

NAT 71226-6.2012

Australian Government

Australian Taxation Office

# Self-managed superannuation fund annual return

| 2 | 0 | 1 | 2 |
|---|---|---|---|
|   |   |   |   |

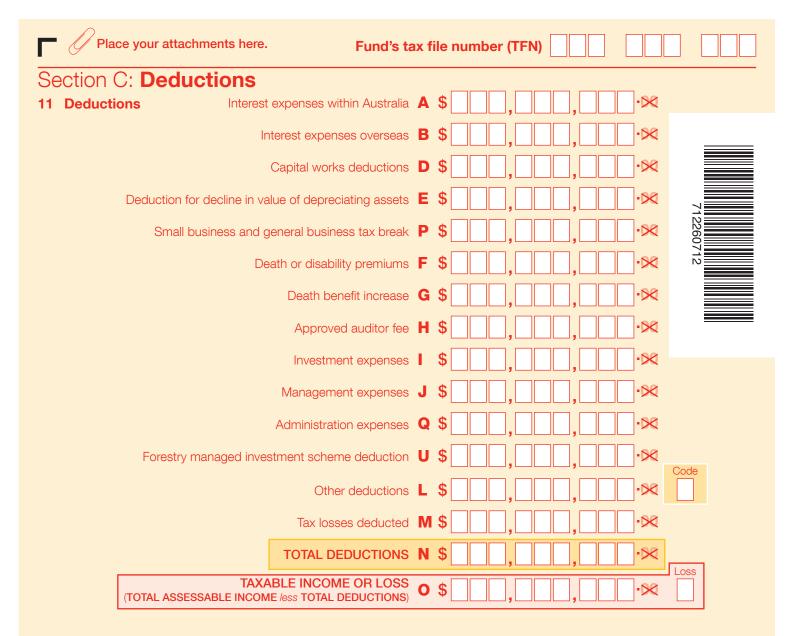
Page 1

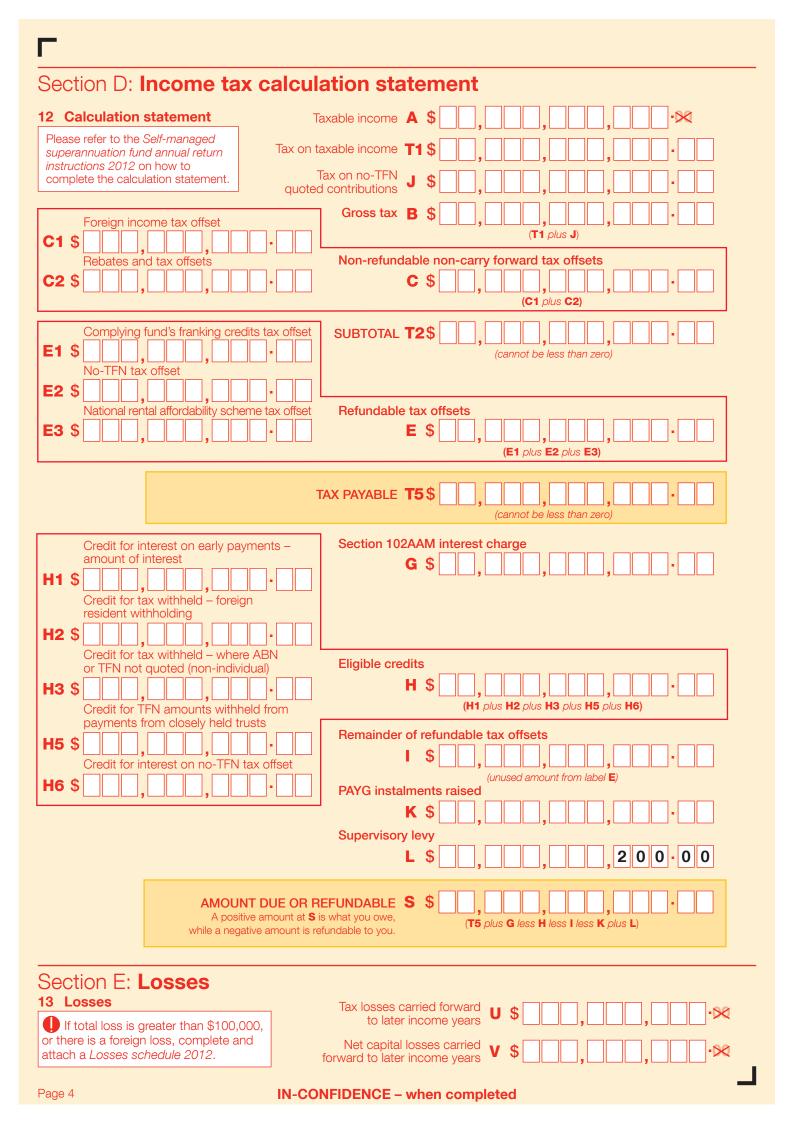
| Who should complete this annual return?<br>Only self-managed superannuation funds (SMSFs) can<br>complete this annual return. All other funds must complete the<br><i>Fund income tax return 2012</i> (NAT 71287).   | <ul> <li>TO COMPLETE THIS ANNUAL RETURN</li> <li>Print clearly, using a BLACK pen only.</li> <li>Use BLOCK LETTERS and print one character per box.</li> </ul>   |  |  |  |  |
|--|--|--|--|--|--|
| The Self-managed superannuation fund annual return instructions 2012 (NAT 71606) (the instructions) can assist you to complete this annual return.   | $ \begin{array}{c} \mathcal{S} & \mathcal{M} & \mathcal{I} & \mathcal{I} & \mathcal{I} \\ \end{array} \\ \hline \mathbf{Print} & \mathbf{X} \text{ in ALL applicable boxes.} \end{array} $   |  |  |  |  |
| Section A: Fund information  |  |  |  |  |  |
| 1 Tax file number (TFN)  | TFN at the top of pages 3, 5 and 7.  |  |  |  |  |
| The Tax Office is authorised by law to request your TFN. You   |  |  |  |  |  |
| could increase the chance of delay or error in processing your a   |  |  |  |  |  |
| 2 Name of self-managed superannuation fund (SMS  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
| 3 Australian business number (ABN) (if applicable)   |  |  |  |  |  |
| 4 Current postal address   |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  | State/territory Postcode   |  |  |  |  |
| 5 Annual return status<br>Is this an amendment to the SMSF's 2012 annual return?   | No Yes   |  |  |  |  |
| 6 Fund auditor   |  |  |  |  |  |
|  |  |  |  |  |  |
| 6 Fund auditor<br>Auditor's name<br>Title: Mr Mrs Miss Ms Other  |  |  |  |  |  |
|  |  |  |  |  |  |
| Auditor's name         Title:       Mr       Miss       Ms       Other       Other         Family name   |  |  |  |  |  |
| Auditor's name       Title:     Mr       Mrs     Miss       Ms     Other   |  |  |  |  |  |
| Auditor's name         Title:       Mr       Miss       Ms       Other       Image: Control of the state of the   | Image: State of the state of th              |  |  |  |  |
| Auditor's name   Title: Mrs   Miss Ms   Other Image: Code  |  |  |  |  |  |
| Auditor's name         Title:       Mr       Mrs       Miss       Ms       Other       Image: Control of the state   |  |  |  |  |  |
| Auditor's name   Title: Mrs   Miss Ms   Other Image: Code  |  |  |  |  |  |
| Auditor's name   Title: Mrs   Miss Ms   Other Other   Family name   First given name   Other given   SMSF Auditor Number   Professional body   Membersi   Code   Postal address  | Image: Second secon            |  |  |  |  |
| Auditor's name   Title: Mrs   Miss Ms   Other Image: Code  |  |  |  |  |  |
| Auditor's name   Title: Mrs   Miss Ms   Other Other   Family name   First given name   Other given   SMSF Auditor Number   Professional body   Membersi   Code   Postal address  | Image: Second state            |  |  |  |  |
| Auditor's name   Title:   Mr   Mrs   Miss   M  | Auditor's phone number |  |  |  |  |
| Auditor's name   Title:   Mrs   Miss   Miss <td< td=""><td>Auditor's phone number Auditor's phone number</td></td<> | Auditor's phone number |  |  |  |  |
| Auditor's name   Title:   Mr   Mrs   Miss   M  | Auditor's phone number  Auditor's phone number  Auditor's phone number  State/territory Postcode  Was Part B of the audit report qualified? No Yes   |  |  |  |  |

**IN-CONFIDENCE – when completed** 

| 8        | B Status of SMSF Australian superannuation fund A No Yes Fund benefit structure B Code |  |  |             |        |            |              | Code                                |            |        |
|----------|--|--|--|-------------|--------|------------|--------------|-------------------------------------|------------|--------|
|          | Does the fund tr<br>Gover  | rust deed allow acce<br>rnment's Super Co-c    | eptance of the C No  |             | Yes    |            |              |                                     |            |        |
| 9        | Was the fund wound   | d up during the in                             | ncome year?  |             | Year   |            | Have all tax | x lodgment                          |            |        |
|          | No Yes If yes which  | s, provide the date on<br>th the fund was woun |  | ] / 📃       |        |            | an           | d payment<br>been met?              | No         | Yes    |
| Se       | ction B: Incon   | ne   |  |             |        |            |              |                                     |            |        |
| 10       | Income Did you have  | e a capital gains tax<br>ent during the year?  | G No Yes   |             |        |            |              | oital gain is gre<br>ains tax (CGT) |            |        |
|          | Did the CGT even   | nt relate to a forestry                        | <b>-</b>   |             |        |            |              | Capital gains                       |            |        |
|          | managed investment s<br>you held other than as a                                       |  | Z No Yes   |             |        | edule 2012 | 2.           |                                     |            |        |
|          |  |  | Net capital g  | jain A      | \$     |            | ,            |                                     | <b>]•≫</b> |        |
|          | Gi   | ross rent and other l                          | easing and hiring incc   | me B        | \$     |            | ,            |                                     | <b>.</b>   |        |
|          |  |  | Gross inter  |             |        |            | ,            |                                     | •20        |        |
|          |  | Fores  | stry managed investm<br>scheme incc                                | me X        | \$     |            | ,            | ], 🗌 🗌                              | <b>·</b> M |        |
| D        | Gross foreigr  |  | Not fourier in   |             | ¢      |            |              |                                     | ·%         | Loss   |
| Ľ        | 15,  | ,×   | Net foreign inco   | me D        | \$     |            |              |                                     |            |        |
|          | Australian fr  | anking credits from                            | a New Zealand comp   |             | \$     |            | ,            | _,                                  | -><        | Number |
|          |  |  | Transfers fr<br>foreign fu   |             | \$     |            | ,            | ],                                  | - <b>M</b> |        |
|          |  |  | Gross payments wh<br>ABN not quo                                   | iere<br>ted | \$     |            | ,            |                                     | •>>        |        |
|          | Calculation of assessal<br>Assessable employe  |  | Gross distribut  | tion 🔒      | \$     |            |              |                                     | •20        | Loss   |
| R        | 1 \$   | _,∞  | *Unfranked divide  | end         | \$     |            |              |                                     | -94        |        |
| plu      |  |  | amc<br>*Franked divide   |             | \$     |            | ,            |                                     | ]-80       |        |
| R<br>plu |  |  | amc<br>*Dividend frank   |             | • • _  |            | ,            | _),[][][_<br>_] [][_][_             |            |        |
| R        |  | _,∞  |  | edit 🗖      | ৯<br>_ |            | ,            | 」,└_│└_│└<br>─┐┌─┐┌─┐┌─             |            | Code   |
| les      | s Transfer of liability to company or  |  | distributi   | ons 🚺       |        |            | ,            |                                     |            |        |
| R        |  |  | Assessa<br>contributio<br>(R1 plus R2 plus R3 less)                | ons R       | \$     |            | ,            | ],                                  | <b>.</b> % |        |
|          | Calculation of non-arm   | · · · · · · · · · · · · · · · · · · ·          | ]  |             |        |            |              |                                     |            | Code   |
| *N<br>U  | et non-arm's length private  | e company dividends                            | *Other incc  | me S        | \$     |            | ,            | ], 🗌 🗌                              | <b>·</b> M |        |
| -        | • ♥ □□□□□, □□□□<br>ıs *Net non-arm's length  |  | *Assessable inco<br>due to changed                                 | tax 🔳       | \$     |            |              |                                     | ->         |        |
| U        | · · · · · · · · · · · · · · · · · · ·  | _,∞  | status of fu   |             |        |            | ,            |                                     |            |        |
| plu<br>U |  | s length income                                | <b>Net non-a</b> ri<br><b>length inco</b><br>(subject to 45% tax i | me U        | \$     |            | ,            |                                     | · <b>M</b> |        |
|          | ← Ψ [_][_][_],[_][_][  |  | Ú1 plus U2 plus  | <b>U3</b> ) |        |            |              |                                     |            | Loss   |
| la       | an amount is entered at t<br>bel, check the instructions                               | s to   | GROSS INCO<br>(Sum of labels <b>A</b> to                           |             | \$     |            | ,            |                                     | ·»         |        |
|          | nsure the correct tax treatr<br>as been applied.                                       |  | t current pension inco   | me Y        | \$     |            |              |                                     | <b>.</b> % |        |
|          |  | TOTAL ASSESS                                   |  |             |        |            |              |                                     |            | Loss   |
|          |  | TOTAL ASSESS                                   |  | \$          | ,      |            | ,            | _,                                  | ·%         |        |

**IN-CONFIDENCE** – when completed





| und |  |  |  |  |  |  |
|-----|--|--|--|--|--|--|
|     |  |  |  |  |  |  |
|     |  |  |  |  |  |  |
|     |  |  |  |  |  |  |

## Section F: Member information

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Report current members at 30 June 2012 and former members who were paid a benefit (lump sum or income stream, but not a rollover) during the financial year. Include members for whom no contributions were received. Report deceased members in Section G.

| MEMBER 1<br>Title: Mr Mrs Miss   |   |         |
|--|---|---------|
| First given name   |   |         |
| Member's TFN   | Day  Month  Year      Date of birth  /  |         |
| Contributions  |   |         |
| Refer to instructions<br>for completing these<br>labels. For example,<br>include contributions                   | Employer contributions A \$   |         |
| include contributions<br>reported to you on a<br><i>Rollover benefits statement</i><br><i>(RBS)</i> (NAT 70944). | ABN of principal employer A1  |         |
| CGT s  | small business retirement exemption C \$ , , , , , , , , , , , , , , , , , ,  |         |
| CGT small b  | Dusiness 15-year exemption amount D \$ ,  | 1226081 |
|  | Personal injury election E \$ , , , , , , , , , , , , , , , , , ,   | 0812    |
|  | Spouse and child contributions <b>F</b> \$  |         |
|  | Other third party contributions <b>G</b> \$   |         |
| Directed termina   | ation (taxable component) payments H \$   |         |
| Assessable fo  | foreign superannuation fund amount  |         |
| Non-assessable for   | foreign superannuation fund amount J \$   |         |
| Transfe  | fer from reserve: assessable amount K \$,,  |         |
| Transfer fro   | om reserve: non-assessable amount L \$  |         |
| Conti<br>a   | tributions from non-complying funds T \$ , , , , , , , , , , , , , , , , , ,  |         |
| Any other contributions  | s (including Super Co-contributions) M \$,,   |         |
|  |   |         |
| Other transactions   | Allocated earnings or losses <b>O</b> \$ , , , , , , , , , , , , , , , , , ,  |         |
| C  | ward amounts less any rolled in P \$ , , , , , , , , , , , , , , , , , ,  |         |
|  | ard amounts less any rolled out <b>Q \$</b> , <b>D</b> | de      |
|  | Benefit payments and code R \$ , , , , , , , , , , , , , , , , , ,  |         |
| CLO  |   |         |
|  | IN-CONFIDENCE – when completed  | Page 5  |

Report current members at 30 June 2012 and former members who were paid a benefit (lump sum or income stream, but not a rollover) during the financial year. Include members for whom no contributions were received. Report deceased members in Section G.

| MEMBER 2                                      |  |
|---|--|
|   | iss Ms Other   |
| Family name                                   |  |
| First given name                              |  |
|   | Day Month Year   |
| Member's TFN                                  | Date of birth  |
| Contributions                                 |  |
| Refer to instructions                         |  |
| for completing these labels. For example,     |  |
| include contributions<br>reported to you on a | ABN of principal employer A1   |
| Rollover benefits statem                      | Personal contributions <b>B</b> \$   |
| ( <i>RBS</i> ) (NAT 70944).                   |  |
| CC  | T small business retirement exemption C \$   |
| CGT sm  | all business 15-year exemption amount D\$,,,   |
|   | Personal injury election E \$  |
|   | Spouse and child contributions <b>F \$</b>   |
|   | Other third party contributions <b>G \$</b>  |
|   |  |
| Directed tern                                 | nination (taxable component) payments H \$   |
| Assessat                                      | e foreign superannuation fund amount   |
| Non-assessat                                  |  |
| Tra   | Insfer from reserve: assessable amount K \$  |
| Transfe                                       | r from reserve: non-assessable amount L \$   |
| C   | ontributions from non-complying funds T \$ , , , , , , , , , , , , , , , , , ,                             |
| Any other contribut                           | ions (including Super Co-contributions) M \$   |
|   |  |
| <b>O</b>                                      | TOTAL CONTRIBUTIONS N \$   |
| Other transactions                            | Allocated earnings or losses O \$ , , , , , , , , , , , , , , , , , ,                                      |
|   | Inward amounts less any rolled in contributions reported at A – M P \$ , , , , , , , , , , , , , , , , , , |
| Οι  | tward amounts less any rolled out of \$,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,                                 |
|   | Benefit payments and code <b>R</b> \$,,,   |
|   |  |

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Report current members at 30 June 2012 and former members who were paid a benefit (lump sum or income stream, but not a rollover) during the financial year. Include members for whom no contributions were received. Report deceased members in Section G.

| MEMBER 3<br>Title: Mr Mrs Miss<br>Family name<br>First given name<br>Member's TFN  | Ms Other Other Other given names   |              |
|--|--|--------------|
| Refer to instructions<br>for completing these<br>labels. For example,<br>include contributions<br>reported to you on a<br><i>Rollover benefits statement</i> | OPENING ACCOUNT BALANCE \$   |              |
| ( <i>RBS</i> ) (NAT 70944).<br>CGT si  | Personal contributions B \$,,<br>mall business retirement exemption C \$,<br>usiness 15-year exemption amount D \$,<br>Personal injury election E \$   | 7122         |
| Directed termina   | Spouse and child contributions <b>F \$ \$ \$ \$ \$ \$ \$ \$ \$ \$</b>  | 2260912      |
| Non-assessable fo  | oreign superannuation fund amount     \$      \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$ <td></td> |              |
| Contr<br>a   | <pre>m reserve: non-assessable amount L \$,,, _,</pre>                                   |              |
| Other transactions   | TOTAL CONTRIBUTIONS       N       ,,,,,         Allocated earnings or losses       O       \$,,,,         vard amounts less any rolled in contributions reported at A - M       P       \$,  | Loss<br>Loss |
| Outwa<br>con   | ard amounts <i>less</i> any rolled out<br>thributions at item 15K on RBS<br>Benefit payments and code R \$ , ,   |              |
|  | IN-CONFIDENCE – when completed   | Page 7       |

Report current members at 30 June 2012 and former members who were paid a benefit (lump sum or income stream, but not a rollover) during the financial year. Include members for whom no contributions were received. Report deceased members in Section G.

| MEMBER 4                                   |  |
|--|--|
|  | ss Ms Other  |
| Family name                                |  |
| First given name                           |  |
|  | Day Month Year   |
| Member's TFN                               | Date of birth  |
| Contributions                              |  |
| Refer to instructions                      |  |
| for completing these labels. For example,  |  |
| include contributions reported to you on a | ABN of principal employer A1   |
| Rollover benefits stateme                  | Personal contributions B \$  |
| ( <i>RBS</i> ) (NAT 70944).                |  |
| CG   |  |
| CGT sma                                    | all business 15-year exemption amount D\$  |
|  | Personal injury election E \$  |
|  | Spouse and child contributions <b>F \$</b>   |
|  | Other third party contributions <b>G \$</b>  |
|  |  |
| Directed term                              | ination (taxable component) payments H \$,,,   |
| Assessab                                   | le foreign superannuation fund amount  |
| Non-assessab                               | le foreign superannuation fund amount J \$   |
| Tra  | nsfer from reserve: assessable amount K\$  |
| Transfer                                   | from reserve: non-assessable amount L \$   |
| C  | ontributions from non-complying funds T \$ , , , , , , , , , , , , , , , , , ,                             |
| Any other contribut                        | ons (including Super Co-contributions) M \$  |
|  |  |
| out  |  |
| Other transactions                         | Allocated earnings or losses O \$ , , , , , , , , , , , , , , , , , ,                                      |
|  | Inward amounts less any rolled in contributions reported at A – M P \$ , , , , , , , , , , , , , , , , , , |
|  | tward amounts less any rolled out Q \$ , , , , , , , , , , , , , , , , , ,                                 |
|  | Benefit payments and code R \$ ,   |
|  |  |

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## Section G: Supplementary member information

| U | Use  | this | section  | for |
|---|------|------|----------|-----|
| - | 0000 |      | 00001011 |     |

deceased members

| any other members who cannot be               |   |
|---|---|
| MEMBER 5                                      |   |
| Title: Mr Mrs Miss Ms                         | Other   |
|   |   |
| First given name                              |   |
|   |   |
| Member's TFN                                  | Date of birth Day Month Year                                      |
|   | If deceased, date of death  |
| Contributions OPENIN                          |   |
| Refer to instructions for completing these    | Employer contributions A \$                                       |
| labels. For example,<br>include contributions | f principal employer A1   |
| Rollover benefits statement                   | Personal contributions B \$                                       |
| ( <i>RBS</i> ) (NAT 70944).                   |   |
|   |   |
| CGT small business 1                          | 5-year exemption amount <b>D</b> \$                               |
|   | Personal injury election E \$                                     |
| Spou  | use and child contributions <b>F</b> \$                           |
| Othe  | er third party contributions G \$,,                               |
| Directed termination (taxab                   | ble component) payments H \$                                      |
| Assessable foreign sup                        | perannuation fund amount  |
| Non-assessable foreign sup                    | perannuation fund amount J \$ , ,                                 |
| Transfer from res                             | serve: assessable amount K \$                                     |
| Transfer from reserve                         | e: non-assessable amount L \$                                     |
| Contributions fi<br>and previo                | from non-complying funds T \$ , , , , , , , , , , , , , , , , , , |
| Any other contributions (including            |   |
| т   |   |
| Other transactions Allocate                   | ed earnings or losses <b>O</b> \$                                 |
|   |   |
| contributio                                   | ons reported at A – M 🔽 Y L, LLL, LLL, LLL, LLL I LL              |
|   | at item <b>15K</b> on RBS   |
| Benefit                                       | t payments and code R \$ _ , , ,                                  |
| CLOSING AC                                    |   |
|   | IN-CONFIDENCE – when completed Page                               |

| Г  |  |  |  |  |
|--|--|--|--|--|
| <ul> <li>Use this section for:</li> <li>deceased members</li> <li>any other members who</li> </ul> | cannot be included at pages 5 to 8.  |  |  |  |
| MEMBER 6   |  |  |  |  |
| Title: Mr Mrs Miss<br>Family name  |  |  |  |  |
|  |  |  |  |  |
| First given name   |  |  |  |  |
| Member's TFN   | Day         Month         Year           Date of birth         /         /         /                                   |  |  |  |
|  | Day     Month     Year       If deceased, date of death     /     /  |  |  |  |
| Contributions  |  |  |  |  |
| Refer to instructions for completing these   |  |  |  |  |
| labels. For example,<br>include contributions  |  |  |  |  |
| reported to you on a<br>Rollover benefits statement  | ABN of principal employer A1   |  |  |  |
| (RBS) (NAT 70944).   | Personal contributions B \$,,  |  |  |  |
| CGT s  | mall business retirement exemption C \$  |  |  |  |
| CGT small b  | usiness 15-year exemption amount D\$   |  |  |  |
|  | Personal injury election E \$  |  |  |  |
|  | Spouse and child contributions F \$,,  |  |  |  |
|  | Other third party contributions G \$   |  |  |  |
| Directed termina   | tion (taxable component) payments H \$ , ,   |  |  |  |
| Assessable for   |  |  |  |  |
| Non-assessable for   | preign superannuation fund amount J \$   |  |  |  |
| Transfe  | er from reserve: assessable amount K \$  |  |  |  |
| Transfer fro   | m reserve: non-assessable amount L \$  |  |  |  |
| Conti<br>a   | ributions from non-complying funds <b>T \$</b>   |  |  |  |
| Any other contributions  | s (including Super Co-contributions) M \$,,  |  |  |  |
|  | TOTAL CONTRIBUTIONS N \$,,   |  |  |  |
| Other transactions   | Allocated earnings or losses <b>O</b> \$   |  |  |  |
|  |  |  |  |  |
| C  |  |  |  |  |
|  | ntributions at item 15K on RBS   |  |  |  |
|  |  |  |  |  |
| CLO  |  |  |  |  |
|  | bers need to be reported in Section G: Supplementary member information copy this page ual return. DO NOT USE STAPLES. |  |  |  |
| Page 10 IN-CONFIDENCE – when completed   |  |  |  |  |

| Section H: Assets and liabilities  |  |
|--|--|
| 14 ASSETS14a Australian managed investmentsListed trusts   | A\$,,∞   |
| Unlisted trusts  | B \$,,   |
| Insurance policy   | C \$,,,∞   |
| Other managed investments  | D\$,,,∞  |
| 14b Australian direct investments         Cash and term deposits   | E \$,,×  |
| Debt securities  | F\$,,∞   |
| Loans  | G \$,,,∞   |
| Listed shares  | н \$,,,∞   |
| Unlisted shares  | Ⅰ\$,,∞   |
| Limited recourse borrowing arrangements  | J\$,,,∞  |
| Non-residential real property  | К\$,,∞   |
| Residential real property  | L \$,,,×   |
| Collectables and personal use assets   | M\$,,,∾  |
| Other assets   | <b>○</b> \$ , ,∞                                 |
| 14c         Overseas direct investments         Overseas shares  | ₽\$,,∞   |
| Overseas non-residential real property   | Q\$,,,×  |
| Overseas residential real property   | R \$,,,∾   |
| Overseas managed investments   | S \$,,,∞   |
| Other overseas assets  | т \$,,∞  |
| TOTAL AUSTRALIAN AND OVERSEAS ASSETS   | U\$,,,∞  |
| 15 LIABILITIES Borrowings  | <b>v</b> \$,,∞                                   |
| Total member closing account balances (total of all <b>CLOSING ACCOUNT BALANCE</b> s from Sections F and G)  | ₩\$ <u>,</u> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| Reserve accounts   | x \$,,∞  |
| Other liabilities  | Y\$,,,∞  |
| TOTAL LIABILITIES  | z \$,,∞  |
| Section I: <b>Taxation of financial arrangement</b><br><b>16 Taxation of financial arrangements (TOFA)</b><br>Did you make a gain, loss or transitional balancing adjustment<br>from a financial arrangement subject to the TOFA rules? <b>G</b> | No Yes   |
| Total TOFA gains 📕   | \$_,,,,∞   |
| Total TOFA losses  | \$,,,,   |
|  | \$_,,, ●   |
| IN-CONFIDENCE – when co  | ompleted Page 11                                 |

## Section J: Regulatory information

| The following questions indicate the operational status of the SN You must answer either <b>No</b> or <b>Yes</b> for all questions listed and provide |             |     |  |    | eading inform | nation.     |
|---|-------------|-----|--|----|---------------|-------------|
| In-house and related party assets   |             |     |  |    |               |             |
| Did the SMSF loan, lease to or invest in related parties (known as in-house assets)?  | A No        | Yes |  | \$ |               | <b>⊡</b> •≫ |
| Did the SMSF hold in-house assets at any time during the year that exceeded 5% of total assets?   | B No        | Yes |  |    |               |             |
| Did the SMSF hold an investment in a related party at any time during the year (excluding in-house assets)?   | C No        | Yes |  | \$ | ],            | •           |
| Did the SMSF acquire any exempt assets from related parties?  | P No        | Yes |  | \$ |               | •           |
| Did the SMSF acquire any assets (other than exempt assets) from related parties?  | D No        | Yes |  | \$ |               | ·%          |
| Other regulatory questions  |             |     |  |    |               |             |
| Did the SMSF lend money or provide financial assistance to a member or relative of a member of the fund?  | E No        | Yes |  |    |               |             |
| Did the SMSF receive in specie contributions during the year?   | F No        | Yes |  | \$ |               | ·%          |
| Did the SMSF make and maintain all investments on an arm's length basis?  | G No        | Yes |  |    |               |             |
| Did the SMSF borrow for purposes that are not permissible?  | H No        | Yes |  |    |               |             |
| Did members have the personal use of the SMSF's assets before retirement?   | No          | Yes |  |    |               |             |
| Did the SMSF provide money to members without a condition of release being met?   | J No        | Yes |  |    |               |             |
| Did trustees of the fund receive any remuneration for their services as a trustee?  | K No        | Yes |  |    |               |             |
| Are any trustees or directors currently disqualified persons as defined by SISA?  | L No        | Yes |  |    |               |             |
| Are all SMSF assets appropriately documented as owned by the fund?  | M No        | Yes |  |    |               |             |
| Did the SMSF carry on a business of selling goods or services?  | N No        | Yes |  |    |               |             |
| Does the auditor provide services to the SMSF as either a tax agent, accountant or financial advisor or administrator?                                | <b>O</b> No | Yes |  |    |               |             |
| Section K: Other information  |             |     |  |    |               |             |
| Forestry managed investment schemes Code Year Number  |             |     |  |    |               |             |
| Product or private ruling information <b>G H</b>  |             |     |  |    |               |             |

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 2011–12 income year, write **2012**).

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 2012.* 

#### 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 2012* for each election.

or each election.

В

If revoking an interposed entity election, print **R**, and complete and attach the *Interposed entity election or revocation 2012*.

**IN-CONFIDENCE** – when completed

### Section L: 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 are in doubt about any aspect of the annual return, place all the facts before the ATO.

#### **TRUSTEE'S OR DIRECTOR'S DECLARATION:**

I declare that current trustees and directors have authorised this annual return and it is documented as such in the SMSF's records. I have received the audit report and I am aware of any matters raised. I declare that the information on this annual return, including any attached schedules and additional documentation is true and correct. I also authorise the ATO to make any tax refunds to the nominated bank account (if applicable).

Authorised trustee's director's or public officer's signature

| Preferred trustee or director contact details:  |  |  |  |  |  |  |  |
|---|--|--|--|--|--|--|--|
| Title: Mr Mrs Miss Ms Other   |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |
| First given name Other given names  |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |
| Phone number  |  |  |  |  |  |  |  |
| Email address   |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |
| Non-individual trustee name (if applicable)   |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |
| ABN of non-individual trustee   |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |
|   | Hrs  |  |  |  |  |  |  |
| Time taken to prepare and complete this annual return   |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |
| The Commissioner of Taxation, as Registrar of the Australian Business Register, may you provide on this annual return to maintain the integrity of the register. For further info |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |
| <b>TAX AGENT'S DECLARATION:</b><br>I declare that the <i>Self-managed superannuation fund annual return 2012</i> has been prepare   | ed in accordance with information provided |  |  |  |  |  |  |
| by the trustees, that the trustees have given me a declaration stating that the information j   |  |  |  |  |  |  |  |
| the trustees have authorised me to lodge this annual return.  |  |  |  |  |  |  |  |
| Tax agent's signature   |  |  |  |  |  |  |  |
|   | MonthYear                                  |  |  |  |  |  |  |
|   | Date / /                                   |  |  |  |  |  |  |
| Tax agent's contact details   |  |  |  |  |  |  |  |
| Title: Mr Mrs Miss Ms Other   |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |
| First given name Other given names  |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |
| Tax agent's practice  |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |
| Tax agent's phone number     Reference number     Tax agent number  |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |
| Postal address for annual returns: Australian Taxation Office, GPO Box 9845, IN YOUR CAPITAL CITY   |  |  |  |  |  |  |  |
| IN-CONFIDENCE – when completed  | Page 13                                    |  |  |  |  |  |  |



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