

## Fund income tax return

2017

**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 2017* (NAT 71226).

**!** The *Fund income tax instructions 2017* (NAT 71605) (the instructions) can assist you to complete this tax return.

Specify period if part year or approved substitute period.  Day  Month  Year to  Day  Month  Year

**Section A: Fund information****1 Tax file number (TFN)** 

**>** 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**
  
  
 Suburb/town  State/territory  Postcode 
**5 Tax return status**

Is this an amendment to the fund's 2017 tax return? No  Yes

**6 Trustee details**

Non-individual 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.)

BSB number (must be six digits)  Account number

Account name

**8 Status of fund or trust**

Type of fund or trust – Print  in one box only.

Small APRA fund **A**  Retail fund **B**  Industry fund **C**  Corporate fund **D**  Eligible rollover fund **E**

Approved deposit fund **F**  Pooled superannuation trust **G**  Public sector fund **H**  Non-regulated fund **I**

Australian superannuation fund **J** No  Yes  Fund benefit structure **K**  Code  Number of members **L**

Date of establishment **M**  Significant global entity **N**

**Sensitive** (when completed)

Taxpayer/entity name:

RN

TFN

**9 Was the fund wound up during the income year?** No  Yes

If yes, provide the date on which the fund was wound up

Day Month Year

**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 2017*.

Have you applied an exemption or rollover?

**M** No  Yes

Code

Net capital gain **A** \$  -00

Gross rent and other leasing and hiring income **B** \$  -00

Gross interest **C** \$  -00

Forestry managed investment scheme income **X** \$  -00

Gross foreign income	<b>D1</b> \$ <input type="text"/> -00	Net foreign income	<b>D</b> \$ <input type="text"/> -00	Loss <input type="checkbox"/>
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Australian franking credits from a New Zealand company **E** \$  -00

Transfers from foreign funds **F** \$  -00 Number

Gross payments where ABN not quoted **H** \$  -00

Gross distribution from partnerships **I** \$  -00 Loss

\*Unfranked dividend amount **J** \$  -00

\*Franked dividend amount **K** \$  -00

\*Dividend franking credit **L** \$  -00

\*Trust distributions unfranked amount **N** \$  -00

\*Trust distributions franked amount **O** \$  -00

\*Trust distributions franking credit **P** \$  -00

\*Trust distributions other amounts **Q** \$  -00

Calculation of assessable contributions	
Assessable employer contributions	<b>R1</b> \$ <input type="text"/> -00
plus Assessable personal contributions	<b>R2</b> \$ <input type="text"/> -00
plus <b>**No-TFN-quoted contributions</b>	<b>R3</b> \$ <input type="text"/> -00
<i>(an amount must be included even if it is zero)</i>	
less Contributions excluded by trustee	<b>R4</b> \$ <input type="text"/> -00
less Pre 1 July 1988 funding credits	<b>R5</b> \$ <input type="text"/> -00
less Transfer of liability to life insurance company or PST	<b>R6</b> \$ <input type="text"/> -00
<b>Assessable contributions</b> <i>(R1 plus R2 plus R3 less R4 less R5 less R6)</i>	<b>R</b> \$ <input type="text"/> -00

Foreign exchange gains **G** \$  -00

Other income **S** \$  -00 Code

\*Assessable income due to changed tax status of fund **T** \$  -00

Net non-arm's length income (subject to 47% tax rate) **U** \$  -00

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

<b>GROSS INCOME</b> <i>(Sum of labels A to U)</i>	<b>W</b> \$ <input type="text"/> -00	Loss <input type="checkbox"/>
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Exempt current pension income **Y** \$  -00

<b>TOTAL ASSESSABLE INCOME</b> <i>(W less Y)</i>	<b>V</b> \$ <input type="text"/> -00	Loss <input type="checkbox"/>
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Taxpayer/entity name:

Fund's tax file number (TFN)

**Section C: Deductions****11 Deductions**

Interest expenses within Australia **A** \$  -00

Interest expenses overseas **B** \$  -00

Salary and wages **C** \$  -00

Capital works deductions **D** \$  -00

Deduction for decline in value of depreciating assets **E** \$  -00

Death or disability premiums **F** \$  -00

Death benefit increase **G** \$  -00

Investment expenses **I** \$  -00

Management expenses **J** \$  -00

Administration expenses **Q** \$  -00

Forestry managed investment scheme deduction **U** \$  -00

Foreign exchange losses **R** \$  -00

Other deductions **L** \$  -00 Code

Tax losses deducted **M** \$  -00

**TOTAL DEDUCTIONS N** \$  -00

**#TAXABLE INCOME OR LOSS** **O** \$  -00 Loss   
 (TOTAL ASSESSABLE INCOME *less* TOTAL DEDUCTIONS)

#This is a mandatory label.

Taxpayer/entity name:

## 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 tax return instructions 2017* on how to complete the calculation statement.

#Taxable income **A** \$  -00

(an amount must be included even if it is zero)

#Tax on taxable income **T1** \$ 

(an amount must be included even if it is zero)

#Tax on  
no-TFN-quoted  
contributions **J** \$ 

(an amount must be included even if it is zero)

Gross tax **B** \$ 

(T1 plus J)

Non-refundable non-carry forward tax offsets

**C** \$ 

(C1 plus C2)

Foreign income tax offset

**C1** \$ 

Rebates and tax offsets

**C2** \$ Early stage venture capital  
limited partnership tax offset**D1** \$ 

Early stage investor tax offset

**D2** \$ SUBTOTAL 1 **T2** \$ 

(B less C – cannot be less than zero)

Non-refundable carry forward tax offsets

**D** \$ 

(D1 plus D2)

Complying fund's franking credits tax offset

**E1** \$ 

No-TFN tax offset

**E2** \$ 

National rental affordability scheme tax offset

**E3** \$ 

Exploration credit tax offset

**E4** \$ SUBTOTAL 2 **T3** \$ 

(T2 less D – cannot be less than zero)

Refundable tax offsets

**E** \$ 

(E1 plus E2 plus E3 plus E4)

#TAX  
PAYABLE **T5** \$ 

(T3 less E – cannot be less than zero)

Credit for interest on early payments –  
amount of interest**H1** \$ Credit for tax withheld – foreign resident  
withholding (excluding capital gains)**H2** \$ Credit for tax withheld – where ABN  
or TFN not quoted (non-individual)**H3** \$ Credit for TFN amounts withheld from  
payments from closely held trusts**H5** \$ 

Credit for interest on no-TFN tax offset

**H6** \$ Credit for foreign resident capital gains  
withholding amounts**H8** \$ 

Section 102AAM interest charge

**G** \$ 

Eligible credits

**H** \$ 

(H1 plus H2 plus H3 plus H5 plus H6 plus H8)

#Tax offset refunds

(Remainder of refundable tax offsets)

**I** \$ 

(unused amount from label E – an amount must be included even if it is zero)

PAYG instalments raised

**K** \$ 

AMOUNT DUE OR REFUNDABLE

A positive amount at **S** is what you owe, while a negative amount is refundable to you.**S** \$ 

(T5 plus G less H less I less K)

#This is a  
mandatory label.

Taxpayer/entity name:

RN

TFN

## Section E: Losses

### 13 Losses

**!** If total loss is greater than \$100,000, complete and attach a *Losses schedule 2017*.

Tax losses carried forward to later income years **U** \$  -00

Net capital losses carried forward to later income years **V** \$  -00

## Section F: Other information

### 14 Foreign income and net assets

Attributed foreign income Listed country **A** \$  -00

Unlisted country **C** \$  -00

Net assets available to pay benefits **F** \$  -00

### 15 Transfer of liabilities to life insurance company or pooled superannuation trust

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, provide details of the two transferees that have the greatest market value.

Name

ABN

Amount **B** \$  -00 Market value **C** \$  -00

Name

ABN

Amount **D** \$  -00 Market value **E** \$  -00

### Investment in any other life insurance policies or pooled superannuation trusts

Total market value of these investments **F** \$  -00

### 16 Taxation of financial arrangements (TOFA)

Total TOFA gains **H** \$  -00

Total TOFA losses **I** \$  -00

Taxpayer/entity name:

**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.

**A** No  Yes

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?

**B** No  Yes

**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?

**D** No  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**

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?

**E** No  Yes

**18 Other transactions****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 income of the recipient under section 290-100?

**D** No  Yes

Taxpayer/entity name:

RN

TFN

## Section G: Declarations

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

### Important

Before making this declaration check to ensure that all income has been disclosed and the tax return, all attached schedules and any additional documents are true and correct in every detail. If you leave labels blank, you will have specified a zero amount or the label was not applicable to you. If you are in doubt about any aspect of the tax return, place all the facts before the ATO.

### Privacy

The ATO is authorised by the *Taxation Administration Act 1953* to request the provision of tax file numbers (TFNs). We will use the TFN to identify the entity in our records. It is not an offence not to provide the TFN. However if you do not provide the TFN, the processing of this form may be delayed.

Taxation law authorises the ATO to collect information and disclose it to other government agencies. For information about your privacy go to [ato.gov.au/privacy](http://ato.gov.au/privacy)

## TRUSTEE'S, DIRECTOR'S OR PUBLIC OFFICER'S DECLARATION

### DECLARATION:

I declare that the information on this tax return, including any attached schedules and additional documentation is true and correct. I 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

Date

### Preferred trustee, director or public officer's contact details:

Title: Mr  Mrs  Miss  Ms  Other

Family name


First given name

Other given names

Phone number

Email address

Time taken to prepare and complete this tax return

 The Commissioner of Taxation, as Registrar of the Australian Business Register, may use the ABN and business details which you provide on this tax return to maintain the integrity of the register. For further information, refer to the instructions.

RN

TFN

Taxpayer/entity name:

**TAX AGENT'S DECLARATION:**

I declare that the tax return 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 the tax 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 tax returns: **Australian Taxation Office, GPO Box 9845, IN YOUR CAPITAL CITY**