



Ancillary fund return 2016

Specify period if part year or approved substitute period

Day / Month / Year to Day / Month / Year
 / / to / /

! Any substituted accounting period must be approved by the ATO before lodging of your return.

WHO SHOULD COMPLETE THIS FORM

This form should be completed only by public and private ancillary funds that are NOT registered as a charity with the Australian Charities and Not-for-profits Commission (ACNC). Generally registered charities are no longer required to complete this document but instead will be 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 ACNC will provide ATO with the relevant data.

WHEN COMPLETING THIS FORM

Use the *Ancillary fund return instructions 2016* (instructions) available on our website at ato.gov.au 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 2011* as amended in May 2016 for public ancillary funds and the *Private ancillary fund guidelines 2009* as amended in May 2016 for private ancillary funds.

! Please note the question numbering may have changed from previous returns as the number of questions has been reduced.

HOW TO COMPLETE THIS FORM

- Read the instructions on how to complete this form.
- You may type directly into this form before printing, or you may print the form and write the information.
- If typing, check you can save a copy of the completed form to your computer by entering text into the first field, save and close the file, then re-open it to check the text you entered is displayed.
- If you cannot save the form, print a completed copy before you close it.
- If writing, use BLOCK LETTERS.
- Place **X** in **all** applicable boxes.
- Show whole dollars only, do not show cents.
- Print and sign the form.

Section 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

5 If the trustee is a constitutional corporation show details here

Name

Australian Company Number, association number or incorporation number

Tax file number (TFN)

 We are authorised by the *Taxation Administration Act 1953* to collect your TFN. See the privacy note at **Completing and lodging the return** in the instructions for further information.

Daytime contact phone number

6 If the trustee is an individual show details here


Title: Mr Mrs Miss Ms Other

Family name

First given name

Other given name/s

TFN

 We are authorised by the *Taxation Administration Act 1953* to collect your TFN. See the privacy note at **Completing and lodging the return** in the instructions for further information.

Daytime contact phone number

Section B: Donations received

7 Donations received

Cash received **A** \$ ~~·X~~

Value of shares in publicly listed entities received **B** \$ ~~·X~~

Value of shares in unlisted entities received **C** \$ ~~·X~~

Combined value of collectibles, land, buildings and other property received **D** \$ ~~·X~~

Total value of donations received (total of labels A to D) **E** \$ ~~·X~~

Section E: Market value of the fund's net assets at the end of the financial year

12 Assets

Cash and term deposits	A \$	<input type="text"/>	·X
Listed shares	B \$	<input type="text"/>	·X
Unlisted shares and managed funds	C \$	<input type="text"/>	·X
Loans	D \$	<input type="text"/>	·X
Land, buildings and any other assets	E \$	<input type="text"/>	·X
Total market value of the fund's gross assets at the end of the financial year (total of labels A to E)	F \$	<input type="text"/>	·X

13 Liabilities

Borrowings	G \$	<input type="text"/>	·X
Other liabilities	H \$	<input type="text"/>	·X
Total liabilities at the end of the financial year (total of labels G to H)	I \$	<input type="text"/>	·X

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 \$	<input type="text"/>	·X
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Section F: Information relating to entitlement to endorsement

A	Have the fund's financial statements been audited or reviewed?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
B	Has the Commissioner been advised of any changes to the fund's governing rules?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
C	Has the fund entered into a financial dealing with a person or entity associated with the founder or trustees of the fund?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
D	Has the fund's auditor or reviewer confirmed compliance with the ancillary fund guidelines relating to the relevant reporting period?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
E	Does the fund maintain a current written investment strategy?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
F	Did the fund wind up or cease to be a public or private ancillary fund?	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Section G: Declarations

! Penalties may be imposed for giving false or misleading information. In addition, penalties may be imposed for non-compliance with the *Public ancillary fund guidelines* or the *Private ancillary fund guidelines*.

> Refer to the privacy note at **Completing and lodging the return** in the instructions for further information.

This declaration must be signed by a trustee, director or public officer authorised to sign on behalf of the trustee.

DECLARATION

I declare that the information in this return is true and correct.

Name of signatory

Position held

Signature of authorised trustee or director or public officer

Date

Day Month Year
□□ / □□ / □□□□

TAX AGENT'S DECLARATION

I declare that this return has been prepared in accordance with the information provided by the trustee, that the trustee has given me a declaration stating that the information provided to me is true and correct, and that the trustee has authorised me to lodge this return.

Contact name

Tax agent's phone number (include area code)

Tax agent's reference number

Client's reference

Signature

Date

Day Month Year
□□ / □□ / □□□□

How to lodge this form

Send the completed form by the lodgment due date to:

Australian Taxation Office
GPO Box 9845
IN YOUR CAPITAL CITY

The address must appear as shown above.