

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 2012 (NAT 71287).

TO COMPLETE THIS ANNUAL RETURN

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

S	М	/	T	H	S	T		



The Self-managed superannuation fund annual return instructions 2012 (NAT 71606) (the instructions) can assist you to complete this annual return.	S M / T H S T 7226612							
Section A: Fund information 1 Tax file number (TFN) 1 The Tax Office is authorised by law to request your TFN. You could increase the chance of delay or error in processing your	To assist processing, write the fund's TFN at the top of pages 3, 5 and 7.							
2 Name of self-managed superannuation fund (SM	MSF)							
3 Australian business number (ABN) (if applicable)								
4 Current postal address								
Suburb/town	State/territory Postcode							
5 Annual return status Is this an amendment to the SMSF's 2012 annual return?	No Yes							
6 Fund auditor Auditor's name								
Title: Mr Mrs Miss Ms Other								
Family name								
First given name Other giv	ren names							
SMSF Auditor Number Professional body Membe	rship number Auditor's phone number							
Code								
Postal address								
Suburb/town	State/territory Postcode							
	State/territory Postcode							
Suburb/town	State/territory Postcode Was Part B of the audit report qualified? B No Yes							
Suburb/town Day Month Year	Was Part B of the audit report qualified? B No Yes							
Suburb/town Date audit was completed A Month Year Provide your fund's financial institution details. Write the BSB number, fund's account number and account number are decount. We do not issue refunds to a trustee's personal account.	Was Part B of the audit report qualified? B No Yes							
Suburb/town Date audit was completed A Month Year Provide your fund's financial institution details. Write the BSB number, fund's account number and account number are decount. We do not issue refunds to a trustee's personal account.	Was Part B of the audit report qualified? B No Yes name below. (See relevant instructions.)							

Status of SMSF	Australian superann	uation fund A No		Yes		Fund	benefit st	ructure B	Code
Does the fund tr Gover	ust deed allow accepta nment's Super Co-cor	ance of the C No		Yes					
9 Was the fund wound	d up during the inc					Llove ell	tov loden	n ont	
No Yes I If yes	, provide the date on In the fund was wound u	Day Month /		Year			tax lodgn and payn ns been n	nent No 🗀	Yes
Section B: Incom				1		Obligation	10 0001111	101:	
10 Income Did you have	a capital gains tay	G No Yes	If the	total c plete ar	apital lo nd attac	ss or total h a <i>Capita</i>	capital gair I gains tax (n is greater tha CGT) schedule	n \$10,000 e 2012.
managed investment so					omplete dule 201		h a Capital	gains tax	
you held other than as a	n Initial participant?	Net capital gain	A	\$				· %	
Gr	oss rent and other leas	sing and hiring income	В	\$				->	
		Gross interest	C	\$		1.		·%	
	Forestry	/ managed investment scheme income	X	\$		1.			
Gross foreign	income								Loss
D1 \$,		Net foreign income	D	\$		<u> </u>	<u> </u>	-94	
Australian fra	anking credits from a N	New Zealand company	E	\$], 🗆 🗆		≫	Number
		Transfers from foreign funds	F	\$], 🗆 🗆		≫	
	(Gross payments where ABN not quoted	н	\$], 🗆 🗆		·×	
Calculation of assessab		Gross distribution from partnerships	ï	\$				· M	Loss
R1 \$],□□□⋅∞	*Unfranked dividend amount	J	\$				->	
plus Assessable persona	l contributions	*Franked dividend	K	\$					
plus *No-TFN quoted of		amount *Dividend franking	L	\$					
R3 \$		credit *Gross trust	M	\$], [][w	Code
less Transfer of liability to company or		distributions Assessable		<u>Ψ</u>		J, L.J.L.			
R6 \$,		contributions plus R2 plus R3 less R6)	R	\$],	<u> </u>	·%	
Calculation of non-arm' *Net non-arm's length private		10.11		φ.					Code
U1 \$,	*Other income *Assessable income	S	\$		J, <u>L</u>	اـــا, ـــاا	.%	
plus*Net non-arm's length	trust distributions	due to changed tax status of fund	T	\$], 📗		-><	
plus *Net other non-arm's		Net non-arm's length income		Φ.					
U3 \$,		(subject to 45% tax rate) (U1 plus U2 plus U3)	U	\$		J, L_L	اـــا, ــــاا	· % (
*If an amount is entered at the		GROSS INCOME	W	\$				- 100	Loss
label, check the instructions ensure the correct tax treatn has been applied.	nent -	(Sum of labels A to U)		φ 🗀					الا
		urrent pension income	Y	\$		J, L_L	اـــا, ـــاا	.%	Loss
	TOTAL ASSESSAE	BLE INCOME (W less Y) V \$], 🗌				·×	

	Place your attachments here.	und's ta	x fil	e n	umbe	er (TF	N)					
Section	on C: Deductions			Ţ								
11 Ded	uctions Interest expenses within A	Australia	A :	\$ _		,		∐,	<u> </u>	M		
	Interest expenses of	overseas	В	\$		\Box , \Box		\Box ,		DQ	=	
	Capital works ded	ductions	D :	\$[,[<u> </u>		×		
	Deduction for decline in value of depreciating	g assets	E :	\$[\Box , \Box		<u> </u>		×	71	
	Small business and general business to	ax break	P	\$[],[<u> </u>		×	2260	
	Death or disability pr	remiums	F	\$[<u> </u>		×	712	
	Death benefit	increase	G	\$[\Box , \Box		<u> </u>		×		
	Approved au	ditor fee	н :	\$[<u> </u>		×		
	Investment ex	xpenses	1 3	\$						M		
	Management ex	xpenses	J	\$						×		
	Administration ex	xpenses	Q	\$						M		
	Forestry managed investment scheme de	eduction	U	\$,[×	Code	
	Other dec	ductions	L :	\$				<u> </u>		×		
	Tax losses d	educted	M	\$ [<u> </u>		×		
	TOTAL DEDUC	CTIONS	N :	\$[<u> </u>		×	Loss	
	TAXABLE INCOME OF		0	\$[M	LUSS	

Section D: Income tax calculation statement
12 Calculation statement Taxable income A \$
Please refer to the Self-managed superannuation fund annual return instructions 2012 on how to complete the calculation statement. Tax on taxable income T1\$
Foreign income tax offset C1 \$ (T1 plus J)
Rebates and tax offsets C2 \$
Complying fund's franking credits tax offset E1 \$
National rental affordability scheme tax offset E3 \$
TAX PAYABLE T5\$,, (cannot be less than zero)
Credit for interest on early payments – amount of interest H1 \$,, Credit for tax withheld – foreign resident withholding H2 \$,
Credit for tax withheld – where ABN or TFN not quoted (non-individual) H3 \$
payments from closely held trusts H5 \$
K \$, , , , , , , , , , , , , , , , , ,
L \$,, 2 0 0 · 0 0
AMOUNT DUE OR REFUNDABLE S \$, , , , , , , , , , , , , , , , , ,
Section E: Losses 13 Losses Tax losses carried forward to later income years U \$
or there is a foreign loss, complete and attach a Losses schedule 2012. Net capital losses carried forward to later income years Net capital losses carried forward to later income years

Г	Fund's tax file number (TFN)
Section F: Meml	ber information
	ers at 30 June 2012 and former members who were paid a benefit (lump sum or income stream, but not a year. Include members for whom no contributions were received. Report deceased members in Section G.
MEMBER 1 Title: Mr Mrs Miss Family name First given name	Ms Other Other Other Day Month Year
Member's TFN	Date of birth / / / / / / / / / / / / / / / / / / /
Contributions Refer to instructions	OPENING ACCOUNT BALANCE \$,
for completing these labels. For example, include contributions reported to you on a	Employer contributions A \$,,
Rollover benefits statement (RBS) (NAT 70944).	Personal contributions B \$
CGT	small business retirement exemption C \$
CGT small b	Personal injury election E \$
	Personal injury election E \$
	Spouse and child contributions F \$,
	Other third party contributions G \$,
	ation (taxable component) payments H \$,
	foreign superannuation fund amount \$
	foreign superannuation fund amount J \$,, Ifer from reserve: assessable amount K \$
	rom reserve: non-assessable amount L \$
Conf	utributions from non-complying funds + c
	and previously non-complying funds S (including Super Co-contributions) M \$
	TOTAL CONTRIBUTIONS N \$
Other transactions	Allocated earnings or losses • \$
Inv	ward amounts less any rolled in P \$ Loss
Outwa	vard amounts less any rolled out
СО	Benefit payments and code R \$
CL	LOSING ACCOUNT BALANCE S \$
	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	
Title: Mr Mrs Miss Family name	Ms Other Other
Talling Hallie	
First given name	Other given names
	Day Month Year
Member's TFN	Date of birth / / / / / / / / / / / / / / / / / / /
Contributions	OPENING ACCOUNT BALANCE \$
Refer to instructions	
for completing these labels. For example,	Employer contributions A \$,
include contributions	ABN of principal employer A1
reported to you on a Rollover benefits statement	
(RBS) (NAT 70944).	Personal contributions B \$,
CGT sr	nall business retirement exemption C \$,
CGT small bu	siness 15-year exemption amount D \$
	Personal injury election E \$
	Spouse and child contributions F \$,
	Other third party contributions G \$,
Directed terminat	on (taxable component) payments H \$,
Assessable fo	reign superannuation fund amount \$,,
Non-assessable fo	reign superannuation fund amount 👃 💲 🔝 🔭 , 🦳 💮 , 💮 💮 -
Transfe	r from reserve: assessable amount K\$
Transfer from	n reserve: non-assessable amount L \$
	butions from non-complying funds T \$
	na previously non-complying tunas
Arry other contributions	(including Super Co-contributions) M \$,
Oth on two manations	TOTAL CONTRIBUTIONS N \$,,
Other transactions	Allocated earnings or losses • \$, , , , , , , , , , , , , , , , , ,
Inw	ard amounts less any rolled in P \$
Outwa	d amounts less any rolled out
con	ributions at item 15K on RBS Code
	Benefit payments and code R \$
CLC	SING ACCOUNT BALANCE S \$, , , , , , , , , , , , , , , , , ,

Г	Fund's tax file number (TFN)
	rs at 30 June 2012 and former members who were paid a benefit (lump sum or income stream, but not a year. Include members for whom no contributions were received. Report deceased members in Section G.
MEMBER 3 Title: Mr Mrs Miss Family name First given name Member's TFN Contributions Refer to instructions for completing these	Ms Other Other Other given names Other given names Day Month Year OPENING ACCOUNT BALANCE \$, , , , , ,
labels. For example, include contributions reported to you on a Rollover benefits statement	ABN of principal employer A1
(RBS) (NAT 70944).	Personal contributions B \$,
CGT sma∥ b	Personal injury election E \$
	Spouse and child contributions F \$,,
Directed termina	tion (taxable component) payments H \$
	oreign superannuation fund amount J \$,,
	er from reserve: assessable amount K \$,
Cont &	ributions from non-complying funds T \$, , , , , , , , , , , , , , , , , ,
Any other contributions	TOTAL CONTRIBUTIONS N \$, , , , , , , , , , , , , , , , , ,
Other transactions	Allocated earnings or losses • \$
Outwa	ard amounts less any rolled in P\$,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	Benefit payments and code R \$
CL	OSING ACCOUNT BALANCE \$ \$,

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	
Title: Mr Mrs Miss Family name	Ms Other Other
First given name	Other given names
	Day Month Year
Member's TFN	Date of birth / / / / / / / / / / / / / / / / / / /
Contributions	OPENING ACCOUNT BALANCE \$ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Refer to instructions	
for completing these labels. For example,	Employer contributions A \$,
include contributions reported to you on a	ABN of principal employer A1
Rollover benefits statement (RBS) (NAT 70944).	Personal contributions B \$
CGT sm	business retirement exemption C \$,
CGT small bus	siness 15-year exemption amount D\$,,
	Personal injury election E \$,
	Spouse and child contributions F \$,
	Other third party contributions G \$
Directed termination	on (taxable component) payments H \$
Assessable for	eign superannuation fund amount \$
Non-assessable for	eign superannuation fund amount J \$
iransier	
Transfer from	reserve: non-assessable amount L \$,
	outions from non-complying funds T \$, , , , , , , , , , , , , , , , , ,
Any other contributions (including Super Co-contributions) M \$,
	TOTAL CONTRIBUTIONS N \$,,
Other transactions	Allocated earnings or losses • \$
	rd amounts (see any rolled in
CO	rd amounts less any rolled in htributions reported at A - M P \$,
	d amounts less any rolled out ibutions at item 15K on RBS Code
	Benefit payments and code R \$, ,
CLOS	SING ACCOUNT BALANCE S \$,

Section G: Supplementary member information Use this section for: deceased members any other members who cannot be included at pages 5 to 8. **MEMBER 5** Title: Mr Mrs Family name First given nan Member's TFN Date of birth If deceased, date of death Contributions OPENING ACCOUNT BALANCE \$ Refer to instructions for completing these Employer contributions A \$ labels. For example, include contributions ABN of principal employer A1 reported to you on a Rollover benefits statement Personal contributions (RBS) (NAT 70944). 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** \$ Directed termination (taxable component) payments H Assessable foreign superannuation fund amount Non-assessable foreign superannuation fund amount **J** Transfer from reserve: assessable amount K \$ Transfer from reserve: non-assessable amount Contributions from non-complying funds and previously non-complying funds Any other contributions (including Super Co-contributions) TOTAL CONTRIBUTIONS N Other transactions Allocated earnings or losses • Inward amounts less any rolled in contributions reported at A - M Outward amounts less any rolled out contributions at item 15K on RBS Code **R** \$ Benefit payments and code CLOSING ACCOUNT BALANCE \$ \$ **IN-CONFIDENCE** – when completed

 Use this section for: deceased members any other members who cannot be included at pages 5 to 8. 							
MEMBER 6							
Title: Mr Mrs Miss Family name	Ms Other Other						
First given name	Other given names						
Member's TFN	Date of birth Day Month Year Day Month Year						
	If deceased, date of death						
Contributions	OPENING ACCOUNT BALANCE \$,						
Refer to instructions for completing these labels. For example,	Employer contributions A \$,,						
include contributions reported to you on a	ABN of principal employer A1						
Rollover benefits statement (RBS) (NAT 70944).	Personal contributions B \$,,						
CGT	small business retirement exemption C \$,						
CGT sma∥ k	pusiness 15-year exemption amount D\$,						
	Personal injury election E \$						
	Spouse and child contributions F \$,						
Directed termina	Other third party contributions G \$,, ation (taxable component) payments H \$						
	foreign superannuation fund amount \$						
	foreign superannuation fund amount J \$						
Transi	fer from reserve: assessable amount K\$, , , , , , , , , , , , , , , , , ,						
Transfer fro	om reserve: non-assessable amount L \$,,						
Con	tributions from non-complying funds T \$,,						
Any other contribution	s (including Super Co-contributions) M \$,						
Other transactions	TOTAL CONTRIBUTIONS N \$,,						
Other transactions	Allocated earnings or losses • \$, , , , , , , , , , , , , , , , , ,						
lny	ward amounts less any rolled in P\$,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
Outw. co	ard amounts less any rolled out ntributions at item 15K on RBS Q \$, , , , , , , , , , , , , , , , , ,						
	Benefit payments and code R \$						
	OSING ACCOUNT BALANCE \$ \$, , , , , , . .						
If additional men	nbers need to be reported in Section G: Supplementary member information copy this page						

If additional members need to be reported in Section G. Supplementary and attach to the annual return. DO NOT USE STAPLES.

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Section H: Assets and liabilities	
14 ASSETS 4a Australian managed investments Listed trusts	a \$ □ □ , □ □ ·∞
Unlisted trusts	B \$ □ □ , □ □ , □ □ ·∞
Insurance policy	c \$,×
Other managed investments	D \$
4b Australian direct investments Cash and term deposits	E \$
Debt securities	F \$
Loans	G \$
Listed shares	• H \$ □ □ , □ □ , □ □ • ∞
Unlisted shares	s I \$ □ □ , □ □ , □ □ ·∞
Limited recourse borrowing arrangements	s J \$□□□,□□□,□□·∞
Non-residential real property	K \$
Residential real property	L \$ □□□, □□□, □□·≫
Collectables and personal use assets	s M \$ □ □ , □ □ ·∞
Other assets	• • • • • • • • • • • • • • • • • • •
4c Overseas direct investments Overseas shares	P \$ □ □ , □ □ , □ □ ·×
Overseas non-residential real property	Q \$,
Overseas residential real property	R \$,
Overseas managed investments	s \$ \$,, \%
Other overseas assets	r \$ □ □ , □ □ , □ □ ·∞
TOTAL AUSTRALIAN AND OVERSEAS ASSETS	; U \$ □ □ , □ □ ·×
15 LIABILITIES Borrowings	v \$
Total member closing account balances (total of all CLOSING ACCOUNT BALANCE s from Sections F and G	w \$□□,□□,□□·∞
Reserve accounts	
Other liabilities	x x \$ □ □ , □ □ , □ □ ·∞
TOTAL LIABILITIES	z \$×
Section I: Taxation of financial arrangeme 16 Taxation of financial arrangements (TOFA) Did you make a gain, loss or transitional balancing adjustment from a financial arrangement subject to the TOFA rules?	nts No Yes
Total TOFA gains H	\$,
Total TOFA losses	\$
TOFA transitional balancing adjustment J IN-CONFIDENCE – when o	\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\

Section J	: Regul	latory in	formation
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The following questions indicate the operational status of the SMSF. Penalties will apply for false or misleading information. You must answer either **No** or **Yes** for all questions listed and provide dollar amounts if applicable.

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 , , , , , , , , , , , , , , , , , , ,	·M
Did the SMSF hold in-house assets at any time during the year that exceeded 5% of total assets?	
Did the SMSF hold an investment in a related party at any time during the year (excluding in-house assets)?	· %
Did the SMSF acquire any exempt assets from related parties? P No Yes \$,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	·M
Did the SMSF acquire any assets (other than exempt assets) from related parties? No Yes , , , , , , , , , , , , , , , , , , ,	·M
Other regulatory questions	
Did the SMSF lend money or provide financial assistance to a member or relative of a member of the fund?	
Did the SMSF receive in specie contributions during the year? F No Yes , , , , , , , , , , , , , , , , , , ,	· M
Did the SMSF make and maintain all investments on an arm's length basis?	
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?	
Did the SMSF provide money to members without a condition of release being met?	
Did trustees of the fund receive any remuneration for their services as a trustee?	
Are any trustees or directors currently disqualified persons as defined by SISA?	
Are all SMSF assets appropriately documented as owned by the fund?	
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, o No Yes	
Section K: Other information	
Forestry managed investment schemes Code Year Number	
Product or private ruling information G H	
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 <i>Family trust election, revocation or variation 2012.</i>	
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 <i>Interposed entity election or revocation 2012</i> for each election.	
If revoking an interposed entity election, print R , and complete and attach the <i>Interposed entity election or revocation 2012.</i>	ı

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	
Date Day Month Year	
Preferred trustee or director contact details:	
Title: Mr Mrs Miss Ms Other	
Family name	
First given name Other given names	
Phone number	
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 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 2012 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: Mr Mrs Miss Ms Other Other	
Family name	
First given name Other given names	
Toy agent's practice	
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	