

Fund income tax return

2018

Who should complete this tax return?

All superannuation funds, other than self-managed superannuation funds (SMSFs), must complete this tax return. SMSFs must complete the *Self-managed superannuation fund annual return 2018* (NAT 71226).

To complete this tax return

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

	-s must complete the Seir-managed superannuation fund character per box. S M / T H S T					
	The Fund income tax instructions 2018 (NAT 71605) the instructions) can assist you to complete this tax return. Place X in ALL applicable boxes.					
	Specify period if part year or approved substitute period. Day / Month / Year to Day / Month / Year / Month / Year approved substitute period.					
Se	etion A: Fund information					
1	To assist processing, write the fund's TFN at the top of page 3.					
	The ATO is authorised by law to request your TFN. You are not obliged to quote your TFN but not quoting it could increase the chance of delay or error in processing your tax return. See the Privacy note in the Declaration.					
2	Name of superannuation fund or trust					
3	Australian business number (ABN) (if applicable)					
4	Current postal address					
Subu	JUNE State/territory Postcode					
	Tax return status s this an amendment to the fund's 2018 tax return? No Yes					
	Frustee details					
Non-	ndividual trustee's name (if applicable)					
ABN	of non-individual trustee					
7 Electronic funds transfer (EFT) We need your financial institution details to pay any refund owing to you, even if you have provided them to us before. Write the BSB number, account number and account name below. (See relevant instructions.)						
	number (must be six digits) Left name					
8	Status of fund or trust Type of fund or trust – Print I in one box only.					
	Small APRA fund A Retail fund B Industry fund C Corporate fund D Eligible rollover fund					
	Approved deposit fund F Pooled G Public sector fund H Non-regulated fund I					
	Australian J No Yes Fund benefit structure K Code Number of members L					

Date of establishment

Significant global entity N

9 Was the fund wound up during the income year?	Yes If yes, provide the date on which the fund was wound up If yes, provide the date on which the fund was wound up		
Section B: Income 10 Income Did you have a capital gains (CGT) event during the younger than the property of the property	rear? The last the deferred notional gain has been realised, complete and attach a Capital gains tax (CGT) schedule 2018.	and te	
Have you applie exemption or rollo	od an M No Yes Code		
	Net capital gain A\$, , , , , , , , , , , , , , , , , ,		
Gross rent and	other leasing and hiring income B \$,		
	Gross interest C\$, , , , , , , , , , , , , , , , , ,		
Gross foreign income	Forestry managed investment scheme income X \$,,		
D1 \$	Net foreign income D\$,,,	oss	
Australian franking credits	s from a New Zealand company E \$		
	Transfers from foreign funds	mber	
	Gross payments where ABN not quoted H \$		
Calculation of assessable contributi Assessable employer contribution	Gross distribution • • The state of the stat	oss	
R1 \$,	*Unfranked dividend amount J \$		
plus Assessable personal contributions R2 \$	*Franked dividend amount K \$,,		
plus #*No-TFN-quoted contributions	*Dividend franking credit L\$		
R3 \$			
less Contributions excluded by trustee	*Trust distributions franked amount • \$,		
less Pre 1 July 1988 funding credits	*Trust distributions franking credit P\$,,,		
R5 \$,,,	*Trust distributions other amounts Q \$,		
R6 \$, , , , , , , , , , , , , , , , , ,	Assessable contributions (R1 plus R2 plus R3 less R4 less R5 less R6)		
	Foreign exchange gains G \$,	ode	
	Other income S\$, , , , , , , , , , , , , , , , , ,	Due	
*Assessable income due to changed tax status of fund T \$,			
Net non-arm's length in	ncome (subject to 45% tax rate) U\$,		
#This is a mandatory label.	GROSS INCOME W \$	SS	
*If an amount is entered at this label, check the instructions to ensure the correct tax treatment	pt current pension income Y \$		
has been applied	SSESSABLE INCOME (W less Y) V \$,,,	ss	

Г	Fund's ta	x file number (TFN)		
Section C: Deduc	tions			
11 Deductions	Interest expenses within Australia	A \$	· %	
	Interest expenses overseas	B \$,	· %	
	Salary and wages	c \$,	· M	7
	Capital works deductions	D \$	· %	128707
Deduction for o	lecline in value of depreciating assets	E \$	· %	718
	Death or disability premiums	F \$	-∞	
	Death benefit increase	G \$,	· %	
	Investment expenses	I \$	-∞	
	Management expenses	J \$	-∞	
	Administration expenses	Q \$	-∞	
Forestry ma	naged investment scheme deduction	U \$,	· %	
	Foreign exchange losses	R \$	-∞	Ocale
	Other deductions L	\$ _,,]•∞	Code
	Tax losses deducted	M \$,	· %	
	TOTAL DEDUCTIONS N \$]· %	
	XABLE INCOME OR LOSS OME less TOTAL DEDUCTIONS) • \$		·×	Loss

*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.

12 Calculation statement	
Please refer to the Fund income	#Taxable income A\$
tax return instructions 2018 on	(an amount must be included even if it is zero)
how to complete the calculation statement.	#Tax on taxable income T1 \$,
State Horit.	#Tax on (an amount must be included even if it is zero)
	no-TFN-quoted J \$
	contributions (an amount must be included even if it is zero)
Foreign income tax offset	Gross tax B \$
C1 \$ C1	(T1 plus J)
	Non-refundable non-carry forward tax offsets
Rebates and tax offsets	- C \$
C2 \$	
	(C1 plus C2)
	SUBTOTAL 1 T2 \$
Early stage venture capital limite partnership tax offset	(B less C – cannot be less than zero)
D1 \$ DD	1. (2 1000 3 Cannot be 1000 than 2010)
Early stage venture capital limite	
partnership tax offset carried	
forward from previous year	
D2 \$	J·
Early stage investor tax offset	Non-refundable carry forward tax offsets
D3 \$	-
Early stage investor tax offset	(D1 plus D2 plus D3 plus D4)
carried forward from previous ye	
D4 \$,,]- SUBTOTAL 2 T3 \$,,
	(T2 less D – cannot be less than zero)
Complying fund's franking credits	tay offset
E1 \$	
No-TFN tax offset	Refundable tax offsets
E2 \$	- E \$
National rental affordability scheme	
	(ET plus EZ plus E3 plus E4)
E3 \$	J*L_ L_ #TAY + [-][-] [-][-][-][-][-][-][-][-][-][-][-][-][-][
Exploration credit tax offset	*TAX T5 \$,
E4 \$, ,	(T3 less E – cannot be less than zero)
	Section 102AAM interest charge
#This is a mandatany label	
#This is a mandatory label.	G \$ _ _ , _ _ _ , _ _

_							
	H1 \$	Credit for interest on early payments – amount of interest Credit for tax withheld – foreign resident withholding (excluding capital gains)	Eligible credits H\$, , , , , , , , , , , , , , , , , , ,				
	H2 \$	Credit for tax withheld – where ABN or TFN not quoted (non-individual)	#Tax offset refunds (Remainder of refundable tax offsets) I \$,,,,				
	H5 \$	payments from closely held trusts Credit for interest on no-TFN tax offset	PAYG instalments raised K \$,				
	H6 \$	Credit for foreign resident capital gains withholding amounts	AMOUNT DUE OR REFUNDABLE A positive amount at S is what you owe, while a negative amount is refundable to you. S \$				
	#This is	a mandatory label.					
13	Losse: If total I	oss is greater than \$100,000, the and attach a <i>Losses</i> let 2018.	ax losses carried forward to later income years V\$, , , , , , , , , , , , , , , , , ,				
	Section F: Other information 14 Foreign income and net assets						
	Attrib	uted foreign income	Listed country A \$				
		Net assets available to pay ber	nefits F \$				

15	Has the fund or trust, with consent of the transferee, transferred assessable contributions under section 295-260 to a life insurance company or pooled superannuation trust?				
	A No Yes Show the name and ABN of each transferee, the amount of contributions transferred to each and the market value of the transferor's investment in each. Where there are more than two transferees,				
Nam	provide details of the two transferees that have the greatest market value.				
Ш					
	ABN				
Amc	bunt B\$,, Market value C\$,, S				
Nam					
	ABN DE LE				
Amo	ount D \$,,				
Inve	estment in any other life insurance policies or pooled superannuation trusts				
	Total market value of these investments F \$,				
16	Taxation of financial arrangements (TOFA)				
	Total TOFA gains H\$□,□□□,□□□,□□□·≫				
	Total TOFA losses				
17	Overseas transaction or interest and foreign source income				
	International related party dealings and transfer pricing Did the fund have any transactions or dealings with international related parties, irrespective of whether they were on revenue or capital account? Such transactions or dealings include the transfer of tangible or intangible property and any new or existing financial arrangements.				
	Was the aggregate amount of the transactions or dealings with international related parties (including the value of property transferred or the balance outstanding on any loans) greater than \$2 million?				
	Overseas interests Did the fund have an overseas branch or a direct or indirect interest in a foreign trust, foreign company, controlled foreign entity or transferor trust? C No Yes				
	Foreign source income Was the amount of foreign income tax paid greater than \$100,000 OR was the amount of assessable foreign income greater than \$500,000? Yes				
	Transactions with specified countries Did the fund directly or indirectly send to, or receive from, one of the countries specified in the instructions, any funds or property? OR E No Yes				
	Does the fund have the ability or expectation to control, whether directly or indirectly, the disposition of any funds, property, assets or investments located in, or located elsewhere but controlled or managed from, one of those countries?				

Exempt current pension income If the fund has claimed an amount of exempt current pension income in respect of any pensions other than those prescribed by Income Tax Regulations where assets are fully segregated for all of the income year, has the trustee obtained the relevant actuary's certificate required by section 295-385 or 295-390 before exemption can be claimed?	A No		Yes	
Death or disability deduction Is the fund or trust claiming a deduction for premiums for death or disability cover under section 295-465 that requires an actuary's certificate to be obtained?	B No		Yes	
If yes, has the fund or trust obtained the relevant certificate?	C No		Yes	
Payments to contributing employers and associates Has the fund or trust made a payment or transferred a benefit that is included in the assessable	D No		Yes	
income of the recipient under section 290-100?				
Section G: Declarations				
Penalties may be imposed for false or misleading information in addition to penalties relating to any tax	shortfalls			
defore making this declaration check to ensure that all income has been disclosed and the tax return, all attainly additional documents are true and correct in every detail. If you leave labels blank, you will have specified the label was not applicable to you. If you are in doubt about any aspect of the tax return, place all the facts been all the facts been detailed by the Taxation Administration Act 1953 to request the provision of tax file numbers (The TFN to identify the entity in our records. It is not an offence not to provide the TFN. However if you do not not processing of this form may be delayed. Taxation law authorises the ATO to collect information and disclose it to other government agencies. For informacy go to ato.gov.au/privacy	d a zero a pefore the FNs). We t provide	amount e ATO. e will us the TF	se N,	
RUSTEE'S, DIRECTOR'S OR PUBLIC OFFICER'S DECLARATION DECLARATION: declare that the information on this tax return, including any attached schedules and additional documentation 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	Month /		correct.	
Date / _				١
Preferred trustee, director or public officer's contact details: itle: Mr Mrs Miss Ms Other Miss Ms Other Ms				
irst given name Other given names				7
rhone number DDDDDDDDDDDDDDDDDDDDDDDDDDDDDDDDDDDD				_
Hrs Time taken to prepare and complete this tax return				J
The Commissioner of Taxation, as Registrar of the Australian Business Register, may use the ABN and which you provide on this tax return to maintain the integrity of the register. For further information, refer				

18 Other transactions

TAX AGENT'S DECLARATION:	
I declare that the tax return has been prepared in accordance with information provided given me a declaration stating that the information provided to me is true and correct, at to lodge the tax return.	
Tax agent's signature	
	Day Month Year Date / / / / / / / / / / / / / / / / / / /
Tax agent's contact details	

	Date	Day	Month] / 🔲	Year	
Tax agent's contact details						
Title: Mr Mrs Miss Ms Other						
Family name						
First given name Other given names			_			
Tax agent's practice						
Tax agent's phone number Reference number		Ta	x agent nui	mber		
Postal address for tax returns: Australian Taxation Office, GPO Box 9845, IN YOUR CAPITAL CITY						