

Ancillary fund return 2024

lodging of your return.

Specify period if part year or approved substitute period

Day	Month	Year		Day	Month	Year
	/ /		to			
Any	substituted	accounting per	riod m	ust be ap	proved by	the ATO before

Do not complete this form if your ancillary fund is a registered charity.

Who should complete this form

Complete this form if your ancillary fund is NOT registered with the Australian Charities and Not-for-profits Commission (ACNC).

Registered charities should not complete this form but are required to answer some additional questions when completing the ACNC's annual information statement. The ACNC annual information statement is the approved ancillary fund return for registered charities and the ACNC will provide ATO with the relevant data.

When completing this form

Use the <u>Ancillary fund return instructions 2024</u> (instructions) available on our website at <u>ato.gov.au</u> when completing this form.

See the privacy note at **Completing and lodging the return** in the instructions for further information.

The guidelines referred to are the Public ancillary fund guidelines 2022 for public ancillary funds and the Private ancillary fund guidelines 2019 for private ancillary funds.

This form should be used for the 2024 reporting year only. If you need to lodge a return for an earlier year please download and complete the form for that year from the ATO website.

S	ection A: Fund information
1	Name of fund
2	Australian business number (ABN) of fund
	Information is collected for the purposes of the A New Tax System (Australian Business Number) Act 1999 and may be used to update your details on the Australian Business Register. See the privacy note at Completing and lodging the return in the instructions for further information.
3	Address for notices
	Suburb or town State/territory Postcode
4	Email address

Trustee details

	the trustee is a constitutional corporation show ame	details here	
	ustralian Company Number, association umber or incorporation number		
Tax	x file number (TFN)		
1	We are authorised by the <i>Taxation Administration Act 19</i> lodging the return in the instructions for further informations.	53 to collect your TFN. See the tion.	privacy note at Completing and
Da	aytime contact phone number		
lf :	the trustee is an individual show details here		
Titl Far	le: Mr Mrs Miss Ms Other		
Firs	st given name C	other given name/s	
		and grannand	
TF	N		
1	We are authorised by the <i>Taxation Administration Act 19</i> lodging the return in the instructions for further informations.		privacy note at Completing and
Da	aytime contact phone number		
Sect	tion B: Donations received		
Do	onations received		
Ca	ash received	A \$	·×
Va	lue of shares in publicly listed entities received	B \$	·×
Va	lue of shares in unlisted entities received	C \$	· %
	ombined value of collectibles, land, buildings and other operty received	D \$	·×
То	tal value of donations received (total of labels A to D)	E \$	· %

3 Income		
Do not include donations received at this qu	estion. Donations received should	be reported at question 7.
Gross income (includes interest, dividends, franking rent and other leasing and hiring income, distributio a trust, and other gross income)		·×
Net gain on the disposal of assets	B \$	·×
Total income (label A plus label B)	C \$	·×
9 Expenses		
Do not include distributions made at this qu	estion. Distributions made should	be reported at question 11.
Salary	D \$	·×
Other expenses (includes rent, management, admir valuation fees, audit fees, and other expenses)	nistration, E \$	·×
Total expenses (label D plus label E)	F \$	·×
0 Net income		
Total net income/loss (label C less label F)	G \$	·×
Section D: Distributions made		

① Combine all distributions made to the same recipient. If there is still insufficient space, use an extra Section D page.

11 Distributions made

A	В	C	D
Name of recipient	ABN of recipient	Money distributed	Market value of property distributed
		\$	\$
		\$	\$
		\$	\$
		\$	\$
		\$	\$
		\$	\$
		\$	\$
		\$	\$
		\$	\$
		\$	\$
		\$	\$
		\$	\$
		\$	\$
		\$	\$
		\$	\$
		\$	\$

Total value of distributions made (total of all C and D amounts)	E \$	·×
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Section E: Market value of the fund's net assets at the end of the

financial year 12 Assets

	Cash and term deposits	A	\$ 3	·×
	Listed shares	В	\$	·×
	Unlisted shares and managed funds	C	\$ 3	·×
	Loans	D	\$	-><
	Land, buildings and any other assets	Е	\$	·×
	Total market value of the fund's gross assets at the end of the financial year (total of labels A to E)	F	\$ 3	·×
13	Liabilities			
	Borrowings	G	\$ 3	·×
	Other liabilities	Н	\$	·×
	Total liabilities at the end of the financial year (label G plus label H)	I	\$ 3	·×
14	Market value of the fund's net assets Market value of the fund's net assets at the end of the financial year (label F less label I)	J	\$;	·×

Section F: Information relating to entitlement to endorsement Have the fund's financial statements been audited or reviewed? Yes Has the Commissioner been advised of any changes to the fund's governing rules? Yes Has the fund entered into a financial dealing with a person or entity associated with the founder or Yes trustees of the fund? Has the fund's auditor or reviewer confirmed compliance with the ancillary fund guidelines relating to Yes the relevant reporting period? Does the fund maintain a current written investment strategy? Yes Did the fund wind up or cease to be a public or private ancillary fund? Yes

Defends the polygon pate of Completing and Indeed	
Heier to the privacy note at Completing and loagi	ng the return in the instructions for further information.
This declaration must be signed by a trustee, director of	or public officer authorised to sign on behalf of the trustee.
Declaration I declare that the information in this return is true and co	orrect.
Name of signatory	
Position held	
Signature of authorised trustee or director or public	cofficer Date
	Day Month Year
Tax agent's declaration	
	ce with the information provided by the trustee, that the trustee has given me a true and correct, and that the trustee has authorised me to lodge this return.
declaration stating that the information provided to me is	
declaration stating that the information provided to me is Contact name	
declaration stating that the information provided to me is Contact name	true and correct, and that the trustee has authorised me to lodge this return.
declaration stating that the information provided to me is Contact name Tax agent's phone number (include area code) Tax	true and correct, and that the trustee has authorised me to lodge this return.

How to lodge this form

Section G: Declarations

Send the completed form by the lodgment due date to:

Australian Taxation Office GPO Box 9845 [insert the name and postcode of your capital city]

For example:

Australian Taxation Office GPO Box 9845 SYDNEY NSW 2001