Australian Government
Australian Taxation Office

Self managed superannuation fund annual return 2008

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 2008* (NAT 71287).

The *Self managed superannuation fund annual return 2008 instructions* (NAT 71606) (the instructions) can assist you to complete this annual return.

TO COMPLETE THIS ANNUAL RETURN

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

S M I T H S T

- Print X in ALL applicable boxes.

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Section A: **Fund information**

To assist processing, **write the fund's TFN at the top of pages 3 and 5.**

1 Tax file number (TFN)

The Tax Office 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 annual return.

2 Name of self managed superannuation fund (SMSF)

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 2008 annual return? **No** ☐ **Yes** ☐

6 Fund auditor

Auditor's name

Title: Mr ☐ Mrs ☐ Miss ☐ Ms ☐ Other

Family name

First given name | Other given names

Professional body ☐ Code | Membership number | Auditor's phone number

Postal address

Suburb/town | State/territory | Postcode

Date audit was completed **A** Day / Month / Year

Was the audit report qualified? **B** **No** ☐ **Yes** ☐

7 Electronic funds transfer (EFT)

Do you want to use EFT for any tax refunds related to this annual return? **No** ☐ **Yes** ☐ Complete financial institution details below.

BSB code (Include all six numbers.) | Account number

Full account name

8 Status of SMSF Australian superannuation fund **A** No ☐ Yes ☐ Fund benefit structure **B** ☐ Code

Does the fund trust deed allow acceptance of the Government's Super Co-contributions? **C** No ☐ Yes ☐

9 Was the fund wound up during the income year?

No ☐ Yes ☐ Date on which the fund was wound up Day ☐☐ / Month ☐☐ / Year ☐☐☐☐ Have all tax lodgment and payment obligations been met? No ☐ Yes ☐

Section B: **Income**

10 Income

Did you have a capital gains tax (CGT) event during the year? **G** No ☐ Yes ☐ If the total capital loss or total capital gain is greater than $10,000 complete and attach a *Capital gains tax (CGT) schedule 2008*.

Did the CGT event relate to a forestry managed investment scheme interest that you held other than as an initial participant? **Z** No ☐ Yes ☐ You must complete and attach a *Capital gains tax (CGT) schedule 2008*.

Net capital gain **A** $ ☐☐☐,☐☐☐,☐☐☐·✕

Gross rent and other leasing and hiring income **B** $ ☐☐☐,☐☐☐,☐☐☐·✕

Gross interest **C** $ ☐☐☐,☐☐☐,☐☐☐·✕

Forestry managed investment scheme income **X** $ ☐☐☐,☐☐☐,☐☐☐·✕

Gross foreign income **D1** $ ☐☐☐,☐☐☐,☐☐☐·✕

Net foreign income **D** $ ☐☐☐,☐☐☐,☐☐☐·✕

Australian franking credits from a New Zealand company **E** $ ☐☐☐,☐☐☐,☐☐☐·✕

Transfers from foreign funds **F** $ ☐☐☐,☐☐☐,☐☐☐·✕ Number ☐☐☐

Gross payments where ABN not quoted **H** $ ☐☐☐,☐☐☐,☐☐☐·✕

Gross distribution from partnerships **I** $ ☐☐☐,☐☐☐,☐☐☐·✕ Loss ☐

*Unfranked dividend amount **J** $ ☐☐☐,☐☐☐,☐☐☐·✕

*Franked dividend amount **K** $ ☐☐☐,☐☐☐,☐☐☐·✕

*Dividend franking credit **L** $ ☐☐☐,☐☐☐,☐☐☐·✕

*Gross trust distributions **M** $ ☐☐☐,☐☐☐,☐☐☐·✕ Code ☐

Calculation of assessable contributions

Assessable employer contributions **R1** $ ☐☐☐,☐☐☐,☐☐☐·✕

plus Assessable personal contributions **R2** $ ☐☐☐,☐☐☐,☐☐☐·✕

plus *No TFN quoted contributions **R3** $ ☐☐☐,☐☐☐,☐☐☐·✕

less Transfer of liability to life insurance company or PST **R6** $ ☐☐☐,☐☐☐,☐☐☐·✕

Assessable contributions (**R1** *plus* **R2** *plus* **R3** *less* **R6**) **R** $ ☐☐☐,☐☐☐,☐☐☐·✕

Calculation of non-arm's length income

*Net non-arm's length private company dividends **U1** $ ☐☐☐,☐☐☐,☐☐☐·✕

plus *Net non-arm's length trust distributions **U2** $ ☐☐☐,☐☐☐,☐☐☐·✕

plus *Net other non-arm's length income **U3** $ ☐☐☐,☐☐☐,☐☐☐·✕

*Other income **S** $ ☐☐☐,☐☐☐,☐☐☐·✕ Code ☐

*Assessable income due to changed tax status of fund **T** $ ☐☐☐,☐☐☐,☐☐☐·✕

Net non-arm's length income (subject to 45% tax rate) (**U1** *plus* **U2** *plus* **U3**) **U** $ ☐☐☐,☐☐☐,☐☐☐·✕

TOTAL ASSESSABLE INCOME **V** $ ☐☐☐,☐☐☐,☐☐☐·✕ Loss ☐

*If an amount is entered at this label, check the instructions to ensure the correct tax treatment has been applied.

IN-CONFIDENCE – when completed

Place your attachments here.

Fund's tax file number (TFN)

Section C: **Deductions**

11 Deductions

Exempt current pension income	**K**	$
Interest expenses within Australia	**A**	$
Interest expenses overseas	**B**	$
Capital works deductions	**D**	$
Deduction for decline in value of depreciating assets	**E**	$
Death or disability premiums	**F**	$
Death benefit increase	**G**	$
Approved auditor fee	**H**	$
Investment expenses	**I**	$
Management and administration expenses	**J**	$
Forestry managed investment scheme deduction	**U**	$
Other deductions	**L**	$
Tax losses deducted	**M**	$
TOTAL DEDUCTIONS	**N**	$
TAXABLE INCOME OR LOSS (**TOTAL ASSESSABLE INCOME** *less* **TOTAL DEDUCTIONS**)	**O**	$

Code

Loss

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Section D: **Income tax calculation statement**

12 Income tax calculation statement

Taxable income	**A**	$
Gross tax	**B**	$
Rebates, offsets, foreign credits (**C1** *plus* **C2**)	**C**	$
SUBTOTAL (**B** *less* **C**) (Cannot be less than zero)	**D**	$
Section 102AAM interest charge	**E**	$
Eligible credits (**F1** *plus* **F2** *plus* **F3** *plus* **F4**)	**F**	$
PAYG instalments raised	**G**	$
Supervisory levy	**H**	$ 150.00
TOTAL AMOUNT DUE OR REFUNDABLE (**D** *plus* **E** *less* **F** *less* **G** *plus* **H**)	**I**	$

Credit: foreign tax credit
C1 $

plus Credit: rebates and tax offsets
C2 $

Credit: interest on early payments
F1 $

plus Credit: foreign resident withholding
F2 $

plus Credit: ABN/TFN not quoted (non-individual)
F3 $

plus Credit: refundable franking credits
F4 $

Section E: **Losses**

13 Losses

If total loss is greater than $100,000, or there is a foreign loss, complete and attach a *Losses schedule 2008*.

Tax losses carried forward to later income years	**U**	$
Net capital losses carried forward to later income years	**V**	$

Section F: **Member information**

Report all members at 30 June 2008 including those who didn't receive any contributions.

Do not use this section for:
- deceased members
- members in excess of the four-member SMSF limit at **30 June 2008**. Report these members in **Section G: Supplementary member information**.

Do not report former members who have exhausted all their entitlements, for example, through lump sum or income stream, or who rolled over all their contributions to another fund.

MEMBER 1

Title: Mr ☐ Mrs ☐ Miss ☐ Ms ☐ Other ☐☐☐☐☐☐☐☐☐☐☐☐☐

Family name

First given name

Other given names

Member's TFN ☐☐☐ ☐☐☐ ☐☐☐ **Date of birth** Day ☐☐ / Month ☐☐ / Year ☐☐☐☐

Contributions

Employer contributions	**A**	$ ☐,☐☐☐,☐☐☐.☐☐
ABN of principal employer	**A1**	☐☐ ☐☐☐ ☐☐☐ ☐☐☐
Personal contributions	**B**	$ ☐,☐☐☐,☐☐☐.☐☐
CGT small business retirement exemption	**C**	$ ☐,☐☐☐,☐☐☐.☐☐
CGT small business 15-year exemption amount	**D**	$ ☐,☐☐☐,☐☐☐.☐☐
Personal injury election	**E**	$ ☐,☐☐☐,☐☐☐.☐☐
Spouse and child contributions	**F**	$ ☐,☐☐☐,☐☐☐.☐☐
Other family and friend contributions	**G**	$ ☐,☐☐☐,☐☐☐.☐☐
Directed termination (taxable component) payments	**H**	$ ☐,☐☐☐,☐☐☐.☐☐
Assessable foreign superannuation fund amount	**I**	$ ☐,☐☐☐,☐☐☐.☐☐
Non-assessable foreign superannuation fund amount	**J**	$ ☐,☐☐☐,☐☐☐.☐☐
Transfer from reserve: assessable amount	**K**	$ ☐,☐☐☐,☐☐☐.☐☐
Transfer from reserve: non-assessable amount	**L**	$ ☐,☐☐☐,☐☐☐.☐☐
Any other contributions (including Super Co-contributions)	**M**	$ ☐,☐☐☐,☐☐☐.☐☐
TOTAL CONTRIBUTIONS	**N**	$ ☐,☐☐☐,☐☐☐.☐☐

Other transactions

Allocated earnings or losses	**O**	$ ☐☐,☐☐☐,☐☐☐.☐☐	Loss ☐
Inward rollover amounts	**P**	$ ☐☐,☐☐☐,☐☐☐.☐☐	
Outward rollover amounts	**Q**	$ ☐☐,☐☐☐,☐☐☐.☐☐	
Benefit payments and code	**R**	$ ☐☐,☐☐☐,☐☐☐.☐☐	Code ☐
CLOSING ACCOUNT BALANCE	**S**	$ ☐☐,☐☐☐,☐☐☐.☐☐	

IN-CONFIDENCE – when completed

Fund's tax file number (TFN)

Report all members at 30 June 2008 including those who didn't receive any contributions.

Do not use this section for:
- deceased members
- members in excess of the four-member SMSF limit at **30 June 2008**. Report these members in **Section G: Supplementary member information**.

Do not report former members who have exhausted all their entitlements, for example, through lump sum or income stream, or who rolled over all their contributions to another fund.

MEMBER 2

Title: Mr Mrs Miss Ms Other

Family name

First given name

Other given names

Member's TFN

Date of birth Day / Month / Year

Contributions

Employer contributions	A	$
ABN of principal employer	A1	
Personal contributions	B	$
CGT small business retirement exemption	C	$
CGT small business 15-year exemption amount	D	$
Personal injury election	E	$
Spouse and child contributions	F	$
Other family and friend contributions	G	$
Directed termination (taxable component) payments	H	$
Assessable foreign superannuation fund amount	I	$
Non-assessable foreign superannuation fund amount	J	$
Transfer from reserve: assessable amount	K	$
Transfer from reserve: non-assessable amount	L	$
Any other contributions (including Super Co-contributions)	M	$
TOTAL CONTRIBUTIONS	**N**	$

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Other transactions

Allocated earnings or losses	O	$ Loss
Inward rollover amounts	P	$
Outward rollover amounts	Q	$
Benefit payments and code	R	$ Code
CLOSING ACCOUNT BALANCE	**S**	$

Report all members at 30 June 2008 including those who didn't receive any contributions.

Do not use this section for:
- deceased members
- members in excess of the four-member SMSF limit at **30 June 2008**. Report these members in **Section G: Supplementary member information**.

Do not report former members who have exhausted all their entitlements, for example, through lump sum or income stream, or who rolled over all their contributions to another fund.

MEMBER 3

Title: Mr ☐ Mrs ☐ Miss ☐ Ms ☐ Other ☐☐☐☐☐☐☐☐☐☐☐☐☐

Family name

First given name

Other given names

Member's TFN ☐☐☐ ☐☐☐ ☐☐☐ **Date of birth** Day ☐☐ / Month ☐☐ / Year ☐☐☐☐

Contributions

Employer contributions	**A**	$ ☐,☐☐☐,☐☐☐.☐☐
ABN of principal employer	**A1**	☐☐ ☐☐☐ ☐☐☐ ☐☐☐
Personal contributions	**B**	$ ☐,☐☐☐,☐☐☐.☐☐
CGT small business retirement exemption	**C**	$ ☐,☐☐☐,☐☐☐.☐☐
CGT small business 15-year exemption amount	**D**	$ ☐,☐☐☐,☐☐☐.☐☐
Personal injury election	**E**	$ ☐,☐☐☐,☐☐☐.☐☐
Spouse and child contributions	**F**	$ ☐,☐☐☐,☐☐☐.☐☐
Other family and friend contributions	**G**	$ ☐,☐☐☐,☐☐☐.☐☐
Directed termination (taxable component) payments	**H**	$ ☐,☐☐☐,☐☐☐.☐☐
Assessable foreign superannuation fund amount	**I**	$ ☐,☐☐☐,☐☐☐.☐☐
Non-assessable foreign superannuation fund amount	**J**	$ ☐,☐☐☐,☐☐☐.☐☐
Transfer from reserve: assessable amount	**K**	$ ☐,☐☐☐,☐☐☐.☐☐
Transfer from reserve: non-assessable amount	**L**	$ ☐,☐☐☐,☐☐☐.☐☐
Any other contributions (including Super Co-contributions)	**M**	$ ☐,☐☐☐,☐☐☐.☐☐
TOTAL CONTRIBUTIONS	**N**	$ ☐,☐☐☐,☐☐☐.☐☐

Other transactions

Allocated earnings or losses	**O**	$ ☐☐,☐☐☐,☐☐☐.☐☐	Loss ☐
Inward rollover amounts	**P**	$ ☐☐,☐☐☐,☐☐☐.☐☐	
Outward rollover amounts	**Q**	$ ☐☐,☐☐☐,☐☐☐.☐☐	
Benefit payments and code	**R**	$ ☐☐,☐☐☐,☐☐☐.☐☐	Code ☐
CLOSING ACCOUNT BALANCE	**S**	$ ☐☐,☐☐☐,☐☐☐.☐☐	

IN-CONFIDENCE – when completed

Report all members at 30 June 2008 including those who didn't receive any contributions.

Do not use this section for:
- deceased members
- members in excess of the four-member SMSF limit at **30 June 2008**. Report these members in **Section G: Supplementary member information**.

Do not report former members who have exhausted all their entitlements, for example, through lump sum or income stream, or who rolled over all their contributions to another fund.

MEMBER 4

Title: Mr ☐ Mrs ☐ Miss ☐ Ms ☐ Other ☐☐☐☐☐☐☐☐☐☐☐☐☐

Family name

First given name

Other given names

Member's TFN ☐☐☐ ☐☐☐ ☐☐☐ **Date of birth** Day ☐☐ / Month ☐☐ / Year ☐☐☐☐

Contributions

Employer contributions	**A**	$ ☐,☐☐☐,☐☐☐.☐☐
ABN of principal employer	**A1**	☐☐ ☐☐☐ ☐☐☐ ☐☐☐
Personal contributions	**B**	$ ☐,☐☐☐,☐☐☐.☐☐
CGT small business retirement exemption	**C**	$ ☐,☐☐☐,☐☐☐.☐☐
CGT small business 15-year exemption amount	**D**	$ ☐,☐☐☐,☐☐☐.☐☐
Personal injury election	**E**	$ ☐,☐☐☐,☐☐☐.☐☐
Spouse and child contributions	**F**	$ ☐,☐☐☐,☐☐☐.☐☐
Other family and friend contributions	**G**	$ ☐,☐☐☐,☐☐☐.☐☐
Directed termination (taxable component) payments	**H**	$ ☐,☐☐☐,☐☐☐.☐☐
Assessable foreign superannuation fund amount	**I**	$ ☐,☐☐☐,☐☐☐.☐☐
Non-assessable foreign superannuation fund amount	**J**	$ ☐,☐☐☐,☐☐☐.☐☐
Transfer from reserve: assessable amount	**K**	$ ☐,☐☐☐,☐☐☐.☐☐
Transfer from reserve: non-assessable amount	**L**	$ ☐,☐☐☐,☐☐☐.☐☐
Any other contributions (including Super Co-contributions)	**M**	$ ☐,☐☐☐,☐☐☐.☐☐
TOTAL CONTRIBUTIONS	**N**	$ ☐,☐☐☐,☐☐☐.☐☐

Other transactions

Allocated earnings or losses	**O**	$ ☐☐,☐☐☐,☐☐☐.☐☐	Loss ☐
Inward rollover amounts	**P**	$ ☐☐,☐☐☐,☐☐☐.☐☐	
Outward rollover amounts	**Q**	$ ☐☐,☐☐☐,☐☐☐.☐☐	
Benefit payments and code	**R**	$ ☐☐,☐☐☐,☐☐☐.☐☐	Code ☐
CLOSING ACCOUNT BALANCE	**S**	$ ☐☐,☐☐☐,☐☐☐.☐☐	

Section G: **Supplementary member information**

Use this section for:
- deceased members
- members in excess of the four-member SMSF limit at **30 June 2008**.

MEMBER 5

Title: Mr ☐ Mrs ☐ Miss ☐ Ms ☐ Other ☐☐☐☐☐☐☐☐☐☐☐☐☐

Family name

First given name

Other given names

Member's TFN ☐☐☐ ☐☐☐ ☐☐☐ **Date of birth** Day ☐☐ / Month ☐☐ / Year ☐☐☐☐

If deceased, date of death Day ☐☐ / Month ☐☐ / Year ☐☐☐☐

Contributions

Employer contributions	**A**	$ ☐,☐☐☐,☐☐☐.☐☐
ABN of principal employer	**A1**	☐☐ ☐☐☐ ☐☐☐ ☐☐☐
Personal contributions	**B**	$ ☐,☐☐☐,☐☐☐.☐☐
CGT small business retirement exemption	**C**	$ ☐,☐☐☐,☐☐☐.☐☐
CGT small business 15-year exemption amount	**D**	$ ☐,☐☐☐,☐☐☐.☐☐
Personal injury election	**E**	$ ☐,☐☐☐,☐☐☐.☐☐
Spouse and child contributions	**F**	$ ☐,☐☐☐,☐☐☐.☐☐
Other family and friend contributions	**G**	$ ☐,☐☐☐,☐☐☐.☐☐
Directed termination (taxable component) payments	**H**	$ ☐,☐☐☐,☐☐☐.☐☐
Assessable foreign superannuation fund amount	**I**	$ ☐,☐☐☐,☐☐☐.☐☐
Non-assessable foreign superannuation fund amount	**J**	$ ☐,☐☐☐,☐☐☐.☐☐
Transfer from reserve: assessable amount	**K**	$ ☐,☐☐☐,☐☐☐.☐☐
Transfer from reserve: non-assessable amount	**L**	$ ☐,☐☐☐,☐☐☐.☐☐
Any other contributions (including Super Co-contributions)	**M**	$ ☐,☐☐☐,☐☐☐.☐☐
TOTAL CONTRIBUTIONS	**N**	$ ☐,☐☐☐,☐☐☐.☐☐

Other transactions

Allocated earnings or losses	**O**	$ ☐☐,☐☐☐,☐☐☐.☐☐	Loss ☐
Inward rollover amounts	**P**	$ ☐☐,☐☐☐,☐☐☐.☐☐	
Outward rollover amounts	**Q**	$ ☐☐,☐☐☐,☐☐☐.☐☐	
Benefit payments and code	**R**	$ ☐☐,☐☐☐,☐☐☐.☐☐	Code ☐
CLOSING ACCOUNT BALANCE	**S**	$ ☐☐,☐☐☐,☐☐☐.☐☐	

Use this section for:
- deceased members
- members in excess of the four-member SMSF limit at **30 June 2008**.

MEMBER 6

Title: Mr ☐ Mrs ☐ Miss ☐ Ms ☐ Other ☐☐☐☐☐☐☐☐☐☐☐☐☐

Family name

First given name

Other given names

Member's TFN ☐☐☐ ☐☐☐ ☐☐☐

Date of birth Day ☐☐ / Month ☐☐ / Year ☐☐☐☐

If deceased, date of death Day ☐☐ / Month ☐☐ / Year ☐☐☐☐

Contributions

Employer contributions	**A**	$ ☐,☐☐☐,☐☐☐.☐☐
ABN of principal employer	**A1**	☐☐ ☐☐☐ ☐☐☐ ☐☐☐
Personal contributions	**B**	$ ☐,☐☐☐,☐☐☐.☐☐
CGT small business retirement exemption	**C**	$ ☐,☐☐☐,☐☐☐.☐☐
CGT small business 15-year exemption amount	**D**	$ ☐,☐☐☐,☐☐☐.☐☐
Personal injury election	**E**	$ ☐,☐☐☐,☐☐☐.☐☐
Spouse and child contributions	**F**	$ ☐,☐☐☐,☐☐☐.☐☐
Other family and friend contributions	**G**	$ ☐,☐☐☐,☐☐☐.☐☐
Directed termination (taxable component) payments	**H**	$ ☐,☐☐☐,☐☐☐.☐☐
Assessable foreign superannuation fund amount	**I**	$ ☐,☐☐☐,☐☐☐.☐☐
Non-assessable foreign superannuation fund amount	**J**	$ ☐,☐☐☐,☐☐☐.☐☐
Transfer from reserve: assessable amount	**K**	$ ☐,☐☐☐,☐☐☐.☐☐
Transfer from reserve: non-assessable amount	**L**	$ ☐,☐☐☐,☐☐☐.☐☐
Any other contributions (including Super Co-contributions)	**M**	$ ☐,☐☐☐,☐☐☐.☐☐
TOTAL CONTRIBUTIONS	**N**	$ ☐,☐☐☐,☐☐☐.☐☐

Other transactions

Allocated earnings or losses	**O**	$ ☐☐,☐☐☐,☐☐☐.☐☐	Loss ☐
Inward rollover amounts	**P**	$ ☐☐,☐☐☐,☐☐☐.☐☐	
Outward rollover amounts	**Q**	$ ☐☐,☐☐☐,☐☐☐.☐☐	
Benefit payments and code	**R**	$ ☐☐,☐☐☐,☐☐☐.☐☐	Code ☐
CLOSING ACCOUNT BALANCE	**S**	$ ☐☐,☐☐☐,☐☐☐.☐☐	

If additional members need to be reported in **Section G: Supplementary member information** copy this page and attach to the annual return. **DO NOT USE STAPLES**.

Section H: **Assets and liabilities**

14 ASSETS

14a Australian managed investments

Listed trusts	**A**	$ ___,___,___.00
Unlisted trusts	**B**	$ ___,___,___.00
Insurance policy	**C**	$ ___,___,___.00
Other managed investments	**D**	$ ___,___,___.00

14b Australian direct investments

Cash and term deposits	**E**	$ ___,___,___.00
Debt securities	**F**	$ ___,___,___.00
Loans	**G**	$ ___,___,___.00
Listed shares	**H**	$ ___,___,___.00
Unlisted shares	**I**	$ ___,___,___.00
Derivatives and instalment warrants	**J**	$ ___,___,___.00
Non-residential real property	**K**	$ ___,___,___.00
Residential real property	**L**	$ ___,___,___.00
Artwork, collectibles, metal or jewels	**M**	$ ___,___,___.00
Other assets	**O**	$ ___,___,___.00

14c Overseas direct investments

Overseas shares	**P**	$ ___,___,___.00
Overseas non-residential real property	**Q**	$ ___,___,___.00
Overseas residential real property	**R**	$ ___,___,___.00
Overseas managed investments	**S**	$ ___,___,___.00
Other overseas assets	**T**	$ ___,___,___.00
TOTAL AUSTRALIAN AND OVERSEAS ASSETS	**U**	$ ___,___,___.00

15 LIABILITIES

Borrowings	**V**	$ ___,___,___.00
Total member closing account balances (total of all **CLOSING ACCOUNT BALANCE**s from Sections F and G)	**W**	$ ___,___,___.00
Reserve accounts	**X**	$ ___,___,___.00
Other liabilities	**Y**	$ ___,___,___.00
TOTAL LIABILITIES	**Z**	$ ___,___,___.00

Section I: **Regulatory information**

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 ☐	$ ☐,☐☐☐,☐☐☐·☒
Did the SMSF hold in-house assets at any time during the year that exceeded 5% of total assets?	**B**	No ☐	Yes ☐	
Did the SMSF hold an investment in a related party at any time during the year (excluding in-house assets)?	**C**	No ☐	Yes ☐	$ ☐,☐☐☐,☐☐☐·☒
Did the SMSF acquire any assets (other than exempt assets) from related parties?	**D**	No ☐	Yes ☐	$ ☐,☐☐☐,☐☐☐·☒

Other regulatory questions

Did the SMSF lend money or provide financial assistance to a member or relative of a member of the fund?	**E**	No ☐	Yes ☐	
Did the SMSF receive *in specie* contributions during the year?	**F**	No ☐	Yes ☐	$ ☐,☐☐☐,☐☐☐·☒
Did the SMSF make and maintain all investments on an arm's length basis?	**G**	No ☐	Yes ☐	
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?	**I**	No ☐	Yes ☐	
Did the SMSF provide money to members without a condition of release being met?	**J**	No ☐	Yes ☐	
Did trustees of the fund receive any remuneration for their services as a trustee?	**K**	No ☐	Yes ☐	
Are any trustees or directors currently disqualified persons as defined by SISA?	**L**	No ☐	Yes ☐	
Are all SMSF assets appropriately documented as owned by the fund?	**M**	No ☐	Yes ☐	
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, accountant or financial advisor or administrator?	**O**	No ☐	Yes ☐	

Section J: **Other information**

Forestry managed investment schemes

	Code	Year	Number
Product or private ruling information	**G** ☐☐	**H** ☐☐☐☐ /	**I** ☐☐☐☐☐☐

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 2007–08 income year, write **2008**). **A** ☐☐☐☐

If revoking or varying a family trust election, print **R** for revoke or print **V** for variation, and complete and attach the *Family trust election, revocation or variation 2008.* **B** ☐

Interposed entity election status

If the trust or fund has made, or is making, one or more interposed entity elections, write the four-digit **income year specified** of the earliest election (for example, for the 2007–08 income year, write **2008**). **C** ☐☐☐☐

If revoking an interposed entity election, print **R**, and complete and attach the *Interposed entity election or revocation 2008*. **D** ☐

Section K: **Declarations**

Penalties may be imposed for false or misleading information in addition to penalties relating to any tax shortfalls.

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 also authorise the Tax Office to make any tax refunds to the nominated bank account (if applicable).

Authorised trustee's or director'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

Email address

Non-individual trustee name (if applicable)

ABN of non-individual trustee

Time taken to prepare and complete this annual return Hrs

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 2008* 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

Family name

First given name

Other given names

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**

IN-CONFIDENCE – when completed