ ,	
TOTAL CONTRIBUTIONS N \$	
Allocated earnings or losses  Other transactions	
Other transactions  O \$,	
Accumulation phase account balance	
S1 \$ Outward rollovers and transfers	
Retirement phase account balance  - Non CDBIS	
S2 \$ Lump Sum payments  R1 \$ Code	
Retirement phase account balance	
S3 \$	
TRIS Count CLOSING ACCOUNT BALANCE \$ \$,	
Accumulation phase value X1 \$	
Retirement phase value X2 \$	
Outstanding limited recourse borrowing arrangement amount	

Section G: Supplementary mem	ber information
MEMBER 7  Title: Mr X Mrs Miss Ms Other  Family name  SCHERMA  First given name  Other give  Member's TFN  See the Privacy note in the Declaration.  Date of birth  Day Month  Day Month  Day Month	Account status  Code C If deceased, date of death Year Year  Year  Account Year
Contributions OPENING ACCOUNT BALANCE	\$ , 424,427-63
Refer to instructions for completing these labels.  Employer contributions  A \$	Proceeds from primary residence disposal  H\$
TOTAL CONTRIBUTIONS	N\$ J, J, J, J, J, D, D, (Sum of labels A to M)
Accumulation phase account balance  \$1 \$	Allocated earnings or losses  O \$ , 21,584-63 Inward rollovers and transfers  P \$ , 363,944-96 Lump Sum payments  R1 \$ , 60,329-30 Income stream payments  Code
TRIS Count CLOSING ACCOUNT BALANCE	s \$
Accumulation phase value ?  Retirement phase value ?  Outstanding limited recourse borrowing arrangement amount	

MEMBER 8  Title: Mr Mrs X Miss Ms Other  Family name  S C H E R M A	Account status Code
	If deceased, date of death  Day Month Year  / 1957
Contributions OPENING ACCOUNT BALANCE	\$,,,435,336-23
Refer to instructions for completing these labels.	Proceeds from primary residence disposal  H\$
Employer contributions  A \$,,	H1 Receipt date
TOTAL CONTRIBUTIONS	N \$
Other transactions  Accumulation phase account balance  \$1 \$	Allocated earnings or losses  O \$,
Retirement phase account balance  - Non CDBIS  \$2 \$	Q \$, 3 7 0, 7 5 0 • 0 0  Lump Sum payments  R1 \$, 60, 140 • 93
TRIS Count CLOSING ACCOUNT BALANCE	\$ \$
Accumulation phase value	
Retirement phase value  Outstanding limited recourse borrowing arrangement amount	X2 \$ ,

1
MEMBER 9  Title: Mr
Contributions  OPENING ACCOUNT BALANCE \$,
Proceeds from primary residence disposal  H \$  Day  Month  Year
A\$\
TOTAL CONTRIBUTIONS N \$,, (Sum of labels A to M)
Allocated earnings or losses  Other transactions  Allocated earnings or losses  Loss  Inward rollovers and transfers
Accumulation phase account balance  S1 \$
Retirement phase account balance  - CDBIS  S3 \$
TRIS Count  CLOSING ACCOUNT BALANCE \$ \$
Accumulation phase value X1 \$,
Retirement phase value X2 \$,

MEMBER 10	
Title: Mr Mrs Miss Ms Other Account status	
Family name	
First given name  Other given names	
Member's TFN See the Privacy note in the Declaration.  Date of birth Day Month Day Month Day Month Day Month Year	
	7
Contributions OPENING ACCOUNT BALANCE \$,,,,	
Proceeds from primary residence disposal	
Refer to instructions for completing these labels.	
Employer contributions  A \$ Day Month Year  H1 Receipt date	
APN of principal employer	
Assessable foreign superannuation fund amount	
Personal contributions  Non-assessable foreign superannuation fund amount	
B\$ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\	
CGT small business retirement exemption  Transfer from reserve: assessable amount	
CGT small business 15-year exemption amount  Transfer from reserve: non-assessable amount	
D \$,	
Personal injury election  Contributions from non-complying funds	
<b>E \$,</b> and previously non-complying funds  Spouse and child contributions <b>T \$</b>	
F \$ Any other contributions (including Super	
Other third party contributions  Co-contributions and Low Income Super Amounts)	
G \$, M \$,	
TOTAL CONTRIBUTIONS N \$	
(Sum of labels <b>A</b> to <b>M</b> )	
Allocated earnings or losses  Other transactions	
Accumulation phase account balance  P \$   Inward rollovers and transfers	
S1 \$ Outward rollovers and transfers	
Retirement phase account balance  - Non CDBIS  Q \$,	
S2 \$ Lump Sum payments Code	
Retirement phase account balance	
- CDBIS Income stream payments  S3 \$ R2 \$ R2 \$ R2	
S3 \$ ,	
TRIS Count CLOSING ACCOUNT BALANCE \$ \$	
(S1 plus S2 plus S3)	
Accumulation phase value X1 \$	
Retirement phase value X2 \$	
Outstanding limited recourse borrowing arrangement amount	

MEMBER 11	Cada
Title: Mr Mrs Miss Ms Other	Account Code
Family name	status
First given name Other giv	ven names
Member's TFN Date of birth	If deceased, date of death
See the Privacy note in the Declaration.  Day Month	Year Day Month Year
Contributions OPENING ACCOUNT BALANCE	\$
Refer to instructions for completing these labels.	Proceeds from primary residence disposal
Employer contributions	H\$ Day Month Year
A \$	M1 Receipt date / / / / Year
ABN of principal employer	Assessable foreign superannuation fund amount
A1	\$   S   S   S   S   S   S   S   S   S
Personal contributions	Non-assessable foreign superannuation fund amount
B\$	J\$
CGT small business retirement exemption	Transfer from reserve: assessable amount
<b>c</b> \$ _   _ , _   _ , _	K \$ CC
CGT small business 15-year exemption amount	Transfer from reserve: non-assessable amount
D \$	L\$
Personal injury election	Contributions from non-complying funds
E \$ _   _   _   _   _   _   -   _	and previously non-complying funds
Spouse and child contributions	T \$,
F \$,	Any other contributions (including Super Co-contributions and Low Income Super Amounts)
Other third party contributions  G \$	M \$
TOTAL CONTRIBUTIONS	S N \$ CONTRACTOR OF THE STATE O
	(Sum of labels <b>A</b> to <b>M</b> )
	Allocated earnings or losses Loss
Other transactions	0 \$
Assume dation places assume balance	Inward rollovers and transfers
Accumulation phase account balance	P\$
	Outward rollovers and transfers
Retirement phase account balance  - Non CDBIS	Q \$
S2 \$	Lump Sum payments Code
	R1 \$
- CDBIS	Income stream payments Code
<b>S3</b> \$ ,	R2 \$
TRIS Count CLOSING ACCOUNT BALANCE	s \$
	(\$1 plus \$2 plus \$3)
Assumption whose vistor	V4 &
Accumulation phase value	X1 \$
Retirement phase value	·
Outstanding limited recourse borrowing arrangement amount	Y \$,

MEMBER 12
Title: Mr Mrs Miss Ms Other Account status
Family name
First given name Other given names
Member's TFN See the Privacy note in the Declaration.  Date of birth Day Month Year  Day Month Year
Contributions OPENING ACCOUNT BALANCE \$
Proceeds from primary residence disposal
Refer to instructions for completing these labels.
Employer contributions  Day Month Year
A\$, H1 Receipt date//
Assessable foreign superannuation fund amount
Personal contributions  Non-assessable foreign superannuation fund amount
B\$ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\
CGT small business retirement exemption  Transfer from reserve: assessable amount
CGT small business 15-year exemption amount  Transfer from reserve: non-assessable amount
D \$ D D, D D L S D D D D D D D D D D D D D D D D
Personal injury election  Contributions from non-complying funds
and previously non-complying funds  Spouse and child contributions  T \$
F \$ Any other contributions (including Super
Other third party contributions  Co-contributions and Low Income Super Amounts)  M \$
G \$ ,
TOTAL CONTRIBUTIONS N \$
(Sum of labels <b>A</b> to <b>M</b> )
Allocated earnings or losses  Other transactions
Other transactions  O \$
Accumulation phase account balance
S1 \$ Outward rollovers and transfers
Retirement phase account balance - Non CDBIS  Q \$,
S2 \$, Lump Sum payments Code
Retirement phase account balance  - CDBIS  Income stream payments
S3 \$ Income stream payments Code
TRIS Count CLOSING ACCOUNT BALANCE S\$ , , , , , , , , , , , , , , , , , ,
(\$1 plus \$2 plus \$3)
Accumulation phase value X1 \$,
Retirement phase value X2 \$
Outstanding limited recourse borrowing arrangement amount

Page 19

	vestments	Listed trusts	A \$			-60
		Unlisted trusts				-50
		Insurance policy	C \$			-50
	Othe	r managed investments	D \$	,		-00
Australian direct invest	ments	Cash and term deposits	E \$			-00
Limited recourse borr Australian residential re		Debt securities	F\$			-50
J1\$	ar property	Loans	G \$			-90
Australian non-resident	ial real property	Listed shares	н \$ 🗌 🗌			-90
J2 \$,	,	Unlisted shares	1\$			-90
J3 \$,	,	Limited recourse orrowing arrangements	J \$			-60
J4 \$		Non-residential real property	к\$			-00
Overseas shares  J5 \$	-50	Residential real property	L\$			-50
Other		Collectables and personal use assets	M \$			-50
J6 \$,		Other assets	0\$			-50
J7				,		
Other investments		Crypto-Currency	N \$		,	-00
Overseas direct investr	ments	Overseas shares	P \$			-00
	Overseas non-	residential real property	Q \$			-60
	Overseas	residential real property	R \$			-90
	Overseas	s managed investments	s \$			-00
		Other overseas assets	T \$			-60
тот	AL AUSTRALIAN AND (Sum of labels		U \$			0-00

15f	financial institution?  Did the members or related parties of the	A No Yes Yes Yes
16	LIABILITIES	
	Borrowings for limited recourse borrowing arrangements	
	V1 \$ - DO - DO	
	Permissible temporary borrowings	
	V2\$,,,90	
	Other borrowings	
	V3 \$,,50	Borrowings V \$,
	Total member clos (total of all <b>CLOSING ACCOUNT BALANCE</b> s fro	ing account balances  w \$ -56
	ficial of all occounts recognitions.	Reserve accounts X \$
		Other liabilities Y \$ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
		TOTAL LIABILITIES Z \$,
	ction I: <b>Taxation of financia</b> Taxation of financial arrangements (TOF	
Se	ection J: Other information	
	nily trust election status  If the trust or fund has made, or is making, a fam  specified of the election (for example)	nily trust election, write the four-digit income year ample, for the 2022–23 income year, write 2023).
	If revoking or varying a family trust	election, print <b>R</b> for revoke or print <b>V</b> for variation,  Family trust election, revocation or variation 2023.
Inte	or fund is making one or more elect	write the earliest income year specified. If the trust cions this year, write the earliest income year being ntity election or revocation 2023 for each election.
		interposed entity election, print <b>R</b> , and complete the Interposed entity election or revocation 2023.

Section	K:	Dec	arations

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

### **Important**

Before making this declaration check to ensure that all income has been disclosed and the annual return, all attached schedules and any additional documents are true and correct in every detail. If you leave labels blank, you will have specified a zero amount or the label was not applicable to you. If you are in doubt about any aspect of the annual return, place all the facts before the ATO.

#### Privacy

The ATO is authorised by the *Taxation Administration Act 1953* to request the provision of tax file numbers (TFNs). We will use the TFN to identify the entity in our records. It is not an offence not to provide the TFN. However if you do not provide the TFN, the processing of this form may be delayed.

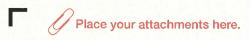
Taxation law authorises the ATO to collect information and disclose it to other government agencies. For information about your privacy go to ato.gov.au/privacy

## TRUSTEE'S OR DIRECTOR'S DECLARATION:

I declare that, the current trustees and directors have authorised this annual return and it is documented as such in the SMSF's records. I have received a copy of the audit report and are aware of any matters raised therein. The information on this annual return, including any attached schedules and additional documentation is true and correct.

Authorised trustee's, director's or public officer's signature								
		D	ау		Month			Year
Affin .	Date			/		1		
Preferred trustee or director contact details:				Ī				
Title: Mr X Mrs Miss Ms Other								
Family name								
S C H E R M A Other given names  Other given names	_الــالـ							
SEBASTIAN								
Phone number 0755618800			الب					
Email address								
Non-individual trustee name (if applicable)								
FILE COPTY LTD				_				
ABN of non-individual trustee								
Time taken to prepare and complete this annual return		Hrs						
The Commissioner of Taxation, as Registrar of the Australian Business Register, may use provide on this annual return to maintain the integrity of the register. For further information	the AB	N an to the	d bu	usine struct	ss de tions.	tails	which	ı you
TAX AGENT'S DECLARATION: I declare that the Self-managed superannuation fund annual return 2023 has been prepared	d in ac	corda	ance	e witl	h info	rmat	ion	
provided by the trustees, that the trustees have given me a declaration stating that the inforcorrect, and that the trustees have authorised me to lodge this annual return.	matior	pro	vide	d to	me is	true	and	
Tax agent's signature								
		Da	У		Month			Year
	Date			/ [		/		
Tax agent's contact details	,							
Title: Mr X Mrs Miss Ms Other Family name								
LIVINGSTONE								
First given name Other given names								
	II II		- 11					11 11
Nomiz				_	اـــا			
Simol Tax agent's practice	CI	A	1	e s				

Page 22 OFFICIAL: Sensitive (when completed)





When completing this form

# Capital gains tax (CGT) schedule 2023

Use in conjunction with company, trust, fund

<ul> <li>Print clearly, using a black or dark blue pen only.</li> <li>Use BLOCK LETTERS and print one character in each box.</li> <li>S M I T H S T S T S S S S S S S S S S S S S S</li></ul>	income tax return or the self-managed superannuation fund annual return.  Refer to the Guide to capital gains tax 2023 available on our website at ato.gov.au for instructions on how to complete this schedule.
Tax file number (TFN) 95 484 805  1 We are authorised by law to request your TFN. You do not he	
However, if you don't it could increase the chance of delay of Australian business number (ABN)	or error in processing your form.
Taxpayer's name	
S & L SCHERMA SUPER	CANNATION FUND
1 Current year capital gains and capital losses	
Shares in companies listed on an Australian securities exchange	Capital loss  S S S K \$ , , , , , , , , , , , , , , , , , ,
Other shares <b>B</b> \$	->< L \$,
Units in unit trusts listed on an Australian securities exchange	.>< M\$,,,
Other units D \$	.≫ N\$,
Real estate situated in Australia E \$	116·× os
Other real estate F \$	->< P\$
Amount of capital gains from a trust (including a managed fund)	-54
Collectables H \$	·∞ Q\$,
Other CGT assets and any other CGT events \$	-100 R\$
Amount of capital gain previously deferred under transitional CGT relief for superannuation funds	Add the amounts at labels K to R and write the total in item 2 label A – Total current year capital losses.
Total current year capital gains	334-8

1	
2	Capital losses  Total current year capital losses ▲ \$ , , , , , , , , , , , , , , , , , ,
	Total current year capital losses applied <b>B</b> \$,
	Total prior year net capital losses applied C\$
	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 E\$,
	Add amounts at B, C and D.
3	Unapplied net capital losses carried forward
	Net capital losses from collectables carried forward to later income years A \$
	Other net capital losses carried forward to later income years <b>B</b> \$
	Add amounts at <b>A</b> and <b>B</b> and transfer the total to label <b>V</b> – <b>Net capital losses carried forward to later income years</b> on your tax return.
4	CGT discount
	Total CGT discount applied A\$ , 190,217-50
5	CGT concessions for small business
	Small business active asset reduction A \$
	Small business retirement exemption <b>B</b> \$
	Small business rollover C \$
	Total small business concessions applied D\$,
6	Net capital gain
•	
	Net capital gain  A \$,,,,

7	Earnout arrangements
	Are you a party to an earnout arrangement? A Yes, as a buyer Yes, as a seller No
	(Print X in the appropriate box.)
	If you are a party to more than one earnout arrangement, copy and attach a separate sheet to this schedule providing the details requested here for each additional earnout arrangement.
	How many years does the earnout arrangement run for? B
	What year of that arrangement are you in? C
	If you are the seller, what is the total estimated capital proceeds from the earnout arrangement?
	Amount of any capital gain or loss you made under pour non-qualifying arrangement in the income year.
	Request for amendment If you received or provided a financial benefit under a look-through earnout right created in an earlier income year and you wish to seek an amendment to that earlier income year, complete the following:
	Income year earnout right created F
	Amended net capital gain or capital losses carried forward <b>G</b> \$,
8	Other CGT information required (if applicable)
	Small business 15 year exemption – exempt capital gains A\$ , , , , , , , , , , , , , , , , , ,
	Capital gains disregarded by a foreign resident B\$
	Capital gains disregarded as a result of a scrip for scrip rollover C\$
	Capital gains disregarded as a result of an inter-company asset rollover D\$,
	Capital gains disregarded by a demerging entity E \$

# 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
	Day Month Year
Contact name	
SEBASTIAN SCHERMA	
Daytime contact number (include area code)	
0755618800	