

**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 However, you cannot lodge your tax return electronically if you do not quote your TFN.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](http://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](http://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 880 349 558

Year 2019

Name of partnership,  
trust, fund or entity K & P Stringer Superannuation Fund

I authorise my tax agent to electronically transmit this tax return via an approved ATO electronic channel.

**Important**

Before making this declaration please check to ensure that all income has been disclosed and the tax return is true and correct in every detail. If you are in doubt about any aspect of the tax return, place all the facts before the Tax Office. The tax law provides heavy penalties for false or misleading statements on tax returns.

**Declaration: I declare that:**

- the information provided to the agent for the preparation of this tax return, including any applicable schedules is true and correct, and
- the agent is authorised to lodge this tax return.

Signature of partner,  
trustee or director

Date

**PART B Electronic funds transfer consent**

This declaration is to be completed when an electronic funds transfer (EFT) of a refund is requested and the tax return is being lodged through an approved ATO electronic lodgment channel.

This declaration must be signed by the partner, trustee, director or public officer prior to the EFT details being transmitted to the Tax Office. If you elect for an EFT, all details below must be completed.

Important: Care should be taken when completing EFT details as the payment of any refund will be made to the account specified.

Agent's reference  
number 67076007

Account Name K &amp; P Stringer Superannuation Fu

I authorise the refund to be deposited directly to the specified account.

Signature

Date

# Self-managed superannuation fund annual return

**2019****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 2019 (NAT 71287)

Return year 

The Self-managed superannuation fund annual return instructions 2019 (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 (NAT3036).

**Section A: Fund information****1 Tax file number (TFN)**

The Tax Office is authorised by law to request your TFN. You are not obliged to quote your TFN but not quoting it could increase the chance of delay or error in processing your annual return. See the Privacy note in the Declaration.

**2 Name of self-managed superannuation fund (SMSF)****3 Australian business number (ABN)****4 Current postal address****5 Annual return status**

Is this an amendment to the SMSF's 2019 return?

☒ A ☐ N

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

☒ B ☐ N**6 SMSF auditor**

Auditor's name

Title

Family name

First given name

Other given names

SMSF Auditor Number

Auditor's phone number

Use Agent  
address details? ☐

Postal address

Date audit was completed

☒ A ☐

Was Part A of the audit report qualified ?

☒ B ☐

Was Part B of the audit report qualified ?

☒ C ☐

If the audit report was qualified, have the reported issues been rectified?

☒ D ☐**Sensitive (when completed)**

**7 Electronic 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.

**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  
(must be six digits)

Fund account number

Fund account name (for example, J&Q Citizen ATF J&Q Family SF)

I would like my tax refunds made to this account. ☐ Y ☐ Print Y for yes or N for no. ☐ If Yes, Go to C.

**B Financial institution account details for tax refunds**

Use Agent Trust Account? ☐

This account is used for tax refunds. You can provide a tax agent account here.

BSB number

Account number

Fund account name (for example, J&Q Citizen ATF J&Q Family SF)

**C Electronic service address alias**

Provide the electronic service address (ESA) issued by your SMSF messaging provider (For example, SMSFdataESAAlias). See instructions for more information.

**8 Status of SMSF**

Australian superannuation fund

☒ A ☐ Y

Does the fund trust deed allow acceptance of the Government's Super Co-contribution and Low Income Super Contribution?

☒ C ☐ Y

Fund's tax file number (TFN) 880 349 558

Fund benefit structure ☒ B ☐ A Code

**9 Was the fund wound up during the income year?**

☐ N ☐ Print Y for yes or N for no.

If yes, provide the date on which fund was wound up

Have all tax lodgment and payment obligations been met? ☐

**10 Exempt current pension income**

Did the fund pay retirement phase superannuation income stream benefits to one or more members in the income year?

☒ Y ☐ Print Y for yes or N for no.

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

If No, Go to Section B: Income

If Yes Exempt current pension income amount ☒ A

Which method did you use to calculate your exempt current pension income?

Segregated assets method ☒ B ☐ X

Unsegregated assets method ☒ C ☐

Was an actuarial certificate obtained? ☒ D ☐ Print Y for yes

Did the fund have any other income that was assessable? ☒ E ☐ N ☐ Print Y for yes or N for no.

Choosing 'No' means that you do not have any assessable income, including no-TFN quoted contributions. If No - 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 these at Section D: Income tax calculation statement

## Section B: 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

Did you have a capital gains tax (CGT) event during the year? **G** ☐ **N** ☐ Print **Y** for yes or **N** for no.

Have you applied an exemption or rollover? **M** ☐ Print **Y** for yes or **N** for no.

Code

If the total capital loss or total capital gain is greater than \$10,000 or you elected to use the CGT relief in 2017 and the deferred notional gain has been realised, complete and attach a Capital Gains Tax (CGT) schedule 2019

Net capital gain **A**

Gross rent and other leasing and hiring income **B**

Gross interest **C**

Forestry managed investment scheme income **X**

Gross foreign income

**D1**

Net foreign income **D**

Loss

Australian franking credits from a New Zealand company **E**

Transfers from foreign funds **F**  Number

Gross payments where ABN not quoted **H**

Gross distribution from partnerships **I**  Loss

\* Unfranked dividend amount **J**

\* Franked dividend amount **K**

\* Dividend franking credit **L**

\* Gross trust distributions **M**  Code

## Calculation of assessable contributions

Assessable employer contributions

**R1**  0

plus Assessable personal contributions

**R2**  0

plus \*No-TFN-quoted contributions

**R3**  0

(an amount must be included even if it is zero)

less Transfer of liability to life insurance company or PST

**R6**  0

Assessable contributions (R1 plus R2 plus R3 less R6) **R**  0

## Calculation of non-arm's length income

\* Net non-arm's length private company dividends

**U1**

plus \* Net non-arm's length trust distributions

**U2**

plus \* Net other non-arm's length income

**U3**

\* Other income **S**  Code

\* Assessable income due to changed tax status of fund **T**

Net non-arm's length income (subject to 45% tax rate) (U1 plus U2 plus U3) **U**

#This is a mandatory label  
\* If an amount is entered at this label, check the instructions to ensure the correct tax treatment has been applied.

GROSS INCOME **W**  Loss   
(Sum of labels A to U)

Exempt current pension income **Y**

TOTAL ASSESSABLE INCOME **V**  0 Loss   
(W less Y)

**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	<b>A1</b> <input type="text"/>	<b>A2</b> <input type="text"/>	
Interest expenses overseas	<b>B1</b> <input type="text"/>	<b>B2</b> <input type="text"/>	
Capital works expenditure	<b>D1</b> <input type="text"/>	<b>D2</b> <input type="text"/>	
Decline in value of depreciating assets	<b>E1</b> <input type="text"/>	<b>E2</b> <input type="text"/>	
Insurance premiums – members	<b>F1</b> <input type="text"/>	<b>F2</b> <input type="text"/>	
Death benefit increase	<b>G1</b> <input type="text"/>		
SMSF auditor fee	<b>H1</b> <input type="text"/>	<b>H2</b> <input type="text" value="275"/>	
Investment expenses	<b>I1</b> <input type="text"/>	<b>I2</b> <input type="text"/>	
Management and administration expenses	<b>J1</b> <input type="text" value="259"/>	<b>J2</b> <input type="text" value="1,642"/>	
Forestry managed investment scheme expense	<b>U1</b> <input type="text"/>	<b>U2</b> <input type="text"/>	
Other amounts	<b>L1</b> <input type="text"/>	<b>L2</b> <input type="text"/>	
Tax losses deducted	<b>M1</b> <input type="text"/>		
	<b>Code</b> <input type="text"/>		<b>Code</b> <input type="text"/>
<b>TOTAL DEDUCTIONS</b> <b>N</b> <input type="text" value="259"/> (Total A1 to M1)		<b>TOTAL NON-DEDUCTIBLE EXPENSES</b> <b>Y</b> <input type="text" value="1,917"/> (Total A2 to L2)	
<b>#TAXABLE INCOME OR LOSS</b> <b>O</b> <input type="text" value="259"/> (TOTAL ASSESSABLE INCOME less TOTAL DEDUCTIONS)		<b>TOTAL SMSF EXPENSES</b> <b>Z</b> <input type="text" value="2,176"/> (N plus Y)	

#This is a mandatory label.

**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 2019 on how to complete the calculation statement.

#Taxable income	<b>A</b> <input type="text" value="0"/>	(an amount must be included even if it is zero)
#Tax on taxable income	<b>T1</b> <input type="text" value="0.00"/>	(an amount must be included even if it is zero)
#Tax on no-TFN-quoted contributions	<b>J</b> <input type="text" value="0.00"/>	(an amount must be included even if it is zero)
Gross tax	<b>B</b> <input type="text" value="0.00"/>	(T1 plus J)

Foreign income tax offset		<b>Non-refundable non-carry forward tax offsets</b> <b>C</b> 0.00 (C1 plus C2)
<b>C1</b>		
Rebates and tax offsets		
<b>C2</b>		

**SUBTOTAL 1**  
**T2** 0.00  
(B less C –cannot be less than zero)

Early stage venture capital limited partnership tax offset		<b>Non-refundable carry forward tax offsets</b> <b>D</b> 0.00 (D1 plus D2 plus D3 plus D4)
<b>D1</b>		
Early stage venture capital limited partnership tax offset carried forward from previous year		
<b>D2</b>		
Early stage investor tax offset		
<b>D3</b>		
Early stage investor tax offset carried forward from previous year		
<b>D4</b>		

**SUBTOTAL 2**  
**T3** 0.00  
(T2 less D –cannot be less than zero)

Complying fund's franking credits tax offset		<b>Refundable tax offsets</b> <b>E</b> 0.00 (E1 plus E2 plus E3 plus E4)
<b>E1</b>		
No-TFN tax offset		
<b>E2</b>		
National rental affordability scheme tax offset		
<b>E3</b>		
Exploration credit tax offset		
<b>E4</b>		

**#TAX PAYABLE** **T5** 0.00  
(T3 less E - cannot be less than zero)

**Section 102AAM interest charge**  
**G**

Fund's tax file number (TFN) 880 349 558

Credit for interest on early payments –  
amount of interest**H1**Credit for tax withheld – foreign  
resident withholding (excluding capital gains)**H2**Credit for tax withheld – where ABN  
or TFN not quoted (non-individual)**H3**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**H8**

Eligible credits

**H**

(H1 plus H2 plus H3 plus H5 plus H6 plus H8)

#Tax offset refunds

(Remainder of refundable tax offsets).

**I**(unused amount from label E-  
an amount must be included even if it is zero)

PAYG instalments raised

**K**

Supervisory levy

**L**Supervisory levy adjustment  
for wound up funds**M**Supervisory levy adjustment  
for new funds**N**

Total amount of tax payable

**S**

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

#This is a mandatory label.

## Section E: Losses

## 14 Losses

If total loss is greater than \$100,000,  
complete and attach a Losses  
schedule 2019.Tax losses carried forward  
to later income years**U**Net capital losses carried  
forward to later income years**V**Net capital losses brought forward  
from prior years

Non-Collectables

Collectables

Net capital losses carried forward  
to later income years

Sensitive (when completed)

## Section F / Section G: Member Information

In Section F / G report all current members in the fund at 30 June.

Use Section F / G to report any former members or deceased members who held an interest in the fund at any time during the income year.

Title		Mr	See the Privacy note in the Declaration.	Member's TFN	566 660 305	Member Number	1
Family name		Stringer				Account status	0 Code
First given name		Kelvin					
Other given names		Rodney					
Date of birth		30/07/1948		If deceased, date of death			

## Contributions

OPENING ACCOUNT BALANCE

107,806.00

Refer to instructions for completing these labels

Employer contributions

A

ABN of principal employer

A1

Personal contributions

B

CGT small business retirement exemption

C

CGT small business 15-year exemption amount

D

Personal injury election

E

Spouse and child contributions

F

Other third party contributions

G

Proceeds from primary residence disposal

H

Receipt date

H

Assessable foreign superannuation fund amount

I

Non-assessable foreign superannuation fund amount

J

Transfer from reserve: assessable amount

K

Transfer from reserve: non-assessable amount

L

Contributions from non-complying funds and previously non-complying funds

T

Any other contributions (including Super Co-contributions and low Income Super Contributions)

M

TOTAL CONTRIBUTIONS N 0.00

(Sum of labels A to M)

## Other transactions

Accumulation phase account balance

S1 0.00

Retirement phase account balance - NonCDBIS

S2 102,496.00

Retirement phase account balance - CDBIS

S3 0.00

0 TRISCount

Allocated earnings or losses

O 690.00

Loss

Inward rollovers and transfers

P

Outward rollovers and transfers

Q

Lump Sum payment

R1

Code

Income stream payment

R2 6,000.00

Code

M

CLOSING ACCOUNT BALANCE S 102,496.00

S1 plus S2 plus S3

Accumulation phase value

X1

Retirement phase value

X2

Outstanding limited recourse borrowing arrangement amount

Y

Sensitive (when completed)



Fund's tax file number (TFN) 880 349 558

Title		Mrs	See the Privacy note in the Declaration.	Member's TFN	615 111 943	Member Number	2
Family name		Stringer				Account status	0 Code
First given name		Pamela					
Other given names		Josephine					
Date of birth		01/06/1950		If deceased, date of death			

## Contributions

OPENING ACCOUNT BALANCE 78,149.00

Refer to instructions for completing these labels

Employer contributions

A

ABN of principal employer

A1

Personal contributions

B

CGT small business retirement exemption

C

CGT small business 15-year exemption amount

D

Personal injury election

E

Spouse and child contributions

F

Other third party contributions

G

Proceeds from primary residence disposal

H

Receipt date

H

Assessable foreign superannuation fund amount

I

Non-assessable foreign superannuation fund amount

J

Transfer from reserve: assessable amount

K

Transfer from reserve: non-assessable amount

L

Contributions from non-complying funds and previously non-complying funds

T

Any other contributions (including Super Co-contributions and low Income Super Contributions)

M

TOTAL CONTRIBUTIONS N 0.00

(Sum of labels A to M)

## Other transactions

Accumulation phase account balance

S1 0.00

Retirement phase account balance - Non CDBIS

S2 74,650.00

Retirement phase account balance - CDBIS

S3 0.00

0 TRISCount

Allocated earnings or losses

O 501.00

Loss

Inward rollovers and transfers

P

Outward rollovers and transfers

Q

Lump Sum payment

R1

Code

Income stream payment

R2 4,000.00

Code

M

CLOSING ACCOUNT BALANCE S 74,650.00

S1 plus S2 plus S3

Accumulation phase value

X1

Retirement phase value

X2

Outstanding limited recourse borrowing arrangement amount

Y

## Section H: Assets and liabilities

## 15 ASSETS

## 15a Australian managed investments

Listed trusts **A** Unlisted trusts **B** Insurance policy **C** Other managed investments **D** 

## 15b Australian direct investments

Cash and term deposits **E** Debt securities **F** Loans **G** Listed shares **H** Unlisted shares **I** **Limited recourse borrowing arrangements**

Australian residential real property

**J1** 

Australian non-residential real property

**J2** 

Overseas real property

**J3** 

Australian shares

**J4** 

Overseas shares

**J5** 

Other

**J6** Limited recourse borrowing arrangements **J** Non-residential real property **K** Residential real property **L** Collectables and personal use assets **M** Other assets **O** 

## 15c Other investments

Crypto-Currency **N** 

## 15d Overseas direct investments

Overseas shares **P** Overseas non-residential real property **Q** Overseas residential real property **R** Overseas managed investments **S** Other overseas assets **T** **TOTAL AUSTRALIAN AND OVERSEAS ASSETS** **U**   
(Sum of labels A to T)

## 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☐

## 15f Limited recourse borrowing arrangements

If the fund had an LRBA were the LRBA  
borrowings from a licensed  
financial institution?**A** ☐Print **Y** for yes  
or **N** for no.Did the members or related parties of the  
fund use personal guarantees or other  
security for the LRBA?**B** ☐Print **Y** for yes  
or **N** for no.

**16 LIABILITIES**

Borrowings for limited recourse borrowing arrangements		<b>V1</b>	<input type="text"/>
Permissible temporary borrowings		<b>V2</b>	<input type="text"/>
Other borrowings		<b>V3</b>	<input type="text"/>
Borrowings			<b>V</b> <input type="text"/>
Total member closing account balances (total of all CLOSING ACCOUNT BALANCES from Sections F and G)			<b>W</b> <input type="text" value="177,146"/>
Reserve accounts			<b>X</b> <input type="text"/>
Other liabilities			<b>Y</b> <input type="text"/>
<b>TOTAL LIABILITIES</b>			<b>Z</b> <input type="text" value="177,146"/>

**Section I: Taxation of financial arrangements****17 Taxation of financial arrangements (TOFA)**

Total TOFA gains	<b>H</b>	<input type="text"/>
Total TOFA losses	<b>I</b>	<input type="text"/>

**Section J: Other information****Family trust election status**

If the trust or fund has made, or is making, a family trust election, write the four-digit income year specified of the election (for example, for the 2018–19 income year, write 2019). **A**

If revoking or varying a family trust election, print R for revoke or print V for variation, and complete and attach the Family trust election, revocation or variation 2019. **B**

**Interposed entity election status**

If the trust or fund has an existing election, write the earliest income year specified. If the trust or fund is making one or more elections this year, write the earliest income year being specified and complete an Interposed entity election or revocation 2019 for each election **C**

If revoking an interposed entity election, print R, and complete and attach the Interposed entity election or revocation 2019. **D**

**Section K: Declarations**

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

**Important**

Before making this declaration check to ensure that all income has been disclosed and the annual return, all attached schedules and any additional documents are true and correct in every detail. If you 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](http://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 (if required) 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

Date  Day  Month  Year

**Preferred trustee or director contact details:**

Title

Family name

First given name

Other given names

Area code  Number

Phone number

Email address

Non-individual trustee name (if applicable)

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 the ABN and business details which you provide on this annual return to maintain the integrity of the register. For further information, refer to the instructions.

**TAX AGENT'S DECLARATION:**

I,

declare that the Self-managed superannuation fund annual return 2019 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  Day  Month  Year

**Tax agent's contact details**

Title

Family name

First given name

Other given names

Tax agent's practice

Area code  Number

Tax agent's phone number

Tax agent number

Reference number

**Sensitive (when completed)**