

Auditor/actuary contravention report

Use this form to report contraventions of the Superannuation Industry (Supervision) Act 1993 made by trustees of self managed super funds (SMSFs). You can report contraventions that may have occurred, may be occurring or may occur in the future.

How to complete this report

- Refer to Completing the Auditor/actuary contravention report (NAT 11299).
- Print clearly in BLOCK I FTTERS using a black pen only.

- Leave boxes blank if not applicable (do not use N/A or NIL).
- Do not use symbols such as +, -, /, \$.
- Report separate events on separate pages. Ensure the report you send is complete and original. We do not accept photocopied, faxed or computer printed reports.

| ■ Print one character in each box. SMITHST | If your report contains errors or is incomplete, we may not accept it and we may ask you to complete and submit a new one. |
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| Section A: Report information 1 This report applies to the financial year ending 30 Jur 2 This report is: New OR Revised Refer to the instructions Completing the auditor/actuary continuous Reference of the continuous Refere | |
| Section B: Fund information Name of self managed superannuation fund (SMSF) Australian business number (ABN) and/or tax file num ABN What was the value of the fund's total assets at the end of the year of audit? | |
| Section C: Audit firm information 6 Auditing firm details Name Firm or sole practitioner's ABN | |
| Section D: Auditor information 7 Auditor's details Auditor's name Title: Mr | name none number State/territory Postcode |
| NAT 11239-06.2019 Sensitive (when | completed) |

| Se | Section E: Contravention/s | | | |
|----|-----------------------------------|--|-----------------------|--|
| | ENT ONE | | | |
| U | | nay lead, or has led, to one or more cont | | |
| 8 | Did the event commend | ce before the audit period? Yes | No No | |
| 9 | Start date of event | / Notice / Sear | | |
| 10 | Describe the event, inc | luding any mitigating factors. | | |
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| 11 | Have all the contravent | ions been fully rectified or do the fully rectify all of them? | Yes | No 🗍 |
| 12 | | | | |
| 12 | when was this complet | completion date or, if fully rectified ed? | a,/ | |
| 13 | Describe any steps take | en to rectify the contraventions or | any planned step | s to rectify the contraventions. |
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| 14 | What sections or | | | |
| | regulations have been, or may be, | | | |
| Γ | contravened? | 15 What is the 10 maximum value | Has the contravention | 17 What is the outstanding value |
| eg | 892((2))((d)) R41.09 | of the contravention? | been fully rectified? | to be rectified |
| | | \$ | Yes No | (last known)? |
| | | \$ | Yes No | \$ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ |
| | | \$ | Yes No | \$ 1 1 1 1 1 1 1 1 1 |
| | | \$ | Yes No | \$ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ |
| | | \$ | Yes No | \$ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ |
| | | \$ | Yes No | \$ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ |
| | | \$ | Yes No | \$ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ |
| | | \$ | Yes No | \$ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ |
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| | SMSF's Australian bus | iness number (ABN) and/or tax fil | e number (TFN) | | ٦ |
|----|--|--|-------------------------|---------------------------------|-----------|
| | | TFN | | | |
| EV | An overtice compatition that | | traventions | | |
| 8 | | may lead, or has led, to one or more con | | | |
| Ŭ | | yes Worth Year Month Year | s | | |
| 9 | Start date of event | | | | |
| 10 | Describe the event, inc | cluding any mitigating factors. | | | |
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| 11 | Have all the contraven | tions been fully rectified or do the | | N- | |
| | trustees have a plan to | fully rectify all of them? | | No Year | |
| 12 | What is the estimated when was this comple | completion date or, if fully rectifie | d, Day / Mon | | |
| 13 | Control of the Contro | en to rectify the contraventions or | any planned step | s to rectify the contra | eventions |
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| 14 | What sections or regulations have | | | | |
| | been, or may be, contravened? | 10 11110110 | 6 Has the contravention | 17 What is the outstanding valu | 0 |
| eg | | maximum value of the contravention? | been fully | to be rectified | • |
| | R4.09 | \$ | rectified? | (last known)? | .00 |
| | | | | \$ | |
| | | | | | |
| | | \$ | Yes No | \$,,_ | |
| | | \$, | Yes No | \$,, | .00 |
| | | \$ | Yes No | \$,,_ | .000 |
| | | \$ | Yes No | \$ | -DQ |
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| | | \$ | Yes No | \$,,,_ | .00 |

| EVI | EVENT THREE ① An event is something that may lead, or has led, to one or more contraventions. | | | | |
|-----|--|--|-------------------------|-----------------------------------|--|
| 8 | | ce before the audit period? | | | |
| 9 | Start date of event | | | | |
| 10 | Describe the event, inc | luding any mitigating factors. | | | |
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| 44 | House all the second | | | | |
| 1.1 | trustees have a plan to | ions been fully rectified or do the fully rectify all of them? | Yes | No | |
| 12 | What is the estimated of when was this complet | completion date or, if fully rectificed? | ed, Day / Mon | th Year | |
| 13 | Describe any steps take | en to rectify the contraventions o | any planned step | os to rectify the contraventions. | |
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| 14 | What sections or | | | | |
| | regulations have been, or may be, | | | | |
| Γ | contravened? | 15 What is the maximum value | 6 Has the contravention | 17 What is the outstanding value | |
| eg | S52((2))((d)) | of the contravention? | been fully rectified? | to be rectified (last known)? | |
| | | \$ | Yes No | \$ | |
| | | \$, | Yes No | \$ | |
| | | \$, | Yes No | \$ | |
| | | \$, | Yes No | \$ | |
| | | \$ | Yes No | \$ | |
| | | \$ | Yes No | \$ | |
| | | \$ | Yes No | \$ | |
| | | \$, | Yes No | \$ □ □ , □ □ □ . ⋈ | |

| EV | EVENT FOUR | | | |
|----|-----------------------------------|--|-----------------------------|--------------------------------------|
| 0 | An event is something that m | nay lead, or has led, to one or more contr | aventions. | |
| 8 | | e before the audit period? Yes | | |
| 9 | Start date of event | | | |
| 10 | Describe the event, incl | uding any mitigating factors. | | |
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| 11 | Have all the contravent | ions been fully rectified or do the | | |
| | trustees have a plan to | fully rectify all of them? | Yes | No |
| 12 | What is the estimated of | completion date or, if fully rectified | Day Month | h Year |
| | when was this complet | ed? | | |
| 13 | Describe any steps take | en to rectify the contraventions or | any planned step | s to rectify the contraventions. |
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| 14 | What sections or | | | |
| | regulations have been, or may be, | | | |
| | contravened? | | Has the | 17 What is the |
| eg | S52(2)(d) | maximum value of the contravention? | contravention been fully | outstanding value to be rectified |
| | R4.09 | | rectified? | (last known)? |
| | | \$, | Yes No | \$, |
| | | \$, | Yes No | \$, |
| | | \$, | Yes No | \$, |
| | | \$, | Yes No | \$, |
| | | \$, | Yes No | \$, |
| | | \$,, | Yes No | \$, |
| | | \$, | Yes No | \$, |
| | | \$, | Yes No | \$, |

EVENT FIVE An event is something that may lead, or has led, to one or more contraventions. Did the event commence before the audit period? No Yes Start date of event 9 10 Describe the event, including any mitigating factors. 11 Have all the contraventions been fully rectified or do the trustees have a plan to fully rectify all of them? No Yes 12 What is the estimated completion date or, if fully rectified, Month when was this completed? 13 Describe any steps taken to rectify the contraventions or any planned steps to rectify the contraventions. 14 What sections or regulations have been, or may be, 15 What is the 16 Has the 17 What is the contravened? maximum value contravention outstanding value S 5 2 (2) (d) of the contravention? been fully to be rectified rectified? (last known)? - DQ Yes No -DQ Yes No Yes No Yes Yes No Yes No DQ Yes No DQ. Yes No

| | EVENT SIX | | | | |
|----|--|---|-----------------------|----------------------------------|--|
| | | ay lead, or has led, to one or more contr | aventions. | | |
| 8 | Did the event commenc | e before the audit period? Yes | No | | |
| 9 | Start date of event | Month Year | | | |
| 10 | Describe the event, incl | uding any mitigating factors. | | | |
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| L | | | | | |
| 11 | Have all the contraventi trustees have a plan to | ons been fully rectified or do the | Yes | No | |
| | | a so a second | Day Month | n Year | |
| 12 | when was this complete | ompletion date or, if fully rectified ed? | , [] / [[| | |
| 13 | Describe any steps take | n to rectify the contraventions or | any planned step | s to rectify the contraventions. | |
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| 14 | What sections or regulations have | | | | |
| | been, or may be, | 15 What is the | 3 Has the | 17 What is the | |
| [e | contravened? | maximum value | contravention | outstanding value | |
| | 9 992027097 R4.09777 | of the contravention? | been fully rectified? | to be rectified (last known)? | |
| Ē | | \$, | Yes No | \$, | |
| | | \$, | Yes No | \$, | |
| | | \$, | Yes No | \$, | |
| | | \$, | Yes No | \$, | |
| | | \$, | Yes No | \$, | |
| | | \$,, | Yes No | \$, | |
| | | \$, | Yes No | \$, | |
| | | \$, | Yes No | \$, | |

| Section F: Financial position | Section 130 |
|--|---------------------------|
| 18 While performing your duties, did you form the opinion that the SMSF's financial position is become unsatisfactory? | or may |
| No Yes On what information did you base your opinion? | |
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| | ection 130A |
| If you complete this part of the form you are consenting under paragraph 14ZZW(2)(e) of the Taxation Administrate for the purposes of the Whistleblower legislation, to the Commissioner disclosing your identity (if required) when use information in administering any taxation laws. If you would like to keep your identity confidential, you can make a whistleblower disclosure at ato.gov.au | using this a voluntary |
| 19 Do you want to provide any additional information about the fund or trustee/s that will help our functions under the SISA or regulations? | us perform |
| No Yes Provide details | |
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| Soction U. Auditor/octuons declaration | |
| Section H: Auditor/actuary declaration Privacy statement | |
| Taxation law authorises the ATO to collect information including personal information and to disclose it to other gragencies. For more information about your privacy go to ato.gov.au/privacy | overnment |
| Penalties | |
| Penalties may be imposed for giving false or misleading information. | |
| I declare that this report has been prepared in accordance with information supplied by the trustee/s and I advise trustee/s has been notified of the matters reported in sections E and F of this report. | that the |
| The ATO does not consider the disclosure of information in Sections E and F of the form to constitute a qualid disclosure for the purposes of the whistleblower provisions under Part IVD of the Taxation Administration Act | fying 1953. |
| Professional association code | |
| Membership number SMSF auditor number | |
| Auditor/actuary signature | |
| Date Day Month y | 'ear |
| | |
| | |
| Lodging your report | |
| Keep a copy of your completed report for your records and return the original to: Australian Taxation Office | |
| PO Box 3333 PENRITH NSW 2740 | |